Advances Chapter 9.1

9.1.1 Two types of advances are granted to government employees: Interest-free and Interest-bearing.

# **Interest-free Advances**

9.1.2 Presently 12 interest-free advances are permissible. Their details are as follows:

**Table 1: Interest-free Advances** 

S.No.	Name	Amount	Eligibility	Remarks
1	Bicycle Advance	₹4500	GP<=2800	Recoverable in max 30 monthly installments
2	Warm Clothing Advance	₹4500	All Group C employees posted at a hill station either on first appointment or on transfer, for a period of not less than one year	Recoverable in max 12 monthly installments
3	Advance of Pay on Transfer	1 month's pay OR 2 months' pay in case of transfer due to shift of HQ as a result of government policy	All employees transferred from one station to another in public interest	Recoverable in max 3 monthly installments
4	Advance of TA on Tour/ Transfer/ Retirement	An amount sufficient to cover the officials' personal travelling expenses for a month or six weeks in case of prolonged tours	All cases where TA is admissible	The advance shall be adjusted immediately after completion of tour
5	Advance of TA to the family of a deceased government employee	Limited to 3/4 <sup>th</sup> of probable expenses admissible under the rules	Same as for retirement/transfer	
6	Advance of LTC	Up to 90% of the fare	All eligible Central Government Employees	

S.No.	Name	Amount	Eligibility	Remarks
7	Advance of Leave Salary	An amount not exceeding the net amount of leave salary including allowances for the first 30 days of leave after deduction of PF, House Rent, Income Tax, Recovery of Advances, etc.	All officials proceeding on leave for a period not less than 30 days	Adjusted against the monthly salary bills
8	Advance in connection with medical treatment	90% of the package deal for specific major illnesses. ₹10,000 for indoor treatment or outdoor treatment of 3 months or less for cancer. ₹36,000 for treatment of TB where duration is more than 3 months	All Central Government employees except Railway employees	
9	Festival Advance	₹4500	GP<=4800	Recoverable in max 10 monthly installments
10	Advance in the event of natural calamity like flood, drought, cyclone, etc.	₹7500	All non-Gazetted employees	Recoverable in max 12 monthly installments
11	Advance for training in Hindi through Correspondence Course	₹450	For those Central Government employees who undergo training through correspondence course conducted by the Central Hindi Directorate	
12	Advance for Law Suits	₹500	All Central Government employees	Recoverable in max 24 monthly installments

9.1.3 There is a general demand from the JCM-Staff Side to increase all interest-free advances to three times their present value.

# Analysis and Recommendations

9.1.4 As can be seen from the table above, the amount of most of the advances is quite low. With the increased salary packages provided after successive Pay Commissions, these advances have lost their relevance. Hence, to do away with outdated provisions and thereby

save on the costs involved in administering these advances, it is recommended that all Interest-free advances should be abolished.

# **Interest-bearing Advances**

9.1.5 The following four Interest-bearing advances are presently admissible:

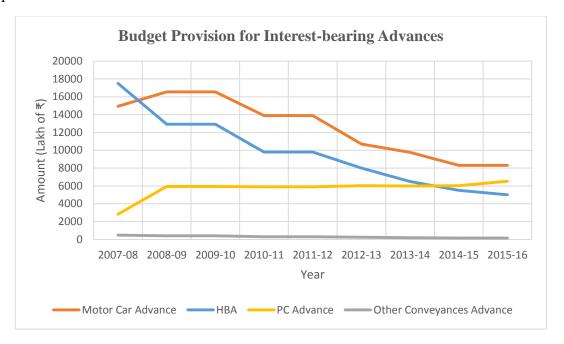
**Table 2: Interest-bearing Advances** 

Table 2: Interest-bearing Advances				
S.No.	Name	Amount	Eligibility	Remarks
1	Motor Car Advance	₹1,80,000 on first occasion and ₹1,60,000 subsequently OR 8 months' Basic Pay OR anticipated price of car, whichever is least	Pay in the pay band of ₹19,530 or more, excluding GP	Recoverable in max 200 monthly installments
2	Motorcycle/ Scooter/ Moped Advance	₹30,000 on first occasion and ₹24,000 subsequently OR 4 months' Basic Pay OR anticipated price of Motorcycle/ Scooter/Moped, whichever is least ₹20,000 OR anticipated price of Moped only, whichever is less if pay<8560	Pay in the pay band of ₹8,560 or more, excluding GP	Recoverable in max 70 monthly installments
3	Advance for purchase of Personal Computer	₹80,000 on first occasion and ₹75,000 subsequently OR anticipated price of PC, whichever is less	Pay in the pay band of ₹19,530 or more, excluding GP	Recoverable in max 150 monthly installments
4	House Building Advance (HBA)	34 months' Basic Pay OR ₹7,50,000 OR Cost of House OR repaying capacity, whichever is the least for new construction/purchase of new house/flat.		
		For a new house, the cost ceiling limit shall be 134 times the pay in the pay band subject to a minimum of ₹7.50 lakh and a maximum of ₹30.00 lakh relaxable up to a maximum of 25% of the revised maximum cost ceiling of ₹30.00 lakh.		Recovery of principal in max 180
		The maximum limit for grant of HBA for enlargement of existing house shall be 34 months' of pay in the pay band subject to a maximum of ₹1.80 lakh or cost of the enlargement or repaying capacity, whichever is the least.	All permanent officials or officials with at least 10 years of continuous service	monthly instalments and Recovery of interest in max 60 installments subsequently

