



Sanchar Nigam Pensioners' Welfare Association

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No: SNPWA/CHQ/Hon PM/1/2026

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To,

The Hon'ble Prime Minister of India

Prime Minister's Office

South Block, New Delhi – 110011

Hon'ble Sir ,

On behalf of the Sanchar Nigam Pensioners' Welfare Association (SNPWA), representing thousands of beneficiaries of the Central Government Health Scheme (CGHS), we submit this representation to record our **unequivocal repudiation and unqualified denunciation of diabolical move of the Govt. to gradually dismantle the existing CGHS mechanism by linking it to a carefully manoeuvred and camouflaged insurance-based model .**

The emerging policy framework unmistakably indicates a calibrated and deceitful move that will, in due course, weaken and ultimately replace the sovereign CGHS structure with a corporate insurance-driven mechanism. Such an atrocious transition raises profound and genuine apprehensions regarding equity, sustainability, constitutional responsibility, and, above all, **the very intentions of the Govt. .**

The Sinister Policy Design Raises Serious Concerns

The proposed structure effectively creates two distinct classes of beneficiaries:

1. **A privileged minority** who opt for CGHS plus insurance coverage and are likely to receive priority treatment from corporate empanelled hospitals.
2. **A secondary majority** who do not opt for insurance and will gradually find themselves marginalized in access to quality healthcare services.

Given the insecurities of advancing age and increasing medical vulnerabilities, this secondary class will inevitably feel compelled to migrate toward corporate insurance models. **Over time, this will render CGHS redundant, paving the way for the Govt's complete withdrawal, in a carefully calibrated manner. Precisely that is what the Govt. has been and is aiming at for quite some time now**

* The fact that this order of transition has emanated from the **Department of Financial Services**, rather than from the **concerned Ministry of Health and Family Welfare**, clearly reveals an **underlying financial agenda**. The **welfare of beneficiaries** appears to be the **least of the priorities** — or rather it does not at all figure — in the Government's considerations.

Introduction of Transition clause, **even though camouflaged as optional to circumvent litigation and evade judicial scrutiny**, will eventually coerce Beneficiaries, living on fixed incomes, to switch over to Insurance Model, **paving the way for Govt. to meet its cherished objective of exiting and abandoning CGHS altogether.**

Beneficiaries will be ruthlessly fleeced to bear unbearably exorbitant high, age-linked annual insurance premiums. Such a scenario would impose severe financial strain on ageing beneficiaries **who had legitimately relied upon a fully self funded and sovereign healthcare assurance.**

Hoodwinking ageing and ailing Pensioners by cosmetically introducing **Optional Clause** is an established tool and gimmick to arm twist and coerce people into submitting to ulterior objectives of the Establishment, since time immemorial, and, as such, is **reprehensible and morally indefensible**

Diverting Beneficiaries' hard earned funds and arbitrarily restructuring Central Government Health Scheme without elementary discussion with its legitimate stakeholders and restructuring the mechanism in a manner that arbitrarily shifts the entire burden on hapless Beneficiaries is not a Reform but a clear infringement, violation and grave abuse of Constitutional Principles, and breach of fiduciary responsibility towards contributors, and a gross financial impropriety, raising serious issues of ethical governance.

Constitutional and Moral Responsibility

Any move that dilutes CGHS strikes at the heart of the State's constitutional obligation **under Article 21 — the Right to Life, which includes the Right to Health**. Healthcare security for retired public servants is not a matter of discretion; it is a solemn sovereign commitment.

***Hard and Irrefutable Financial realities -**

CGHS is not a Budget burden/ State Charity but a fully Self Funded Corpus Mechanism. Let the big sized Babus (as your good self has quite often and rightly referred) in M.O.F., who have been impeding and strangulating growth and expansion of CGHS, be aware of the following hard Financial Aspects which they are disdainfully and deliberately ignoring*.

CGHS is a **self-funded, prepaid social security scheme** . It is neither a subsidy nor an act of **governmental benevolence**.

The CGHS corpus, estimated at approximately **₹2.5 lakh crores** , has been built entirely through **one-time migration contributions** from nearly 42 lakh beneficiaries, who paid amounts ranging from **₹30,000 to ₹1,25,000** depending on their pay scales.

Even with a conservative average contribution of **₹60,000 per beneficiary**, the **accumulated corpus of Rs 2 . 5 lakh crores** is substantial and entirely contributor-funded. At conservative returns, such a corpus is capable of generating significant **annual revenue to the tune of aporox Rs 25, 000 crores** — far exceeding the current dismal, paltry and pathetic annual CGHS **budgetary allocation of approximately ₹4,500 crores**.

This clearly demonstrates that CGHS is not financially unsustainable. On the contrary, it is structurally self-sustaining. **Any narrative suggesting otherwise is nothing but misleading, complete travesty and distortion of facts.**

Moreover, restricting capital outlay in the name of fiscal deficit management cannot justifiably be extended to a **fully contributory and self-funded scheme**.which is not at all State Financed Non-utilization or diversion of CGHS reserves undermines both institutional growth and beneficiary trust, while leaving nearly 80% of potential beneficiaries without adequate access.

