

CITIZEN-CHARTER ECHS : ESM (PENSIONERS)

INTRODUCTION

1. Retired Armed Forces personnel till 2002 could avail medical facilities only for specific high cost surgery/treatment for a limited number of diseases covered under the Army Group Insurance(Medical Branch Scheme) (AGI(MBS)) and Armed Forces Group Insurance Scheme(Management Information System) (AFGIS (MIS)) schemes. These medicare schemes could provide some relief to the ESM, but it was not a comprehensive scheme as compared to and available for other Central Government Employees. Therefore, the requirement was felt of establishing a medicare system which could provide quality medicare to the retirees of the Armed Forces.

2. Based on this noble aim, and after detailed deliberations, a comprehensive scheme has taken shape as ECHS, authorised vide Government of India, Ministry of Defence letter No 22(i) 01/US/D(Res) dated 30 Dec 2002. The ECHS was launched with effect from 01 Apr 2003. With the advent of this scheme. Ex-servicemen pensioners and their dependants who were only entitled for treatment in service hospital are now authorised treatment, not only in service hospitals, but also in those civil/private hospitals which are specifically empanelled with the ECHS

3. The Scheme is financed by Govt of India.

CONCEPT OF ECHS

4. Conceptually the ECHS is to be managed through the existing infrastructure of the Armed Forces in order to minimise the administrative expenditure. The existing infrastructure includes command and control structure, spare capacity of Service Medical facilities (Hospitals and MI Rooms), procurement organisations for medical and non medical equipment, defence land and buildings etc.

5. In order to ensure minimal disruption of the Scheme during war/training and availability of ECHS services in non military areas above mentioned resources are to be supplemented as follows :-

- (a) Establishing new Armed Forces Polyclinics in Non Military areas.
- (b) Augmenting existing medical facilities/clinics in some selected military stations to cater for heavy ESM load (Augmented Armed Forces Clinics).
- (c) Empanelling civil hospitals and diagnostic centres.
- (d) Finances.

ORGANISATION OF ECHS

6. The ECHS Central Organisation is located at Delhi and functions under the COSC through AG and DGDC&W in Army HQ. The Central organisation is headed by Managing Director, ECHS, a serving Major General. Detailed Organisation of Central organisation ECHS is at **Appendix 'A'**. There are 13 Regional Centres ECHS. Their location and organisation is given at **Appendix 'B'**.

7. Details of military stations where existing medical facilities have been augmented (Augmented Armed Forces Clinics) and details of Stations where new Armed Forces Polyclinics have been established are at **Appendix 'C'**.

8. There are four types of Augmented/New Polyclinics i.e. Type 'A', 'B', 'C' & 'D'. Authorisation of Personnel in each type is given at **Appendix 'D'**.

9. **Command and Control**. The existing Command and Control Structure of the Army, Navy and Air Force have been given the Administrative and Financial Powers to run this Scheme. Station Commanders will exercise direct Control over the ECHS polyclinics. Station Headquarters will be able to clarify any doubts that you may have. ECHS Regional Centres are under Command HQ/ Area HQ. Central Org ECHS functions as part of AG's Branch, Army HQ.

ADVANTAGES OF BECOMING ECHS MEMBER

1. No age or medical condition bar for becoming a member.
2. Life time contribution ranges from Rs 1800/- to Rs 18000/- (depending upon basic uncommuted pension). The contribution rates of new retirees is under upward revision.
3. No monetary ceiling on treatment.
4. Indoor/outdoor treatment, tests and medicines.
5. Country wide network of ECHS Polyclinics.
6. Familiar environment and sense of belongingness.
7. Covers spouse and all eligible dependents.

SUMMARY OF SUPREME COURT JUDGEMENT DATED 22 AUG 2006 REGARDING MEDICAL BENEFITS FOR RETIRED ARMY MEN

1. In 1999, a petition under Article 32 of the Constitution was filed as Public Interest Litigation (PIL) by Confederation of Ex-Servicemen Associations praying for recognizing the right of full and free medicare of ex-servicemen, their families and dependants. The petition came up for hearing before a two Judge Bench during May 1999 and the Bench ordered the matter to be placed before a Bench of Five Judges. The matter was subsequently heard by a Bench of five Judges and judgement was finally given on 22 Aug 2006.

2. Supreme court has opined the following:-

- (a) A Contributory Scheme such as ECHS 'cannot be held illegal, unlawful or unconstitutional'.
- (b) One time contribution amount from Rs 1500/- to Rs 60000/- 'cannot be said to be excessive, disproportionate or unreasonably high. It cannot be held 'illegal', unlawful, arbitrary or otherwise unreasonable'.
- (c) 'Getting free and full medical facilities is not a part of fundamental right of Ex-Servicemen'.
- (d) The Court was concerned with the cases of those ESM who have retired before 01 Jan 1996.

(e) The Govt should consider granting waiver of contribution by Pre 01 Jan 1996 retiree ESMs or Govt pay contribution on behalf of such veterans.

3. Instructions were received from the Govt not to charge contribution from all Pre 01 Jan 1996 retiree ESM in future who want to become members of ECHS in Apr 2007 and the same are being implemented. For the refund of those Pre 01 Jan 1996 retiree ESM who had paid contribution and become members earlier, the case is still under consideration.

