



**Government of Jammu and Kashmir
Finance Department, Civil Secretariat**

Subject:- Checklist for Medical Reimbursement Claims.

Circular

While examining the Medical Reimbursement claims submitted to Finance Department by the various Administrative Departments for consideration in relaxation of the J&K Civil Services (Medical Attendance-cum-Allowance) Rules, 1990, it has been observed that most of the cases are incomplete in various aspects as per rules in vogue and are submitted without the prior approval of Competent Authority in the departments.

In order to ensure speedy disposal of Medical Reimbursement claims and with the aim to avoid any hardship to the claimants, a checklist has been devised forming Annexure to this circular. The check list, duly filled, shall be furnished by the Administrative Departments along with the medical reimbursement proposals to the Finance Department for seeking concurrence in relaxation of rules.

Accordingly, all the Administrative Secretaries are requested to ensure that the Medical Reimbursement claims are submitted to the Finance Department along with the checklist. Incomplete cases shall not be entertained by the Finance Department.

Sd/-

(Dr Arun Kumar Mehta), IAS,
Financial Commissioner,
Finance Department

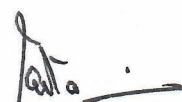
No.:- A/16(2008)-I-502

Dated:- 15-07-2019

Copy to :-

1. Advocate General, J&K High Court Srinagar/Jammu.
2. All Financial Commissioners.
3. Financial Commissioner with the Hon'ble Governor.

4. Principal Accountant General J&K Srinagar/Jammu.
5. All Principal Secretaries to Government.
6. Principal Resident Commissioner, 5-Prithvi Raj Road New, Delhi.
7. Chief Electoral Officer, J&K.
8. All Commissioner/ Secretaries to Government.
9. Divisional Commissioner Kashmir/ Jammu/Ladakh.
10. Chief Vigilance Commissioner, J&K.
11. Principal Secretary to Chief Justice J&K High Court Srinagar/Jammu.
12. Registrar General, J&K High Court Srinagar/Jammu.
13. Director Anti Corruption Bureau, J&K.
14. Director General, J&K Funds Organization.
15. Director General Accounts and Treasuries.
16. Director General, Budget Division J&K.
17. Director General, Audit and Inspections.
18. Director Local Fund Audit & Pensions, J&K.
19. Director Information J&K.
20. All Head of Departments/ Managing Directors/ Chief Executives of State PSU's/ Autonomous Bodies/ Societies.
21. Secretary J&K Public Service Commission.
22. All District Development Commissioners.
23. Secretary, J&K Legislative Assembly/ Legislative Council.
24. Director/Principal, Northern Zonal Accountancy Training Institute Jammu.
25. Director Accounts & Treasuries Kashmir/ Jammu.
26. All Directors of Finance/Financial Advisors & CAOs.
27. Principal Accountancy Training School Srinagar.
28. Joint Director, J&K Funds\Organization Srinagar/Jammu.
29. General Manager, Government Press, Srinagar/ Jammu for publication in Government Gazette.
- 30-33. Private Secretary to Hon'ble Advisors (K)/(G)/(S)/(KS).
34. Private Secretary to Chief Secretary.
35. All Treasury Officers.
36. I/C website, FD (www.jakfinance.nic.in).
37. I/C website, GAD (www.jkgad.nic.in).
38. Government Order File (W2scs).


(S.L. Pandita),
Director (Codes),
Finance Department

Annexure

Checklist for submission of Medical Reimbursement Claims to Finance Department in terms of the J&K Civil Services (Medical Attendance-cum-Allowance) Rules, 1990.

S.No.	Particulars	Remarks	
01.	Name of the Officer/Official with Designation		
02.	Treatment of Self or Dependent		
03.	Name of Dependent with relationship		
04.	Whether the patient/individual is dependent on the employee (certificate to be enclosed)		
05.	Whether the patient is suffering from a Life Consuming Disease		
06.	Whether Life Consuming Disease certificate has been issued by the Competent Medical Authority i.e. DHS/Principal GMC/Director SKIMS, (certificate to be enclosed, if applicable)		
07.	Whether treatment has been taken with proper referral from Competent Medical Authority (Certificate to be enclosed, if applicable).		
08.	Name of the Hospital/Institute wherefrom treatment has been taken.		
09.	Whether the Hospital/Institute is in the list of empanelled Hospitals/Institutions.		
10.	Period of Hospitalization (Discharge Certificate to be enclosed)	Date of Admission	Date of Discharge
11.	Essentiality Certificate on Form 2 issued by the Hospital Authorities to be enclosed.		
12.	Whether the vouchers submitted have been verified from relevant Medical Authority of the hospital wherefrom treatment has been taken.		
13.	Form of application for claiming refund of medical expenses incurred, Annexure "E" of Medical Attendance Rules complete in all respect to be enclosed.		
14.	Whether Medical claim has been preferred by the beneficiary within specified time limits (if not, justifiable reasons with the recommendations of the department be enclosed)		
15.	Relaxation required, If any (if yes, Rule to be mentioned).		
16.	Whether the case has been forwarded to Finance department with the approval of Competent Authority in the department.		

Certified that the particulars from S.No. 1 to 16 have been verified and found correct, as such merits for consideration.

Signature of Director Finance/CAO/AO

JAMMU AND KASHMIR CIVIL SERVICE MEDICAL ATTENDANCE

Form No. 2

ESSENTIALITY CERTIFICATE

(To be filled in by the Specialist/Medical Officer/Government Doctor)

I, Dr.

certify that the following medicines were prescribed by me to

(indicate the name of the beneficiary/ies ; if treated of

.....Department.

The patient(s) was/were suffering from.....

and the employee is registered under Registration No.

Name of the Medicines :

I also certify that the medicines were essential for the recovery of the patient/s and these drugs or their substitutes do exist in the Master List. The patient was referred to the Specialist/Hospital/P.H.C for treatment.

Rs.have been received by me as consultation fee.

Dated :

Signature and designation of
the Specialist/Medical Officer/
Government Doctor.