

**HIGH COURT OF TRIPURA
AGARTALA**

W.P.(C) No.435 of 2025

Sri Sanjib Das,
Son of Nirmal Kumar Das,
Resident of Resham Bagan, Khayerpur,
West Tripura, PIN:799 008

-----Petitioner (s)

Versus

- 01. Tripura State Electricity Corporation Ltd (TSECL),**
To be represented by the Managing Director,
Banamalipur, Agartala, Tripura
- 02. The Chairman, Tripura State Electricity
Corporation Ltd. (TSECL),**
Banamalipur, Agartala, Tripura
- 03. The Deputy General Manager,**
Transmission Division, 79 Tilla,
Agartala, Tripura (West)
- 04. The Deputy General Manager (Corporate),**
Corporate Office, TSECL, Banamalipur, Agartala
- 05. The Addl. General Manager,**
Transmission Circle, TSECL, Agartala
- 06. The DGM (Corporate & HR),**
TSECL, Bidyuit Bhavan, North Banamalipur,
Agartala, West Tripura
- 07. The Sr. Manager, 132 KV Sub-Station,**
Bodhjungnagar, Tripura
- 08. The Addl. General Manager, Transmission Circle,**
Tripura Power Transmission Limited, Agartala
- 09. The State of Tripura,**
To be represented by the Secretary,
Finance Department, Government of Tripura,
New Secretariat Building, New Capital Complex,
Kunjaban, Agartala, West Tripura, PIN:799 010
- 10. The Director of Health Services,**
Government of Tripura, New Capital Complex,
Kunjaban, Agartala, West Tripura,
PIN:799 010
- 11. The Principal/Chairman,**
Standing Medical Board,
Agartala Government Medical College & GBP Hospital,
Agartala

----- Respondents (s)

For Petitioner(s) : Mr. Purusuttam Roy Barman, Sr. Adv.
Ms. Sutapa Deb Barman, Adv.

For Respondent(s) : Mr. Bibhal Nandi Majumder, Sr. Adv.
Mr. Dhrubajyoti Saha, Adv.
Mr. Dipankar Sarma, Addl. G.A

Date of Hearing : 16.02.2026

Date of delivery of
Judgment and Order : 23.02.2026

Whether fit for
Reporting :YES

HON'BLE MR. JUSTICE BISWAJIT PALIT

Judgment & Order

Heard Learned Senior Counsel Mr. P. Roy Barman assisted by Ms. S. Deb Barman, Learned Counsel appearing for the petitioner and also heard Learned Senior Counsel Mr. B. N. Majumder assisted by Mr. D. J. Saha, Learned Counsel appearing for the respondents No.1-8. Further heard Learned Addl. G.A. Mr. D. Sarma appearing on behalf of the respondents No.9 and 10 but in spite of service of notice none appeared for the respondent No.11 i.e. the Chairman of the Standing Medical Board, AGMC and GBP Hospital, Agartala.

02. The petitioner has filed this petition seeking the following reliefs:

(i) Issue Rule upon the Respondents to show cause as to why a writ in the nature of Mandamus and/or order/orders and/or direction/directions of like nature shall not be issued whereby quashing and cancelling the letter, dated 02.01.2025, issued by the Principal/Chairman, Standing Medical Board, AGMC & GBP Hospital, regretting the issuance of Ex-post facto Certificate in favour of the Petitioner.

(ii) Issue Rule upon the Respondents to show cause as to why a writ in the nature of Mandamus and/or order/orders and/or direction/directions of like nature

shall not be issued whereby directing the Respondents to give the benefit of Medical reimbursement to the Petitioner in connection with the expenditure of his treatment.

(iii) Issue Rule upon the Respondents to show cause as to why a writ in the nature of Mandamus and/or order/orders and/or direction/directions of like nature shall not be issue whereby directing the Respondents to accord sanction to the Medical reimbursement Bill, submitted by the Petitioner on 10.04.2023 before the Chairman-cum-Managing Director, TSECL amounting to Rs.3,45,505/- in total, for reimbursing the expenditure incurred by the Petitioner for his treatment outside the State.

(iv) Make the rules absolute.

(v) Call for records.

(vi) Pass any further Order/Orders as this Hon'ble High Court considered fit and proper.

