



CENTRAL MINE PLANNING AND DESIGN INSTITUTE LIMITED

(A Subsidiary of Coal India Limited/ Govt of India Public sector undertaking)

HQ- Gondwana place , Kanke Road, Ranchi 834031, Jharkhand

OFFICE OF THE REGIONAL DIRECTOR

Regional Institute -IV, Kasturba Nagar, Jaripatka Nagpur-440014

EXPRESSION OF INTEREST

**FOR EMPANELMENT OF GENERAL PRACTITIONER, SPECIALIST & DENTIST
FOR ONLY MURPAR AND ANANDWAN FALLING UNDER CMPDI REGIONAL
INSTITUTE-IV NAGPUR.**

Interested parties may apply for empanelment with CMPDI , for Murpar and Anandwan Camp.

**LAST DATE FOR SUBMISSION OF APPLICATION: On or before 28th February 2018 till
5.00 PM**

APPLICATION FORM

Application form along with complete document can be downloaded from the website www.cmpdi.co.in or may be obtained from P&A Dept RI- IV , Jaripatka Nagpur -14 or Officer -Incharge ,CMPDIL , Exploration Camp Anandwan ,PO-Anandwan, Tah- Warora, Dist Chandrapur (MS)-442914 or Officer -Incharge ,CMPDIL , Exploration Camp Murpar ,PO-Khadasangi, Tah- Chimur, Dist Chandrapur (MS)-442906. The duly filled in form should be submitted along with all documents in a sealed cover to the Head of department (P&A), Jaripatka Nagpur-14 / Officer-Incharge, Murpar Camp and Officer-Incharge, Anandwan Camp under CMPDI RI-IV Empanelment.

SUBMISSION OF APPLICATION FORMS

- (A) The application must be submitted in duplicate.
- (B) The applicant must clearly indicate under which category (i.e General Practitioners/Dentist/Specialist) the application is being made.
- (C) Application form should be submitted in one sealed envelope superscribed as 'Application for empanelment of General Practitioners, Specialists, and Dentists for Murpar camp and Anandwan Camp under CMPDI RI-IV Nagpur'
- (D) All the pages of application and annexure shall be serially numbered.

- (E) Every page of application form and annexure needs to be signed by the Competent person. The signatory must mention as to whether he/she is the sole proprietor or authorized agent. In case of partnerships, a copy of the partnership agreement duly attested by a notary should be furnished. Similarly, in case of authorisation appropriate legal document should be furnished.
- (F) Application for empanelment must be submitted only at the office of P&A department CMPDI RI-IV Nagpur or OIC Murpar Camp/Anandwan Camp.
- (G) As far as possible all information should be given in the application. If a particular facility is not available, it should be entered as 'not available', it should not be mentioned as 'not applicable'.
- (H) The application is liable to be rejected if the information given on eligible criteria is not complete.

Sharma
HEAD OF DEPARTMENT (P&A)
CMPDI, RI-IV, NAGPUR
201

Distribution:

1. Notice Board , CMPDI RI-IV Nagpur
2. Notice Board , CMPDI Murpar Camp CMPDI RI-IV
3. Notice Board , CMPDI Anandwan Camp CMPDI RI-IV
4. Regional Director RI-IV Nagpur
5. HOD (P&A) , CMPDI RI-IV Nagpur
6. OIC, CMPDI Murpar Camp CMPDI RI-IV, with a request to display.
7. OIC, CMPDI Anandwan Camp CMPDI RI-IV, with a request to display.
8. Chief of Medical Services, WCL HQ Nagpur, with a request to display.
9. Notice Board , WCL HQ Nagpur

General Terms and conditions for empanelment for General Practitioner/Specialist/Dentist

CONSULTATION CHARGES, OPD PROCEDURE /INVESTIGATION RATES

- a) The General Practitioner/Specialist/Dentist empanelled will be offered consultation charges, OPD Procedure /Investigation rates as per the approved revised rates of Medical Attendance Rules(MAR) of Coal India 1999 (Amended)-ANNEXURE 'A'.

GENERAL CRITERIA:

All empanelled doctors are required to give an undertaking that:-

- (a) They shall not be charging rates more than the approved rates as offered by CIL (MAR Rate).
- (b) They will issue proper printed and numbered receipt.
- (c) In the event any excess bill for the services availed by the entitled employees and their eligible family members, if detected, the concerned doctors/specialists/dentist shall refund the excess amount thus charged within one week on bringing the same to his notice. Repeated excess billing shall make them liable for de-empanelment.

