

NEWS LETTER – RSCWS / CHD

Quarterly News Bulletin of the RAILWAYS SENIOR CITIZENS WELFARE SOCIETY (Regd.) CHANDIGARH - PANCHKULA & MOHALI

(Estd. 1991, Regd. No. 1881 under Societies Registration Act)

H.O. 32, Phase-6, Mohali (Chandigarh) – 160055 (Ph- 0172-2228306 & 9316131598)

President RSCWS M.S. BATRA

Editor & Secretary RSCWS – HARCHANDAN SINGH

1543, Sector-42, Chandigarh (Ph: 2604713 & 9988323369)

32, Phase-6, Mohali (Ph- 2228306 & 9316131598)

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FOR MEMBERS ONLY

Disclaimer of News Reports by Pay Commission

Reports have appeared in a section of media that Sixth Central Pay Commission has submitted interim reports and some newspapers have even published replacement scales supposedly recommended by the Commission. It has been clarified by the Pay Commission that the Commission has not submitted any interim report or recommendations. It may be recalled that the Commission was notified on October 5, 2006 and is expected to give its report within the stipulated time of eighteen months (*i.e by April, 08*).

Multiple Studies by Sixth Pay Commission

As per news released by the Sixth Pay Commission following studies have been taken up by the Sixth Pay Commission:

- *Examining the Feasibility of Performance Related Pay (PRP) in Government*
- *Estimating Compensation Package for Government Employees and the Cost to the Government*
- *Study on Terminal Benefits of Central Government Employees.*

Study on Terminal Benefits of Central Government Employees

Long Term Measures for Achieving Reduction in the Liability of the Government towards Terminal Benefits of Central Government Employees.

Aim of the study: The study, in the light of the existing scheme of retirement benefits of Central Government Employees, including All India Services, Armed Forces personnel and employees of UTs, appointed before 1.1.2004, will make an assessment of the existing and future liability of the Government towards these benefits in the next three to four decades keeping in view the age profile of the workforce and suggest effective ways and means of reducing the budgetary liability on this account. Towards this aim, suitable changes in the existing scheme of terminal benefits could also be suggested.

POWERS OF GENERAL MANAGERS ENHANCED FOR MEDICAL REIMBURSEMENT

(Extracts of Railway Board's letter no. 2007/H/6-4/Policy-1 dated 26.11.2007 & Amendment to Para 648 of IRMM)

Powers of General Managers of Railways & PUs have been enhanced for settlement of cases of Reimbursement of Medical Expenses, submitted by serving/retired Railway employees on treatment of self & and family members/dependents, as under:-

1. Treatment in Non-Recognized / Recognised private hospital & dispensaries run by philanthropic organisations without proper referral by Authorised Medical Officer (AMO) in emergency cases, - Rs Two lakh in each case.
2. Referred emergency cases to private non-recognised hospitals - Also Rs Two lakh in each case.
- *if treatment is not available at Railway hospital nor at recognised private hospital.*
3. Release of advance directly to hospital as beneficiary has been specifically referred to - Rs Two lakh in each case

NOTICE-CUM-INVITATION

***WE CORDIALLY INVITE ALL THE MEMBERS OF RSCWS & THEIR SPOUSES
AND OTHER SENIOR CITIZENS OF RAILWAYS TO THE***

***ANNUAL GENERAL BODY MEETING & MEDICAL CAMP
OF THE***

***RAILWAY SENIOR CITIZENS WELFARE SOCIETY
at FORTIS HEART & MULTI-SPECIALTY HOSPITAL,***

Phase 8, Mohali - (AUDITORIUM, 3RD FLOOR, OPD SIDE)

on MONDAY, 21ST JANUARY, 2008, FROM 10 AM TO 1 PM

**** SPECIALISTS FROM FORTIS HOSPITAL WILL EXAMINE & ADVISE THE MEMBERS***

****BONE DENSITY TEST WILL BE CONDUCTED***

****MEMBERS ABOVE 65 YEARS & 80 YEARS OF AGE WILL BE HONOURED***

Members are requested to Join us for Lunch after the Camp

Please be punctual. Test & Registration will start at 10 am

M. S. Batra, President, RSCWS

1543, Sector 42, Chandigarh (Ph.2604713, 9988323369)

