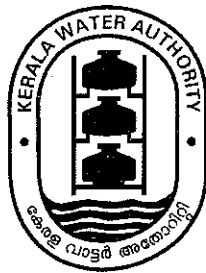


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# KERALA WATER AUTHORITY

Jala Bhavan

Thiruvananthapuram - 695 033

Kerala, India

No. KWA/HO/E11-6207/2015

Dated, 29.11.2019

## CIRCULAR

**Sub :- KWA-Estt.-Medical Re-imbursement -Further Instructions issued -Regular claims- Allopathic/Ayurvedic/Homoeopathic treatment -Regarding**

- Ref:-**
1. Govt.Letter No.19953/B1/11/WRD dated, 17.11.2011 of the Water Resources (WSB) Department.
  2. Kerala Water and Waste Water Authority Employees (Re-imbursement of Medical Expenditure) Rules 1985 (SRO No 334/86).
  3. Report on Inspection conducted by Finance (Inspection-NT-A) Department (No.1447362/2017/(WS-C) WRD)- Recommendations suggested by the Finance Inspection Wing.
  4. Resolution No 9783 of the 369<sup>th</sup> Board Meeting of KWA held on 21.02.2014.

With the introduction of Medical Insurance Scheme the employees of Kerala Water Authority are eligible for the Insurance coverage for the inpatient treatment of employees and dependants. In addition to this 50% of the Pay+DA will be sanctioned to meet the expenses in connection with outpatient treatment as per the existing Medical Re-imbursement Claim Rules in force [Kerala Water and Waste Water Authority Employees (Re-imbursement of Medical Expenditure) Rules 1985.]

During the inspection conducted by Finance (Inspection NT-A) Department regarding the issues of irregularities and malpractices in Medical Re-imbursement

bills by the staff in the Authority during 2011, the inspection team detected grave malpractices in claiming the medical re-imburement in certain offices. The main observation of the Inspection Wing was that the staff members had made false medical re-imburement claims using medical prescriptions issued by a particular doctor and the cash bill of the medicines are from a particular institution especially in the case of treatment under Ayurvedic system. Based on the inspection certain recommendations have been insisted by Finance Department and it has been directed to issue strict instructions for Medical Re-imburement claim for Ayurvedic and Homoeopathic treatment.

It is also noticed that uniform procedure is not seen followed in sanctioning the medical claims. This has resulted in criticism from the Audit as well. Hence, streamlining the procedure for sanction of medical claims is very much essential.

On the basis of the recommendations of Finance (Inspection NT-A) Department the following instructions are issued regarding Medical Re-imburement claim for strict compliance.

- 1) The re-imburement of medical expenditure can be claimed under any approved system of medicine, but no one shall be entitled to re-imburement under more than one system simultaneously.
- 2) The medical expenditure incurred by an employee may be re-imbursed by the Managing Director or an Officer to whom the powers are delegated by the Managing Director, based on a Certificate from the Head of the Office in which the employee is working to the effect that the charges claimed are reasonable and genuine having regard to the circumstances of the case.
- 3) An employee shall obtain the prior permission of the Managing Director for treatment outside the State.
- 4) Each and every medical bill is to be presented in proper form appended in the re-imburement Rule referred above duly filled up and signed by the claimant and also attaching all the requisite certificates including essentiality certificate from the recognized Medical Practitioner to be produced before the Sanctioning Authority under the Medical Re- imburement Rules 1985.