PERIOD OF EMPANELMENT:

The empanelment will be for five years and the performance will be reviewed by the duly constituted committee from time to time. In case of unsatisfactory performance, they will be liable for de-empanelment.

CRITERIA FOR DE-EMPANELMNT:

De -empanelment of the empanelled General Practitioner/Specialist/Dentist could be made due to the following:-

- (a) Rendering resignation/written unwillingness to continue in the panel.
- (b) Due to unsatisfactory services and proven case of malpractice/misconduct.
- (c) Death/change of ownership, location place or the practice place, as the case may be, if not approved by the competent Authority.
- (d) In all other cases, not specifically mentioned above, the duly constituted committee shall examine the merit of each case and submit recommendation for de-empanelment /continuation of empanelment to the competent authority as the case may be, giving full justification for such action.
- (e) CMPDI RI-IV Management has the right to de-empanel General practitioner/specialist/dentist without giving any reason.

Criteria for empanelling General Practitioner /Specialist/Dentist for Murpar and Anandwan Camp falling under CMPDI RI-IV

General Practitioner/ Dentist:

- (1) Must Possess recognized medical degree- MBBS/BDS
- (2) Should not be in government Service.
- (3) Must have five years post qualification experience in general practice.
- (4) Must have own clinic
- (5) Valid MCI registration from Medical council as per M.C.I rule.
(Should poses Reciprocal Registration of Maharashtra Medical Council if originally not registered with Maharashtra Medical Council)

Specialists:

- (1) Must possess recognized post graduate degree like MD/MS/MDS
- (2) Should have own consultation chamber
- (3) Should have five years and above post qualification experience in private practice
- (4) Should not be in Government service
- (5) The super -Specialist should have minimum qualification like DM/MCH/DNB (Post PG) in particular speciality.
- (6) Valid MCI registration from Medical council as per M.C.I rule.
(Should poses Reciprocal Registration of Maharashtra Medical Council if originally not registered with Maharashtra Medical Council)

UNDERTAKING

I hereby certify that all the information's furnished above are true to my knowledge. I have no objection to CMPDI RI-IV Authority for verifying any or all the information furnished in this document with concerned authority if necessary.

Date:

Place:

Signature of the authorized signatory of the organisation
Official Seal/Stamp

NOTARY



CENTRAL MINE PLANNING AND DESIGN INSTITUTE LIMITED

(A Subsidiary of Coal India Limited/Govt of India Public sector undertaking)

HQ- Gondwana place , Kanke Road, Ranchi 834031, Jharkhand

OFFICE OF THE REGIONAL DIRECTOR

Regional Institute –IV, Kasturba Nagar, Jaripatka Nagpur-440014

APPLICATION FOR EMPANELMENT OF GENERAL PRACTITIONER, SPECIALIST & DENTIST FOR ONLY MURP AR AND ANADWAN CAMP FALLING UNDER REGIONAL INSTITUTE-IV NAGPUR

1) NAME OF THE / -----
GENERAL PRACTITIONER/
SPECIALIST/DENTIST

2) ADDRESS -----

3) TELEPHONE/MOBILE NO -----

4) EMAIL -----

5) EMPANELMENT APPLIED FOR-----

(A) Specialist -----

Qualification -----

Experience -----

(B) General Practitioner -----

Qualification -----

Experience -----

(C) Dentist -----

Qualification -----

Experience -----

6) Agreed all terms and condition specified on 'Expression of Interest'

Other Information:

- 1. PAN Number**
- 2. Income Tax returns for the last three financial years**
- 3. Details of registration**
- 4. Details of the organization who have already empanelled with you
(Please enclose copy of agreement with full particulars.)**
- 5. Copy of document required is to be enclosed.**

- Conditional offers will not be entertained from the applicant.**
- ** Only applicable columns are to be filled by different applicant.**
- *** Enclose the attested copy of relevant documents.**

129.5
15/11/23

COAL INDIA LIMITED
'COAL BHAWAN'
10,NETAJI SUBHAS ROAD
CALCUTTA-700001

$$\begin{array}{r} 3463 \\ \hline 16 - 1199 \\ \hline \end{array}$$

ANNEXURE-A

No.CIL:C-5B:Med:57261 (1v) 1760

OFFICE MEMORANDUM

Subject:- Revision and amendment of Medical Attendance Rules
of Coal India Limited.

