



2025:DHC:10041-DB



* **IN THE HIGH COURT OF DELHI AT NEW DELHI**

Reserved on: 06.10.2025
Pronounced on: 17.11.2025

+ **W.P.(C) 15255/2025 & CM APPL. No.62532/2025**

UNION OF INDIA AND ORS.

....Petitioners

Through: Mr. Sandeep Tyagi, SPC with
Mr. Sudhesh Pal Malik and Mr.
Nipun Nagpal, Advs. for UOI

versus

KAMAL KISHORE

....Respondent

Through: None.

CORAM:

HON'BLE MR. JUSTICE NAVIN CHAWLA

HON'BLE MS. JUSTICE MADHU JAIN

J U D G M E N T

MADHU JAIN, J.

1. This petition has been filed, challenging the Order dated 20.12.2024 passed by the learned Central Administrative Tribunal, Principal Bench, New Delhi (hereinafter referred to as the 'Tribunal') in O.A. No. 1643/2021, titled ***Kamal Kishore v. Union of India & Ors.***, whereby the learned Tribunal allowed the said O.A. filed by the respondent herein, with the following directions:

"11. For the foregoing reasons, the Original Application is allowed with the following directions: -



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(a) Calculation Sheet of CGHS North Zone Office regarding medical claim dated 16.4.2021(Annexure A-I) and reply of CMO, R&H,CGHS(NZ) dated 20.5.2021 to the applicant(Annexure A-I Colly) are quashed and set aside.

(b) Respondents are directed to pay the remaining amount of Rs. 2,82,111/- (Rs. Two lakh eighty-two thousand one hundred eleven only) towards pending medical claim with interest rate as applicable to GPF within 6 weeks from the date of receipt of certified copy of this order.

(c) Pending MAs, if any, stand closed.

(d) No order as to the costs.”

FACTS OF THE CASE

2. In a nutshell, the background of the case is that the respondent was initially appointed as a Junior Stenographer in the Ministry of Tourism, Government of India, and was thereafter promoted to the post of Private Secretary in the year 2000. He superannuated from the service on 28.02.2009 as a Private Secretary from the Ministry of Tourism, Transport Bhavan, New Delhi, and became a beneficiary under the Central Government Health Scheme (CGHS), bearing pension Card CGHS No. 2496229.

3. During the COVID-19 pandemic, on 11.11.2020, the respondent was admitted in an emergency situation in the U.K. Nursing Home Multi-Speciality Hospital, New Delhi, which is a CGHS non-empanelled Hospital, due to the non-availability of beds in CGHS empanelled Hospitals, for the treatment of COVID-19. He was



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discharged from the said Hospital on 10.12.2020. He was diagnosed as a case of Acute LRTI with Respiratory Distress (COVID-19 positive) and remained admitted till 10.12.2020, including several days in the Intensive Care Unit.

4. The respondent incurred a total medical expenditure amounting to Rs. 7,20,911/- (Rs. Seven Lacs Twenty Thousand Nine Hundred Eleven only), duly supported by an Emergency Certificate issued by the said Hospital, certifying the emergent nature of the hospitalization. On 12.12.2020, that is, two days after being discharged, the respondent again developed acute respiratory distress and chest pain and was admitted in an emergency condition to the Max Super Speciality Hospital, Shalimar Bagh, which is a CGHS-empanelled hospital. He remained hospitalized there till 26.12.2020.

5. As the amount spent for treatment at the U.K. Nursing Home was not reimbursed, the respondent made a representation dated 15.03.2021 to the petitioners, seeking reimbursement of the entire medical expenditure incurred at the U.K. Nursing Home. The Ministry of Health and Family Welfare, however, sanctioned only ₹4,04,300/- out of the total claim, and the balance amount was disallowed on the ground that reimbursement was admissible only at prescribed CGHS rates.

6. Subsequently, the respondent received a letter informing him that his claim had been re-evaluated and that a further amount of ₹34,500/- was allowed, while the claim for the remaining amount of



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₹2,82,111/- was rejected, reiterating that payment could not exceed CGHS-notified rates.

7. Aggrieved by the non-reimbursement of the balance amount of Rs. 2,82,111/- out of the total claim of Rs. 7,20,911/-, the respondent filed the aforementioned O.A. before the learned Tribunal.

8. The learned Tribunal, *vide* the Impugned Order, allowed the aforesaid O.A. filed by the respondent herein, with the above-quoted directions.

