



OFFICE ORDER NO. HO/821/027

Date: 19.06.1996

**Subject: BEL Retired Employees' Contributory Health Scheme (BERECHS)
-- Revised (as amended)
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- 1.0 In place of the existing BEL Retired Employees' Contributory Health Scheme (BERECHS), a Revised Scheme, as at ANNEXURE, is hereby introduced.
- 2.0 The Management reserves the right to add or delete or modify or withdraw any or all the provisions of this scheme, without any notice whatsoever to the Members or without assigning any reasons/s, at any point of time.
- 3.0 The Unit Heads are advised to give as wide publicity as possible to the Revised Scheme amongst the retirees and other eligible categories of personnel, to enable such persons to decide about joining the scheme.
- 4.0 The Revised Scheme comes into force with effect from 01.08.1996.
- 5.0 This Office Order supersedes the following Office Orders
 - i) Office Order No. HO/821/011 dtd 31.7.1986
 - ii) Office Order No. HO/821/023 dtd 1.1.1993

after the revised scheme is brought into force.

CHAIRMAN & MANAGING DIRECTOR

BEL RETIRED EMPLOYEES' CONTRIBUTORY HEALTH SCHEME (BERECHS) - REVISED

1.0 TITLE & DATE OF COMMENCEMENT:

1.1 The Scheme shall be known as "BEL RETIRED EMPLOYEES' CONTRIBUTORY HEALTH SCHEME" (REVISED). It shall come into force on 01.08.1996.

2.0 OBJECTIVE:

2.1 The primary objective of the scheme is to provide medical facilities to the retired employees and their spouses to the extent provided under the Scheme.

3.0 DEFINITION AND ELIGIBILITY:

3.1 **+ Employee:** For the purpose of this scheme, Employee means an Employee who is on rolls of the Company on permanent basis.

(+ Added vide OO No. HO/821/062 dtd 01.12.2022)

3.1.1 **^** All employees, on retirement, shall be eligible to become members of this Scheme, subject to fulfilling the following criterion:

3.1.2 **^ @** All Employees retiring on superannuation with minimum 15 years of service in the Company.

OR

Employees retiring from the service of the Company, under Voluntary Retirement Scheme, after attaining the age of 50 years AND on completion of 15 years of service;

OR

All Full-Time Directors on the Board of the Company who retire on attaining the age of superannuation OR on completion of full tenure of service indicated in the Appointment Order, whichever is earlier.

**(@ Substituted vide OO No. HO/821/043 dtd 19.01.2011)
(^ Re-numbered vide OO No. HO/821/062 dtd 01.12.2022)**

3.2 Notwithstanding the above, any person, under any of the following categories, shall also be eligible to become a member of the Scheme:

(a) All Members of the existing BERECHS as on the date of issue of this Office Order;

(b) ****** Surviving spouse of a regular employee who died or dies while in service provided the deceased employee had put in a minimum of 10 years of service in the Company. If the spouse of deceased employee is employed, he/she has to produce a No Objection Certificate (NOC) from his / her employer at the time of enrolment under BERECHS and thereafter, every year along with BERECHS renewal form till he / she is in service. However, if the spouse of deceased employee re-marries, the coverage will be discontinued. Such persons who have been covered under this scheme shall certify their marital status every year.

(Substituted vide OO No. HO/821/051 dtd 14.08.2015)**

Explanation: Spouse of a retired employee who died or dies after becoming member of this scheme shall be allowed to continue as a member of the scheme.

- (c) Employees who were OR may be discharged from service on medical grounds provided they satisfy the condition of minimum age and length of service prescribed in Clause 3.1.1 above;
and
- (d) All employees who retired on superannuation, but are not members of the Existing scheme, as on the date of issue of this Office Order.

**** Explanation:**

For avoidance of doubt, it is clarified that:

- (a) Such of those employees who retired from service, prior to 19.6.96, either under the erstwhile Manpower Adjustment Scheme or Voluntary Retirement Scheme (Pre-revised / Revised) and did not become members of the pre-revised scheme (notified vide CMD's Office Order No. HO/821/011 dt. 31.7.86) shall not be eligible to be enrolled as members of the revised BERECHS (as amended);
- (b) Such of those voluntary retirees (including their spouses) who enrolled themselves under the pre-revised BERECHS but ceased to be members of that scheme when the revised BERECHS was introduced / brought into force, for reasons, such as, non-renewal of their membership, etc., for reasons beyond their control, will be permitted to re-enrol themselves under the Revised Scheme.

(Substituted vide OO No. HO/821/028 dtd 20.12.1996 w.e.f. 29.10.1996)**

4.0 BENEFICIARIES UNDER THE SCHEME:

- 4.1 Benefits under the Scheme shall be available to the members and their spouses. No other member of the family shall be entitled to benefits under the Scheme, under any circumstances.

