



Employee Health Service Scheme Manual

AIIMS Deoghar

Started On 01.01.2025

compiled
Last updated in Nov 2025

Office address:

EHS Office Near MS office, 4th Floor,
Block-B AIIMS Deoghar

Email: - ehs@aiimsdeoghar.edu.in

Version 3.0

Note: Version 4.0 will be released shortly including
the minutes of meeting dated: 22/12/2025.

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22/12/2025

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EMPLOYEE HEALTH SERVICE SCHEME – AIIMS DEOGHAR

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OBJECTIVE OF SCHEME

It is a welfare scheme with objective to provide comprehensive medical care facilities to AIIMS, Deoghar employees and their family members on the lines of EHS scheme of AIIMS New Delhi, and to guide to refer to use CGHS facility till complete health care facilities available at AIIMS, Deoghar.

SALIENT FEATURES OF SCHEME

- Comprehensive health Care services (Promotive, preventive, curative and rehabilitative)
- Based upon CGHS pattern
- Membership is compulsory for all regular employees drawing pay from AIIMS Deoghar pay roll, on basis of prescribed rate of Contribution for its membership.
- Tenure posts and employees appointed on deputation basis or contractual (3 years & above) basis shall also be a member during their tenure at AIIMS Deoghar. These employees are supposed to surrender the EHS card at the time of leaving the institute (tenure/deputation or at retirement) while obtaining NOC from AIIMS Deoghar.
- It shall not be applicable to employees appointed on contractual basis (less than 3 years) or outsourced employees.
- Prevailing CGHS / CS (MA) rule 1944 and its subsequent amendment till date for availing treatment/diagnosis in private hospitals/diagnostic centers. This clause is applicable till AIIMS Deoghar fully functional.

ORGANIZATIONAL FRAMEWORK

- The Executive Director & CEO, All India Institute of Medical Sciences Deoghar, Jharkhand will administer Employee Health Service scheme.
- Medical Superintendent /Chairman, EHS Committee will be directly responsible for administrative functioning of scheme.
- Medical Officer In charge, EHS will look after the routine working of EHS.

EHS ADVISORY COMMITTEE:

EHS Advisory Committee includes: -

1. Chairperson – One Senior faculty member nominated by The Executive Director &CEO, All India Institute of Medical Sciences Deoghar
2. Member Secretary – DMS, AIIMS Deoghar; Officer In charge, EHS.
3. E.H.S. Members – Representative from Faculty, Resident doctor's association, DDA/AO, Employee (Group - A/B/C) cadre.

ROLE OF E.H.S ADVISORY COMMITTEE:

- b. To recommend any change in basic policy regarding EHS benefits from time to time for improvement of services.
- c. To recommend addition and or deletion of any preparation of drugs or surgical items into inventory after consultation with Drugs & therapeutic Committee.
- d. To look into grievances of employees regarding quality of service and incorporate any suggestions if deemed feasible.
- e. To discuss on any issue of dispute regarding benefit or claim; and to suggest amicable solution to administration.
- f. To discuss any agenda that Chairperson deems fit, to be discussed in meeting.
- g. Frequency of meeting will be once at three month or as called by chairperson.

STAFFING PATTERN:

A. MEDICAL STAFF

(Clinical Staffs can vary on the basis of registration at OPD)

One medical officer (JR and above) will be assigned from clinical departments on rotational basis. (Subjected to fully operational systems at AIIMS Deoghar)

Note- Numbers of medical officer assigned from each department can vary depending on recommendation of EHS Advisory committee and availability of resources.

B. ANCILLARY STAFFS (Recommended)

- Pharmacist on duty :1
- UDC :1
- Medical reimbursement accountant (MRA) or
Assign staff by competent authority :1
- Nurse :1
- Multitask Staff (MTS) :1

Note- Numbers of Ancillary staffs can be changed depending on recommendation of EHS Advisory committee or availability of resources available at AIIMS, Deoghar.

COVERAGE:

Employee health scheme will cover entire population of serving employees on AIIMS Deoghar pay roll and their dependent family members.

The scheme is also expanded to cover Senior and Junior Residents (under tenure post for three years) and his/her dependent family members.

To identify employees, an EHS card with EHS number will be provided, which includes particulars of employees as well as his/her dependents.

Term **family** for purpose of Scheme consists of following as per CS (MA) rules 1944 and subsequent amendment till date and it includes: -

Dependents –

❖ Husband / wife (legal),

- **Additional Clarification on dependency criteria** (When both the husband & Wife are government employee)

The Committee had multiple rounds of meetings and discussion on dependency criteria or definitions. The members concluded the dependency criteria after due discussion among them and all appropriate levels of administration. These are as follows:

1) When both husband and wife are AIIMS Deoghar employee:

- a) The contribution will be recovered from only one of them whose contribution money would be higher in EHS scheme as per AIIMS Deoghar EHS policy.

- b) In-case where both the spouse is having equal contribution, each one can be dependent on each other and with declaration, anyone can become primary card holder and other will be considered as dependent on primary card holder.
- c) In case of any mismatch in already existing data on dependents, the employees are encouraged to make such changes with due process followed at AIIMS Deoghar.
- d) If both of them wish to include his/her dependents separately may be allowed subjected to contribution from both and a joint declaration. They cannot become dependent on each other in this case.
- e) Dependent children of the spouse will also be considered dependent upon primary EHS Card holder.

2) If both husband and wife are working in different institutes,

A) One Spouse is AIIMS Deoghar employee and other spouse is in other AIIMS/INIs:

- a) The employee has a choice to become dependent upon his or her spouse subjected to submission or joint declaration to both the institutes with the clarification of where they want to avail the EHS facility. This should be

provided with valid official health scheme document of the concerned institute mentioning the name of EHS card holder & dependents.

b) If both of them wish to include his/her dependents separately may be allowed subjected to contribution from both at their respective Institutes. They will have to follow the rules of respective institutes. In such case they will not remain dependent on one another.

B) One Spouse is AIIMS Deoghar Employee and other spouse is entitled to CGHS or any state government scheme:

a) The employee has a choice to become dependent upon his or her spouse subjected to submission or joint declaration to both the institutes/organization with the clarification of where they want to avail such facility. This should be provided with valid official health scheme document of the concerned institute/organization mentioning the name of EHS/Health Scheme card holder& dependents.

b) If both of them wish to include his/her dependents separately may be allowed subjected to contribution from both at their respective Institutes/organizations. They will have to follow the rules of respective institutes. In such cases they will not remain dependent on one another.

❖ Mother and father or In-laws whose collective monthly income not exceeding rupees 9000/- plus amount of Dearness relief thereon as on the date of recommendation.

❖ **Adoptive Parents and stepmother scenario: -**

- In case of adoption, only adoptive and not real parents. If adoptive father has more than one wife, first wife only.
- If the real father has more than one wife, only one mother will be dependent (Subjected to fulfilment of dependent criteria) and the real mother will get the priority over stepmother.
- An employee has choice to include their parents or their parent-in-law, option exercise can be change only once during their service. **(Ref.OM H.11020/2/2023-EHS Dated July 2023)**

❖ **Dependent/minor children including legally adopted.**

- Son: Till he starts earning or up to 25-years of age or get married, whichever is earlier.
- Son suffering from permanent disability of any kind (physical or mental & is unmarried), no age limit.
- Daughter: Till she starts earning or gets married whichever is earlier irrespective of her age limit.
- Widow daughter, dependent divorced/ separated daughters and also her minor children (up to 18 years) of widow and separated daughter who are residing with and dependent upon AIIMS Employee (regular and on deputation basis) are also eligible for EHS facility (Subject to fulfilment of the dependent criteria 9000+DA). If such son/Daughter after attaining 18 years of age, starts earning then such dependent daughter will not be considered as dependent upon AIIMS employee beneficiaries anymore.

❖ **Sisters (dependent)**

- A sister can be treated as a dependent only when the employee's parents are either dependent on the employee or have passed away.
- Unmarried sister – No age limit, residing along with employee. (Submission of supportive document is mandatory)
- Widow Sister, dependent divorced/ separated Sister and her minor children up to 18 years of widow and separated Sister who are residing with and dependent upon AIIMS Employee (regular and on deputation basis) are also eligible for EHS facility (Subject to fulfilment of the dependent criteria, monthly income - 9000+DA). If such son/Daughter after attaining the 18 years of age, starts learning such dependent Sister will not be considered as dependent upon AIIMS employee beneficiaries anymore.

❖ **Brother (dependent) –**

- A brother can be treated as a dependent only when the employee's parents are either dependent on the employee or have passed away. He should reside with the employee and not more than 18 years of age.
- The permanently disabled dependent brother of the EHS employee without any age limit will be provided the EHS facilities under following criteria: **(Ref No. S11011/13/2012-CGHS (P) OM Dated 25th July 2013 & S.14025/02/2014-MS Dated 19th June 2014)**
 - He must be wholly dependent on the principal EHS card holder Beneficiary.
 - The employee's parents are dependent on the either employee or passed away.
 - He should be unmarried and should not have his own family.
 - He must be ordinarily residing with the primary EHS card holder beneficiary.

- ❖ Grandparents' Grandchildren, Daughter-In-Law etc. is not eligible as dependent under any circumstances.

