

**GOVERNMENT OF ANDHRA PRADESH**  
**PANCHAYAT RAJ AND RURAL DEVELOPMENT (RD.I) DEPARTMENT**

**Memo No.2474995/RD.I/A1/2024,**

**Dated:03.01.2025**

Sub:- Rural Development – SERP – NTR Bharosa Pension Scheme – Verification/ reassessment of health and disabled pensions – Guidelines – Issued.

Ref:- From the CEO, SERP eoffice file No.SERP-17021/95/2024-PROJ MANG-ADMIN-SERP (Computer No.265440), dated 03.01.2025.

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In the circumstances reported by the Chief Executive Officer, Society for Elimination of Rural Poverty(SERP), Vijayawada vide reference cited, and after careful examination of the proposal contained therein, Government hereby issue the following guidelines for verification/ reassessment of health and disabled pensions.

**Guidelines:**

The Government is committed to the welfare and development of all segments of society. The pension is a major welfare measure to ameliorate the hardships of the poor and vulnerable sections of the society, particularly differently abled persons, in order to secure a dignified life.

There have been numerous complaints from various parts of the state about disability pensions being taken by ineligible persons.. Health and disability pensions were verified in Dr. B.R. Ambedkar Konaseema and YSR Kadapa districts on a pilot basis and found a high number of ineligible pensions.

**1. Verification/reassessment:**

1.1. The objective of verification/reassessment is to ensure that health and disabled pensions receive benefits in an equitable and transparent manner.

**Health Pensions**

1. Paralysis confining the person to wheel chair or bed
2. Severe muscular dystrophy cases and accident victims
3. Multideformity leprosy

**Disabled Pensions**

1. Locomotor/Orthopedic Handicapped
2. Visual Impairment
3. Hearing Impairment
4. Mental Retardation
5. Mental Illness
6. Multiple Disability

1.2. **Society for Elimination of Rural Poverty (SERP):** SERP shall oversee the process and facilitate coordination among various departments, rollout of the entire Verification/Reassessment process and training for the necessary personnel on the digital application. It shall monitor the oversee progress of the Verification/Reassessment and submit a report to the Government.

1.3. **Health Department:** The Director of Public Health and Family Welfare, Director of Medical Education (DME), and Director of Secondary Health Services (DSH) shall provide doctors for verification/reassessment, impart training to doctors, and make necessary arrangements for completion of this exercise.

## 2. District Level Coordination Committee:

The District Level Coordination Committee with the following composition of members constituted for overall implementation of Verification/ Reassessment of health and disabled pensions.

- |  |                  |
|--|------------------|
| 1. District Collector                            | - Chairman       |
| 2. Project Director, DRDA                        | -Member Convener |
| 3. Superintendent of Government Medical Colleges | - Member         |
| 4. District Medical & Health Officer             | - Member         |
| 5. District Coordinator Hospital Services        | - Member         |
| 6. District Leprosy Officer                      | - Member         |
| 7. District Panchayat Officer                    | - Member         |
| 8. Chief Executive Officer, Zilla Praja Parishad | - Member         |
| 9. District Coordinator, GSWS Dept               | - Member         |
| 10. Municipal Commissioners                      | - Member         |
| 11. Police Dept representative                   | - Member         |

## 3. Mode of verification/reassessment:

3.1 **Door to Door Mode:** Medical Teams shall visit door to door for verification/reassessment the following health pensions.

### Health Pensions

1. Paralysis confining the person to wheel chair or bed
2. Severe muscular dystrophy cases and accident victims

3.2 **Institutional Mode(Hospital):** The Medical Team shall conduct verification/reassessment of the following pensions at institutional level (Community Health Centres, Area Hospitals, District Hospitals, Government General Hospitals and Medical Colleges).

### Disabled Pensions

1. Locomotor/Orthopedic Handicapped
2. Visual Impairment
3. Hearing Impairment
4. Mental Retardation
5. Mental Illness
6. Multiple Disability



### 3.3. Category wise pensioners

Sl. No.	Categories	No.of Pensions
	<b>Door to Door Mode (Rs.15,000 pensions)</b>	
1	Paralysis confining the person to wheel chair or bed	16479
2	Severe muscular dystrophy cases and accident victims	7612
	<b>Sub Total</b>	<b>24091</b>
	<b>Institutional Mode (Rs.6,000 pensions)</b>	
3	Disabled Pensions	
3.1	Locomotor/Orthopedic Handicapped	463425
3.2	Visual Impairment	90302
3.3	Hearing Impairment	109232
3.4	Mental Retardation	103042
3.5	Mental Illness	19193
3.6	Multiple Disability	2782
	<b>Sub Total</b>	<b>787976</b>
4	Multideformity leprosy	6833
	<b>Sub-Total</b>	<b>6833</b>
	<b>Total</b>	<b>818900</b>

