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KARNATAKA POSTS AND TELECOMMUNICATIONS  
PENSIONERS' ASSOCIATION (R)

(KSR Act 1960, REG. No. 1069/98-99)  
(FORMERLY RMS PENSIONERS' ASSOCIATION)

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## CGHS PANCHAYAT

CGHS Panchayat was organised by the Additional Director, CGHS, Bengaluru on 23rd February, 2023 at 3.00 PM at Shruthi Auditorium, Kendriya Sadan, Koramangala, Bengaluru 560034. Panchayat was open to all the stakeholders viz. Beneficiaries, Health Care Organisations and others.

From the CGHS Directorate, Dr. V.K. Sharma, Additional Deputy Director General (ADDG), CGHS HQs, Dr. Anjana Rajkumar, Director, CGHS HQs, joined the Panchayat through video conferencing. From CGHS Bengaluru, Dr. M. Revathi, Additional Director, Dr. Vijayalakshmi Mohan CMO, General Administration, Dr. Ravindra Y. Asangi, CPIO HQ & Hospital Cell, CMOs I/C of some Wellness Centres and other officers were present in the meeting.

Representatives of a few of the affiliate Pensioners' Associations of the Coordination

Committee of Central Government Pensioners' Associations, Karnataka (CCCGPA), Confederation of Central Government Employees and Workers, Karnataka State (COC), Hospitals, Diagnostic Labs and a few of the beneficiaries attended the Meeting. From the Coordination Committee of Central Government Pensioners' Association, the meeting was attended by its President, Sri K.B. Krishna Rao, Vice President, Sri P. Gangadhara Rao, Joint General Secretaries, Sri T.V. Suryaprakash, Sri P.S. Prasad and Mrs. Juliana Vincent. Sri P.S. Prasad represented the Confederation also as its Working President.

A copy of the Agenda items for discussion in the panchayat, proposed by CCCGPA along with a brief note on each of the issues raised in the Agenda has been sent to the Additional Director, CGHS, Bengaluru by email well in

advance and a copy was also presented to the Additional Director (CGHS), Bengaluru in the meeting with a request to take up the issues for discussion in the meeting & to resolve such of those issues which can be resolved within the delegated powers of the AD and to take up other issues, with the appropriate authorities in the Government of India, Department of Health & Family Welfare and CGHS Directorate for resolution of the issues raised by CCCGPA. A copy the Agenda had also been sent to all CCCGPA affiliates for their information.

Sri K.B. Krishna Rao, President, thanked the Additional Director, CGHS Bengaluru & Dr. Ravindra for taking the initiative in arranging the Panchayat and for calling for the items for inclusion in the agenda for discussion. He thanked the Deputy Director General (ADDG) and the Director, CGHS HQs for joining the Panchayat virtually, which facilitated the stakeholders to air their grievances before the concerned CGHS authorities and get them redressed wherever possible.

Sri K B Krishna Rao, raised the major issue relating to revision of CGHS rates, which were fixed in the year 2014, and appealed to the ADDG for revision of CGHS rates which are commensurate with the increase in the market prices of medicines, medical equipment and treatment procedures over the past several years at the earliest since many of the CGHS empaneled private hospitals have already sought de-empanelment and many more are likely to go out of CGHS empanelment in the near future. It was also impressed upon him that revision of rates will not only encourage more number of private hospitals to seek empanelment but also is likely to motivate some of the private hospitals which had withdrawn from CGHS to come back to its fold. If there were to be any further delay in revision of CGHS rates, there is every probability of some more hospitals seeking removal of their names from the list of empanelled hospitals,

which is sure to cause untold miseries to CGHS beneficiaries. They will also be put to great financial hardship. The representative of an empanelled Hospital also spoke on this issue on behalf of hospitals and expressed displeasure over the delay in revising the CGHS rates even after a lapse of nearly a decade and also enlightened him about the loss incurred by the hospitals due to non-revision of rates. The representative also appealed to the ADDG to consider revision of rates at the earliest failing which; many more hospitals may opt out of CGHS. Other issues, which were raised in his presence, were (1) to open more wellness centres in Bengaluru and (2) to fill up all the vacant posts of Doctors and other staff members in Wellness Centres on a top priority basis.

In his reply, the Additional Deputy Director General (ADDG), stating that CGHS is quite aware of the issue which is causing inconvenience to the beneficiaries, informed the stakeholders that the revision of CGHS rates is under active consideration of the Government and a favourable decision is most likely to be taken in that regard and communicated to all in another one month's time.

The ADDG and the Director had to leave the meeting as they had to attend other meetings scheduled for the day. However, the ADDG, before leaving, requested the AD, CGHS, Bengaluru, to send the proposals/suggestions, of the stakeholders, to him with full justifications for consideration at his end. He also assured that the other issues raised by the stakeholders will be considered on case to case basis and on its merits after receiving proposals from the Additional Director, CGHS.

Thereafter, all the other items /issues of the Agenda were taken up for discussion by the Additional Director, CGHS Bengaluru, assisted by Dr. Vijayalakshmi Mohan, CMO, General Administration and Dr. Ravindra Y. Asangi, CPIO HQ & Hospital Cell.

The discussions on the agenda items lasted for nearly 3 hours in which representatives of CCCGPA, COC, and HCOs, Medical Officers in charge of Wellness Centres and some beneficiaries actively participated.

As a follow up, CCCGPA sent a letter attached to email to the ADDG highlighting the issues raised in the panchayat and the agenda items with a brief note on each item for his favourable consideration and orders.

