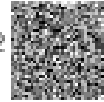


2026-PHHC-015592



205 IN THE HIGH COURT OF PUNJAB AND HARYANA
AT CHANDIGARH

CWP-27665-2018
DECIDED ON: 23.01.2026

SUDARSHAN PAL

.....PETITIONER

VERSUS

STATE OF HARYANA AND OTHERS

...RESPONDENTS

CORAM: HON'BLE MR. JUSTICE SANDEEP MOUDGIL.

Present: Mr. R.S. Sangwan, Advocate
for the petitioner(s)

Ms. Ruchi Sekhri, Addl. AG. Haryana

SANDEEP MOUDGIL, J

Prayer

1. The jurisdiction of this Court has been invoked under Articles 226/227 of the Constitution of India for issuance of Writ in the nature of mandamus directing the respondents to reimburse the medical expenses incurred by the petitioner on the treatment of his wife Smt. Bala Parmar to the tune of Rs. 2,29,915- 1,25,666 = Rs.1,04,249/- which is still pending with the respondent department for the last 10 months. Pay the remaining amount Rs. 1,04,249/- along with the interest at the rate of 9% per-annum.

Brief Facts

2. The petitioner, a regular employee working as a Mechanic with the respondent department, seeks reimbursement of medical expenses incurred on the treatment of his wife, who suffered from a serious cardiac ailment. In an

emergency situation, she was admitted to Fortis Hospital, Dehradun, where she underwent heart surgery and remained hospitalized from 30.11.2017 to 02.12.2017. The petitioner incurred total medical expenses amounting to ₹2,29,915/- and duly paid the hospital through multiple receipts. The treatment and hospitalization were supported by medical records, discharge summary, and an emergency certificate issued by the Civil Surgeon, Sirsa. The petitioner submitted the complete medical claim for reimbursement under the applicable Government policies. However, the respondent department reimbursed only ₹1,25,666/- and withheld the remaining amount of ₹1,04,249/- without assigning any justification, despite the hospital being recognized and the disease being chronic in nature.

Contentions

On behalf of petitioner

3. Learned counsel for the petitioner contends under the Punjab Services Medical Attendance Rules, 1940, as applicable to Haryana, and the Medical Reimbursement Policy of 2017, the petitioner's wife squarely falls within the definition of "family" and the treatment of chronic cardiac disease is fully reimbursable. The emergency nature of the treatment is duly certified by the competent authority, and Fortis Hospital is a recognized institution. Reliance is placed on the judgments of the Hon'ble Supreme Court in ***State of Punjab v. Ram Lubhaya 1998 VOL. 2 RSJ Page 313*** and of this Court in ***Renu Sehgal v. State of Haryana 1998 vol.4 RSJ Page 558***, wherein it has been held that denial of full medical reimbursement for chronic diseases amounts to infringement of the right to life. The unexplained delay and partial reimbursement are stated to be unsustainable in law, and the petitioner is claimed to be entitled to the balance amount along with interest on account of delayed payment.

On behalf of the respondent/State

4. Learned State counsel submits that the petitioner's wife was treated in Fortis Hospital, Dehradun, which is not an empanelled hospital under the Government of Haryana. As per applicable Government instructions, reimbursement for emergency treatment in an unapproved hospital is admissible only at PGIMER, Chandigarh rates, subject to verification of emergency and approval of the competent authority. The petitioner's claim was accordingly referred to the Civil Surgeon, Sirsa, who issued an emergency certificate.

5. It is contended that the reimbursement amount was worked out strictly in accordance with Government policies dated 06.05.2005 and 20.05.2008, and a sum of ₹1,25,666/- was duly sanctioned and paid after approval by the competent authority. There is no provision under the rules for full reimbursement of expenses incurred in an unapproved hospital.

6. Learned State counsel further argues that although the wife of the petitioner falls within the definition of "family," no valid certificate of chronic disease issued by a duly constituted medical board was submitted, as required under the relevant instructions. Hence, the petitioner is not entitled to full reimbursement on that ground.

7. Heard.

Analysis

8. The material on record establishes that the wife of the petitioner was admitted to Fortis Hospital, Dehradun in an emergent condition and underwent cardiac surgery, a fact not disputed by the respondents. The emergency nature of the treatment stands duly certified by the Civil Surgeon, Sirsa, and the hospitalization, surgery, and expenditure incurred by the petitioner are supported

by contemporaneous medical records and discharge summary. The respondents have themselves acted upon the emergency certificate and sanctioned partial reimbursement, thereby accepting both the genuineness of the treatment and the necessity thereof.

9. The objection raised by the State primarily rests on the ground that Fortis Hospital, Dehradun is not an empanelled hospital. However, once the emergency has been verified by the competent authority, denial of full reimbursement merely on the ground of treatment in an unapproved hospital cannot be sustained, particularly when the ailment is serious and life-threatening in nature. The right to medical treatment forms an integral part of the right to life under Article 21 of the Constitution, and administrative instructions cannot be applied in a manner that defeats this constitutional guarantee. Further, the issue of denial of reimbursement on the ground of non-empanelment of hospital is no longer res integra. In “*Shiva Kant Jha v. Union of India, (2018) 16 SCC 187*”, the Supreme Court held that once the factum of treatment is established, reimbursement cannot be denied on technical grounds and that the real test is whether the claimant actually underwent bona fide treatment. It was observed that,

“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 the CGHS have denied the grant of medical reimbursement in full to the petitioner forcing him to approach this Court.

