

महानगर टेलीफोन निगम लिमिटेड, मुंबई



MAHANAGAR TELEPHONE NIGAM LIMITED, MUMBAI

(A Government of India Enterprises)

कार्यकारी निदेशक का कार्यालय, 9वीं मंजिल, टेलीफोन हाउस, एमटीएनएल मार्ग, दादर (प.), मुंबई-400 028

O/o Executive Director, Welfare Section, 9th Floor, Telephone House,

MTNL Marg, Dadar (W), Mumbai - 400 028. Ph: 24377676; Fax: 24328386; 24311003

WL/110-23/Retd. Empl/CGHS/Enrollment/2017-18/34

DT. 15/12/2017

**MOST URGENT
TIME BOUND**

To,
SMs (Admin)/ SM (BW)/ SM (FC),
MTNL, Mumbai.

Sub: Enrollment of MTNL Retirees in either CGHS/ CGHS

Ref: MTNL/CO/HR-Medical/Retd Emp CGHS/ 2016/97, dt. 21.11.2017

With reference to the Corporate Office Letter, the clarification regarding availing of CGHS & CGHS facility is given below:-

1. "Once NOC for CGHS option is issued by MTNL, the retiree cannot revert back. The option of Insurance policy (CGHS) is available to only such retirees in whose case NOC for CGHS is not issued by MTNL".
2. Current TPA based Medical Insurance (CGHS) scheme is valid till 30.09.2018 only. "No retiree shall be refused for availing CGHS", however the registration in CGHS will be upto 20.12.2017 only.

The revised NOC Certificate (Certificate regarding Receipt of Central Civil Pension from Govt. of India) and Self Declaration/ Undertaking for availing CGHS facility is enclosed herewith.

WIDE PUBLICITY MAY BE GIVEN.

This issues with the approval of the Competent Authority.

Encl :- As above

Sr. Manager (Welfare & Sports)
MTNL, Mumbai.

अरिष्ठ प्रबंधक (कल्याण/खेल)

Senior Manager (Wel./Sports)

For infn. pl. महानगर टेलीफोन निगम लि. मुंबई.
For infn. pl. Mahanagar Telephone Nigam Ltd., Mumbai.
For infn. pl.

Copy to:

- (1) SM to ED, MTNL, Mumbai:
- (2) DGM (HR) MTNL C.O., New Delhi:
- (3) All PGMs/ Sr. GMs/ GMs/ CEBW, MTNL, Mumbai:
- (4) General Secretary, MTNKS, Mumbai.
- (5) Association and Union of Retired Executives & Non-Executives.

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MTNL Marg, Dadar (W), Mumbai - 400 028. Ph: 24377676; Fax: 24328386; 24311003

WL/110-23/Retd. Empl/CGHS/2017-18/28

DT. 19/07/2017

**MOST URGENT
TIME BOUND**

To,
All GMs/ CE(BW),
MTNL, Mumbai.

Sub: Change over of Medical Insurance Policy of Retired MTNL Employees to CGHS

Ref: (1) MTNL/CO/Med/Retiree/CGHS/2016/502, dt. 14.06.2016,
and endorsed on 16.06.2016

(2) WL/110-23/Retd. Empl/CGHS/2016-17/3, dt. 02.02.2017

(3) MTNL/CO/Med/Retiree/CGHS/2016/111 dt. 02.03.2017

In continuation of this office letter under Ref. No. 1 above, the CGHS facilities is being extended to Retired MTNL employees in whose cases **modified PPOs** are issued by CCA, **which includes corresponding Grade Pay and entitlement of wards in Private Hospitals empanelled under CGHS.**

The kind attention is invited to C.O. Letter dt. 14.06.2016, in which the Retired MTNL employees in whose cases **modified PPOs** are issued by Pr. CCA, are **mandatorily asked to apply for CGHS facility**, including those cases in which **modified PPOs get issued.**

The erstwhile Central Government employees, who got absorbed in MTNL and retired and currently in receipt of Central Civil Pension from Central Civil Estimates under '**Major Head - 2071**' are eligible to join CGHS. Their subscription rate and ward entitlement may be determined as per their PPO.