All the above conditions are required to be fulfilled for availing EHS facilities. The EHS facilities will cease to exist with immediate effect if any one or more of the above conditions are violated.

CONTRIBUTIONS: -

Serial No	Corresponding level in the pay matrix as per seventh CPC	Contribution in rupees (per month)
1	Level 1 to 5	250
2.	Level 6	450
3.	Level 7 to 11	650
4.	Level 12 and above	1000

Given amount will be automatically deducted by the Account section from salary account disbursed on monthly basis.

Note: The amount that is to be deducted for all kinds of employees will be revised from time to time, based on the CGHS/AIIMS rule.

EHS OPD BOOKLET

EHS booklet will be issued individually for employee and his/her approved dependents.

It consists of general instructions, particulars of beneficiary including name, designation, EHS number, CR Number, Relation with the Primary Card holder and place of posting, Date of joining, Date of retirement, Postal address, Telephone number and Date of expiry of card.

By feeding his EHS number and name his directory in computer will be automatically opened and an EHS prescription slip will be printed.

EHS PVC CARD FOR SELF AND DEPENDENT FAMILY MEMBERS

EHS PVC Card Will be issued after submission and subsequent verification of facts provided in EHS Application form.

This card will be valid till superannuation of employee/completion of deputation/tenure.

Only one type of EHS PVC card will be issued to different categories of EHS beneficiary

The separate card will be issued to dependent family members.

The committee members decided that in case of loss of EHS PVC card/employee dependent card. Card holder has to file a FIR and copy of the FIR to be submitted to EHS office with application to issue a duplicate EHS PVC card.

REVIEW OF POLICY

The policy can be reviewed based on recommendation of EHS Advisory committee.

SERVICES PROVIDED

1) Outpatient care:

Outpatient services will be provided in staff health clinic (Employees Health Unit)

OPD timing:

Monday to Friday: 8:30 am onwards i.e. as per time slot allotted by competent authority. (On Saturday, OPD services are till 1 pm ONLY).

Note: This is subjected to be changed as per the directions from competent authority.

Employees Health Services (EHS) will remain closed on national holidays and Sundays. However, in emergency, cases will be attended by Casualty Medical Officer on Sundays and national holidays.

2) Referral to specialist clinic if needed:

Referral for consultation with specialist and for performing various examination, laboratory test and radiological investigations within different Departments of Institute will be attended on priority basis preferably by consultant. If consultant is not available, then Senior Resident will see the referred cases. Consultant/SR will write the prescription and endorse it in EHS booklet. Only Consultant will sign on all EHS booklet and then beneficiary can collect medicine from Pharmacy.

Faculty members with medical qualification, Group A officers or their family, senior citizen more than 75 years irrespective of cadre of employee may consult specialist in first instance and for subsequent treatment. The treating consultant will write the prescription and accordingly beneficiary then collect medicine from Pharmacy.

3) Vaccination:

All vaccines will be provided as mentioned in National Immunization Schedule on

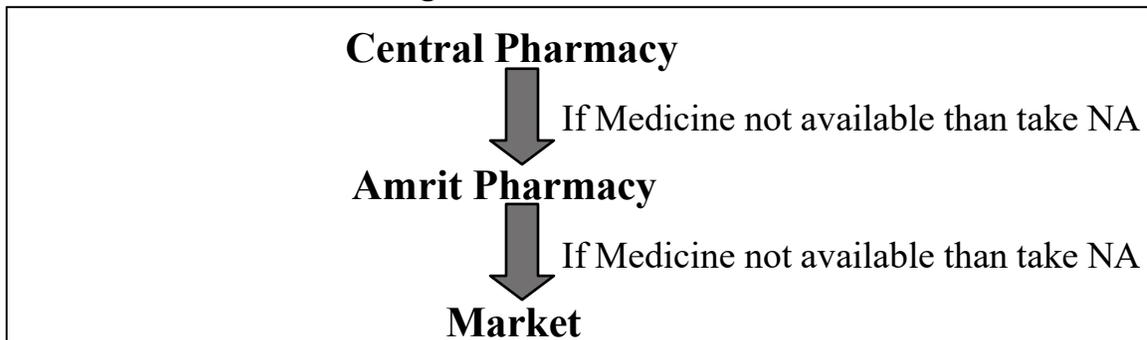
prescription of treating consultants.

Additional vaccines can be included as per recommendation of advisory committee AIIMS, Deoghar.

4) Medicines:

If medicine is available, then it will be issued on same day during EHS working hour. The prescribed drugs which are not available in central pharmacy/approved third Party Pharmacy of AIIMS, Deoghar should be made available by In charge, central pharmacy within 48 hours or can be purchased from outside by beneficiary after NA (Not Available certification) from central pharmacy.

In case of Non availability and thereafter self-purchase, reimbursement will be provided not more than MRP of drugs.



EHS shall supply medicines, as per the available brand / generic name.

Medicines for treatment of chronic illnesses shall be supplied for a maximum period of three months.

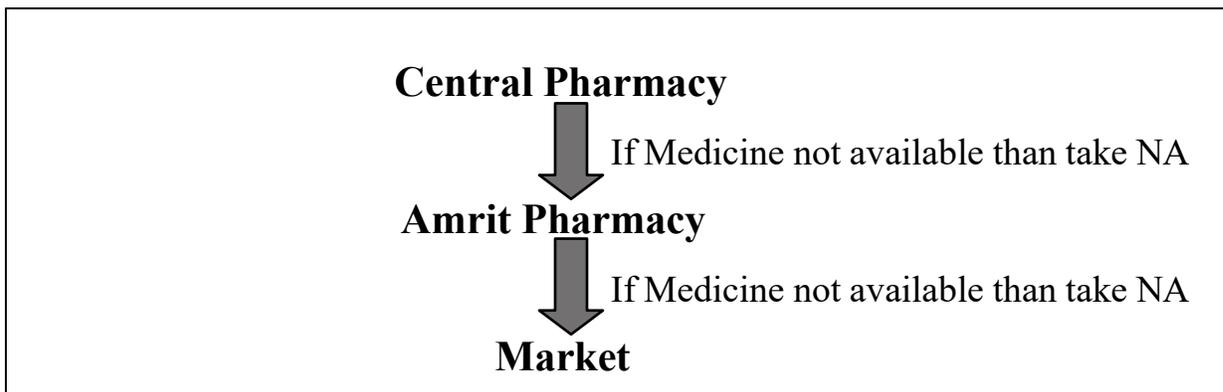
Products classified as the cosmetics, supplementary nutritional products/food products for children/adolescent and adults, and dental toothpastes, optional vaccines and unnecessary prescription of multivitamins will not be provided from any pharmacy and are not admissible for reimbursement.

Additional Points:

1. Primary role of Central pharmacy is to issue medicines to IPD/OPD patients and institute employees & their dependents, against prescription from attending doctors of AIIMS, Deoghar.
2. Staff members and their dependents are supplied all the medicines (except Injectable) listed in AIIMS Deoghar Drug Formulary, from the Central pharmacy, EHS counters, against prescription from EHS doctors/consultant duly verified by EHS O/IC.
3. Injectable drugs are administered to EHS patients in earmarked Injection Room or casualty unless prescribe otherwise by consultant.
4. Normally, medicines outside Hospital formulary will not be issued. However, in exceptional cases, such drugs are procured and issued only after certification (essentiality) by treating consultant.
5. When prescribed drug or its substitute is not available in pharmacy, medicine will be purchased through Central Pharmacy Store and is issued to beneficiary.
6. On some occasion's medicine, if it is not available even by local purchase or in emergent condition then "N.A." will be marked on requisition form/Separate certify certificate from pharmacy and patient is asked to buy medicines for mentioned days. The amount thus spent will be reimbursed by Institute under CCS (MA) rules.
7. In case of emergency i.e., patients are not within reach of institute, EHS beneficiary can buy prescribed medicine from outside pharmacy and inform the Medical Superintendent accordingly within 24 hours, amount thus spent is reimbursed under CS (MA) rule/CGHS rates.
8. Until the Central Pharmacy becomes fully functional
 - The medicine which is not made available by Central Pharmacy can be purchased through Amrit Pharmacy after getting N/A certificate from

Central Pharmacy (E-DRF).

- If the medicine which is not available and not be arranged within 48 hours by Amrit Pharmacy can be purchased from outside after getting N/A certificate from Amrit Pharmacy (E-DRF).



5) Inpatient care

Hospitalization to all EHS beneficiaries will be provided free of charge.

An EHS patient needing hospitalization will be referred to relevant general or specialty department for consultation, based on their recommendation he/she will be admitted on earmarked EHS beds.

Beds are earmarked for staff in various specialty and super specialty department on basis of grade pay (Annexure are attached for Earmarked Bed)

If no EHS bed is available, patients (beneficiaries) may be admitted on emergency ward beds or even on regular ward beds. However, such patients must immediately be transferred to EHS beds on availability.

In no case should an EHS beneficiary be sent to other hospitals without permission of Medical Superintendent.

Various departments including private ward required to have earmarked EHS

beds in their own departments. EHS patients will get first preference in departmental EHS bed. (referred to annexure to see the bed earmarked bed distribution)

Diet will be provided free of cost.

