

# **MEDICAL ATTENDANCE & TREATMENT RULES**

#### 1.0 <u>SCOPE</u>:

All regular employees, their families and trainees are entitled for medical treatments as per MAT rule. Deputationists from Government Departments and other organizations are entitled to medical attendance and treatment as specified in the terms and conditions of their deputation. CISF personnel, employees of schools financially assisted by the company will be dealt as per Clause 13 of MAT Rules. Act Apprentices are entitled only to emergency treatment for injuries sustained during and in the course of their duty or training, as the case may be.

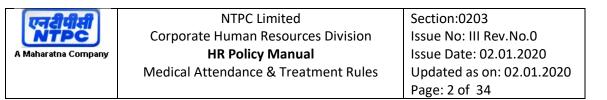
#### 2.0 **DEFINITIONS**:

- 2.1 "Authorised Medical Attendant" means the doctor appointed by the Company who is its own employee or one who is authorized under these rules to attend on the employees of the Company. Until such time as an AMA is appointed or where there is no provision for such an appointment in a place where company's Unit/Establishment may be located, the controlling officer of the employee concerned will exercise the powers of the AMA.
- **2.2 "Government Hospital"** includes a Military Hospital, a Hospital maintained by central/state govt. or a local authority and any other Hospital with which Central/State Governments have an arrangement for treatment of Government servants.

**Note:** Hospitals run by Railway administration and other Public Sector Undertakings may also be covered under the definition of "Government Hospital". Thus, medical expenses incurred in connection with treatment taken at Railway Hospitals and Hospitals run by other Public Sector companies can be reimbursed to the employees under NTPC Medical Attendance Rules.

- **2.3** "**Employee**" means whole-time employee of NTPC including deputationists and trainees under company's schemes.
- 2.4 Definition of "Family" for Medical Attendance:

The facility of Medical Attendance & Treatment shall be restricted only for self, spouse (only one), two surviving children below 25 years in the case of unmarried sons and up to 30 years in the case unmarried daughters and parents, subject to family members being dependent on the employee. The restriction regarding numbers of children shall not apply in respect of employees who are availing the facility of Medical Attendance & Treatment for existing numbers of children as on 06.07.2000 in case of executives, as on 02.03.2001 in case of workmen and as on 19.04.2001 in case of supervisors. However, the restriction of age shall apply to the existing children. Further, the restriction of age for dependent children will not be applicable for physically handicapped or mentally retarded children dependent on the employee.



For considering a physically handicapped/ mentally retarded child as dependent, beyond the age of 25/30 years, the following criteria are to be adopted:

- The income of such child, from all sources, to be less than Rs. 9000/- per month as in the case of other dependents.
- The employee has to provide a medical certificate from a Government hospital stating that the child is suffering from Total Permanent Disablement or is Mentally Disabled.

The Parents and children except physically handicapped and mentally retarded children will be considered wholly dependent on an employee only if the monthly income of the parents or the combined income of both parents (if both are alive) or the child does not exceed Rs. 9000/- per month. For determining the dependency of parent, pension income shall not be considered in the income ceiling of Rs. 9000/-.

Female employees shall have the option to declare their parents-in-law as family members, in lieu of their parents. Option exercised by a female employee in this regard may be changed only once during their entire period of service with the company.

- 2.5 "Medical Attendance" means attendance in hospital or at the residence of the employee including such pathological, bacteriological, radiological or other methods of examination for the purpose of diagnosis as are available at the company's Hospitals or failing that in any Government hospital/laboratory / any private hospital/laboratory and are considered necessary by the AMA and such consultation with a specialist or other Medical Officer/Sr. Medical Officer-in-charge to such extent and in such manner, within India as the specialist or Medical Officer, may in consultation with CMO/ ACMO-in-Charge determine.
- **2.6 "Patient"** means an employee or a member of his family to whom these rules apply and such others as are provided for in these rules and who require medical attention.
- 2.7 "Treatment" means the use of all medical and surgical facilities essential for the recovery or for prevention of deterioration in the condition of the patient. In the case of female employees and families of male employees, treatment includes confinement as well as pre-natal and post-natal treatment at the hospital of the Company, at a Government Hospital/ Maternity Centre or in any private hospital.
- **2.8** "Health Card" means a card issued to each employee and his/her dependants, PRMS beneficiaries containing details like Name, (Ex) Employee No., Photograph, Date of Birth, Finger prints and other details as prescribed by company from time to time. It is used to help establish the identity of the employee and his/her dependant for availing treatment in an empanelled hospital of the company.
- **2.9 "Notified Hospital"** means a hospital or investigation centre/dispensary/maternity home, empanelled by the Company for medical treatment or investigations as per the applicable rules/guidelines.
- 2.10 "Metro Cities / NCR Region": All 'X' class cities as per government classification for the purpose of HRA. However, in NCR region, for treatment taken at Noida, Greater Noida, Ghaziabad, Faridabad and Gurgaon, reimbursement shall be made at the rate applicable for Delhi.



#### 3.0 TREATMENT AT PLACES WHERE COMPANY DISPENSARIES / HOSPITALS EXIST:

- **3.1** All employees and their families are entitled to free medical attendance and treatment in NTPC dispensary/ hospital. In the case of severe illness, Company's ambulance van can be utilized at the discretion of AMA for bringing the patient to the dispensary/ hospital. Patients will not ordinarily be treated at their residence except in the case of acute disease or when the AMA considers movement of the patient injurious to his recovery. Patients requiring hospitalization will be admitted to the Company's hospital and will be entitled to the following facilities at Company's expenses:
  - i. Use of all medical and surgical facilities available at the hospital.
  - **ii.** The employment of such pathological, bacteriological, radiological or other methods as is considered necessary by the AMA.
  - **iii.** Supply of such medicines, vaccines, sera or other therapeutic substances as are ordinarily available in the hospital. Cost of medicines, etc. prescribed by the AMA but not available at the hospital will be reimbursed.
  - iv. Such consultations with a specialist as the AMA may consider necessary.
  - **v.** Such accommodation and such nursing as are ordinarily provided at the hospital to the patients.

#### 4.0 TREATMENT AT PLACES WHERE COMPANY DISPENSARIES / HOSPITALS DO NOT EXIST:

#### 4.1 OUT PATIENT TREATMENT:

**4.1.1** Employees may receive medical attendance and treatment from private registered Medical practitioners of their choice and actual fees charged by the Doctors will be reimbursed subject to the following limits:

CONSULTATION CHARGES (for the Clinics)		
	Metro Cities & NCR region	Others
MBBS/PG	Rs. 400/- (each consultation)	Rs. 300/- (each consultation)
DIPLOMA		
Specialists	Rs. 600/- (each consultation)	Rs. 500/- (each consultation)
MD/MS/DNB		
Super Specialists	Rs. 800/- (each consultation)	Rs. 600/- (each consultation)
(DM/Mch)		

#### Note:

- i. For visits between 10.00 PM and 6.00 AM, the charges will be 1.5 times the normal charges.
- ii. For outpatient treatment obtained in notified hospitals, the consultation charges as per agreement with notified hospital concerned shall be reimbursed.
- **4.1.2** Any employee can directly consult specialist / super specialist, if required.



# 4.2 INDOOR TREATMENT:

**4.2.1 (I)** In cases requiring hospitalization, the patient may report to any empanelled/ notified hospital of the company with his/her Health Card. Admission will be made by the Notified/ Empanelled Hospital after authentication of the patient by Health Card and Biometric verification. Employees and their dependants must necessarily go through the set procedure before admission for treatment. No admission slip shall be issued separately by the AMA. In case of network problems, power failure, problems in central server, incapacitation, injury to the hand, newborn child, etc., employee data shall be captured manually.

In case of on-site accidents and emergencies / critical cases like heart attack etc., the company shall provide for transportation of the patient to an empanelled hospital.

**4.2.1 (II)** During the course of indoor treatment at empanelled/notified/government hospital, actual charges in respect of medicines/ laboratory tests and investigations/ operation charges, etc. will be borne by the company. However, the employees shall be required to bear 1% of cost in case of IPD treatment. Charges for the diet/personal/non-admissible expenses, if any, will, however, be borne by the employee.

PROCEDURES TO BE CONSIDERED AS INDOOR TREATMENT FOR DIRECT PAYMENT ON HEALTH CARD: For certain Radiological investigations (like PET CT/PET MRI), Endoscopy, ERCP, Lithotripsy, Laser treatment (non-cosmetic), Thallium Scan, Colour Doppler, Oxygen Therapy, Radiation, Chemotherapy, Dialysis, EECP (Enhanced External Counter Pulsation-Package), CT/MRI/USG-guided FNAC/ Biopsy, MRI (Plain & Contrast), Colposcopy with/without Biopsy, Hysteroscopy/ Cystoscopy, CT Urethral Dilatation, Ophthalmic Surgery (Intraocular/ Angiography, Extraocular Surgeries) & Intravitreal Injection, Intra Articular Injections, Uroflowmetry, etc., taken in day care shall be treated as indoor treatment and procedure laid down for indoor treatment shall be applicable. Also post organ follow immunological investigations transplant up done in empanelled/government hospitals shall be allowed to be part of health card day care procedures. Any other such procedure shall be notified by CMO, CC from time to time.

