

F. No.42/11/2023-P&PW(D)/E-9312
Government of India
Ministry of Personnel, Public Grievances & Pensions
Department of Pension & Pensioners' Welfare

3rd Floor, Lok Nayak Bhawan
Khan Market, New Delhi-110003
Date: - 4th May, 2026

To

All the Pensioners' Associations included in SCOVA
Vide Resolution dated 29.09.2025

Subject: - Minutes of the meeting of 35th SCOVA held on 10.03.2026 under the Chairmanship of Hon'ble MOS (PP) at CSOI, KG Marg, New Delhi – reg.

Please find enclosed herewith the minutes of the 35th Meeting of Standing Committee of Voluntary Agencies (SCOVA) held under the Chairmanship of Hon'ble MoS (PP) on 10.03.2026 at CSOI, KG Marg, New Delhi.

Encl: as above



(Keshav Madhav Sharma)

Under Secretary to the Govt. of India

Minutes of the meeting of 35th SCOVA held on 10.03.2026 under the Chairmanship of Hon'ble MOS (PP) at CSOI, KG Marg, New Delhi

Venue: CSOI, K. G. Marg, New Delhi

Date: 10.3.2026

1. List of participants is at *Annexure-I*.
2. Minutes of the Meeting is at *Annexure – II*.
3. Joint Secretary (Pension) welcomed Hon'ble MoS (PP), Secretary (P&PW), representatives of Pensioners' Welfare Associations and the officers from various Ministries/Departments. He underlined that SCOVA is a useful platform where feedback on implementation of policies/programs of DoPPW is discussed. Further, he highlighted that it provides the representatives of PWAs an opportunity for raising the issues concerning pensioners' welfare directly before the concerned Ministries/Departments.
4. Secretary (Pension) briefed the members of SCOVA about various initiatives undertaken by DoPPW for bringing ease in the life of the pensioners. She appreciated the role of PWAs towards the success of DLC campaign 4.0, held in November, 2025. She apprised about the Comprehensive guidelines issued on 29.09.2025 for timely payment of retirement dues and issue of PPOs at the time of retirement of Central Civil Services Employees with innovative intervention of appointment of Pension Mitras for handholding of pensioners in all the departments. She also pointed out the impactful role of National Pension Adalats in resolving grievances wherein more than 74% of the grievances have been successfully resolved on the spot in presence of the Hon'ble MoS (PP) in the last 15 Pension Adalats.
5. Thereafter, new agenda items identified for 35th SCOVA meeting and carried forward agenda items from 34th SCOVA meeting, held in March, 2025 were deliberated in detail.
6. In his concluding address, Hon'ble MoS (PP) and Chairman of SCOVA, Dr. Jitendra Singh underscored several revolutionary changes, brought in since 2014 for bringing "Ease of Living" to the common man. He shared that the issue regarding an increase in the Grant-in-Aid to PWAs from earlier ₹75,000/- to ₹5,00,000/- per annum per Association, as raised in last SCOVA, has been duly addressed. He emphatically mentioned about the role of SCOVA in bringing recent

reforms in CGHS viz. revision of CGHS packages, reducing the age limit for referral free consultation in empaneled hospitals from 75 years to 70 years, increase in the validity of referral from 1 month to 3 months on a single referral. Further, he discussed the utility of integration of CGHS portal with Bhavishya in ensuring the generation of CGHS card on the first day of the retirement.

7. Dr. Jitendra Singh, Hon'ble MoS (PP) also stressed upon the role of SCOVA in participative consultation with stakeholders so that welfare measures for pensioners are ensured. He also encouraged PWAs to share suggestions beyond grievances so that policies and services can be further strengthened.

8. The meeting ended with a vote of thanks to the chair and all other participants.

List of Participants

Sl. No.	Department	Name and Designation
1.	Dr. Jitendra Singh	Ministry of State (Personnel, P.G & Pensions) Chairman, SCOVA
2.	Ms. Rachna Shah	Secretary (P&PW) Convener, SCOVA