Entitlement of ward for indoor treatment (IPD)

S.No.	Corresponding basic pay drawn by officer in seventh CPC	Ward entitlement
1	Up to Rs 47,600/	General
2	Rs 47,601 – Rs 63,100	General
3	Rs 63,101- Rs 80,900	Semi-Private (E-Block)
4	Rs 80,901 and above	Private (E-Block)

6) Lab services

- All investigation facilities including pathological, radiological, diagnostic etc. will be done on reimbursement basis in Institute (**For details Ref. EHS Annexure-1**)
- Till in-house lab facility are not operational or extended to beneficiaries availing OPD services, the EHS beneficiaries can avail the lab services from approved third party lab within AIIMS premises and reimburse their bills as practiced before (**For details Ref. EHS Annexure-1**)

Note: As this is an initial phase of EHS implementation, the reimbursement mode will be applicable. It will be changed to exempted billing modes when AIIMS Deoghar will have its own functional services like **Lab, Radiology and Pharmacy.**

ADMISSION PROCEDURES

The following are the admission procedures:

A) From Casualty

1. All seriously ill patients will have to go to casualty where the patient will be examined by Casualty Medical Officer and will render immediate necessary treatment.
2. If patients require further investigation or treatment, then consultant will be informed for further management of case.
3. If EHS beneficiary is to be admitted, Admission slip will be provided signed by casualty medical officer and allotted the earmarked bed as per entitlement.
4. On endorsement by treating consultant patient can be shifted to general ward/private ward as per their entitlement.
5. In event of death of an EHS beneficiary in casualty, information will be given to Medical Superintendent/competent authority immediately and nominee can file reimbursement.

B) From Outpatient department and clinic

Booking for an EHS bed can be done for purpose of investigation or short admission by appointment. Such booking will entitle the EHS beneficiary to be admitted by treating unit on EHS beds even on day other than their admission days.

C) For Maternity cases

EHS beneficiary maternity cases will directly report to emergency / casualty where admission slip will be made, and patient will be admitted. After delivery, all EHS patients will be shifted to vacant EHS bed or any other available bed.

D) Issue of drug to inpatient

- All EHS patient admitted in wards will be provided drugs free of cost. Ward Nursing officer in charge will make the separate EHS indent Form with detail of EHS beneficiary and place the indent form in Pharmacy store which will ensure all drugs are supplied at the earliest.
- For emergency cases patients can buy the medicine /surgical item from AMRIT Pharmacy Preferably over market and reimbursement of same can be done on endorsement of treating consultant and N.A. from AMRIT Pharmacy (**Ref.as per flow Diagram page no-19**)

E) Transport Facility

- In case of severe illness, referred EHS beneficiaries will be entitled to ambulance if available, free of charge. If ambulance not available, beneficiary can hire the private vehicle for not more than 500 kms from AIIMS Deoghar and reimbursement of same will be done after producing the NA from the Vehicle section countersigned by administrative officer.
- Ambulance service will be made available for discharged EHS patients for transport to residence, which will be available only till 6 p.m. The EHS patients will preferably be discharged from wards during morning and afternoon hours.

F) Emergency/Casualty:

- In case of emergency, the beneficiaries can approach emergency department.
- If admission is required, then at least two (1 Male + 1 Female) beds earmarked as

EHS bed in emergency department. If admission is not required and need to be treated on OPD basis, medication will be issued as per EHS policy.

- If the emergency treatment facility is not available in this institute due to any reason, beneficiary is entitled for treatment in any hospital provided that beneficiary or its attendants informed to MS office and Cc to Medical Officer In charge, EHS/ (EHS Office) and MS Office, in writing / email for such emergent condition within 24 hours of admission and it is subjected to approval from MS after discharge patient can claim for reimbursement on CGHS rate via proper channel.
- If place of illness / trauma is other than Deoghar city, in medically emergent conditions and if circumstances beyond control of beneficiary, treatment will be admissible, as per CS(MA) rules 1944 and its subsequent amendment till date. Genuineness of emergent condition shall be evaluated on case-to-case basis. Merely getting admitted through emergency, without any justifiable emergent condition, shall not make beneficiary entitled for benefit. MS office and EHS Office must be informed through the mail within 24 hours of emergency treatment.

Note: MS Office and EHS Office must be informed through Email within 24 hours of emergency treatment taken.(in this regard a mail to msoffice@aiimsdeoghar.edu.in, and Cc to ehs@aiimsdeoghar.edu.in will suffice)

G) Obstetrics treatment:

All maternity cases will be treated at AIIMS Deoghar. In case employee or their dependent is living at a far-off distance from Institute, such cases can be referred by consultant and HOD's of concerned department / EHS O/IC countersigned by medical superintendent to any nearest hospital / maternity homes as recognized by CGHS or reimbursement will be as per CS(MA) rules or actual expenditure whichever is less. Prior approval is necessary for reimbursement unless it is an emergency.

H) Lab. and Radiological investigations:

- As per prescription of consultant, laboratory and radiological investigation will be done on reimbursement basis in AIIMS Deoghar. Referral if needed or if such facility not available in AIIMS Deoghar, then concerned department will issue the NA certificate countersigned by Medical Superintendent. Reimbursement will be as per CS(MA) rules / CGHS rates or actuals whichever is less **(For details Ref. EHS Annexure-1)**.
- **For OPD Prescription - Reimbursement mode** (Preference given to in house lab / Radiology over HLL over AMRIT)
- **For IPD Treatment- Exempted Billing /Cashless Mode.**

I) Special consultation and treatment

Consultation with specialist for diseases of eye, ear, nose, throat, dental and subsequent treatment shall be obtained on advice of EHS Officer In charge except for Faculty and Group A officers. There will be provision of hearing aid, artificial limbs, orthotics, prosthetics, dental implant etc. on recommendation of treating consultant of AIIMS Deoghar. Reimbursement is admissible as per CGHS/ CS(MA) rules.

J) EHS Injection and dressing room

- All Employees Health Scheme beneficiaries will be given injection and dressing will be done in this room. Injections will also be issued to beneficiaries and local purchase of injections and reimbursement of injections will be initiated from this room. One Nursing officer will look after functioning of E.H.S. Injection and Dressing room.
- Injectable medicines for EHS beneficiary will not be issued for more than 4 days at a time for home use. In case, patient condition is debilitating and

cannot come for daily injections, concerned consultant will make an endorsement for issue of injectable but will not be issued for more than 2 weeks. If injectable are given at home, any side effect due to injectable medicine, the responsibility will be of the patient or person administering the drug and AIIMS doctors will not be held responsible. Written consent will be taken from the beneficiary for same.

Note: It is subjected to be changed time to time with due approvals.

K) Occupational exposure

Cases with occupational exposure to infection will be considered.

L) Medical and fitness certificate

All EHS beneficiaries will get medical and fitness certificate free of cost, if required. Forms will be made available in EHS staff clinic, OPD and in-patient wards. Intern/ Resident-in-charge of patient fills up form and gets it signed by treating consultant, CMO or medical officer-in-charge of EHS. Medical Superintendent / competent authority will further countersign it.

M) Referral to other hospitals:

Consultant can refer beneficiaries to an autonomous/ government /private hospital if needed (valid reason to be mentioned in writing) after taking approval from Medical Superintendent or assigned faculty by competent authority. The referral will be valid for OPD treatment for a particular disease (**in case when faculty of concern department is not available**) for a period not exceeding six months from date of issue for allopathic treatment but monthly permission is required and 40 days for treatment in Indian System Medicine. For indoor and follow up treatment in hospital other than AIIMS Deoghar, r e f e r r a l from concerned consultant and M e d i c a l

Superintendent/competent authority is required separately. However, reimbursement will be done as per CGHS / CS (MA), Central Civil Services Medical Attendance Rules/AIIMS rates or actual whichever is less.

N) Reimbursement of specialized tests and treatments taken at Government/ autonomous hospitals/private hospital

Expenditure on treatment is reimbursed as per CGHS rates/ CS(MA) rules / AIIMS rates or actual, whichever is less.

O) Prior special permission of Executive Director is required for–

- Procurement of equipment / machines like BIPAP, CPAP, AICD, Oxygen Concentrator, Neuro-Implants, Cochlear Implant etc. Reimbursement shall be made as per CS (MA) / CGHS Rules.
- Costly treatments like Liver and Kidney Transplant, BMT, Chemotherapy etc.
- For in Vitro Fertilization (IVF) treatment on recommendations of treating consultant duly signed by Head of Department of Obstetrics and Gynecology restricted to three cycles only. {**Ref Document: EHS Annexure- 3, OM NO. Z15025/5/2011-CGHS IN/CGHS (p) dated 22nd November 2011**}

SETTLEMENT OF MEDICAL CLAIMS

For settlement/reimbursement of medical claim beneficiary should submit an application to EHS department for claiming reimbursement of medical expenditure and settlement of any advance within **06 (Six) months** of discharge from hospital / OPD treatment taken. Application should be submitted along with documents mentioned in EHS **Reimbursement Claim Form/Checklist** available on AIIMS Deoghar website.

Note: Competent authority for settling claim will be DDA and Account section.

ADVANCE PAYMENT RULE:

If patient is suffering from any critical care illness, and it is found that treatment is only possible in the referred hospital, then advance payment amounting to not more than 90% of estimated bill may be sanctioned by competent authority and amount directly credited in the account of concern hospital as per rate and rule.

