



THE SINGARENI COLLIERIES COMPANY LIMITED
(A Government Company)
Executive Establishment Cell
CIN NO: U10102TG1920SGC000571

Ref: CRP/PER/C/2846

Date: 30.09.2022

CIRCULAR

**All GMs/ HoDs,
All Areas & Corporate**

Sub: Contributory Post retirement Medicare Scheme for Executives of SCCL – Amendment provision regarding Outpatient /Domiciliary Treatment and others- Reg.

- Ref: 1) CRP/PER/C/06/1752 dated 04.07.2013
2) CRP/PER/C/06/2572 dated 01.09.2018
3) CRP/PER/C/06/668 dated 23.03.2020
4) CRP/PER/C/2020/2660 dated: 09.12.2020

It is hereby informed that the following provisions of CPRMS-E are amended with immediate effect in line with CIL guidelines.

Cl.No	Existing provision	Amended provision
2.1	<p>The Scheme will apply to the following categories of separated Executives. Executives, who separate from the company on account of retirement on attaining the age of superannuation or are separated by the company on Medical grounds or under Executive Retirement Before Superannuation Scheme (ERBSS) formulated and made applicable from time to time,. Membership under the scheme will not be extended to executives who resign from the services.</p> <p>The Board Level appointees, who are separated from the company after completion of the full tenure as per terms of appointment or before, are eligible to become member under the scheme.</p> <p>However, in case of leaving the company prior to completion of tenure, they are eligible to become member under the scheme after attaining age of superannuation and in case of death prior to superannuation, their spouse may become member, provided they do not get similar facilities either in individual capacity or as dependant in any other PSU. The Board level appointees are eligible for benefits irrespective of number of years of service put in, in the company.</p>	<p>Membership under the Scheme will not be extended to the following categories of both Board level & below Board level Executives:</p> <ol style="list-style-type: none">Executives who have been dismissed/ removed/ compulsorily retired under CDA rules of the Company.Executives who resign from the services of the Company.Executives against whom major penalty disciplinary proceedings are pending at the time of retirement. Eligibility of such Executives will be considered based on the outcome of the said disciplinary proceedings. <p>Note: Membership under the Scheme for cases wherein both husband and wife employed in SCCL (either in Executive or non - Executive cadre) shall be governed under the Clause No. 2.6.</p>

Cl.No	Existing provision	Amended provision
2.4	<p>In case any of the retired executive and or spouse is having Medi-Claim/ Medical Insurance Policy from any Insurance Company in individual capacity for which he/she has to pay premium can continue the said policy for getting medical benefit.</p>	<p>In case any of the retired Executive and/ or spouse is having Medi-Claim/ Medical insurance Policy from any Insurance Company in individual capacity for which he/ she has to pay premium can continue the said policy for getting medical benefit. Part claim/ reimbursement for any spell of treatment is allowed from SCCL subject to submission of original bills.</p>
2.6	<p>Clause 2 of Circular no: CRP/PER/C/2020/2660 dtd:09.12.2020</p> <p>It has also been decided to allow option to the retired executives whose spouse is working in SCCL, either to opt for CPRMSE Medical Card, or to avail treatment under medical attendance rules of the Company.</p> <p>The option once exercised shall be final and binding on the executives, if a retired executive opts for CPRMS-E benefit under the scheme, he/she shall be excluded for extending medical benefit as dependant of spouse under Medical Attendance Rules of the Company (MAR).</p> <p>In case the retired executive who is availing medical facility under Medical Attendance Rules as dependant of working spouse, his/ her coverage will automatically come under CPRMS E on retirement of working spouse subject to declaration that he/ she has not been availing such facility in any other scheme.</p>	<p>If both husband and wife are employees of the Company then the retired Executive, under post-retirement Medicare scheme shall avail the medical benefits as dependant of the working spouse (either in Executive or Non - executive Cadre) under MAR, till the superannuation/ retirement under Executive Retirement before Superannuation Scheme/ VRS of the working spouse (as the case maybe).</p> <p>When the working spouse retires, both husband and wife shall be allowed one time option</p> <ol style="list-style-type: none"> i. to either avail the post retirement Medicare facilities as dependant of the working spouse i.e. join as co- benefiary of CPRMSF or ii. Join their respective post retirement medicare scheme i.e as individual beneficiary of either CPRMSE/ CPRMS-NE (as the case may be). <p>During the period the Retired Executive avails medical benefits under MAR as dependent of his/ her working spouse, no Domiciliary Payment shall be payable to such retired Executive (as per CPRMSE) and upon retirement of the serving spouse, the applicability of Domiciliary Payment shall be decided prospectively based on exercised option</p> <p>Note: This clause is applicable for cases wherein both husband and wife are working in SCCL. The eligibility for the same shall be governed by the Clause No. 2.0 of the Scheme.</p>

