

SEMI-CONDUCTOR LABORATORY

S.A.S. NAGAR

I N D E X

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Semi-Conductor Laboratory

S.A.S. Nagar

Application form for Empanelment of Specialist Doctors in

Mohali/Chandigarh/ Panchkula

1. Introduction

Semi-Conductor Laboratory (SCL) is an autonomous body under the Ministry of Electronics & Information Technology (MeitY) located in Sector 72, S.A.S. Nagar, (Mohali), has 813 employees and pensioners (Prime beneficiaries). The total number of beneficiaries (employees/pensioners and their dependant family members) is approx 2100. SCL has its 'SCL Contributory Health Scheme' (SCHS) under which medical attendance and treatment is provided to the contributing employees and their dependent family members through empanelled Authorized Medical Officers (AMOs), Specialist Doctors, Multi-Specialty Hospitals, Diagnostic Centers and Pathological Laboratories. SCL also has its dispensary within its campus with a Medical Officer who attends to patients and makes referrals to specialists on need basis. The scheme is available in the Tri-City of Mohali/Chandigarh/Panchkula. All the beneficiaries are issued SCHS cards for identification. The first level/initial treatment is provided by the AMOs and for specialized treatment, the AMOs refers the patient to empanelled Specialist Doctors.

2. Scope of Work

A panel of specialists for the treatment of various diseases, ailments and surgical operations is in place. Consultation with these specialists will be obtained only on referral by the Authorized Medical Officers.

Consultation with Panel Specialists (both initial and follow-up) should be through the AMO/Medical Officer only. However, beneficiaries can have consultation/treatment directly from the empanelled Dental Specialist, and no referral from the AMOs/Medical Officer is required for such consultation/treatment. Panel Specialist is required to report their finding and the requirement of subsequent consultation to the referring AMO/ Medical Officer.

3. **Eligibility**

Specialist Doctors shall possess atleast Post Graduate Degree (MD/MS/DNB) from a recognized University with minimum 5 years post qualification experience. Specialist Doctors shall be registered with Medical Council of India (MCI) and/or State Medical Council. An Orthopedic Doctor should preferably have in house X-ray facility along with facility to undertake procedures required at first level of treatment. The reimbursement for such procedures shall be restricted to Scheduled of Rates (SOR). Maximum prescribed age for a specialist doctor is 75 years. Empanelment of a specialist doctor shall be valid for 5 years from date of empanelment. Empanelment shall be based on evaluation of multiple parameters as decided by the competent authority.

4. **Cashless Services**

Specialist Doctors shall provide cashless services to the SCL beneficiaries on referral (in prescribed referral form) by the Medical officer/Authorized Medical Officers (AMOs), empanelled under SCHS. SCL shall directly pay to the Specialist Doctors for the medical attendance/treatment availed by the beneficiaries.

5. Consultation Fee

Specialist Doctors shall be paid agreed/accepted fee per consultation (valid for 7 days) as consultation charges and for follow-up consultation (valid for 7 days). The payment shall be made by SCL on monthly basis against bills submitted by the concerned specialist. An empanelment of super-specialist if undertaken shall be reimbursed at the rates of specialist only. In case of Dental Surgeons, only one consultation charge shall be allowed, while the reimbursement for procedures undertaken shall be restricted to Scheduled of Rates (SOR).

Consultation charges payable to Specialists currently applicable as follows:

Out Patient Consultation	Consultation Fees	Validity
Specialists	Rs. 400/-	Valid for 7 days
Dental surgeons	Rs.150/-	Only one consultation charge allowed

6. Specialization Areas

Specialist Doctors are required in the following areas.

Specialization	Requirement in Mohali	Requirement in Chandigarh	Requirement in Panchkula
Pediatric	2	1	1
Orthopedic	2	1	1
Gynecology	1	1	1
ENT	1	1	1
Dermatology	1	1	1
Neurology	1	1	1
Medicine	3	1	1
Dental	4	2	1
Ophthalmology	1	1	1

General Guidelines to Applicants

- Do not change the format of the Application and nomenclature etc. Use remarks column for any other information.
- As part of the evaluation exercise, SCL may at its discretion can visit the premises of Specialist Doctors for an on-spot assessment.
- Photo copy of PAN Card to be attached to the Application.

- Latest Photograph of the Specialist Doctor to be affixed to the Application.
- SCL reserves the right to reject or accept any and/or all the Applications without assigning any reason.
- Specialist Doctors shall be provided SCL stationery (Medical Prescription pads/referral forms etc.) for use of the employees/beneficiaries.

7. **Monitoring & Medical Audit**

SCL reserves the right to visit the Specialists Doctors at any time to verify compliance to the SCHS requirements. Specialists Doctors found indulging in any corrupt, fraudulent or unethical practice shall be removed from the empanelment and disqualified for future empanelment under SCHS.

8. **Application Submission Date**

The last date for receipt of applications at SCL is **30 days from the date of advertisement**. Application is to be sent to Head, P&GA, Semi-Conductor Laboratory, Sector 72, S.A.S. Nagar in a sealed envelope superscripted '**Application for Empanelment of Specialist Doctor**' or email at schs_admin@scl.gov.in.

9. **Relaxation**

Director General, SCL has full powers to relax any of the eligibility conditions, alter the requirement of Specialist area wise or overall or modify any of the working conditions. Decision of Director General, SCL shall be final.

**Semi-Conductor Laboratory
S.A.S. Nagar**

Photo of
Specialist
(Self Attested)

APPLICATION FORM FOR SPECIALIST DOCTOR

1.	Name of Doctor	
2.	Date of Birth	
3.	Address with Telephone/ Fax/ E-mail/Website	
4.	Qualifications (attach testimonials) Area of Specialization	
5.	Date of Establishment.	
6.	Registered with MCI or State Medical Council, attach self-attested copy	
7.	Whether Private/Corporate	
8.	Experience	
9.	Details of other Empanelment	

10.	Whether Empanelled with SCL CHSS Scheme	
11	Fees being Charged from General Public	
12.	Clinic Timings	
13.	Capacity of waiting Area for Patients	
14.	Other facilities/information, if any.	

I hereby confirm and declare that all the information given above is correct, any discrepancy found at later stage holds me liable for disqualification. I have never been debarred/penalized by MCI/DCI / State council.

Signature of Doctor

Name:

Date:

Stamp