- 5) The Controlling Officer who sanctions the Medical Re-imburement claim shall confirm that the bills are from hospitals approved/recognized by the Government of Kerala for Ayurveda/Homoeopathy treatment.
- 6) The false drawal of the medical re-imburement bill will invite disciplinary action against the claimant. Upon notice of such an incident, the claimant shall be liable to remit the amount with interest of such claim to the Authority. The certificate to this effect is incorporated in the application form.
- 7) The prescription should be specific, especially in the case of Ayurvedic/Homoeopathic treatment indicating the nature of disease, dosage of medicine and duration of course of consumption. The bill produced should be checked in conformity with the prescription.
- 8) It is made clear that the acceptance of the medical re-imburement claim submitted by the claimant is always subject to scrutiny/objective satisfaction of the Controlling Officer/Sanctioning Authority. Hence, it shall be always open for the Controlling Officer/Sanctioning Authority to obtain opinion/scrutiny by the Authorized Government Institutions in specific cases to satisfy himself that the claim is genuine. A certificate is to be obtained from the applicant as well as the forwarding officer regarding the genuinity of claim by the Sanctioning Authority as per Medical Re- imburement Rules 1985.
- 9) Copies of all the documents viz., bills, prescriptions, essentiality certificates, declarations, certificate from the authority forwarding the bills etc should be kept in the office itself till Internal Audit and Audit by Accountant General are over.
- 10) A register should be maintained year-wise in all offices where the medical re-imburement claims are passed.
- 11) The Bills/Vouchers shall be countersigned by the Civil Surgeon/Medical Attendant. In case the Bills/Vouchers are not countersigned, it shall be accompanied by the prescription of the Medical Attendant/ ("Authorized Medical Attendant" means any Medical Officer serving under the State or Central Government or any Registered Medical Practitioner of any system of medicine registered as 'A' Class as per the Medical Re-imburement Rules 1985).

also noted maximal claims coming up during the months from January to March in a financial year indicating a bad trend.

Hence, all Sanctioning authorities are directed to exercise due diligence while scrutinizing the medical re-imbursement bills/claims before approval and to ensure that only genuine claims are admitted.

Acc:- Format of Application.

**Sd/-  
MANAGING DIRECTOR**

To

All the Chief Engineers/Superintending Engineers/Executive Engineers.

Copy to:- PA to MD/ PA to AM/PA to TM /CA to CE (HRD&GL)/CA to CE (Projects & Operations) /FM&CAO/ CA to DCE(GL)//DCE(Vig)/ DCE (Operations,Planning,Monitoring)/Secretary/ Senior AO/ IA/ AO(Admn)/ SSI/SSII/AO(Funds)/AO(Estt)/AO(RMC)/AO (Internal Audit) /SS (Pension) /SS (Funds)/PIO/CLO/E19/E11/E15.  
All are requested to circulated among the staff under control for information.

Copy to:- DBA for publishing in the website.

**Forwarded/By Order**

  
**Senior Superintendent**



- 12) The re -imbursement of medical claims in which treatment is undergone in Government hospitals as in the case of Ayurvedic and Homoeopathic treatment can be settled, on production of cash bills from those institutions. When cash bills from institutions other than the hospitals where the treatment was carried out are submitted for re-imbursement, a certificate regarding the non-availability of the medicine from the hospital in which the incumbent took treatment is compulsory.
- 13) Dental treatment from Private Dentist/Hospitals is not admissible. Major Dental operations or treatments for Gum diseases/Oral surgeries in Government Hospitals will be re-imbursed. Cosmetic surgery, braces, cost of dentures as well as treatment for Orthodontia and any Prostheses are not allowed.
- 14) All re-imbursements are required to be claimed within 3 months of the expenditure.
- 15) Any claim of medical re-imbursement for expenses incurred on consultation/purchase of medicines for medical treatment other than inpatient treatment, is to be supported by cash memos having names of the Doctor to whom referred, the name of the patient and the prescription of the Doctor.
- 16) The room rent eligible for re-imbursement shall be limited to 50% of the room rent actually paid by the employee.
- 17) (a) Re-imbursement for consultation charge is limited to a maximum of Rs.150/- on the first visit, followed by Rs.100/- for follow-up visit (minimum gap between two consultations shall be two weeks) in the case of Allopathic treatment.  
(b) Re-imbursement for consultation is limited to a maximum of Rs.100/- on the first visit, followed by Rs.50/- for follow-up visit (minimum gap between two consultations considered for Medical Re-imbursement is six months) in the case of Ayurveda/Homoeopathic treatment.

During the inspection, the Financial Inspection Wing had noticed that the incumbents along with their dependents had fallen ill on the same day and had undergone treatment under consultation of the same Medical Practitioner on every occasion, so as to claim the maximum benefit. The Finance Inspection Wing has