Ref.: GSO/MG/CHSS/2026/SOP/Version: R - 0 May 06, 2026

OFFICE MEMORANDUM

Sub.: Standard Operating Procedure for DAE CHSS Dispensaries at Chennai

*****

GSO has been administering the Contributory Health Service Scheme (CHSS) for serving employees of DAE units of Kalpakkam and retired employees covered under the CHSS, Kalpakkam Scheme. At the outset it may be noted that CHSS framed for Mumbai has been extended mutatis mutandis to Kalpakkam. Therefore, all the ground rules and basic features of the Mumbai scheme will be applicable.

High numbers of representations are being received from the retired beneficiaries with regard to rules and procedures for getting referral letters, reimbursement of claims towards purchase of medicines, delay in process of claims, emergency treatments and various other issues related to administering of CHS Scheme. These representations have been fully, properly and carefully considered in accordance with the extant rules, procedures and established practices governing CHS Scheme. It is envisaged to develop a well-coordinated and integrated approach to mitigate the grievances to the extent feasible within the frame work of the CHS Scheme.

Accordingly, the following **Standard Operating Procedure** is framed to streamline the administrative processes of CHSS. The same shall apply to all CHSS beneficiaries, which will not only serve as a guide to all concerned in matters pertaining to referral and reimbursement but will also contribute to handling CHSS matters in the best possible manner.

1. **Information about facilities available under CHSS at Chennai:**

a) The CHSS Clinic shall be an extension of the healthcare facility of DAE Hospital, Kalpakkam and will function similarly, as per DAE-CHSS and GSO, Kalpakkam rules.

b) The Clinics shall be functioning as per the timings given below:

DAE Clinic	Timing	Working Days
Pallavaram	From 09.00 hrs to 17.30 hrs	Monday to Saturday
IMSc	From 09.00 hrs to 17.30 hrs	Monday to Saturday

c) Visiting hours of Medical Officers / Changes in timings of CHSS Clinics at Pallavaram and Taramani (IMSc Campus) will be displayed at the clinic.

d) The beneficiaries can obtain online tokens. They can book appointment by accessing Online Hospital Appointment System. The online portal can be accessed from anywhere over internet using browsers like Google Chrome, Microsoft Edge and Mozilla Firefox etc. The portal will be accessible using multiple devices like smartphones, desktops, laptops and tablets. The URL

for accessing the Online Hospital Appointment System is https://chss.igcar.gov.in/. The beneficiaries can also obtain tokens in person at the clinics.

e) The following Services shall be available through the Clinics at Chennai:

i. Basic / regular consultation and treatment for all beneficiaries with a valid CHSS medical card.
ii. In case the Medical Officer deems it essential, medical treatment at referral hospitals identified by CHSS, Kalpakkam, as per the guidelines contained herein.
iii. Pharmacy services will be open on all days except Sundays and public holidays, at Pallavaram clinic.

f) The current list of referral hospitals and the specialisation(s) is given in **Annexure - I.** As and when there is a change in Annexure, the same will be displayed in the hospital website. The list displayed in the website shall be treated as final for all purposes.

g) An illustrative list of non-permissible items is given in **Annexure – II.**

2. Procedure for availing Medical Treatment including Hospitalization:

a) The beneficiary may approach the on duty Medical Officer at the Chennai Clinics during working hours or the AMAs / Registered Medical Doctors nearest to their residence for treatment.

b) If the medical Officer, based on his judgement, is of the opinion that the beneficiary needs further medical treatment, he may recommend to DAE Hospital, Kalpakkam for referral. Accordingly, a decision regarding issue of referrals shall be taken by Competent Authority, DAE hospital, Kalpakkam. The referral shall be communicated to the Chennai Clinics / beneficiary / respective hospital.

c) In non-CHSS areas i.e. areas other than those covered under Chennai Clinics and DAE Hospital, Kalpakkam / Anupuram, medical treatment including emergency treatment can be availed at the nearest hospital and reimbursement may be claimed. The reimbursement of the claims will be as per CGHS rates.

d) Cross referrals, only if found absolutely necessary, in case of inpatient or outpatient treatment suggested by the attending doctors in the referral hospital, shall be only with the prior approval of the Competent Authority at DAE Hospital, Kalpakkam.

e) After availing treatment at referral hospital, the beneficiary shall report back to the medical Officer / consultant at Chennai Clinic along with all results, prescriptions, discharge summary and other documents as applicable, within two weeks of completion of consultation / procedure at the referral hospital.