03. Learned Senior Counsel at the time of hearing drawn the attention of the Court that the petitioner on the ground of assisting one of his relative for treatment at Kolkata prayed for leave along with station leave permission on medical ground and accordingly vide office order dated 10.03.2023 (Annexure-2) his prayer was allowed by the authority. According to the petitioner he went to Kolkata along with his relative but on arrival therein suddenly he had fallen ill and experienced severe chest pain and immediately he rushed to Rabindranath Tagore International Institute of Cardiac Sciences, Mukundapur. He was residing within the complex of R.N. Tagore Hospital and on 11.01.2023 the petitioner was admitted to R.N. Tagore Hospital under the advice of Dr. Ayan Kar when he was advised to undergo Coronary Angiography and accordingly the petitioner underwent Coronary Angiogram as the petitioner was diagnosed with coronery artery blockage, hyper tension and metabolic syndrome and he was further

advised not to move without proper treatment otherwise it will be very risky for his life. From the discharge summary dated 15.01.2023 it will be clear that the petitioner was admitted with exertional chest discomfort and he was diagnosed with double vessel coronary artery disease, hypertension, metabolic syndrome and he underwent angiography on 11.01.2023 and after coronary angiography the petitioner undergone PTCA with stenting to LAD on 13.01.2023 at R.N. Tagore, Hospital, Mukundapur and in this regard he relied upon discharge summary (Annexure-3) issued by the Hospital Authority. Since the petitioner is entitled to the medical reimbursement so by a letter dated 10.04.2023 he submitted two MR bills for an amount of Rs.2,05,857/- and Rs.1,39,648/- to the respondent No.5 in Form No.49 which was duly certified by the authority. Thereafter, the Addl. General Manager, Transmission Circle, TSECL by a letter dated 06.05.2023 forwarded the same to the Deputy General Manager (Corporation) (Annexure-4). After that the DGM by a letter dated 22.08.2023 informed the Addl. General Manager to ask the petitioner to re-submit the bill along with referral certificate from the Chairman, Standing Medical Board (Annexure-5). Thereafter the Deputy General Manager, Transmission Division by a letter dated 01.09.2023 returned the 2 nos. medical reimbursement bill with a request to re-submit the bill with referral certificate from the Chairman, Standing Medical

Board to the Sr. Manager (Annexure-6). After that the petitioner by a representation dated 06.09.2023 (Annexure-7) resubmitted the two nos. medical bill to the Deputy General Manager, Transmission Division, 79 Tilla, Agartala. In the said representation it has been stated by the petitioner that on 10.01.2023 he had to leave for Kolkata along with one of his relative but on arrival therein suddenly he became ill with serious chest discomfort and ultimately he had to rush for Rabindranath Tagore International Institute of Cardiac Sciences, Mukundapur wherein the Doctor after his diagnosis advised him that he was suffering from coronery artery blockage and after that he had to undergo treatment but there was no scope on his part for obtain referral certificate from the standing medical board.

04. After that the Senior Manager, 132 KV Sub-Station Bodhjunnagar by a letter dated 06.09.2023 forwarded the re-submitted medical re-imburement bills of the petitioner with explanation to the DGM, Transmission Division, 79 Tilla, Agartala (Annexure-8) and after that by another letter dated 29.09.2023 the Addl. General Manager, Transmission Circle forwarded the DGM two nos. of medical re-imburement bills (Annexure-9). Thereafter DGM (Corporate & HR) by a letter dated 01.11.2023 requested the Director, Health Department regarding admissibility of medical re-imburement bills (Annexure-10) and after that the Director of Health Services by a letter dated 04.12.2023

informed Dy. General Manager (Corporate & HR) that the referral certificates from the Standing Medical Board was not found and it was advised that Sanjib Das i.e. the petitioner should apply his medical re-imburement claim through a new medical bill form instead of old medical bill Form No.49 (Annexure-11) which was returned back to the Deputy General Manager by DGM (Corporate & HR) by a letter dated 10.07.2024 (Annexure-12) for informing Sanjib Das to submit the medical re-imburement claim in new medical bill form. After that DGM, Transmission Division, 79 Tilla, Agartala informed Senior Manager, 132 KV, Bodhjunnagar Sub-Station by a letter dated 20.08.2024 (Annexure-13) that due to non-availability of referral certificate the same was not considered. Thereafter, Senior Manager, again re-submitted two nos. medical bills of the petitioner by a communication dated 05.10.2024 (Annexure-14) to the DGM, Transmission Division, Agartala which was further forwarded by Deputy General Manager, Transmission Division to the Addl. General Manager, Transmission Circle, TPTL and Addl. General Manager thereafter forwarded the same again to the Deputy General Manager (Corporate) Corporate Office by another communication dated 08.10.2024 (Annexure-16). After that on 04.12.2024 forwarded the medical bills to the Chairman, Standing Medical Board (Annexure-17) to consider the post-facto referral of the petitioner and accordingly the Standing

Medical Board by a communication dated 02.01.2025 (Annexure-18) informed the petitioner that his case could not be considered as because the same treatment was available at Agartala. As the grievance of the petitioner was not addressed so the petitioner filed this writ petition.