ELIGIBILITY CONDITIONS

1. **Eligibility For ECHS Membership.** The Scheme caters for medical care to all ESM pensioners including disability and family pensioners and their dependents, which includes wife/husband, legitimate children and wholly dependent parents. To be eligible for membership of ECHS a person must meet following two conditions:- (Auth Central Org ECHS letter No B/49701-PR/AG/ECHS dt 01 Jun 2006) :-

(a) Should have ESM Status.

(b) Should be drawing normal Service /Disability/ Family Pension.

Ex-Servicemen Status

2. The eligibility of the retired defence personnel for status of ex-servicemen is governed by the definition laid down by Department of Personnel and Training, Ministry of HRD, Govt of India. The definition has been undergoing changes from time to time.

3. **Those Released Before 01 Jul 1968.** Any person who had served in any rank (whether as Combatant or not) in the Armed Forces of the Union and released from there other than by way of dismissal or discharge on account of misconduct or inefficiency.

4. **Those Released on or After 01 Jul 1968 But Before 01 Jul 1979.** Any person who had served in any rank (whether as a Combatant or not) in the Armed Forces of the Union for a continuous period of not less than six months after attestation and released from there other than by way of dismissal or discharge on account of misconduct or inefficiency.

5. **Those Released on or After 01 Jul 1979 But Before 01 Jul 1987.** Any person who had served in any rank (whether as a Combatant or not) in the Armed Forces of the Union for a continuous period of not less than six months after attestation if discharged for reasons other than at their own request or by way of dismissal or discharge on account of misconduct or inefficiency and not less than 5 years of service if discharged at own request.

6. **Those Released on or After 01 Jul 1987.** An 'Ex-Servicemen' means a person, who has served in any rank whether as a combatant or non combatant in the Regular Army, Navy and Air Force of the Indian Union and

(a) Who retired from such service after earning his/her pension; or

(b) Who has been released from such service on medical grounds attributable to military service or circumstances beyond his control and awarded medical or other disability pension; or

(c) Who has been released, otherwise than on his own request from such service as a result of reduction in establishment; or

(d) Who has been released from such service after completing the specific period of engagement, otherwise than at his own request or by way of dismissal or discharge on account of misconduct or inefficiency, and has been given a gratuity and includes personnel of the Territorial Army of the following categories namely:-

- (i) Pension holders for continuous embodied service.
- (ii) Persons with disability attributable to military service; and
- (iii) Gallantry award winners.

7. The Territorial Army personnel will however be treated as Ex-Servicemen wef 15 Nov 1986.

8. Govt of India, Ministry of Defence (Deptt of Ex-Servicemen Welfare) vide its Office Memorandum No 12/1/2005/D(Res) dated 01 Feb 06 has conveyed with the approval of Hon'able Raksha Mantri that such Recruits who were boarded out/released on Medical Grounds and granted Medical/Disability Pension, will also be covered under the category of Ex-Servicemen for all practical purposes.

9. The eligibility of person for the status of ex-servicemen will be governed by the definition in vogue at the time of discharge and will not be affected by the changes in the definition subsequent to his discharge.

10. The personnel of the Army Postal Service (APS) who are a part of the regular Army and retired from such service, ie directly from the Army Postal Service itself without reversion to P&T Department with a pension or who have been released from such service on medical grounds, attributable to military service, or circumstances beyond their control and awarded medical or other disability pension are also covered within the definition of ex-servicemen with effect from 19 Jul 1989.

11. The following are also eligible for membership of ECHS:-

- (a) Members of Military Nursing Service (MNS).
- (b) Whole time officers (WTOs) of National Cadet Corps (NCC) who are Ex-Servicemen/NOK, and are in receipt of pension/disability pension/family pension. (Auth ; Central Org ECHS letter No B/49764/AG/ECHS dt 10 Oct 2003)
- (c) I588 Emergency Commissioned Officers (ECOs)/Short Service Commissioned Officers (SCOs) who were permanently absorbed in National Cadet Corps as Whole Time Officers (WTOs) after their release from the Armed Forces meeting the twin conditions of being an ex-servicemen and in receipt of pension/family pension/disability pension. (Auth ; Central Org ECHS letter No B/49764/AG/ECHS dt 10 Oct 2003)
- (d) Indian Coast Guard Pensioners and retired Personnel of Defence Security Corps. (Auth ; Central Org ECHS letter No B/49701-CG/AG/ECHS dt 02 May 08 & letter No B/49701-DSC/AG/ECHS dt 17 Apr 08)

(e) Service Officers who, prior to completing their pensionable service, joined PSUs like Air India, Indian Airlines, Pawan Hans and Shipping Corporation of India, in organisational interest, and Govt had sanctioned pension to these officers on a pro-rata basis. On secondment or transfer to PSUs these officers received their pension either as lump sum or full commutation, or on monthly basis. They would be deemed to comply with the condition of being in receipt of pension from Defence Sources. However a mandatory certificate will have to be endorsed by these ESM in their Affidavit stating that "I certify that I am NOT a member of any other govt/PSU medical health Scheme". The following documents will be submitted alongwith Application Form:-

(i) Certificate from current/last employer clearly stating that his previous pension(from service in Armed Forces) has been merged with current pension.

(ii) Copy of PPO, if available or Pension Book / Discharge Book in respect of PBOR.

(iii) Service Particulars Retired/Released Officer's (Booklet) in respect of officers.