9. Aggrieved by the Impugned Order, the petitioners have filed the present writ petition.

SUBMISSIONS OF THE LEARNED COUNSEL FOR THE PETITIONERS

10. The learned counsel for the petitioners submits that the respondent was admitted to U.K. Nursing Home Multi-Speciality Hospital, New Delhi, which is a non-empanelled Hospital under CGHS, for the treatment of COVID-19, incurring a total expenditure of Rs. 7,20,911/-. He submits that an amount of Rs. 4,38,805/- has already been reimbursed to the respondent in accordance with the Order dated 20.06.2020 issued by the GNCTD, Health and Family Welfare Department, which had fixed the rates for COVID-19 related treatment to be charged by Private Hospitals in the NCT of Delhi, stipulating that such rates shall be “all-inclusive” as a package. The charges were all inclusive and not limited to bed, food and other



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amenities, monitoring, nursing care, doctor's visits/consultations, investigations including imaging, treatment as per national protocol for Covid care and standard care for co-morbidities, oxygen, blood transfusion etc.

11. He submits that, pursuant to the aforesaid order, the Government of India, Ministry of Health and Family Welfare, Directorate General of CGHS, *vide* O.M. dated 10.07.2020, directed that in cities where State Governments have prescribed rates for COVID-19 treatment, such rates shall be applicable for CGHS beneficiaries as well. Consequently, reimbursement to CGHS beneficiaries is restricted to the said package rates.

12. The learned counsel further submits that U.K. Nursing Home, where the respondent availed treatment, is not an empanelled CGHS hospital and, therefore, reimbursement cannot exceed the CGHS notified or GNCTD-prescribed package rates. The hospital, in blatant violation of the GNCTD Order dated 20.06.2020, charged amounts under multiple heads such as consumables, RMO charges, and other service fees, contrary to the "all-inclusive" nature of the prescribed rates.

13. He further submits that the said Hospital falls within the jurisdiction of GNCTD and, therefore, the learned Tribunal erred in not impleading the GNCTD, the Department of Health & Family Welfare and U.K. Nursing Home Multi-Speciality Hospital for proper adjudication and disposal of the O.A.



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SUBMISSIONS OF THE LEARNED COUNSEL FOR THE RESPONDENT

14. On the other hand, the learned counsel for the respondent submits that the respondent cannot be denied full reimbursement of the expenditure incurred at the U.K. Nursing Home Multi-Speciality Hospital, New Delhi, as he was admitted in an emergency situation, and the fact of such emergency has been duly recorded in the Emergency Certificate dated 11.11.2020 issued by the said Hospital.

15. He further submits that the learned Central Administrative Tribunal, New Delhi has ruled that the government employee can claim medical reimbursement beyond the prescribed limit in complicated cases of pregnancy and other medical serious procedures which can reasonably be categorized as an emergency by the treating Doctor.

16. He further submits that the case of the respondent is covered by various Judgments of the Supreme Court in *Surjit Singh v. State of Punjab & Ors.*, 1996 (2) SCC 336, *State of Punjab v. Ram Lubhaya Bagga* 1998 (4) SCC 177, *State of Punjab & Ors. v. Mohinder Singh Chawla* 1997 (2) SCC 83, wherein, it has been consistently held that the right to medical treatment and reimbursement is integral to Article 21 of the Constitution of India, and reimbursement cannot be denied on hyper-technical grounds, particularly where the treatment was taken in an emergency situation.



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17. The learned counsel for the respondent further places reliance on the Judgment of this Court in the case of ***Shri Prithvi Nath Chopra v. Union of India & Anr.*** 2004 (74) DRJ 175 and ***Milap Singh v. UOI & Anr.*** 2004 SCC OnLine Del 493, wherein it has been clearly laid down that if the petitioners have any grievance regarding the quantification of amounts or charges, it is for them to take up the issue with the concerned Hospital, and the respondent cannot be denied full reimbursement.

18. He also refers to the decision of the learned Tribunal in ***Veena Bhatia v. Chairman & Secretary, Telecom Commission Department of Telecommunication & Ors.***, T.A. No. 606/2009, wherein it was held that reimbursement beyond the prescribed limit is permissible in cases involving complicated or life-threatening medical emergencies.

19. The learned counsel submits that the case of the respondent squarely falls within the settled legal framework, and the Impugned Order of the learned Tribunal calls for no interference.

ANALYSIS AND FINDINGS

20. We have considered the submissions advanced by the learned counsels for the parties and perused the material on record.

21. The principal issue that arises for determination in the present petition is whether the respondent, a retired Government servant and CGHS beneficiary, is entitled to full reimbursement of medical expenses incurred during emergency treatment taken in a non-



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empanelled hospital, beyond the rates prescribed under the CGHS or the GNCTD notifications.