3. Medical Emergency:

I. For beneficiaries covered under Chennai Clinics:

i(a) In case of medical emergencies as listed at Sl. No. v below, treatment may be availed directly from referral hospital, only for the specialization approved for the particular hospital.

i(b) If the hospital in which the treatment is availed is not approved for the particular specialization, the beneficiary shall incur the expenditure and claim reimbursement. In all such cases, the medical treatment should be certified as medical emergency by the treating doctor.

ii. Treatment may also be availed at any nearest medical institution, which is not a referral hospital, provided that the beneficiary shall incur the expenditure and claim reimbursement. In all such cases, the medical treatment should be certified as medical emergency by the treating doctor.

iii. Beneficiary shall choose the nearest referral hospital considering distance, ease of transport of the patient, and specialisation(s) for which a referral hospital has been empanelled (as given in Annexure – I). DAE Hospital, Kalpakkam may be consulted over phone for clarifications, if any required in this regard. (Phone No. 044 27480500- Extn: 84804; email id – casualtykts@igcar.gov.in).

iv. The beneficiary or their attendants on admission or treatment as Out-Patient, shall ensure that an email is sent from the treating hospital to Casualty Department at Kalpakkam Hospital (email id – casualtykts@igcar.gov.in / mspa@igcar.gov.in) immediately, listing beneficiary ID, condition of patient, initial assessment and recommendations of the treating doctor.

v. The following is the list of medical conditions, which is illustrative but not exhaustive, that may be considered as medical emergencies subject to the condition that the medical treatment is certified as medical emergency by the treating doctor.

a. Acute Coronary Syndromes (Coronary Artery Bye-pass Graft / Percutaneous, Transluminal Coronary Angioplasty) including Myocardial Infarction Unstable Angina, Ventricular Arrhythmias, Paroxysmal Supra Ventricular Tachycardia, Cardiac Tamponade, Acute Left Ventricular Failure / Severe Congestive Cardiac Failure, Accelerated Hypertension, Complete Heart block and Stoke Adam attack, Acute Aortic Dissection.

b. Acute Limb Ischemia, Rupture of Aneurysm, Medical and Surgical shock and peripheral circulatory failure.

c. Cerebro-Vascular Attack-Stroke, Sudden unconsciousness, Head injury, Respiratory failure, decompensated lung disease, Cerebral/Meningeal Infections, Convulsions, Acute Paralysis, Acute Visual loss.

d. Acute Abdomen.

e. Road Traffic Accidents / Complicated injuries including fall / fire.

f. Hemorrhage due to any cause.

g. Acute poisoning.

h. Acute Renal failure.

i. Acute abdomen pain in female including acute Obstetrical and Gynaecological emergencies/ Threatened abortion etc.

j. Electric shock.

k. Any other life-threatening condition.

II. For beneficiaries other than those covered under Chennai Clinics and DAE Hospital, Kalpakkam / Anupuram:

Beneficiaries residing in areas other than those covered under Chennai Clinics and DAE Hospital, Kalpakkam / Anupuram, medical treatment including emergency treatment can be availed at the nearest hospital and reimbursement may be claimed. The reimbursement of the claims will be as per CGHS rates.

III. For beneficiaries covered under DAE Hospitals at Kalpakkam / Anupuram:

In areas covered by DAE Hospitals at Kalpakkam and Anupuram, the beneficiary shall report to the Casualty Department at Kalpakkam / Anupuram for medical treatment.

4. Procedure for Treatment in <u>Non Emergency</u> Cases for all beneficiaries:

Medical conditions which are not categorized as a medical emergency for admission/ treatment, the beneficiary shall appear in person before a Medical Officer at Kalpakkam Hospital / Anupuram Hospital / Chennai Clinic for assessment / treatment.