(Auth ; Central Org ECHS letter No B/49701-PR/AG/ECHS dt 19 Apr 07)

12. **Pension**. For the purposes of eligibility for the ECHS, the word "pension" implies any type of pension received from Controller of Defence Accounts (Pension) or its subordinate offices. In case an ESM joins a second career and his pension from the Defence Services Estimates is merged, the second pension earned after retirement from the second career is also eligible for these ESM/their widows for seeking ECHS membership, subject to fulfillment of other conditions of eligibility for ECHS membership.

13. **Family Pensioner**. Implies the legally wedded spouse of an Armed Forces personnel, whose name figures in the Service Records of the personnel and whose husband/wife has died either while in service or after retirement and is granted family pension. This term also includes a child or children drawing family pension on the death of his/her pension drawing father/mother, as also parents of a deceased bachelor soldier, who are in receipt of family pension.

(Auth ; Central Org ECHS letter No B/49701-PR/AG/ECHS dt 26 Mar 2007)

14. **Eligibility Status for Dependents**. The following qualify to be dependents of ESM:-

(a) **Parents**. Father and Mother of the pensioner shall be deemed to be dependent if they normally reside with the ESM pensioner, and their combined income from all sources is less than Rs 3500/-pm. If both husband and wife are Defence Personnel, parents of both members are eligible if both pay subscription subject to meeting dependency criteria.

(b) **Spouse**

(i) Legally wedded spouse.(More than one spouse and children from the second spouse are not permitted to avail ECHS benefits).

(ii) Name should be included in the record of service.

(iii) Legally separated spouse is included as long as the ESM pensioner is responsible for her maintenance.

(iv) If the spouse is employed in Govt service then he/she can only be a member of any one Govt/Public sector medical benefit Scheme and not be a simultaneous member of two Govt medical Schemes.

(v) If a war widow remarries, then she alone is eligible. Her husband and children from him will not be eligible.

(vi) In case the ESM pensioner marries after retirement, following documents will be required as proof for dependency of wife :-

(aa) Marriage certificate from authorised Registrar of Marriages/Municipal Committee.

(ab) Fresh ECHS Application Form for enrolling the spouse as a dependent.

(ac) Part II Orders /Gen Form/Personal Occurrence published.

(c) **Daughter(s)**

(i) Her/their details must exist in the service record of the pensioner.

(ii) Unmarried as well as divorced daughter (s) with total income from all sources less than Rs 3500/-per month.

(iii) Widowed daughters who are dependant on the pensioner and whose income from all sources is less than Rs 3500/- per month are entitled.

(iv) In case daughter is born after the pensioner's joining ECHS, following documents will be required to enable the child to be declared as a dependant and to become entitled to ECHS benefits :-

(aa) Birth Certificate.

(ab) Fresh ECHS Application Form to enrol her as a dependant.

(ac) Part II Orders/Gen Forms/Personal Occurrence are required to be published stating birth of the child **or an Affidavit by the widow in case the ESM pensioner could not get Part II Orders published for birth of his children.**

(d) **Son(s)**

(i) His/their details must be included in the pensioners Record of Service.

(ii) His total income from all sources should not exceed Rs 3500/-pm. Son(s) above 25 years of age are not eligible to be dependent(s) in ECHS.

(iii) In case where the son(s) is/are born after the pensioner's joining the ECHS, the following documents will be required as proof of dependency:-

(aa) Birth Certificate.

(ab) Fresh ECHS Application Form to enroll him as a dependant.

(ac) Part II Orders/Gen Forms/Personal Occurrence stating birth of the child **or an Affidavit by the widow in case the ESM pensioner could not get Part II Orders published for birth of his children.**

(e) **Children with Permanent Disability.** Children suffering from permanent physical or mental disability and are unable to earn their livelihood are permitted to be dependents for life time, irrespective of age limit or medical condition. The certificate of disability is to be certified, by either the Service Classified Specialist or a Civil Surgeon.

(Auth ; Central Org ECHS letter No B/49701-PR/AG/ECHS dt 05 Apr 2007)

15. **Specific Conditions for Continuance of Eligibility.** In case an ESM pensioner (male/female) has declared his/her parents as dependants, they shall continue to receive ECHS benefits for their life time, subject only to the condition that their joint income from all sources does not exceed Rs 3500/-pm from all sources. In the event of the male pensioner's death, the widow shall be covered as she will start drawing family pension but, her parents will NOT become eligible as dependants. However, parents of the deceased pensioner, if already enrolled as dependants, would continue to enjoy benefits of the ECHS in the event of death of the ESM pensioner, provided their joint income from all sources does not exceed Rs 3500/- pm.

16. **Persons NOT Eligible under ECHS.** The following are NOT eligible for becoming members of ECHS:-

(a) Whole time NCC officers who do not meet the twin conditions referred to under Para 1 of this chapter.

(b) Ex-ECOs/SSCO's who do not meet twin conditions referred to at para 1 of this chapter.

(c) Legally divorced spouse.

(d) Married and/ or employed daughters/and any child whose total monthly income from all sources is more than Rs 3500/-.

(e) Son(s) above 25 years of age or who have starting earning which ever is earlier.

(f) Parents of widow/war widow.

(g) Husband of a remarried war widow. Including children born from him.