#### 4. Medical Teams:

- 4.1 Door to Door mode: Medical team consists of Orthopaedics, General Physicians, and PHC Medical Officers of that jurisdiction . The verification/reassessment will be carried out door by door.
- 4.2 Institutional level: Medical Team consists of Orthopaedics, Superintendent and Senior Medical Officer. The verification/reassessment will be conducted at the designated hospitals.
- 4.3 The superintendent & Senior Medical Officer of the hospital concerned are the members of the medical teams.
- 4.4 The zone-wise medical teams and allotment of specialist doctors for verification/reassessment of health pensions are enclosed as **Annexure-I**.
- 4.5 In respect of disabled pensions, verification/reassessment teams will be communicated later.
- 4.6 The District Collector shall depute one Digital Assistant from Department of Grama Sachivalayams & Ward Sachivalayams to each medical team. The deputed Digital Assistant shall accompany with Medical Team for door to door mode. In respect of institutional mode work at allotted hospital till completion of this process.

## **5. Team Scheduling:**

- 5.1 The District Level Coordination Committee at the district level formulates a comprehensive schedule for verification and reassessment. Mandal and municipality schedules should be prepared and sent to all concerned. While preparing mandal and municipal level schedules, it is important to ensure that doctors are not allotted to the same constituency where they have worked. The verification/Reassessment of the same pensioner should not be conducted by the same doctor who issued the certificate.
- 5.2 The District Level Coordination Committee shall form necessary medical teams based on the number of pensioners and availability of doctors.
- 5.3 Each medical team shall verify/assess a minimum of 25 pensioners per day.
- 5.4 The Medical and Health Department will provide the list of specialist doctors. The District Level Coordination Committee will prepare a schedule as per the availability of doctors and number of pensions.

## **6. Communication to pensioners**

- 6.1 The MPDO/Municipal Commissioner shall prepare a village/ward secretariat wise schedule as per allotted dates and submit it to District Collectors.
- 6.2 The MPDO/Municipal Commissioner is responsible for mapping the pensioners according to the dates assigned to the mandal/municipality and informing the concerned village/ward secretariats. 150% of pensioners have to be mapped in disabled pension's verification/reassessment.
- 6.3 The system-generated notice (date of visit of medical team to pensioner's house) will be enabled in WEA/WWDS login for health pensions.
- 6.4 The system will generate a notice (consisting of the pensioner's name, allotted hospital, and date of verification/reassessment) which will be enabled in the WEA/WWDS login.
- 6.5 The Village/Ward Secretariat functionaries will take a printout and hand over a copy of the notice to the pensioners, obtaining Aadhar authentication as a token of acknowledgement. In case of failed authentication, manual acknowledgment should be taken.
- 6.6 It is the responsibility of the Panchayat Secretary/Ward Administrative Secretary to ensure the presence of all pensioners for their verification/reassessment on the designated date as per the schedule.
- 6.7 Any pensioner who refuses a verification/reassessment notice or does not attend the verification/reassessment as per schedule or is not available for a door-to-door visit of medical teams, their pension will be kept on hold.



## **7. Software application:**

- 7.1 **Mobile app:** Verification/reassessment shall be done on the Health Pensions mobile application.
- 7.2 Shall take a pre-printed Sadarem assessment form from the Sadarem portal.
- 7.3 In respect of offline areas medical teams shall collect details manually and update in the mobile app in Network available location.
- 7.3 The DM&HO shall generate logins to medical teams in respect of health pensions.
- 7.4 The Project Director, DRDAs shall generate logins to medical teams in respect of disabled pensions.
- 7.5 The Digital Assistant shall update the mobile app as per the instructions of the Medical Team, take a photo and biometric authentication (biometric/facial) of the pensioners in the mobile app. In offline mode, shall update mobile app as per the manual format, a photo of the pensioner should be taken and uploaded to the mobile app when network availability is available, they shall take scan of the filled sadarem form and upload in the same app.
- 7.6 **Web application:** A web application will be provided to determine the percentage of disability for health and disabled pensions on the Sadarem portal. The verification/reassessment forms details will be updated in the software and new disability certificates will be generated.