5. Procedural aspects for issue of Referral Letter:

a) The selection of referral Hospital shall be decided by the Competent Authority keeping in view the list of referral hospitals and the specialisation(s) for which they have been empanelled, as given in **Annexure I.**

b) In case of medical emergency, on receipt of intimation by email from the treating hospital, the medical condition shall be evaluated and if found necessary, a referral letter will be issued by Competent Authority. **The referral letter may be issued to a**

referral hospital different from the place of initial approach by the beneficiary, based on his / her condition. The decision of the Competent Authority shall be final.

c) The referral letter shall be valid for a period of one month both for in-patient / out-patient treatment. In case of referral for in-patient treatment, validity is for one admission and subsequent reviews for the same ailment, within the overall validity period of one month for the referral letter.

d) The referral letter shall contain (i) name of the referral centre including address and contact number, (ii) specialisation(s) / department(s) authorised for consultation, (iii) procedures / consultations to be given / performed and (iv) the entitled class of bed.

e) **Kalpakkam CHSS Card holders are not eligible to get referral to empanelled hospitals from Chennai Clinics.**

6. Supply of Medicines through Outsourced Pharmacy:

I. For beneficiaries covered under Chennai Clinics:

a) Procurement of medicines through outsourced pharmacy shall be mandatory for all Chennai CHSS Card holders.

b) Doctors shall prescribe medicines that are generic in nature.

c) Ayurvedic medicines prescribed by allopathic doctors, nutritional supplements and cosmetic products are not reimbursable.

d) The outsourced pharmacy will be open from 09.00 am to 05.30 pm on all working days including Saturdays and on Sundays from 09.00 am to 02.00 pm.

e) Medicines prescribed by doctors at the Pallavaram Clinic shall be obtained only through the outsourced pharmacy at the Pallavaram clinic. Beneficiaries obtaining medical treatment at Taramani clinic shall submit the forms for obtaining medicines to the representatives of outsourced pharmacy at Taramani clinic. The prescribed medicines will be despatched through courier or beneficiaries can collect the medicines directly at Pallavaram clinic pharmacy on the same day.

f) Beneficiaries availing medical treatment from AMAs / Registered Medical Doctors shall obtain the prescribed medicines from the outsourced pharmacy at Pallavaram clinic or submit the forms for obtaining medicines to the representatives of outsourced pharmacy at Taramani Clinic. Beneficiaries may also send the prescription, application form for issue of medicines and drug card to email id (**medicine@igcar.gov.in**) and receive the medicines by courier to their home. The original prescription shall be submitted along with the claim for reimbursement of AMA consultation fees. **The drug cards of such patients shall be submitted by the patient in person to DAE Clinic at Chennai / Hospital at Kalpakkam / Anupuram for doctors' opinion once in a year**.

g) Those who are unable to visit the clinic due to illness and not having mail access, can procure medicines with the prescription issued by any AMAs/Registered Medical Doctors through any other registered pharmacies, the rate of reimbursement will be restricted to the cost of the same available compound / medicine at the outsourced/in-house pharmacy at CHSS clinic at Pallavaram. **The drug cards of such patients shall be submitted by the patient in person to DAE Clinic at Chennai / Hospital at Kalpakkam / Anupuram for doctors' opinion once in a year**.

h) If the outsourced pharmacy is unable to arrange the prescribed medicines within 2 days, the beneficiary may procure the same from any pharmacy and submit the claim at the CHSS Office of both Chennai CHSS clinics along with the prescription bearing non-availability seal from the outsourced pharmacy and a bill with valid GST number. Actual amount spent towards purchase of medicines will be reimbursed.

i) In case of non-availability of prescribed medicines in the outsourced pharmacy for immediate consumption, purchase of medicine for one week from any pharmacy will be allowed. The beneficiary shall submit the claim at the CHSS Office, Chennai clinics along with the prescription duly certified by medical officer indicating the need for immediate consumption of the medicines, non-availability seal from the outsourced pharmacy on the prescription and a bill with GST number. Actual amount spent towards purchase of medicines will be reimbursed.

j) Beneficiaries referred to outside hospitals may receive up to 10 days supply of medicines from the referral hospital against each referral letter, and beyond 10 days medicines must be collected from the Pallavaram outsourced pharmacy.

k) For obtaining medicines through courier, CHSS beneficiaries may submit the prescription, pharmacy form with complete address & phone number and a copy of drug card in person at clinics or send by email to email id **medicine@igcar.gov.in.**

II. For beneficiaries other than those covered under Chennai Clinics and DAE Hospital, Kalpakkam / Anupuram:

Beneficiaries residing in areas other than those covered under Chennai Clinics and DAE Hospital, Kalpakkam / Anupuram, may procure the same from any pharmacy and submit the claim to DAE Hospital, Kalpakkam, along with the prescription in original, copy of the drug card and a bill with valid GST number. Actual amount spent towards purchase of medicines will be reimbursed.