PROCEDURE FOR BECOMING MEMBER OF ECHS

1. **Procedure for Pre 01 Apr 2003 Retirees.** The procedure for becoming ECHS members applicable to the ESM pensioners who have retired on or before 31 Mar 2003 will be as follows:-
 - (a) Collect application forms from nearest Station HQs of Army/Navy/Air Force. Forms can also be downloaded from internet website www.indianarmy.nic.in/arechs.htm. Sample att at appx E.
 - (b) **Submission of Completed Application Forms.** Designated Station Headquarters of Army/Navy/Air Force are the only authorized collection points. Pensioners are required to **personally report** to their nearest Station HQs with the completed application form, alongwith original/photocopy of the following documents:-
 - (i) Pension Payment Order (PPO), copy duly attested by Bank/Treasury from where pension is being drawn. Pre-1986 pensioners may submit copy of Pension Book showing rate of pension.
 - (ii) DPDO/Bankers Certificate.
 - (iii) Discharge Book or Certificate/Dependent I-Cards (issued for Naval Offrs)/ Personnel Occurrence Report.
 - (iv) Two copies (in original) of the Military Receivable Order (MRO) as proof of deposit of contribution (Not Applicable to those who are exempted from payment of ECHS contribution).
 - (v) Affidavit duly notarised.
 - (vi) Demand Draft for Smart Cards.
 - (c) Membership will commence from the date of receipt of correctly filled Application Form at Station HQ. On receipt of correctly filled Application Form Stn HQ will give receipt to the individual.
2. **Procedure For Becoming Member of ECHS (Post 01 Apr 2003 retirees).** The ECHS membership for post 01 Apr 2003 retirees is compulsory. The contribution amount in respect of these Veterans is being deducted by the pension paying authorities. All documents (less PPO) as per para 1 (b) above alongwith Application Form will also be submitted by such retirees to their Record Offices.
3. **Commencement of Membership.** An applicant is considered a member of ECHS when his application alongwith all requisite documents is accepted at designated Stn HQ or from the date of retirement for new retirees provided his correctly filled Application Form is accepted by the Record Office.

Notes: - (a). Deduction of contribution by the CDA or deposition of contribution through MRO is no guarantee for grant of membership

(b) Identity cards issued by Zila Sainik Board will not be accepted as a proof of identification.

(c) **Fixed Medical Allowance.** ESM joining ECHS would cease to be entitled for FMA of Rs 100/-pm as authorised earlier in their PPO. The individuals should approach their Pension Disbursing Authority to ensure stoppages of FMA. ECHS will not be responsible for subsequent lump sum deduction of FMA.

(d) ECHS is not responsible for refund of excess deposition of contribution. Same should be claimed from the concerned CDA by individuals. ECHS functionaries at Station HQ/ Regional Centres will assist individuals, if requested. The refund of excess remittance of ECHS subscription, if made, will be afforded by the concerned PCDA/CDA to the beneficiaries on receipt of a pre-receipted contingent bill countersigned by the ECHS authorities along with a Xerox copy of the MRO.

4. **Disposal of Receipt after Receiving Smart Card(s).** Once an individual receives the Smart Card(s) his earlier obtained receipt will be returned and preserved alongwith his application Form at the respective Station HQs/ECHS Regional Centre.

5. **Smart Card**

(a) **The Card.** A card with a 32 KB chip is being issued to all members as proof of membership of the Scheme. The Card is usable at all the 227 polyclinics across the country, after its activation by giving thumb impression **at Parent Polyclinic.** The Smart Card stores various details, both in the physical as well as digital form, which can be accessed at all polyclinics.

(b) **Quantity.** One primary card will be issued to pensioner/ Family Pensioner and each member can have an individual card to provide flexibility of treatment across the country as per their requirement. In addition a war disabled/ battle casualty can be issued a white card for life dependency once eligibility is established.

(c) Existing members will have the option of continuing with the current card albeit with limited facilities or to opt for the new card.

(d) **Cost.** The cost of each card is Rs 135/- and is to be borne by the member.

(e) **Amendment to Card.** Any subsequent amendment to the Card desired by the member will require a fresh card to be made on approval of ECHS Organisation, and cost to be borne by the member.

(f) **Loss of Card.** In case of loss of a Smart Card (s)/Temporary Receipt ECHS member will submit application on plain paper with complete details of lost Card(s) to dependent polyclinics/Stn/HQ for issue of duplicate cards.

6. **Contribution** All ESM pensioners are required to make a one time contribution based on their uncommuted basic monthly pension (including Dearness Pension). A concession has been made in respect of old retirees, who can pay their contribution in three consecutive, equal yearly installments. Contribution rates wef 01 Apr 2004 is as under:-

Grade Pay drawn at the time of retirement	Contribution (in Rupees)
Grade Pay 1800/-, 1900/-, 2000/-, 2400/- and 2800/- per month	Rs. 15,000/-
Rs.4200 /- per month	Rs. 27000/-
Rs. 4600/- , 4800/- 5400/-, 6600/-, per month	Rs. 39000/-
Rs. 7600/- and above per month	Rs. 60,000/-

Notes (a) War Widows and Next of Kin's of deceased Soldier who are in receipt of 'Liberalized Family Pension' are exempted from payment of ECHS contribution.

(b) War disabled soldiers are exempted from payment of ECHS contribution.

(c) Pre-1996 retirees are exempted from contribution.