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**COORDINATION COMMITTEE OF CENTRAL GOVERNMENT  
PENSIONERS ASSOCIATIONS, KARNATAKA, BENGALURU 560104**

**K.B. Krishna Rao,**  
President

**S. Radhakrishna**  
General Secretary

**O.M. Bhaskaran**  
Treasurer

**Agenda for CGHS Panchayat on 23-02-2023**

**1. Augmentation of the staff strength of doctors in all the WCs**

Of late it is found that the number of beneficiaries attending CGHS WCs for consultation with doctors is increasing by the day and the staff strength of doctors in almost all the WCs is found to be quite inadequate. With the increase in the number of patients attending the WCs daily, the work load of doctors has also increased without any commensurate increase in medical staff strength. It is a common sight to see the patients waiting for long hours for consultation with the doctor. It is, therefore, urged that immediate necessary action may please be taken in this regard either to increase the number of doctors in WCs wherever there is justification for such an increase or to send proposals to the CGHS Directorate for opening of new wellness Centre/s in the City. As an interim measure, appointment of retired doctors on contract basis may be considered

**2. Posting of a Pharmacist at the “Ayurvedic Clinic” at CGHS WC10, DRDO Complex C V Raman Nagar, Bengaluru 560093.**

Though an Ayurvedic Doctor is available in the WC, the post of pharmacist has not been filled up. Hence the beneficiaries have to visit WC-8 Domlur for collecting the prescribed Ayurvedic medicines. It is, therefore, urged that the post of the pharmacist may please be filled up on priority.

**3. Consultation with Doctors**

Medical officers of all WCs may be instructed to restore and continue to check BP, Pulse & heart beat etc. especially of the elderly and sick beneficiaries. Physical examination of the patients which was discontinued in 2020-21 due to the pandemic COVID 19, may be restored immediately since the pandemic has waned considerably during the last 6 months.

**4. Opening of more numbers of CGHS WCs in Bengaluru City**

Bengaluru city has a population of more than one crore spread over an area of 850 square kms. CGHS Bengaluru started in 1976 caters approximately to 1,55,000 beneficiaries which includes serving employees, Central Government Pensioners and BSNL Pensioners migrated from BSNL MRS to CGHS.

There are about 157 Central Government Departments, about 3.5 lakhs Central Government Employees and Pensioners as published by Central Government Employees Welfare Co-ordination Committee. But, there are only 10 (Ten) CGHS Wellness Centres, One Polyclinic, One Dental unit, Two Ayurveda units, One Homeopathy unit and one Unani unit.

The norms for setting up a CGHS dispensary in a particular area are as under.

- (i) **In an existing CGHS city:**– For opening of a new Allopathic CGHS dispensary, there has to be a minimum of 2000 Card holders (serving employees of Central Government and Central Civil Pensioners)
- (ii) **Extension of CGHS to a new City:** – For extension of CGHS to a new city, there has to be a minimum of 6,000 Card holders.

In consideration of the number of Central Employees and Pensioners living in Bengaluru, and in consideration of the norms fixed for opening of WCs, there is justification for opening more number of Wellness Centres and an additional Polyclinic.

We suggest that new WCs may be established in the following areas of the city.

- 1) **Yelahanka or Sahakaranagar in the north.**
- 2) **Whitefield in the east.**
- 3) **Kanakapura Road in the south**
- 4) **Tumkur Road in the west**

**5. Opening of CGHS WCs in other cities of the state of Karnataka** CGHS Wellness Centers should be opened across the major cities of the Karnataka state. At present, only Bengaluru and Mysuru are the 2 cities provided with CGHS facility. WC sanctioned for Hubballi is yet to start functioning. There is an urgent need to open CGHS WCs in major cities like Mangaluru, Shivamogga, Kalaburagi, Vijayapura, Davanagere etc.

**6. Empanelment of at least one private hospital under CGHS in each district of the state of Karnataka**

At present there are 74 CGHS covered cities in the country and the wellness centres are established in capital cities or in some major cities of the states. Private Hospitals in such CGHS covered cities only are empanelled for treatment of CGHS beneficiaries. Even in a big state like Karnataka, the capital city of Bengaluru and Mysuru only are covered under CGHS and other big cities of the state like Mangaluru, Gulbarga, Shivamogga, Davanagere, Vijayapura etc. where there is concentration of

Central government employees and pensioners, justifying opening of wellness centres, are not covered by CGHS.

As per the Scheme, Central Government pensioners are entitled for CGHS facilities irrespective of the place of their residence. Many pensioners residing in places hundreds of kilometres away from the CGHS City, have opted for CGHS and travel long distances to avail medical facilities in WCs or in empanelled private hospitals. Even in case of a medical emergency, they have to, necessarily travel long distance to avail treatment in empanelled private hospital in the CGHS covered city.

In view of the difficulties being faced by such pensioner beneficiaries, in availing medical facilities, there is an urgent need to empanel private hospitals in each district of the state to provide comprehensive health care to pensioners who are already CGHS beneficiaries or who would like to avail CGHS facilities and obtain CGHS cards on payment of the required CGHS subscription.

CGHS being the best medical facility provided by the Central Government to its employees and especially to the pensioners on a cash less basis, it would definitely go long way in helping many of the central pensioners residing in cities and towns in the State, presently not covered by CGHS, to avail the medical facilities from CGHS empanelled private hospitals in their places of residence or in the cities/towns nearer to their place of residence at least for emergency treatment.

With the liberalization of the referral system, beneficiaries aged above 75 years can avail the OPD facilities at the empanelled hospitals without any referral from the Medical Officer of CGHS. This will greatly benefit the beneficiaries aged 75+, residing presently in uncovered cities if private hospitals in the District Headquarters are empanelled under CGHS.

## **7. Improvement of the Services provided by Private Hospitals empanelled under CGHS**

### **7.1 Providing Ambulance service**

In the Memorandum of Agreement (MoA) with the Private Hospitals a provision may be included for providing "Ambulance service" as one of the health packages. Providing ambulance service by the Private Hospitals to CGHS beneficiaries, whenever there is a call from the beneficiaries in case of emergency must be mandatory.