Analysis and Recommendations

9.1.6 The present position is that meagre funds are allotted for these advances and only a few manage to avail this facility. In fact, budget provision for all of them, except Advance for

purchase of Personal Computer, has been reducing over the years, as can be seen from the graph below<sup>35</sup>:



9.1.7 Regarding Motor Car Advance and Motor Cycle/Scooter/Moped Advance, we are of the view that quite a few schemes for purchase of vehicles are available in the market from time to time. The employees should avail of these schemes and both these advances should be abolished.

9.1.8 Regarding other interest-bearing advances, the following is recommended:

S. No.	Name of Advance	Recommended Ceiling	Recommendations
1	PC Advance	₹50,000 or actual price of PC, whichever is lower	May be allowed maximum five times in the entire service.
		34 times Basic Pay OR ₹25 lakh	The requirement of minimum 10 years of continuous service to avail of HBA should be reduced to 5 years.  If both spouses are government servants,
2	НВА	OR anticipated price of house, whichever is least	HBA should be admissible to both separately.  Existing employees who have already taken Home Loans from banks and other financial institutions should be allowed to migrate to this scheme.

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<sup>&</sup>lt;sup>35</sup> Source: Detailed Demands for Grants, Ministry of Finance.

#### Introduction

9.2.1 Presently Central Government offices observe a five-day week which results in 104 holidays every year on account of weekends. In addition, there are three National Holidays, fourteen Gazetted Holidays and two Restricted Holidays. Further, civilian government employees are entitled to 8 days' Casual Leave, 20 days' Half Pay Leave (commutable to Medical Leave) and 30 days' Earned Leave. Besides the above, quite a few other types of leave are admissible.

9.2.2 The following paragraphs bring out, in alphabetical order, the different kinds of holidays and leave admissible, demands received (if any) and views of the Commission on each one of them. Unless otherwise stated, the existing terms and conditions regulating these holidays and leave shall remain unchanged.

# Casual Leave (CL)

9.2.3 Casual Leave is granted to enable a government servant to attend to sudden/unforeseen needs/tasks. Presently 8 days CL is normally granted to a Central Government employee per calendar year. The number goes up to 10 days for Industrial Workers, 20 days for Defence Officers and 30 days for Defence PBORs. Certain other categories of staff, particularly in the Railways, are granted CL ranging from 11 to 13 days in a year. Demands have been made to increase the number of CL to 15 days for Industrial Workers and 12 days for other employees. CAPFs have also sought parity with defence forces in matters of Casual Leave.

#### Analysis and Recommendations

9.2.4 Regarding the number of Casual Leave, the Commission is of the view that the present system is working well and need not be altered. As far as the case of CAPFs for parity with defence forces is concerned, the Commission notes that CAPFs are essentially civilian forces and their service conditions are different from defence forces. Hence parity in terms of number of casual leave cannot be considered. To sum up, **status quo is recommended**.

# **Child Adoption Leave**

9.2.5 This leave is granted to female employees, with fewer than two surviving children on valid adoption of a child below the age of one year, for a period of 135 days immediately after the date of valid adoption.

#### Analysis and Recommendations

9.2.6 No demands have been received regarding this leave. Accordingly, **status quo may be maintained**.

# Child Care Leave (CCL)

9.2.7 Child Care Leave (CCL) is granted to women employees for a maximum period of two years (i.e., 730 days) during their entire service for taking care of their minor children (up to eighteen years of age). There are several demands relating to CCL which include converting the same into "family care" leave, extending the facility to male parents and many representations stressing that it should be extended at least to single male parents. Suggestions have also been received that in cases where the child is differently abled, the clause stipulating that the child should be minor, should be done away with. Single mothers have highlighted their unique problems and requested the Commission for liberalising the grant of CCL. Interestingly, representations have also been made for discontinuance of the CCL, primarily on the grounds that it disrupts office working and also because it promotes gender discrimination.

#### Analysis and Recommendations

9.2.8 When CCL was first introduced by the VI CPC it generated considerable interest as it represented a positive measure benefiting women employees. It also took a while to stabilise and it is seen that as many as five amendments/clarifications were issued within a short period of time. As it stands, it is meant for women employees "for taking care of up to two children whether for rearing the children or looking after their needs like examination, sickness etc." It is treated akin to Earned Leave and is sanctioned as such. It may not, however, be granted in more than three spells in a calendar year.

