



## **Contributory Post Retirement Medicare Scheme for Executives of CIL & its Subsidiaries**

### **1.0. Title and Commencement**

The scheme shall be known as “**Contributory Post Retirement Medicare Scheme for executives of Coal India Limited and its Subsidiary Companies**”<sup>[1]</sup>. The scheme comes into force with immediate effect and supersedes earlier scheme.

- 1.1. The scheme is to provide Medicare to the retired executives including Board Level appointees of Coal India Limited and its subsidiary companies and their spouses.
- 1.2. Membership shall be reckoned from the date of Registration under the scheme in CIL and or subsidiary companies as the case may be.

### **2.0. Eligibility**

- 2.1. Membership under the Scheme will not be extended to the following categories of both Board level & below Board level Executives: <sup>[2]</sup>
  - i. Executives who have been dismissed/ removed/ compulsorily retired under CDA rules of the Company
  - ii. Executives who resign from the services of the Company
  - iii. Executives against whom major penalty disciplinary proceedings are pending at the time of retirement. Eligibility of such Executives will be considered based on the outcome of the said disciplinary proceedings.

#### **Note:**

1. The post-retirement medical benefits will be linked to requirement of superannuation and minimum of 15 years of continuous service for other than Board level Executives. The post-retirement medical benefits shall be allowed to Board level Executives (without any linkage to provision of 15 years of service) upon completion of their tenure or upon attaining the age of retirement, whichever is earlier. <sup>[3]</sup>
2. Membership under the Scheme for cases wherein both husband and wife is employed in CIL (either in Executive or non - Executive cadre) shall be governed under the Clause No. 2.6. <sup>[2]</sup>

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<sup>1</sup> Approved by CIL Board in its 240<sup>th</sup> meeting held on 08.03.2008. Communicated vide letter No. CIL/C-5B/IR/Post Retirement Medical/96 dated 25.04.2008.

Amendments upto 28.12.2012 was issued, as per the approval of CIL Board in its 289<sup>th</sup> meeting held on 18.09.2012, vide OO No. CIL/C-5A(PC)/CPRMSE/207 dated 28.12.2012.

Previously administered vide OM No. CIL/C5A(vi)/50706/A/213 dated 01/09.11.1990 which was amended vide OM No. CIL/C-5A(vi)/50706/A/226 dated 07.01.2000.

<sup>2</sup> Amended vide OM No. CIL/C5A(PC)/CPRMSE/ dated 14.12.2021.

<sup>3</sup> Incorporated vide OM No. CIL/C5A(PC)/Pay Revision 2017/2972 dated 08.08.2018.



- 2.2. In case of death of a retired executive before becoming member, his/her spouse would be eligible for membership provided the spouse does not get similar medical facilities either as a dependant or in individual capacity.
- 2.3. In case of death of the retired executive, who has been availing of the benefits under the Scheme, his/her spouse will continue to avail the benefits under the scheme subject to his/her spouse continuing to meet the terms and conditions of the Scheme.
- 2.4. In case any of the retired Executive and/ or spouse is having Medi-claim/ Medical Insurance Policy from any Insurance Company in individual capacity for which he/ she has to pay premium can continue the said policy for getting medical benefit. Part claim/ reimbursement for any spell of treatment is allowed from CIL HQ/ Subsidiary (as applicable) subject to submission of original bills. <sup>[4]</sup>
- 2.5. The spouse of an executive who dies while in service is eligible for membership provided he/she is not considered for employment on compassionate ground and he/she does not get similar medical facilities either as a dependent or in individual capacity.
- 2.6. <sup>[5]</sup>  
If both husband and wife are employees of the Company then the retired Executive, under post-retirement medicare scheme shall avail the medical benefits as dependant of the working spouse (either in Executive or Non - executive Cadre) under MAR, till the superannuation/ retirement under Executive Retirement before Superannuation Scheme/ VRS of the working spouse (as the case maybe).

When the working spouse retires, both husband and wife shall be allowed one time option:

- i. to either avail the post retirement medicare facilities as dependant of the working spouse i.e. join as co-beneficiary of CPRMSE or
- ii. join their respective post retirement medicare scheme i.e as individual beneficiary of either CPRMSE/ CPRMS-NE (as the case may be).