7. **Parent Polyclinic.** Every member will be allotted a parent polyclinic, one nearest to his permanent/ temporary residence. Irrespective of parent polyclinic a member can take treatment at any polyclinic in India. If required a member can be given referral to hospital by any polyclinic as per referral policy. However, member can be issued with only seven days medicines at a time from non parent polyclinic unless he carries a Temporary Attachment Certificate (TAC). The validity of TAC is for six months at a time.

8. **Change of Parent Polyclinic (Old Card holder).** The member is to submit the following to nearest Stn HQs for change of Parent Polyclinic:-

(a) An application on plain paper clearly giving following details:-

(i) Old ECHS Regn Number.

(ii) Old Address.

(iii) Old Parent Polyclinic.

(iv) New Address.

(v) New Parent Polyclinic.

(b) An undertaking on a separate plain paper stating that:-

(i) No information has been concealed or suppressed.

(ii) Any false information submitted will make him liable for termination of his ECHS membership.

- (c) Proof of new address like electricity/telephone/water bills/RWA certificate etc.
- (d) A fresh ECHS application form with relevant columns filled and superscribed "CHANGE OF ADDRESS " and "CHANGE OF PARENT POLYCLINIC".
- (e) Return the old cards duly defaced.
- (f) Deposit DD on the name of concerned Regional Centre @ Rs 135/-per card requested.

9. Station HQs will receive the application form and provide "**Receipt of Documents duly affixed photographs**" which will be valid for 60 days and thereafter to be revalidated if ECHS Smart Cards are not received. ECHS member should personally collect the cards from Stn HQ within 60 days of submission of application.

10. Station HQ will place the demand to SITL through concerned Regional Centre ECHS for remanufacturing of Smart Cards as per request of the member. SITL will issue fresh cards duly indicating new address and new parent polyclinic. SITL will also maintain details of old address and old parent polyclinic in their data base.

11. **Change of Parent Polyclinic (New Card holder)**. The ECHS beneficiaries those who want to change his parent (original) polyclinic will be able to do so for any polyclinic of his choice and need. Once the parent polyclinic has been changed, reversion/second change of the parent polyclinics will be admissible only upon the expiry of a period of six months. The change of the parent polyclinic can be done at the reception centre of any polyclinic with approval of OIC polyclinic.

PROCEDURES FOR TREATMENT, ISSUE OF MEDICINES AND REFERRAL PROCEDURE

1. **Treatment**

- (a) The first contact point for availing treatment for ECHS members and their dependents is the nearest ECHS Polyclinic.
- (b) The doctor (s) at Polyclinics will provide required out-patient treatment and medicines.
- (c) If further treatment or investigations are required, it will be provided through Service Hospitals, civil empanelled hospitals and diagnostic centres on referral from the polyclinic.
- (d) Patients will be referred to the local Service Hospital in the Station (if available) subject to availability of speciality/facility. Only in case of non availability of facilities or bed space at local Service Hospital, the patient can be referred to the desired empanelled hospital/diagnostic centre as per his/her choice. Once referral to empanelled facility is recommended, the ECHS member will have the right to make the selection of desired empanelled hospital in the station.
- (e) On completion of treatment in empanelled hospitals, the patient is requested to sign the bills raised by the hospital so that treatment charged for, is confirmed to have been provided.

2. **Payment to Empanelled Hospitals.** Empanelled facilities are paid directly by local Station HQ on behalf of ECHS for treatment provided or diagnostic tests carried out on ECHS beneficiaries on referral. Members are NOT to pay to empanelled hospitals. Payments made by ECHS Members to empanelled hospitals are NOT reimbursable. Payment to the empanelled facilities by ECHS is at 'rates' as per Memorandum of Agreement. Certain facilities like telephone, television, transport, food/catering (except in certain specified cases) are not entitled and charges for these, if availed, have to be borne by the patient. Certain medical procedures require prior approval as per laid down guidelines. Request for such 'prior approvals' will be initiated by the empanelled hospital on a specified 'form', which the hospital is required to submit to the concerned SEMO. Once approved, the expenditure incurred on the particular medical procedure will be borne by ECHS. Unapproved medical procedures, if carried out, should be with patient's consent. Payment for such a procedure has to be borne by the members and is NOT liable to be paid by ECHS. In case such charges are levied by empanelled hospitals without the patient's consent, please inform your Polyclinic/SEMO/Stn HQs, so that necessary action can be taken against the empanelled facilities concerned.

3. **Emergency Treatment.** In case of an Emergency, treatment can be availed as follows:-

(a) **Service Hospital.** Free treatment provided and no further action is required.

(b) **Empanelled Hospitals.** Nearest ECHS polyclinic is to be informed within 48 hr (two working days) of admission by the hospital. After verification of emergency, referral is generated by the polyclinic for the hospital. Treatment is provided by the empanelled hospital. Members are not to make any payment. However, if emergency is not established, referral will NOT be provided and member has to make payment which is NOT reimbursable.