If this service facility is provided as one of the health packages, CGHS Beneficiaries and their family members will be saved of the hardship they usually face while arranging for an ambulance to shift the patient in time in case of an emergency.

### **7.2. Empanelment of more Private Hospitals/ revision of package rates**

There is wide gap between the package rates fixed by the CGHS for treatment of CGHS beneficiaries in private hospitals and the rates charged by the private hospitals for treatment of other patients. Some hospitals seek De-empanelment without assigning any reason. Rates were revised last in November 2014 and therefore, there is an urgent need for revision of rates which are commensurate with the increase in market prizes of medicines, Medical equipment and treatment procedures over the past 5 years. Revision of rates will encourage more number of private hospitals to seek empanelment. At present there are only 14 Private Hospitals, 20 Eye Clinics, 3 Diagnostic Labs, 6 Dental Clinics and 3 Ayurvedic Hospitals empanelled under CGHS in Bengaluru after 8 hospitals, 2 Diagnostic labs and a few Dental Clinics withdrawing from CGHS over the past 2-3 years. Even among the present 14 hospitals only a few are providing credit (cashless) facilities to pensioners causing great inconvenience and financial stress to pensioners. Therefore, it is necessary that a better coordination is established between

CGHS and HCOs and immediate action is taken to address the grievances or the demands of the private HCOs which might facilitate at least some of the HCOs to return to CGHS and also to provide credit facilities as before.

### **7.3 Admission to Private Hospitals**

Of late it is being reported that CGHS beneficiaries are put to lot of hardship and face problems for admission in CGHS empanelled hospitals, even in case of emergency. The empanelled hospitals either refuse to admit the beneficiaries, or find an excuse such as non availability of a bed to deny admission. It is expedient to advise such hospitals suitably in the matter.

## **8. Services at the Wellness Centres**

### **8.1 Not answering phone calls made to WCs**

Of late many complaints are being received about not answering the phone calls made to the WCs by the beneficiaries causing much inconvenience to them in ascertaining whether a particular Doctor is available for consultation. This complaint is almost on all the 10 WCs in the city. Strict instructions are required to be issued to the all the WCs in this regard.

### **8.2 Non-functioning of Token number display devises**

It is reported that the devises have become non-functional in almost all the WCs since many months and no action is taken to repair them in spite of several requests made by the beneficiaries. Therefore, immediate action needs to be taken in the matter. The disadvantage caused to beneficiaries in the absence of token display system needs no explanation.

### **8.3 Checking of BP and blood sugar level by a trained nurse before consultation with the Doctor**

A regular arrangement may please be made at the WCs for checking the BP and

blood glucose level in respect of diabetic and hypertension patients by a trained staff employed in the WC before the patients consult the doctors. Such an arrangement will help in reduction of time taken for examination of a patient by the doctor and facilitates examination of more number of patients.

#### **8.4 Supply of Medicines by CGHS WCs/ Advance procurement**

Medicines prescribed by the doctors when not available on stock are procured on day to day basis. It is suggested that such of the medicines which are procured almost daily for patients of diabetes, blood pressure, etc., can be procured once in a month in advance. Quantity required can be assessed based on average consumption. This will reduce the work load on pharmacists. Patients also need not make another trip for collecting medicines.

#### **8.5 Supply of Medicines for Cancer patients by the WCs instead of the office of the Additional Director**

Patients admitted at private hospitals for chemotherapy are given a schedule of treatment and are asked to bring the medicines for chemo on fixed dates. CGHS beneficiaries will have to collect these medicines from the respective wellness centres and take the medicines to the respective hospitals. These medicines are not either stocked at wellness centres or the WCs are authorised to place indent for supply by the local chemist. As per the extant instructions, such medicines will have to be purchased by the Additional Director, CGHS and supplied to respective wellness centres for supply to the beneficiary if the cost of the medicines exceeds the prescribed financial limit. This procedure causes a lot of delay in supply of medicines to patients.

Therefore, it is suggested that the wellness centres themselves may be authorised to place an indent for supply, purchase these medicines directly from the authorized Chemist /supplier or from the manufacturing companies

under the same terms and conditions as are now applicable for purchase by the AD CGHS.

#### **8.6. Re indenting of medicines not supplied by the Authorised Local Chemist.**

On some occasions, the medicines indented for supply by the ALC, are **not supplied by the ALC**. When the beneficiary goes to the WC to collect the indented medicines the next date, he/she is asked to get the medicines re-indented by the Doctor. For this, the beneficiary must register his/her name at the registration counter, get a token number and wait for his/her turn to meet the doctor to get the medicine indented again by the Doctor concerned.

If any alternative system is evolved to help the patients to avoid meeting the Doctor to get the same medicine indented again and visiting the WC again the next date, to collect the re-indented medicine, it would be really of great help to many beneficiaries.

#### **9. Reimbursement of Medical Charges**

The process of reimbursement of medical charges needs to be streamlined to avoid inordinate delay in sanction of the amount claimed. In a recent case, a ROMC application submitted with all the required documents in November 2022, was returned to the beneficiary in the second week of February 2023, for supplying an omission.

##### **9.1 Direct consultation with Specialists**

Direct consultation with the Specialists in empanelled Private Hospitals, at present, is available only to beneficiaries aged 75 and above. This facility may please be extended to all beneficiaries without any age limit.

#### **10. Preferential treatment in the matter of examination of “Senior Citizens” (aged 80+) by doctors at wellness centres.**

As per extant orders, “Senior citizen beneficiaries” (80+) do not have to stand in queue for consultation with the doctors and

can straightway walk into the consultation room. But quite often, they are physically prevented from entering the Doctors' room by other beneficiaries. Doctors do not also come to know that beneficiaries of 80+ are waiting for consultation. The very purpose of Government's order on the subject for affording preferential treatment to them thus gets defeated. It is also found that each WC adopts a different approach to address the issue. Hence there is an urgent need to issue instructions prescribing a certain uniform procedure to be strictly followed by all the WCs in affording preferential treatment to seniors beneficiaries aged 80 plus.