- **4.2.1 (III)** IPD Treatment can also be obtained by serving employees and their dependents from any non-empanelled / non-government hospital. In such cases, reimbursement of charges towards operations/other procedures and/or diagnostic tests, etc. will be limited to those of Holy Family Hospital or Sir Ganga Ram Hospital, whichever is lower, subject to actual.
- **4.2.1 (IV)** Accommodation entitlements in notified/empanelled hospitals will be regulated in terms of the agreement with these hospitals from time to time and may vary from hospital to hospital.
- **4.2.1 (V)** If treatment is taken in a non-notified hospital, reimbursement of actual accommodation charges may be made limited to following rates:



GRADE	Rate / day (Rs.)
W0 - W4	500
W5 - W6	750
W7 & above, all Supervisors	1250
and E0 to E2	
E3 - E5	2000
E6 - E8 (AGM)	2500
E8 (GM) & above	3000

- **4.2.2** Based on the recommendations of committee duly constituted for this purpose, hospitals will be notified by:
  - a) RED at the regions
  - b) ED (HR) subsequent to approval of D (HR) at CC.
- **4.3** Reimbursement of OPD claims for diagnostic tests/ investigations/ procedures/ treatment in non-notified hospitals preferred by the employees will be limited to the rates of Holy Family Hospital. If the rate of a particular item is not available in the Holy Family Hospital rate list, it will be regulated in accordance with the GOPD rates specified by Sir Ganga Ram Hospital. If rates are not available in either of the two, the claim to be settled based on the recommendations of CMO/ CMO, CC.
- **4.4 Injection Fee / Dressing Charges, etc.:** The doctors will be paid administering charges and the medicines will be procured from the chemists by the employees themselves. However, in emergent cases, injections can be supplied by the doctor himself from the clinic and in that case the same will be reimbursed.

Injection Fees	Rs.100/- per injection
Dressing	Rs.150/- per occasion
Stiches	Rs.100/- per stitch

#### 4.5 Guidelines applicable for empanelment of hospitals are given at Annexure-I.

**4.5.1** The abovementioned guidelines however cannot be treated as a standard or fixed for deciding the entitlement of various categories of employees. This is because the entitlements have to be based on the type of accommodation available in the respective hospitals. The entitlements therefore differ from hospital to hospital. These guidelines shall be used as a basis for working out the entitlements in various empanelled hospitals.



#### 5.0 ADMISSIBILITY OF OTHER TREATMENTS:

#### 5.1 <u>DENTAL TREATMENT</u>:

**5.1.1** Dental treatment can be obtained from any Dental Surgeon and the actual consultation fees charged by the Dental surgeon shall be reimbursed subject to the following limits:-

Type of Dentist	OPD Consultation Charges
Dental surgeons having Post Graduate	Rs. 400/- per consultation
qualification in Dental Surgery - MDS	
Dental surgeons - BDS	Rs. 300/- per consultation

## 5.1.2 Dental Treatment Charges:

Reimbursement of dental treatment cost (other than cosmetic treatment) shall be as per the rates given in <u>Annexure-II</u>. No reimbursement shall be made for cosmetic treatment. CMO, CC shall be the competent authority w.r.t. decision regarding whether a treatment is cosmetic or not.

- **5.1.3** Consultation charges and treatment charges for the items listed in Annexure-II shall be applicable to all hospitals including empanelled hospital for consistency & uniformity. The empanelment committee has to ensure this and incorporate in the schedule of charges of the empanelled hospital.
- **5.1.4** Charges for filling of teeth with gold, orthodental treatment on account of cosmetics will not be reimbursable.
- **5.1.5** Dental implant claims are to be supported with warranty stickers and the claims have to be counter signed by NTPC CMO.
- **5.1.6** Dental procedure will not be covered as cashless IPD procedure. If availed as IPD, same shall be claimed by the employee and charges as per Annexure-II shall be applicable for reimbursement. Bed, OT and anaesthesia charges will be reimbursed as per SOC.

#### 5.2 HOMEOPATHY & AYURVEDIC TREATMENT:

Employees/their dependant family members will be entitled for reimbursement of charges for treatment undertaken under Homeopathy & Ayurvedic Systems of Medicine as under:

- **5.2.1 Consultation charges:** Rs. 200/- (each consultation) (Actual consultation charges to be reimbursed if the treatment is taken in Hospital empanelled for such treatment)
- **5.2.2 Medicines:** When the Doctor supplies medicines, no separate consultation charges would be paid, reimbursement will be restricted to the amount calculated @ Rs. 60/- per day for the period of treatment, which will not exceed 30 days in any case.



In cases where the Doctor has prescribed the medicines and it is purchased from the market, the same will be reimbursed only if the medicines are admissible under the Central Govt. list of admissible medicines prescribed in Muthuswamy's Handbook (broadly in line with the guidelines issued by the Ministry of Health & Family Welfare, GOI).

For reimbursement under the Indian system of medicine i.e. Ayurveda & Homoeopathy, the qualification of the Ayurvedic & Homoeopathic doctors from whom treatment may be taken shall be 'A registered medical practitioner holding degree/ diploma in Ayurveda/Homoeopathy from a university /statutory board/council/faculty of Indian Medicines & Homoeopathy'.

# 5.3 <u>OPHTHALMIC TREATMENT</u>:

**5.3.1** Employees and members of their family can have their eyesight tested for glasses and the fees incurred for this purpose will be reimbursed.

#### 5.4 TREATMENT FOR IMMUNIZING AND PROPHYLACTIC PURPOSES:

Reimbursement of charges incurred on treatment of the employees and their families for immunizing and prophylactic purposes will be permitted only for those vaccines which are in the approved universal vaccination programme of Govt. of India or included in NTPC drug formulary policy. List of current approved vaccines are at **Annexure-III**. As and when new vaccines are included in the approved universal vaccination program of GOI, reimbursement for the same will be allowed on the advice of CMO.

- **5.4.1** Vaccinations/Inoculations, etc.: The cost of vaccinations, inoculations and injections taken by the employee and his family for prophylactic and immunizing purposes to secure health certificates under international travel regulations before commencement of such travel will be reimbursed by the Company provided the journey is undertaken at the cost of the company.
- **5.5** Reimbursement towards **Glucostrips / Glucosticks** shall be allowed to employees and their dependants limited to an annual ceiling of Rs. 4000/- in totality. There shall be no reimbursement of the cost of Glucometer.

#### 5.6 <u>IMPLANTATION OF PACE MAKER AND OTHER CARDIAC IMPLANTABLE</u> <u>DEVICES</u>:

Charges incurred towards implantation of pacemaker (including device cost), for treatment taken in other than empanelled hospitals, shall be reimbursed according to the rates charged by CGHS. Current approved CGHS rate is as per <u>Annexure-IV</u>. If the rates are revised by CGHS, the same will be applicable as and when revised.



# 5.7 INTRA OCULAR LENS:

Expenditure incurred towards Intra Ocular Lens (IOL) may be reimbursed to the employees up to a maximum of Rs. 9,000/- per lens subject to actual. In case the operation is carried out at Govt. hospital and if Govt. hospital includes cost of lens in its bill, the actual amount may be reimbursed (lens cost should not exceed Rs. 9000/-)

# 5.8 <u>Reimbursement of Low Vision Aids / Hearing Aid</u> to Employees and dependents of employees who are Visually Challenged / Hearing Impaired (On receipt of Disability Certificate from District Authority):

#### 5.8.1 Low Vision Aids:

Reimbursement towards low vision aids, dark glasses shall be made subject to a maximum of Rs. 2000/- every year.

All requests for reimbursement of cost of low vision aids shall be routed through the CMO of respective projects / stations, on recommendation of the Eye specialist of Govt. / empanelled hospital. This will be captured in ESS and would be monitored by CMO/AMA.

#### 5.8.2 Hearing Aid:

Reimbursement for behind the ear model for each ear shall be restricted to Rs. 30,000/- or actual cost whichever is lower. It may be replaced every 4 years subject to certificates of condemnation by ENT specialist. There shall be no reimbursement towards the cost of cell/ battery for the hearing aid. This will be captured in ESS and would be monitored by CMO/AMA.

**5.8.3** All requests for reimbursement of cost of hearing aid and cochlear implant shall be routed through the CMO of respective project/stations, on recommendation of the ENT specialist of Govt. / Empanelled hospital and on the basis of audiogram of the employee/dependent concerned where disability is more than 50%.

The cost of only unilateral cochlear implant including charges for implant & surgery shall be payable as per CGHS package rate. Prior permission from the CMO, CC should be obtained. No post facto approval will be accorded.

**5.9** Procedure for **neuro implant** like deep brain stimulation implant, Intra-thecal Baclofen Pump, Intra-thecal Morphine Pump and Spinal Cord Stimulators will be as per CGHS guidelines and schedule of charges.



# 5.10 BARIATRIC SURGERY:

Bariatric surgery procedures shall be allowed in respect of patients with morbid obesity as per guidelines outlined below:

#### 5.10.1 Selection Criteria:

Factor	Criteria
Weight	Body Mass Index (BMI) > 40 with no co-morbidities
Adults	Body Mass Index (BMI) >35 with obesity associated co-morbidity

#### 5.10.2 Exclusion Criteria:

Factor	Criteria
	Reversible endocrine or other disorders that can cause obesity
	Current drug or alcohol abuse
Exclusion	Uncontrolled, severe psychiatric illness
	Lack of comprehension of risks, benefits, expected outcomes,
	alternatives and lifestyle changes required with bariatric surgery

#### 5.10.3 Types of Bariatric Surgery procedures allowed:

1.	Laparoscopic Gastric Banding Surgery
2.	Laparoscopic Sleeve Gastrectomy
3.	Laparoscopic Gastric Bypass (GBP)
4.	Other cases - as per examination and recommendations of the treating specialist doctor and approved by the NTPC CMO.

