

**DELHI DEVELOPMENT AUTHORITY**  
**OFFICE OF ACCOUNTS OFFICER (MEDICAL)-I**  
C-2/102-A, 1<sup>st</sup> Floor, C-Block, VIKAS SADAN  
I.N.A., NEW DELHI - 110023

No.: FI(Misc)2018/MC-V/44

Date: 05.2.2018

To

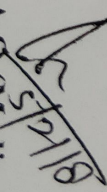
1. Primus Hospital, Chanakya Puri, New Delhi
2. B.L. Kapoor Hospital, Pusa Road, New Delhi
3. Kalra Hospital, Kirti Nagar, New Delhi
4. Kalash Hospital, Noida, U.P.

**Sub: Credit facility to DDA Medical Card Holder by CGHS empanelled hospitals (further taken on DDA panel) for annual health check.**

Find enclosed herewith DDA Circular of DDA in respect of AHC w.r.t. your consent. Your consent for AHC on credit basis has been accepted & Hospital will extend/provide service in addition to present credit facility agreement with DDA for DDA Medical beneficiaries.

**Note: Kindly note following points :-**

1. Your Hospitals shall conduct all investigation/diagnostic tests/consultation etc. of the DDA Group "A" officer of above 40 years of age, subject to the condition that the hospital shall not charge more than Rs.2000/- for conducting the prescribed medical examination of the male officers and Rs.2200/- for female officers of DDA who come to the hospital/institution.
2. Original Identity Card will be checked & it is to be ensured that
  - a) Officer is Group "A". No other category allowed for this service.
  - b) Facility is not to be extended to pensioner/family pensioner/Group "B", Group "C" or Group "D" working staff.
3. Bill will be raised in Credit Monthly bill.
4. Copies of
  - a) Identity Card
  - b) Medical Card
  - c) Summarised cover note/report of AHC conducted to be attached with Monthly bill.

  
A.O.(Medical)-I

**Encl:- As above**

**Copy to:-**

1. CAO for kind information please.
2. Advisor(Medical).
3. Dy.CAO(Medical).
4. Sr.A.O.(Medical)-II.
5. AAO(Medical)-I.

A.O.(Medical)-I