22. It is not in dispute that the respondent, a retired Government servant and CGHS beneficiary, was admitted to U.K. Nursing Home Multi-Speciality Hospital, New Delhi, a CGHS non-empanelled Hospital, due to the non-availability of beds in CGHS empanelled Hospitals for the treatment of COVID-19 and in a serious medical condition in an emergency situation, which stands duly certified by the treating doctor of the said Hospital. The total treatment cost was Rs. 7,20,911/-, out of which only Rs. 4,38,800/- has been reimbursed. The balance amount of Rs. 2,82,111/- remains unreimbursed. The petitioners have restricted reimbursement to the CGHS rates fixed under the Office Memorandum dated 10.07.2020 issued by the petitioners, and the Order dated 20.06.2020 of the GNCTD, contending that payments beyond such rates were not permissible.

23. It has been contended by the learned counsel for the petitioners that the reimbursement cannot exceed the prescribed package rates merely because the aforesaid Hospital was not empanelled under CGHS, and its charges exceeded the notified rates.

24. It is trite law that, during a medical emergency, the rigidity of rate fixation or hospitalization in a CGHS non-empanelled Hospital cannot stand in the way of full reimbursement. We make reference to the Judgments passed by the Supreme Court in *Shiv Kant Jha v. Union of India* (2018) 16 SCC 187, wherein it was held as under:



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"17. It is a settled legal position that the government employee during his lifetime or after his retirement is entitled to get the benefit of the medical facilities and no fetters can be placed on his rights. It is acceptable to common sense, that ultimate decision as to how a patient should be treated vests only with the doctor, who is well versed and expert both on academic qualification and experience gained. Very little scope is left to the patient or his relative to decide as to the manner in which the ailment should be treated. Speciality hospitals are established for treatment of specified ailments and services of doctors specialised in a discipline are availed by patients only to ensure proper, required and safe treatment. Can it be said that taking treatment in speciality hospital by itself would deprive a person to claim reimbursement solely on the ground that the said hospital is not included in the government order. The right to medical claim cannot be denied merely because the name of the hospital is not included in the government order. The real test must be the factum of treatment. Before any medical claim is honoured, the authorities are bound to ensure as to whether the claimant had actually taken treatment and the factum of treatment is supported by records duly certified by doctors/hospitals concerned. Once, it is established, the claim cannot be denied on technical grounds. Clearly, in the present case, by taking a very inhuman approach, the officials of CGHS have denied the grant of medical reimbursement in full to the petitioner forcing him to approach this Court.

18. This is hardly a satisfactory state of affairs. The relevant authorities are required to be more responsive and cannot in a mechanical manner deprive an employee of his legitimate reimbursement. The Central



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Government Health Scheme (CGHS) was propounded with a purpose of providing health facility scheme to the Central Government employees so that they are not left without medical care after retirement. It was in furtherance of the object of a welfare State, which must provide for such medical care that the scheme was brought in force. In the facts of the present case, it cannot be denied that the writ petitioner was admitted in the above said hospitals in emergency conditions. Moreover, the law does not require that prior permission has to be taken in such situation where the survival of the person is the prime consideration. The doctors did his operation and had implanted CRT-D device and have done so as one essential and timely. Though it is the claim of the respondent State that the rates were exorbitant whereas the rates charged for such facility shall be only at CGHS rates and that too after following a proper procedure given in the circulars issued on time to time by the Ministry concerned, it also cannot be denied that the petitioner was taken to hospital under emergency conditions for survival of his life which requirement was above the sanctions and treatment in empanelled hospitals.”

25. Similarly, in **Surjit Singh** (supra), **State of Punjab** (supra) and **State of Punjab v. Mohinder Singh Chawla** (supra), the Supreme Court has categorically held that the right to medical treatment is an integral part of Article 21 of the Constitution of India, and reimbursement of medical expenses cannot be denied merely on technical grounds, particularly where the treatment is taken in emergent circumstances. This principle has been consistently followed



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by this Court in ***Prithvi Nath Chopra*** (supra) and ***Milap Singh*** (supra), holding that where emergency treatment is availed at a non-empanelled hospital, the Government may seek explanation from the hospital regarding the quantum of charges but cannot deny the employee full reimbursement.

26. We further place our reliance on the Judgment of this court based on similar facts as above in ***Union of India & Anr. v. Shri Joginder Singh***, 2023 SCC OnLine Del 2707, held as under:

“13. The medical claim for treatment undertaken in emergency should not be denied for reimbursement merely because the hospital is not empanelled. The test remains whether the claimant had actually undertaken the treatment in emergent condition as advised and if the same is supported by record. Preservation of human life is of paramount importance. The State is under an obligation to ensure timely medical treatment to a person in need of such treatment and a negation of the same would be a violation of Article 21 of the Constitution of India. Administrative action should be just on test of fair play and reasonableness. Accordingly, keeping into consideration the constitutional values, the executive instructions need to be applied than rejecting the claim on technical ground of undertaking treatment in a non empanelled hospital, since the CGHS/State is responsible to ensure proper medical treatment in an emergent condition and further cannot escape the liability, if the treatment undertaken is genuine. Any denial of claim by the authorities in such cases only adds to the misery of the Government servant by further forcing him to resort to Court of law.”