**5.10.4 Hospitals/Centres approved for Bariatric Surgery:** Government hospitals/ empanelled hospital of NTPC.

#### 5.10.5 Permission for Bariatric Surgery:

Bariatric Surgery procedures are planned/elective procedures and hence not regarded as emergency procedures. Prior permission has to be obtained from the CMO as per prescribed format attached as <u>Annexure-V</u> on the basis of recommendation given by a specialist before the surgery is undertaken. No post facto approval for reimbursement shall be given.

#### 5.10.6 List of documents required for seeking permission/reimbursement:

1.	Recommendation by specialist or surgeon / Govt. GI surgeon / Empanelled hospital
2.	BMI Report
3.	Reports documenting obesity associated comorbidities should be certified by the concerned CMO
4.	Reports of tests for endocrine disorder and relevant reversible conditions that can cause obesity
5.	Performa at Annexure-V to be duly filled by the recommending specialist/ beneficiary with signature and stamp



- 5.11 **Robotic Surgery** is not reimbursable except for prostate and/or kidney cancer.
- **5.12 Reimbursement for COMBO pathological tests** (more than one pathological test and billed as package) undertaken by the employee and/or his/her dependants on the prescription of an Authorized Medical Attendant shall be allowed. Names of the tests done should be mentioned in the bill/prescription. Reimbursement for the COMBO pathological tests shall be limited to the total cost of each such test, prescribed by doctor, if done individually.

#### 6.0 REIMBURSEMENT OF ALLOPAHTIC MEDICINES, ETC:

**6.1** Cost of medicines, which are required and prescribed by consulting doctor, will be reimbursed on submission of claim as herein along with original prescription of the consulting doctor. Medicines can be obtained from any chemist/druggist including online pharmacy platform, on the prescription by the Doctors. Wherever convenient, medicines should be procured preferably from Generic Medicine Shop.

Medicines must be purchased maximum within a week of prescription date. Beyond seven days, the claim must be certified by CMO / CMO, CC.

- **6.1.1** The existing procedure of referring to Muthuswamy's Handbook (broadly in line with the guidelines issued by the Ministry of Health & Family Welfare, GOI), for reimbursement of medicines will be continued. However, medicines, which are in the list of inadmissible medicines under the reference book, may further be checked in the 'NTPC Drug formulary' and if these medicines figure there as admissible, same may be reimbursed to the employees.
- **6.1.2** The allopathic medicines which do not figure in either of the two reference books as admissible medicine (as mentioned at 6.1.1 above), but are considered essential for the treatment (duly approved by the concerned CMO or his representative) may also be reimbursed. In the absence of a CMO or his representative, the opinion of other CMO of the same Region will be taken. In case of any doubts, the opinion of CMO, CC will be final. This system will be applicable only for Allopathic treatments.
- **6.1.3** Inadmissible items which are purely Toiletries/Cosmetics, Talcum powder, Sanitary Napkins, Mouth Fresheners, Diet supplimentary items will not be reimbursed.
- **6.1.4** In addition to medicines/items laid down in the two reference books, if the treating AMA in NTPC is of the view that any particular medicine/item which may be considered as a cosmetic/toiletry, etc. as in 6.1.3 above but is essential for treatment of a patient, the name of such medicine/item should be forwarded to the Drug Formulary Committee of doctors constituted at CC for consideration and inclusion in the NTPC Drug formulary. Till such time, essentiality certificate will be provided by CMO/ his authorised representative.



- **6.2** No medicine will be supplied by the Doctors from their clinics to the patients. However, in emergent cases, where administering of any medicine is essential in the interest of ailment by the patient, the same can be supplied by the Doctors.
- **6.3** NTPC Drug Formulary is available at Corporate Intranet→Department Corporate Medical Cell→Policy & Guidelines→Drug Formulary.

Further,

- a) Prescription of NTPC Doctors on role generated through HMS or otherwise shall be reimbursed as prescribed.
- b) Claim for outside prescriptions shall be submitted to Medical Department where admissibility of prescription/ medicines shall be checked and validated by CMO or his authorized representative.
- c) Claim once passed shall not be reopened.
- **6.4** Normally the medicines may not be prescribed for more than one month at a time for Allopathic treatment. In case, the medicines have to be prescribed for more than one month, the consulting Doctor/ AMA shall record the reasons for the same. However, claims shall be submitted / reimbursed only once in the last month of the currency of the prescription period.
- **6.5** The rates of speech and occupational therapy charges shall be reimbursed as per Holy Family hospital rates. The rates not found in Holy Family hospital shall be reimbursed as per Sir Ganga Ram Hospital GOPD rates.

#### 7.0 PURCHASE OF ARTIFICIAL LIMBS / APPLIANCES:

- **7.1** Expenses incurred by the employees towards purchase/replacement/repair/ adjustment of artificial limbs/appliances for self and/or dependent family members may be reimbursed for such items as specified at <u>Annexure-VI</u>.
- **7.2** The reimbursement, as above, shall be made to the concerned employee on the recommendations of and consultation with the AMA.
- **7.3** Reimbursement towards expenses incurred on purchase of artificial limbs/ appliances will be regulated as under:

Govt. Hospitals: Actual charges to be reimbursed.

**Non-Govt. Hospitals / Notified Hospitals:** Reimbursement subject to rate-list of CGHS. In case of revision of the rates from CGHS, the same shall be applicable instantly.

**7.4** The appliances will be allowed for re-issue on completion of 5 years in case of adults and 2 years in the case of children (up to the age of 12 years) except wheel chair. Wheel chair will be reissued after 5 years irrespective of age. This will be captured in ESS and would be monitored by CMO/AMA.



- **7.5** The reimbursement of expenditure towards purchase of BIPAP/CPAP Machine shall be regulated as per the following terms & conditions:
  - (i) The ceiling rates for BIPAP Machine & Oxygen Concentrator shall be Rs. 1,00,000/- (Rs. One Lakh only) each and for CPAP Machine shall be Rs. 50,000/- (Rs. Fifty Thousand only).
  - (ii) The reimbursement of BIPAP/ CPAP Machine to a patient may be considered for approval by the HOP at Projects, RHOHR/RED at RHQs and GM (HR) at CC, on recommendation of the concerned CMO/RMO on case to case basis.
  - (iii) The advice of a Pulmonologist/ Neurologist and the report of the Nocturnal Polysomnography have to be seen by the CMO/RMO before recommending reimbursement of BIPAP/ CPAP Machine.
  - (iv) The approval for reimbursement of BIPAP/ CPAP Machine is required to be obtained only once in entire life.
  - (v) The request for reimbursement may be submitted along with the details of the model of the machine prescribed by Pulmonologist/ Neurologist/ ENT Surgeon of any empanelled Hospital/ Govt. Hospital.
  - (vi) The responsibility & maintenance of the machine would lie with the employee.
  - (vii) These machines can be replaced after a period of 5 years subject to certificate by Service Engineer regarding the unserviceability of the machine and the claim for the new machine shall be reimbursable accordingly. This will be captured in ESS and would be monitored by CMO/AMA.

# 8.0 **PROCEDURE FOR REIMBURSEMENT OF MEDICAL EXPENSES**:

- **8.1** The employee should make all payments of medical expenses (other than when IPD treatment availed in an empanelled hospital using Health Card) in the first instance. Claims for reimbursement of medical expenses should subsequently be submitted in the prescribed claim form duly supported by the original prescription, bills, cash receipts and cash memos.
- 8.2 The Medical claims should be submitted by the employee concerned through ESS.
  - **8.2.1** The number of claims to be preferred by an employee should not exceed two in a calendar month.
- **8.3** Claims for reimbursement of medical expenses should be submitted within four months from the date of consultation. However, the time barred claims may be admitted beyond four months but within one year from the date of consultation, with the approval of controlling officer provided that the controlling officer is satisfied in each case that the delay in submission of claims is for reasons beyond the control of employees.



#### 9.0 <u>MEDICAL TREATMENT IN RESPECT OF EMPLOYEES / THEIR FAMILIES IN SPECIAL</u> <u>CIRCUMSTANCES</u>:

**9.1** In respect of employees sent abroad for training/short term assignments (up to 90 days), Medical Insurance Policy as currently in practice shall continue to be obtained. The deductibles of first US \$100 for hospitalization cases, in each case, not being payable under the insurance policy and being borne by the employee shall be reimbursed by the Company subject to the Medical Attendance and Treatment Rules. The said claims would be settled based on the production of bills, final settlement certificate from the Insurance Company, payment receipts, etc.

Any amount paid by the employee (if not paid by the Insurance Company) towards OPD treatment shall be reimbursed as per the Medical Attendance & Treatment Rules of the Company subject to production of the original prescriptions, bills and payment receipts. However, if this amount is expected to exceed US\$100, prior approval of the Competent Authority is required. The Competent Authority for this purpose shall be Director (HR).

All reimbursement of the above expenditure shall be made in Indian Rupees only as per the US\$ exchange rate as on the date of expenditure and subject to production of proof of the source of funding of the Foreign Exchange.

Expenses incurred towards treatment of dependants family members visiting the employee at the place of his assignment / training abroad shall be borne by the employee.