During the period the Retired Executive avails medical benefits under MAR as dependent of his/ her working spouse, no Domicilliary Payment shall be payable to such retired Executive (as per CPRMSE) and upon retirement of the serving spouse, the applicability of Domicilliary Payment shall be decided prospectively based on exercised option.

**Note:**

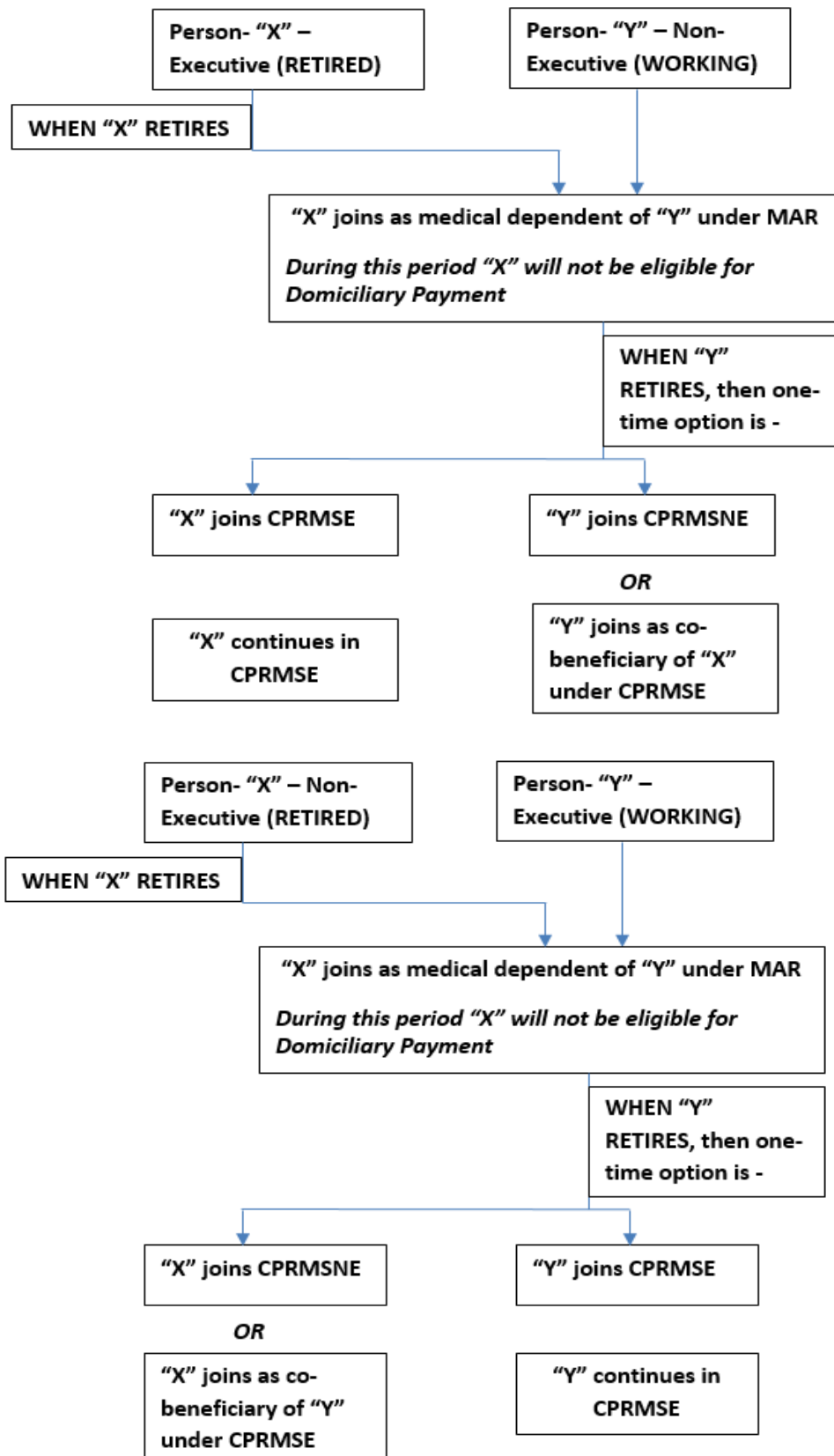
This clause is applicable for cases wherein both husband and wife are working in CIL or its Subsidiary Company. The eligibility for the same shall be governed by the Clause No. 2.0 of the Scheme.