Note –

1. There is no need for essentiality certificate signed by treating doctor to be submitted for reimbursement of medical claim.
2. Such reimbursement is restricted to limits prescribed by Government from time to time. Expenditure incurred in excess of limits prescribed in CS (MA) Rules / CGHS guidelines have to be borne by beneficiary themselves.
3. For items non-admissible as per CS (MA) Rules / CGHS guidelines expenditure there of shall be borne by beneficiaries themselves. There will be no reimbursement for these items.

ADDITIONAL NOTES

- Drugs can be prescribed for duration limited to maximum **three months** for chronic

diseases only, with proper endorsement in EHS booklet and OPD paper. However, if there is change in medicine in this three-months period then re-issue of newly prescribed medicine will be done only after the return of leftover medicines. Medicines for Chronic illness will be reissued only in **last months** of this period (three months) for concerned disease.

- Finally, prescription will be verified by EHS O/IC for its adherence to mentioned policy.
- Any change/addition/deletion in the existing policy will be done with due release of EHS Annexure/s Or Release of Updated version of EHS policy.

Important Timelines

S.No	Important Events	Cutoff Duration
1.	Reimbursement Claim	Within 6 months
2.	Chronic Diseases Medicine	The maximum prescription period 3 months
3.	Emergency Treatment Intimation	Within 24 hours

➤ PREVIOUS COMMITTEE MEMBERS (31.12.2020-14.02.2022)

Sr. No.	Name of member	Designation	Remarks
1.	Prof.Dr.Satya Ranjan Patra	Professor General Surgery	(Chairperson)
2.	Sri Amrendra Kumar	Deputy Director(Admin)	(Member)
3.	Dr.Sarthak Das	Associate Professor Peadiatrics	(Member)
4.	Dr.Ranjeet Kumar	Associate Professor Anatomy	(Member)
5.	Dr.Ranwir Kumar Sinha	Assistant Professor Pathology	(Member)
6.	Dr.Manoj Kumar Saurabh	Additonal Professor Pharmacology/D.M.S	(Member)

(15.02.2022-15.06.23)

7.	Dr.Harmander Singh	Professor	(Chairperson)
8.	Dr.Manoj Kumar Saurabh	Additonal Professor	Member Secretary
9.	Dr.Manuj Kumar Sarkar	Professor	(Member)
10.	Dr.Abhinav Arya	Asst.Professor	(Member)
11.	Sri Saket Bihari	Administration Officer	(Member)
12.	Dr.Rashmi Bala patel	SR	(Member)

(16.06.2023-10.07.24)

13.	Dr.Boratne Abhijit Vinodrao	Additional Professor	(Chairperson)
14.	Dr.Amardeep Kumar	Professor	(Member Secretary)
15.	Dr.Subodh Kumar	Associate Professor	(Member)
16.	Dr.Manuj Kumar Sarkar	Associate Professor	(Member)
17.	Dr.Saroj Kumar Tripathy	Associate Professor	(Member)
18.	Dr.Abhinav Prakash Arya	Asst.Professor	(Member)
19.	Dr.Nishi	Professor	(Member)
20.	Dr.Rakhi Gaur	Asst.Professor	(Member)
21.	Dr.Navjot Kaur	Asst.Professor	(Member)
22.	Shri Saket Bihari	Administrative Officer	(Member)

(11.07.2024 – 14.12.2025)

23.	Dr.Boratne Abhijit Vinodrao	Additional Professor	(Chairperson)
24.	Dr.Amardeep Kumar	Professor	(Member Secretary)
25.	Dr.Subodh Kumar	Associate Professor	(Member)
26.	Dr.Manuj Kumar Sarkar	Associate Professor	(Member)
27.	Dr.Saroj Kumar Tripathy	Associate Professor	(Member)
28.	Dr.Abhinav Prakash Arya	Asst.Professor	(Member)
29.	Dr.Nishi	Professor	(Member)
30.	Dr.Rakhi Gaur	Asst.Professor	(Member)

31.	Dr.Navjot Kaur	Asst.Professor	(Member)
32.	Shri Saket Bihari	Administrative Officer	(Member)
33.	Dr. Ruthra Kumaran	1 st Year PG General Medicine	(Member)
34.	Dr.Alok Kumar	SR Pathology	(Member)
35.	Ms.Chandana Chetry	SNO	(Member)
36.	Ms.Simran	Stenographer	(Member)

CURRENT COMMITTEE MEMBERS: (15.12.25-Till Now)

Sr. No.	Name of member	Designation	Remarks
1.	Dr. Abhijit Vinodrao Boratne	Additional Professor	(Chairperson)
2.	Dr Amardeep Kumar	Associate Professor	(Secretary)
3.	Dr. Subodh Kumar	Additional Professor	(Member)
4.	Dr. Saroj Kumar Tripathy	Associate Professor	(Member)
5.	Dr. Abhinav Prakash Arya	Asst.Professor	(Member)
6.	Dr. Nishi	Professor	(Member)
7.	Dr. Rakhi Gaur	Asst.Professor	(Member)
8.	Dr Ruthran	Junior Resident	(Member)
9.	Shri Saket Bihari,	Administration Officer	(Member)
10.	Ms. Chandana Chettri	Senior Nursing Officer	(Member)
11.	Ms. Simran	Stenographer	(Member)
12.	Dr.Swati Priya	Associate Professor	(Member)
13.	Dr.Pawan Kumar	Asst. professor	(Member)
14.	Dr.Sushil Kumar	Asst.Professor	(Member)
15.	Dr.Akash Dashgupta	SR	(Member)
16.	Dr.Mahindra	JR Academic	(Member)



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APPLICATION FOR EHS CARD

Please tick (v) which is applicable and strike out of (X) whichever not applicable.

Applying for E.H.S. Card: New Re-issue

If yes, EHS No.....

1. Name of the applicant:**Biometric Id**.....

2. Category: Please tick (v) whichever is appropriate

- a. Service Employee: Regular /Contractual / on deputation
 b. Resident: Senior Resident /Junior Resident /Student Research Staff
 c. Post-Retirement-: Ex-Employee

3. Designation:4. Name of Department.....

5. Pay band+Basic pay: 6. Blood Group (ABO RH system)

7. Entitlement class: - Gen.Ward Pvt.Ward

8. Office Address:

9. Correspondence Address:

10. Permanent Address:

11. Mobile Number: Emergency Cont. No.....

12. E-mail address:Date of Birth.....

13 a) Date of Joining: -

/ / / /

14. Details of dependent: (including self)

b) Date of superannuation (in case of serving AIIMS employee):

D/D /M/M /Y/Y/Y /Y
/ / /

c) Date of completion of tenure (in case of residents, research staff,

Ph.D. Scholars & deputation staff as applicable): -

D/D /M/M /Y/Y/Y /Y
/ / /

(* Please see definition at [page-4] of family before filling up this Colum)

Sr. No.	Name of self & dependent	Relations hip with EHS Card Holder	Date of Birth	Gen der	Blood Group	Marital Status	Mobile No.	Email Id	(Validity to be filled by Concerned Establishment Section)
1									
2									
3									
4									

15. Are all the persons whose names are given above are dependent upon you? Yes No

- I. Please attach proof of their relationship with you, like copy of EHS token card issued Aadhaar Card/ Ration Card/Election Card/ Passport/ Identity Card issued by college/ School/ University/ Bank pass book etc.
- II. Please attach proof of dependency in respect of age of son(s) & daughter(s) with reference to dependency criteria attached herewith at page - 4.

16. Paste one Photograph of each member of dependent Family members including self.

Name:.....	Name:.....	Name:.....	Name:.....
Sign	Sign	Sign	Sign
Aadhaar no	Aadhaar no	Aadhaar no	Aadhaar no
Name:.....	Name:.....	Name:.....	Name:.....
Sign	Sign	Sign	Sign
Aadhaar no	Aadhaar no	Aadhaar no	Aadhaar no

- 1) I certify that my family members as above are wholly dependent on me.
- 2) I undertake to intimate immediately if there is any change in dependency criteria of my family members including in this application form. If I fail to intimate and if the authorities come to know of the same, then the E.H.S. facility is liable to be withdrawn by the AIIMS and /or appropriate authority will be free to initiate any action against me.
- 3) I undertake to surrender the E.H.S. card(s) on my leaving the AIIMS, Deoghar on completion of tenure/ deputation /retirement/termination/ resignation or on casing to be eligible of EHS benefits.
- 4) I certify that the information furnished by me in this application has been verified to be correct and that no information has been concealed or has been misrepresented and I stand by the same.
- 5) I certify that I will do EHS beneficiary contribution for whole life **(for pensioner only)**:

(Forwarded by Head of Deptt./Section)

(Signature of applicant)

Contd.....