Participants from Departments/Ministries

Sl. No.	Department	Name and Designation
1.	Controller General of Defence Accounts (CGDA)/MoD	Sh. Vishvajit Sahay, CGDA Sh. Kanwaldeep Singh, PCDA Ms. Molly Sengupta, Jt. CGDA
2.	Ministry of Railways	Ms. Renu Sharma, Pr. ED (IR) Ms. Megha Agarwal, Director Sh. Jayabalan. M.M, Director
3.	Department of Expenditure	Shri P. K. Singh, Joint Secretary
4.	Ministry of Health & Family Welfare	Dr. Satheesh Y.H., Director, CGHS Dr. Praveen Bala, ADDG, CGHS
5.	Department of Telecommunications	Ms. Roshni Sohni, Sr. DDG
6.	Controller General of Communication Accounts (CGCA)/DoT	Sh. Satish Kumar, Jt. CGCA
7.	Central Pension Accounting Office (CPAO)	Ms. Deepika Jain, CC (Pension)
8.	Department of Personnel & Training (DoPT)	Sh. Amit Pankaj, Director
9.	Department of Ex-Servicemen Welfare (DESW)	Sh. Rajesh Sinha, Deputy Secretary
10.	Department of Financial Services	Sh. K.M. Nandakumar, US
11.	Central Board of Direct Taxes (CBDT)	Sh. Siddhant Das, DCIT

12.	Department of Posts	Sh. Shankar Pandit, ADG
13.	State Bank of India	Sh. Akhil Kumar Mishra, DGM
14.	Punjab National Bank	Sh. Sanjay Gondwal, AGM
15.	Bank of Baroda	Sh. Vikas Kumar Sinha, DGM
16.	Central Bank of India	Ms. Poppy Sharma, CGM

Officers/Officials of Department of Pension & Pensioners' Welfare

Sl. No.	Department	Name and Designation
1.	Sh. Dhrubajyoti Sengupta	Joint Secretary(P)
2.	Dr. Pramod Kumar	Director
4.	Sh. Rakesh Kumar	Director
5.	Sh. Ravi Kiran Ubale	Director
6.	Sh. Anil Bansal	Sr. Tech. Director (NIC)
7.	Sh. K.N. Tiwari	Tech. Director (NIC)
8.	Sh. Subhash Chander	Under Secretary
9.	Ms. Madhu Mankotia	Under Secretary
10.	Ms. Meenakshi Shankar	Under Secretary
11.	Sh. Deepak Gupta	Under Secretary
12.	Sh. Samin Ansari	Under Secretary
13.	Sh. Nagender Kumar	Under Secretary

16.	Sh. Pravesh Kumar	Under Secretary
17.	Sh. Keshav Madhav Sharma	Under Secretary
18.	Ms. Manju Gupta	Additional Director (OL)
19.	Ms. Ramanjit Kaur	Sr. Consultant

SCOVA Attendees

Sl. No.	Pensioners' Association	Members (Shri/Ms./Dr.)
1.	Baroda Central Pensioners' Association, Vadodara	Shri Satish N. Joshi, Vice President
2.	All India Central Govt. Pensioners' Association, Cuttack	Mr. Abhimanyu Nayak, General Secretary
3.	All India Central Govt. Pensioners' Association, Pune	H.F. Chaudhari, General Secretary
4.	All India Federation of Pensioners' Association, Chennai	D. Balasubramanian, General Secretary
5.	Indian Ex-Services League, Chanakyapuri, Delhi	Brig. OP Yadav, Vice President
6.	Central Government Pensioners Welfare Association (Regd.), Jammu	K. B. Jandial, General Secretary
7.	Posts and Telegraphs and Other Central Govt. Pensioners' Association, Gujarat	S.B. Patel, Secretary
8.	Central Government Pensioners' Welfare Association, Ambarnath	P. Venugopalan, President
9.	N.F. Railway Pensioners' Associations, Guwahati	S. P. Sengupta, Joint General Secretary
10.	Jharkhand Pensioners' Kalyan Samaj, Ranchi	Vivekanand Mishra, Secretary
11.	Bharat Pensioners' Samaj, Jangpura, New Delhi	R.K. Chauhan, President
12.	Doon Central Pensioners Association, Dehradun Uttarakhand	Ravindra Datt Semwal, General Secretary

13.	Co-ordination Committee of Central Govt. Pensioners' Association, Kolkata	Ashok Kaanti Ghosh, Working President
14.	All India Retired Railwaymen's Federation, Telangana	S Sreedhar, National President
15.	All India BSNL Pensioners Welfare Association, Bangalore	V Varaprasad, General Secretary