7. **Procedure for Reimbursement of Medical Claims:**

a) In case of claim for reimbursement of consultation fees and cost of medicines procured from other pharmacies, beneficiaries should submit the

reimbursement claim along with prescription, application form for issue of medicines/application form for claiming reimbursement of medicines.

b) The reimbursement for medical treatment shall be restricted to CGHS rates / lowest rate of referral hospitals, whichever is lower.

c) Claim for purchase of medicines by beneficiaries as indicated at 3(I), 3(II) and 6 (II) shall be processed as per CS Medical Attendance Rules. An illustrative list of non-permissible items is given in **Annexure – II.**

d) Duly signed / initialled and stamped acknowledgement shall be furnished by the CHSS Office, Chennai Clinics receiving the medical claims.

e) Revised format of Claim Form for inpatient treatment and medicines with acknowledgement slip is given in **Annexure- III**. Details of claims which have been restricted not admitted will be communicated to the beneficiaries by email.

f) The normal processing time for settlement of claims is estimated as tentatively 45 days. Beneficiaries can contact help desk to know the status of their claims.

8. Beneficiary Responsibilities:

a) Beneficiaries should bring their valid CHSS card and medical record book for every visit. Ensuring the validity of the medical card shall be the sole responsibility of the beneficiary.

b) Beneficiaries requiring regular medicines should bring their drug card, without which medicines will not be issued.

c) In the event of overcrowding, medical officer will decide the priority of patients with regard to medical treatment and offer an appointment on the nearest available date at the convenience of the beneficiary. Utmost cooperation of the beneficiaries is expected for the smooth running of the dispensary and the comfort of fellow patients.

d) Circulars, notices and other communication meant for CHSS beneficiaries will be displayed in the clinic notice board, apart from website. Beneficiaries shall keep themselves abreast through this channel.

e) In case of beneficiaries with severe disability or infirmity and unable to attend the clinic in person, a representative of the beneficiary may collect medicines/referral letter producing proof of disability/infirmity of the beneficiary along with a valid medical card. The medical officer in charge reserves the right to verify the facts / authenticity by any available audio/video means of communication.

f) At any time, DAE hospital may scrutinise the medical records of any of the beneficiaries regarding the medical ailment, treatment availed and medicines procured and for reasons to be recorded in writing, may require the

beneficiary to appear in person at DAE Hospital, Kalpakkam/ before a Medical Board.

9. Help Desk for Grievance and Contact details:

Beneficiaries may contact the following officials for all matters relating to medical treatment and claims.

Name of the Official	Telephone	Email id
Shri B. Askar Ali Coordinator for Public Relations, DAE Hospital	044-27480500 Extn. 84681 / 84870	askar@igcar.gov.in
Shri E. Thanigaivel, Hospital Administrator, DAE Hospital	044-27480500 Extn. 84880	thanigai@igcar.gov.in

This SOP shall be binding on all CHSS beneficiaries without exception. Further additions and deletions will be mandated by competent authorities as per requirements, rules and regulations proposed by Government regulatory bodies from time to time.

Checked By,

06/05/2026

E. Thanigaivel,
Hospital Administrator,
DAE Hospital, Medical Group,

Approved By,

K.R. Sethuraman 06052026

K.R. Sethuraman
Director, (P&A)
General Services Organisation

के.आर. सेतुरामन / K.R. SETHURAMAN
निदेशक (कार्मिक एवं प्रशासन) / Director (P&A)
सामान्य सेवा संगठन / General Services Organisation
परमाणु ऊर्जा विभाग / Department of Atomic Energy
कल्पाक्कम-603 102. / Kalpakkam-603 102.