**9.2** The families of employees who are deputed/posted by the company abroad for training or any other purpose will continue to be entitled for free medical attendance and treatment at the cost of the Company in terms of these rules if they do not accompany the employee abroad, irrespective of the place they may be residing at in India.

#### 10.0 PROCEDURE FOR IPD BILL SETTLEMENT:

- **10.1** In case of IPD treatment at Notified/Empanelled Hospitals using Health Card, the bills shall be processed at the concerned Regional HQs/SSC, where the employee and/or his/her dependents have taken treatment and subsequently the same will be debited to the Project/Station/Office concerned.
- **10.2** The RMO/Corporate Medical Cell shall monitor & review the IPD cases admitted in their Region/CC and ensure that RMO/Corporate Medical Cell submits report to RED/ ED (HR), as and when required, about the expenditure, reasons for continuation of treatment etc. RED/ ED (HR) shall review and monitor to ensure that there is no misuse of the facility. A monthly Report may be sent to Corporate Medical Cell by Regional Medical Cell indicating the IPD cases details in their jurisdiction. Corporate Medical Cell shall extend the necessary management support required and also generate MIS and engage in continuous review of the process.

Corporate Medical Cell shall also monitor the receipt of such monthly reports and submit the consolidated report to Director (HR).

**10.3** Employees shall be required to bear 1% of cost in case of IPD treatment.



#### 11.0 **GRANT OF ADVANCE FOR MEDICAL ATTENDANCE AND TREATMENT**:

**11.1** To enable the employees initially to meet the expenditure on their own medical attendance and treatment (OPD/IPD including diagnostic tests) or that of their families, the powers to grant medical advance within India, in consultation with CMO concerned and Head of Finance at the concerned SSC or Head of Finance Concurrence at CC, as the case may, shall be as follows:

Extent of Medical Advance		Sanctioning Authority
i.	Up to Rs. 1 Lakh	HOP/BUH
ii.	Full Powers	ED/RED
iii.	For EDs/REDs	DIR(HR)

Adjustments of claims for the advance will be settled as per rules and entitlement of the employee.

- **11.2** The actual amount of advance to be granted shall be decided keeping in view the recommendations of AMA as regards the nature of the disease, likely duration of hospitalization and anticipated expenditure thereon.
- **11.3** The advance would be admissible to the employees borne on the regular establishment of the company including trainees recruited under the Company's own training schemes.
- **11.4** The amount of advance granted shall be adjusted against the medical reimbursement claims submitted by the employee for reimbursement of the expenditure, as admissible, and the balance, if any, will be recovered from the pay/other dues of the employee concerned. In case of failure to present the reimbursement claim/adjustment bill within the period of three months from the date of discharge from hospital, the entire amount of advance will be recovered in one instalment.
- **11.5** An employee desirous of availing the facility of medical advance shall apply in prescribed form. However, in case an employee's condition is such that he is unable to make the application personally and receive the payment, another employee of the company may present the application for advance on his behalf, depending upon the facts and circumstances of the case and at the discretion of the Management. The advance will be booked in the name of the applicant (employee concerned or some other employee on his behalf, as the case may be) and it shall be the responsibility of the applicant to arrange for adjustment of the advance within the stipulated period.

#### 12.0 <u>MEDICAL TREATMENT TO NON ENTITLED PERSONS/ OUTSIDERS AT DISPENSARIES/</u> <u>HOSPITAL OF THE COMPANY</u>:

**12.1** Outsider means any person who is not an employee of the company or a member of the employee's family as defined in these rules. This term will include relatives and servants of the employees, contractors, and their workmen working in the premises of the company, employees of the banks, police, post office, cooperative stores, clubs, etc. For treatment of the above categories of outsiders, the following rules shall apply:



- i. Cost to be recovered from non-entitled persons/outsiders at dispensaries/ hospitals of the company.
- ii. Initial Consultation will be valid for 7 days, subsequent consultation will be treated as new consultation.
- iii. Cost of medicines prescribed, if dispensed from NTPC's hospitals/ dispensaries including dressing to be charged at par with purchase price.
- iv. Cost of all treatment rendered in hospital for inpatient including bed charges shall be charged at the rate as indicated below.
- v. The land oustees and their family as defined in NTPC R&R Policy shall be provided Outdoor and Indoor treatments in Project Hospitals. All treatment including Operation, Hospitalization, Investigation, etc., shall be provided on nominal charges as stipulated below.

Cost to be recovered from non-entitled persons/outsiders at		
dispensaries/hospitals of the company		
Item	Rates (in Rs.)	
	For PAFs	For others
First Consultation	20	100
Each Sub-Consultation	20	60
Indoor Visit per day	20	60
Emergency Consultation (After Hospital Hours)	30	150
Bed Charges per day		
(a) ICU	300	750
(b) General Ward	30	125
(c) Cabin A/C	-	750
Rates for various investigations and operative procedures would be fixed at 60% of the NSB Rates prevalent in the Holy Family Hospital, New Delhi at		

**12.2** Wherever the charges prescribed are at per day rate, the recovery at full prescribed rate for every 24 hours is to be made, the charges for a fraction of a day (24 hours) are to be calculated on the following basis:

Period	Rate
Up to 12 hours	Half the prescribed rate
More than 12 hours but up to 24 hours	Full prescribed rate

any point of time.

#### 13.0 <u>MEDICAL TREATMENT TO CISF (OTHER THAN PERSONNEL ON DEPUTATION) / NTPC</u> <u>ASSISTED SCHOOL PERSONNEL</u>:

**13.1** CISF Personnel and staff of NTPC assisted Schools may be allowed to avail of all the medical facilities as are available in the project hospital. Cost of medicine which have been prescribed by the Company Doctor and purchased from the market due to non-availability of the same in the hospital pharmacy, may however be reimbursed to CISF as per actual bill. For schools personnel, medical facilities shall be governed by site MOUs.



- **13.2** Further, CISF personnel and their dependent family members on tour/ leave / not residing either in NTPC Township or in nearby areas may avail of OPD facilities and IPD treatment either in Government hospitals or hospitals on panel of CGHS. Reimbursement shall be made at actual rate for treatment in government hospitals and at CGHS rates for treatment taken in hospitals on panel of CGHS.
- **13.3** Project/stations where there is no company hospital facility, CISF personnel may be allowed to avail OPD facilities in a notified hospital for the project / station at CGHS rates or in government hospitals at actual rates. For hospitalization, they may go to the nearby Government hospital or hospitals under CGHS Scheme where the Central Govt. employees are allowed to take treatment and reimbursement shall be made at actual rate for government hospital and at CGHS rates for CGHS empanelled hospitals.
- **13.4** For specialised treatment not available at site, CISF personnel may be referred to Govt. / panel hospital agreeing to treat at CGHS rates/ hospitals on panel of CGHS. Their accommodation entitlements would be decided based on the entitlements of their equivalent rank in CGHS rates.

#### 14.0 RULES FOR AMBULANCE SERVICE:

To be governed as per Clinical Establishment Act / Government Guidelines with permission of CMO / I/C of Hospital / AMA.

**14.1** Ambulance service will be provided free of charge to emergency cases eligible for free treatment requiring admission as in-patients and in case of accident on site and critical cases like heart attacks, etc. only and as approved by BUH/Head of Project.

In places where NTPC Hospital are not available, Ambulance charges for emergency cases availed from Govt./empanelled hospitals/others shall be reimbursed with the approval of HOP at Station, RED/RHOHR for Regional Headquarters, ED(HR) at CC, on recommendation of the concerned CMO/RMO.

- **14.2** In case of patients eligible for free treatment other than those requiring admission as in patients, ambulance service be provided free of charge if in the opinion of the attending doctor, it is necessary to transport the patient by an ambulance on medical grounds, such as inability to walk on account of fracture in the leg or blindness or very old age or mental illness, etc.
- **14.3** If, after arrival at the hospital, the doctor finds that the use of the ambulance was not warranted on any of the grounds mentioned in paras above, the ambulance charges will be recovered from the employee/beneficiary.
- **14.4** Ambulance service will not be made available for ferrying patients from and to their home except in cases described above.
- **14.5** Requests for ambulance to bring non-entitled cases who are residing within the township will be complied with subject to availability of the ambulance and approval by CMO.



- **14.6** In case of accidents while on duty in respect of non-entitled cases, ambulance may be provided free of charge subject to availability and at the approval of HOP/BUH.
- **14.7** Ambulance/ departmental vehicle may be provided subject to availability for critical treatments like dialysis and chemotherapy. The same may be provided for any other critical illness on the recommendation of CMO with the approval of BUH. However there will be no reimbursement towards own/hired vehicle utilization.
- **14.8** The user of the ambulance will ensure that:
  - i. for incoming cases, the Doctor or the Nurse of the Maternity Ward or the Casualty certifies the use of the ambulance as free or paid; and
  - ii. for outgoing cases, an ambulance slip/ advise issued by the doctor treating the cases should be obtained and presented to the casualty nurse.
- **14.9** The ambulance will not be used for transporting dead bodies.
- **14.10** The charges for ambulance trip will be as fixed by the Management from time to time.
- **14.11** Any matter regarding the use of the ambulance not covered by these rules will be referred to the BUH.
- **14.12** Ambulance rates for non-entitled patients: In extreme situations, if the services of Ambulance has been provided to non-entitled patients, charges @ Rs.15/- per k.m. may be charged for BLS Ambulance, @ Rs.20/- per k.m. for ALS ambulance and @ Rs.25/- per k.m. for ICU ambulance shall be taken for distance travelled on to and fro basis, with permission of BUH.
- **14.13** Charges from Land oustees/PAFs\*: In case of land-oustees availing the services of Ambulance, they will be charged at the rate of 20% of the ambulance charges for a distance up to 50 K.M (to and fro) and at 30% for distances beyond 50 km of charges applicable for non-entitled patients. (\*Project Affected Families)

#### 15.0 MEDICAL CERTIFICATES:

The Company's Medical Officers will not issue any certificate other than what they are required to do under the Company Rules or in the Company's interest. The only exception will be that they may issue certificates for life Insurance policies and accept payment for them subject to the relevant rules, but this should not interfere with their work under the company. The rate of charges for other cases may be fixed by the company from time to time.