Annexure-II

NEW AGENDA ITEMS

Sl. No.	Agenda Item	Discussion/Decision on the agenda item
Ministry Health & Family Welfare		
1.	Availability of CGHS facilities at District level or reasonable rise in medical allowance	Approval has been accorded for opening of 29 new Wellness Centres across various cities (Bhilai, Durg, Narmadapuram, Bahadurgarh, Rewari, Rohtak, Dharmshala, Kangra, Patiala, Udupi, Shivmogga, Jamshedpur, Sabarmati, Bharatpur, Alwar, Haldwani, Nainital, Warangal, Tirupathi, Navi Mumbai, Hapur, Mangaluru, Udaipur, Kollam, Vasco-da-gama, Sahakarnagar, Bangalore, Hubli, Sambalpur & Greater Noida West). Hence, the item may be treated as closed.
2.	Request for an Attendance Allowance to the pensioners suffering from Parkinson/Dementia and other ailments, which require constant assistance for leading a dignified life	CGHS was requested to examine the request for an Attendance Allowance to the pensioners suffering from Parkinson/Dementia and other ailments. [Action: M/o Health & Family Welfare/CGHS]

3.	Establishment of a full-fledged CGHS-type hospital in Jharkhand.	<p>CGHS primarily functions through its network of Wellness Centres for outpatient services and through empanelled private hospitals for inpatient treatment. It does not establish standalone, full-fledged CGHS hospitals. Now, as per OM dated 22.12.2025, more Pvt. HCOs will be able get empanelled under CGHS in tier II and III cities which will ensure adequate access to patient care for CGHS beneficiaries in the state. However, opening of one new CGHS Wellness Centre in Jamshedpur (Jharkhand) is under process for which approval has already been accorded.</p> <p>Hence, the item may be treated as closed.</p>
4.	Revision of current referral-free limit of Rs.3,000/- regarding diagnostic tests under CGHS.	<p>Beneficiaries aged 70 years and above (irrespective of card type—Serving, Pensioner, etc.) may directly consult specialists at empanelled hospitals without prior referral from a CGHS Wellness Centre. For diagnostic tests/investigations (excluding CT scan, MRI) below ₹3,000, no additional endorsement is required, provided there is a valid prescription from the treating specialist.</p> <p>Where a referral has been issued by a CGHS Wellness Centre, it remains valid for three months from the date of issue and upto 6 consultations. These provisions are intended to facilitate timely access to medical care, especially for senior beneficiaries.</p> <p>Hence, the item may be treated as closed.</p>
5.	Establishment of CGHS Wellness centre at Puri, Odisha	<p>There is no such proposal under consideration for opening WC at Puri, Odisha. However, Health Care Organizations (HCOs) located in tier-2 and tier-3 cities, where there is no CGHS facilities are now eligible to be empanelled under CGHS as per the revised norms vide OM dated 22.12.2025, which will ensure adequate access to patient care for CGHS beneficiaries in the state.</p>

		<p>Further, CGHS beneficiaries are permitted to avail treatment without referral/endorsement at any Government hospital, including institutions such as AIIMS, other Institutions of National Importance (INIs), Northeastern regional institutes, Tata Memorial Hospital, as well as Government Medical Colleges and District Hospitals. Moreover, private hospitals in Puri can now seek direct empanelment under the revised norms issued vide O.M. dated 22nd December 2025 which allows for empanelment of HCOs falling in municipal limits of a district headquarters irrespective of availability of CGHS Wellness Centre in that city, thereby, providing easy access to healthcare facilities to the CGHS beneficiaries.</p> <p>Hence, the item may be treated as closed.</p>
6.	Timely settlement of medical claims	<p>Timely settlement of medical reimbursement claims is a priority for CGHS. Claims are processed through an online system to ensure transparency, tracking, and faster disposal. In Addition, clear timelines have been prescribed for settlement of claims of treatment undertaken by pensioner beneficiaries at Private non-empanelled hospitals. The beneficiaries can track their MRCs on new MRC CGHS portal and also on myCGHS 2.0 app.</p> <p>Moreover, CGHS Directorate monitors the pendency on regular basis with Zonal/Additional Directors to ensure adherence to these timelines. Further, the credit bills of pensioners are processed on the newly revamped TMS (Transaction Management System) 2.0, effective since October 13, 2025, for faster tracking and settlement of private HCO bills.</p>