Enclosures:

1. Annexure – I - List of referral hospitals / Specialisation
2. Annexure – II – List of Non permissible items
3. Annexure – III – Claim Form with Acknowledgement Slip

Copy to:

The Director, GSO & IGCAR – CHSS Administering Authority

Annexure – I

List of Hospitals/Centres recognized under CHSS, Kalpakkam and speciality for which approved

Name of the Hospital/Centre & Address	Specialty Approved	Phone Number
SRI RAMACHANDRA HOSPITAL 1, Ramachandra Nagar, Porur, Chennai 600 116	ALL	24768031-33 24768027
THE VOLUNTARY HEALTH SERVICES, Taramani, Chennai 600 113	ALL	22542971 22542972 22542973
MIOT HOSPITALS, 4/112, Mount Poonamallee Road, Manapakkam, CHENNAI 600 089.	ALL	22492288 Fax:22491188
CHETTINAD HOSPITAL Rajiv Gandhi Salai, KELAMBAKKAM 603 103	ALL	4741 1000 4741 3300 Fax:4741 1011
KAUVERY HOSPITAL No.199, Luz Church Road, Mylapore, Chennai 600 004	ALL including COVID 19 treatment	96005 82042 75500 99926
Dr.RELA INSTITUTE AND MEDICAL CENTRE No.7, CLC Works Road, Chromepet, CHENNAI 600 044.	ALL including COVID 19 treatment	6666 7777 9842348885
APOLLO HOSPITALS 21,Greams Lane, Off.Greams Road, Nungambakkam Chennai 600 006 & Apollo Speciality Hospital (OMR), Rajiv Gandhi Salai, Chennai 600 097	Cardio, Cardia-Surg, Neuro, Uro, Neph, Genetics, Radio & Imaging -do- & COVID 19 treatment	2829 3333 2829 0200 3322 1111 2496 1111
APOLLO CANCER (SPECIALITY) HOSPITAL , 320, Mount Road Chennai 600 035	Cancer cases	2433 6119
VIJAYA HEART FOUNDATION (Institute of Interventional Cardiology & Cardiac Surgery) 180,N.S.K. Salai, Vadapalani Chennai 600 026	Cardiology/ Cardia-surgery	24802221 24843029 23623028
KANCHI KAMOKOTTI CHILDS TRUST HOSPITAL, 12A,Nageswara Road, Nungambakkam, Chennai 600 034	Pediatrics	42001800 42001801 48001808
SANKARA NETHRALAYA (Medical Research Foundation), 18, College Road, Nungambakkam Chennai 600 006	Eye	28261260,65,68 28265402 28271616
SIVAM HOSPITAL, Plot No. 3, Srinivasan Street, Jagathambal Colony, Ullagaram, Chennai – 600091	Orthopedics & Physiotherapy	22424742 22424743 9884338458
Dr.AGARWAL'S EYE INSTITUTE PRIVATE LIMITED, 13, Cathedral Road, Chennai 86 New address: No.222, TTK Road, Alwarpet, CHENNAI 600 018.	Eye	28116233 28112592 28112959
CANCER INSTITUTE(W.I.A.) Adyar, Chennai 600 020	Cancer	24910754 24912085 24911528
VASANTHA SUBRAMANIAN (VS) HOSPITALS (Cancer Care), No.13, East Spurtank Road, Chetpet, Chennai 600031	Cancer	42001000 28191021(Fax)

KAUVERY HCG CANCER CENTRE MBC Towers, No.199/90, Luz Church Road, Mylapore, Chennai 600 004	Cancer (Radiotherapy/ Chemotherapy)	90942 64159 4341 9999
ANDHRA MAHILA SABHA (ISWARI PRASAD DATTATREYA ORTHOPAEDIC CENTRE) 10,Dr.Durgabai Deshmukh Road Chennai 600 028.	Mental retarded & Physically handicapped	24938311
T.T.K. HOSPITAL 17, 4th Main Road, Indira Nagar, Adyar, Chennai 600 020	De-addiction	24912948 24918461 24416458
RAGAS DENTAL COLLEGE & HOSPITAL, 2/102, East Coast Road, Uthandi Chennai 600 119	Dental	24530002-06 24530013- 15
TAGORE MEDICAL COLLEGE & HOSPITAL, Rathinamangalam, Melakkottaiyur Post, (Vandalur- Kelambakkam Road), CHENNAI 600 127	COVID 19	3010 1111 8610060220 7358611787
MEDISCAN SYSTEMS 197, (Old No.92), Doctor Natesan Road, (Near Chennai City Centre), Mylapore, CHENNAI 600 004.	Ultrasonogram & Foetal study	24663232 Fax:24988226
NEUBERG EHRLICH LABORATORY No.46 & 48, Masilamani Road, Balaji Nagar, Royapettah, Chennai 600 014	All investigations/ tests	28130514 28130460
LISTER METROPOLIS LABORATORY 3, Jagannathan Road, Nungambakkam, Chennai 600 034.	All investigations/ tests	42055555
HEARING AID CENTRE 29/12, Riaz Garden (Near Hotel Palmgrove) Kodambakkam High Road, Nungambakkam, Chennai 600 034 Reg.Office: Lokesh Tower, 18/37, Kodambakkam High Road, Nungambakkam, Chennai 600 034.	Artificial Hearing Aids	2827 6945 2827 3279