9.2.9 In the first two years of its implementation the experience was that women employees tended to treat this as Casual Leave or an extension of the same, and the resultant frequent absences caused disruptions at work. To address this, in September 2010, a clarification was issued stipulating that CCL may not be granted in more than three spells in a calendar year and also that it may not be granted for less than 15 days at a time. However, the latter stipulation was subsequently withdrawn and as per the latest clarification issued on 5 June, 2014 the government has decided to remove the requirement of minimum period of 15 days CCL. It has been brought to the notice of the Commission that the capping of maximum three spells in a calendar year has, to some extent, addressed the problems relating to disruption of work. Notwithstanding that, in the course of discussions with various stakeholders, the sense that has come across is that what was introduced as a welfare measure to help employees in times of need, is seen as a benefit that has to be availed simply because it exists. There is, therefore, a palpable need to bring in some inhibiting feature so as to ensure that only genuinely affected employees avail of this scheme. Towards this end the Commission recommends that CCL should be granted at 100 percent of the salary for the first 365 days, but at 80 percent of the salary for the next 365 days. In making this recommendation the Commission has also kept in mind the fact the concept of a paid (whether 100% or 80%) leave solely for child care for a period of two years, is a liberal measure unmatched anywhere else.

9.2.10 The Commission notes that in the event a male employee is single, the onus of rearing and nurturing the children falls squarely on his shoulders. Hence **extension of CCL to single male parents is recommended**. Moreover, the Commission recognizes the additional responsibility on the shoulders of employees who are single mothers. Accordingly, it is

recommended that for such employees, the conditionality of three spells in a calendar year should be relaxed to six spells in a calendar year.

#### **Commuted Leave**

9.2.11 Presently, Commuted Leave not exceeding half the amount of half-pay leave due can be taken on medical certificate. A demands have been made to do away with the need for medical certificate.

Analysis and Recommendations

9.2.12 The Commission does not find merit in the demand. **Status Quo is recommended**.

# Earned Leave (EL) or Leave on Average Pay (LAP)

9.2.13 Presently 30 days EL per annum is granted to Civilian employees and 60 days to Defence personnel. EL can be accumulated up to 300 days in addition to the number of days for which encashment has been allowed along with LTC. Suggestions have been made to increase the accumulation to 450 days, allow encashment of 50 percent of the accumulated EL after 20 years of service and delink encashment of leave from LTC. A novel concept of "gifting" has been put forward, wherein employee should be allowed to 'gift' certain number of days of leave to one's spouse or one's colleague. "Vacational" staff like teachers, principals, etc. have demanded restoration of 10 days EL, which was changed to 20 days Half Pay Leave by VI CPC.

## Analysis and Recommendations

- 9.2.14 In many organizations, employees are encouraged to take leave on the premise that it revitalizes them and is beneficial for the organization in the long run. Such a system is not prevalent in the government sector in India, but substituting leave with cash is also not desirable. Hence, no change in encashment guidelines is recommended.
- 9.2.15 The Commission recognizes that Earned Leave is, as the name suggests, earned by an employee through the services rendered. Hence, it is personal to the employee and the concept of "gifting" cannot be considered.
- 9.2.16 The demand of "Vacational" staff can, however, be agreed to. Hence, it is recommended that "Vacational" staff be granted 10 days EL in place of 20 days Half Pay Leave. Other than this no other change is recommended.

# **Extra Ordinary Leave (EOL)**

9.2.17 EOL is granted to a government servant when no other leave is admissible or when other leave is admissible, but the government servant applies in writing for extraordinary leave. This leave is neither debited to leave account nor is any leave salary paid. No demands have been received regarding this leave. Accordingly, **status quo may be maintained**.

# **Furlough Leave**

9.2.18 This leave is admissible only to defence officers for up to 60 days. It can be availed at half pay, once in a cycle of three calendar years. No demands have been received regarding this leave. However, the Commission is of the view that Furlough Leave is a legacy of the pre-Independence era. Since defence officers are already entitled to double the Earned Leave and more than double the Casual Leave available to civilian employees, there is no justification for continuation of Furlough Leave. Hence, **it is recommended that Furlough Leave be abolished**.

# **Gazetted and Restricted Holidays**

9.2.19 Besides the three National Holidays, employees are presently entitled to 14 Gazetted and 2 Restricted holidays every year. Out of the 14 Gazetted holidays, 11 are observed throughout India, while 3 are decided locally. For Restricted holidays, a list is drawn up at the local level taking local factors into consideration; employee is entitled to choose anytwoin a year out of that list. There are demands to include May Day and 14<sup>th</sup> April as compulsory holidays throughout India. Suggestions have also been received to increase the number of locally decided Gazetted Holidays from 3 to 6.

Analysis and Recommendations

9.2.20 The Commission is of the view that the present system is working well. Accordingly, **status quo is recommended**.

# Half Pay Leave (HPL) or Leave on Half Average Pay (LHAP)

9.2.21 Presently, government employees are entitled to 20 days of Half Pay Leave for each completed year of service, credited @10 days on the 1<sup>st</sup> of January and 1<sup>st</sup> of July every year. There are representations that encashment of HPL should be allowed at the time of superannuation.

Analysis and Recommendations

**9.2.22** The demands lack merit. Elsewhere in the report it has been recommended that 20 days HPL granted to "Vacational" staff be converted into 10 days EL. Hence, HPL will henceforth not be available to them. No change other than this is recommended.