DECLARATION

- 1) I hereby declare that my father / mother/ father-in law/ mother-in law namelyis/are wholly / mainly dependent upon me and that he / she / they normally reside with me at Deoghar/ AIIMS, Deoghar.
- 2) I also certify that my father namelyand mother namelyare dependent on me and their income from all sources including Pension / Family pension and Pension equivalent of DCRG does not exceed Rs. 9000 per month plus the amount of Dearness Relief there on.
- 3) I certify that my sonage years is unmarried / unemployed and wholly dependent on me.
- 4) I certify that my daughterageyears is unmarried / unemployed/Widowed and wholly dependent on me.
- 5) I undertake to surrender the E.H.S. Identity Card on my leaving the Institute on transfer / retirement / termination of service, resignation etc.

Signature of the Institute employee.

(TO BE VERIFIED BY THE CONCERNED ADMIN.OFFICER / ESTABLISHMENT SECTION)

1. The information furnished by the applicant has been verified from his/her service records and found to be correct. It is recommended that a E.H.S number to be issued to Shri/Smt./Kumar(i), Designation who is working in this Department/Section/Centre/Unit.....
2. Finance division AIIMS Deoghar has been intimated about required deduction towards the E.H.S. subscription every month from the salary of the applicant.
3. It is requested to consider for the issue of New E.H.S. photo Cards and E.H.S. Books to the beneficiary/ beneficiaries as per E.H.S. token card.

Signature of the concerned Administrative Officer

(To be filled by the E.H.S. Cell)

E.H.S. No. _____ has been allotted to the applicant by the E.H.S. Cell.

Sign

**Signature with Seal
Chairperson EHS.Cell**

Contd.....

INSTRUCTIONS

Definition of Family:

- (1) Husband / Wife* (* First wife only)
- (2) Dependent Parents / Step Mother (in case of adoption, only adoptive & not real parents)
- (3) If adoptive father has more than one wife, the first wife only.
- (4) A female employee has a choice to include either her dependent parents or her dependent parents – in law; option exercise can be changed only once during service.
- (5) **Children** including legally adopted children, step children and children taken as wards subject to the following conditions:

(i)	Son	Till he starts earning or attains the age of 25 years, whichever is earlier?
(ii)	Daughter	Till she starts earning or gets married, irrespective of the age limit, whichever may be earlier?
(iii)	Son Suffering from any permanent disability of any kind (physical or mental) as defined below	Irrespective of age limit.
(iv)	Dependent divorced / abandoned or separated from their husband / widowed daughters and dependent unmarried / divorced abandoned or separated from their husband / widowed sisters	Irrespective of age limit.
(v)	Dependent Minor brother(s)	Up to the age of becoming a major.

For the purpose of availing E.H.S. facility for disabled sons above 25 years, please attach a copy of the certificate of disability issued by the competent authority.

'Disability' will be AS DEFINED IN SECTION 2(1) OF 'THE PERSONS WITH DISABILITIES (EQUAL OPPORTUNITIES, PROTECTION OF RIGHTS AND FULL PARTICIPATION) ACT, 1995 (NO: 1 OF 1996)' WHICH IS REPRODUCED BELOW:

- “(1) “DISABILITY” MEANS
- (I) BLINDNESS
 - (II) LOW VISION
 - (III) LEPROCY CURED
 - (IV) HEARING IMPAIRMENT
 - (V) LOCOMOTOTR DISABILITY
 - (VI) MENTAL RETARDATION
 - (VII) MENTAL ILLNESS”

Dependency:

Members of family (other than spouse) whose income is less than Rs.9000/- + DR per month are treated as dependents and are normally residing with E.H.S. beneficiary.

The Following Documents are to be enclosed:

- (I) **Proof of Residence / Stay of dependents** – {copy of Aadhaar Card/ Ration Card / Election ID / Pass Port / Identity card issued by College/School/University/Bank Pass Book, etc.
- (II) **Proof of age of son -**
- (III) **Attested Copy of Disability certificate issued by Competent Authority (in case of dependent son aged 25 and above)**

For Pensioners applying for E.H.S. card for the First time the following Additional Documents are required:

- (IV) **Surrender Certificate of E.H.S. Card while in service.**
- (V) **Attested copies of PPO & Last Pay Certificate.**

Contribution by Pensioners should be made through Challan/Cash/Cheque/Bank Draft payable in favor of “the Director” AIIMS, Deoghar under due process of concerned Establishment Section AI Deoghar.



‘Employee Health Services (EHS) – AIIMS Deoghar’

Application Form for Addition/Deletion of Dependents in EHS Scheme

Name of the Employee: _____ EHS No.: _____

Designation & Department/Office _____

Employee ID _____

Residential Address: _____

Email ID: _____ Contact No: _____

Addition

Deletion

Details of Family member:

S.No	Name	Relationship with EHS Card Holder	D.O.B	Gender	Blood Group	Marital status	Mobile No	Email id	Validity (Office Use)
1									
2									
3									
4									

Furnish details of any modification in Family (on account of birth, death, marriage, marriage of daughter, Son more than 25 years, changed in income status of dependent parent, disability, divorced daughter, divorced, widow etc.). Refer to Definition of Family in EHS manual, AIIMS Deoghar.

- Paste Photograph(s) of newly added member(s).

Photo	1.	2.	3.	4.
Name				
Reason for Modification				
Proof of Relationship				
Supporting Docs (kindly attach)				

DECLARATION

I hereby declare that the statements made above are true and that the persons included in the details of family are wholly dependent on me and that no information has been concealed or has been misrepresented and I stand by the same.

Note:- Cover Letter is Mandatory for every Addition and Deletion of Dependents by Employee with this forms.

Dated:

Forwarded by Head of Deptt/Section
AIIMS Deoghar.

Signature of Employee



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'Employee Health Services (EHS) – AIIMS Deoghar'

FOR OFFICIAL USE

The information furnished by the applicant has been verified and found to be correct and fixed EHS subscription rate as per entitlement are being deducted every month from the salary of the applicant as usual. It is requested to consider for the issue of EHS ID, EHS smart card & EHS booklet for newly added member(s).

Verified by concerned Administrative Officer
AIIMS Deoghar

(To be

filled by EHS Cell) EHS no has been

allocated to the applicant(s) by EHS cell.

S.no	Newly added beneficiary Name	EHS ID No	Date of EHS Card Issued
01			
02			
03			
04			

EHS Chairperson
AIIMS Deoghar

INSTRUCTIONS

Definition of Family:

- (1) Husband/Wife* (*First wife only)
- (2) Dependent Parents / Step Mother (in case of adoption, only adoptive & not real parents)
- (3) If adoptive father has more than one wife, the first wife only.
- (4) A female employee has a choice to include either her dependent parents or her dependent parents-in law; option exercise can be changed only once during service.
- (5) **Children** including legally adopted children, step children and children taken as wards subject to the following conditions:

(i)	Son	Till he starts earning or attains the age of 25 years, whichever is earlier?
(ii)	Daughter	Till she starts earning or gets married, irrespective of the age limit, whichever may be earlier?
(iii)	Son Suffering from any permanent disability of any kind (physical or mental) as defined below	Irrespective of age limit.
(iv)	Dependent divorced / abandoned or separated from their husband /Widowed daughters and dependent unmarried / divorced abandoned or separated from their husband / Widowed sisters	Irrespective of age limit.
(v)	Dependent Minor brother(s)	Up to the age of becoming a major.

For the purpose of availing E.H.S. facility for disabled sons above 25 years, please attach a copy of the certificate of disability issued by the competent authority.

'Disability' will be AS DEFINED IN SECTION 2 (1) OF 'THE PERSONS WITH DISABILITIES (EQUAL OPPORTUNITIES, PROTECTION OF RIGHTS AND FULL PARTICIPATION) ACT, 1995 (NO: 1 OF 1996)' WHICH IS REPRODUCED BELOW:

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 - (II) LOW VISION
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 - (IV) HEARING IMPAIRMENT
 - (V) LOCOMOTOR DISABILITY
 - (VI) MENTAL RETARDATION
 - (VII) MENTAL ILLNESS”

Dependency:

Members of family (other than spouse) whose income is less than Rs.9000/- + DR per month are treated as dependents and are normally residing with E.H.S. beneficiary.

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- (II) **Proof of age of son-**
- (III) **Attested Copy of Disability certificate issued by Competent Authority (in case of dependent son aged 25 and above)**

For Pensioners applying for E.H.S. card for the First time the following Additional Documents are required:

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- (V) **Attested copies of PPO & Last Pay Certificate.**

Contribution by Pensioners should be made through Challan/Cash/Cheque/ Bank Draft payable in favor of “the Director” AIIMS, Deoghar under due process of concerned Establishment Section AIIMS, Deoghar.



‘Employee Health Services (EHS) – AIIMS Deoghar’

1.

**EMPLOYEE HEALTH SCHEME
 MEDICAL REIMBURSEMENT CLAIM FORM**

(To be filled up by the EHS Card holder in BLOCKLETTERS)

1. Details Of EHS beneficiary.

- (a) Name of the EHS card Holder- (b) Employee ID Number-
 (c) EHS Card Number- (d) Ward Entitlement–Pvt./General-
 (e) Mobile number - (f) E-mail ID-
 (g) Full Address-

2. Details of the Person for which claim has been demanded.

- (a) Patient 's name- (b) Patient's EHS Number–
 (c) Relationship with the EHS Cardholder-

3. Name & address of the hospital/diagnostic center/ Imaging center where treatment has been received.

S.no	Hospital Name	Lab	Imaging center	Address

4. Treatment for which reimbursement claimed (Tick [] the appropriate box)-

- (a) OPD Treatment (b) IPD Treatment (c) Medical Test Bill (d) Vaccination
 (e) Casualty Treatment (f) Others (Specify)- _____.