5.0 CONTRIBUTION:

- 5.1 # All employees who opt to become members of the scheme will make a onetime non-refundable deposit with the Company (BEL) as under:

Category	Grade	Onetime Contribution Amount (in Rs.)
IA	CMD and Directors	50,000
I	E-VII to E-IX	47,500
IIA	E-V to E-VIA	45,000
II	E-I to E-IV and all TC personnel	32,000
III	Non-Executives	22,500

(# Amended vide Circular dtd 30.03.2023)

- 5.2 In the case of employees who do not have spouse, on the date of application for admission to the scheme, the amount of deposit will be 50% of the above amount.
- 5.3 + If the spouse of the retiring employee is not working, the retiring employee can include his / her spouse under BERECHS by paying the applicable contribution amount during the month of his / her retirement. However, if the spouse of the retiring employee is working, then the following options are available for inclusion of his / her spouse under BERECHS:

- a) If the spouse of the retiring employee is working in any Central Govt. / Quasi Govt. / PSU / Municipal Bodies / Port Trust / Nationalized Banks / Insurance Companies / P&T / Pvt. Company / Educational Institution, etc. and the retiring employee desires to include the spouse under BERECHS immediately on employee's retirement, a No Objection Certificate (NOC) has to be produced from the spouse's employer. This NOC has to be produced every year along with the BERECHS renewal form.

OR

- b) The retiring employee can pay the contribution amount (for self and spouse) during the month of his / her retirement and activate the coverage for spouse, consequent to the spouse's retirement.

(+ Added vide OO No. HO/821/051 dtd 14.08.2015)

- 5.4 ^ The eligible spouse of deceased employee who opts to become member of this scheme will also make a one time non-refundable deposit as specified in para 5.1 above within one year of the death of the employee; provided such non-refundable deposit is made before 10th of any calendar month within one year of the death of the employee so as to allow him / her membership from the succeeding month.

(^ Re-numbered vide OO No. HO/821/051 dtd 14.08.2015)

- 5.5 ++ An employee /spouse who was initially enrolled membership registration under BERECHS Scheme in a Unit will be allowed transfer of BERECHS membership to the other unit without restriction. However, such cases will be processed at the beginning of the Financial Year.

The HR Head of the Unit from which transfer is requested, will forward the entire documents to the HR Head of the Unit where such transfer is sought by the retired employee / spouse. Once such a transfer is effected, all rules and procedures pertaining to the Unit to which the documents are transferred will be made applicable.

(++ Added vide Circular dtd 30.03.2023)

6.0 BENEFITS UNDER THE SCHEME:

- 6.1 All members of the Scheme and their spouses will be entitled to the following benefits, in Allopathic system of medicine only, under the Scheme:

- 6.1.1 **# In-patient treatment:** The Company will take Insurance coverage with the Insurance Company for In-patient treatment jointly in respect of retiree & spouse on floater basis as under:

Category	Grade	Basic Insurance Coverage amount (Joint coverage) in Rs	Corporate Buffer (Amount in Rs)	
			Critical	Non Critical
IA	CMD and Directors	8,00,000	8,00,000	2,00,000
I	E-VII to E-IX	8,00,000	8,00,000	50,000
IIA	E-V to E-VIA	6,50,000	6,50,000	50,000
II	E-I to E-IV and all TC personnel	5,00,000	5,00,000	50,000
III	Non-Executives	3,50,000	3,50,000	50,000

In case of Single Member i.e. only retiree or spouse, the coverage amount (including Corporate Buffer) will be 75% of the above amount.

++ Pre-hospitalization expenses incurred 30 days prior to hospitalization and post hospitalization expenses up to 60 days will be part of Inpatient treatment if it is towards the same treatment and subject to admissibility by the Insurance Company. Procedures which require day care will be covered under Inpatient treatment as per the terms and conditions of the Insurance.

(++ Added vide Circular dtd 22.03.2022)

Corporate Buffer becomes payable only after insured person / family has exhausted the basic sum insured. Corporate Buffer amount will be available for both Critical and Non-Critical ailments as follows:

- i) **Critical Buffer** – will cover Inpatient treatment for specific diseases viz. Heart Ailment, Cancer, Kidney Transplantation, Neurological Disorders and Joint Replacement Therapy.
- ii) **Non Critical Buffer** – will cover Inpatient treatment including (i) above.

The priority for utilization of Corporate Buffer will be first towards Non Critical Buffer followed by Critical Buffer.

(# Amended vide Circular dtd 30.03.2023)

6.1.2 All Members and their spouses will be entitled to inpatient treatment in any registered Hospital / Nursing Home as per the terms and conditions of Insurance.

