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Central Organisation, ECHS Adjutant General's Branch IHQ of MoD (Army) Maude Lines Delhi Cantt – 110 010

| F Sep 2018

B/49783/AG/ECHS

IHQ of MoD (Navy) (SO ECHS)
Air Headquarters (VB) (D Fin P)
HQ Southern Command (A/ECHS)
HQ Eastern Command (A/ECHS)
HQ Western Command (A/ECHS)
HQ Central Command (A/ECHS)
HQ Northern Command (A/ECHS)
HQ South Western Command (A/ECHS)
Eol, Kathmandu, Nepal



TRAVELLING ALLOWANCE FOR ECHS PATIENTS

- 1. Refs :-
 - (a) Para 12 of GOI (MoD) letter No 24(8)/03/US(WE)/D(Res) dt 19 Dec 2003.
 - (b) GOI (MoD) letter No 22(02)/11/US (WE) / D (Res) dt 10 May 2013.
 - (c) GOI (MoD) letter No 22D(18) /2017/WE/D (Res-I) dt 07 Aug 2018 (copy enclosed).
- Govt has eased out TA norms as per Para 1 (c) above wherein patients can travel by any mode including own vehs / Pvt transport and claim TA limited to entitled Expdr / actual whichever is less.

Admissibility

- No DA is admissible for any move of ECHS member or their dependent/ Attendant for outstation treatment.
- TA will only be admissible to ECHS beneficiaries on the following grounds:-
 - (a) Travelling Allowance for onward and return journey undertaken for medical treatment is admissible to ECHS beneficiaries for treatment in another city, if such treatment is not available in the same city. Referral to outstation specialised centres will only be on the recommendations of an authorised service medical doctor or an ECHS medical doctor. The actual referral will have to be signed by the Officer In Charge (OIC) of the Polyclinic.

- (b) Non availability of treatment in the city implies that there is no Service/Private empanelled hospital providing the required treatment in the town/city of Parent Polyclinic of ECHS beneficiary.
- (c) In case desired treatment is not available in the station of parent PC, patient can choose any city within the RC where this treatment is available. TA will be, however, allowed only if it happens to be closest station from the parent PC city.
- (d) Patient can choose any city (any emp hosp in the country) for treatment. While treatment is allowed but TA will be allowed if the selected facility is Not available in any city of RC.

Journey By Rail

 Amount admissible will be limited to rail fare as per entitled class as applicable at the time of retirement by shortest/main route, or actual expenditure, whichever is less.
 Original ticket(s) is/ are to be attached in support of expenditure alongwith the claim.

Journey by Civil Air

6. Reimbursement of air travel in emergency case will be considered on merits of individual case by the Ministry in consultation with MoD (Fin) provided the Medical Officer of Polyclinic or the Specialist at Service Hospital certifies in writing that the air travel was absolutely essential and that travel by other means i.e. by rail or road etc would have definitely endangered the life of the patient or involved the risk of serious aggravation of the condition of the patient.

Journey by Road

7. Road journey by public bus can be performed between places not connected by rail or otherwise, at the discretion of the patient in the entitled class as applicable at the time of retirement by shortest/main route. ECHS beneficiary can also travel by taxi/ private car / ambulance / any mode of transport, however, the amount will be reimbursed based on certificate rendered by ECHS patient in support of the expenditure alongwith the claim. Amount admissible will be restricted to rail fare as per entitled class/ Govt bus rates (when places not connected by rail) as applicable at the time of retirement by shortest / main route or actual expenditure whichever is less.

Journey by Sea or by River Steamer

8. The amount admissible will be limited to the steamer fare as per entitled class, as applicable at the time of retirement to the nearest port. However, if the journey is performed by Air, the amount will be restricted to steamer fare as per entitled class as applicable at the time of retirement to the nearest port or actual expenditure whichever is less.

Conveyance for Attendants

9. Conveyance is admissible for one attendant when accompanying a patient, provided escorting is considered essential by the medical authorities. The Service Medical Doctor or the ECHS Medical Doctor attending to the patient should certify, in writing, that it is unsafe for the patient to travel alone and an attendant/escort is necessary to accompany the patient. Entitlement of attendant for travelling allowance will be the same as applicable to the patient.

Organ Donor

- Reimbursement of Travelling Allowance to the Kidney Donor in connection with the journeys undertaken for donation of Kidney is admissible at the following rates:-
 - (a) If the Donor is a non-ECHS beneficiary. Will be admissible at the rates applicable to the recipient ECHS beneficiary.
 - (b) If the Donor is another ECHS beneficiary. Will be admissible at the rate applicable to the Donor.