Harchandan Singh, Secretary, RSCWS

32, Phase 6, Mohali (Ph.2228306, 9316131598)

ORDERS OF RAILWAY BOARD ON STAFF MATTERS

Copies of enclosures of Rly. Bd's letter No. RTICell/2007/968 dated 2.11.2007 & 2006/H-1/13(RTI) dated 17.4.07

To Sh Harchandan Singh, Secretary RSCWS under RTI Act, 2005

ADVANCE CORRECTION SLIP TO PARA 648 of IRMM 2000

Add (3) Para 648 (**PROCEDURE FOR TREATMENT UNDER EMERGENCY**) as under

REIMBURSEMENT OF MEDICAL EXPENSES- PROCEDURE OF DISPOSAL

The issue of bringing in objectivity, consistency and transparency in disposal of reimbursement cases, where the treatment has been taken in emergency without consultation with the Authorized Medical Officer, has been under consideration of the Board

The Railway Board after thorough review of the whole subject of reimbursement has taken the following decisions which are to be implemented with immediate effect.

Any instructions on this subject as available in IRMM 2000 or any office order issued prior to this office order and will stand modified accordingly.

I The cases to be considered for sanction of reimbursement claim

To provide proper medical treatment, the Indian Railway Health Care Delivery system has 121 number of Railway Hospitals and 586 No. of Railway Health Units established all over India. In addition to this, all Govt. Hospitals and more than 15 private hospitals all over the country have been recognized to provide necessary medical treatment to Railway beneficiaries.

As per extant rules, a railway beneficiary must report to Railway Medical Officer for his/her and dependents' medical treatment. The Authorized Medical Officer will make necessary arrangements for medical treatment through Railway Hospital/Govt. Hospital / Pvt. Recognized Hospital. In exceptional situations, CMOs of Zonal Railways can obtain special permission from Railway Board for treatment in any Private Hospital on case to case basis. Hence, there is no scope available for any railway beneficiary to go to any private hospital himself/herself or their dependents on their own volition, except in case of real emergency situation.

"Emergency" shall mean any condition or symptom resulting from any cause, arising suddenly and if not treated at the early convenience, be detrimental to the health of the patient or will jeopardize the life of the patient. Some examples are- Road accidents, other types of accidents, acute heart attack etc. Under such conditions, when the Railway beneficiary feels that there is no scope of reporting to his/her authorized Railway Medical Officer and avails treatment in the nearest and suitable private Hospital, the reimbursement claims are to be processed for sanction, after the condition of the emergency is confirmed by the authorized Railway Medical officer ex-postfacto.

In order to establish the emergency condition, following parameters are to be examined on record:-

(a) Admission details:-

- (i) Date and time of admission.
- (ii) Admitted through OPD service/ emergency service.
- (iii) Admitted to an ICU bed or general bed or cabin bed.

(b) Clinical findings at the time of admission. Following findings should be made available and critically evaluated:-

(i) Pulse rate.	(vi) Any other feature of shock.
(ii) B.P.	(vii) Body temperature
(iii) Level of consciousness	(viii) Extant of external wound
(iv) Any convulsive feature.	(ix) Extant of active bleeding.
(v) Urine output	(x) Extant of Chest pain or pain in other parts of the body.

I Types of medical treatment given immediately after admission.

- (i) List of Emergency medicines used immediately after admission.
- (ii) Type of surgical procedure done immediately after admission.

II Calculation of the amount of reimbursement to be sanctioned out of the claimed amount:-

Once the emergency is established beyond doubt, then the case should be further processed for calculating the amount/money to be sanctioned.