CIL Board in its 185th meeting held on 30th September, 1999 approved amendment/revision of the existing rates of medical expenditure in terms of the Schedule of Charges under Chapter-V of Medical Attendance Rules of CIL. Accordingly, the relevant Schedule of Charges under Chapter-V (as per enclosed Annexure) of MAR stands amended/modified in terms of this order.

This revision of rates as per Annexure enclosed hereto will be effective from the date of issue of this order in supersession of the earlier OM No.-CIL/C-5B/Mcd/57261(III)/571 dated 08.12.1989.

Encl: Revised schedule of charges.

(C. H. KHISTY)
DIRECTOR(P&IR)

Distribution:

1. Chairman-MD, ECL, BCCL, CCL, WCL, SECL, NCL, MCL, CMPDIL
2. Director(Tech)/Director(Fin), CIL, Calcutta
3. Director(P), ECL, BCCL, CCL, WCL, SECL, NCL, MCL
4. Director-Incharge, NEC, Guwahati
5. Director(F), ECL, BCCL, CCL, WCL, SECL, NCL, MCL
6. Director(O), CMPDIL, Ranchi
7. Executive Director(MS)/CIL, BCCL, Dhanbad
8. All CMO, ECL, BCCL, CCL, WCL, SECL, NCL, MCL, Kalla & Jagjevan Nagar Hospitals.
9. Chief Vigilance Officer, CIL, Calcutta.
10. CGM(P), CIL, Calcutta.
11. CGM(S&M)/CGM(F), CIL, Calcutta
12. All HODs, CIL, Calcutta
13. CGM/GM(Admn.)CIL, Delhi.
14. All RSOs, CIL
15. Dy.MS, CIL, Calcutta.

Copy for information to:- 1. All Members of Standardisation Committee of JBCCI.
2. All Members of Sub-committee of JBCCI on MAR.
3. TS to Chairman/TS to D(P&IR), CHL, Calcutta.
4. ES to Chairman/D(P&IR), CHL, Calcutta.

WESTERN COALFIELDS LIMITED
OFFICE OF THE CHIEF OF MEDICAL SERVICES
Coal Estate, Civil Lines, NAGPUR-440001

Ref No: NGH/WCL/CMS/MAT RULES/ 1107

Dated: November 17, 1999

Forwarded for information and necessary action to

1. All Area CGMs/GMs, WCL,
2. GM(F), WCL, Nagpur.
3. All Area Medical Heads, WCL.
4. All Area Finance Managers, WCL.
5. MS, WCL HQ Dispensary Naemur/MR S. Doshi, Indore

Archibald (7/111)
मुख्य चिकित्सा विभाग
ध्येस्टन कोलफिल्ड्स लि

SCHEDULE OF CHARGES

(REVISED W.C.S. 11/)

AS PER CHAPTER- V OF MEDICAL ATTENDANCE RULES

The charges for medical reimbursement in cases of treatment by private practitioner in private clinic
and hospital will be subject to ceiling as indicated below.

		<u>Group I</u> Metropolitan Cities & all State Capitals	<u>Group II</u> CIL Subsidiary Hqrs & other big cities where patients are referred	<u>Group III</u> All other places
I	Consultation Charges			
i	General Practitioners	80/-	60/-	40/-
ii	Specialist	150/-	125/-	100/-
iii	Super Specialist	250/-	175/-	125/-

Notes:

Specialist should be consulted only after a primary consultation with the authorised attendant/general practitioner.

If any subsidiary has any arrangement with local specialist/practitioner, the rates of consultation etc. already determined by the respective company will be paid instead of the above schedule of charges.

