

NO:6003/Med/Gen corr
O/o THE CDA SECUNDERABAD
NO.1 STAFF ROAD
SECUNDERABAD-09
Dt: 04/10/2021

TO,

All units

SUB: Auditable documents required for process and passing of Medical claims in respect of treatment obtained as In-patient/Out patient with prior permission or in Emergency under Rule 10.

- 1) Sanctions should be accorded by the competent authority with full signature/Specimen Signature for treatment obtained under prior permission from cghs/department with the name of the patient and employee name along with the hospital name where treatment obtained.
- 2) Ex-post facto sanction to be accorded for treatment obtained without taking prior permission in respect of emergency cases admitted under Rule 10.
- 3) Specimen signature to be enclosed when ever there is change of sanctioning authority along with Delegation of Financial powers.
- 4) Undertaking from the individual 'to bear the expenditure in excess of package charges/cghs rates' to be obtained for admission of claims.
- 5) It is to be ensured that CGHS codes to be mentioned in the bills issued by all the Recognised hospitals/ Diagnostic centers for admission of claims
- 6) All enclosures to be attested by the competent authority.
- 7) All bills should be enclosed with the copies of reports of investigation carried out by the hospitals in respect of patient/ out patient claims.
- 8) Audit report to be obtained for bills above 5 lakhs.

- 9) In respect of claims relating to diagnosis where treatment is obtained from Vijaya Diagnostics Centre a slip showing the details of diagnosis and rates are only enclosed to the bill instead of cash receipt. Hence the same may be ensured to obtain the original cash receipt with CGHS codes from the hospital to be enclosed to the bill
- 10) Discharge summary and Emergency Certificate should be in original and also all the investigations carried by the hospitals should be incorporated along with certificates.
- 11) Pouches/invoices to be enclosed for medicines/ injections whose price is above Rs.1000/- for admission of claims along with case sheets of the treatment undergone by the individual.
- 12) MRC forms/supplementary bills/ Contingent Bills along with GPF/NPS no should be entered correctly. Basic pay of the individual and level of pay as per 7th CPC also to be entered in the MRC forms, along with date place and signature of the individual duly counter signed by the competent authority.
- 13) Copy of CGHS card of serving employee as well dependent to be enclosed along with claims by self attestation.
- 14) Out patient claims and in-patient claims to be submitted separately.
- 15) Contact No of unit and employee may please be mentioned in the MRC form to enable this office to call for any clarification to avoid the delay by returning of bills.
- 16) Counter signing authority should verify and ensure the genuines of the claim before forwarding to this office.
- 17) Contingent bills/supplementary bills to be signed by the Individual and counter signed by the competent authority.



ACCOUNTS OFFICER(MEDICAL)