05. The TSECL has filed the counter-affidavit denying the claim of the petitioner but they have admitted the fact of the petitioner and submitted that in view of the memorandum dated 22.12.2022 (Annexure-23) the petitioner was not entitled to the benefit and also the claim of the petitioner was not supported by any referral certificate. The State-respondents also filed counter-affidavit. In para Nos.9 and 10 of the counter-affidavit they have submitted as under:

"9. That, in regards to the statement made in paragraph-3 to 11 of the writ Petition, it is stated that the averments are matter of records which is required to be substantiated by the writ petitioner by adducing necessary documentary evidences in support of his claim. Anything contrary to records is denied and disputed.

10. That, in regard to the statement made in paragraph No.12 to 36 of the writ petition it is stated that after thorough examination and verification of the documents submitted, the Director of Health Services, Government of Tripura informed the Dy. General Manager (Corporation & HR), Tripura State Electricity Corporation Limited (A Government of Tripura Enterprise) Bidyut Bhavan, North Banamalipur. Agartala West Tripura through Letter dated-04-12-2023 that the referral certificate from the Standing Medical Board, AGMC & GBP Hospital, Agartala, which is a prerequisite as per our department's guidelines for the reimbursement of medical expenses, could not be found among the documents received.

To proceed with the verification & potential approval of the medical reimbursement in question, Referral Certificate from the Standing Medical Board, AGMC & GBP Hospital, Agartala is required and also requested to Resubmit the Complete Set of Documents, including the aforementioned referral certificate, to this office. Upon receiving the complete documentation, department will expedite the verification process & communicate decision regarding the admissibility of the medical reimbursement

to TSECL at the earliest. Further the medical reimbursement claim was submitted on the old Medical Bill Form No-49. As per updated policies and directives, all new claims must be filed using the revised Medical Bill Form. So as per assessment, answering respondents returned the original medical reimbursement bill and related papers to facilitate the petitioner resubmission in accordance with the updated guidelines.

It is further submitted that the petitioner explicitly admitted in para 19 of the writ petition the requirement to adhere to the aforementioned procedural update. This admission aligns with department's stance on the matter. The explicit admission in Para 19 of the Writ Petition regarding the necessity to comply with the procedural update (i.e., using the new medical bill form), and in accordance with department's policy for processing claims, the Department of Health Services (DHS) is deemed not liable for any delays or consequences arising from the initial submission on the obsolete form."

By filing the counter-affidavit the State-respondents prayed for dismissal of the writ petition.

06. At the time of hearing Learned Senior Counsel for the petitioner in support of his contention referred all the annexed documents and submitted that this High Court in WP(C)No.1479 of 2017 dated 04.05.2018 and also in another case this High Court in WP(C)No.1154 of 2019 dated 18.02.2020 similarly allowed such petition in absence of reference of Medical Board. Learned Senior Counsel also relied upon another citation of the Hon'ble Apex Court in **Shiva Kant Jha vs. Union of India** reported in **(2018)16 SCC 187** wherein in para No.17 Hon'ble the Apex Court observed as under:

"17. It is a settled legal position that the government employee during his life time 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 specialized 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 the CGHS have denied the grant of medical reimbursement in full to the petitioner forcing him to approach this Court.”

Referring the same Learned Senior Counsel submitted that since the factum of treatment is proved and the respondents also did not deny the said fact. So there is no reason to deny the claim of the petitioner by the respondents-authority. He further submitted that the claim of the petitioner is also supported by Hon'ble Apex Court in **Surjit Singh vs. State of Punjab and Others** reported in **(1996) 2 SCC 336**. Finally Learned Senior Counsel submitted that since the claim of the petitioner is genuine and the petitioner had no other alternative to undergo treatment at Kolkata which is one of the referral hospital so the claim of the petitioner be considered by the respondents-authority and prayed for allowing this writ petition.