In order to avail CGHS facilities, the Retired MTNL Employees will have to follow the procedure as per requirement from CGHS, unit of Ministry of Head & Family Welfare, Directorate General of CGHS.

Following is the procedure for getting the CGHS Medical Facilities by MTNL Retired Employees:-

1. Retired MTNL employees whose modified PPOs issued shall have to fill-up the **FORM 'B'** (Application for CGHS Card for Pensioners of Central Government). **Details regarding submission of essential documents are mentioned in FORM 'B' itself.** (The copy of **FORM 'B'** is enclosed for ready reference and also available at: cghs.nic.in). The CGHS office shall inform payment of contribution of pensioners at the time of submission of Application after verification of all documents.
2. The concerned SM (Admn) shall issue the Certificate regarding receipt of Central Civil Pension from Government of India (Office of Pr. Controller, Communication Accounts, Maharashtra) DOT, after verifying the PPO issued by Office of Pr. Controller, Communication Accounts, Maharashtra in respect of the concerned Retired MTNL Employee, as they are getting Government Pension. **(Format of certificate is enclosed).** After issue of certificate, concerned SM (Admn) shall maintain the record regarding enrollment of retired MTNL employees with CGHS and submit the **daily report** to SM (Welfare), MTNL, Mumbai for onward transmission to Corporate Office.

...2..

3. The Retired MTNL employee has to submit the **FORM 'B'** personally to CGHS Office alongwith following documents in addition to the documents mentioned in **FORM 'B'**:-
- Certificate regarding receipt of Central Civil Pension from Government of India (Office of Pr. Controller, Communication Accounts, Maharashtra) (to be issued by concerned SM(A) – as per format enclosed).
 - Attested copies of modified PPO (issued by Office of Pr. Controller, Communication Accounts, Maharashtra), DOT.
 - The timing for submission of CGHS Form to CGHC Office is 10.00 a.m. to 1.00 p.m.**

Address of CGHS (Mumbai Office).

**OFFICE OF THE ADDITIONAL DIRECTOR
CENTRAL GOVERNMENT HEALTH SCHEME**


**Pratishtha Bhavan (Old CGO Building), Ground Floor, South Wing,
101, M. K. Road, New Marine Lines, Mumbai – 400 020.**

Website : www.cgismumbai.gov.in; cghs.nic.in;

- After getting CGHS card, the retired employee shall inform to the concerned SM (Admn) for maintaining record.
- The pensioner has to pay Contribution to CGHS office as per the rate defined by CGHS. After payment of Contribution by Pensioners to CGHS, the Retired MTNL employee shall submit the copy of Receipt issued by CGHS to concerned DM (Cash) for getting refund of **50% of the defined contribution for life time CGHS membership subject to minimum of Rs.20,000/- and maximum of Rs.40,000/-**. Thereafter the concerned DM (Cash) shall **not extend the OPD facility to Retired employee** and the said report shall be submitted to concerned SM (Admn) for onward transmission to SM (Welfare), MTNL, Mumbai, on or before 5th day of each calendar month.
- The above CGHS facility is applicable only to those Retired MTNL employees who have received **modified PPO which includes corresponding Grade Pay and entitlement of wards in Private Hospitals empanelled under CGHS**, from Office of Pr. Controller, Communication Accounts, Maharashtra, Government of India.
- The concerned SM/ DM/ AM (Admn) shall be the NODAL OFFICER for smooth functioning of CGHS facility to Retired MTNL Employees.**
- The above guidelines in respect of CGHS registration by the Retired Employees who have been issued modified PPO by Pr. Controller, Communication Accounts, Maharashtra (CCA), DOT **may be given wide publicity** and concerned SM/ DM/ AM (Admn) is requested to inform the concerned Retired employees accordingly.

Hindi Version will follow.

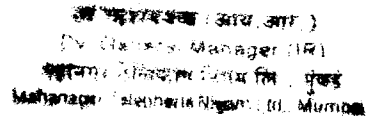
This issues with the approval of the Competent Authority.


19/7
Dy. General Manager (IR)
MTNL, Mumbai.

Encl: As above.