5. Whether treatment was taken in emergency- Yes/No

6. Whether prior permission was taken for the treatment- Yes/No
 (If yes, attach appropriate document as per checklist)

7. Whether reimbursing from any other health/medical Insurance Scheme- Yes/ No
 if yes, amount (claimed /received)

Claimed Rs..... Received Rs

8. Details of Medical Advance taken, if any-



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‘Employee Health Services (EHS) – AIIMS Deoghar’

2.

9 .Amount Claimed-

S.no	Treatment	Particular		Cost	Conversion of Outside Bill as per CGHS rate (For Account office use Purpose)	
A	OPD	Drugs				
		Lab Test				
		Imaging Test				
		Total Amount OPD		Rs	Rs	
B (1)	IPD (Part A)	Bed Charges	Ward Type	No of Days	Cost	Cost Conversion of Outside Bill as per CGHS rate (For office use)
			General Ward			
			Private Ward			
			HDU			
			ICU			
			Others			
	Total Days					
B (2)	IPD (Part B)	Drugs				
		Lab Tests				
		Imaging Tests				
		O.T Charges				
		Others				
		Total Amount IPD		Rs	Rs	
C	Vaccination	Detail of vaccination taken		Cost	Conversion of Outside Bill as per CGHS rate (For office use)	
		01.				
		02.				
		03.				
		04.				
Total Amount Vaccination		Rs	Rs			
D	Medical Test Bill (APAR related)	Name of Test done		Cost	Conversion of Outside Bill as per CGHS rate (For office use)	
		01.				
		02.				
		03.				
Total Amount Medical Bill						
E	Others/Emergency	Specify		Cost	Conversion of Outside Bill as per CGHS rate (For office use)	
		01.				
		02.				
		03.				
Total Amount Others		RS	RS			
Total Amount Claimed						
Total Reimbursement Amount (As Per Norms) (For Account Office Use Purpose)						



10. Employee's Bank Detail's (Salary Account Only)

(1)A/C holder Name..... (2)Salary A/C Number.....
 (3)Bank Name..... (4)IFSC Code.....
 (5)Branch..... (6)MICR Code.....

11. Declaration by the Primary EHS Card Holder:

I hereby declare that the statements made in the application are true to the best of my knowledge and belief, and the person for whom medical expenses were incurred was me or is dependent on me. I am an EHS beneficiary, and the EHS card was valid at the time of treatment. My monthly EHS contribution is deducted from my salary. I agree to the reimbursement as in admissible under the rules.

Date.....

Place.....

Signature of the EHS Card Holder

12. Declaration by the treating Consultant:

I Dr..... hereby certify that the patient has been under treatment at Hospital, ,
 And that the medicine(s)/investigation(s) prescribed by me in this connection were essential for the recovery / prevention of deterioration of the patient's condition. I hereby declare that I have **personally verified all the submitted bills** related to **medicines and investigations**, and they correspond to the prescriptions and diagnostic tests advised by me during the course of treatment. To the best of my knowledge, all the documents submitted for reimbursement are **genuine, appropriate, and medically justified**.

Sign, Date & Seal of Treating Physician & Surgeon

For EHS Office Use Only

Verification by EHS Cell.

Sign –
 Date –
 LDC/UDC Name –

Sign –
 Date -
 EHS Chairperson/ EHS
 Member Name –
 Designation -

13.

14. For MS Office Use Only

Verification & Approval from MS Office.

Date.....

Sign & Seal
 Medical Superintendent



15. For Administrative Use Only

Approval from Administrative Section DDA/AO.

Mr. /Mrs. /Dr. _____ is an active EHS member whose EHS ID No is _____. The Medical Claim of the verified amount Rs _____ is submitted for processing of payment as per rule.

Date.....

Sign & Seal
DDA /AO.

16. For Account Section Use Only

Approval from Account Officer.

Date.....

Sign & Seal
Account Officer

IMPORTANT-

Kindly ensure to provide the following information/documents, wherever applicable:

- A. Obtain Break up of investigations from the hospital/diagnostic center/Imaging center (details and rates of individual tests and the exact number of tests and the exact number of tests, X-ray films, etc.) as the reimbursement amount is calculated as per approved CGHS/AIIMS Rates per test.
- B. In case of loss of original papers, Affidavits as per Annexure I to be submitted. AH photocopies of the bills to be attested by the treating doctor/specialist.
- C. In case of death of the card holder, Affidavit as per Annexure II to be filled and attached to claim reimbursement.
- D. In case of implants. Invoice No. along with sticker with serial number of the implant to be attached.
- E. In case of coronary Stents, outer pouch of stents is to be enclosed.
- F. In case of replacement of pacemaker/ICD etc. copy of the warranty certificate of earlier pacemaker/ICD may be enclosed.

Annexure-I

Draft for Affidavit for duplicate Claim papers bills on stamp paper

I,son/wife/daughter ofand resident ofmisplaced/lost the original paper or the same is not traceable.

I hereby give an undertaking that I have not received any payment against the original bills/claimed paper from any source, and that if the original papers are traced. I shall not stake claim against original bills in the future and that in the event, I receive any cheque against the original bills in the future, I shall return the same to competent authority.

Verified by Notary public

Signature



Annexure-II

Draft for Affidavit on Stamp Paper for claim of medical reimbursement in case of death of a EHS card holder

I..... Husband/Wife/Son/Daughter of late and resident of.....
 here by submit the medical reimbursement claim pertaining to the
 treatment of my husband/wife/father/mother late shri/smt who has expired on.
 (A Copy of Death Certificate is enclosed)

Late Shri/Smt.....has left behind the following other legal heirs,
 none of whom have any objection if the entire reimbursement amount is paid to me.

(No Objection Certificate signed by other legal heirs on Stamp paper is enclosed)

Deponent.

Attested by Notary Public.

Draft for No Objection Certificate to Stamp paper-

- (I) We _____ S/O, _____ D/O _____
 late Shri _____
- (II) S/o _____ D/o _____
 late Shri _____
- (III) _____
- (IV) _____
- _____ Being the legal heir of Late Shri/Smt _____ have no
 Objection if the entire amount reimbursable pertaining to the treatment of late
 Shri/Smt _____ is paid to Shri/Smt _____

- | | | |
|-------------------------------------|--------------------------------------|--------------------------------------|
| (i) Signature-
Name-
Address- | (II) Signature-
Name-
Address- | (III)Signature-
Name-
Address- |
|-------------------------------------|--------------------------------------|--------------------------------------|

Verified by Notary Public



‘Check List’

Checklist for Settlement of Medical Claim through EHS Cell.

- EHS Beneficiary should submit a filled-up application with supporting documents to EHS department for claiming reimbursement of medical expenditure and settlement of any advance within **06 (Six) months** of discharge from hospital / treatment taken.
- Claim settlements documents should be submitted through proper channel. Competent authority for settling claim will be **DDA and Account section**.

Application should be submitted along with the following documents-

 or 	Sl.No.	Particular
	1.	Covering letter/ self-representation by beneficiary.
	2.	Duly filled Medical Claim /Reimbursement Form (Which contains checklist & Master Invoice Sheet- Sl.No. 03 & 04)
	3.	Checklist Form for reimbursement.
	4.	Summary of total medical bills claimed (Master Invoice Sheet showing total claim value, filled in chronological order, Format given on Last page of Reimbursement Form) - (Mandatory).
	5.	Photocopy of Valid AIIMS Deoghar Employee ID/ Smart EHS card .
	6.	Photocopy of OPD Prescription of treating medical officer along with Front Cover of EHS OPD Booklet/ Discharge Summary (For admitted patients)
	7.	All the original bills (attested by treating Consultant & EHS beneficiary) in chronological sequence. [EHS beneficiary must keep the photocopies of all the bills for his convenience].
	8.	Appropriately filled up, signed and sealed E-DRF form - (Optional) .
	9.	Appropriately filled up, signed and sealed E-ITRF form - (Optional) .
	10.	Most recent payslip showing deduction of EHS monthly contribution. - (Optional).
	11.	In case, the treatment is taken in emergency;- (a+b+c), [SOS basis]
	a.	Permission copy of M.S/ Executive Director (if applicable) / Intimation copy to EHS Cell during emergency for approval of treatment outside.
	b.	A self-explanatory letter from beneficiary, explaining emergency circumstances.
	c.	Emergency treatment certificate from concerned hospital must also be submitted.
	12.	Affidavit on stamp paper by claimant, no objection from any or legal heirs on stamp paper and copy of death certificate, <i>in case of death of card holder</i> .
	13.	Photocopies of claim paper & affidavit on stamp paper <i>in case original papers have been lost</i> .
	14.	Bank details (Salary Account Details only) of EHS beneficiary on the specified space of Claim Reimbursement Form. (Attach photocopy of the cancelled Cheque of your salary account) - (Optional).
	15.	Utilization Certificate (Implant related).



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7.

This section is designated for summarizing the total medical bills claimed by the applicant and must be completed

Master Invoice Sheet

clearly in chronological order. After filling it out, the form should be verified by the treating consultant and self-attested by the applicant.