For that, following guidelines are given:-

- a) Treatment taken in Govt. Hospital – Full admissible amount should be recommended for sanction.
- b) Treatment taken in Recognized Private Hospital for an ailment for which it is recognized – Rate as approved by Railway should be processed for sanction.
- c) Treatment taken in a Recognized Private Hospital but for an ailment for which it is not recognized or treatment taken in a non- recognized Private Hospital:-Reimbursement should be made at the CGHS rates of that city or nearest city. CGHS (Central Govt. Health Scheme) approved rates are to be recommended/processed as an upper limit for sanction.

III The approved rates of private hospitals recognized by Railway should be put on the Web sites of the Zonal Railways so that at all levels of processing/sanction these are accessible to all concerned.

IV In Medical Science, no list can be fully exhaustive. Hence, it is likely that there will be few occasions when a claim has been submitted which is not appearing exactly in the CGHS rate list. On these cases, the MD/CMS/MS in charge of Divisions will apply their mind and will come to a logical conclusion. Then, they will pass a speaking order to certify the rate/s being recommended, in consultation with Associate Finance.

V All the reimbursement cases be processed as per check-list issued earlier to avoid back reference.

VI These instructions shall be effective from the date of issue of this letter. Past cases, already decided, shall not be re-opened.

(Authority Railway Board's letter no No. 2005/H/6-4/Policy-II dated: 31.01.2007)

Refund of Excess Amount of Rail Vihar Phase 1, Panchkula

(Extract of letter No. IRWO/AR/PKL-Pt2, Dated: October 11, 2007 to Shri Harchandan Singh Chandigarh
Reg. Information sought under RTIU Act, 2005 – Refund of Excess Amount.

It may, be advised that IRWO still has a balance of Rs.151 lakh as project fund of Panchkula Ph.I. The accounts of the project could not be closed due to pending liabilities of on account of court cases. On conclusion of the Court Cases, balance amount including the interest earned on it shall be refunded to the allottees.

MEDICAL CONDITION CONSIDERED AS EMERGENCY BY RAILWAYS

(Rly. Bd's letter No.2006/H-1/13(RTI) dated 17.4.07 (RTI Cell / 2007/60) to Sh Harchandan Singh, under RTI)
(Reproduced on popular demand)

Q (1). Whether following conditions are considered to be an "emergency" by the Railways, for reimbursement of medical expenses for treatment in Private/Government Hospitals;

CONDITIONS OF EMERGENCY

- * Acute Cardiac Conditions/Syndromes including Myocardial Infarction, Unstable Angina, Ventricular Arrhythmias, Paroxysmal Supra-ventricular Tachycardia, Cardiac Tamponade, Acute Left Ventricular Failure/Severe congestive Cardiac Failure, Accelerated hypertension, Complete dissection.
- * Vascular Catastrophes including Acute limb ischemia, Rupture of aneurysms, medical and surgical shock and peripheral circulatory failure.
- * Cerebro-Vascular Accidents including Strokes, Neurological Emergencies including coma, cerebro meningeal infections, convulsions, Acute paralysis, Acute visual loss.
- * Acute respiratory Emergencies indulging respiratory failure and decompensated lung disease.
- * Acute abdomen including acute obstetrical and gynecologist emergencies
- * Life threatening injuries including Road traffic accidents, Head Injuries, Multiple Injuries, Crush Injuries and Thermal Injuries.
- * Acute poisoning and Snake bite
- * Acute endocrine emergencies including Diabetic Ketoacidosis
- * Heat stroke and cold injuries of Life threatening nature
- * Acute Renal Failure
- * Severe infections, leading to life threatening sequel-including Septicemia, disseminated TB.
- * Any other condition, in which delay could result in loss of life or limb.

Ans. All the conditions enlisted in the application as "emergency" (under ECHS) are considered as emergency conditions by Railways also.

While issuing the circular No. 2005/H/6- 4/Policy-11 dated 31.01.07 by Railway administration, all the conditions (under ECHS) have been included and considered by defining in a separate pattern. The pattern in which they are considered is given in the above mentioned circular.

