

# Indian Institute of Information Technology Allahabad

## Medical Expenses Reimbursement Guidelines

### Consultation IPD/OPD - Rs. 350/- Only

Sl. No.	Corresponding Basic Pay drawn by Officer in 7th CPC per month	Ward Entitlement	Amount (Room Rent) (Rs.)
1	Upto Rs. 36,500	General	1500
2	Rs. 36,501 to Rs. 50,500	Semi-Private	3000
3	Above Rs. 50,500	Private	4500

To claim medical reimbursement, you will need to provide the following documents and papers:

(Government, CGHS, NABH, and empanelled hospitals)

#### 1. Medical Bills:

- \* Original medical bills from registered medical practitioners or hospitals
- \* Bills and cash memos should be itemized, specifying the date, patient's name, doctor's name, diagnosis (complete name of medicines, it's batch number and expiry date, and quantities of medicines purchased), name and address with GST and drug license number of the concerned medical shop, and charges.
- \* Get the cash memo verified by the concerned doctor of the health center if medicines are prescribed by them.

#### 2. Prescriptions:

- \* Original or photocopied prescriptions from registered medical practitioners, clearly stating the patient's name, date, diagnosis, medication details, doctor's name and signature, and treatment details.

#### 3. Discharge Summary (for Hospitalization/IPD):

- \* The Director's approval should be obtained prior to hospitalization.
- \* Original discharge summary from the hospital, including the patient's name, admission and discharge dates, diagnosis, treatment details, doctor's name and signature, and hospital's stamp.

#### 4. Laboratory Test Reports:

- \* Original laboratory test reports, including the patient's name, doctor's name, date, test details, results, and laboratory stamp

## **5. X-ray, MRI, or CT scan reports:**

\* Original X-ray, MRI, or CT scan reports, including the patient's name, doctor's name, date, scan details, radiologist's report, and hospital stamp

## **6. Claim Form:**

\* Duly filled out and signed medical reimbursement claim form, provided by the institute or downloaded from their website.

## **7. Additional Documents (if applicable):**

- \* Pre-approval letter (if required for specific treatments or procedures)
- \* Medical certificate (if applicable for specific conditions)
- \* Emergency certificate and B certificate (in IPD)
- \* Receipts for any additional expenses, such as transportation or medicines

## **8. Copies of All Documents:**

\* Provide self-attested copies of all the above documents along with the originals.

## **Submission Process:**

- \* Submit the complete set of documents (original) along with the claim form to the designated authority within the specified time frame (within 6 months).
- \* Retain the photocopies for your records.

## **Please note:**

\* The specific documents required may vary depending on the institute's reimbursement policy and the nature of the medical treatment.  
Always check with your institute's medical reimbursement department (**Ms. Neetu Tiwari – 0532-292-2029**) for the latest guidelines and requirements.