15. In the present view of the matter, we are of the considered opinion that the CGHS is responsible for taking care of healthcare needs and well being of the central government employees and

pensioners. In the facts and circumstances of the case, we are of opinion that the treatment of the petitioner in non-empanelled hospital was genuine because there was no option left with him at the relevant time. We, therefore, direct the respondent-State to pay the balance amount of L 4,99,555/- to the writ petitioner”.

10. The contention of the respondents regarding the absence of a chronic disease certificate issued by a medical board also does not merit acceptance in the facts of the present case. The medical record clearly demonstrates that the petitioner’s wife underwent cardiac surgery for a serious heart ailment, which by its very nature falls within the category of chronic disease. Moreover, the respondents, having accepted the emergency certificate and reimbursed a substantial part of the claim, cannot selectively rely on technical objections to deny the remaining legitimate dues.

11. The right to medical reimbursement flows directly from the fundamental right to life guaranteed under Article 21 of the Constitution. The Supreme Court in “**State of Punjab v. Mohinder Singh Chawla, (1997) 2 SCC 83**”, wherein it was observed that

“It is now settled law that right to health is an integral to right to life. Government has constitutional obligation to provide the health facilities. If the Government servant has suffered an ailment which requires treatment at a specialised approved hospital and on reference whereat the Government servant had undergone such treatment therein, it is but the duty of the State to bear the expenditure incurred by the Government servant. Expenditure, thus, incurred requires to be reimbursed by the State to the employee. The High Court was, therefore, right in giving direction to reimburse the expenses incurred towards room rent by the respondent during his stay in the hospital as an inpatient.”

12. Also in the case of “**Paschim Banga Khet Mazdoor Samity v. State of West Bengal, (1996) 4 SCC 37**”, the apex court has held that preservation of human life is of paramount importance and the State has a constitutional obligation to provide timely medical treatment. Relevant extract of the same is as follows:

9. The Constitution envisages the establishment of a welfare state at the federal level as well as at the state level. In a welfare state the primary duty of the Government is to secure the welfare of the people. Providing adequate medical facilities for the people is an essential part of the obligations undertaken by the Government in a welfare state. The Government discharges this obligation by running hospitals and health centres which provide medical care to the persons seeking to avail those facilities. Article 21 imposes an obligation on the State to safeguard the right to life of every person. Preservation of human life is thus of paramount importance.

13. Similar view has been taken by this Court in “Om Parkash Kashyap v. State of Haryana, 2011 (2) PLR 645”, wherein it was held that medical reimbursement cannot be denied merely on procedural technicalities, particularly in cases involving chronic illness, stating that,

“6. The facility of medical reimbursement to an employee is a valuable right which the employer offers to its employees. The inhibitive interpretation of such a beneficial policy which has the effect of defeating it altogether can never be accepted.

7. A person who has been afflicted with a threateningly terminal ailment, is likely to incur the expenditure of his treatment and to say that the Fixed Medical Scheme is just sufficient for him to meet such expenses, is only defeatist in character.

14. The judgments of the Supreme Court discussed above unequivocally hold that reimbursement of medical expenses for chronic and serious ailments cannot be curtailed on hyper-technical grounds, as such denial would amount to an infringement of Article 21 of the Constitution. The action of the respondents in restricting reimbursement without assigning cogent reasons, despite the emergency and nature of the disease being undisputed, is thus arbitrary and unsustainable.

15. Moreover, the stand taken by the respondents that reimbursement at PGIMER/AIIMS rates is sufficient is unsustainable in law. Undoubtedly, PGIMER and AIIMS are premier government institutions equipped with advanced

infrastructure and medical expertise; however, they are often overburdened with critically ill patients, resulting in long waiting periods. In such circumstances, the exigencies of the situation may compel a patient or attendant to seek alternative treatment options.

16. In emergent and life-threatening situations, a patient or attendant has no real or meaningful choice to wait for admission or treatment at PGIMER, and the right to life guaranteed under Article 21 of the Constitution mandates timely and effective medical care. The petitioner was compelled by circumstances beyond his control to obtain emergency treatment from a private hospital to save the life of his wife. Consequently, denial of full reimbursement of the actual expenditure incurred amounts to penalising the petitioner for circumstances not attributable to him and defeats the very object and purpose of the medical reimbursement policy.

Conclusion

17. In light of the foregoing discussion and for the reasons recorded above, the present writ petition stands allowed. The respondents are ordered to reimburse the remaining medical bill claim of the petitioner of Rs. 1,04,249/ along with 6% interest from the date it fell due till its actual realization, within a period of 4 weeks from the receipt of a certified copy of this order.

18. The petition stands Allowed in aforesaid terms.

(SANDEEP MOUDGIL)
JUDGE

23.01.2026
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Whether speaking/reasoned : *Yes/No*
Whether reportable : *Yes/No*