(Copy of the Amended Rules vide Board's letter dated: 31.01.07 are reproduced on Page 2 for ready reference).

Procurement of Hearing Aid

Copies of enclosures of Board's Letter No. 2006/H-1/13/RTI dated 03.10.2007, to Shri Harchandan Singh under RTI
Railway Board's Letter No. 2005/H/6-4/Policy dated 06.07.2007

Sub: Enhancement of powers for procurement of Hearing aid.

Arising out of demand raised by AIRF and partial modification of Board's letter No. 2000/H/6-4/Policy dated 25.7.2000, it has been decided that the ceiling on powers delegated to sanction the cost of hearing aid, as specified in Para 667 (Hearing aids) of Indian Railway Medical Manual, 2000, may be raised from Rs.5,500/- to Rs.20,000/- per case.

2. The cases where the cost of Hearing Aid exceeds the limit of Rs.20,000/-, the same would continue to be referred by Chief Medical Director concerned to the Ministry of Railways duly concurred in by their FA&CAO for consideration and approval.

ADVANCE CORRECTION SLIP TO PARA 667 of IRMM 2000 Amendment to Para 667 - Hearing Aids

The existing para 667 may be corrected to read as under

"Rs.20,000/- or the cost of Hearing Aid, whichever is lower, can be reimbursed by the Chief Medical Directors. The Administrative authority would make the payment involved direct to the supplying agency and not to the Railway employee concerned. The cases where the cost of Hearing Aid exceeds the limit of Rs.20,000/-, the same would continue to be referred by Chief Medical Director concerned to the Ministry of Railways duly concurred in by their FA&CAO for consideration and approval.

(Authority Board's letter No.2005/H/6-4/Policy dated 06.07.2007)

NO PROPOSAL TO RAISE RETIREMENT AGE

As per Press Statement issued by the Department of Personnel & Training, Ministry of Personnel, Public Grievances and Pensions, there is no proposal before the Government regarding raising the retirement age of Central Government employees from 60 years to 62 years.

MEMBERS, RSCWS! SUBSCRIPTION FOR 2008 IS DUE. PLEASE PAY IT EARLY

IF YOU HAVE YET NOT PAID YOUR SUBSCRIPTION OF RSCWS FOR 2007

**YOU ARE REQUESTED TO PAY THE SAME ALSO EARLY @ Rs 150 P.A. OR SEND IT BY CHEQUE TO
Sh. K. S. Bhandari, Treasurer, RSCWS, # 3098, Sector 22 D, Chandigarh (Ph. 2711641 & 9815012641)**

TAX QUARIES**Submission of Form 15-H to Banks & Post Office Required to avoid Tax Deduction at Source**

Q. 1 May I know whether my wife, aged 66 years (Sr. citizen) can submit Form 15-H to the bank or post office to avoid T.D.S. She has joint FDs with her husband where her name comes first and the husband's second. Since her name comes first, it becomes her own interest income. Since she is a housewife, her savings are from her husband, brothers and other relatives etc. Besides this there is no source of income.

Ans. **Your wife being a senior citizen can submit Form 15H so as to enable the Post Office not to deduct the tax at source.**

Q. 2 I am a Sr. citizen with my present total taxable income without availing any rebates under Section 80C etc. Below Rs.1,95,000/- p.a. I am filing my I.T. returns every year without any tax liability. I have some interest income in SCSS A/c from a bank. The bank has started deducting TDS on this. Is it permissible to file form 15H with the Bank for not deducting TDS and simultaneously continue filing the I.T. returns every year? Can both these actions run together every year as long as needed in above case?