**Schematic matrix:**

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<sup>4</sup> Amended vide OM No. CIL/C5A(PC)/CPRMSE/835 dated 14.12.2021.

<sup>5</sup> Amended vide OM No. CIL/C5A(PC)/CPRMSE/835 dated 14.12.2021. Earlier clarified vide letter No. CIL/C5A(PC)/CPRMSE/408 dated 09.04.2020.



### 3.0. Benefits



The Medical Benefits to the retired executives and their spouses under the scheme will be admissible for the treatment taken only within India and would be regulated as under:

- 3.1. Traveling expenses or allowance would not be admitted for journey undertaken for the purpose of obtaining Indoor or Outdoor treatment either for self or spouse. In case of non- ambulatory patient, ambulance charges will be paid in case the ambulance is provided by the Empanelled hospitals. <sup>[6]</sup>
- 3.2. Reimbursement of medical expenses for indoor and outdoor treatment will be regulated on the following terms and conditions: -

### 3.2.1. Indoor Treatment

#### a.

- (i) Where there is no CIL empaneled Hospital at places where the retired executives reside/are unable to go to such empaneled hospitals/ Diagnostic Centres, the retired executives can avail the medical facilities from other PSU Hospitals/ other PSUs empaneled Hospital, ESI Hospital, NABH accredited Hospital/Government hospital including hospital under Municipal Corporation or Hospital/ Diagnostic Centres empaneled by CGHS. However, the reimbursement will be limited to CGHS rates or actuals whichever is low. <sup>[7][8]</sup>

#### (ii) <sup>[8]</sup>

In case of emergency, like Heart attack, accidents, etc., if due to non-availability of empaneled hospitals in a particular town or city, any retired Executive and/ or spouse undertake medical treatment in hospitals/ nursing homes other than mentioned in 3.2.1 (a) (i) above, the reimbursement will be admissible as per the CGHS rate.

If CGHS rates are not available in such hospitals/ Nursing homes, such payments will be released on case to case basis on obtaining approval of D(P&IR), CIL or CMDs of the Subsidiary Companies as the case may be. However, the reimbursement will be restricted to CGHS rates only.

Further in such situations if treatment is received in NABH accredited or super specialty hospital, reimbursement will be restricted to maximum CGHS rates.

In case treatment is undergone in Company's Hospitals (CIL/ Subsidiary's own Hospitals as the case may be), reimbursement will be done as per actual or CGHS rate whichever is less.

However, in case of treatment undertaken in non-empaneled hospitals in non-emergency situations or situations other than as mentioned in 3.2.1 (a) (i), prior intimation should be given to the respective CMS of Subsidiary Companies or Dy. CMO, CIL as the case may be. In all such cases, payment will be released on case to case basis as per CGHS rates, on obtaining

<sup>6</sup> Amended vide Corrigendum No. CIL/C5A(PC)/CPRMSE/420 dated 02.07.2015.

<sup>7</sup> Amended vide OM No. CIL/C-5A(PC)/CPRMSE/2005 dated 01.04.2017.

<sup>8</sup> Amended vide OM No. CIL/C5A(PC)/CPRMSE/835 dated 14.12.2021.



approval of D(P&IR), CIL or CMDs of the Subsidiary Companies as the case may be.

- (iii) 100% Cashless Treatment shall be permitted at the empaneled hospital or hospitals notified by CIL.
- (iv) However, in case of any inadmissible amount, the same shall be adjusted in future from half-yearly payment or from any other amount payable to the retired executive/spouse as the case may be.

For the treatment obtained at company's hospitals by the members/spouses, no charges will be charged from the members/spouses. However, for the purpose of accounting under the scheme, a notional rate of 40% treatment cost will be charged to the retired executives' account.