The following suggestion made in this regard may please be examined for implementation.

Separate set of tokens (Plastic tokens with a different colour) with separate serial numbers and marked "80+" be issued and sent directly to the doctor concerned from the Registration counter in order that their entry may be regulated by the doctor himself/herself by display of the token number of the senior beneficiary on the Electronic Token Display System, however, depending upon the number of other non 80+ beneficiaries, who may be waiting for consultation. (Say one 80+ for every 3 or 4 other beneficiaries).

#### **11. Issue of tokens to those who have booked online appointments**

Now tokens are not being issued at the registration counters to beneficiaries who have booked online appointments. They are asked to consult the doctor directly. Though a token number is allotted to each beneficiary while booking the online appointment, other beneficiaries already waiting for their turn to meet the doctor, will object when the beneficiary tries to enter the consultation room as the beneficiary would have arrived at the WC much later, i.e. at the time indicated in the message he got after booking online appointment, whereas the others would have come to the WC much earlier.

To avoid such embarrassment to the beneficiaries who have online appointments, it would be better if tokens are issued to all beneficiaries at the registration counter i.e. for both online and off line appointments.

#### **12. Referral system : Consultation with the Specialists of Private hospitals**

Though the system has been simplified vide OM dated 10-12-2018, the beneficiary has to visit the WC and meet the doctor to get a referral for undergoing the tests/investigations/procedures etc. prescribed by the Specialist of the Private Empanelled Hospital. This results in multiple visits both to the CGHS WC and the Private Hospital. This is highly inconvenient to those beneficiaries aged 75+ ,who reside in far away towns/cities and go to the private hospitals for specialist consultation forcing them to stay in Bengaluru for a couple of days to undergo further procedures prescribed. Therefore it is requested that the referral system may be liberalised further so that the tests/investigations/procedures prescribed by the Specialists of Private Hospitals may be permitted to be undergone at the same hospital without any need for obtaining a referral (in case of 75 +) and another /second referral (in case of below 75).

#### **13. Revision of Ward entitlement –issue of new cards to eligible beneficiaries.**

In accordance with the Office Memorandum issued by the Department of Health & Family Welfare, (EHS Section) vide its O M F. No. S.11011/11/2016-CGHS(P)/EHS Dated, the 28th October, 2022 issued in partial modification to O.M. of even number dated 9th January, 2017, and clarification issued vide O M File No: S.11011/11/2016'CGHS (P) Dated the 22nd November, 2022 and clarified further by the Department of Health & Family Welfare vide its letter No. S.11011/11/2016-CGHS(P) dates 23.01.2023 addressed to Shri Shiva Gopal Mishra, Secretary, National Council (staff side) (copy enclosed), entitlement

of wards in private hospitals empanelled under CGHS as contained in Para 3(B) of the O.M. 9-1-2017 is revised as below to all beneficiaries

who have applied for CGHS card and have been issued a card on or after 1-2-2017.

### Entitlement of Wards in Private Hospitals Empanelled under CGHS

SL.No.	Corresponding Basic Pay drawn by the officer in 7 <sup>th</sup> CPC per month	Ward entitlement
1	Up to Rs.36,500/-	General
2	Rs.36,501/- to Rs.50,000/-	Semi-Private
3	Above Rs.50,500/-	Private

A clarification issued by the Department of Health and Family Welfare vide its File No: S.11011/11/2016'CGHS (P) Dated the 22nd November, 2022 states that "all CGHS beneficiaries (Serving & Pensioners) who are eligible for upgradation of their ward entitlement, according to the revised basic pay slabs, as mentioned in OM dated 28.10.2022, **may apply for fresh CGHS card**".

Para 2 of the letter to the Secretary Staff Side states that "*Vide OM dated 28.10.2022 ward entitlement of beneficiaries have been revised with the approval of D/o Expenditure in order to rectify the anomaly that had occurred post 7<sup>th</sup> CPC and as notified vide OM dated 09.01.2017. Therefore, all CGHS beneficiaries (serving and retired) whose ward entitlement underwent down gradation from 01.02.2017 onwards are entitled for ward up gradation as per OM dated 28.10.2022.*

It is, therefore, requested that immediate action may kindly be taken to issue new CGHS cards to all those beneficiaries who have been issued CGHS card on or after 1-2-2107 and who have paid CGHS Subscription at the revised rate as communicated vide O M F. No. S.11011/11/2016-CGHS(P)/EHS Dated, the 9<sup>th</sup> January, 2017 issued after implementation of 7<sup>th</sup> CPC pay revision. Para V of the OM dated 9-1-2017 is reproduced for ready reference.

(v) *Any pensioner / family pensioner who is entitled to avail CGHS facility has not so far got his / her pensioner CGHS card made, the rate of contribution in such cases will be with reference to the level of pay that he / she would have drawn in the post held by him / her (at the time of his / her retirement / death) had he / she continued to be in service now but for his/ her retirement / death.*

It is therefore evident that all beneficiaries who have **paid the subscription** with reference to the pay in the level under 7<sup>th</sup> CPC corresponding to the last pay drawn by them on their retirement are now entitled to wards for treatment in private empanelled hospital as indicated in OM dated 9-1-2017 read with the modification issued vide OM dated 28-10-2022 and clarified vide OM dated 22-11-2022 referred to above **irrespective of their date of retirement . The only criterion is that they should have applied for CGHS card after 1-2-2017 and should have paid subscription at the rates introduced after implementation of at 7<sup>th</sup> CPC.**

#### **14. Issue of Medicines to Beneficiaries by the WCs**

The following complaints are often made by the beneficiaries regarding medicines issued to them

- (a) Medicine prescribed by a specialist is not dispensed in the same strength as



prescribed. For example, if the prescription is for a tablet of 500 mg strength, 2 tablets of 250 mg are supplied forcing the patient to swallow 2 tablets instead of one. Similarly, when the prescription is for say, 250 mg strength, one tablet of 500 mg is supplied forcing the patient to cut the tablet in to two pieces.