Master Invoice Sheet					
Sl.No.	Bill Number	Bill Date	Bill Amount		
			In-house Bill Amt. (A)	Outside Bill Amt. (B)	CGHS rate of (B) [for Account Office Use Purpose] (C)
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					
11.					
12.					
13.					
14.					
15.					
Total Bills			₹ _____	₹ _____	₹ _____
Aggregate Bill Amount =			₹ _____		
Total Reimbursable Bill Amount (A + C) =			₹ _____		
			[for Account Office Use Purpose]		

Note – Additional 'Master Invoice Sheet' may be added if required.

Sign, Date & Seal of Treating Physician / Surgeon

Sign & Date of EHS Card Holder



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Employee Health Scheme Drug Requisition Form OPD/IPD [E-DRF]

Name of Patient:- EHS ID:- Diagnosis:- <input type="checkbox"/> OPD	Age/Gender:- Cr.no:- Department:- Date:- <input type="checkbox"/> IPD Block:- _____
Name & Dept of the Employee:-	

S.no	Medicine Prescribed (Generic /Brand Name)	Dosage Required (Quantity in Pcs)	Dosage dispensed by central pharmacy (Quantity in Pcs/NA)	Dosage dispensed by Amrit pharmacy (Quantity in Pcs/NA)	Dosage purchased Outside (Quantity in Pcs)	Remarks
01						
02						
03						
04						
05						
06						
07						
08						
09						
10						
11						
12						
13						
14						
15						
Sign, Seal, & Date	<u>Treating Consultant & Resident</u>		<u>C.P In-charge</u>	<u>Amrit In-charge</u>		

***Put NA if not available**

Note:-

- Multivitamins, Multiminerals, Protein milk Powder, Dental, Cosmetics Products; etc will not be Considered for reimbursement.
- All Medicines should be prescribed in Generic Preferably.
- Medicine should be purchased in priority from C.P over Amrit Pharmacy, if the Medicines are not available in both Pharmacy ,then it can be Purchase from outside. **(If C.P and Amrit both provide NA)**.
- Only GST Invoice will be considered for reimbursement.
- Add additional E-DRF sheet, if needed.
- If EHS beneficiary consult multiple Specialties on the same day, a separate E-DRF form must be completed for Each Specialty.

Signature of Employee



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(An Institution of National Importance under Ministry of Health & Family Welfare)

भारतसरकार/ Government of India

'Employee Health Services (EHS) – AIIMS Deoghar'



EHS Employee Declaration Form

To,
The EHS Chairperson,
AIIMS Deoghar.

Date: _____

Sub-Information of dependent Employee's working in same institute reg.

Sir,

This is to inform you that I _____ and my Spouse

Mr./Mrs./Dr. _____ are working at AIIMS Deoghar. So, I

declare that my Spouse is dependent on me.

This is for your kind information & necessary actions.

Thank You.

Employee Name	
Employee ID	
Department/Office	
Designation	
Contact no	
E-mail ID	

Employee Sign

Employee's dependent Name	
Employee ID	
Department/Office	
Designation	
Contact no	
E-mail ID	

Employee's dependent Sign



Checklist for Settlement of Medical Claims through EHS Cell. (Checklist Form)

EHS Beneficiary should submit a filled-up application with supporting documents to EHS department for claiming reimbursement of medical expenditure and settlement of any advance within **06 (Six) months** of discharge from hospital / treatment taken.

Claim settlements documents should be submitted through proper channel. Competent authority for settling claim will be DDA and Account section.

Application should be submitted along with the following documents-

 or 	Sl.No.	Particular
	1.	Covering letter/ self-representation by beneficiary.
	2.	Duly filled Medical Claim /Reimbursement Form.
	3.	Checklist Form for reimbursement.
	4.	Photocopy of Valid AIIMS, Deoghar Smart EHS card.
	5.	Most recent payslip showing deduction of EHS monthly contribution.
	6.	OPD Prescription of treating medical officer/ Discharge Summary (For admitted patients)
	7.	Appropriately filled up, signed and sealed E-DRF form.
	8.	Appropriately filled up, signed and sealed E-ITRF form.
	9.	Summary of medical bills claimed (Master Sheet showing total claim value, filled in chronological order as per underneath format).



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'Employee Health Services (EHS) – AIIMS Deoghar'



Master Invoice Sheet						
Sl.No.	Bill Number	Bill Date	Bill Amount			
			In-house Bill Amt.	Outside Bill Amt. (B)	CGHS rate of (B) [for EHS Office Use]	
Aggregate Bill Amount			--- (A)		---(C)	
Total Bill Amount (A + C)						---
	10.	All the original bills (attested by treating Consultant & EHS beneficiary) in chronological sequence. [EHS beneficiary must keep the photocopies of all the bills for his convenience].				
	11.	In case treatment is taken in emergency;- (a+b+c)				
	a.	Permission copy of M.S/ Executive Director (if applicable) / Intimation copy to EHS Cell during emergency for approval of treatment outside.				
	b.	A self-explanatory letter from beneficiary, explaining emergency circumstances.				
	c.	Emergency treatment certificate from concerned hospital must also be submitted.				
	12.	Affidavit on stamp paper by claimant, no objection from any or legal heirs on stamp paper and copy of death certificate, <i>in case of death of card holder</i> .				
	13.	Photocopies of claim paper & affidavit on stamp paper <i>in case original papers have been lost</i> .				
	14.	Bank details (Salary Account Details only) of EHS beneficiary on the specified space of Claim Reimbursement Form.				
	15.	Utilization Certificate (Implant related).				

AMRIT PHARMACY

A UNIT OF HLL LIFECARE LIMITED.(A GOVT OF INDIA ENTERPRISE)
AIIMS,DEVIPUR,DEOGHAR,JHARKHAND (814152)

Non Availability Certificate

This is certify that following Medicine(s) are Prescribed by Dr. _____
is /are not available at AMRIT Pharmacy, AIIMS, Deoghar on(date): _____

S.no	Medicine (s) Prescribed (Generic/Brand Name)	Dosage Required (Qty in Pcs)	Dosages Dispensed (Qty in pcs)	Remarks
01				
02				
03				
04				

Patient Name -: _____

Cr.No -: _____

EHS ID -: _____

Dependent Of -: _____

For Amrit Pharmacy Sign &Seal

AMRIT PHARMACY

A UNIT OF HLL LIFECARE LIMITED.(A GOVT OF INDIA ENTERPRISE)
AIIMS,DEVIPUR,DEOGHAR,JHARKHAND (814152)

Non-Availability Certificate

This is certify that following Medicine(s) are Prescribed by Dr. _____
is /are not available at AMRIT Pharmacy,AIIMS,Deoghar on(date): _____

S.no	Medicine (s) Prescribed (Generic/Brand Name)	Dosage Required (Qty in Pcs)	Dosages Dispensed (Qty in pcs)	Remarks
01				
02				
03				
04				

Patient Name -: _____

Cr.No -: _____

EHS ID -: _____

Dependent of -: _____

For Amrit Pharmacy Sign &Seal



Letter No.: AIIMS/DEO/EHS/2024-25/ 87

Date: 28/03/2025

EHS Annexure 1

1. Registration Process for OPD and IPD Patients

a) OPD Registration for EHS Beneficiaries

- EHS beneficiaries holding the EHS Green Booklet, issued by the EHS Office, will be registered at the designated EHS Registration Counter.
- These beneficiaries are exempt from registration charges, meaning no payment is required for OPD registration (**zero charges payable by beneficiaries**).

b) IPD Registration for EHS Beneficiaries

- EHS beneficiaries possessing the EHS Green Booklet will be registered for inpatient department (IPD) services at AIIMS Deoghar.
- They will be exempted from admission charges and advance deposits for bed charges, meaning no payment will be required at the time of hospital admission (**zero charges payable by beneficiaries**).

2. Billing Procedures for Laboratory Services (OPD & IPD)

a) OPD Laboratory Services

- As of now, a separate Sample collection point for EHS beneficiaries in OPD is not established. Until its establishment, EHS beneficiaries will avail laboratory services similar to regular/general OPD patients.
- These services will be processed as similar to regular/general OPD patients, following the standard billing procedure applicable to regular patients.
- Reimbursement for these expenses will be provided as per the approved process.

b) IPD Laboratory Services

- EHS beneficiaries admitted as inpatients at AIIMS Deoghar will receive all in-house laboratory services free of charge.
- Their billing will be exempted, meaning they will not be required to make any payments for availing these services (**zero charges payable by beneficiaries**).

