

# COAL INDIA LIMITED RETIRED EXECUTIVES WELFARE ASSOCIATION

(Registered under West Bengal Societies Act 1961 vide no: 60903 of 2016-2017 dated 16 Sep 2016)

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To  
The Chairman,  
Coal India Limited,  
New Town,  
Kolkata-700156.

Date:07.05.2026

Sub: Meeting with CIL Retired Executives Welfare Association (CILREWA) on 30.04.2026.

Dear Sir,

We would like to convey our sincere thanks for meeting with the representatives of CILREWA in spite of your busy schedule for discussing the issues related to the retired executives of Coal India Limited and its subsidiaries on 30.04.2026. As suggested by yourself, pointwise discussion as held in the meeting is submitted for your kind consideration.

Issues discussed were as under:

**1. Enhancement of ceiling limit of Rs 25 Lakhs for treatment of OPD and Hospitalization Expenses:**

The ceiling limit of Rs 25 Lakhs for treatment of OPD and hospitalization expenses was made applicable on and from 28.12.2012. Since then, more than thirteen years have passed and all the relevant costs for treatment and medicine have increased significantly. The persons who have retired long back are drawing a very meagre amount of pension and many of them have almost exhausted the ceiling limit of Rs 25 Lakhs. Consequently, they are extremely constrained while undergoing medical treatment at this old age when the same is all the more necessary.

**Our proposal is for immediate enhancement of ceiling limit of Rs 25 Lakhs.**

**2. Non-payment of interest to CPRMSE Trust Fund for delayed transfer of fund (for the period from 01.01.2007 to 31.03.2018/29.06.2018):**

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PRESIDENT  
AMAL KR DEBNATH

VICE-PRESIDENT  
TAPAS KR SINHA

SECRETARY  
SAMIR KR DAS

JOINT-SECRETARY  
AMITAVA ROY

TREASURER  
RATNABALI SHOME

We reproduce hereunder the relevant portion of **Para 1 on 'Superannuation Benefit' as mentioned in the OM No: CIL/C-5A (vi)/005/35/1210 dated 02/07-05-2009:**

Quote :

A separate Fund/Trust will be created wherein the amount equivalent to 4% and 6.84% of basic pay & DA will be diverted towards Post Superannuation Medical Benefit and Superannuation Benefit respectively. The revised schemes for extending the benefits under these heads to the retired or retiring officers will be formulated and circulated in due course.

Unquote

However, for the reasons best known to the Management, the "Coal India Executives Superannuation Benefit Fund Trust" was created only on 14.03.2018 and the fund on account of the executives retired prior to 01.01.2007 was transferred to the Trust on 31.03.2018 and the fund on account of the executives retired after 31.12.2006 was transferred on 29.06.2018 i.e. after a prolonged gap of about 9 years.

The direction by CIL as contained in aforesaid Para 13 was not translated into action and a huge sum on that account remained merged in the coffer of CIL. Had the payment been transferred on month-to-month basis, it would have earned huge interest and enriched the fund disburseable among the beneficiaries. Non-transfer of the fund has unduly enriched CIL at the cost of benefits to the retired executives.

**Our proposal is to transfer the interest for delayed transfer of fund to CPRMSE Trust Fund.**

**3. Enhancement of Ceiling Limit of Rs 36000/- towards reimbursement of Domiciliary Expenses:**

The Ceiling limit of Rs 36000/- towards reimbursement of domiciliary expenses was made effective from 01.01.2020. More than 6 years has elapsed since the revision. Cost prices have gone up significantly.

**Our proposal is to revise the ceiling limit of Rs 36000/-.**

**4. Grant of special Ex-gratia to the senior citizens who have attained the age of 75 years and above:**

We would like to mention that this matter had been discussed on 24<sup>th</sup> January'2020 between the then Chairman and Functional Directors of CIL and the representatives of CILREWA when the Management advised CILREWA to send a proposal for consideration by the company. The proposal was submitted on 30.01.2020 and the matter was discussed on several occasions but we are yet to hear any positive outcome on this issue.

The amount of pension received by the persons who had retired earlier is much less compared to those younger to them who retired afterwards having benefitted by the subsequent pay revisions. The amount of Provident fund and gratuity received by the persons who retired earlier were also much less compared to the same received by those retiring later. As days are passing by, they are further burdened by increased amount of medical expenditure and cost of engagement of nurses / Ayas for old age disabilities. Consequently, the aged seniors are finding it extremely difficult to maintain the necessary expenses.

**Our proposal is for making immediate provision for grant of special Ex-gratia to the senior citizens who have attained the age of 75 years and above as under:**

- a. **Persons in the age group of 75 years to 80 years – Rs.1,00,000.00 annually**
  - b. **Persons in the age group of 81 years to 85 years – Rs.1,50,000.00 annually**
  - c. **Persons in the age group of 86 years and above – Rs.2,00,000.00 annually**
- 5. Confirmation of balance lying available to the Medical Card Holder against the provision of Rs. 25.0 lakh under Contributory Post Retirement Medicare Scheme for Executives (CPRMSE):**

For the last one year, the balance lying under the CPRMSE against the individual family provision of Rs. 25.0 lakhs cannot be known / viewed by the concerned retired executive. This makes one wonder as to where does he/ she stands in respect of the provision vis-à-vis the expenditure under CPRMSE. This also rules out the possibility of a further check by the concerned person to ascertain whether the amount set-off against his provision is correct i.e. against treatment received by him.

**We would as such propose that the system of indicating the balance against the provision of Rs 25.0 lakhs is reintroduced at the earliest.**

- 6. Ensuring endorsement by the Patient or it's representative in the final bill in case of hospitalisation for Cashless Treatment in empanelled hospital before making payment to the Hospital Authorities by CIL:**

So long the bills raised by the empanelled hospitals (against cashless treatment) for payment by Coal India mandatorily required counter signatures of the respective recipients of indoor medical treatment, before making payment by CIL.

It has recently been reported by some of our members that at the time of their release from the hospitals, the hospital authorities have not got the bills counter signed by the recipients of the indoor treatment stating that the same is no longer required by CIL. We have reasons to apprehend that this might cause over billing / wrong billing by the hospitals and thereby would adversely affect the interest of CIL, the Ex-employees and the operation of CPRMSE as well.

On the one hand, the payer i.e. Coal India Ltd will have to solely rely on the bills submitted by the hospitals, in absence of any proof that the services billed by the hospital had been actually received by the concerned ex-employee. On the other hand, the person receiving the treatment will not have any idea about the details included in the bill and the amount involved and will be unable to track the balance lying against the provision of Rs 25.0 lakhs.

**We would, as such. request you to kindly issue fresh orders making the counter signature of the concerned employees or his/her authorised representative mandatory on the bills submitted by the hospitals before payment by CIL.**

Thanking you,  
Yours faithfully,

(A.K. Debnath)  
President, CILREWA &  
Ex-CMD, CMPDIL

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PRESIDENT  
AMAL KR DEBNATH

VICE-PRESIDENT  
TAPAS KR SINHA

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