07. On the other hand, Learned Senior Counsel Mr. B. N. Majumder appearing for TSECL submitted that the fact of the treatment is not disputed but in absence of any approval of the Standing Medical Board it was not possible on the part of the respondent-corporation to consider the

medical re-imburement bill submitted by the petitioner. He also drawn the attention of the Court referring Annexure-23 i.e. memo dated 22.12.2022 and also the communication which the DGM (Corporate & HR) wrote a letter to the Chairman, Standing Medical Board dated 04.12.2024. Referring the same Learned Senior Counsel submitted that in view of the embargo there is no scope to consider the medical re-imburement bill submitted by the petitioner.

08. Learned Addl. G.A. Mr. D. Sarma submitted that since without any referral from Standing Medical Board the present petitioner availed the benefit as such he is not entitled to get any benefit in this case and also relied upon one citation of the Hon'ble Supreme Court of India in **State of Punjab and Others vs. Ram Lubhaya Bagga and Others** reported in **(1998) 4 SCC 117** wherein in para Nos. 27 and 28 Hon'ble the Apex Court observed as under:

"27. Coming back to test the claim of respondents, the State can neither urge nor say that it has no obligation to provide medical facility. If that were so it would be ex facie violative of Article 21. Under the new policy, medical facility continues to be given and now an employee is given free choice to get treatment in any private hospital in India but the amount of payment towards reimbursement is regulated. Without fixing any specific rate, the new policy refers to the obligation of paying at the rate fixed by the Director. The words are:

" to the level of expenditure as per the rate fixed by the Director, Health and Family Welfare, Punjab for a similar treatment package or actual expenditure whichever is less."

28. The new policy does not leave this fixation to the sweet will of the Director but it is to be done by a Committee of technical experts.

"The rate for a particular treatment would be included in the advice issued by the District/State Medical Board. A Committee of technical experts shall be constituted by the Director, Health and

Family Welfare, Punjab to finalize the rates of various treatment packages....."

Referring the same Learned Addl. G.A. submitted that in view of the judgment of the Hon'ble Apex Court the present petitioner is not entitled to any benefit in this case.

09. I have heard the counsels of the parties and perused the writ petition and the documents annexed with the petition. Admittedly the petitioner of this case after availing commuted leave on medical ground proceeded for Kolkata on 10.01.2023 which was approved by the authority and on arrival therein all on a sudden he developed some chest pain which compelled him to undergo treatment at Rabindranath Tagore Hospital where the petitioner had to undergo Angiogram as he was suffering from Coronary Artery Blockage and for that he had incurred medical expenses and after returning back he submitted medical bill to the department which was not considered on the ground that that was not approved by the Standing Medical Board and although the matter was taken up with the Standing Medical Board for ex-post facto approval but that was also turned down on the ground that the similar treatment is/was available at GBP Hospital, Agartala. It is also the admitted position that Rabindra Nath Tagore Hospital is one of the empanelled referral hospital approved by the State of Tripura.

10. The petitioner in the writ petition submitted all the relevant papers regarding his treatment at Rabindranath Tagore Hospital, Kolkata. From the certificate issued by

Rabindranath Tagore Hospital it appears that the following observation was made by the hospital authority:

“Course in Hospital

Mr. Sanjib Das, 52 year old hypertensive, nondiabetic, obese gentleman was admitted with exertional chest discomfort and positive TMT. ECG showed NSR. Echocardiography revealed good LV systolic function with EF 66%. Coronary angiography done on 11/1/2023 revealed double vessel coronary artery disease. PTCA with stenting to LAD was done on 13/1/2023. PTCA with stenting to RCA was attempted but wire could not be passed. Post procedural period was uneventful. He is now being discharged in a stable condition.”