Copy to:

- SM to ED, MTNL, Mumbai: For infn. pl.
- All PGMs, MTNL, Mumbai: For infn. pl.
- All Sr. GMs, MTNL, Mumbai: For infn. pl.
- DGM (Pension)/ SM (WFMS)/ SM (FC): For infn. pl.
- General Secretary, MTNKS, Mumbai.
- Association and Union of Retired Officers & Employees.


Dy. General Manager (IR)
MTNL, Mumbai.

MTNL/CO/Med/Retiree/CGHS/2016/111
Dated 02/3/2017

OFFICE ORDER

Sub: Enhancement of MTNL contribution towards change-over of Medical Insurance Policy of Retired MTNL Employees to CGHS in view of 7th CPC.

As per the approval of Board in 322nd MTNL Board meeting held on 14.02.2017, the MTNL contribution towards change over of Medical Insurance Policy of retired MTNL employees to CGHS in view of 7th CPC, in the form of reimbursement of 50% of the defined contribution for life term membership has been enhanced subject to minimum of Rs 20,000/- and maximum of Rs 40,000/- (keeping in mind the minimum and maximum applicable contribution).

This approval is in supersession of earlier approval of the board taken in 314th meeting held on 30.05.2016 wherein the reimbursement was minimum Rs 6000/- and maximum Rs 15,000/- in view of the revision of rates of subscription under CGHS as per Ministry of Health and Family Welfare OM No. S.11011/1/2016-CGHS(P)/EHS dated 09.01.2017.

This approval shall be applicable to those retired MTNL employees who have deposited the CGHS contribution as per new rates.

R.K. Tanwar
DGM (HR)
MTNL Corporate Office

Copy to:

1. ED MTNL, Delhi/Mumbai.
2. GM (Fin), Delhi/Mumbai/CO - for necessary action.
3. GM (Admn), Delhi/Mumbai - for necessary action.
4. PS to CMD/Dir (HR)/Dir (Tech)/Dir (Fin) for information pl.
5. MTNL Mazdoor Sangh, Delhi/ MTN Kamgar Sangh, Mumbai

Handwritten: Sw (road) 2/3/17

जनसंवादी विद्युत नग निगम एम. टी. एन. लि., (मुंबई) अवकाश नं. Award No.
06 MAR 2017 JAI 12A
Give to the Executive Director M.T.N.L. (Mumbai)

" Revised "

(To be issued by concerned SM (Admn) for pensioner)

Date: _____

TO WHOMSOEVER IT MAY CONCERN

**Certificate regarding Receipt of Central Civil Pension
from Govt. of India**

This is to certify that after verifying the PPO issued by Office of Pr. Controller, Communication Accounts, Maharashtra (CCA) of Shri/Smt. _____, Staff No. _____ (as per PPO), Design _____ retired from MTNL on _____, GM Unit _____ and is in receipt of Central Civil Pension from Central Civil Estimates under 'Major Head – 2071' of Government of India (Pr. Controller, Communication Accounts, Maharashtra), vide PPO No. _____

He/she is not being paid any fixed monthly medical allowance through pension.

On issue of certificate for obtaining CGHS facility, MTNL shall not extend MTNL Medical facility (IPD & OPD) to the above retired employee.

This certificate is issued to him/her for availing CGHS facility.

Sr. Manager (Admn) _____
MTNL, Mumbai.
(Signature with Office Seal)

Copy to:
Concerned DM (Cash/Works): For record purpose.

(To be given by Retired Employee to concerned SM (Admn) for record purpose)

Date: _____

SELF DECLARATION / UNDERTAKING

I, Shri/Smt. _____,
Staff No. _____ (as per PPO), Design _____ retired from
MTNL on _____, GM Unit _____ PPO No.
_____, hereby applied for CGHS voluntarily.

I am not receiving any fixed monthly medical allowance through pension.

I will not apply to MTNL for availing IPD & OPD (medical) facility after issue of NOC certificate (Certificate regarding Receipt of Central Civil Pension from Govt. of India).

I will intimate regarding availing CGHS facility to concerned SM (Admn).