		Hence, the item may be treated as closed.
7.	<p>OTP-based registration challenges at empanelled hospitals as OTP is sent to the primary beneficiary's registered mobile number, which restricts accompanying family members from completing the registration process; Non-availability or substitution of prescribed medicines for critical patients, including temperature-sensitive injections</p>	<p>Identification of CGHS beneficiary at the point of care is an essential step for a cashless facility. CGHS is considering adding other means of verification to avoid inconvenience.</p> <p>CGHS would like to clarify the following:</p> <ul style="list-style-type: none"> • The prescribed medicine (salt) is not changed. For example, paracetamol will not be replaced with a different medicine like aspirin. • However, the manufacturer may change, provided the salt, strength, and dosage remain the same. <p>CGHS procures quality-approved generic medicines from the Government organisation like MSO and PMBI (Janaushadi).</p> <p>If any medicine is temporarily unavailable, including temperature-sensitive injections, it is promptly arranged through Authorized Local Chemists (ALCs). Proper storage and cold-chain norms are followed for temperature sensitive medicines.</p> <p>Hence, the item may be treated as closed.</p>
8.	<p>Expansion/Extension and proper staffing of CGHS WCs in Pune, Pimpri-Chinchwad, Belagavi, Coimbatore, and Sambhajinagar; Formulation of policies for empanelment of private hospitals where CGHS centers are not feasible</p>	<p>Rationalization of staff across Wellness Centres is undertaken periodically based on daily footfall.</p> <p>CGHS has initiated the process to empanel healthcare organisations irrespective of CGHS coverage area in tier II and III cities which enables the central government employees to avail treatment.</p> <p>Hence, the item may be treated as closed.</p>

9.	Providing option of getting FMA to those who are residing in CGHS covered areas	Fixed Medical Allowance (FMA) is granted as per the provisions of the applicable Pension Rules. Hence, the item may be treated as closed.
10.	Opening of Ayurvedic Dispensary at Jammu and Establishment of Polyclinic at Jammu; Delay in settlement of MRCs and Shortage of Staff at WCs at Jammu	An AYUSH dispensary is operational in Jammu in the building of CGHS WC Jammu-2 at Trikutta Nagar Jammu. One doctor and one pharmacist are already posted and the procurement of ayurvedic medicines is under process. Establishment of polyclinic and Lab services at Thanser Jammu South, is under consideration. MRCs are being processed timely and the same is being reviewed by CGHS Directorate in periodic review meetings. [Action: M/o Health & Family Welfare/CGHS]
11.	Extension of home delivery of medicines under CGHS to reduce visits to Wellness Centres	CGHS was requested to examine the feasibility of home delivery of medicines under CGHS. [Action: M/o Health & Family Welfare/CGHS]
12.	Need to strengthen and expand CGHS services and improve medicine availability	29 new CGHS wellness centres have been sanctioned across India. The Ministry has recently notified comprehensive 'Drug Procurement Policy' to ensure the continuous availability of medicines. Hence, the item may be treated as closed.
13.	Opening a new CGHS Wellness Centre at Badlapur and ensuring regular supply of quality medicines at CGHS centres	There is no such proposal for opening a CGHS WC at Badlapur, Maharashtra. Badlapur is 20 minutes drive from CGHS WC Ambarnath. CGHS is in the process of onboarding more and more Pvt.HCOs in non-CGHS covered areas (vide OM dated 22.12.2025). However, the Ministry has recently notified comprehensive 'Drug Procurement Policy' on 15 th January 2026, to ensure uninterrupted

		availability of medicines at CGHS Wellness Centres. Hence, the item may be treated as closed.
14.	Opening of new Wellness Centres at Barasat, Baruipur, and Patuli to ease the burden on existing overworked centres at Airport and Rajdanga, ensuring smooth and humane medical treatment	There is no such proposal for opening a CGHS WC at CGHS Kolkatta. CGHS is in the process of onboarding more and more Pvt. HCOs in non-CGHS covered areas vide OM dated 22.12.2025, which will ensure adequate access to patient care for CGHS beneficiaries in the state. The number of WCs as on date in the state of West Bengal is 18 nos. Hence, the item may be treated as closed.
Ministry of Railways		
Sl.No.	Issue	Comments of ministry/ Department
15.	Grant of LTC benefits on the line of unused leave encashment, and senior citizen concessions in railway travel	With respect to the LTC facility to Railway Servants, it is stated that only All India Leave Travel Concession (AILT) facility has been extended to them whereas on civil side, Government Servants are entitled to Home town as well as All India LTC. This AILT facility to Railway Servants is governed strictly in accordance with CCS (LTC) rules-1988, the Nodal Department for which is DoP&T. Accordingly, as per Business Rules, the decision w.r.t. extension of LTC facility to retired Government employees can only be taken by DoP&T and not by Ministry of Railways. Hence, comments on this aspect may be obtained from DoP&T. [Action: D/o Personnel & Training]
16.	Provision of a higher appellate authority to review unresolved or complex cases from	Pension Adalats are conducted at Senior or higher Administrative levels with the participation of Competent Authorities from Personnel and Accounts Department, duly empowered to examine and decide