#### 16.0 <u>COMPULSORY MEDICAL CHECK UP OF EMPLOYEES AND SPOUSES OF</u> <u>EMPLOYEES:</u>

**16.1** Considering the immense benefits of employees' good health and the role of preventive healthcare in it, all employees and spouse of employees above 25 years of age are required to undergo medical check-up at company's cost. This check-up (Package A & B) is required to be started at 25 years and should be done once at an interval of every 05 years up to the age of 40. After the age of 40, the check-up is required to be done on yearly basis (Package A) and at an interval of every 3 years (Package B).



- **16.2** Employee including spouse of employee may get the Compulsory medical check-up done at hospitals empanelled by the company for the purpose on production of health card only. No reimbursement will be done for health check up done without smart card. Hospital may hand over all reports of health check-up in original to the employee/spouse of employee or sent to concerned CMO. List of hospital empanelled for health check-up shall be uploaded on the sanjeevani portal by the CMO, CC.
- **16.3** The health check-up is to be done only once in a calendar year by the eligible employees. However, the time gap between the two consecutive health check-ups should be at least 06 months.
- **16.4** The medical Check-up should include Package A and Package B:

**Package A:** (To be done by all at Recruitment, Age 25, 30, 35, 40 and every year thereafter till retirement)

- (a) History Taking and Medical Examination by MO
- (b) Hob, DLC, TLC, CBC, ESR
- (c) Fasting Blood Sugar/RBS
- (d) HbA1C
- (e) Lipid Profile
- (f) Sr. Uric Acid
- (g) Liver Function Test
- (h) Blood Urea, Sr. Creatinine
- (i) TSH
- (j) X-ray Chest
- (k) ECG
- (I) USG whole abdomen
- (m) Urine Routine and Microscopic
- (n) Eye, ENT, Dental Examination

Package B (Gents): (To be done at Age 25, 30, 35, 40 and every 3<sup>rd</sup> year thereafter till retirement)

- (a) TMT (Stress Echo to be done if TMT cannot be done)
- (b) Serum PSA

**Package B (Ladies)**: (To be done at Age 25, 30, 35, 40 and every 3<sup>rd</sup> year thereafter till retirement)

- (a) TMT (Stress Echo to be done if TMT cannot be done)
- (b) PAP Smear
- (c) Breast Examination (Ultrasound Breasts (Till age 35)
- (d) Mammography (at age 40 and thereafter)
- **16.5** In case of Employees posted at Project/ Stations, where Company hospitals/ dispensaries exist, medical check-up may be done by these hospitals/dispensaries, and the Health profile of the employee should be maintained and monitored by the CMO/In charge of the Hospitals/Dispensaries. However for the tests for which facility is not available at company hospital, may be done from the empaneled hospital/ at hospital where tie-up is done for the health checkup. Further, if the hospital, where tie-up is being done, is ready to conduct the entire package in the same rate as that of the part of investigations, the tie-ups can be made for the entire package in such cases.



- **16.6** In case of failure to submit details of medical examination done as per the prescribed eligibility / frequency of compulsory medical check-up, the medical reimbursement shall be withheld till the compliance is submitted and validated.
- **16.7** In order to promote good health, use of alcohol / smoking (tobacco) is discouraged in NTPC as a preventive healthcare measure. Accordingly, if a medical condition occures because of excessive use of alcohol / smoking (tobacco), the medical reimbursement in such cases may be stopped as a deterent measure.

#### 17.0 <u>GUIDELINES REGARDING TREATMENT OF INFERTILITY</u>:

- **17.1** In case of Notified Hospital: Before availing IVF treatment in an empanelled hospital, concerned CMO has to be informed about the line of treatment and prior permission must be taken before availing the IVF treatment. If no doctor is posted in the project/ unit, CMO of any other project/ unit in the region has to be informed about the line of treatment and prior permission has to be obtained. No reimbursement shall be made if treatment is taken without obtaining prior permission from the CMO concerned.
- **17.2** In case of Non-Notified Hospital: Prior permission of the concerned CMO is necessary to avail IVF treatment at a non-empanelled hospital. The line of treatment with justification, the hospital where treatment is to be taken and cost estimate should also be submitted to the CMO for consideration for permission. If there is no hospital/ CMO in the project/ unit, the details of IVF treatment proposed to be availed by an employee should be forwarded to CMO of any project/ unit in the region for consideration for permission.
- **17.3** Report of Gynaecologist with clear evidence of failure of conventional treatment before permitting IVF treatment procedure to be attached.
- **17.4** The age of the woman undergoing IVF treatment procedure should be between 21 years and 40 years.
- 17.5 The woman has to be married and living with her husband.
- **17.6** The IVF treatment procedure / any other infertility treatment will be allowed only in cases of infertility where the couple has no living issue.
- **17.7** The reimbursement would be allowed for one complete cycle only, consisting of maximum 3 attempts. The applicant has to give an undertaking that he / she has not claimed reimbursement earlier from NTPC or any other PSU / Govt. of India in the past and will not claim it in future.
- **17.8** As IVF treatment is a planned procedure, reimbursement towards this treatment will be considered only subject to prior information and permission.
- **17.9** The cost of consultation / diagnostic tests for establishing infertility, not connected with IVF, shall also be reimbursed, as per rules.
- **17.10** There will be no relaxation whatsoever in the Guidelines regarding treatment of Infertility as given above.



- **17.11** The details regarding IVF treatment facility taken by employee must be maintained in the employee records i.e., personal file / SAP for records.
- **17.12** In case of employee having living children through first marriage, no reimbursement will be made on opting for above treatment in second marriage.
- **17.13** Oocyte Donation/Embryo donation in an IVF cycle may be allowed in addition to cost of IVF @ Rs. 30,000/-.

#### 18.0 <u>MISUSE OF HEALTH CARD / MEDICAL FACILITIES BY EMPLOYEES OR THEIR</u> <u>DEPENDENTS</u>:

Any misuse of Health Card/Medical facilities by employee or his/her dependents either by way of impersonation or committing any fraud for availing the facilities extended to the employee or his/her dependents, would entail the employee for disciplinary action in terms of NTPC CDA Rules. In such cases, the Health Card shall be cancelled permanently and the records shall be deleted from the Master data. Future medical facilities i.e. OPD, IPD & PRMS shall be withdrawn from concerned employees/beneficiary/dependants.

#### 19.0 CHECKLIST FOR MEDICAL REIMBURSEMENT / CLAIM:

Before forwarding the medical bills to the Finance departments, it should be ensured that:

- i. The claim is submitted within four months from the date of consultation.
- **ii.** The claim form is signed by the employee.
- **iii.** All claims for medical expenditure like consultation, cost of medicines and investigations, etc. are to be supported by doctor's prescription.
- **iv.** The prescription is signed by the AMA with his qualification and Registration Number duly printed/ rubber stamped on the prescription slip.
- v. The prescription given by the AMA contains name of disease and period of treatment, date of consultation and also the name of patient to whom prescription is issued.
- vi. Any manual correction in the prescription should be counter signed by doctor.
- vii. If professional charges for administration of injections are claimed, medicines being supplied from Doctor's dispensary in case of emergency, the name, quantity and cost of the medicines are also furnished in the prescription. If the injection medicine is supplied free of cost, the same is specifically certified as such by the AMA.
- viii. The claim for cost of medicines is supported by cash bills from the shops having drug licence.
- **ix.** Details of laboratory tests, X-rays and physiotherapy, etc. should also be categorically mentioned in the prescription by the AMA and the claims for the same shall be duly supported by the receipts/bills.
- **x.** Claims are not admitted when treatment for venereal diseases is undergone with the private registered medical practitioner.



- **xi.** Employees are not required to submit test reports/x-ray/pathological/radiological reports, etc. with the claim.
- **xii.** The hard copies of claims are to be submitted in finance within one month from the date of entry in ESS. The claims submitted beyond one month will be rejected from the system.
- **xiii.** All medical claims shall be routed through Medical Cell in ESS.

#### 20.0 <u>GENERAL</u>:

**20.1** Director (HR), NTPC in consultation with Finance, shall be the Competent Authority for any Addition / Deletion / Amendment / Cancellation of any of these rules. In case of any doubt or dispute regarding the interpretation/application of these rules, decision of Director (HR) shall be final and binding.



#### ANNEXURE-I

#### **GUIDELINES FOR HOSPITAL EMPANELMENT**

#### 1. <u>Competent Authority</u>:

Competent Authority (CA) for empanelling hospitals will be as per clause 4.2.2 of MAT rule.

#### 2. <u>Process of empanelment</u>:

A committee comprising members as given below shall be constituted by the CA for recommending empanelment of hospitals in the Region/CC:

- i. CMO entrusted with roll of RMO / CMO, CC entrusted for bill payments.
- ii. A representative of HR from the Regional HQ / CC / Unified HR SSC.
- iii. A representative from finance from the Regional SSC / CC.