- (b) In recent days, emphasis is on issue of generic medicines in place of branded medicines, even if prescribed by specialists. Patients who are not quite conversant with composition of medicines tend to believe that the medicine supplied is not the one prescribed. Hence there is a need to relax the instructions issued by the Health Ministry regarding supply of medicines to allow issue of branded medicines at least in the case of prescription by a specialist.
- (c) In order to remove any doubts/apprehensions in the minds of the beneficiaries about the quality of the medicines issued to them, a mechanism may be set up at the national level to examine/ test the efficacy of the medicines issued across the WCs.

**15. Relaxation of conditions for empanelment of Private Hospitals**

Some Private Hospitals/Labs, especially in Mysuru, though are willing to get empanelled under CGHS cannot do so because they are not NABH /NABL/QCI hospitals/labs. In view of the fact that many reputed private hospitals

have gone out of the ambit of CGHS, it is suggested that the rules regarding empanelment may be liberalised to allow Non-NABH, Non-NABL HCOs also to get empanelled under CGHS.

**16. Ayurvedic Doctor to Mysuru CGHS**

Posting of an Ayurvedic Doctor to Mysuru WC may please be considered.

**17. Medical Facilities to Pensioners of Autonomous / Statuary body – providing treatment at CGHS rates on CASH PAYMENT by the empanelled Private HCOs.**

Pensioners of some Autonomous / Statuary bodies are not covered by any Health Scheme and are forced to meet the cost of their medical treatment from their pension. In the recent past, on the request made by the Pensioners Associations of Autonomous Bodies, some of the empanelled private hospitals in Bengaluru, have agreed to provide medical treatment at CGHS rates on payment of cash. It is requested that all Empanelled Private Hospitals/LABs/Diagnostic Centres may be advised by the Health Ministry, Department of Health & Family Welfare, through a circular, prevailing upon them to provide treatment at CGHS rates on CASH PAYMENT to Pensioners of Autonomous / Statuary Bodies.

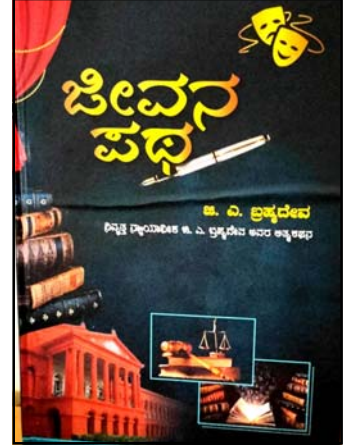
K.B. Krishna Rao  
President, CCCGPA & Secretary, K P&T PA

**CGHS Wellness Centre, Mysuru**

**JSS HOSPITAL, Mahatma Gandhi Road, Mysuru  
empanelled under CGHS for treatment of CGHS beneficiaries.  
Inaugural function was held on 13-03-2023.**



**Sri G.A. Brahmadeva, member K P&T PA, ALM 1753, Retd. Judicial Member, Customs, Excise & Service Tax Appellate Tribunal Bengaluru, pens his autobiography. Book titled “JEEVANA PATHA” was released in an event on 5-3-2023**



From the left:

- \* Prof. H.S. Lakshminarayana Bhatta, noted Kannada literature, former Professor of Physics, Visweshwarapuram Science College, Bangalore popularly known as 'Kaggada Bhatta', for popularising DVG's 'Mankutimmana Kagga' by delivering a number of discourses and lectures on DVG's and other Muktaka literatures in and outside the State.
- \* Sri P.C Jain, former Member Technical, Customs, Excise & Service Tax Appellate Tribunal Bengaluru.
- \* Nadoja Ham.Pa. Nagarajaiah, noted Kannada Litterateur, popularly known by his pen name Hampana, a scholar in Kannada language and Jainism.
- \* Sri G.A. Brahmadeva, Author. Retd. Judicial Member, Customs, Excise & Service Tax Appellate Tribunal Bengaluru,
- \* Mr. Justice M.I Arun, Hon'ble Judge, High Court of Karnataka
- \* Sri T.P. Basavaraj, President, Basaveshwaranagar Senior Citizens Forum, Bengaluru.

The autobiography of Sri Brahmadeva, who attained 80 years on 4-3-2023, was released by Mr. Justice M.I. Arun, Hon'ble Judge, High Court of Karnataka at a glittering event held at RG Royal Hotel and Convention Centre, Bengaluru.

A large number of his relatives, friends and acquaintances were present on the occasion. Sri K.B. Krishna Rao, Secretary, K P&T PA, on invitation, attended the ceremony and extended best wishes for a long & healthy life to Sri G.A. Brahmadeva on behalf of the 3300 members of the association.

### Central Govt Holidays in APRIL, 2023

Mahavir Jayanthi	04-04-2023	Tuesday
Good Friday	07-04-2023	Friday
Id-UI-Fitr	21-04-2023	Friday

**Payment of arrears of Dearness Relief (DR) to pensioners drawing pension from Post Offices during the course of the month instead on the last working day along with pension**

It may be recalled that the association had submitted a memorandum to Sri Vineet Pandey, Secretary, Department of Posts, who was on a visit to Bengaluru City on 7-11-2022, requesting his kind intervention in the matter to ensure payment of arrears of DR to pensioners within a reasonable period after issuance of the OM by Department of Pension and Pensioners' Welfare, instead of at the end of the month along with the pension. [Memorandum - page 5 of November 2022 issue of the journal]. The memorandum was handed over to the Secretary by Smt. N.Nagalakshmi, Vice-President, KP&TPA in the function arranged by the CO on 7-11-2022 at Bengaluru GPO to honour Smt. Nagalakshmi on her being awarded "Anubhav Award" by the Department of Pension and Pensioners' Welfare, New Delhi.