11. I have also perused the memo dated 22.12.2022 issued by the Health Department wherein it is mentioned that the Group-A and Group-B employees of the State Government and their family members may avail treatment in any enlisted referral hospital inside/outside the State approved by the State Government without referral of the Standing Medical Board subject to condition that ex-post facto approval shall be given only in case of emergency or acute illness arising while the Govt. Servant is staying outside the State with station leave permission. In such a case certificate from the treating hospital be obtained and if any treatment is undertaken re-imburement would be at per CGHS rate. From the aforesaid clause of memorandum dated 22.12.2022 it appears that in the said memorandum it was decided by the Government that ex-post facto approval should be obtained. Here in the case at hand the petitioner after returning back prayed for ex-post facto approval but that was dishonored on the ground that such

treatment was available at Agartala. This High Court in WP(C)No.1479 of 2017 in para Nos. 7, 16, 17, 19, 20, 21 and 22 observed as under:

“[7] Counsel for the petitioner submits that in terms of the guidelines laid down by the State Govt., for admissibility of medical expenses to the State Govt. officials for treatment outside the State although has to be referred by the Standing Medical Board to the prescribed medical institutions as indicated in para-A ordinarily has to seek permission for taking treatment to be referred by the Standing Medical Board but is not always possible in the course of urgency like that in the case of the petitioner, he had a stroke during office hours on 15th February, 2017, initially went to take medical assistance in the Agartala Govt. Medical College & GBP Hospital but nothing revealed and as he was still feeling uncomfortable, proceeded to Fortis Hospital, Kolkata on 20th February, 2017 and consulted all Neuro Surgeons and there he found that he had been attacked with stroke twice but unable to find out any reason of his disorder in his body.

[16] It is also equally true that no State can have unlimited resources to spend on any of its project and that is why the only approves its projects to the extent it is feasible and same holds good for providing medical facilities to its citizen including its employees and expenses of medical assistance cannot be unlimited. It has to be to the extent finance permit. This has been extensively examined by the Apex Court in the case of the medical reimbursement taking note of the precedents as to what extent medical expenses are reimbursable keeping in view the circular/guidelines/rules of the State Govt. for reimbursement of the medical expenses. The Apex Court in State Of Karnataka and Another v. Sri R. Vivekananda Swamy, reported (2008) 5 SCC 328 has observed that if an employee obtains treatment from a hospital of his choice can be made limited and his entitlement will remain within the parameters of the medical scheme introduced by the Govt. for reimbursement of the medical expenses.

[17] Based on the principles laid down by the Apex Court of which reference has been made one of the coordinate Bench in WP(C) No. 228 of 2013 [Sri Ajit Kumar Paul v. The State of Tripura & Others, dt. 01.07.2016] has observed that if the cardiac facilities are not available in the Govt. Hospitals nor in Govt. Medical College in the State, obviously the patient has to proceed for specialized treatments to avail medical facilities from the approved/private hospitals outside the State and in such exigencies if the patient has to wait and to first take the recommendation from the Standing Medical Board is impracticable and to the extent

the employee take treatment from a approved/private hospital outside the State of Tripura, it is indeed reimbursable.

"15. Admittedly, neither in the Govt. hospital nor in Govt. medical college, treatment of cardiac problems is available though at present there is a private hospital where the cardiac treatment is available and for that also, a patient has to wait when a specialist comes from outside. Reference Page 9 of 14 by the standing Medical Board to a referral hospital itself cannot be a ground for not granting medical reimbursement to him, rather the Govt. should see whether the employee (patient) took treatment outside the State which is not available in the State of Tripura. In WP(C) 228 of 2013 Page 9 of 9 such a situation, the Govt. should not deny the medical reimbursement of its employees merely on the technical ground. This Court is of the further opinion that the claim of the petitioner is a genuine one as he is entitled to medical reimbursement and admittedly RTIICS, Kolkata is a referral hospital of the Government of Tripura.

[19] Although, the hospital from where the petitioner has taken treatment i.e. Apollo Speciality Hospital, Chennai is an approved hospital by the Govt. but that facility is available to Tripura Health Assurance Scheme for Poor as revealed from the notification dt. 19th October 2015 (Annexure-4) and such facilities are not extended to Group-B officers of the State of Tripura for which he has to seek permission from the Standing Medical Board and that can be ex-post-facto permission to regularize the medical treatment & expenses incurred for reimbursement.

[20] It is true that if a reference would have been obtained by Standing Medical Board constituted by the Govt. seeking permission ordinarily was advisable for the employee to attempt but the medical treatments which are not available in the State of Tripura and sometime the procedure laid down to first take permission from the State Medical Board and only thereafter to proceed for taking treatment from approved hospital or the hospital of his own choice, may not be possible and appears to be onerous and not workable specially in the emergency cases and in such exigencies, if condition of taking first referral from the Standing Medical Board for taking treatment from the approved hospital/private hospital under the notification dt. 25th October 2013 where time is an essence and not possible for the patient even to wait for an hour or for a day, still in the procedure as prescribed by the Govt. under its notification dt. 25th October 2013 has to be mandatorily followed there is full possibility that the family may lose the patient and it goes without saying that prompt and better medical treatment is of utmost priority not only for a citizen but of the State and his authorities.