# **Hospital Leave**

9.2.23 This leave is granted to Group `C' Railway employees if they are suffering from illness or injuries directly due to risks incurred in the course of official duties, on production of medical certificate. Full pay is admissible for first 120 days and half pay thereafter. The leave may be combined with any other kind of leave due and admissible, provided total period of leave does not exceed 28 months. Demands have been received to increase this leave to an unlimited period of time as applicable to PBORs of defence forces.

# Analysis and Recommendations

9.2.24 This has been discussed under Special Disability Leave.

# **Leave Not Due (LND)**

9.2.25 LND is granted when the employee has no half-pay leave at credit and he/she requests for the grant of Leave Not Due. It is granted only on medical certification, if the leave sanctioning authority is satisfied that there is a reasonable prospect of the employee returning to duty on its expiry. LND during the entire service is limited to a maximum of 360 days and will be debited against the half-pay leave that the employee may earn subsequently. No demands have been received regarding this leave. Accordingly, status quo may be maintained.

# **Maternity Leave**

9.2.26 Maternity leave is granted to women government employees—up to 180 days for pregnancy and 45 days in the entire service for miscarriage/abortion. Maternity leave can be combined with any other leave upto two years without medical certificate. The Commission has received representations for enhancement of Maternity leave to 240 days with full pay and further 120 days with half pay.

Analysis and Recommendations

9.2.27 It is noted that Maternity Leave was raised from 135 days to 180 days and 'period in continuation' raised from 1 year to 2 years by the VI CPC. No further increase is warranted. **Status quo is recommended**.

#### **Paternity Leave**

9.2.28 Presently, a male employee with less than two surviving children may be granted Paternity Leave for a period of 15 days during the confinement of his wife, up to 15 days before or six months from the date of delivery of child. Paternity leave may also be granted to a government servant with less than two surviving children on valid adoption of a child below the age of one year, within a period of 6 months from the date of valid adoption. There are demands to increase the period to 30 days.

Analysis and Recommendations

9.2.29 Present dispensation of 15 days is adequate. **Status quo may be maintained**.

#### Sick Leave

9.2.30 This leave is admissible to defence personnel only on account of sickness attributable/ aggravated due to service conditions. Full pay is granted for the entire duration of hospitalization. Beyond that, defence officers are allowed Sick Leave with full pay and allowances for first six months and fully pay only for next 18-24 months, while there is no such

limit for PBORs. There are demands from CAPFs for complete parity with defence forces in respect of provisions of Sick Leave.

Analysis and Recommendations

9.2.31 Discussed under Special Disability Leave.

# **Special Casual Leave (SCL)**

9.2.32 SCL is granted to employees to cover their absence from duty for various occasions like sports events, cultural activities, participation in Republic Day Parade, voluntary blood donation, Trade Union meetings, etc. Full pay is granted during SCL and it can be sanctioned with retrospective effect also. There are demands to extend SCL to organ donors till the time they are fit to resume duty.

Analysis and Recommendations

- 9.2.33 The Commission would like to express its concern at the widespread use of SCL as a means of getting away from duty. However, because of the extensive scope and case specific nature of this leave, no concrete recommendations can be made. The government may, however, consider the following suggestions:
  - 1. Review the purposes for which SCL is presently granted.
  - 2. Limit the number of purposes for which an employee can be granted SCL in a year.
  - 3. Limit the total number of days that an employee can be granted SCL in a year.

#### **Special Disability Leave**

- 9.2.34 It is admissible to civilian employees when disabled by injury intentionally or accidentally inflicted or caused by or in consequence of the due performance of official duties or in consequence of official position held. Full pay is admissible for the first 120 days and half pay thereafter. The leave may be combined with any other kind of leave due and admissible, provided the total period of leave does not exceed 24 months.
- 9.2.35 There are demands to remove the ceiling limit of 24 months—the duration of leave may be left to the discretion of doctor and full pay paid for the entire period.

# Analysis and Recommendations

9.2.36 There are three different kinds of leave admissible to civilian/defence employees which are granted for work related illness/injuries—Hospital Leave, Special Disability Leave and Sick Leave. It is an established worldwide practice that employees who suffer illness/injuries that are attributable to/aggravated in the course of their duty need to be adequately compensated. However, due to the inherent difference between the nature of duties of civilians and uniformed forces, a distinction needs be made in the level of compensation provided. Having said that, there is some similarity in the risks faced by different uniformed forces, and consequently parity amongst them may be considered as far as this leave is concerned.

# 9.2.37 The following is, therefore, recommended:

- 1. Hospital Leave, Special Disability Leave and Sick Leave should be subsumed in a new Leave named Work Related Illness and Injury Leave (WRIIL).
- 2. Full pay and allowances will be granted to all employees during the entire period of hospitalization on account of WRIIL.
- 3. Beyond hospitalization, WRIIL will be governed as follows:
  - a. For Civilian employees, RPF employees and personnel of Police Forces of Union Territories: Full pay and allowances for the 6 months immediately following hospitalization and Half Pay only for 12 months beyond that. The Half Pay period may be commuted to full pay with corresponding number of days of Half Pay Leave debited from the employee's leave account.
  - b. For Officers of Defence, CAPFs, Indian Coast Guard: Full pay and allowances for the 6 months immediately following hospitalization, for the next 24 months, full pay only.
  - c. For PBORs of Defence, CAPFs, Indian Coast Guard: Full pay and allowances, with no limit regarding period.
- 4. In the case of persons to whom the Workmen's Compensation Act, 1923 applies, the amount of leave salary payable under WRIIL shall be reduced by the amount of compensation payable under the Act.
- 5. No Earned Leave or Half Pay Leave will be credited during the period that employee is on WRIIL.