Ans. **Yes, you can file Form 15H with the bank. If the said form is filed, the bank would not deduct TDS on the interest income accruing to you. I may add that such form will have to be filed every year for this purpose. The filing of income tax return is not affected by filing Form 15-H. The filing of return is obligatory under Section 139 of the Income Tax Act 1961 (The Act). As against this filing of Form 15H is an option available to a senior citizen. He may choose not to file the Form 15-H.**

Senior Citizens Saving Scheme & 5 Year Deposit in Post Offices up-to 1 Lakh to be Exempted from Income Tax, Maturity Bonus on MIS to be 5%

Government has decided to exempt from Income Tax from next year, the deposits up-to Rs 1 Lakh in Senior Citizens Savings Account & 5 years Deposits in Post Offices (at par with Banks). It has also been decided give a Maturity Bonus of 5% on MIS (Monthly Income Scheme) of Post Offices.

Pension Account Allowed in Post Offices Also

By a recent amendment, Post office Saving Account Rules have been amended vide which-

a) A pensioner can open a pension account (in a Post Office) either individually or jointly with his/her spouse in whose favour an authorization for family pension in the Pension Payment Order.

SCHEMES FOR MEDICAL INSURANCE OF SENIOR CITIZENS

Insurance is a form of long-term savings for senior citizens. Medical insurance enables senior citizens to pay for health checkups, emergency medical costs and long-term treatment. The income tax benefit on insurance premiums is up to Rs. 15,000 under Section 80 D of the Income Tax Act, as on March 31, 2007. Medical insurance is provided through several private insurance companies and four public sector general insurance companies. These are: National Insurance Company, Oriental Insurance Company, New India Assurance Company & United India Insurance Company
The National Insurance Company offers the Varistha Mediclaim Policy for senior citizens. This policy covers hospitalization and domiciliary hospitalization expenses under Section I as well as expenses for treatment of critical illnesses, if opted for, under Section II. Diseases covered under critical illnesses are coronary artery surgery, cancer, renal failure, stroke, multiple sclerosis and major organ transplants. Paralysis and blindness are covered at extra premium.

Oriental Insurance Company provides a Comprehensive Health Insurance Scheme, a Group Insurance Policy and an Individual Mediclaim Policy. These policies pay for hospitalisation or domiciliary hospitalisation of the insured in case of a sudden illness, an accident or surgery. These conditions should have arisen during the policy period.

The Mediclaim Policy available through New India Assurance Company allows any Indian between 5-80 years to be insured as on March 31, 2007. This policy provides for cashless hospitalization in India for the treatment of any illness, disease or accidental injury suffered during the policy period. The payment of claims is made through third party administrators who have been empanelled by the company.

United India Insurance Company offers a Mediclaim Policy that covers anyone between the ages of 5-75 years. The policy pays for actual hospitalization expenses of various types subject to a maximum of Rs. 15,000 - Rs. 5,00,000, as on March 31, 2007. This limit depends upon the sum chosen by the insured at the inception of the policy.

Life Insurance Corporation came out with a special 'Nav Prabhat' scheme in 2001 for senior citizens. It provides for risk cover at a comparatively low cost and relief for disability arising due to accident or illness. It also has an option for life pension after maturity of the policy.

SENIOR CITIZENS OF RAILWAYS – FOR YOUR OWN BETTERMENT –

BE ACTIVE MEMBERS OF RSCWS &

STRENGTHEN RAILWAY SENIOR CITIZEN WELFARE SOCIETY CHANDIGARH

JOIN ALL MEETINGS SEMINARS & MEDICAL CAMPS ETC. WITH YOUR SPOUSE & OTHER COLLEAGUES

KEEP YOURSELF POSTED WITH LATEST GOVERNMENT ORDERS REGARDING RETIRED EMPLOYEES

PAY YOUR SUBSCRIPTION @ Rs 150 P.A. OR SEND IT BY CHEQUE TO

Sh. K. S. Bhandari, Treasurer, RSCWS, # 3098, Sector 22 D, Chandigarh (Ph. 2711641 & 9815012641)

PRINTED MATTER

If undelivered, please return to :-

**RAILWAY SENIOR CITIZENS WELFARE SOCIETY (Regd)
32, Phase 6, Mohali – 160055 (Ph 0172-2228306, 9316131598)**