#### 3. Issues to be considered by the Committee:

- i. Only those hospitals are to be considered for empanelment which have Income Tax exemption under Section 17(2) (ii) (b) of the Income Tax Act.
- ii. It should be a multi-speciality hospital registered with the concerned statutory body/ government.
- iii. The minimum bed strength should be 100.
- iv. Should preferably be providing services to other PSUs and under CGHS.
- v. Single specialty hospitals for treatment of eye, dental and cancer centre may be considered for empanelment where the minimum bed strength may not be mandatory.
- vi. With respect to the hospital tariff, effort should be made to obtain a package tariff in respect of all procedures in line with the CGHS package rates. The package tariff is to include all components like room rent, doctor / nursing fee, tests, investigation, consumables, medicines, etc.
- vii. Where the general tariff is operated upon for reimbursement, the following aspects may also be considered:
  - a) Petty expenses are to be included in the room rates and separate bill for petty consumables is to be avoided.
  - b) Visit of doctors to rooms of the patients is to be limited to maximum of two visits per day only. Essentiality of more visits has to be certified on case to case basis by CMO/Chief of Hospital.
  - c) The hospital has to agree for installation for smart card reader and follow the requirements of Sanjeevani System of NTPC.
  - d) In case of treatment requiring long stay or the expenditure is more than Five Lakh Rupees, report of treatments is to be given to the CMO of the RHQ/ project every seven days of admission and regularly thereafter.
  - e) The empanelled hospital should also be informed that the bill should be signed by the employees/ the patient preferably on daily basis. The hospital should also need to inform that treatment given is as per agreement and requirement of the patient.



- f) All the agreements and Schedule of Charges of the empanelled hospitals should be submitted in PDF format to CMO, CC which will be uploaded on CC intranet & Sanjeevani Portal.
- g) The guidelines for grade wise entitlement ceiling in respect of accommodation of employees in empanelled hospitals may be as under:

Grade	Entitlement (Ceiling) for serving employees	
W0 to W7	Semi private/ 3 bedded room or equivalent	
W8 to W11 and all	Semi private (single cabin) 3 bedded room/ 'B' class room or	
supervisors grades	equivalent	
E0 & E1	Private room/ 'B' class room/ 3 bedded room/ 2 bedded room	
	(AC)/ non AC room or equivalent	
E2 to E5	Private AC room/ 'B' class room/ 1 bed room (AC)/ AC	
	room(second highest) or equivalent	
E6 & above	Private Deluxe room/ deluxe room/ private AC room (highest)/ 1	
	bed room (AC)/ AC room (other than deluxe) or equivalent.	

viii. The hospitals being empanelled either by Corporate or by Region will have to ensure that non-NTPC employees, like CISF, will get treatment as per CGHS rates only.

The aforementioned guidelines however cannot be treated as a standard or fixed for deciding the entitlement of various categories of employees. This is because the entitlements have to be based on the types of accommodation available in the respective hospitals. The entitlements therefore may differ from hospital to hospital. These guidelines shall be used as a basis for entitlements in various empanelled hospitals.

- I. The tariff rate agreed upon is to be kept firm for a minimum period of three years, which can be revised on mutually agreed terms and conditions.
- II. To assess the performance of empanelled hospitals, a system of taking feedback from employees may be developed by concerned region preferably an online feedback system through Sanjeevani Portal/ Mobile App. Any serious complaint given by the employees also needs to be appropriately investigated so that check and balances remain within the system.
- 4. The Hospital recommended by the above committee and approved by the CA shall be notified for medical benefits for all employees and their dependents including PRMS beneficiaries. Accommodations entitlement for PRMS beneficiaries may be separately notified by the Company from time to time.



# ANNEXURE-II

Dental Procedures	For X & Y Class Cities* Rates (Rs.)	For Z-Class Cities* Rates (Rs.)
Minor – I		
Extraction per tooth	480	400
Pericoronotomy	720	600
Apical Cuettage	1200	1000
Frenectomy	1200	1000
Biopsy	720	600
Abscess incision	420	350
Cleaning/scaling of teeth & polishing	1200	1000
Minor - II		I
Gingivectmy per segment	1440	1200
Flap/gum treatment per segment	1800	1500
Alveolectomy	960	800
Fistulectomy	720	600
Sialelithetomy	720	600
Growth removal	600	500
Fistula closure	600	500
Pulpotomy	1000	800
Root Planning		
Anterior	1200	1000
Posterior	1200	1000
Major - I		
Removal of impaction-Apectomy	4200	3500
Surgical Extraction	840	700
Root Amputation	840	700
Cystectomy	1680	1400
Sequestrectomy	1800	1500
Transplant	1800	1500
Replant	1440	1200
Implant	12000	10000
Major - II		
Fixation of fracture of Jaw	12000	10000
Fixation of fracture per segment	4800	4000
All extractions in one jaw	3000	2500
Gingivectomy full mouth	3600	3000
Tumor excision	3000	2500
Peripheral neurectomy	3000	2500



#### NTPC Limited Corporate Human Resources Division HR Policy Manual Medical Attendance & Treatment Rules

Major - III		
Total extractions	4800	4000
Segment resection of jaw	3600	3000
Ostectomy	3600	3000
Condylectomy	3600	3000
Root canal anterior	2160	1800
Root canal posterior	2400	2000
Resection of jaw	7200	6000
Crown/cap/bridge/segment-metal /ceramic (p	er unit)	1
(A) Crown Cap/Bridge/Segment-Metal (per unit)	2160	1800
(B) Crown/Cap/Bridge/Segment-Ceramic (per unit)	3360	2800
Tooth filling		
i)Amalgam	600	500
ii)Light filling/composite filling	720	600
iii)Glass lonomer filling	480	400
Desensitization		
Segment	480	400
Full mouth	1800	1500
X-Ray		
Single plate	180	150
Full mouth	840	700
OPG X-Ray	840	700
New Procedures		
Temporary filing	240	200
Complete Denture-Single Jaw	4800	4000
Complete Denture both Jaws	8400	7000
Night Guard	2160	1800
Removable Partial Denture Acrylic Bases	•	
A)Single Tooth	360	300
B)Additional Tooth	240	200

\*As per GOI classification of cities for the purpose of HRA.



#### ANNEXURE-III

# Vaccination Schedule under the UIP

# (In case of change in CGHS under Universal Immunization programme (UIP), same may be applicable in NTPC)

Vaccine	When to give	Dose
BCG	At birth or as early as possible till one year of age	0.1 ml (0.05 ml until 1 month of age)
Hepatitis B Birth dose	At birth or as early as possible within 24 hours	0.5 ml
OPV Birth dose	At birth or as early as possible within the first 15 days	2 drops
OPV 1,2 & 3	At 6 weeks, 10 weeks & 14 weeks	2 drops
IPV (inactivated Polio Vaccine)	14 weeks	0.5 ml
Pentavelant 1,2 & 3	At 6 weeks, 10 weeks & 14 weeks	0.5 ml
Rota Virus Vaccine	At 6 weeks, 10 weeks & 14 weeks	5 drops
Measles 1 <sup>st</sup> Dose	9 completed months-12 months. (give up to 5 years if not received at 9-12 months age)	0.5 ml
Vitamin A, 1 <sup>st</sup> Dose	At 9 months with measles	1 ml (1 lakh IU)
DPT 1 <sup>st</sup> booster	16-24 months	0.5 ml
OPV Booster	16-24 months	2 drops
Measles 2 <sup>nd</sup> dose	16-24 Months	0.5 ml
Vitamin A (2 <sup>nd</sup> to 9 <sup>th</sup> dose)	16 months with DPT/OPV booster, then, one dose every 6 month up to the age of 5 years)	2 ml (2 lakh IU)
DPT 2 <sup>nd</sup> Booster	5-6 years	0.5 ml
тт	10 years & 16 years	0.5 ml



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#### ANNEXURE - IV

#### Current approved CGHS Rates for Implantation of Pace Maker and other cardiac implantable devices



No: 12034/02/2014/Misc/-CGHS D.III Government of India Ministry of Health & Family Welfare Department of Health & Family Welfare CGHS(P)

Nirman Bhawan, New Delhi Dated the 11 July, 2014.

#### OFFICE MEMORANDUM

#### Sub: Ceiling Rates for reimbursement of the cost of Cardiac pacemaker, AICD, Combo-device, Rotablator and Aortic Stent Graft to beneficiaries of CGHS/CS(MA) Rules.