Ambulance Charges

- 11. Ambulance service authorised in polyclinics/Military Hospital may be utilised for patients when being referred to Service/Empanelled Hospital in the same city. However, if Ambulance is not provided and Medical Authority (Medical Officer of Polyclinic or the Specialist at the Service Hospital) certifies in writing that conveyance of the patient by any other mode would definitely endanger the life of the patient or involve the risk of serious aggravation of his /her condition, expenditure incurred on engagement of Ambulance used to convey the patient will be reimbursed provided that the journey is undertaken within the same city.
- Station Commanders, who reimburse claim, must ensure the following:-
 - (a) Pay range for admitting travel class entitlement of patient will be the pay scale of ESM at the time of retirement.
 - (b) Road journey by public bus can be performed between places not connected by rail or otherwise, at the discretion of the patient in the entitled class as applicable at the time of retirement by shortest/main route. ECHS beneficiary can also travel by taxi/ private car / ambulance / any mode of transport, however, the amount will be reimbursed based on certificate rendered by ECHS patient in support of the expenditure alongwith the claim. Amount admissible will be restricted to rail fare as per entitled class/ Govt bus rates (when places not connected by rail) as applicable at the time of retirement by shortest / main route or actual expenditure whichever is less.
 - (c) No TA is admissible in case referred in the same city.
 - (d) No DA will be admissible under any circumstances.
 - (e) No advance is admissible for the journey.
 - (f) Reimbursement of air fare not permissible except in cases of emergency, as specified at Paragraph No 5 and 7 above.

- 13. ECHS beneficiary is supposed to put the claim to Stn HQ through Parent PC under which the said parent polyclinic has been placed. To ensure timely payment and avoid any misuse, the following norms will be followed:-
 - (a) <u>Documents to be Submitted.</u>
 - Proof of membership (Photocopy of ECHS Card/ Receipt authenticated by OIC Polyclinic). Date of membership to be clearly visible.
 - (ii) Referral form mentioning referral No of the Polyclinic.
 - (iii) Emergency certificate by treating Hospital (if applicable).
 - (iv) Emergency bills superscribed in Red (if applicable).
 - (v) Contingent bill.
 - (vi) Original tickets of the patient, original tickets of the attendant (if applicable).
 - (vii) Certificate by outstation Service Hosp about treatment having been taken as referral ID is not generated in such cases.
 - (viii) Details of bank account number, IFSC code, name & address of bank is required for E-payment, hence a cancelled cheque is reqd to be attached.
 - (b) Mandatory Endorsement of Claim ID. TA is auth in case patient is given Out Stn referral. All OPD / IPD referrals are followed by claim ID (Hosp claims / Indl reimbursement claims). These will be prominently endorsed in red colour on Top Right Corner of the contingent bill. No bill will be passed without claim ID unless the patient has been treated in a Service Hosp for which a certificate will be attached.
 - (c) OIC PC will endorse on the contingent bill that the place to which TA is being allowed is the nearest city from parent PC and no emp facility exists in the city of Parent PC in accordance with GOI (MoD) letter No 22D(18) /2017/WE/D (Res-I) dt 07 Aug 2018. Automation is being also attempted wherein OIC PC will be able to confirm about TA entitlement at the time of giving City based referral.
 - (d) In case of patient having accompanying member, copy of such claims will also be forward to concerned Regional Centre for records.
- 14. Two sets of documents as per Para 12 above will be prepared and disposed as under till the time 'Online billing' process for TA commences:-
 - (a) One copy to be retained at PC.
 - (b) One copy to be sent to Stn HQ.

- 15. In case of claim of attendant, three sets of documents will be prepared wherein the third copy will be sent to concerned RC for monitoring.
- Local Stn HQs will not put any requirement of additional docus to ensure uniformity in processing.

(Hari Srinivas) Gp Capt Dir (P&FC) for MD ECHS

Encls: four pages.

Copy to :-

MoD (DoESW) - for info wrt letter at Para 1(c) above.

- Please hand over one copy to each Stn HQ & PC under AOR.

(All RCs)

UTI ITSL

 For creating a provision of TA entitlement for beneficiary by OIC PC once he / she decides Place of treatment. Available facilities with valid MoA be mapped as discussed on 13 Sep 2018.

Internal:

All Secs

for info. S & A Sec to upload on ECHS website.

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File No.22D(18)/2017/WE/D(Res-I) GOVERNMENT OF INDIA MINISTRY OF DEFENCE (DEPARTMENT OF EX-SERVICEMEN WELFARE) ROOM NO.221, B WING SENA BHAVAN, NEW DELHI

Dated: 7th August, 2018

The Chief of Army Staff
The Chief of Naval Staff
The Chief of Air Staff.

Subject: ECHS Travelling allowances for Medical Treatment.

Sir,

B BUR 2018

With reference to Govt. of India, Ministry of Defence letter No.22(02)/ 11/US(WE)/ D(Res) dated 10th May 2013, I am directed to convey the sanction of the President for regulating the admissibility/entitlement of TA of ECHS beneficiaries as appended below:

Admissibility

- No DA is admissible for any move of ECHS member or their dependent /attendant for outstation treatment.
- 3. TA will only be admissible to ECHS beneficiaries on the following grounds:
 - (a) Travelling Allowance for onward and return journey undertaken for medical treatment is admissible to ECHS beneficiaries for treatment in another city, if such treatment is not available in the same city. Referral to outstation specialised centres will only be on the recommendations of an authorised service medical doctor or an ECHS medical doctor. The actual referral will have to be signed by the Officer In Charge (OIC) of the ECHS Polyclinic.
 - (b) Non availability of treatment in the city implies that there is no Service / Private empanelled hospital providing the required treatment in the town / city of Parent ECHS Polyclinic.