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		<p>Schematic Matrix:</p> <pre> graph TD subgraph Scenario1 [Scenario 1: X Retired, Y Working] X1[Person "X" - Executive (RETIRED)] --> W1[WHEN "X"-RETIRE] Y1[Person "Y"- Non - Executive (WORKING)] --> J1["X" joins as medical dependent of "Y" under MAR During this period "X" will not be eligible for Domiciliary Payment] W1 --> J1 J1 --> W2[WHEN "Y" RETIRES, then one time option is -] W2 --> J2["X" joins CPRMSE] W2 --> J3["Y" joins CPRMSNE] J2 --> K2["X" continues in CPRMSE] J3 --> OR1[OR] OR1 --> L3["Y" joins as co-beneficiary of "X" under CPRMSE] end subgraph Scenario2 [Scenario 2: X Retired, Y Working] X2[Person "X" - Non - Executive (RETIRED)] --> W3[WHEN "X"-RETIRE] Y2[Person "Y"- Executive (WORKING)] --> J4["X" joins as medical dependent of "Y" under MAR During this period "X" will not be eligible for Domiciliary Payment] W3 --> J4 J4 --> W4[WHEN "Y" RETIRES, then one time option is -] W4 --> J5["X" joins CPRMSNE] W4 --> J6["Y" joins CPRMSE] J5 --> OR2[OR] OR2 --> L4["X" joins as co-beneficiary of "Y" under CPRMSE] J6 --> K4["Y" continues in CPRMSE] end </pre>
3.2.1 (a)(i)	<p>Reimbursement of Medical expenses incurred for indoor treatment will be allowed on actual basis, subject to the condition that the treatment is obtained in Company hospitals, Government hospitals including hospitals under Municipal Corporation and all other PSUs. Besides, Medical expenses will</p>	<p>Where there is no SCCL empanelled Hospital at places where the retired Executives reside/ are unable to go to such empanelled hospitals/ Diagnostic Centres, the retired Executives can avail the medical facilities from other PSU hospitals/ other PSUs empanelled Hospital, ESI Hospital/ NABH accredited</p>