Signature of Retired Employee

CGHS Card No while in service : _____

APPLICATION FOR CGHS CARD for PENSIONERS OF CENTRAL GOVERNMENT

1. Name of the Applicant: _____

2. Category Pensioners Others (Pl. Specify)

3. Name of Department / Service from where retired _____

4. Last Pay _____ Basic Pension : _____
(In case of Pensioners)

5. Residential Address: _____

6. Telephone Number: (R) _____ (M) _____

7. e-mail ID _____

8. Date of Superannuation: _____ / _____ / _____
Date Month Year

9. Details of Family

(* Please see definition of Family before filling up this column)

S.No.	Name of Family member	Name in Hindi	Relation ship to CGHS Card Holder* Self	Date of Birth# (Compulsory)	Blood Group (optional)

(* Please attach Proof of age of Persons mentioned above)

10. Are all the persons whose names are given above, are dependant upon you and are residing with you? Yes / No

(Please attach proof of their staying with you, like copy of Ration Card / Election ID / Pass Port / Identity Card issued by College / School / University / Bank Pass Book, etc.,)

11. Paste one ID Card size of Photograph of each member of Family (including self) whose names are proposed to be included as part of your family in the space given below.

S.No Name	S.No. Name	S.No..... Name	S.No..... Name
S.No Name	S.No. Name	S.No..... Name	S.No..... Name

I Undertake to intimate to CGHS immediately if there is any change in dependency criteria of my family members included in this application form. If I fail to intimate and if the CGHS comes to know of the change then the CGHS facility is liable to be withdrawn by the CGHS and the CGHS and / or appropriate authority will be free to initiate any action against me.

I Undertake to surrender the CGHS Card(s) on ceasing to be eligible for CGHS benefits.

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.

- End. Proof of Residence / Stay of dependents
- Proof of age of son/ Disability certificate
- Surrender Certificate of CGHS Card while in service
- Attested copies of PPO & Last Pay Certificate

DD bearing No..... dated..... drawn on Bank Branch
..... / Postal Order No. for Rs.....

Signature of Applicant.

To
The Additional Director, CGHS(HQ), 9, Bikaner House Hutments, Shahjahan Road, New Delhi.

(to be filled by CGHS)

Verified - by Authorized Signatory, CGHS(HQ) valid upto..... / for Rest of Life

CGHS Dispensary Allotted

Entitlement : General Ward / Semi-Private Ward / Private Ward

Signature

INSTRUCTIONS

Definition of Family:

- (1) Husband / Wife* (* First wife only)
- (2) Dependant 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:

1	Son	Till he starts earning or attains the age of 25 years , whichever is earlier.
2	Daughter	Till she starts earning or gets married, whichever is earlier, irrespective of the age limit, whichever may be earlier.
3	Son suffering from any permanent disability of any kind (physical or mental) as defined below	Irrespective of age limit
4	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
5	Dependent Minor brother(s)	Up to the age of becoming a major

*For the purpose of availing CGHS 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 1995) WHICH IS REPRODUCED BELOW:

*(1) "DISABILITY" MEANS

(I) BLINDNESS

(III) LOW VISION

(II) LEPROCY CURED

(IV) HEARING IMPAIRMENT

(V) LOCOMOTOR DISABILITY

(VI) MENTAL RETARDATION

(VII) MENTAL ILLNESS

(VIII) Dependency

Members of family (other than spouse) whose income is less than Rs. 3500/- DA per month are treated as dependents and are normally residing with CGHS beneficiary.

The following documents are to be enclosed:

- (i) Proof of Residence / Stay of dependents - (copy of 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)
- (iv) Surrender Certificate of CGHS Card while in service.
- (v) Attested copies of PPO & Last Pay Certificate
- (vi) Contribution by Pensioners should be made by Bank Draft (Scheduled Banks) Payable in Mumbai in favor of
 "Pay & Accounts Officer, Ministry of Health & Family Welfare, Mumbai"
- (vii) A certificate of non-drawals of medical allowance of Rs.300/- per month from Bank/Office
- (viii) One Individual Passport size Photos pasted on Form should be attested by Gazetted officer & 2 Group photos with form submit to office