We are glad that necessary instructions have been issued by the Chief Postmaster General, Karnataka Circle to all General Managers of all Regions in the Circle to ensure Off-cycle payment of arrears. CPMG letters to ROs and the Association are reproduced below.

**1. Letter to the Association**

Office of the Chief Postmaster General,  
Karnataka Circle, Bengaluru-560001.

To The President, Karnataka Posts & Telecommunications Pensioners' Association, Bengaluru

No AP/16-1/Pensioners/DR dt. 23-12-2022

**Issue on non payment of arrears of DR to pensioners.**

With reference to your letter No. KPTPA/

DR/2022 dated 07-11-2022 on the above cited subject, Technology Branch of this office has issued directions to regional Offices to take appropriate action and to instruct all the DDOs and HOs to process DR arrears disbursement through OCP(Copy enclosed)

This is for kind information

yours faithfully,  
Accounts Officer(A&P)

**2) Letter to ROs**

No. CSI/2-13/HRMODULE/2022/II dated 20/21-12-2022 of CPMG, Karnataka Circle Bengaluru, addressed to all Postmasters General, Karnataka Circle.

**Issue on non payment of arrears of DR to Pensioner before last working day of the month reg.**

This is regarding non payment of DR to Pensioners through Off Cycle Payments by DDOs under Karnataka Circle. Letter No. KPTPA/DR/2022 dated 07.11.2022 from Karnataka Posts & Telecommunications Pensioners Association is enclosed for ready reference.

2. In this regard, instructions to all DDOs to be given to process disbursement of DR arrears to Pensioners through OCP - Off Cycle Payments. The SOP for the same is available in utilities.cept.gov.in/csi

3. Technical issues may be reported to HRMS team, CEPT email: HRMS.cept.gov.in with a copy to Technology Section and Accounts Section of the Circle Office

4. This has the approval of the competent Authority  
Sd/- APMG (Technology & FS)

<b>ALL INDIA CONSUMER PRICE INDEX</b>						
Month	CPI Base 2016=100	CPI base 2001=100	12 Months total	Monthly average	7th CPC	DR due
					% increase over 261.42	
Dec 22	132.3	132.3x2.88 = 381	4467	372.25	42.39	48% from January, 2023
Jan 23	132.8	132.8x2.88 = 382	4489	374.08	43.09	

\* linking factor for conversion of the index numbers of 2016 base year to 2001 base year: 2.88

*DA/DR expected from 1.1.2023 - 42% (increase: 4%) - Orders Expected*

## APPEAL FOR DONATIONS FOR THE BUILDING FUND

We appeal to our **Members who have not yet paid** their contribution to the building fund please to remit their donation. 76th list of donations is published in this issue.

**New members are also requested to donate generously to the building fund**

Amount may please be remitted by *crossed cheque* payable to "Karnataka P&T Pensioners' Association". Cheques may please be sent to: Sri K.R. Anantha Ramu, No 1158, 7th Main, 7th Block, HMT Layout, Vidyanarayapura, Bangalore-560097 (Mob: 9448477129) or

**Preferably, be credited to the Association's Bank Account:**

**Name: Karnataka P&T Pensioners' Association;**

Bank: State Bank of India, Branch: HMT Layout branch, Vidyanarayapura, Bangalore  
Current Account No.64209078453, IFSC:SBIN 0040659

**INCOME TAX EXEMPTION:** 50% of the amount of donation made to K P&T PA, is eligible for deduction in the gross total Income of the assessee under Section 80-G of Income Tax Act.

Please invariably inform us of the details of credit through a message or phone call on Mobile **No.09448477129 or 09483467750** to enable us to acknowledge the receipt of the amount and to send you a receipt.

### Donation for the Building Fund - 76th List January-February 2023

SI No.	Name Sri/Smt.	Membership No.	Amount Rs.	Receipt No.	Progressive Total of donation
1624	S. Siddaraju	3205	2001	5337	
1625	G.P. Shivanna	2213	1000*	5340	*Shown as subscription in Feb23 deleted
1626	R.Thanikachallam	2166	320	5335	4840

### Donation to the Assn. for Educational Purposes- February, 2023

SI No.	Name Sri/Smt.	Membership No.	Amount Rs.	Receipt No.	Progressive Total of donation
1	H R. Sathyanarayana	2367	10,000		

**CGHS**

Office of the Additional Director, Central Government Health Scheme, III Floor, 'E' Wing Kendriya Sadan, Koramangala Bengaluru – 560 034 OFFICE ORDER No.19-3/2014/ADMIN.(129)/690  
Dated: 01/03/2023

## Removal of Aster CMI Hospital, Hebbal from list of empanelled hospitals under CGHS Bengaluru.

Consequent upon non-extension of MOA, by **Aster CMI Hospital - Hebbal # 43/2, New Airport Road, NH7, Sahakarnagar, Hebbal, Bengaluru - 560092** which was empanelled under CGHS Bengaluru Vide OM No. 19-3/2014/ADMIN.(129)/5287 dated 13/12/2019, is removed from the list of CGHS empanelled hospitals with immediate effect.