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	also be reimbursed for treatment undertaken in hospitals notified by SCCL as per actuals or rates applicable and reimbursed to working executives as per NIMS rate or otherwise, whichever is less.	Hospital/ Government hospital including hospital under Municipal Corporation or Hospital/ Diagnostic Centres empanelled by Company. However, the reimbursement will be limited to NIMS rates or actuals whichever is lower.
3.2.1 a ii	<p>In case of emergency, like Heart attack, accidents, etc., or due to non-availability of empanelled hospitals in a particular town or city, if any retired executive and/ or spouse undertake medical treatment in hospitals/ nursing homes other than mentioned above, the reimbursement will be admissible as per clause 3.2.1 (a) (i) above. Such payments will be released on case to case basis on obtaining approval of Director (PA&W).</p> <p>Further in such situations if treatment is received in NABH accredited (National Accreditation Board of Hospitals) or Super Specialty hospital, reimbursement will be restricted to maximum admissible as per clause 3.2.1 (a) (i) above. However, in case treatment is undergone in Company approved Hospitals or Nursing Homes, reimbursement will be done as admissible as per clause 3.2.1 (a) (i) above.</p> <p>In case of treatment undertaken in non-empanelled hospitals in non-emergency situations, prior intimation should be given to the Chief Medical Officer, Main Hospital, Kothagudem or ACMO/ Dy.CMO, Main Hospital, Kothagudem. In all such cases, payment will be released on case to case basis as admissible as per clause 3.2.1 (a) (i) above on obtaining approval of Director (PA&W).</p>	<p>In case of emergency, like Heart attack, accidents, etc., if due to non-availability of empanelled hospitals in a particular town or city, any retired Executive and/ or spouse undertake medical treatment in hospitals/ nursing homes other than mentioned in 3.2.1 (a) (i) above, the reimbursement will be admissible as per the NIMS tariff.</p> <p>If NIMS rates are not available in such hospitals/ Nursing Homes, such payments will be released on case to case basis on obtaining approval of Director (PA&W). However, the reimbursement will be restricted to NIMS tariff only.</p> <p>Further in such situations if treatment is received in NABH accredited or super specialty hospital, reimbursement will be restricted to maximum NIMS tariff.</p> <p>In case treatment is undergone in Company's Hospitals, reimbursement will be done as per actual or NIMS tariff whichever is less.</p> <p>However, in case of treatment undertaken in non-empanelled hospitals in non-emergency situations or situations other than as mentioned in 3.2.1 (a) (i), prior intimation should be given to the CMO. In all such cases, payment will be released on case to case basis as per NIMS tariff, on obtaining approval of Director (PA&W).</p>
3.2.1c (2 nd Para)	Cost of treatment in OPD of empanelled hospitals would also be permitted and the same will be adjusted against the maximum applicable limit of 25 lakhs.	Cost of treatment in OPD of empanelled hospitals/ PSU hospitals/ other PSUs empanelled Hospital/ ESI Hospitals' NABH accredited Hospital/ Government hospital including hospital under Municipal Corporation or Hospital/ Diagnostic Centers

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6.1	<p>The amount payable for outpatient/ domiciliary treatment for the member and spouse taken together would be as provided under clause 3.2.2. This will be paid in two equal instalments on half yearly basis in July and January every year. In case the first instalment becomes due before completion of six months from the date of enrolment, the amount payable would be on pro-rata basis.</p> <p>The first half-yearly claim of the amount shall be submitted by the retired executive/ spouse as the case may be in Annexure-B1 Form to CMO Main hospital, KGM who would process the same for payment through F&A department. The subsequent half-yearly payments for Outpatient/ Domiciliary Treatment i.e., 50% of the amount as per the Policy shall be released directly by F&A department and the amount shall be credited to the Savings Bank Account of the retired executive and or spouse as per their declaration. The members shall have to submit their Life certificate in the first week of January of every year to the CPRMS-E cell</p>	<p>empanelled by Company would also be permitted and the same will be adjusted against the maximum applicable limit of Rs.25 lakhs.</p> <p>The amount payable for outpatient/ domiciliary treatment for the member and spouse taken together would be as provided under Clause 3.2.2. This will be paid on an annual basis in January every year. In case the annual instalment becomes due before completion of twelve months from the date of enrolment, the amount payable would be on pro-rata basis.</p> <p>The payment shall be released when due subject to the condition as stipulated below:</p> <p>The Domiciliary Charges under CPRMSE shall be paid annually i.e., in JANUARY of the following year, provided the life certificate is submitted in NOVEMBER duly certified by The Bank Manager/ Gazetted Officer/ Registered Medical Practitioner/ Any Officer of the Company as is being done hitherto.</p> <p>As such the next payment shall be in JANUARY 2023, (for the period January 2022-December-2022) only upon submission of Life certificate in November 2022 and continued thereafter accordingly. Hence, there will be no half-yearly payment in JULY 2022.</p>

The other terms and conditions of the scheme remains unaltered

This issues' with the approval of the competent Authority


DIRECTOR (PA&W)

CC to: C&MD

All Directors

GM (F&A)/CMU : For Information & necessary action

PM, ERP

PM SAP-HR/ PYP } To make necessary configuration in SAP -HR