(c) **Non-Empanelled Hospitals.** Nearest polyclinic is to be informed by the member/patient/NOK within 48 hrs (two working days). After verification, an "Emergency Information Report" (EIR) is initiated by the OIC polyclinic. Hospital bills are to be cleared by the member. In case of emergency in a station other than home station of the ECHS beneficiary, the EIR is to be obtained from the nearest Polyclinic. In case of emergency in a station without any Polyclinic, the nearest Polyclinic should be informed by telephone/fax/telegram. Proof of such intimation should be attached with the claim. Claim for re-imburement alongwith original bills and investigation reports, bill summary, discharge summary, photocopy of ECHS Smart Card, Emergency Certificate by the Hospital/treating doctor and the EIR should be submitted alongwith a written application by the member to the OIC Polyclinic explaining circumstance of emergency (briefly) and with a request to process the claim. All bills of treatment will be submitted to parent polyclinic within one month of termination of hospitalization. Onus of proving emergency lies with the ECHS member. Reimbursement will be admitted **at approved rates and subject to conditions.**

4. **Conditions of Emergency.** It is emphasised that ECHS is designed to be a cashless scheme as far as possible. Treatment is to be availed at authorised hospitals ON REFERRAL ONLY. Reimbursement is permitted only in circumstances which are unavoidable due to absolute Emergency. The conditions of Emergency are as under:-

- (a) Acute Cardiac conditions/syndromes.
- (b) Vascular catastrophies.
- (c) Cerebro-Vascular accidents.
- (d) Acute respiratory emergencies.
- (e) Acute abdominal pain.
- (f) Life threatening injuries.
- (g) Acute poisonings and snake bite.
- (h) Acute endocrine emergencies.
- (j) Heat stroke and cold injuries of life threatening nature.
- (k) Acute renal failure.
- (l) Severe infections leading to life threatening situations.
- (m) Any other condition in which delay could result in loss of life or limb.

Auth : Central Org ECHS letter No B/49774/AG/ECHS/Referral dt 01 Dec 09.

5. In cases where date of emergency hospital admission is PRIOR to membership, reimbursement for ongoing emergency that spell of hospitalisation is NOT reimbursable.

6. **Issue of Medicines**

- (a) Members/dependants are required to visit polyclinics and register themselves for issue of any kind of medicine. Superspeciality medicines may take some time for procurement. Medicines will be issued for duration as prescribed by the treating doctors.
- (b) Medicine issues will be on the basis of Generic names only.
- (c) For patients with chronic diseases on long term treatment, medicines may be issued for a max period of 90 days at a time, if the treating doctor prescribes and review of the patient during the period is not due.
- (d) Medicines issued from any polyclinic other than "Parent Polyclinic" will be restricted to a max of 07 days at a time, unless Temporary Attachment Certificate is carried.
- (e) For patients admitted/advised treatment in Service Hospital, medicines for upto one month will be issued from the Service Hospital concerned on discharge. However, for long term medications, patient will get medicines for use beyond one month period from his/her parent polyclinic. For this, the patient should put in a demand (beyond one month) with his Parent Polyclinic AS SOON AS POSSIBLE.

(f) Medicines prescribed on discharge from empanelled hospitals will be issued from Polyclinic. However, if the same is not available, the following action will be taken:-

(i) In Non Military Station OIC Polyclinic will arrange procurement through SEMO and issue at the earliest.

(ii) In Non Military Stations, the OIC Polyclinic can procure essential medicine requirement for 07 days at a time from an empanelled chemist and issue to the patient. Vitamins, minerals, nutritional supplements and Tonics will NOT to be purchased from Empanelled Chemist unless Therapeutically prescribed.

(iii) In following cases patients can purchase medicines for one month period after discharge from hospital/review if the same is 'Not Available' from Polyclinic, and claim reimbursement of the same:-

- (aa) Post operative cases of major Cardiac Surgery/Interventional Cardiology.
- (ab) Oncology.
- (ac) Post operative organ transplant cases.
- (ad) Post operative joint replacement cases.
- (ae) Post operative major Neurosurgical/Neurology cases.

(g) Only generic medicines will be issued from Polyclinics. Generic equivalent of Branded medicines prescribed by Specialists of empanelled Hospitals will be issued. Branded medicine may be issued on non availability of generic equivalent in the existing list of PVMS and NIV drugs only. This list contains all the essential drugs, as approved by the DGAFMS, and is updated periodically.

Auth ; Central Org ECHS letter No B/49773/AG/ECHS dt 05 Apr 2004, B/49762/AG/ECHS dt 23 Oct 2006 and B/49762/AG/ECHS dt 04 Aug 06.

7. **Equipment For Home Use.** Specified medical equipment has been authorised by the Govt to be issued to the ECHS members for home use, under laid down conditions. List of authorised equipments is as under:-

- (a) Hearing Aids.
- (b) Artificial Limbs/Appliances.
- (c) Glucometers and Nebulisers.
- (d) CIPAP/BIPAP Machines.
- (e) Spectacles (For post conventional cataract surgery cases only).

Auth : Central Org ECHS letter No B/49773/AG/ECHS dt 05 Apr 2004.

8. The required equipment/appliance will be issued to the member when home use of such equipment is considered absolutely essential on medical grounds, on recommendations of the Service Specialist and approval of Senior Advisor and / or Consultant of the concerned speciality as applicable.

9. The equipment will be procured through a special demand by the OIC polyclinic. Consumables on the equipment will be issued under arrangements of OIC Polyclinic. Cost

of repair and annual maintenance contracts will be borne by the members themselves and will not be reimbursable.

10. **Concept of Referral**

(a) **Treatment at Polyclinics**. Referrals from Polyclinics will only be made once all available facilities of the Polyclinic are fully utilized. Polyclinics are basically points of treatment and only those patients needing additional diagnostic tests/consultation/hospitalisation should be referred beyond the ECHS Polyclinic.