- b. Eligibility for indoor admission will be restricted in the Ward/ Cabin as per the following entitlement:

Sl. No.	Entitlement	Grade
1	Deluxe room	Retired Board level executive and executives of E9 grade
2	Individual cabin	Retired executives of E8 and E7 grade
3	Twin sharing cabin	Retired executives E1 to E6 Grade

**Clarification on reimbursement of rates for Deluxe rooms for the entitled grade:** <sup>[9]</sup>

- i) For treatment in empaneled hospitals, reimbursement to be made limited to tariff of highest category of room available in the particular hospital.
- ii) For treatment in non-empaneled hospitals, reimbursement to be limited to CGHS rates defined for highest category of rooms.
- iii) With reference to Clause 3.2.1(a) (i) & (ii) of Office order CIL/C5A(PC)/CPRMSE/835 dated 14.12.2021, all items including room rates, package charges and all individual charges which are listed in CGHS, ONLY, will be reimbursed at the highest CGHS rates available for that particular item or actuals, whichever is lower<sup>[10]</sup>

**Explanation:** <sup>[11]</sup>

The entitlement of Ward/ Cabin for indoor admission of retired Executives to be regulated at par with the revised grades as per CIL OM No. CIL/C-5A(vi)/005/35/1345 dated 25.01.2010 which is as under:

<sup>9</sup> Incorporated vide letter no. CIL/C5A(PC)/884 dated 07.03.2022.

<sup>10</sup> Incorporated vide office order no. CIL/C5A(PC)/CPRMSE/2022/923 dated 01.06.2022

<sup>11</sup> Clarified vide letter No. CIL/C5A(PC)/CPRMSE/415 dated 29.04.2020.



Pre-revised Grade	Revised Grade
E-1	E-1
E-2	E-2
	E-3 (New Grade)
E-3	E-4
E-4	E-5
E-5	E-6
M1	E-7
M2	E-8
M3	
M4	E-9

- c. The maximum amount reimbursable during the entire life for the retired Executives and spouse would be ₹25 lakhs jointly and/or severally on floater basis i.e., any member of the couple can avail the combined amount of ₹25 lakhs irrespective of single or couple membership. This limit should be applicable in respect of General Diseases only i.e., other than the diseases for which the upper limit is not applicable.

Cost of treatment in OPD of empaneled hospitals/ PSU hospitals/ other PSUs empaneled Hospital/ ESI Hospital/ NABH accredited Hospital/ Government hospital including hospital under Municipal Corporation or Hospital/ Diagnostic Centers empaneled by CGHS/ Company's hospital (CIL/ Subsidiary's own hospital, as the case may be) would also be permitted and the same will be adjusted against the maximum applicable limit of ₹25 lakhs. <sup>[12]</sup>

- d. No limit will be applicable in case of the treatment of the following diseases:
- (i) Heart and Vascular diseases involving surgical or interventional therapy
  - (ii) Cancer
  - (iii) Renal disease
  - (iv) Paralysis
  - (v) AIDS &
  - (vi) Addison's disease & Adrenal Histoplasmosis. <sup>[13]</sup>

The detailed clarification of the diseases for which there is no limit and for which medical treatment will be provided is furnished below:

- (i) **Heart disease including surgical Interventions:** This will include (1) Coronary Artery By Pass Grafting (2) Coronary Angioplasty including cost of stent (3) Pacemaker implantation including cost of Pacemaker (3) Any other surgical intervention required for heart disease. Payment may be made on actual basis or on the basis of CGHS approved rate whichever is less.

<sup>12</sup> Amended vide OM No. CIL/C5A(PC)/CPRMSE/835 dated 14.12.2021. Earlier amended vide OM No. CIL/C5A(PC)/Superannuation/341 dated 01.01.2020.

<sup>13</sup> Amended vide OM No. CIL/C-5A(PC)/CPRMSE/2005 dated 01.04.2017.



- (ii) **Cancer:** This will include (1) cost of Chemotherapy taken at home as prescribed by the concerned Oncologist of notified hospital provided the cost does not exceed the cost of Chemotherapy taken at Indoor or Day Care Centre. (2) cost of investigation for follow up treatment of Cancer patient to evaluate progress and metastasis (may be twice in a year or more) based on advice of the concerned Oncologist of the notified hospital (3) cost of Palliative treatment i.e., end stage treatment of cancer patients at home. Payment may be made on actual basis or on the basis of CGHS approved rate whichever is less.
- (iii) **Renal Disease:** This will include Peritoneal Dialysis including CAPD (Continuous Ambulatory Peritoneal Dialysis) taken at (1) Indoor i.e., hospital (2) Day Care (3) At home provided the cost does not exceed the cost of dialysis taken at Day Care or Indoor. Payment may be made on actual basis or on the basis of CGHS approved rate whichever is less. Organ failure inclusive of transplant and follow up outdoor treatment will also be included.
- (iv) **Paralysis:** The term may be defined as “Neurological Disorder” instead of Paralysis. This will include (1) Surgery – Brain & Spine Surgery (2) Cerebra Vascular Accident (3) Cost of Pacemaker in Brain Surgery (deep brain stimulation surgery) (3) Physiotherapy – Payment may be made on actual basis or on the basis of CGHS approved rate whichever is less. Cost of DBS implants, intrathecal pumps and spinal stimulators cord physiotherapy (both indoor and outdoor/domiciliary) will be reimbursed as per CGHS rates or actual whichever is less.