#### **Study Leave**

9.2.38 Presently, Study Leave may be granted to all government employees with not less than five years' service for undergoing a special course consisting of higher studies or specialized training in a professional or technical subject having a direct and close connection with the sphere of his duties as a civil servant. It is limited to 24 months, except for CHS officers who are allowed 36 months.

9.2.39 No demands have been received regarding this leave. Accordingly, **status quo may be maintained**.

CGEGIS Chapter 9.3

#### Introduction

9.3.1 Subsequent to the implementation of the III CPC recommendations, Central Government Employees' Group Insurance Scheme (CGEGIS) was notified in 1980 and came into force w.e.f. 1 January, 1982. The scheme serves the twin objectives of (a) providing a lump-sum amount to the families in case of an employee's death and (b) a lump-sum payment to the employee on cessation of employment, both on a wholly contributory and self-financing basis.

#### **Present Position**

9.3.2 CGEGIS comprises a Savings Fund and an Insurance Fund in the ratio 70:30. The present rates of deduction, insured amount and savings units are as follows:

Table 1. I resent Rates of CGEGIS			
Group	Monthly Deduction $(\mathfrak{F})$	Insurance Amount (₹)	No. of Units (for Savings)
A	120	1,20,000	8
В	60	60,000	4
С	30	30,000	2

**Table 1: Present Rates of CGEGIS** 

9.3.3 The value, in ₹, of each unit (for Savings) is published by the Ministry of Finance every year in the form of Tables of Benefits, and the total amount is worked out using the same depending upon when the employee joined the scheme and the year/month of cessation of membership. Upon employee's exit from the scheme, only the Savings amount, as applicable on the concerned date, is payable. In case of demise of the employee, the Savings amount applicable on date plus the Insured amount is payable.

#### **Demands**

9.3.4 The Commission has received numerous representations from various stakeholders stating that the Monthly Deduction as well as the Insurance Amount have remained unchanged since 1990. In the present context, they are too low and should be increased.

Analysis and Recommendations

9.3.5 As a logical comparator, the Commission considered the rates under Army Group Insurance Fund (AGIF), which have become applicable w.e.f. 01.09.2013. These are as follows:

**Table 2: Present Rates of AGIF** 

Group	Monthly Deduction (₹)	Insurance Amount (₹)
Officers	5000	50,00,000
JCOs/Ors	2500	25,00,000

9.3.6 The Commission also took into view the fact that pay of Defence personnel is by and large higher than that of Civilian employees of comparable level. Hence, with suitable modifications for Civilian employees, the following rates of CGEGIS are recommended:

Table 3: Recommended Rates of CGEGIS

Level of Employee	Monthly Deduction (₹)	Insurance Amount (₹)
10 and above	5000	50,00,000
6 to 9	2500	25,00,000
1 to 5	1500	15,00,000

9.3.7 The Commission also took note of the fact that the Tables of Benefits published by Ministry of Finance are based on the mortality rate of 3.75 per thousand per annum up to 31.12.1987 and 3.60 per thousand per annum thereafter. In its report (brought out in January 1997), the V CPC had pointed out that the mortality rate, life expectancy and health delivery systems have improved over a period of time. They had highlighted the need "for a detailed review of the current mortality rates with a view to revising the apportionment between the Savings and Insurance Funds." Since it was likely to take some time, they had recommended a ratio of Savings Fund to Insurance Fund of 75:25, with "appropriate machinery for a periodical review of the mortality rates and adjustment of the apportionment ratio."

9.3.8 All the three factors viz., mortality rate, life expectancy and health delivery systems have further improved over the course of nearly twenty years following the V CPC recommendations. Accordingly, this Commission recommends that the ratio of Savings Fund to Insurance Fund be modified from the present 70:30 to 75:25, as an interim measure, pending a detailed review. It is also recommended that periodical reviews of mortality rates should be undertaken for suitable adjustment of the apportionment ratio. The Tables of Benefits may be modified accordingly.

GPF Chapter 9.4

9.4.1 General Provident Fund (GPF) for Central Government employees was started w.e.f. 1 April, 1960. It covers those government employees who joined service before 01.01.2004 and are not governed by the Contributory Provident Fund Scheme. The scheme was introduced to foster the habit of saving amongst government employees and to provide them financial help in times of need. The Commission has not received any demands regarding modifications in this scheme.

## Analysis and Recommendations

9.4.2 The Commission has analyzed the views of the previous Pay Commissions regarding GPF. The IV CPC and the V CPC did not favour making the scheme optional on the grounds that the fund provided relief to employees in times of need and that accretions to the fund also improved the government's ways and means position. The VI CPC had, however, recommended that the "future investments in GPF should be allowed purely on voluntary basis with no minimum being prescribed." Their rationale was that the resource position of Central Government is comfortable and the revenues are showing a steady growth, employees have the option of a variety of market instruments to choose from for investment purposes, and with the proposed increase in monthly subscription under the CGEGIS (70% of which is for saving purposes), the government employees will, in any case, be making a much higher saving.