7.0 # OUT-PATIENT TREATMENT:

All beneficiaries under the Scheme will be entitled to out-patient treatment to the extent indicated below:

a) General and Chronic Medicines:

The overall ceiling for medicines will be Rs. 50,000/- per family per year and in case of single member it will be 75% i.e. Rs. 37,500/- per year, with a Copay of 10%. Medicines can be purchased to the extent of Rs. 40,000 / Rs. 30,000 (in case of single member) through the agency (**i.e. presently Apollo Pharmacy**) authorized by BEL.

Further, in case of emergency requirement of medicines, the member can buy medicines from any Pharmacy and claim reimbursement from BEL to the extent of Rs. 10,000 / Rs. 7,500 (in case of single member) per year. This amount is within the ceiling of Rs. 50,000 / Rs. 37,500 as follows:

Category	Annual Ceiling for Purchase of Medicines	Medicines to be purchased from authorized agency (presently Apollo Pharmacy)	Medicines which can be purchased through any Pharmacy and claim to be submitted to BEL	Copay
Retiree and Spouse (floater basis)	Rs. 50,000	Rs. 40,000	Rs. 10,000	10%
Single Member	Rs. 37,500	Rs. 30,000	Rs. 7,500	

(# Amended vide Circular dtd 22.03.2022)

@ Medicines can be purchased from Apollo outlets as per eligibility at respective location i.e. (within the State in which the retiree / spouse is registered as a member). Items like Sun Screen lotions, Moisturizer Lotion / Creams, Soaps (medicated / antifungal), Medicated Shampoos, Dental toothpaste, Protein / Nutrition Supplement Powders, Laxative Powders, Cosmetic items are not admissible under the BERECH scheme.

@ Units / Offices shall process the bills received from Authorized Agency (presently Apollo Pharmacy) and ensure payment through SAP (T code – ZREMP) w.e.f. 01.04.2023, as per the provisions of the scheme.

(@ Amended vide Circular dtd 30.03.2023)

b) # Consultation, Lab Tests and Dental Treatment:

Members can consult any Doctor (including online consultation) / get Lab tests done based on requirement and submit the claim for reimbursement to the concerned Unit (BEL hospital in case of BG CX). Members can also consult doctors / get lab tests done at panel hospitals of respective units by paying agreed / negotiated rates. List of such hospitals will be notified by the respective Units.

++ Members are allowed to carry out the Master Health Check-up within the annual ceiling limit applicable. The claim for reimbursement need not be supported by Doctor's prescription.

(++ Added vide Office Order No. HO/821/065 dtd 29.03.2024)

Members can also avail Consultation and Lab tests facility to the extent available at BEL Hospital, Bangalore by paying the notified rates. In this regard, BEL hospital will display the notified rates and the services offered.

The claim will be considered, subject to admissibility, at the rate of 90% (10% being Copay amount) of the claim amount with an annual ceiling of Rs. 25,000 per family per year. In case of a single member, the annual ceiling will be 75% i.e. Rs. 18,750 per year. Provision will be made in SAP for maintaining the ceiling and respective Units shall monitor the same.

(# Amended vide Circular dtd 22.03.2022)

** The expenditure incurred towards **Dental treatment** i.e. Filling, Extraction and Root canal treatment can be claimed within the annual ceiling of Rs 25,000 / Rs 18,750 (as applicable).

Further, reimbursement towards Crown and Dentures will be allowed as per the following rates within the annual ceiling mentioned above:

Particulars	Amount (in Rs.)
Metal Crown	2,500
Dentures Full	10,000
Dentures One Jaw	6,000
Obturator with Teeth	10,000
Obturator without Teeth	5,000

c) ** Purchase of Spectacles:

Reimbursement towards purchase of Spectacles will be considered to an extent of Rs. 1,000 per member **twice** for each member during the membership under BERECH Scheme within the overall ceiling of Rs 25,000 / Rs 18,750 (as applicable).

d) ** The following appliances will be permitted for reimbursement **Once** during the membership under the BERECH Scheme **outside** the ceiling of Rs 25,000 (in case of Family i.e. Retiree and Spouse) / Rs 18,750 (in case of single member) which is earmarked towards Consultation and Lab tests:

- i) **Hearing Aid** - to the extent of Rs 10,000 per member (Retiree and Spouse).
- ii) **Continuous Positive Airway Pressure (CPAP) and Bilevel Positive Airway Pressure (BPAP) Machine** - to the extent of Rs 45,000 and **only to the retiree**.

The members of the BERECH Scheme can purchase the above appliances and claim reimbursement from BEL.

The above appliances will be considered for reimbursement based on prescription. The rates mentioned are inclusive of all taxes.

(Amended vide Circular dtd. 22.10.2022)**

e) @ In case a member has claims in excess of Rs 25,000 / Rs 18,750 towards Consultation, Lab Tests and Dental treatment, the same can be considered for reimbursement to a maximum limit of Rs 10,000 / Rs 7,500 (i.e. as per the eligibility under Emergency Medicines) if the same is not utilized by the member.