## **8. Evaluation of health & disabilities:**

- 8.1 The medical team shall carry the Sadarem preprinted form.
- 8.2 Medical teams shall conduct examinations of the pensioners as per procedure.
- 8.3 They shall also verify the medical certificates and SADAREM certificates and other medical certificates of the pensioners.
- 8.4 Update pensioners verification/reassessment details in the mobile application.
- 8.5 Fill the preprinted sadarem form and signed by medical team.
- 8.6 The preprinted signed copy shall upload in the mobile app.
- 8.7 The PHC Medical Officer shall be handed over the signed copies to DM&HOs in sealed cover.
- 8.8 The DM&HO shall make arrangements for data entry of the filled form and send it to the medical team for a digital sign after web application enabled.

**9. Control Room:** A state-level control room shall be established at SERP with officials from SERP, Medical and Health department, and technical personnel to monitor, guide, and resolve issues of medical teams and pensioners.

**10. Audit:**

- 10.1 The District Collector shall constitute a team to audit 5% of the total reassessed pensioners on a random basis.
- 10.2 If any deviations are noticed in the present verification/reassessment of persons at a later date, action shall be taken against the concerned officials/ functionaries as per existing norms.
- 10.3 The Medical and Health department shall update the SADAREM certificate of the pensioners who do not fall under the purview of disability.

**11. Budget**

- 11.1 A separate budget shall be provided to the Chief Executive Officer, SERP, Vijayawada, for the verification/reassessment of health and disability pensions in the state.
- 11.2 The District Collectors shall submit expenditure to the CEO, SERP, for the release of funds.
2. The Chief Executive Officer, Society for Elimination of Rural Poverty (SERP), A.P., Vijayawada shall take further necessary action in the matter accordingly.

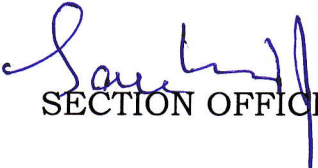
**SHASHI BHUSHAN KUMAR**  
**PRINCIPAL SECRETARY TO GOVERNMENT**

To  
The Chief Executive Officer, SERP, AP, Vijayawada  
All the District Collectors in the State

**Copy to:**

The Special Chief Secretary, Health, Medical & Family Welfare Department.  
The Principal Secretary, Department of Grama Sachivalayams & Ward Sachivalayams  
The Director of Secondary Health Services (DSH), Thadapalli  
The Director, Department of Grama Sachivalayams & Ward Sachivalayams  
The Director of Public Health and Family Welfare, Vijayawada  
The Director of Medical Education (DME), vijayawada  
The PS to Hon'ble Minister(MSME,SERP, NRI Affairs)  
The PS to Principal Secretary, PR & RD Department.

//FORWARDED::BY ORDER//

  
SECTION OFFICER

**GOVERNMENT OF ANDHRA PRADESH  
PANCHAYAT RAJ AND RURAL DEVELOPMENT (RD.I) DEPARTMENT**

**Annexure-I**

No of Zones	Name of the District	No of pensioners	No of teams	No of days	No of Doctors			
					DME		DSH	
					OR	GM	OR	GM
Zone - 1	ASR, Anakapalli, Visahkapatnam	996	10	5	5	12	5	0
Zone - 2	Srikakulam, Manyam, Vizianagarm	492	12	3	4	7	8	7
Zone - 3	East Godavari, Kakinada, Konnaseema	2125	11	10	6	10	5	3
Zone - 4	Guntur, Bapatla, Palnadu, Prakasam	3616	17	11	11	16	6	2
Zone - 5	West Godavari, NTR, Eluru, Krishna	4411	11	21	6	11	5	2
Zone - 6	Nellore, Chittoor, Tirupathi	4409	24	9	14	21	11	4
Zone - 7	Kadapa, Annamayya	2542	10	13	6	11	4	1
Zone - 8	Ananthapur, Satya sai, Kurnool, Nandyal	5500	17	16	12	18	5	2
	<b>Grand Total</b>	<b>24091</b>	<b>112</b>	<b>88</b>	<b>64</b>	<b>106</b>	<b>49</b>	<b>21</b>

**SHASHI BHUSHAN KUMAR  
PRINCIPAL SECRETARY TO GOVERNMENT**

  
SECTION OFFICER