With reference to the above mentioned subject the undersigned is directed to draw attention to the Office Memoranda No. S-11011/7/95-CGHS(P) dated 12/6/1996 and 26-164/98-R&H/CGHS/CGHS(P) dated 22/11/1999 vide which ceiling rates and guidelines were prescribed for various types of Pacemakers, Rotablator and AICD and to state that while the ceiling rates for coronary stents have been revised from time to time separately the rates and guidelines for pacemakers. Rotablator and AICD were not revised. The matter has been examined by the Ministry and it has been decided to revise the ceiling rates (incl. of all taxes) for these devices as per the details given below:

1.	Single Chamber Cardiac Pacemaker without rate response –	Rs.34,840/-
2.	Single Chamber Cardiac Pacemaker with rate response	Rs.44,928/-
3.	Dual Chamber Cardiac Pacemaker	Rs.83,200/-
4.	Bi-Ventricular Pacemaker (CRT-P)	Rs.1,95,000/-
5.	Implantable Cardioverter Defibrillator (Single Camber) (ICD /AICD- Single Chamber)	Rs.1,75,786/-
6.	Implantable Cardioverter Defibrillator (Dual Camber) (ICD /AICD- Dual Chamber)	Rs.3,75,000/-
7.	Combo Device (CRT-D)	Rs.4,90,000/-
8.	Aortic Stent Graft (expandable, bifurcated and including delivery system)	Rs.4,40,960/-
9.	Rotablator with advancer	Rs.49,920/-
10.	Rotablator Burr	Rs.23,920/-

2. Permission for the above mentioned implants shall be granted on the basis of advice of Govt. cardiologist by CMO in-charge / Additional Director / Joint Director, CGHS in case of pensioners, former Govemors, former Vice-Presidents, ex-MPs, Freedom Fighters, etc., by Rajya Sabha / Lok Sabha Secretariat as the case may be in case of sitting Members of Parliament and by

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the concerned Ministry / Department / Organization in case of serving Government employees, serving employees and pensioners of autonomous bodies covered under CGHS. The reimbursement shall be limited to the ceiling rate or actual rate , whichever may be less.

- The Warranty terms and conditions as specified by the manufacturer shall be 3. applicable in case of replacement of a device.
- 4 In case of requests for replacement of a device, a copy of the details of the earlier device as well as a copy of terms and conditions of Warranty shall be enclosed along with the advice of Govt. specialist.
- 5. A copy of the device 'ID No Sticker' and a copy of terms of warranty shall be enclosed along with the bill of device for reimbursement.
- 6. In case of implantation of any of the devices in emergency, reimbursement shall be subject to ex-post facto approval by Addl. Director/Joint Director, CGHS of city, in consultation with experts, if necessary.
- 7. These orders are in supersession of earlier guidelines and ceiling rates issued in this regard.
- The rates shall be valid for a period of two years or till further revision, 8. whichever may be earlier.
- 9. This issues with the concurrence of Integrated Finance Division vide CD No C 756 dated 14/07/2014.

(Ravi Kant) Under Secretary to Government of India 011-23061141

#### To

- 1. All Ministries / Departments, Government of India
- Director, CGHS, Nirman Bhawan, New Delhi 2.
- 3. AD(Hq), CGHS, Bikaner House, New Delhi
- 4. Adll.DDG(HQ), CGHS, MoHFW, Nirman Bhavan, New Delhi
- 5. All Additional Directors /Joint Directors of CGHS cities outside Delhi
- 6. Additional Director (SZ)/ (CZ)/(EZ)/(NZ)/(MSD), MCTC CGHS, New Delhi
- 7. JD(HQ),/JD (Grievance)/JD(R&H), CGHS Delhi
- DDG(M)/AddI DDG(SRA), Dtc. GHS, MoHFW, Nirman Bhavan, New Delhi 8.
- 9. Rajya Sabha / Lok Sabha Secretariat, New Delhi
- 10. Registrar, Supreme Court of India, New Delhi
- 11. U.P.S.C. Dholpur House, Shahjahan Road, New Delhi.
- 12. O/o the C&AG, Bahadur Shah Zafar Marg, New Delhi
- 13. Director, DoP&PW, Lok Nayak Bhavan, Khan Market, New Delhi
- 14. PPS to Secretary (H&FW)/ Secretary (AYUSH)/ Secretary(HR)/ Secretary(AIDS Control), Ministry of Health & Family Welfare

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#### ANNEXURE-V

#### **BARIATRIC SURGERY**

Proforma to be attached with application for permission to undergo Bariatric Surgery

Emp. No.	
Emp. Name	
Designation	
Name of the Patient	
Age of the Patient	
Sex of the Patient	
Relationship with Employee	
ВМІ	
Co-morbidities	
Name of Bariatric Surgery Procedure	
Name of recommending CMO/Specialist	
Hospital	
Date	
Presence of Reversible Endocrine Disorders causing Obesity	
Controlled Drug or Alcohol Abuse	
Uncontrolled Psychiatric Illness	
Lack of comprehension of risks, benefits, expected outcomes, alternatives, and lifestyle changes required with bariatric surgery.	
Signature of Employee	
Signature of Recommending Specialist & Date	
Forwarded by CMO I/C with Signature & Date	



#### **ANNEXURE-VI**

# RATES OF REIMBURSEMENT FOR PURCHASE OF ARTIFICIAL LIMBS / APPLIANCES

#### HIGH END LOWER EXTREMITY PROSTHETICS

<u>SI.</u> <u>No.</u>	Name of Prosthesis	<u>Approved</u> <u>Rate/Price</u> (Above 12 <u>years of age)</u>	Approved Rate/Price CHILD (7- 12 Years)	<u>Approved</u> <u>Rate/Price</u> <u>CHILD</u> (0-6) Years
1	Transtibial prosthesis (Below Knee Prosthesis) (Its components include- S.S. Pylon/ tube, DYNAMIC RESPONSE FOOT, Foot Adapter, Bonded pylon / Pylon with 4 screw Adaptor, Tube Clamp Adaptor, Socket Adaptor, Sleeve Suspension, Foam cover, Covering Socks, Socket charges, etc.)	Rs.26,700/-	Not Applicable	Not Applicable
2	Trans tibial Prosthesis (Below Knee Prosthesis) with silicone / PU liner	Rs.43,700/-	Not Applicable	Not Applicable
3	Trans tibial Prosthesis (Below Knee Prosthesis) with silicone / PU liner with shuttle lock mechanism	Rs.52,200/-	Not Applicable	Not Applicable
4	Trans Femoral Prosthesis (Above Knee Prosthesis) (Its components include- S.S. Pylon/ tube, DYNAMIC FOOT, Foot Adapter, Bonded pylon /Pylon with 4 screw Adaptor (400mm) Polycentric Prosthetic Knee Joint, Socket Adaptor ,TES Belt, Foam cover, Covering Socks, Socket fabrication & fitment charges)	Rs.47,540/-	Not Applicable	Not Applicable
5	Trans Femoral Prosthesis (Above Knee Prosthesis) with Suction Valve	Rs.47540 +3800=51,340/-	Not Applicable	Not Applicable
6	Trans Femoral Prosthesis (Above Knee Prosthesis) with Silicon/ PU liner	Rs. 64,540/-	Not Applicable	Not Applicable
7	Trans Femoral Prosthesis (Above Knee Prosthesis) with Silicon/ PU liner with shuttle lock mechanism	Rs. 64540+ 8500=73,040/-	Not Applicable	Not Applicable
8	Knee Disarticulation Prosthesis (Its components include- S.S. Pylon/ tube,DYNAMIC FOOT, Foot Adapter , Bonded pylon /Pylon with 4 screw Adaptor ( 400mm) Polycentric Prosthetic Knee Joint, Socket Adaptor ,TES Belt, Foam cover, Covering Socks,Socket fabrication & fitment charges)	Rs.58,640/-	Not Applicable	Not Applicable
9	Partial Foot Prosthesis			
9(a)	Shoe filler with carbon plate	Rs.9000/-	Rs.5000/-	Rs.3000/-
9(b)	Great Toe Silicon Prosthesis	Rs.9000/-	Rs.5000/-	Rs.3000/-
9(c)	Silicone Prosthesis For Second Toe to Vth Toe	Rs.7500/-each	Rs.4000/-	Not Applicable



# UPPER EXTREMITY PROSTHETICS

<u>SI.</u> <u>No.</u>	Name of Prosthesis	Approved Rate/Price (Above 12 years of age)	Approved Rate/Price CHILD (7- 12 Years)	Approved Rate/Price <u>CHILD</u> (0-6) Years
1	Trans Radial or Below Elbow / Wrist Disarticulation Passive Prosthesis	Rs. 10000/-	Rs.5000/-	Rs.2000/-
2	Body Powered Prosthesis (Trans Radial or Below Elbow / Wrist Disarticulation) Its components includes trans radial kit and socket	Rs. 17000/-	Rs. 12000/-	Not Applicable
3	Trans Humeralor Above Elbow / Elbow Disarticulation Passive Prosthesis	Rs. 20000/-	Rs. 10000/-	Rs. 5,000/-
4	Body Powered Prosthesis (Trans Humeral or Above Elbow / Elbow Disarticulation)	Rs. 28000/-	Rs. 22000/-	Not Applicable
5	Shoulder Disarticulation Passive Prosthesis	Rs. 30000/-	Rs. 20000/-	Rs. 10,000/-
6	Shoulder Disarticulation body powered Prosthesis	Rs. 37000/-	Rs. 28000/-	Not Applicable

# HIGH END UPPER EXTREMITY PROSTHETICS (ADULT)

<u>SI.</u> <u>No</u>	Name of Prosthesis	<u>Approved</u> <u>Rate/Price</u> (Above 12 years of age)	Approved Rate/Price CHILD (7- 12 Years)	<u>Approved</u> <u>Rate/Price</u> <u>CHILD</u> (0-6) Years
1	Externally Powered below elbow or Transradial / Wrist Disarticulation prosthesis (It includes:- Hand, Lithium ion Battery (one pair) with cover,Electrodes, Wrist UnitBattery Charger & Transformer, Electrodecable, Connector blockcable Silicone Glove,Flexible inner Liner & socket, etc)	Rs.1,29,500/-	Not Applicable	Not Applicable
2	Externally Powered Trans Humeral /Elbow Disarticulation Prosthesis (It includes:Hand,Lithium ion Battery (one pair) with cover,Electrodes, Wrist Unit,Mechanical Elbow,Battery Charger &Transformer, Electrode cable, Connector block cable Silicone Glove,Flexible inner Liner andsockets, etc)	Rs.1,76,500/-	Not Applicable	Not Applicable
3	Silicone Finger Prosthesis each	Rs.7000/-	Rs.5000/-	Not Applicable
4	Silicone Thumb Prosthesis	Rs.8000/-	Rs.6000/-	Not Applicable
5	Silicone Partial Hand Prosthesis	Rs.35000/-	Rs.25000/-	Rs.10,000/-



