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Office Memorandum

Subject: Clarification regarding implementation of Direct Benefit Transfer under CS/CSS and State Linked Scheme on PFMS

The following guidelines are issued with regard to implementation of Direct Benefit Transfer under (i) Central Sector (CS), (ii) Centrally Sponsored Schemes (CSS) and (iii) State Schemes created corresponding to the CS & CSS Schemes on PFMS.

- 1) While creating linked State Schemes corresponding to CS/CSS, the same name as available under OT-13 Report of state schemes mapped with PFMS and if the state scheme is not mapped then the name as is being used in the State/UT for implementing the scheme may be adopted/used.
- 2) SPMUs/States are required to migrate standard components from the CSS Schemes and wherever necessary they may 'disable' undesirable ones and/or 'add' sub-components/child component to the migrated central list according to state specific requirement, if any, after consulting the respective central Ministry/Department.
- 3) Hierarchy of State Schemes should be in consonance with hierarchy of the CSS Scheme since the same implementing Agencies (IAs) are to be used for mapping of State Schemes. States can, however, create additional level of hierarchy as per their requirements.
- 4) For configuration of State Schemes for DBT as far as possible the same Beneficiary Type ID, Purpose of payments, components for booking DBT payments as used under CSS Schemes should be used. Payment parameters and periodicity/frequency may, however, differ from the CSS Schemes. Of late it has come to notice that the DBT was attempted without proper configuration of schemes and also without incorporating 'payment frequency'. As a result the payment got stuck up. IT Team has been advised to make the same beneficiary ID available for use under corresponding State Schemes, which is not available as of now.
- 5) SPMUs/States are required to obtain DBT Scheme Codes from the DBT Mission for each of the State Schemes before commencing DBT. This will facilitate payment of DBT commission to Banks and NPCI.

- 6) In cases where DBT is already happening under Central Schemes via External System/SFT, CPMU needs to incorporate features/parameters of State Schemes into the system from back-end. SPMUs/States may communicate the same to CPMU. DBT under Schemes like PMAY, NHM, PDS, Food, NREGA, NSAP are happening through external systems. While configuring state schemes for DBT this aspect also needs to be kept in view.
- 7) State Schemes may be on-boarded on all the existing implementing agencies for DBT & EAT so as to ensure complete migration of PFMS` operations on to the State Schemes. Partial migration or mapping of State Schemes to some of the SIAs in the States/UTs is therefore not envisaged. It is also not envisaged that some of the IAs/SIAs will continue to operate on Central Schemes and the remaining IAs/SIAs on State Schemes.
- 8) DBT for State Schemes created corresponding to CSS Schemes may therefore be commenced after ensuring the above.

This issues with the approval of Joint CGA, **DBT, PFMS**.


26/10/17
(Samsher Ali)

Astt. Controller General of Accounts

All SPMUs (PFMS)

Copy to:

- 1.) PS to Addl. CGA & PD(PFMS) for information
- 2.) PS to Joint CGA(SKM/KT/SD)
- 3.) Sr. Technical Director(NIC), PFMS
- 4.) Dy. CGA(NMJ/SK/RL)
- 5.) All SNOs/ASNOs, PFMS
- 4.) All ACGAs/ACAs (PFMS)
- 5) All AOs/Sr. AOs, PFMS