	Annual Pension Adalats to ensure timely and uniform settlement of cases	<p>the pension related cases in accordance with the extant rules and instructions. Creation of separate Appellate Authority exclusively for cases arising from Pension Adalats would duplicate the existing redressal mechanism and may lead to avoidable procedural delays rather than expediting resolution. In view of this, it is not reasonable enough to consider a separate Appellate Authority.</p> <p>Hence, the item may be treated as closed.</p>
17.	Restoration of pre-COVID rail and air fare concessions and provision of one attendant for those above 80 years	<p>Indian Railways strives to provide affordable services to all strata of the society and gave subsidy of Rs. 60,466 crore on passenger tickets in 2023-24. This amounts to concession of 45% on an average, to every person, travelling on Railways. In other words, if the cost of providing service is Rs. 100, then the price of ticket is Rs. 55 only. This subsidy is continuing for all passengers. Further, concessions beyond this subsidy amount are continuing for many categories like 4 categories of Persons with Disabilities (Divyangjans), 11 categories of patients and 8 categories of students.</p> <p>Hence, the item may be treated as closed.</p>
18.	Integration of UMID software with ARPAN and conducting of informal meetings of PWAs with DRMs/GMs	<p>As on date, PPO data of 13.59 lakh pre-2016 pensioners has already been shared with UMID Portal. Now, that ARPAN application has been migrated to IPAS along with legacy data, the process of sharing data continues at weekly intervals upon their revision/updation. As far as data of post-2016 settlement PPOs generated directly in IPAS is concerned, the same is pushed to UMID Portal on runtime basis through an integrated scheduler. Further, the existing system is also being revisited for further integration, automation and upgradations.</p> <p>Regarding meetings of PWAs with DRMs/GMs for</p>

		<p>addressing the issues concerning the welfare of railway pensioners, necessary directions may be issued by Ministry of Railways.</p> <p>[Action: Ministry of Railways]</p>
19.	<p>Granting of one-time re-option allowing Railway Pensioners to discontinue FMA and resume medical treatment through Railway hospitals.</p>	<p>Railway Pensioners are given the option at the time of retirement to either avail FMA or opt for outdoor medical treatment through Railway Hospitals/Health Units. Further, Railway Board has already provided the facility to pensioners/family pensioners to switch from FMA to OPD medical facilities and vice-versa, without linkage to change in place of residence, in terms of Board's letters dated 27.10.2022 (RBE No. 137/2022) and 07.03.2025 (RBE No. 18/2025).</p> <p>Hence, the item may be treated as closed.</p>
<p>Department of Financial Services (Banking Division)</p>		
20.	<p>Setting up of separate Central Pension Processing Cell (CPPC) units of SBI and PNB in Ranchi to reduce delay in grievance redressal</p>	<p><u>State Bank of India</u></p> <p>At present, CPPC Patna has the capacity to cater to approximately 10.00 lakh pensioners. CPPC Patna is maintaining approximately 5,00,000 pension files of Bihar and Jharkhand, out of which around 1,50,000 pensioners belong to Jharkhand State.</p> <p>CPPC Patna has now established a Specialised Help Desk at Ranchi Branch on 20.02.2026 to cater to the queries and complaints of pensioners. This Help Desk will expedite resolutions of queries related to pensioners in Jharkhand State and significantly enhance customer experience, thus ensuring seamless service to the pensioners.</p> <p><u>Punjab National Bank</u></p> <p>As present, the bank has a CPPC in Bhopal which caters to pensioners of Jharkhand. Additionally, the</p>

		<p>Bank also has a CPPC at Patna. The existing arrangement is functioning effectively for processing pension-related matters.</p> <p>Hence, the item may be treated as closed.</p>
21.	<p>Concerns include delay and rejection in submission of Digital Life Certificates (DLCs) via Jeevan Pramaan Application especially by Bank of Baroda and Central Bank of India</p>	<p><u>Bank of Baroda</u></p> <p>As per the records available with the Bank, Digital Life Certificates (DLCs) were not processed or rejected because of following primary reasons:</p> <ul style="list-style-type: none"> a) Due to incorrect details entered by the applicant viz. PPO Number, Account Number, Wrong Selection of Pension Sanctioning Authority etc. b) Due to updating of Life Certificate using dual mode by the pensioner i.e. Physical submission and DLC submission, also many cases were submitted multiple times through DLC. <p>The bank had driven a special campaign during the life certificate submission period and a large number of life certificates were submitted successfully through DLC mode. Further the Bank shall continue to guide the pensioner to minimize the mistakes done on their part for DLC submission.</p> <p><u>Central Bank of India</u></p> <p>During Nationwide Digital Life Certificate (DLC) Campaign 4.0 started from 01/11/2025, a total of 79,905 life certificates of pensioners having pension account in the bank were uploaded in Jeevan Pramaan portal of Government of India. Out of that 60,637 Life Certificates were successfully updated in respective pension accounts in Bank's GBM application. The rest 19,268 DLC were rejected.</p> <p>Main factors leading to rejection include:</p>