9.4.3 The Commission notes that the recommendations of the VI CPC regarding CGEGIS and GPF were not accepted by the government; neither the CGEGIS rates were revised, nor GPF was made voluntary.

9.4.4 This Commission is of the view that, with the introduction of NPS w.e.f. 01.01.2004, the number of subscribers under the GPF scheme will decrease as time goes by. Moreover, the scheme has worked well over the past 65 years and has provided pecuniary relief to the subscribers in times of need. Accordingly the Commission does not find merit in any disturbance at this point of time. Hence, **status quo is recommended**.

# **Medical Facilities for Serving Employees and Pensioners**

# Chapter 9.5

#### Introduction

- 9.5.1 The Central Government provides health care facilities for both serving and retired employees. Employees of some Central Government organisations, like Railways and Defence, are covered by captive medical facilities provided by the concerned administrative ministries. Certain other organisations have limited medical facilities covering out-patient treatment and limited hospitalisation. The general coverage of Central Government employees is under the Central Government Health Scheme (CGHS) and the Central Service (Medical Attendance) Rules, 1944 [CS(MA) Rules].
- 9.5.2 CGHS, under the aegis of Department of Health and Family Welfare, provides out-patient (OPD)/in-patient (IPD) treatment to its beneficiaries—both serving and retired employees—within its area of operation. Serving employees of the Central Government, outside CGHS area and thus not under its coverage, avail medical facilities under CS (MA).
- 9.5.3 CS (MA) Rules, 1944 are statutory provisions for medical relief to the serving Central Government employees and their family members who are not residing in CGHS covered cities. There is a provision for appointment of Authorized Medical Attendants (AMA) by the concerned department for their employees either from the Medical Officers working under the State/Central Government or from private practitioners depending upon the situation.
- 9.5.4 Pensioners are not covered under the CS (MA) Rules. Pensioners residing outside CGHS areas are entitled to Fixed Medical Allowance (FMA) @ ₹500 per month for their OPD/IPD needs. Such pensioners can also avail IPD/OPD under CGHS subject to some conditions, details of which have been explained in a subsequent paragraph.

#### **Demands**

- 9.5.5 During its interactions with various stakeholders, the Commission has received numerous demands relating to medical facilities. Broadly, these demands are as follows:
  - a. *CGHS should be expanded and improved:* It has been demanded that facilities offered by CGHS should be strengthened and more private hospitals should be empanelled in such a way that they are nearer to the residence cluster of the beneficiaries.
  - b. *Pensioners be treated at par with serving employees:* It has been represented that CS(MA) be extended to pensioners residing outside CGHS Area. It has been demanded that Smart Cards be issued to all pensioners for availing cashless medical facilities across the country in all government hospitals, all accredited Multi Super Speciality

- Hospitals which have been allotted land at concessional rates, all CGHS, (Ex-Servicemen Contributory Health Scheme (ECHS) empanelled Hospitals.
- c. It has been demanded that the amount of FMA be raised to ₹2,000 with DA thereon.
- d. It has been pointed out that P&T pensioners who did not subscribe to CGHS while in service are not covered under CGHS post retirement. It has also been demanded that all P&T dispensaries should be merged with CGHS so that these pensioners can avail IPD/OPD benefits.

# **Analysis of the Demands**

9.5.6 CGHS has benefited a significant number of government employees and pensioners. The Commission notes that the pressure on CGHS has been increasing over the years. This has affected its efficient functioning at times. However, the Commission is aware that services provided by CGHS are valued by a number of employees and most of the pensioners.

9.5.7 The demands of the various stakeholders, listed above, have been analysed keeping these facts in the backdrop. Broadly, these demands can be classified into three segments: (i) Expansion of CGHS to more areas, (ii) Strengthening of the existing facilities under CGHS, and (iii) Provision of medical facilities for pensioners living outside CGHS areas.

# Expansion of CGHS to More Areas

9.5.8 CGHS is presently operational in 25 cities. The government is opening at least one CGHS Wellness Centre in 12 more cities. The Commission notes that with this addition, almost all the state capitals will be covered under CGHS.

9.5.9 The VI CPC had recommended that all postal dispensaries should be merged with CGHS and all postal employees including retired postal employees be covered under CGHS wherever available. It is noted that out of 52 postal dispensaries, 19 have been merged with existing CGHS centres. During his presentation, DG, CGHS highlighted scarcity of resources, particularly that of manpower, due to which government is not in a position to extend CGHS to more areas. The Commission feels that modalities should be worked out to utilise the existing manpower of the postal dispensaries and steps should be taken to merge the remaining 33 postal dispensaries with CGHS. This will benefit a large number of postal employees and pensioners. This will also benefit those Central Government employees/pensioners who are otherwise eligible for coverage under CGHS but are being denied this facility because of absence of CGHS centres in their cities. The Commission feels that Ministry of Health and Family Welfare's order dated 1 August, 1996 - which states that P&T pensioners who were not participating in CGHS while in service may not be extended medical facility under CGHS - is discriminatory and should therefore be revoked. This would enable all P&T pensioners, irrespective of their participation in CGHS while in service, to avail medical facilities under CGHS after making requisite subscription.