(b) **Referral for General Service Facilities**

(i) Referral for general specialities not available in Polyclinic, will be to a Service Hospital having the requisite facility and located in the station, subject to load at the time of the referral.

(ii) For Facilities not available in the local Service Hospitals and in Non Military Stations, patients may be offered the choice of being referred to an Empanelled Facility/Govt Hospital/Institute of National Repute or to the nearest Service Hospital having the facility.

(c) **Referral for Specialised Services**. Referral for Super Specialities (like Cardiology, Oncology etc) can only be made by a Specialist at the Polyclinic or on the advice of concerned specialist of Service Hospital, subject to load, or concerned specialist of Local Govt Hospital or concerned specialist of empanelled hospital (in the absence of Service Hospital/Facility).

(d) **Hospital Admission**. All cases requiring hospital admissions will be referred to Service Hospitals except under the following circumstances:-

(i) Non availability of beds in the concerned ward of Service Hospital, at that point of time.

(ii) Non availability of concerned Specialist Facility in the Service Hospital at that point of time.

(iii) Non availability of machine time/laboratory time for referral on account of diagnostic tests.

(iv) In Non Military Stations.

(v) In Military Stations without Service Hospitals.

(e) In case of referral to Empanelled Facilities an endorsement will be made under signature of Officer-In-Charge Polyclinic stating as under:-

(i) **Military Stations with Service Hospitals**

“Verified that Beds/Speciality/Facility is Not Available in the local Service Hospital at present.”

(ii) **Non Military Stations/Military Stations without Service Hospital**

“There is no Service Hospital located in the Station.”

MISCELLANEOUS ISSUES

1. **Travelling Allowance For Patients.** Patients are entitled to return journey Rail fare when referred to a medical facility in other stations (nearest available) during an intercity move for treatment. The attendants, if authorised to move alongwith patient in the referral sheet, would also be entitled to claim return rail fare in the entitled class of ESM. Entitled class of train will be same as entitled immediately before retirement of the member.

Notes:- (a) Production of Original Rail Tickets/Public Bus for reimbursement is compulsory.

(b) Travel by Pvt Car/Taxi or by Civil Air is not authorised.

(c) Reimbursement will be limited to rail fare authorised or actual expenditure whichever is less.

Auth : Central Org ECHS letter No B/49782/AG/ECHS dt 08 Nov 05

2. **Use of Ambulance.** Ambulance is available at the Polyclinics for transportation of patients on recommendations of medical officer. Ambulance can be used for sick transfer from ECHS Polyclinic to Service/Empanelled Hospital where referred. Such use will ordinarily be restricted to within municipal limits of town/city. However, where the nearest Service Hospital is outside the city/station limits, the ambulance may be utilised provided the Medical Officer-in-charge considers that conveyance, by other means will be detrimental to the health of the patient.

3. The Officer-in-Charge Polyclinic, in consultation with Medical Officer-in-Charge Polyclinic may prioritize the use of Ambulance in a particular situation when more than one patient needs to be evacuated/transferred.

4. More than one patient may be transferred at the same time as per the situation, keeping in mind the essentiality of use and health of the patients.

5. Nursing Assistant/Nurse alongwith Oxygen cylinder/IV line may accompany the patient as per the requirement of the case.

6. **Treatment of Senior Citizens.** Patients above 75 years of age in case of males and 70 years in case of females will be given priority for registration, treatment and issue of medicines in the ECHS Polyclinics. They would be attended out of turn. (Auth ; Central Org ECHS letter No B/49701-PR/AG/ECHS dt 19 Nov 07)

7. **Advisory Committee : ECHS Polyclinics.**

The Advisory Committees have been appointed with the primary aim to take feed back of the users (Armed Forces Veteran) in the functioning of ECHS to enhance clientele satisfaction. The regular meetings of Advisory Committees will be organised at respective Stn HQs as under :

(a) **Frequency of meeting** Min once in quarter Meeting could combined for more than one Polyclinic if they are located closely.

- (b) **Attendance** To be presided over by the Sub Area Cdr/Stn Cdr and attended by SEMO Director Regional Centre and OIC Polyclinics apart from members of Advisory Committee.
- (c) **Suggestion.** All suggestion/queries to be recorded. Redressal to be given at appropriate level upto HQ Comd. Policy issue to be referred to Central Organisation.
- (d) **Expansion of ECHS.** A case for addl 199 Ex-servicemen Contributory Health Scheme polyclinic and 15 Regional Centres to expand Ex-servicemen Contributory Health Scheme network has been approved by the Govt on 26 May 2010. The list of Polyclinics attached at appendix F.
- (e) **ECHS Membership to Nepal Domiciled Gorkhas (NDG).** The proposal to extend the Ex-servicemen Contributory Health Scheme facilities to Nepal Domiciled Ex-Servicemen has been approved by the Government. However, the NDG veterans will have to visit polyclinics and empanelled hospitals located in India to avail the Ex-servicemen Contributory Health Scheme benefits. Draft Govt letter has been fwd to MoD for their approval.

EMPANELMENT OF HOSPITALS/DIAGNOSTIC CENTRES/ DENTAL CLINICS

1 **General.** Empanelment of civil/private hospitals, Diagnostic Centres and Dental Clinics is initiated under arrangements of local Station Commanders on behalf of ECHS. Private medical facilities have to be willing to get empanelled and follow ECHS rates as well as meet the qualitative requirements of ECHS.