Additional Director

## **BSNL/DOT Pensioners**

Gol, Ministry of Communications, Department of Telecommunications,  
O/o. Controller General of Communication Accounts, NICF Campus, Ghitorni, New Delhi-110047.  
No. 13-50/2020-21/BA&IT/ 4 38L -442 Dated /4.03.2023

To, All Pr. CCAs/ CCAs/ Jt. CCAs

### **Extension of timeline for submission of Life Certificate for migrated pensioners. Ref: O/o. GCA**

#### **Letter No. 13-50/2020-21/BA&IT/2516-2546 dated 30.11.2022.**

It is to convey that Migration of pensioners from CPPCs to SAMPANN is currently underway and being taken up in a phased manner. As on date more than 1.5 Lakh Telecom Pensioners drawing pension from CPPCs (Banks) have been migrated and their pension is being paid via SAMPANN.

For uninterrupted pension payment of migrated pensioners, such pensioners need to submit their LC/DLC to concerned CCA Offices. In this regard, certain guidelines have been issued from time to time.

In modification of the letter no.13-50/2020-21/BA&IT/2516-2546 dated 30.11.2022 (Enclosure-I) issued regarding extension of timelines for submission of LC/DLC by pensioners, all migrated pensioners hereby given a relaxation of 9 months from the month migration within which they would need to submit their LC/DLC. For example, for a pensioner migrated in July 2022, pension would be paid uninterrupted till March, 2023. The pensioner would need to

submit his/her LC/DLC by 30th April, 2023 for continuation of pension. Similarly, for a pensioner migrated in November, 2022, pension would be paid uninterrupted till July, 2023. The pensioner would need to submit his/her LC/DLC by 31 August, 2023 for continuation of pension.

Also, to streamline the process of submission of LC/DLC by migrated pensioners the guidelines (Enclosure-II) are hereby reiterated which may be followed by all Pr. CCA/ CCA/ Jt.CCA offices.

All Pr. CA/CCA/Jt.CCA may give wide publicity amongst the pensioners and Pensioners Associations via means of SMS (mSeva)/Call/Letters/Camps about the measures being taken by the Department to facilitate the submission of LC/DLC.

This issues with approval of the Competent Authority.

**(Taranjeet Singh)**  
Dy. CGCA (BA&IT)

## **OBITUARY**

**Sri C.S. Sathyamurthy**, LM 461, retired Sr.Telephone Supervisor, BSNL BG TD, expired on 4-8-2022 at the age of 87 years.

**Sri P.A.Koneri Rao**, LM 906, retired SPM, Mathikere PO expired on 5-2-2023 at the age of 89 years.

**Sri P.R. Tantri**, ALM 637, Retired Advisor, Ministry of Finance, New Delhi expired on 21-2-2023 at the age of 87 years.

**Smt. Malathi.R.Pai**, LM 2716, retd. Chief Telephone Supervisor, Telephone Exchange, Davanagere expired on 4-3-2023 at the age of 81 years.

**Sri Babu Rao**, LM 3175, retired HSG-II Supervisor, Bengaluru PSO, RMS BG STG Dn. expired on 8-3-2023 at the age of 60 years. He was former President, AIRMSEU- Group C, Karnataka Circle. He had retired from service on 31-7-2022. While in service at Bengaluru PSO, Sri Babu Rao used to take personal interest in disposal of the Association's monthly journal *Pensioners' Champion* on the same date of posting of the journal at the Pathrika Channel.

The Executive Committee of K P&T PA conveys its heartfelt condolences to the members of the bereaved families



## Question Corner

**Q-** Whom should the spouse of a postal pensioner approach for payment of family pension on the death of the pensioner who was drawing pension from post office and what is the timeline for commencement of family pension ?

**S.N. Yewoorkar**, Gulbarga LM 2003

**A-** The spouse, Wife or husband, as the case may be, must submit an application to the Postmaster of the Head Post Office through which the pensioner was getting his/her pension in form No.10 enclosing thereto all the documents listed in the application form as per Rule 50 of CCS(Pension)Rules 2021. (Form 14 as per Rule 54 of 1972 Rules)

If the pension was being paid through a **joint SB account** operated by the pensioner and the spouse, there is no requirement of Form 10. The spouse may request the Postmaster for commencement of family pension through a simple letter enclosing a copy of the death certificate of the pensioner, copy of the Pension Payment Order, Proof of age/ Date of birth, undertaking for recovery of excess payment, Specimen signature, Self-attested passport size photographs etc. (Reference: Govt of India decision below Rule 79)

The Postmaster, who is the Pension Disbursing Authority, shall initiate action as required vide Rule 79 (1) (20(a)(i) and (ii) -

In the case of death of a pensioner, if the deceased pensioner is survived by a widow or widower who is eligible for the grant of family pension under rule 50, the amount of family pension as indicated in the Pension Payment Order shall become payable to the widow or widower, as the case may be, from the date following the date of death of the pensioner.

(ii) The Pension Disbursing Authority, (ie the Postmaster in the case of postal pensioners) shall commence disbursement of family pension, as authorised in the Pension Payment Order, to the widow or widower, whose name has been included in the Pension Payment Order, **within one month** of the receipt of a claim in form 12 from the widow or widower along with a copy of the Death Certificate. (Form 12 not required in case of Joint SB account)

### **Provisions under Rule 142 of Postal Financial Handbook Volume-II for commencement of family pension:**

142. A disbursing officer, will in case of death of pensioner governed by Rule 54 of Central Civil Services (Pension) Rules 1972, (now Rule 50 Central Civil Services (Pension) Rules 2021) start paying family pension to the widow / widower on receipt of death certificate of the pensioner and the Application in Form TR –40 for the grant of family pension to her/him, and he will also send an intimation in this regard to the Postal Accounts Office or CCA/Joint CCA in Form TR 40-B. Provisional Family Pension wherever payable through the Head Office, shall be drawn by the Head post office in which the Government servant was serving immediately before his death, in Form ACG – 108 at the authorized office of disbursement at which the pay and allowances of the establishment are drawn by him.