# Strengthening of the Existing Facilities under CGHS

9.5.10 At present, CGHS is providing facilities to about 36 lakh beneficiaries (card holders and their dependents). This includes about 26 lakh serving employees and their dependants and

about 10 lakh pensioners and their dependants. CGHS has a network of 273 Allopathic and 85 AYUSH Wellness Centres, 73 labs, 19 poly-clinics, 19 dental clinics, 4 hospitals and 2 geriatric clinics (Delhi only). CGHS has also empanelled about 750 private hospitals and diagnostic centres.

9.5.11 CGHS, thus, has indeed been catering to a sizeable population of government employees. However, there are many limitations on this count. The Commission notes that financial constraints, non-availability of sufficient health care professionals and other administrative limitations impede rapid expansion of CGHS to more areas or strengthening of its services. Even with the limited expansion, possibly a large number of employees/pensioners will still remain uncovered given their spatial distribution.

# Provision of Medical Facilities for Pensioners Living Outside CGHS Areas

- 9.5.12 Pensioners residing in non-CGHS areas have three options. First, they may draw FMA. In this case, pensioners will have to make their own arrangements for both IPD and OPD treatment. Second, pensioners may draw FMA for OPD and avail CGHS benefits for IPD from the nearest CGHS city after making the required subscription to CGHS card. Third, pensioners may avail CGHS facility both for OPD and IPD from the nearest CGHS city after making the required subscription to CGHS.
- 9.5.13 In case of emergency, pensioners, under the second and the third options, can take treatment in a private hospital empanelled under CS (MA)/Ex-Servicemen Contributory Health Scheme (ECHS) or any private hospital in the domicile city. However, such pensioners will have to make payment upfront for their treatment and thereafter seek reimbursement from CGHS. This reimbursement is capped at CGHS rates.
- 9.5.14 Various pensioners' associations have demanded that CS (MA) Rules should be extended to cover Central Government pensioners residing outside CGHS areas. As referred to earlier, CS (MA) Rules do not cover the pensioners. The Commission notes that the VI CPC was not in favour of extending CS (MA) to the pensioners on the grounds of huge financial implications and administrative difficulties relating to submission and reimbursement of bills.

#### Recommendations

#### Health Insurance Scheme

9.5.15 In this backdrop, the Commission opines that health insurance for the government employees and pensioners remains the most optimal route for ensuring complete coverage for all employees, pensioners and their dependants in the long run. The IV CPC had suggested that feasibility and modalities of an Insurance Scheme for government employees in lieu of medical reimbursement may be considered by the government. The VI CPC had recommended introduction of a health insurance scheme for Central Government employees and pensioners. It had recommended that for existing employees and pensioners, the scheme should be available on a voluntary basis, subject to their paying the prescribed contribution. It had also been recommended that the health insurance scheme should be compulsory for new government employees who would be joining service after the introduction of the Scheme.

Similarly, it had recommended that those retiring after the introduction of the insurance scheme would be covered under the Scheme.

9.5.16 The Commission observes that in view of the recommendations of the earlier Pay Commissions and various high power committees, the government has been contemplating the introduction of a health insurance scheme on Pan-India basis. The Commission notes that although the Committee of Secretaries had given its 'in principle' approval way back in 2011, and an amount of ₹ 2,061 crore had been earmarked under the XII Five Year Plan, the Scheme has still not been implemented.

9.5.17 The Commission notes that given the tardiness in the introduction of the long awaited Insurance Scheme, as already mentioned earlier in this chapter, the pensioners residing outside CGHS area will continue to be at a disadvantage, in terms of medical facilities, compared to their counterparts residing in CGHS areas. As stated earlier in this chapter, according to existing provisions, pensioner residing outside CGHS area but subscribing to CGHS for OPD/IPD can avail medical facility from any hospital—private or public or empanelled under CS (MA)/ECHS—in his/her own city. However, in such cases, the pensioners have to make upfront payment to the hospital and claim reimbursement later. The Commission feels that this could be a limiting factor for many pensioners who may not have the resources to pay hospital expenses upfront. The Commission notes that under CS (MA) Rules/ECHS, there are empanelled hospitals in every part of the country, at least in all major locations. In this backdrop, after identification of some major centres/cities based on minimum population threshold of pensioners, these hospitals could be empanelled by CGHS as well, for extending medical facilities on a cashless basis.