- (c) Other city referrals and corresponding travelling allowance will be applicable only to the nearest Service /Private empanelled hospital where such medical treatment facility is available and not as per choice of the patient. Same is to be determined by service/ECHS medical doctor and authenticated by the OIC ECHS Polyclinic prior to resorting for such outstation referrals.
- (d) The travelling allowance claim entitlement is indicated in subsequent paras.

Journey by Rail

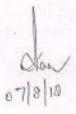
4. Amount admissible will be limited to rail fare as per entitled class as applicable at the time of retirement by shortest/main route, or actual expenditure, whichever is less. Original ticket(s) is / are to be attached in support of expenditure alongwith the claim.

Journey by Civil Air

5. Reimbursement of air travel in emergency case will be considered on merits of individual case by the Ministry in consultation with MoD(Fin) provided the Medical Officer of Polyclinic or the Specialist at Service Hospital certifies in writing that the air travel was absolutely essential and that travel by other means i.e. by rail or road etc. would have definitely endangered the life of the patient or involved the risk of serious aggravation of the condition of the patient.

Journey by Road

6. Road journey by public bus/taxi/private car/ambulance can be performed between places not connected by rail or otherwise, at the discretion of the patient in the entitled class as applicable at the time of retirement by shortest / main route. The amount will be reimbursed based on certificate rendered by ECHS patient in support of the expenditure along with claim. Amount admissible will be restricted to rail fare as per entitled class as applicable at the time of retirement by shortest/main route or actual expenditure whichever is less.



Journey by Sea or by River Steamer

7. The amount admissible will be limited to the steamer fare as per entitled class, as applicable at the time of retirement to the nearest port. However, if the journey is performed by Air, the amount will be restricted to steamer fare as per entitled class as applicable at the time of retirement to the nearest port or actual expenditure whichever is less.

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8. Conveyance is admissible for one attendant when accompanying a patient, provided escorting is considered essential by the medical authorities. The Service Medical Doctor or the ECHS Medical Doctor attending to the patient should certify, in writing, that it is unsafe for the patient to travel alone and an attendant/escort is necessary to accompany the patient. Entitlement of attendant for travelling allowance will be the same as applicable to the patient.

Organ Donor

- 9. Reimbursement of Travelling Allowance to the kidney Donor in connection with the journeys undertaking for donation of Kidney is admissible at the following rates:
 - (a) If the Donor is a non-ECHS beneficiary: Will be admissible at the rates applicable to the recipient ECHS beneficiary.
 - (b) If the Donor is another ECHS beneficiary: Will be admissible at the rate applicable to the Donor.

Ambulance Charges

10. Ambulance service authorised in polyclinics / Military Hospital may be utilised for patients when being referred to Service/Empanelled Hospital in the same city. However, if ambulance is not provided and Medical Authority (Medical Officer of Polyclinic or the Specialist at the Service Hospital) certifies in writing that conveyance of the patient by any other mode would definitely endanger the life of the patient or involve the risk of serious aggravation of his / her condition, expenditure incurred on engagement of Ambulance used to convey the patient will be reimbursed provided that the journey is undertaken within the same city.



- Station Commanders, who reimburse claim, must ensure the following:
 - (a) Pay range for admitting travel class entitlement of patient will be the pay scale of primary member of ECHS at the time of retirement.
 - (b) Travel by public bus/private car/taxi/ambulance is admitted for reimbursement of expenditure restricted to entitled class of rail fare of primary member of ECHS, based on the certificate rendered by the ECHS patient and duly countersigned by Service Medical Doctor or the ECHS Medical Doctor attending that patient at destination.
 - (c) No TA admissible in case referred in the same city.
 - (d) No DA will be admissible under any circumstances.

(e) No advance is admissible for the journey.

- (f) Reimbursement of air fare not permissible except in cases of emergency, as specified at paragraph No.5 and 7 above.
- 12. This supersedes Authorisation para 12 of "Procedure on payment and reimbursement for Medical Expenses" issued vide MoD letter No.24(8)/03/US(WE)/D(Res) dated 19 Dec. 2003.
- 13. This letter is effective from the date of issue.
- 14. This issues with the concurrence of Ministry of Defence (Finance/Pension) vide their U.O. No.32(18)/2017/Fin/Pen Dated 16-7-2018

Yours faithfully

(A.K. Karn)

Under Secretary to the Govt. of India

Copy to:

- 1. CGDA, New Delhi
- 2. MD, ECHS
- 3. PPS to Secretary, ESW
- 4. PPS to Secretary Defence(Fin)
- 5. PS to JS(ESW)
- 6. PS to JS & Addl. FA(RK)
- 7. SO to Defence Secretary
- 8. DGADS, New Delhi

Copy signed in ink: All PCsDA/CsDA