[21] In my considered view, the precondition of seeking referral from the Standing Medical Board before to proceed in availing medical treatment from the approved hospital/private hospital outside the State if any, under the notification dt. 25th October 2013 is directory in character subject to fulfillment of the conditions prescribed in availing reimbursement of medical expenses under the Govt. notification dt. 25th October 2013, where a patient has taken treatment from an approved hospital or the hospital of his choice (Other than the approved hospital) is entitled for reimbursement of medical expenses incurred to the extent of such medical expenses if incurred in taking treatment from the approved hospital or from a private hospital where he has taken treatment whichever is lower taking note of the restrictions imposed by the Govt. under its notification dt. 25th October 2013 extending financial assistance to its employees for availing medical facilities, which is a social obligation of the State.

[22] In the instant case, looking to the kind of ailment which the petitioner and his wife were suffering this Court can take a judicial notice that such medical facilities are not available in the State of Tripura and there was no option left except to take treatment either from the hospital which is approved by the Govt. under its notification dt. 25th October 2013 or from a private medical hospital of own choice, but he would be entitled for reimbursement of the medical expenses incurred which is admissible under the approved medical hospital or from a private hospital from where he has taken treatment whichever is lower under notification dt. 25th October 2013 and in the given circumstances, the decision of the Govt. holding that the medical expenses incurred by the petitioner is not admissible for reimbursement because of not being referred by the Standing Medical Board under its communication dt. 17th August, 2017 (Annexure-3) is not sustainable in law and needs to be set aside."

12. Similarly another Co-ordinate Bench of this Court in WP(C)No.830 of 2019 dated 05.12.2029 in the relevant portion observed as under:

"The Supreme Court in case of Surjit Singh vs. State of Punjab and others reported in (1996) 2 SCC 336 had in somewhat similar circumstances made following observations:

"11. It is otherwise important to bear in mind that self preservation of one's life is the necessary concomitant of the right to life enshrined in Article 21 of the constitution of India, fundamental in nature, sacred, precious and inviolable. The importance and validity of the duty and right to self-

preservation has a species in the right of self defence in criminal law. Centuries ago thinkers of this Great Land conceived of such right and recognised it. Attention can usefully be drawn to verses 17 18, 20, and 22 in Chapter 16 of the Garuda Purana (A Dialogue suggested between the Divine and Garuda, the bird) in the words of the Divine:

17 Vinaa dehena kasyaapi canpurushartho
na vidyate Tasmaaddeham dhanam
rakshetpunyakar maani saadhayet

Without the body how can one obtain the objects of human life? Therefore protecting the body which is the wealth, one should perform the deeds of merit.

18 Rakshayetsarvadaatmaanamaatmaa
sarvasya bhaajanam Rakshane
yatnamaatishthejje vanbhaadraani pashyati

One should protect his body which is responsible for everything. He who protects himself by all efforts, will see many auspicious occasions in life.

20 Sharirarakshanopaayaah Kriyante
sarvadaa budhaih Necchanti cha
punastyaagamapi kushthaadiroginah

The wise always undertake the protective measures for the body. Even the persons suffering from leprosy and other diseases do not wish to get rid of the body.

22 Aatmaiva yadi naatmaanama hitebhyo
nivaarayet Konsyo hitakarastasmaa-
daatmaanam taarayishyati

If one does not prevent what is unpleasant to himself, who else will do it? Therefore one should do what is good to himself.

12. The appellant therefore had the right to take steps in self preservation. He did not have to stand in queue before the Medical Board, the manning and assembling of which, barefacedly, makes its meetings difficult to happen. The appellant also did not have to stand in queue in the government hospital of AIIMS and could go elsewhere to an alternative hospital as per policy. When the State itself has brought Escorts on the recognised list, it is futile for it to contend that the appellant could in no event have gone to Escorts and his claim cannot on that basis be allowed, on suppositions. We think to the contrary. In the facts and circumstances, had the appellant remained in India, he could have gone to Escorts like many others did, to save his life. But instead he has done that in London incurring considerable expense. The

doctors causing his operation there are presumed to have done so as one essential and timely. On that hypothesis, it is fair and just that the respondents pay to the appellant, the rates admissible as per Escorts. The claim of the appellant having been found valid, the question posed at the outset is answered in the affirmative. Of course the sum of Rs.40,000 already paid to the appellant would have to be adjusted in computation. Since the appellant did not have his claim dealt with in the High Court in the manner it has been projected now in this Court, we do not grant him any interest for the intervening period, even though prayed for. Let the difference be paid to the appellant within two months positively. The appeal is accordingly allowed. There need be no order as to costs."