9.5.18 Considering all the issues, the Commission makes the following recommendations:

- i. The Commission strongly recommends the introduction of health insurance scheme for Central Government employees and pensioners. In the interregnum, for the benefit of pensioners residing outside the CGHS areas, the Commission recommends that CGHS should empanel those hospitals which are already empanelled under CS (MA)/ECHS for catering to the medical requirement of these pensioners on a cashless basis. This would involve strengthening of administrative capacity of nearest CGHS centres. However, this step will go a long way in ameliorating the pending grievances of these pensioners.
- ii. The Commission recommends that the remaining 33 postal dispensaries should be merged with CGHS. The Commission further recommends that all postal pensioners, irrespective of their participation in CGHS while in service, should be covered under CGHS after making requisite subscription.
- iii. Currently, there are various health care schemes in the Central Government catering to specific sets of employees. For example, apart from CGHS, there are Ex-Servicemen Contributory Health Scheme (ECHS) and Railways Employees Liberalized Health Scheme (RELHS) which cover ex-servicemen and Railway employees/pensioners, respectively. Although the patterns in these schemes vary, a combined entity of CGHS-ECHS-RELHS would result in a very strong network of health facilities for the Central Government employees across the length and breadth of the country. **The Commission**

recommends that possibility of such a combined network of various medical schemes should be explored through proper examination.

#### Introduction

9.6.1 As per the Persons with Disabilities (Equal Opportunities, Protection of Rights and Full Participation) Act, 1995, a "person with disability" means a person suffering from not less than 40 percent of any disability as certified by a medical authority. "Disability" as defined in Section 2(i) of the Act means— (i) blindness (ii) low vision (iii) leprosy cured (iv) hearing impairment (v) locomotor disability (vi) mental retardation (vii) mental illness.

9.6.2 As per the Census of India, 2011, there are nearly 26.8 million Persons with Disabilities (PWDs) in the country, which is nearly 2.21 percent of the total population.

#### **PWDs in Central Government**

9.6.3 The government provides three percent reservation in jobs for PWDs. Apart from this reservation at the entry stage, DoPT has issued instructions regarding identification of jobs, post-recruitment and pre-promotion training, providing aids/assistive devices, accessibility and barrier free environment at work place, preference in government accommodation, grievance redressal, and preference in transfer/posting for PWDs. In a recent notification, a provision has been made for ten years' (fifteen years in case of SC/ST and thirteen years in case of OBC candidates) relaxation in the upper age limit for direct recruitment to civil posts/services under the Central Government.

9.6.4 Moreover, there are certain special entitlements as given below:

- i. Special Allowance for Child Care for Women with Disabilities at the rate of ₹1,500 pm;
- ii. Transport Allowance at double the normal rate, subject to a minimum of ₹1,000 pm;
- iii. Constant Attendance Allowance for retired employees with 100 percent disablement at the rate of ₹4,500 per month;
- iv. Special Casual Leave for four days in a calendar year for specific requirements relating to disabilities;
- v. Special Casual Leave for ten days in a calendar year for participation in Conferences/ Seminars/Trainings/Workshops related to disability and development.

9.6.5 In case the disability is work related, the following additional provisions are available:

- a. Special Disability Leave;
- b. Disability Pension;
- c. Educational Concession to children of Defence personnel who are disabled in action.

9.6.6 For employees with differently abled children, Children Education Allowance and Hostel Subsidy is granted at double rate.

#### **Demands**

9.6.7 Associations of employees with disabilities made the following demands before the Commission:

- i. Suitable enhancement in the existing provisions
- ii. Provision of Common Room in offices with suitable recreational facilities
- iii. Additional rebate in House Building Advance and Automobile Advance
- iv. Establishment of Welfare Committees in the ministries

# Analysis and Recommendations

9.6.8 The National Policy for Persons with Disabilities, 2006, enunciates the measures that need to be taken by the government to ensure equal opportunities, protection of rights and full participation in society for PWDs, in consonance with the principles enshrined in the Indian Constitution. India is also a signatory to the UN Convention on the Rights for Persons with Disabilities. Thus, provision of appropriate measures for employees with disabilities is the responsibility of the Union Government.

9.6.9 The Commission has made various recommendations regarding PWDs at different places in the report. They are consolidated here for ready reference:

- i. In recognition of the singular responsibility faced by differently abled women in raising their children, the Special Allowance for Child Care for Women with Disabilities has been enhanced from the present rate of ₹1,500 pm to ₹3,000 pm
- ii. Transport Allowance at double the normal rate has been retained, and the minimum amount has been increased from ₹1,000 pm to ₹2,250 pm
- iii. Children Education Allowance and Hostel Subsidy have been kept at double rate for differently abled children
- iv. Constant Attendance Allowance has been enhanced from ₹4,500 pm to ₹6,750 pm
- v. Special Disability Leave has been subsumed in Work Related Illness and Injury Leave (WRIIL), with improved provisions
- vi. Educational Concession, hitherto available only to the children of Defence personnel killed/missing/disabled in action, has been extended to similarly placed personnel of CAPFs, Indian Coast Guard, RPF and police forces of Union Territories mutatis mutandis

9.6.10 Besides the above recommendations, there are a few suggestions that can go a long way in improving the working environment for these employees:

i. In our interactions, it has been highlighted that easy access, particularly to toilets, remains an issue of concern. Hence, it is suggested that Guidelines and Space Standard for Barrier Free Built Environment for Disabled and Elderly Persons, issued by CPWD, Ministry of Urban Affairs and Employment, should invariably be followed while designing new government premises. Their application in the existing offices may also be explored.

- ii. Every ministry should have a Welfare Committee, with due representation of differently abled employees, to address their concerns.
- iii. The grievance redressal machinery should be strengthened and made more effective.