The cost of treatment for the above diseases shall be dealt separately and the same will not come under the purview of normal limit meant for general diseases.

### 3.2.2. Outpatient/Domiciliary Treatment <sup>[14]</sup>

The amount payable per year for Outpatient/ Domiciliary treatment would be ₹36000/- (Rupees Thirty-six thousand) for all the retired Executives irrespective of their date of retirement for couple/ single membership.

- 3.2.3. Such of the members who receive Medicare in the Company hospitals/dispensaries of the Company will not be entitled for any payment under the sub-clause 3.2.2 above.

**Note:** <sup>[15]</sup>

The Schedule rates given under Chapter 5 of Medical Attendance Rules have been replaced by CGHS rates vide OM No. CIL/C5A(PC)/MAR/2829 dated 08.05.2018 is applicable under CPRMSE also.

## 4.0. Contribution

<sup>14</sup> Amended vide OM No. CIL/C5A(PC)/Superannuation/341 dated 01.01.2020.

<sup>15</sup> Clarified vide letter No. CIL/C-5A(PC)/CPRMSE(CGHS)/147 dated 28.06.2018.



- a) Executives who have retired before 01.01.1992 would be required to contribute Rs. 10000/- (Rupees Ten thousand only) for self and spouse.
- b) Executives who have retired after 01.01.1992 and before 01.01.1997 would be required to contribute Rs. 20000/- (Rupees Twenty thousand only) for self and spouse.
- c) Executives who have retired after 01.01.1997 and before 01.01.2007 will contribute Rs. 40000/- for self and spouse.
- d) Deleted<sup>[16]</sup>
- e) Executives who have retired after 01.01.2007 will have to deposit an amount equivalent to Rs. 40000/- minus the amount contributed by the employer from 01.01.2007 by way of 4% of basic plus DA per month for the post superannuation medical benefit. For the single beneficiary the amount would be Rs. 20000/- minus the amount contributed by the employer from 01.01.2007 by way of 4% of basic plus DA per month for post superannuation medical benefit.
- f) The executives who will retire after issuance of the order of modification of the scheme will not be required to contribute towards the membership under the scheme as 2%<sup>[17]</sup> of Basic plus DA per month for post superannuation medical benefit will be contributed by the employer unless the aggregate amount contributed by the employer falls short of Rs. 40000/- in which case the officer shall be required to pay the difference.
- g) The excess amount deposited by the retired executives as contribution, if any, as per pre-revised scheme for becoming member, shall be refunded by the concerned company, where the amount has been deposited.
- h) The contribution shall have to be deposited with the Company from where the executive has retired/superannuated.

4.1. The membership amount is subject to revision from time to time.

4.2. The contribution, as above, shall be payable in advance before availing the benefits of the scheme.

4.3. Contribution once paid shall not be refunded.

## 5.0. Procedure

5.1. An eligible executive, who intends to avail of medical benefits under the scheme shall apply for the purpose to the Head of Executive Establishment Department of Coal India Limited or its subsidiary companies from where he/she has retired along with membership amount. Such executives will have option to get medical reimbursement either from the company where from he/she has retired or any other subsidiary company or from the Head Office of Coal India Limited, Kolkata. The

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<sup>16</sup> Deleted due to OM No. CIL/C5A(PC)/Superannuation/341 dated 01.01.2020.

<sup>17</sup> Amended due to OM No. CIL/C5A(PC)/Superannuation/341 dated 01.01.2020.





retired executives settled in the region of North Eastern Coalfields will be served from the office of the Chief General Manager or Head of the North Eastern Coalfields, Margherita. This option shall have to be submitted at the time of making application for becoming a member of the scheme.