Demands for Corrective Action

Instead of outsourcing sovereign healthcare responsibilities to market forces, the Government should strengthen and modernize CGHS through the following measures:

- * Immediate withdrawal of all policies aimed at nudging or compelling beneficiaries toward insurance-based alternatives.**
- * Optimally Utilize, not squeeze, huge CGHS Corpus for massive and allround expansion, including reaching out to more than 80% of the beneficiaries outside urban limits for whom it remains inaccessible.**
- * Expansion of CGHS wellness centres and establishing dedicated CGHS hospitals in under-served regions**
- * Revision of the existing CGHS rates to align them with prevailing market realities .**
- * Full transparency and public disclosure regarding the utilization and management of the beneficiary-funded corpus.**

Conclusion

Any dilution of CGHS will be perceived as an affront to Senior Citizens, trampling upon their legitimate rights. **Diversion of huge CGHS Corpus will be obviously viewed as an act of Gross Financial Impropriety**

The Govt. has absolutely no business to diversify/ throttle the huge existing CGHS reserves, and diverting them to Corporate giants while crippling CGHS. **Such a retrograde and regressive**

step would deeply erode the trust in sovereign assurances and long-standing welfare commitments, besides tarnishing the image of the Govt. .

Hon Sir,

The Government wields massive power, and the Framers of the Constitution could never have envisaged a Government wielding its massive powers to assault and trample upon its own Citizens, **especially the ailing, infirm and aging**

However, despite their age and ailments, Beneficiaries stand united, have extraordinary resilience, unwavering determination, and collective strength, to resist, challenge and defeat these regressive, oppressive and deplorable assault on their dignity, survival, and legitimate entitlements.

While concluding, Hon Sir, we reiterate, firmly and resolutely, that no amount of explanation from the Government can justify its concerted and determined diabolical efforts to coerce Beneficiaries to an Insurance-driven mechanism - a calculated move that will, inevitably and unquestionably, leave Beneficiaries fleeced, financially trapped as hostages of the Corporate Insurance Houses, and, in the process, also enable the Government to meet its sinister and cherished objective of exiting and abandoning CGHS.

We, respectfully seek your immediate and decisive intervention to preserve and strengthen CGHS, ensuring healthcare security for millions of pensioners and their families.

With deep concern and earnest hope,



(Girdhari Lal Jogi)

General Secretary

SNPWA

Copy to:

1. Nirmala Sitharaman, Hon'ble Minister of Finance, Ministry of Finance

Respected Madam,

It is a matter of deep concern that officials in the Department of Expenditure (DoE) have consistently impeded and constricted the expansion and growth of the Central Government Health Scheme (CGHS) by arbitrarily diluting proposals forwarded by experts from the Ministry of Health & Family Welfare for the establishment of new Wellness Centres (WCs).

Proposals for sanctioning posts for newly approved WCs—meticulously finalized by professionals in the Ministry of Health & Family Welfare in consultation with the Financial Adviser, CGHS—are being subjected to drastic and unreasonable curtailment. Reductions to the extent of nearly 80%

of the posts originally approved render the operationalisation of these centres virtually impracticable, thereby defeating the sustained and earnest efforts undertaken for the expansion and strengthening of CGHS.

Concerned officials in the Department of Expenditure, ostensibly in the name of containing the fiscal deficit, appear to be indiscriminately targeting contributory and self-funded schemes such as CGHS. It is respectfully submitted that CGHS is a fully contributory and self-sustaining mechanism and does not impose any additional burden on the State exchequer warranting such restrictive measures.

The recent decision to link CGHS to an insurance-based model is, with utmost respect, both imprudent and unwarranted. CGHS is neither dependent upon nor sustained by State finances in a manner that justifies such a transition. Any move to subject it to an insurance-linked framework appears arbitrary and irrational, and risks undermining the legitimate rights and healthcare security of lakhs of beneficiaries.

You are therefore humbly requested to kindly intervene and direct the concerned authorities in the Department of Expenditure and Department of Financial Services to **rescind the highly unwarranted and regressive order seeking to link CGHS to an insurance mechanism**. Such a transition carries inherent risks and could **potentially expose beneficiaries—particularly senior citizens and pensioners—to uncertain and adverse consequences**, while effectively diluting the Government's direct responsibility to sustain and safeguard CGHS.

2. J. P. Nadda, Hon'ble Minister of Health & Family Welfare – for kind information and necessary action, please.

3. Jitendra Singh, Hon'ble Minister of State (PMO).

4. Cabinet Secretary, Government of India.

5. Secretary, Department of Pension & Pensioners' Welfare.

6. Secretary, Ministry of Health & Family Welfare.

7. Secretary, Department of Financial Services, Ministry of Finance.

8. Secretary, Ministry of Finance.

9. Additional Secretary & Director General, CGHS.

10. Additional Secretary & Financial Adviser, CGHS.

11. Director, CGHS.

12. Joint Secretary (Policy), CGHS.