In case a report about the death of a pensioner is first received from a source other than the widower/widow, the Disbursing Officer, shall after satisfying himself about the correctness of the report, write to the widow or widower at the address given in the PPO, seeking compliance with the prescribed formalities, so that payment of family pension to the entitled person(s) is commenced early.

### **BSNL IDA**

IDA From 1-10-2022, 195.8% (5% increase over July, 22 rate of 190.8%)

IDA From 1-1-2023, 201.2% (5.4% increase over Oct. 22 rate of 195.8%)



## Subscription received for Pensioners' Champion During January-February 2023

Rs.180/- Smt./Sri	Rs. 180/- Smt./Sri	Rs. 360/- Smt./Sri	Rs. 900/- Smt./Sri
401 H.V.Shivaswamy (Aug 22)	2327 K.Ranganath	1744 N.Rama Murthy	1775 S.S.Deshpande
486 M.G.Nanjunda Swamy	2967 Usha Nanjundaiah May 22	1859 R.Venugopala Rao	<b>Rs. 1800/- Smt./Sri</b>
1619 M.N.Ramachandra Rao	XX Abdul M (credited on 8-2-23)	1894 N.Subbaiah	2119 S.K.Ramachandra
1667 Chandrashekaraiyah	<b>Rs. 200/- Smt./Sri</b>	2153 R.Shivashankar	<b>Rs. 4320/- Smt./Sri</b>
1726 H.B.Gundu Rao	2081 A.R.Prahlada Rao	2213 G.P.Shivanna	2001 K.G.Ravindra
1990 B.Ramanna	XX 167 ARGA CHA ?? (Credited on 23-2-23)	<b>Rs. 540/- Smt./Sri</b>	
2063 S.M.Hadagalagiri		1395 M.D.Mahadev (550) (Smt M Leela FP)	
2166 R.Thanikachallam		305 B.R.Rao	
		1844 V.Narayanan Kutty	

### We Welcome the Following Newly Enrolled Members

Sl.No.	Name (Smt./Sri)	Designation & Office in which last worked	Type & No.
1	J.Muraleedhar	MTS, Bengaluru City RMS, Bengaluru	LM 3269
2	A. Ambrose	MTS, Bengaluru City RMS, Bengaluru	LM 3270
3	Thejovathamma	Family Pensioner	LM 3271
4	Bhat Vithal Madhav	LSG Postal Assistant, Jalahalli Head Post Office, Bengaluru	LM 3272
5	Subhaschandra.B.Malagi	TGT(Maths), Kendriya Vidyalaya, Hubballi	LM 3273
6	P.Damodhar Bhat	Senior Superintendent RMS, Bengaluru Sorting Division	LM 3274
7	D.N.Manjunathaiah	Postman, Tumakuru Head Post Office, Tumakuru	LM 3275
8.	N. Vasudevan	Manager, National Sorting Hub, (NSH), Bengaluru GPO	LM 3276

LM: Life Member

ALM: Associate Life Member



**Smt Nagamani S. Rao**, Retd. Asst. News Editor, AIR, Bengaluru

Member of KP&TPA, ALM 1339, (Sitting third from the left) selected for Yashodamma G. Narayana award by Karnataka Union of Working Journalists in recognition of her yeomen service to journalism during the past several decades and for her excellence in presentation of local news in Kannada over AIR Bengaluru during her service with AIR. KP&TPA extends its hearty congratulations to her.

Smt. Rao was conferred with the prestigious "Karnataka Rajyothsava Award" in 2015 by the Government of Karnataka. She was felicitated by KP&TPA in its Annual General Body Meeting held on 4-6-2016.

Licensed to post without pre-payment License No.PMG BG /WPP-392/2021-2023

## Release of DR for 18 months 1-1-2020 to 30-6-2021

Gol, Ministry of Finance, Department of Expenditure, Lok Sabha Unstarred Question No. 1971 answered on 13th March, 2023 Release of DA Arrears to Central Government Employees and Pensioners

1971:: Shri C. Lalrosanga: Will the Minister of Finance be pleased to state:

- Whether the Government has any plan to release the 18 months DA Arrears stopped during Covid-19 Epidemic to Central Government Employees and Pensioners in the near future and if so, the details thereof and the time by when the Government is likely to release the arrears;
- The reasons for the delay in the release of said DA arrears; and
- The total amount of funds required for the disbursement of the DA Arrears to Central Government Employees and Pensioners?

### Answer

Minister of State in the Ministry of Finance: (Shri Pankaj Chaudhary)

- (a)&(b): No, Sir, The decision to freeze three instalments of Dearness Allowance(DA)/ Dearness Relief (DR) to Central Government employees/pensioners due

from 01.01.2020, 01.07.2020 & 01.01.2021 was taken in the context of COVID-19, which caused economic disruption, so as to ease pressure on Government finances. As the adverse financial impact of pandemic in 2020 and the financing of welfare measures taken by Government had a fiscal spill over beyond FY 2020-21, arrears of DA/DR which mostly pertain to the difficult FY of 2020-21 are not considered feasible. Even now the fiscal deficit of the Government is running at more than double the level envisaged in the FRBM Acct.

- (c): Does not arise. However, an amount of Rs.34402.32 crores had been saved and utilized to tide over the economic impact of COVID-19 pandemic on account of freezing of three installments of Dearness Allowance and Dearness Relief payable to Central Government employees and pensioners.

## RENEWAL OF SUBSCRIPTION FOR THE JOURNAL

Members/Subscribers, who have not yet renewed their subscription are requested to renew now.

### Regd. Journal

If undelivered, please return to:

**Karnataka Posts and Telecommunications Pensioners' Association (R)**  
165, 4th Main, 3rd Block, 3rd Stage,  
Basaveshwaranagar,  
Bengaluru-560 079.

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