List of Centres recognized for non-allopathic system of medicines

Name of the Centre & Address	Specialty Approved	Phone Number
IMPCOPS HOSPITAL No.34,Dr.Muthulakshmi Road, Thiruvanmiyur, Chennai 600 041	Ayurveda - Tue & Thu Siddha - Mon & Wed Unani - Fri & Sat	24910711 24911029 24911089
KOTTAKKAL ARYA VAIDYA SALA (BRANCH) 196, E.V.R. Periyar Salai, Near Nehru Park, Chennai 600 084	Ayurveda	26411226 26433531
VENKATESWARA HOMOEOPATHIC MEDICAL COLLEGE & HOSPITAL, 6/177A, Mount Poonamalle Road Karambakkam, CHENNAI 600 116.	Homoeopathy	24769089 24760638

Standard Operating Procedure for DAE CHSS Dispensaries at Chennai **ANNEXURE – II**

A. NON – PERMISSIBLE ITEMS:

1. **Toiletry items:** Diapers, Bathing Soaps, Sanitizers, Shampoos, Dusting powder Conditioners, Items with tea tree oil, Wet tissue papers/wipes, Tooth Paste, Tooth Brush, Hair oils, Sanitary Napkins, Under Pad, Shaving Kits, towels, Bed Sheets, Micropore Dispenser, etc., are not permissible.
2. **Cosmetics items:** Sunscreen lotions or Creams, Niacinamide, Hair Growth related items (like serums, lotions, massage oils, solutions, hair oils), shampoos (Medicated or Non medicated), Soaps (Medicated or Non-Medicated), cosmetic skin care products with non-medicinal contents like shea butter, cocoa butter, aloe vera etc. for eg. Venusia max, Zen soft lotion, Cetaphil dam lotion, Moizlmf lotion, Nevlon lotion etc
3. Food Supplements including Energy Drinks, Protein Powders, Dietary supplements, Nutritional Growth Supplements in any forms either for Adults or Children, Special Dietary Supplements, Baby Food products and Milk Supplements etc. are not permissible.
4. Vaccines other than those covered under state EPI are not permissible (except in certain **co-morbid conditions like CKD, COPD, organ transplantation, Cochlear implantation, etc., certain specific vaccines like Pneumococcal Vaccine, Hepatitis B vaccine can be permitted with prior authorization)**
5. Any formulation or Co formulations containing herbal extracts like, green tea extract, Papaya Extract, Rose hip extract, soy extracts, curcumin etc. are not permissible (e.g. Caripill tablet, Cap. Merita, T.Strolcart , Absolut woman, lubrica forte, softovac SF etc.)
6. Following Drugs/Formulations or Co-Formulations in any form are not permissible:-
   - Co-enzyme Q10 and its combinations with any drugs (*except for infertility cases for limited period i.e., upto six months by OBG specialty)
   - L-Arginine and its combinations can be permitted only for the proven IUGR cases (till delivery of the baby) by OBG specialty.
   - Chondroitin Sulphate and its Co-formulations Collagen peptides, all Types (I,II,Ill,IV) and its Co-formulations (eg. Tab. Tendocare, Cap. Fitjoint etc.,)
   - S Adenosyl Methionine (eg. Heptral), Glutathione, Methionine, L-Carnitine, Food for special dietary use eg. Palmiges, Evening Primrose Oil (eg. Primosa, GLA 120, etc.), Probiotic food like VSL3.
7. The nutraceuticals which come under Functional foods like Cod liver oil, fish oil, are not permissible.
8. Ayurvedic /Homeopathic preparations prescribed by allopathic doctor.
9. Mixed preparations containing ayurvedic, herbal and allopathic drugs.
10. Glucometer, glucose test strips.

11.Flexipens or disposables pens are only permissible for drugs or formulations for which cartridges or penfills are not manufactured by the pharmaceuticals Companies and hence are not available in the market. Similarly, BD Syringes and Disposables Needles

for any Pens or delivery devices are also not permissible.