He/she will have option of changing the subsidiary company/CIL (HQ) for getting medical reimbursement but not more than two times.

- 5.2.** The Executive Establishment Department will, after scrutiny of the applications and verification of the eligibility conditions, as mentioned in the Scheme, shall duly register the retired executive concerned and issue a Medical Card to him/her (Annexure-‘A’), which shall permit the beneficiary/beneficiaries to avail the benefits. Intimation to this effect shall also be given to Head of Finance and Chief of Medical Services of the Company.

Declaration of 2322 is required to be given by the retired executive/spouse as the case may be at the time of becoming member under the scheme for submitting the claim in absence of retired executive and/or spouse. In respect of the retired executives who have already become member under the scheme shall submit the name of the nominee separately, if necessary.

- 5.3.** This will be admitted on receipt of the prescribed amount of contribution from the retired executive. The amount will be remitted by Bank Draft drawn in favor of Coal India Limited or its subsidiary /North Eastern Coalfields as the case may be.
- 5.4.** All the retired Executives and/ or spouse will have to submit either a “Life Certificate” or a “Jeevan Pramaan Certificate/ Digital Life Certificate” every year in the month of November.

The “Life Certificate” may be issued by any one of the following persons:

- i) The Branch Manager of the Bank where the concerned retired Executive and/ or spouse is maintaining the single-owned Savings Bank Account.
- ii) A Gazetted Officer of Central Government or State Government
- iii) A registered Medical Practitioner
- iv) Officer of the Company from where the medical facility is obtained.

The Jeevan Pramaan Certificate/ Digital Life Certificate of Concerned Executive and Spouse or the survivor beneficiary (in case of single beneficiary) can be submitted from any Citizen Service Center/ Government Offices. <sup>[18]</sup>

- 5.5.** Medical Card issued will be revalidated on yearly basis on submission of either “Life certificate” or “Jeevan Pramaan Certificate/ Digital Life Certificate”. Non-submission of “Life certificate”/ “Jeevan Pramaan Certificate/ Digital Life Certificate” will make the medical card invalid. <sup>[19]</sup>

## **6.0. Claim**

The following procedure will be followed for claiming benefits to the members:

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<sup>18</sup> Amended vide OM No. CIL/C5A(PC)/CPRMSE/614 dated 31.03.2021.

<sup>19</sup> Amended vide OM No. CIL/C5A(PC)/CPRMSE/614 dated 31.03.2021.



## 6.1. Payment of Outpatient/ Domiciliary Treatment <sup>[20]</sup>

The amount payable for outpatient/ domiciliary treatment for the member and spouse taken together would be as provided under Clause 3.2.2. This will be paid on an annual basis in January every year. In case the annual installment becomes due before completion of twelve months from the date of enrolment, the amount payable would be on pro-rata basis.

The payment shall be released when due subject to the condition stipulated at 5.4 above.

## 6.2. Reimbursement of charges for hospitalization (Indoor treatment)

As far as possible, in the empanelled hospitals the payment will be made by the company directly and there is no need for reimbursement either for OPD or Indoor. However when the expenses are not paid by the company the following procedure will follow:

For claiming reimbursement of medical expenditure incurred by the beneficiaries covered under the scheme, the retired executives shall prefer claim on quarterly basis viz. Quarter Ending 31 March, 30 June, 30 September and 31 December to the Head of the Medical Dept. of concerned subsidiary/CIL Hqrs./NEC as the case may be in the form prescribed at “**Claim Form**”<sup>21</sup> together with a self-attested photocopy of the Medical Card. The claims after scrutiny would be processed by the head of Medical Dept. and forwarded to the concerned Finance Deptt. for arranging payment. The claims shall be settled within a maximum period of 45 days from the date of its submission.

- a) Treatment and consequential charges on account of admission to a ward higher than the entitlement, for the period of stay beyond the duration specified in the package deal rates and other charges on account of telephone, cost of cosmetics, toiletries, tonics and other inadmissible items as per Medical Attendance Rules applicable to the working executives will not be reimbursed.
- b) Treatment/surgeries/procedures and room rent as admissible and levied by the concerned Govt. Hospitals or notified hospitals will only be payable.
- c) Wherever package deal rates for certain procedures/surgeries are applicable, the company’s liability will be to the extent of such package deal rates only.