		<p>1. The pensioners furnish wrong Pension Account while submit the Life Certificate through DLC.</p> <p>2. Though large volumes of Defence Pensioners have migrated to SPARSH (PCDA) & Telecom Pensioners to SAMPANN, these pensioners select Central Bank of India in place of respective agency while submitting life certificate through DLC leading to rejection ultimately.</p> <p>Hence, the item may be treated as closed.</p>
22.	<p>It is observed that on death of pensioner having joint account with his spouse, family pension is paid to the spouse but the name of pensioner is not deleted from the bank account and the spouse is treated as secondary account holder and due to this procedure, many a times, DLCs of family pensioners get rejected due to Aadhar Card mismatch for want of update of record by the bank. Hence, it is requested that on the death of joint account holder pensioner, the joint account should be treated as single account.</p>	<p>The Bank ensures compliance of the guidelines issued by the Reserve Bank of India (RBI) and DOPPW regarding the compliance of treating family pensioner as primary account holder at all levels.</p> <p>However, in case any specific observation or deviation is highlighted, the Bank will initiate corrective action without any delay.</p> <p>Hence, the item may be treated as closed.</p>

Department of Pension & Pensioners' Welfare

23.	Recognition of transgender children as dependents for the purpose of sanctioning of family pension	<p>DOPPW is working on simplifying and re-writing of Rule 50 of CCS (Pension) Rules, 2021, which concerns Family Pension.</p> <p>However, it is submitted that any action in this regard will be taken in consultation with DOE and DOLA.</p> <p>[Action: D/o Pension & Pensioners' Welfare]</p>
24.	Simplifying proof of relationship requirements for family pension and verification via home visit and to do away with succession certificate	<p>As per CCS (Pension) Rules, 2021, for granting of the family pension, one has to submit prescribed documents submitted after following due procedure.</p> <p>Hence, the item may be treated as closed.</p>
25.	Accessibility of attachment/ATR to pensioner on CPENGRAMS upon disposal of grievance	<p>DoPPW vide OM dated 16.10.2024 has directed to upload the supporting documents to substantiate the conclusive redressal of the grievances. A fresh OM will be issued in this regard.</p> <p>[Action: D/o Pension & Pensioners' Welfare]</p>
CBDT		
26.	Abolition of double taxation on medical reimbursement for pensioners	<p>The pension received is included under the definition of salary and is taxed under the head "Salaries". The reimbursements received by the pensioners on account of the medical expenditure incurred by them are over and above the pension received by them. The reimbursement is distinct from the pension already received and is an added benefit. Therefore, there is no double taxation of the same income. However, the sum paid by the employer in respect of any expenditure actually incurred by the employee on his</p>

		<p>medical treatment or treatment of any member of his family in accordance with the provisions of section 17(2)(b) of the Income-tax Act, 2025 [Clause (ii) of the Proviso to section 17(2) of the Income-tax Act, 1961] is not treated as perquisite.</p> <p>Hence, the item may be treated as closed.</p>
Department of Expenditure		
27.	Granting of funds towards funeral expenditure of pensioner	<p>There is no existing rule or provision governing the grant of financial assistance towards funeral expenses of pensioners.</p> <p>Hence, the item may be treated as closed.</p>
Department of Ex-servicemen Welfare & CGDA		
28.	Proposing urgent resolution of long pending pension grievances of Ex-servicemen by scheduling a dedicated meeting between the IESL, the central body and the CGDA; particularly to address anomalies faced by NCOs, JCOs and other ranks	<p>Meeting with various Pensioners' Welfare Associations including IESL Central Body was conducted on 25.06.2025 to address various anomalies reported.</p> <p>Hence, the item may be treated as closed.</p>

