



ALL INDIA ASSOCIATION OF COAL EXECUTIVES (AIACE)

(Regd. under The Trade Union Act 1926; Regd. No. 546 / 2016)

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AIACE/CENTRAL/2019/ 89

Dated 21/6/2019

To

Sri Prahlad Joshi ji,
Honourable Minister of Coal & Parliamentary Affairs,
Government of India,
New Delhi

Sub: Plight of Retired executives of Coal India in availing Contributory Post Retirement Medicare Scheme for Executives (CPRMSE)

Sir,

With your kind permission, we, the All India Association of Coal Executives (AIACE), may be permitted to highlight the plight and sufferings of retired executives of Coal India Ltd, due to faulty implementation and indifferent attitude of management at Coal India Ltd. (CIL) and its subsidiaries.

Humbly, it is just to reiterate that like many other PSUs in the country, Coal India has also implemented a Contributory Post Retirement Medicare Scheme for Executives with effect from 25th April, 2008. Salient features of this scheme are,

1. This scheme runs from the contribution made by executives as per following guidelines:

- After the Pay revision w.e.f. 01.01.2007, allocation of 4% of Basic and DA of all Executives is diverted for creation of corpus for Executives retiring on or after 01.01.2007.
- For the Executive retired prior to 01.01.2007, action has been taken as per DPEs OM No. 2(81)/08-DPE (WC)/GL/XVI-2009 dated 08.07.2009, wherein corpus has been created out of 1.5 % of PBT.

2. Under this scheme, CIL and its subsidiaries are extending medical facilities to the retired executives and their families through various medical establishments from the dispensary level to the central and apex hospitals in different parts of the coalfields.

3. The company also provides reimbursement facilities of cost of treatment/medicines undergone at different hospitals other than that of CIL.

All these above 3 aspects involve financial part and it is apprehended that a financial mismanagement is adding to the woes of the executives. Summarily speaking, there is no Trust created for managing this huge fund of CPRMSE, which leads to inadequate supplies of medicines to company hospitals accompanied by non-payment or delayed payment / reimbursement to empanelled hospitals or the executives respectively. Adding to these financial mismanagement, processing of claims is also being held up on the ground of inadequate manpower. CIL Subsidiaries are even unable to manage funds for settling timely claims. The half-yearly reimbursements to executives are lagging behind 2 years in several cases. Claims are not settled even after lapse of 2 years and are even refused on petty grounds without seeking clarifications from the concerned executives.

There are many other examples which may be quoted, but, need not be elaborated here. In the past 3 months, we have been continuously writing every month to CIL to take care of these issues. However, desired result is yet to be achieved in spite of willingness of CIL which is probably constrained by prevailing system. It needs an immediate intervention from your good self so that this CPRMSE is able to be efficiently managed by any professional agency which we had suggested to CIL in the past.

You will agree Sir, that as men grow in age, their medical expenditure rises every year and thus they feel immense financial hardship if their legitimate claims are delayed/denied. Under the circumstances, we request your kind instructions for smoothening the implementation process of CPRMSE in CIL as for this very scheme executives have themselves created their corpus.

Regards,



P K SINGH RATHOR
Principal General Secretary

CC

The Coal Secretary, Ministry of Coal, Govt of India, New Delhi.
The Chairman, Coal India Ltd, Kolkata.