(@ Amended vide Circular dtd 30.03.2023)

8.0 # General:

- i) The admissibility of Consultation and Lab tests will be as per the provisions of CMA scheme i.e. the claims will be regulated as per the provisions applicable to the regular employees of the Company.
- ii) OPD expenditure incurred towards Ayurvedic / Homeopathy treatment and Physiotherapy can also be claimed within the applicable annual ceiling.
- iii) ****** Computerized / online bills pertaining to Consultation, Purchase of medicines and Lab Tests / other investigations, shall be accepted without seal and signature. Further, in case of non-computerised bills pertaining to Consultation, Purchase of medicines and Lab Tests / other investigations, if the bills are in pre-printed proforma, the same can be submitted with signature of the Doctor / Pharmacy / Lab / Agency respectively.
(Amended vide Circular dtd 25.05.2022)**
- iv) Claims shall be submitted within 3 months from the date of the bill to BEL Hospital (in case of BG CX) / Unit HR. Units may suitably plan the process for submission of bills by the retirees of the concerned Unit.
- v) It may be noted that the prescription will be considered as valid if it is not older than 6 months. A member can buy medicines from the authorized agency for a maximum period of 3 months.
- vi) In case a member has been advised medicines for 6 months, the initial claim to be submitted within 3 months should contain original prescription and the original bill

for having purchased medicines. Later, in case of medicines which is purchased beyond the initial period, a copy of the self certified prescription (mentioning that original prescription has been submitted along with earlier claim) and the original bill (for purchase of medicines) should be submitted along with the claim.

- vii) The bills pertaining to consultation and Lab Tests (to the extent of Rs. 25,000 / Rs. 18,750) Medicines (to the extent of Rs 10,000 / Rs. 7,500) shall be submitted to BEL once in 2 months or in case the bill amount exceeds Rs. 3,000.
- viii) The annual ceiling amount towards consultation, Lab Tests and Medicines as brought out in foregoing paragraphs is excluding the Copay of 10% which is borne by the member.
- ix) The **Form** to be submitted to BEL for claiming entitled OPD expenditure is **enclosed**.

(# Amended vide Circular dtd 22.03.2022)

9.0 + SUPPLY OF CRITICAL MEDICINES (INCLUDING CANCER):

The medicines pertaining to the following critical ailments will be supplied by the concerned Unit (BEL hospital in case of BG CX):

- a) Anti cancer drugs and drugs for preventing cancer recurrence & related supportive drugs.
- b) Acute and chronic Disorders of brain and spinal cord (Stroke, Encephalitis, Meningitis' Vascular Lesions, Auto immune disorders), Motor neuron disease. Drugs used in chronic kidney disease to people undergoing dialysis (Erythropoietin, Darbopoietin, Iron Preparation etc).
- c) Systemic Viral infections (Acute / chronic / Acute on Chronic).
- d) Biological agents for the treatment of Auto immune disorders and Multi-organ Syndromes.
- e) Post Organ Transplant Immune suppressants.
- f) Visco supplements to Joints.
- g) Anti VGEF Injections to eyes for AMD.

The above medicines will be supplied by the company free of cost. A member can submit a representation along with a valid prescription to the concerned Unit HR (BEL hospital in case of BG CX). Such request should be forwarded by HR department of concerned Units (except BG CX) to Head of BEL Hospital / BG CX. Head of BEL Hospital / BG CX will verify whether the required medicine falls under the above category and confirm the same to the concerned Unit. Subsequently, the unit will arrange for the said medicines.

(+ Added vide Circular dtd 22.03.2022)

- 10.0** Every year, periodic audit of the claims on a random basis will be carried out. Any incidents of misuse / false claims will be viewed seriously with repercussions including cancellation of membership from the BERECH Scheme.



BERECHS OPD - MEDICAL REIMBURSEMENT CLAIM FORM

UNIT / OFFICE:

Name of Retiree / Spouse			
Ex-Staff Number			
Claim for (Tick)	SELF <input type="checkbox"/>	SPOUSE <input type="checkbox"/>	
Address (in Block letters)			
Mobile Number			
E-mail ID			

Expenses incurred (Please fill each line separately for each bill)

Type of Expenses	Bill Date	Bill Number	Name of Clinic / Hospital / Doctor / Lab / Pharmacy / Others	Amount claimed (Rs.)	Amount Admitted (Rs.) (Office Use only)
Consultation					
Lab Tests					
Any other (Please specify)					
Total (A)					
Medicines					
Total (B)					
Total Amount (A + B)					

Date _____

Place _____

(Signature)

Note: Please enclose all the documents in original along with this form. Please keep a copy of the claim for future reference.

FOR OFFICE USE ONLY

Medical Officer

Checked (Finance)

Payment Passed

Rs. _____