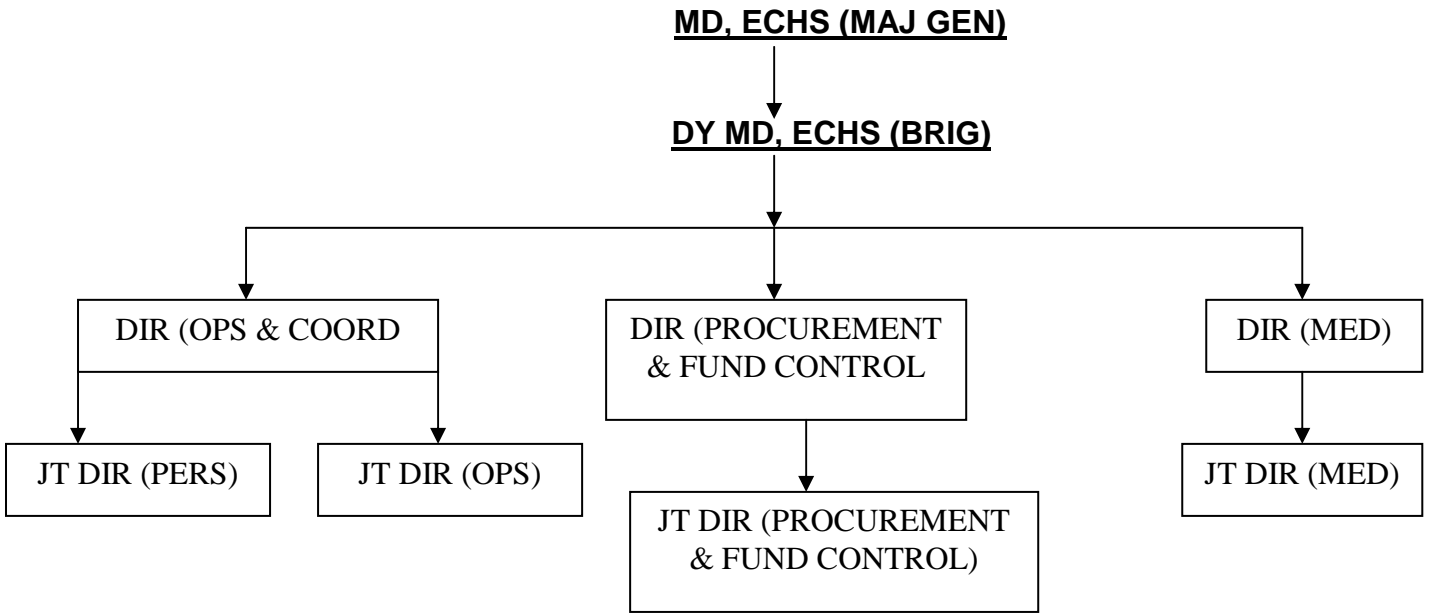
2 **Empanelment Procedure.** The Hospital, Diagnostic/Dental Centre is required to apply on prescribed application form available at all Station Headquarters on payment of Rs 100/-. A Board of Officers will be constituted under the Chairmanship of Station Commander to inspect the facilities applied for empanelment. On recommendations of HQ Commands, approval for empanelment will be accorded by the Empowered Committee of Ministry of Defence. On approval, a Memoranda of Agreement will be signed with the approved Hospital/Nursing Homes, Dental Clinic or Diagnostic Centres after which treatment of ECHS patients can commence.

MISC

1. ECHS website - www.indianarmy.nic.in/arechs.htm
2. E mails - mdech-mod@nic.in
dymdech-mod@nic.in
dirops-mod@nic.in
dirmedech-mod@nic.in
dirpfcechs-mod@nic.in
jdclechs-mod@nic.in
jditechs-mod@nic.in

Appx 'A'

STRUCTURE OF CENTRAL ORG



Appx 'B'**TELE NO : REGIONAL CENTRES ECHS**

Regional Centre ECHS	Tele no
RC Jammu	0191-2433139
RC Chandimandir	0172-2589400
RC Delhi Cantt	011-25682657
RC Jaipur	0141-2249159
RC Lucknow	0522-2482745
RC Jabalpur	0761-2608177
RC Pune	020-26334257
RC Patna	06115-225955
RC Hyderabad	040-27797932
RC Chennai	044-25673092
RC Kochi	0484-2373394
RC Kolkata	033-22318988
RC Guwahati	0361-2642727

Appx 'D'**AUTH OF MANPOWER : POLYCLINICS**

S.NO	DETAILS	TYPE 'A' & 'B'		TYPE 'C' & 'D'	
		MIL	NON-MIL	MIL	NON-MIL
1.	Medical Officer	02	02	01	02
2.	Medical Specialist	01	02	-	01
3.	Dental Officer	01	02	01	01
4.	OIC (Non Medical)	01	01	01	01
5.	Gynaecologist	-	01	-	-
6.	Nursing Asst/Nurse	03	03	01	02
7.	Lab Asst	02	02	01	01
8.	Dental Hygienist	01	01	-	-
9.	Receptionist	-	01	-	-
10.	Driver	01	03	01	01
11.	Peon	01	01	01	01
12.	Safaiwala	01	01	01	01
13.	Female Attendant	01	01	01	01
TOTAL		15	21	09	12