29.	Enhancing coordination with Pensioners' Welfare Associations, and providing dedicated service centers or officials for SPARSH pensioners.	Nodal officers/ single point of contact were identified and the same was intimated in the meeting. Hence, the item may be treated as closed.
30.	Resolving issues in SPARSH portal such as smooth discontinuation of FMA for availing ECHS/CGHS membership	Facility for stoppage or discontinuation of FMA is available on SPARSH. After successful approval of request for stoppage of FMA, a certificate to this effect can be downloaded from SPARSH and submitted to the concerned authority for CGHS/ECHS. Hence, the item may be treated as closed.
Department of Telecommunications		
31.	Enhancing coordination with Pensioners' Welfare Associations, and providing dedicated service centers or officials for SPARSH/SAMPANN pensioners	The Department has not submitted its reply in this regard. [Action: D/o Telecommunications]
32.	Delay in family pension payment under SAMPANN and non-adherence of one month time limit by CCAs	

CARRIED FORWARD AGENDA ITEMS

Sl. No.	Agenda item	Comments of Ministry/Department
Department of Pension & Pensioners' Welfare		
1.	Increase in the Grant-in-Aid to PWAs	Proposal of increasing the Grant-in-Aid from existing Rs. 75000/- to Rs. 5,00,000/- per annum per association has been approved by the competent authority. Hence, the item may be treated as closed.
2.	Pensioners' Associations raised the issue of difficulties being faced by family pensioners for grant of family pension after death of pensioner/family pensioner. They, therefore, requested to issue a Standard Operating Procedure (SOP) for streamlining the process of starting of Family Pension.	DOPPW is working on simplifying and re-writing of Rule 50 (Family Pension). Also, short videos are being released to make the family pensioners aware of the process and relevant documents. [Action: D/o Pension & Pensioners' Welfare]
Department of Posts		
3.	Department of Posts should opt one of the two available options i.e. BHAVISHYA Portal & SAMPANN Portal as soon as possible for smooth settlement of pension cases.	It has been decided by the Department of Posts that entire exit management (eight such type of exits i.e. retirement, VRS, removal etc.) of an employee from service will be carried out through this Department's computerized automatic Module i.e. Exit Management Module. This in-house application of the Department will be operational by the end of this year. Till such

		time, the existing system will which is running smoothly without any problem. [Action: D/o Posts]
Controller of Defence Accounts (CGDA)		
4.	Issues related to Digital Life Certificate (DLCs) especially for pensioners residing in foreign countries	<p>For Pensioners residing abroad, the provision for submission of DLC through Indian Embassy is already available.</p> <p>For extending the services of SPARSH to NRI and NDG pensioners, a dedicated email id has been created. The new email ID is as sparshnri.dad@gov.in. For continuation of pension, NRI/NDG pensioner can furnish his life Certificate through the said email id.</p> <p>Requests of annual Identification of NRI SPARSH pensioners received in this email are being processed through DAK module of SPARSH system by a dedicated team in a time bound manner.</p> <p>Hence, the item may be treated as closed.</p>
5.	Issues related to policy matter of One Rank One Pension (OROP)	<p>MoD letter No. 1(2)/2023/D(Pen/Pol) dated 10th July, 2024 and subsequent letter dated 4th September, 2024 for OROP-III was issued by Ministry after deliberation & detailed/ discussion with all stakeholders. It is reiterated that the scheme of OROP has been upheld by Hon'ble Supreme Court also.</p> <p>Hence, the item may be treated as closed.</p>
6.	Issues of restoration of commutation of pension (delayed restoration due	After receiving actual date of payment of CVP and start date of recovery of commutation from banks, the start as well as restoration date of

<p>to data mismatch or missing data on SPARSH portal)</p>	<p>commutation recovery has been updated in SPARSH.</p> <p>Pensioners have facility to raise grievances for correct date of restoration. After due verification, such requests are being updated and excess recovery of commutation, if any, is also being refunded to the pensioners' account.</p> <p>In the cases where Banks have expressed their inability to share date of restoration due to non-availability of old records pertaining to manual period, restoration date on account of commutation is being considered as per provision contained in DP&AR OM dated 10.07.1980 (available at Gol, Decision No. 1 below Rule 10 A of CCS (P) Rules 2021) read with Para 3 of DoP&PW OM dated 22.08.1990 [available at Gol ID No. 3 below rule of CCS (Commutation of Pension) Rules 1981]. Incidentally, there are approx. 12000 cases where restoration date is missing.</p> <p>Hence, the item may be treated as closed.</p>
<p>7. Issues relating to non-payment of additional pension.</p>	<p>Instructions for payment of additional pension after completion of 80 years to PDAs and SPARSH are available. Some cases of non-payment of additional pension are due to missing date of birth/ incomplete date of birth of pensioners or family pensioner. The missing data has been shared with Record Offices for necessary data updation and additional pension is being paid accordingly. Updated cases are being paid additional pension as per rules.</p> <p>Hence, the item may be treated as closed.</p>

