



EMPLOYEES' STATE INSURANCE CORPORATION  
PANCHDEEP BHAWAN: C. I. G. ROAD: NEW DELHI-110 002

No.R-12/19/4/95- Bft.II

Dated: 25/06/2010

To

The SSMCs/SMCs/Medical Superintendents of ESIC Hospitals  
All Regional Directors/Directors/Joint Directors (I/c)  
ESI Corporation  
Regional Office/Sub-Regional Office/Divisional Office

**Sub:- Enhancement of fees payable to the Chairman and Member of the Medical Board/Peripatetic Medical Board/Special Medical Board**

Sir

The existing rates of fees payable to the Chairman and Member of a Medical Board, Peripatetic Medical Board and Special Medical Board were last revised through letter No. R-12/19/4/95-Bft.II dated 29.12.08.

The Notification for co-opting the specialist in Medical Board from Pvt. Sector, if required for deciding the cases of PDB/DB/OD has already been conveyed vide this office letter no. R-12/19/1/2001-Bft-II dated 28.05.10.

To curb the delay in deciding the above cases, it has been decided that Medical Board/Peripatetic Medical Board shall be held once in a month, if the No. of cases is less than 10 and otherwise it may be convened as and when 10 and more cases have been received. Special Medical Board will be held as per requirement.

The revised fee structure for the Official/Non-Official Board Members and Chairman will be as under;

Types of Board	Non-official members	Official members	Chairman
Medical Board	Rs. 300/- per case Minimum- Rs.3000/- per sitting	Rs.100/- per case Minimum Rs.1000/- per sitting	Rs.150/- per case Minimum Rs.1500/- per sitting
Peripatetic Medical Board	Rs. 300/- per case Minimum- Rs.3000/- per sitting	Rs.100/- per case Minimum Rs.1000/- per sitting	Rs.150/- per case Minimum Rs.1500/- per sitting
Spl. Medical Board	Rs. 1000/- per case Minimum- Rs.4000/- per sitting	Rs.300/- per case Minimum Rs.2000/- per sitting	Rs.500/- per case Minimum Rs.3000/- per sitting

The above revised rates will be effective from **01.07.10**. Cases upto **30.06.10** will be governed by the earlier instruction quoted above.

Kindly acknowledge the receipt.

Hindi version will follow

  
**(B.D.Sharma)**  
**Director (Benefit)**

Copy to:-

1. All Officers of Hqrs. Office.
2. Joint Director I/c,/DD(Fin.) of Field Offices – for information and necessary action.
3. All Branches at Hqrs. Offices.
4. Joint Director (Office Language) for Hindi translation please.
- ✓ 5. Joint Director (System) to upload the same on website please.
5. Guard file.

  
**Asstt. Director (Benefit)**