# SPINAL ORTHOTICS

<u>SI.</u> <u>No</u>	Name of Prosthesis	<u>Approved</u> <u>Rate/Price</u> (Above 12 years of age)	<u>Approved</u> <u>Rate/Price</u> <u>CHILD (7- 12</u> <u>Years)</u>	Approved Rate/Price CHILD (0-6) Years
1	Soft / Semi rigid Cervical Collar	200/-	200/-	Not Applicable
2	Philadelphia or Two post Cervical collar /Head Cervical Orthosis (Moulded collar)	1500/-	1500/-	1200/-
3	Soft L.S. corset / Belt	700/-	500/-	Not Applicable
4	SOMI BRACE / Three Post Cervical Orthosis	2000/-	2000/-	Not Applicable
5	Four Post Cervical Orthosis	1200/-	1000/-	800/-
6	Rigid L.S.O / Chair Back Orthosis	1200/-	1000/-	Not Applicable
7	Rigid TLSO / Taylor's brace, Knight Taylor's brace, William's brace	1500/-	1200/-	1000/-
8	Hyperextension brace / ASH / CASH / JEWETT BRACE	1200/-	1000/-	Not Applicable
9	CTLSO ( MILWAUKEE BRACE)	5000/-	5000/-	Not Applicable
10	Head Cervical Thoraco Orthosis (HCTO)	1500/-	1500/-	1200/-
11	TLSO BI- Valve / Body Jacket	3000/-	3000/-	2500/-
12	UNDER ARM BRACE (Boston Brace / Miami Brace / Wilmington Brace / NYOH Brace )	3500/-	3500/-	Not Applicable
13	HALO BRACE	15000/-	Not Applicable	Not Applicable



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# LOWER EXTREMITY ORTHOTICS

<u>SI.</u> <u>No</u>	Name of Prosthesis	<u>Approved</u> <u>Rate/Price</u> (Above 12 years <u>of age)</u>	Approved Rate/Price CHILD (7- 12 Years)	<u>Approved</u> <u>Rate/Price</u> <u>CHILD</u> (0-6) Years
1	Soft Heel Pad / M.T. Pad with Insole (One Piece)	200/-	200/-	Not Applicable
2	Arch Support (Unilateral)	300/-	200/-	200/-
3	Silicone / PU arch support (One Piece)	350/-	250/-	Not Applicable
4	Medial / Lateral Wedge	100/-	100/-	100/-
5	Soft Insole cross link polymer (One Piece)	100/-	100/-	Not Applicable
6	Soft Insole (Plastozote) One Piece	300/-	200/-	Not Applicable
7	Silicone / PU Insole (One Piece)	500/-	Not Applicable	Not Applicable
8	Silicone Heel Cushion (One Piece)	300/-	Not Applicable	Not Applicable
9	Molded / customized Insole (One Piece)	600/-	500/-	400/-
10	Silicone Toe separator (One Piece)	200/-	100/-	Not Applicable
11	UCBL (Unilateral)	800/-	600/-	500/-
12	SMO without shoes (One Piece)	1200/-	1000/-	800/-
13	Flat Feet / CTEV Shoes Pair (Leather)	1200/-	800/-	700/-
14	Molded Shoe ( Leather)-one side normal & one side affected	2200/-	1600/-	Not Applicable
15	Molded Shoe (Leather)-both side affected	3000/-	2000/-	Not Applicable
16	Shoe Raise	Rs. 50 per 1/2 inch	Rs. 50 per1/2 inch	Not Applicable
17	Open toe shoes for Paraplegic one pair	1500/-	Not Applicable	Not Applicable
18	D.B. Splint with / without shoe	Not Applicable	Not Applicable	800/-
19	AFO Conventional (One Side)	2500/-	2000/-	1500/-
20	AFO Conventional (Bilateral	3500/-	2700/-	2000/-
21	Polypropylene /Customized A.F.O without shoes	1200/-	1000/-	800/-
22	FRO (Floor Reaction Orthosis)	1800/-	Not Applicable	Not Applicable
23	Pneumatic walker	3500/-	Not Applicable	Not Applicable
24	Knee Orthosis Polypropylene (Valgum /Varus, immobilizer etc.)	1500/-	1200/-	900/-
25	P.T.B Brace without shoes	1800/-	1500/-	1200/-
26	Knee Sleeve without hinge	500/-	500/-	Not Applicable
27	Knee Sleeve with hinge	800/-	800/-	Not Applicable
28	Off loader Knee Orthosis	17000/-	Not Applicable	Not Applicable
29	KAFO conventional with shoe (One side)	4000/-	3200/-	2000/-
30	Bilateral KAFO conventional with shoe	5500/-	4500/-	4000/-
31	KAFO custom molded without shoe (One side)	4000/-	3200/-	2000/-
32	Femoral Fracture Brace Non weight relieving	1500/-	1000/-	800/-
33	Femoral Fracture Brace weight relieving	4000/-	3200/-	2000/-
34	HKAFO Conventional with shoes (One side)	5000/-	4000/-	3000/-
35	Bilateral HKAFO Conventional with shoes	6500/-	5500/-	4500/-
36	HKAFO Polyproxyline custom moulded without shoes (One side)	5000/-	4000/-	3000/-
37	Trilateral Orthosis	4000/-	3200/-	2000/-
38	HIP Abduction Orthosis (Conventional)	Not Applicable	1000/-	1000/-
39	Pavlik Harness for CDH	Not Applicable	Not Applicable	2500/-
40	Hip Bracing (Immobilizer)	2000/-	1500/-	Not Applicable
41	SWASH Brace	Not Applicable	18000/-	18000/-
42	Reciprocating Gait Orthosis	32000/-	Not Applicable	Not Applicable
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# UPPER EXTREMITY ORTHOTICS

<u>SI.</u> <u>No</u>	Name of Prosthesis	<u>Approved</u> <u>Rate/Price</u> (Above 12 years of age)	Approved Rate/Price CHILD (7- 12 Years)	Approved Rate/Price CHILD (0-6) Years
1	Finger orthosis static (One Piece)	150/-	100/-	100/-
2	Finger orthosis dynamic (One Piece)	200/-	100/-	100/-
3	Hand Orthosis	400/-	300/-	300/-
4	Thumb Spica / stabilizer	300/-	200/-	200/-
5	Knuckle bender	500/-	350/-	Not Applicable
6	Wrist Hand Orthosis (Static) P.P	700/-	500/-	400/-
7	Wrist Hand Orthosis (dynamic)	1000/-	700/-	500/-
8	Elastic Wrist Hand Orthosis	400/-	300/-	200/-
9	Tennis Elbow support	200/-	200/-	Not Applicable
10	Adjustable arm sling	300/-	300/-	Not Applicable
11	Elbow orthosis (static)	900/-	700/-	500/-
12	Elbow orthosis (Dynamic)	1000/-	800/-	600/-
13	Fracture Brace (Below Elbow)	1200/-	800/-	700/-
14	Shoulder brace (Immobilizer)	1000/-	800/-	700/-
15	Gun slinger shoulder orthosis	1000/-	Not Applicable	Not Applicable
16	Humeral fracture brace without elbow hinge and forearm	1200/-	800/-	800/-
	support			
17	Humeral fracture brace with elbow hinge and forearm support	1600/-	1200/-	1000/-
18	Shoulder Elbow Wrist Hand Orthosis (Air plane splint)	2200/-	1600/-	1400/-

## **MOBILITY AIDS**

<u>SI.</u> <u>No</u>	Name of Prosthesis	<u>Approved</u> <u>Rate/Price</u> (Above 12 years of age)	<u>Approved</u> <u>Rate/Price</u> <u>CHILD (7- 12</u> <u>Years)</u>	Approved Rate/Price CHILD (0-6) Years
1	Walking Stick (Adjustable) Aluminium	350/-	350/-	Not Applicable
2	Tripod / Quadripod walking stick Aluminium	750/-	Not Applicable	Not Applicable
3	Auxillary Crutch / Elbow crutch (Aluminium) Adjustable	850/-	650/-	Not Applicable
4	Walker/Rollator (Aluminium)	1500/-	1200/-	900/-
5	C.P.Chair / C.P.Stand	Not applicable	7300/-	7000/-
6	Commode Chair	2500/-	2500/-	Not Applicable
7	Wheel Chair Folding (Chrome Plated)	7000/-	4000/-	Not Applicable
8	MotorizedWheel chair (i) Quadriplegic wheelchair with Chin and Head Control	1,10,000/-	Not Applicable	Not Applicable
	(ii) Quadriplegic wheel chair with joy stick	60,000/-	Not Applicable	Not Applicable
	(iii) Motorized wheel chair (Handle driven)	35,000/-	Not Applicable	Not Applicable
9	Tricycle Hand Propelled	6000/-	Not Applicable	Not Applicable