

Tele : 25684645
Telefax : 011-25684946
Email : diritechs-mod@nic.in

Central Organisation ECHS
Adjutant General's Branch
Integrated HQ of MoD (Army)
Maude Lines
Delhi Cantt- 110 010

B/49711-SC/AG/ECHS

10 Feb 2017

IHQ of MoD (Navy)/DIR ECHS (N)
Air HQ (SP), Dte of AV, Subroto Park
HQ Coast Guard
HQ Southern Command (A/ECHS)
HQ Eastern Command (A/ECHS)
HQ Western Command (A/ECHS)
HQ Northern Command (A/ECHS)
HQ Central Command (A/ECHS)
HQ South Western Command (A/ECHS)
HQ Andaman & Nicobar Command (A/ECHS)
HQs Training Command AF, Bangalore
All Regional Centres ECHS

**SELF ATTESTATION FOR DEPENDENT SONS AND DAUGHTERS
ABOVE 18 YEARS OF AGE FOR AVAILING ECHS BENEFITS**

1. Pl ref ECHS membership form available for download on www.echs.gov.in wherein dependent details are endorsed in part II of the application.
2. In order to institute a check mechanism for preventing unauthorised dependents above 18 years of age availing ECHS facility, the following is directed:-
 - (a) A self attested proforma as per format (Copy att) available for download in the download section of ECHS website shall be filled and rendered, wef 01 Mar 2017 by all beneficiaries who have dependent children above 18 yrs of age.
 - (b) The form will be self attested by primary beneficiary, dependent and the same shall be countersigned by the OIC of parent polyclinic.
 - (c) The validity of self attested proforma will be one year from the date of signature, on expiry of validity a fresh proforma shall be prepared.
 - (d) For availing treatment at empanelled hospitals, in addition to the ECHS Card, beneficiary would need to furnish a self attested copy of this document to the hospital.
3. **All Comd HQs(A).** Instructions to this effect may pl be communicated to all Polyclinics in your AOR.
4. **Dir RCs.** Directions to this effect are being passed to BPA so as to make this proforma a mandatory document for processing the Hospital's bills. All Dir RCs are

requested to sensitize empanelled hospitals towards this, as also all OIC Polyclinics to ensure that this document is uploaded along with all reimbursement claims of individuals.

5. Forward for strict compliance please.

(Sanjeev Saroch)
Col
Dir (Ops & Coord)
for MD ECHS

Encls:- As above

Internal:-

Ops & Coord
Med
P&FC
C&L
Claim
Emp

Copy to:-

M/s UTI-ITSL
UTI Bhawan,
Plot No.3, Sector 11
CBD Belapur, Navi Mumbai
Maharashtra - 400614

1. You are requested to instruct all verifiers to ensure that this document is verified as an essential document while checking the bills of dependents above 18 yrs of Age.
2. Hard copy submitted by Hospital must be cross checked with the copy uploaded alongwith the online bill.
3. Request pass suitable directions and incorporate provisions in the online portal accordingly.