12. Dental Implants.

B. MULTIPLE BRANDS OF SAME VITAMIN PRESCRIPTION:

It was noticed that multiple brands of Multivitamins/ B complex/Minerals/Iron etc., are simultaneously prescribed for the same patient's consumption.

Hence the claim towards reimbursement of Multiple brands of same molecule of Multivitamins/ B complex/Minerals/Iron/Calcium etc, simultaneously prescribed for the same patient's consumption is not entitled for reimbursement.

C. THE EXACT NUMBER OF INSULIN CARTRIDGES REQUIRED FOR THE PRESCRIBED PERIOD ONLY IS PERMISSIBLE.

Note: The above- mentioned list is inclusive of other similar items also.

APPLICATION FOR CLAIMING REIMBURSEMENT OF MEDICAL EXPENSES TOWARDS CONSULTATION WITH NOMINATED AUTHORISED MEDICAL ATTENDANT (AMA) / OTHER ALLOPATHIC DOCTORS

(Applicable for CHSS beneficiaries including retired)

Please tick ✓ wherever applicable *No column should be left blank*

1	a	Name of the Employee (in BLOCK LETTERS)	:
	b	IC No. / Employee Number / Desig./ Unit	:
	c	CHSS Card No. / Validity	: /
2	a	Residential Address (in BLOCK LETTERS)	.... Pin code: .....
	b	Mobile Number	:
	c	Email ID	:
3	a	Name of the Patient	:
	b	Date of birth / Age	: / years
	c	Relationship to employee	:
	d	CHSS Card No. / Validity	:
	e	Place at which the patient felt ill	:
4	a	Name of the AMA / Doctor consulted	:
	b	Number of consultation (s)	:
5	Details of Expenses : **Page 2 of this form (back side)**		

DECLARATION TO BE SIGNED BY THE CLAIMANT

I hereby declare that the details in this application are true to the best of my knowledge and belief and that person to whom medical expenses were incurred is wholly dependent upon me.

Encl: Original (i) Cash bill(s) (ii) Ess. Certificate 'A' (iii) Prescription(s):

Date:

Signature of the Claimant

**(Signature of spouse in case of deceased CHSS card)*

To

☐ CHSS Clinic, IMSc, C.I.T. Campus, Taramani, Chennai 600113 - Ack. No.:

☐ DAE Nodal Facility Centre, Pallavaram, Chennai 600043 - Ack. No.:

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ACKNOWLEDGEMENT SLIP

Acknowledgement No.: Received Date: Received By:

Seal

5	Details of expenses							
Sl. No.	**Particulars (Consultation/Medicine /Investigation/Lab. test)**	**Bill No.**	**Date**	**Name of the (Medicine/ investigation/lab. test)**	**Qty./ Nos.**	**Claimed Amount (Rs.)**	**Eligible Amount (To be filled by CHSS)**	**Remarks**
a								
b								
c								
d								
e								
f								
g								
h								
i								
j								
					TOTAL			

ESSENTIALITY CERTIFICATE 'A'

(To be completed in the case of patients who are not admitted to the Hospital for treatment)

Certificate granted to _____
wife/husband/son/daughter/father/mother of _____
employed in the _____CHSS Card No._____

I, Dr _____hereby certify:-

a. that I charged and received Rs. _____ for _____ consultation(s) on _____ [date(s) to be given] at my consulting room/ Clinic / Hospital/ at the residence of the patient.

b. that the above mentioned patient was under my treatment and medicine(s) prescribed by me were essential for recovery of the patient. The medicines prescribed to the patient do not include any proprietary preparations for which cheaper substitutes are available or which are not primarily food/toiletry/cosmetic/disinfectant items.

c. that the patient is/was suffering form _____and is/was under my treatment from _____to _____.

Date:

Signature of the Doctor

Name: Dr. _____
Reg. No. _____
& Seal

Clinic address:
.....
.....
.....
Pin code: .....

PRE – RECEIPT

Received an amount of Rs. _____/- (Rupees _____
_____only)
from Pay & Accounts Officer, _____towards Medical reimbursement claim.

Signature
(Name: .....)

PAYMENT TO BE MADE AS PER THE BANK DETAILS GIVEN BELOW:-

Name of the Account Holder: _____
Bank Account Number: _____
Name of the bank & branch: _____
IFS Code: _____