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27. This Court in ***New Delhi Municipal Council v. Shakuntala Gupta*** 2025:DHC:6775-DB, based on similar facts and circumstances, held as under:

“4. We are not impressed with the above submission. The claim of the respondent cannot be denied only because some hospital allegedly has charged more than what was fixed by the Government of NCT of Delhi. Whether the hospital has overcharged the respondent, is an issue to be taken up by the petitioner/relevant authority with that hospital. As far as the Respondent is concerned, once it is not disputed that the respondent had to be admitted to the said hospital in a state of emergency, and had incurred expenses of the above amount, the same have to be reimbursed to the respondent.”

28. The same was further reiterated by this Court in ***Union of India v. Ayodhya Prasad*** 2025:DHC:8631-DB, which reads as under:

“17. The primary issue for determination is whether the respondent is entitled to reimbursement of the full medical expenses incurred during emergency COVID-19 treatment.

18. It has been contended by the learned counsel for the petitioners that the reimbursement was correctly processed as per the Railway Board circulars and the rates prescribed by Ahmedabad Municipal Corporation. Furthermore, it has been contended that the General Manager’s powers are confined to sanctioning reimbursement as per the Railway Board’s circulars.

*19. We, however, are unable to agree with these contentions. **The plea that***



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reimbursement has already been made strictly as per the rates notified by the Ahmedabad Municipal Corporation cannot be sustained in the present factual matrix. Once it is undisputed that the respondent had to undergo treatment during a medical emergency, the rigidity of rate fixation or the confined sanctioning powers of the General Manager cannot stand in the way of full reimbursement. The responsibility of regulating or recovering from the concerned hospital any overcharged amount, lies with the government. The respondent in state of emergency is neither expected to nor can fight with the hospital authorities to change amounts in accordance with the rates as may have been notified by the Municipal Authorities. If the hospital was bound by these rates and still overcharged the respondent in excess of these rates, the Municipal Authority or any other concerned authority must proceed against the hospital, however, the respondent cannot be penalised for the same.

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24. From the above, it is apparent that the respondent herein is entitled to claim the full reimbursement of the medical expenses incurred by him during emergency COVID-19 treatment at Apollo Hospital, Gandhinagar, Gujarat.

25. In view of the above facts and circumstances, we find no infirmity with the Impugned Order of the learned Tribunal. The petition is accordingly, dismissed.”

(emphasis supplied)

29. Insofar as the contention of the petitioner for impleading the GNCTD and U.K. Nursing Home Hospital is concerned, we find no necessity for their presence for effective adjudication, as the issue is



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limited to the respondent's entitlement to reimbursement pursuant to the O.M. dated 10.07.2020 issued by the Government of India, Director CGHS. In *Ayodhya Prasad* (supra), this Court held that if the petitioners believe that the said Hospital charged beyond prescribed rates, they may pursue the matter separately with the competent authorities. The respondent's reimbursement cannot be withheld on that basis.

30. In our view, therefore, the learned Tribunal, after due appreciation of the facts and the settled legal position, rightly directed the petitioners to reimburse the respondent the remaining amount of Rs.2,82,111/- along with interest as applicable to GPF.

31. The petitioners have failed to demonstrate any perversity, illegality, or jurisdictional error in the Impugned Order warranting interference by this Court in exercise of its writ jurisdiction under Articles 226 and 227 of the Constitution of India. The plea that U.K. Nursing Home is not a CGHS empanelled hospital or that charges exceeded the GNCTD-prescribed package does not absolve the petitioners of their liability where the treatment was necessitated by an undisputed medical emergency and the expenditure was actually incurred by the respondent.

32. We, therefore, find no infirmity and illegality in the Impugned Order passed by the learned Tribunal.

33. Accordingly, the Impugned Order passed by the learned Tribunal is upheld, and the petition is accordingly, dismissed.



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34. The petitioners shall release the balance amount of medical expenses to the respondent, along with interest at the rate of 6% per annum from the date of his claim, within a period of eight weeks from today.

35. The pending applications stand disposed of.

36. There shall be no order as to costs.

MADHU JAIN, J.

NAVIN CHAWLA, J.

NOVEMBER 17, 2025/k/hs