### 6.2.1 Clarification w.r.t reimbursement of hospitalization charges to UNDECLARED NOMINEE under CPRMSE wherein both the beneficiary has expired <sup>[22]</sup>

In cases when the claim for reimbursement of hospitalization bill of a deceased member (who was the last surviving member of a particular CPRMSE Card) is received from a person claiming to be the Nominee/ Child of the deceased member,

<sup>20</sup> Amended vide OM No. CIL/C5A(PC)/CPRMSE/835 dated 14.12.2021.

<sup>21</sup> Incorporated due to approval no. CIL-C-5C/55125/2022/ 2755 dated 12.08.22

<sup>22</sup> Incorporated vide letter no. CIL/C-5C/55125/2021/2197 dated 01.09.2021



but there is NO registered/declared nominee in the said CPRMSE card; the matter may be dealt as per the following norms: -

**A.FOR UNDECLARED NOMINEE:** The last IPD bill of the expired beneficiary (who was the last surviving member of the said CPRMSE Card) may be reimbursed to the claiming person (i.e. the UNDECLARED NOMINEE) upon submission of the following documents:

1. Affidavit before a first-class judicial magistrate mentioning that the claimant is one of the children/legal heir of the deceased employee/spouse. The affidavit should also contain the list of legal heirs of the deceased employee/spouse.
2. Surrender the original CPRMSE Card.
3. Death Certificate of the expired member of CPRMSE
4. Indemnity Bond to indemnify CIL against any future liability.
5. ID Proof- Aadhaar & PAN Card of the claimant
6. Bank A/c Details of the claimant

**Note: If the candidate is unable to submit any of the aforementioned documents, their claim shall not be entertained.**

Also, domiciliary charges will be paid to the claiming (undeclared) nominee on a pro-rata basis till the date of death of the member. If any additional domiciliary charges are paid (due to no information in the dealing departments), the same shall be adjusted with the hospitalization bill, and the final amount will be disbursed to the nominee.

**B.FOR DECLARED NOMINEE:** In cases where the nominee details are already registered in the CPRMSE Card, the domiciliary charges on a pro-rata basis (i.e. up to the date of death of the expired member) shall be disbursed to the registered nominee only when he /she claims for the same.

Also, the reimbursement of IPD bills of the expired member (who was the last surviving member of the said CPRMSE Card) may continue to be given to the declared/registered Nominee only, as per practice.

### **6.3. Other conditions**

The Company shall not be liable to reimburse any expenses whatsoever incurred by the retired employee in connection with or in respect to:

- i) Venereal disease, psychiatric treatment, intentional self injury, intemperance or the use of intoxicating drugs or liquor or/and injury, disease or illness directly or indirectly attributable to one or more of these causes.
- ii) Charges incurred for diagnostic or Radiological or laboratory examinations or other diagnostic test not consistent with and incidental to the diagnoses and treatment of any ailment, sickness or injury and not prescribed by Authorized Treating Doctor.
- iii) Expenditure on special nursing.
- iv) Expenditure towards cosmetic surgery.
- v) Travelling expenses for outstation treatment.



#### **6.4. Notified hospitals**

The hospitals empanelled by CIL and or its subsidiaries would be considered as notified hospitals. The list of the notified Hospitals shall be uploaded in CIL website and the retired executives shall follow the same.

#### **7.0. General**

In case any doubt arises regarding the genuineness or otherwise of the claims preferred by the retired executive, the company reserves the right to direct the beneficiary to present himself/herself before a Medical Board and that no-reimbursement will be made till the recommendation of the Medical Board is received in this regard.

- 7.1.** If it is found that there is misuse of the benefits under the Scheme by any beneficiary, he/she may be debarred from the benefits under the scheme.
- 7.2.** The company reserves the right to amend, modify or discontinue the scheme, in part or full. Further Chairman, CIL and/or Director (P&IR), CIL is authorized to amend, modify and approve any relaxation of minor nature in the Contributory Scheme of post retirement facility.
- 7.3.** The power to interpret these rules is reserved with the Director (P&IR), CIL and his interpretation will be final.