Page 1 of 2



Letter No.: AIIMS/DEO/EHS/2024-25/88

Date: 28/03/2025

EHS Annexure 2

1. **Revisit Stamp/Sticker Requirement:**
 - EHS treating Consultants must ensure that EHS patients obtain a Revisit Stamp/Sticker for consultation on the same day from the EHS Registration Counter.
 - The EHS Registration Counter will operate as per the OPD timing allotted by the competent authority.
2. **Restrictions on Prescriptions:**
 - EHS Consultants must not prescribe the following items unless laboratory reports confirm a specific deficiency:
 - Multivitamins
 - Multiminerals
 - This guideline follows the meeting held between the EHS Committee, ED Sir, and Dean Academics (Refer to MOM copy, Point No. 15 attached).
3. **Prescription Duration for Chronic Diseases:**
 - EHS treating Consultants must not prescribe oral medicines for more than three months at a time for chronic diseases.
 - Injectable medicines for EHS beneficiaries will not be issued for more than four days at a time for home use.
 - In cases where an EHS patient is unable to visit regularly, the EHS treating Consultant may issue injectable items for a maximum of two weeks, as per our policy.
 - The prescription duration is currently under review, and any changes will be communicated accordingly.
 - These guidelines are based on discussions in the meeting between the EHS Committee, ED Sir, and Dean Academics (Refer to MOM copy, Point No. 17 attached).
4. **Verification of Bills for Reimbursement:**
 - All medical/investigation bills submitted for reimbursement must be verified by the EHS treating Consultant only.
 - In case of any issues arising during the reimbursement process for a particular bill, the EHS Committee will constitute a committee of subject experts under the supervision of the Medical Superintendent for review.
 - The EHS treating Consultant will be invited for further clarification if required.

Basali

Page 1 of 2



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(An Institution of National Importance under Ministry of Health & Family Welfare)
भारतसरकार/ Government of India
'Employee Health Services (EHS) – AIIMS Deoghar'



Letter No: AIIMS/DEO/EHS/2025-26/59

Date: 25.08.2025

To,
The HOD
Department of Gynecology & Obstetrics
AIIMS Deoghar

(Through Proper Channel)

Subject: Guidelines/Criteria for Reimbursement of Expenses for In-Vitro Fertilization (IVF) Treatment under EHS, AIIMS Deoghar

Madam,

This is to inform you that the Employee Health Scheme (EHS) has been made operational at AIIMS Deoghar w.e.f. 1st January 2025. In the recent EHS Committee meeting, the guidelines laid down by the Central Government Health Scheme (CGHS), as per Office Memorandum No. Z.15025/5/2011-CGHS III/CGHS (P) dated 22nd November 2011, were discussed.

Accordingly, a copy of the said guidelines is enclosed herewith as **EHS Annexure-3** for your kind reference. These guidelines are to be followed while processing IVF-related claims under EHS.

If your department has any updated Office Memorandum or revised guidelines in this regard, it is requested to kindly share the same with the EHS Office (**Preferably in 7 days**), so that the latest instructions can be implemented.

This will ensure uniformity and hassle-free settlement of reimbursement claims for EHS beneficiaries.

With regards

(Dr. Abhijit Vinodrao Boratne)
EHS Chairperson
AIIMS Deoghar

25/08/2025
Dr. Abhijit Vinodrao Boratne
Chairperson
Department of EHS
AIIMS, Deoghar

Copy to (via email) for information:

- Executive Director (ED)
- Deputy Director Administration (DDA)
- Administrative Officer (AO)
- Medical Superintendent (MS)
- EHS Chairperson
- EHS Member Secretary
- HOD Department of Gynecology & Obstetrics (Advance Copy)

EHS Annexure - 3



Government of India
Ministry of Health and Family Welfare
Department of Health & Family Welfare
Nirman Bhawan, New Delhi 110 108

No: Z.15025/S/2011-CGHS IIVCGHS (P)

Dated, the 22nd November, 2011

OFFICE MEMORANDUM

Subject: Guidelines / Criteria for reimbursement of expenses for In-Vitro Fertilisation (IVF) treatment to CGHS beneficiaries and beneficiaries under Central Services (Medical Attendance) Rules, 1944.

The undersigned is directed to say that the Ministry of Health & Family Welfare has been receiving requests for providing clarifications as to whether the expenditure incurred on In-Vitro Fertilisation (IVF) treatment is admissible under CGHS, and if so, whether any guidelines have been laid down for reimbursement of the expenses incurred on IVF treatment.

(2) The matter has been examined by a Technical Committee of the Heads of Department of Gynaecology & Obstetrics of Government Medical Institutions, and based on the recommendations of the Committee, the following guidelines are laid down for considering cases for reimbursement of expenses incurred on IVF treatment by CGHS beneficiaries and beneficiaries under Central Services (Medical Attendance) Rules, 1944:-

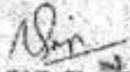
- (i) Requests for IVF treatment will be considered only on the basis of advice tendered by the Head of Department of Gynaecology & Obstetrics of a Government Medical Institution.
- (ii) Permission for IVF treatment to be undertaken may be given by the Head of Department in the Ministries / Departments on the recommendations of the Head of Department of Gynaecology & Obstetrics of a Government Medical Institution.
- (iii) IVF procedure will be allowed in a Government Medical Institution on the recommendations of the Head of Department of Gynaecology & Obstetrics of a Government Medical Institution.
- (iv) IVF procedure may be allowed, on a case to case basis, in a private medical institution if the institution is registered with the State / Central Government and has the necessary facilities including equipment and trained manpower for carrying out the procedure. It is, however, mandatory to obtain the recommendations of the Head of Department of Gynaecology & Obstetrics of a Government Medical Institution for permitting the procedure to be undertaken in a private institution.
- (v) There should be clear evidence of failure of conventional treatment before permitting IVF treatment procedure.

Contd. ...

B. Basu

Page ① of 2

- (vi) The age of women undergoing IVF treatment procedure should be between 21 and 39 years;
 - (vii) The woman has to be married and living with her husband;
 - (viii) The IVF treatment procedure will be allowed only in cases of infertility where the couple has no living issue;
 - (ix) Reimbursement of expenditure incurred on IVF procedure will be allowed upto a maximum of 3 (three) fresh cycles;
 - (x) An amount not exceeding Rs.65,000/- (Rupees sixty five thousand only) per cycle or the actual cost, whichever is lower, will be allowed for reimbursement. This amount will be inclusive of the cost of drugs and disposables and monitoring cost during IVF procedures;
 - (xi) As IVF treatment is a planned procedure, reimbursement cases can be considered by the Ministries / Departments only if prior approval was obtained by the beneficiary for undergoing the IVF treatment.
 - (xii) There will be a onetime permission for availing IVF treatment consisting of three cycles in total, which would be admissible to the beneficiary. The concerned Ministry / Department shall obtain an undertaking from the applicant that he / she has not claimed the reimbursement earlier from the Government of India in the past and will not claim it in the future.
3. These guidelines come into force from the date of issue of the Office Memorandum and reimbursement cases of IVF treatment undertaken after the issue of the Office Memorandum only can be considered by the Ministries / Departments.
4. This issues with the concurrence of Integrated Finance Division in the Ministry of Health & Family Welfare, vide Dy. No.C.1747/IFD (Health)/2011 dated the 21st November, October, 2011.


[V.P. Singh]
Deputy Secretary to the Government of India
[Tel: 2008 1831]

To

- 1 All Ministries / Departments, Government of India
- 2 Director, CGHS, Nirman Bhawan, New Delhi
- 3 All Additional Directors / Joint Directors of CGHS cities outside Delhi
- 4 All Pay & Accounts Officers under CGHS
- 5 Additional Director (Hqrs) / Additional Dy Dir Gen (Hqrs) / Additional Director (SZ) / Additional Director (CZ) / Additional Director (NZ) / Additional Director (EZ), CGHS, New Delhi

Confid...

Page ② of 2

Requisition to Earmark Bed for EHS Beneficiaries AiiMS Deoghar. 2/c

Floor	S.No	Department /(Block)	Total no of bed out of 750	Request for Earmark of bed for EHS beneficiaries	Remarks
Ground Floor.	1	Orthopedics (Block A)	30	2	
	2	Psychiatry (Block A)	10	1	
	3	Surgical Oncology (Block A)	20	1	
	4	Emergency (Block B)	30	(1+1) (Male+Female)	
	5	Paid Beds (Block E)	20	(2+2) (Pvt+Semi.Pvt)	
	6	PMR (Block E)	10	1	
Ground	7	Day Care (Ayush)	30	2	
1st Floor	8	ICU (Block A)	38	2	
	9	Ophthalmology (Block E)	20	1	
	10	Pediatrics (Block E)	30	1	
	11	Dermatology (Block E)	10	0	
2nd Floor	12	OBG (Block A)	30	2	
	13	NICU (Block A)	(25+1 Side Bed)	2	
	14	OBG & Gyane (Block E)	25	1	
	15	Urology (Block E)	30	2	
3rd Floor	16	ICU (Block A)	38	2	
	17	ENT (Block E)	20	1	
	18	Medical Onco +chemo (Block E)	25	1	
4th Floor	19	CTVS (Block A)	30	1	
	20	Cath lab (Block A)	8	0	
	21	Cardiology (Block E)	30	2	
	22	Gastro (Block E)	30	1	
5th Floor	23	Gen Surgery (Block A)	55	2	
	24	Gen Medicine (Block E)	55	3	
6th Floor	25	Pedia Surgery (Block A)	25	1	
	26	Neuro Surgery (Block A)	30	1	
	27	Neurology (Block E)	25	1	
	28	Endocrinology (Block E)	20	1	
Total			750	41	

AS
28-08-25

Dr. Borate
28/08/2025
Dr. Abhijit Vinodrao Borate
Chairperson
Department of EHS
AIIMS, Deoghar

+2 (in me Boot)
Total: 43