2	Accommodation			
i	Non Executives	300/-	200/-	150/-
ii	Executives upto E5	500/-	300/-	200/-
iii	Executive M1 & above	650/-	500/-	300/-
iv	Board level	Actual	Actual	Actual
v	For ICU / ICCU (All Executives)	Actual	Actual	Actual
3	Surgery			
i	Simple	400/-	325/-	200/-
ii	Minor	1000/-	700/-	500/-
iii	Major & Radical	5000/-	4000/-	3500/-
4	Anesthesia			
i	Minor	500/-	300/-	250/-
ii	Major	1000/-	700/-	500/-
iii	OT/Labour room	800/-	500/-	300/-
5	Maternity			
i	Normal Delivery/Abortion/MTP	700/-	500/-	400/-
ii	Minor operation/ Assisted delivery (Forceps/Vacuum)	1000/-	700/-	500/-
iii	Cesarian section (Major operation)	5000/-	4000/-	3500/-

Notes:

The classification of the type of surgery will be irrespective of the type of anaesthesia required. In case of doubt, classification may be obtained from the CMS of the company.

Temporary pacing to be regarded as minor surgery.

Implementation of pace maker (external) should be charged as minor surgery. Cost of pace maker to be paid separately. As regards the type of pacemaker to be implemented, specific justification of the operating surgeon is to be obtained before the consideration of reimbursement.

© Jam 1 11.11.25

		Gr.I	Gr.II	Gr.III
6	Radiology			
i	Radiography large size	100/-	80/-	70/-
ii	Medium size	80/-	60/-	50/-
iii	X-ray after Barium meal	60/-	40/-	30/-
	a) Oesophagus only	500/-	450/-	450/-
	b) Stomach & Duodenum	500/-	450/-	450/-
	c) Enema (Large Intestine & Rectum)	800/-	600/-	600/-
	d) Full follow through	1000/-	800/-	600/-
7	Pyelography			
	a) IV (Intravenous)	600/-	500/-	500/-
	b) Retrograde	500/-	500/-	500/-
	c) Oral Cholecystography	700/-	600/-	500/-
	d) I.V. Cholecystography	700/-	600/-	500/-
	e) Bronchography/Myelography (No minor surgery charges)	700/-	600/-	500/-
	f) Hysterosalpingography	700/-	600/-	600/-
	g) Cysto-urochirography (No minor surgery charge)	700/-	600/-	600/-
	h) Imaging/Ultrasonography (Upper Abdomen)	400/-	350/-	350/-
	i) Imaging/Ultrasonography (Lower Abdomen)	400/-	350/-	350/-
	j) Imaging/Ultrasonography (Whole Abdomen)	800/-	700/-	700/-
	k) Angiocardiography	Actual(not exceeding package of National Heart Institute economy class)		
	l) Angiography Cardiac Cath			
	m) X-ray in operation theatre with portable M/c	200/-	150/-	150/-
8	Dental			
	a) X-ray Plates Dental	50/-	50/-	40/-
	b) Tooth extraction (per tooth)	50/-	50/-	40/-
	c) Simple Impacted Tooth	100/-	80/-	60/-
	d) Scaling(not more than 4 sittings)	50/-	40/-	40/-
	e) Filling	100/-	80/-	60/-
	f) Root canal treatment(i) Anterior	250/-	200/-	150/-
	g) Root canal treatment (ii) Posterior	350/-	250/-	250/-
9	Pathology			
	a) Ordinary	70/-	50/-	50/-
	b) Special	100/-	90/-	70/-
	c) Super Special	Actual	Actual	Actual

11.11.95
11.11.95

10	Injection			
	a) Intramuscular or subcutaneous		Rs. 10/-	
	b) Intravenous		Rs. 20/-	
	c) Intra-articular		Rs. 200/- Plus cost of Drug	
	d) Dressing Charges)		Rs. 15/- OPD per dressing.	
	e) Stiching charges		Rs. 50/- OPD	
11	Special Nursing	Group-I	Group-II	
	a) Special Nurse for 12 hrs.	100/-	80/-	
	b) Attendent for 12 hrs	40/-	30/-	
12	EEG		(a) Awake 300/- (b) Sleep 350/-	
	ECG		80/-	
	(a) Doctors Chamber		120/-	
	(b) At Residence (certificate of immobility to be produced)			
13	Physiotherapy	Gr.I 40/-per day	Gr.II 30/-per day	
14	ECT		Actuals	
15	Blood	Actuals from Registered Licensed Blood Bank		

Note :

Doners should be encouraged. TA to doners (entitled class of employees and also non employees) on recommendations of treating Doctors indicating no. of units required & scrutiny by CMS of Subsidiary Companies may be considered.

Qamar
11.11.98