Similar view is expressed by this Court on number of occasions granting relief to the Government servants. Reference in this respect can be made to the following decisions:

Judgment dated 18.08.2016 in case of Sri Kallol Roy vrs. The State of Tripura & others in WP(C) No.277 of 2016, judgment dated 04.05.2018 in case of Sri Uttam Pal vrs. The State of Tripura & others in WP(C) No.1479 of 2017 and judgment dated 27.03.2019 in case of Sri Subal Das vrs. The State of Tripura & others in WP(C) No.895 of 2018.

In the result, the impugned order dated 07.12.2018 is set aside. The respondents are directed to pay the petitioner's medical bills in question as permissible. Such payment shall carry simple interest @ 7.5% from the date of completion of 3(three) months of presentation of bills till actual payment. Entire payment be made within a period of 2(two) months from today.

Petition is disposed of accordingly.

13. It is the admitted position that each case has got its own pattern and every case is to be decided according to its own merit. Sometimes in some cases it is found that the subject matters are same and in some cases although issues are the same but the facts differs from one case to another case. Here in the case at hand it is the admitted position that the petitioner went to Kolkata on 10.01.2023

and as he developed chest problem he had to attend R N Tagore Hospital where coronary angiography was done on 11.01.2023 'PTCA with stenting to LAD done on 13.01.2023'.

14. From the judgment of this High Court and also the fact of the present case it appears to this Court that coronary artery blockage is such a problem which may need immediate hospitalization and immediate treatment otherwise the life of a person may be at stake at any point of time and if the problem is immediately on urgent basis is not addressed that may cause death of a person. In medical terms "Coronary" artery disease is the most common type of heart disease. It happens when the arteries that supply blood to heart muscle (coronary arteries) become hardened and narrowed. This is due to build up of cholesterol and other material called plaque, on their inner walls. This build up is called atherosclerosis. This can lead to chest pain (angina) or a heart attack. Most heart attacks happen when a blood clot suddenly cuts off the hearts' blood supply, causing permanent heart damage. Over time, CAD can also weaken the heart muscle and contribute to heart failure and arrhythmias. Here in the case at hand the petitioner went for medical treatment outside the State with another person and on arrival therein he developed chest problem all on a sudden for which he had to rush to R N Tagore Hospital immediately wherein angiography was done. If the petitioner did not undergo angiography that could lead to danger of his life and based upon the advice of the concerned Medical Officers he undergo this angiography and

in that case it was not possible on his part to come back to Agartala for obtaining reference of the Standing Medical Board. So he has availed the medical facilities since he was entitled from one of the State referral hospital. Now the denial of claim by the respondents authority on the ground that similar treatment is available at Agartala cannot be a valid ground for refusal of the genuine claim of the petitioner. It is not the case of the petitioner that he admitted GBP hospital at Agartala when Doctor advised him to undergo angiograph at GBP hospital Agartala but without adhering to the request of the concerned Medical Officer he left for Kolkata without any permission in that case the plea of the respondent could have been accepted that the claim of the petitioner was not supported by any cogent reasons. So on the plea of absence of referral certificate there was no scope on the part of the respondents to dishonor the claim filed by the petitioner. So considering the facts and circumstances of the case and also in view of the judgments passed by this Court in the aforementioned cases I am of the considered opinion that the petitioner is entitled to the reimbursement of the medical expenses incurred by him for his treatment at Kolkata.

15. In the result, the writ petition filed by the petitioner is allowed. The memo dated 02.01.2025 issued by the Chairman, Standing Medical Board stands set aside. The respondents are directed to examine the medical bills submitted by the petitioner on 10.04.2023 for reimbursement in view of the guidelines prescribed vide memo dated 22.12.2022 (Annexure-23) within a period of

two months from the date of passing of this judgment failing which the petitioner shall be entitled for interest @ 9% p.a. till the payment is made.

No order as to costs.

Pending application, if any, stands disposed of.

JUDGE