	To issue FAQs on the issue being raised by Pensioners on migration of their pension disbursal from bank to SPARSH.	Compilation of FAQs on the issues is under process and will be issued in due course. [Action: Controller General of Defence Accounts]
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Department of Telecommunications

8.	Extension of SAMPANN portal of DoT to the department of Posts and sending of reminders for DLCs on monthly basis creating confusion among pensioners	<p>The O/o CGCA made the presentation to Member, Postal Services Board and Senior officials of Department of Posts regarding adoption of SAMPANN and its benefits. However, DoP has intimated vide letter dated 29.05.2025 that DOP has decided to develop a new Pension Management Solution, instead of adopting the SAMPANN solution or Bhavishya as directed by Secretary (P), DoPPW.</p> <p>It was already clarified by Jt. CGCA, O/o CGCA (DOT) during the SCOVA meeting that an additional facility is being provided to the Pensioners to update their DLC in any month of the year as per their convenience. It is only a reminder SMS which is sent periodically to the Pensioners. However, pensioners have the facility to update their DLC anytime as per their convenience.</p> <p>Hence, the item may be treated as closed.</p>
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Ministry of Health & Family Welfare

9.	Adequate manpower posting at wellness centers	Rationalization of staff across Wellness Centres is undertaken periodically based on daily footfall.
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Opening of new WCs at Pune, Bengaluru, Balasore, Nagpur, Chennai, Puducherry and Jammu	29 new wellness centers are sanctioned across various cities including two, viz., Shivmogga & Mangaluru, in Bangalore and two extension counters at Hubli & Sahakarnagar to full-fledged Wellness Centres. Already 09 wellness centers in Pune, 11 WCs in Nagpur, 14 WCs in Chennai, 01 WC in Puducherry are functional. Further, as per OM dated 22.12.2025, more Pvt. HCOs will be able get empanelled under CGHS in tier II and III cities which will ensure adequate access to patient care for CGHS beneficiaries in the state.
Opening of a polyclinic at Jammu with testing lab facilities	Establishment of polyclinic and Lab services at Thanser Jammu South, is under consideration.
In addition to the empanelled lab already available, setting up of a diagnostic lab	[Action: M/o Health & Family Welfare/CGHS]
Timely payment of bills of the vendors	CGHS Directorate monitors the pendency on regular basis with Zonal/Additional Directors to ensure adherence to these timelines. Further, the credit bills of pensioners are processed on the newly revamped TMS (Transaction Management System) 2.0, effective since October 13, 2025, for faster tracking and settlement of private HCO bills
Empanelment of private hospitals at the district H.Q. (Pune and other places) under CGHS	CGHS primarily functions through its network of Wellness Centres for outpatient services and through empanelled private hospitals for inpatient treatment. It does not establish standalone, full-fledged CGHS hospitals. Now, as per OM dated 22.12.2025, more Pvt. HCOs will be able get empanelled under CGHS in tier II and III cities which will ensure adequate access to patient care for CGHS beneficiaries in the state.
Continuous supply of life saving medicine	Ministry has recently notified comprehensive 'Drug Procurement Policy' on 15 January 2026, to

	ensure uninterrupted availability of medicines at CGHS Wellness Centres.
Extending the services of CGHS to employees of Central Government Offices which may have closed on account of administrative restructuring	CGHS was requested to examine this request. [Action: M/o Health & Family Welfare/CGHS]
Reduction in delay in release of medical reimbursement claims	Timely settlement of medical reimbursement claims is a priority for CGHS. Claims are processed through an online system to ensure transparency, tracking, and faster disposal. In Addition, clear timelines have been prescribed for settlement of claims of treatment undertaken by pensioner beneficiaries at Private non-empanelled hospitals. The beneficiaries can track their MRCs on new MRC CGHS portal and also on myCGHS 2.0 app.
Improvement of the existing infrastructure like buildings and facilities of WCs (Chennai, Bengaluru and Nagpur)	CGHS was requested to examine this request. [Action: M/o Health & Family Welfare/CGHS]