Ex-Servicemen Contributory Health Scheme
Regional Centre, Guwahati
GOC 101 Area interacting with Dimapur Polyclinic Staff

Surprise visit to an empanelled hospital by JD(HS)
MESSAGE FROM THE MANAGING DIRECTOR

1. I compliment Regional Centre ECHS, Guwahati for compilation of the latest ECHS policies as part of their second Newsletter.

2. The challenges are immense and with ownership and contribution by all the stakeholders, we will ensure that we are able to meet the aspirations of our veterans and their families. 'On-line billing' is one step in this direction. The aim is to ensure transparency, commitment and reach in execution of the scheme.

3. I am confident that the efforts made by Regional Centre ECHS, Guwahati and other agencies associated with ECHS will result in improved health cover to our ESM settled in North Eastern States. I convey my good wishes to them for further improving the ECHS cover in the Region.

4. I wish our ESM fraternity happiness, prosperity and good health.

Jai Hind

(AP Bami)
Maj Gen
Managing Director
FROM DIRECTOR'S DESK

Improvement of ECHS cover in seven states of the North-Eastern region has continued with full dedication and vigor since publication of our last News Letter. Goalpara Polyclinic has become 19th functional Polyclinic in the region.

Since revision of CGHS rates for Guwahati, we are in touch with 16 hospitals to get them empanelled with ECHS. Few of them are still reluctant due to various reasons but a number of hospitals have shown interest. Brahmaputra Diagnostics & Hospital at Dibrugarh and Hayat Hospital at Guwahati have been empanelled since publication of the last News Letter. Our main concern is to empanel hospitals in those areas where empanelled facilities are presently not available.

Infrastructure for On Line Billing (OLB) of medical bills has been created and we have started OLB with effect from 01 Apr 2015. Most of the empanelled hospitals have been persuaded to agree for OLB. Few empanelled hospitals are still unenthusiastic in going for OLB and efforts are on to convince them.

We have given updated Frequently Asked Questions (FAQs) at the end of this News Letter for the benefit of ECHS fraternity.

I will be proceeding on superannuation in Jun 2015 and this being the last News Letter of my tenure; I would like to take this opportunity to thank everyone associated with me in our quest to make ECHS more effective and ESM friendly in the North-Eastern Region. I am confident that ECHS will keep scaling greater heights in years to come and remain an indispensible and trustworthy part of our ESM in the hour of need.

Jai Hind

[Signature]

(Anurag Bahukhandi)
Colonel
01 June 2015
LATEST UPDATES ON IMPORTANT ISSUES

Referral to empanelled hospital. In the absence of Medical Specialist as well as Medical Officer in a Polyclinic, AFVs can be referred to empanelled/Govt hospitals by OsIC ECHS Polyclinics.


Management of cases of infertility under ECHS. There is an increase in rate for IVF from Rs.20,000/- to Rs.65,000/- per trial with maximum of three trials permitted.

(Auth: Central Org ECHS letter No B/49701/AG/ECHS/IVF dt 29 Sep 2014)

Rates for cancer surgery for empanelled hospitals. Rates of Tata Memorial Hospital, Mumbai (2012) for Cancer surgical procedures are treated as CGHS rates for NABH accredited hospitals. For Non NABH accredited hospitals the rates would be reduced by 15%. These rates are for treatment for Semi Private ward entitled class with 10% decrease for General Ward and 15% enhancement for Private ward entitled beneficiaries.

(Auth: Central Org ECHS letter No B/49773/AG/ECHS/Rates/Policy dt 09 Dec 2014)

Revised CGHS Rates. CGHS rates have been revised for Guwahati Region with effect from 17 Nov 2014 and are available on CGHS web site.

(Auth: Central Org ECHS letter No B/49773/AG/ECHS/Rates/Policy dt 19 Nov 2014)

Revision of ceiling rates for various coronary / vascular stents for ECHS beneficiaries. Revised Ceiling rates of Drug Eluting Stents is Rs.23,625/- (including of all taxes).

(Auth: Central Org ECHS letter No B/49773/AG/ECHS/Rates/Policy dt 06 May 2014)

Choice of costlier IOL / coronary stent / any other authorized implant / device / equipment for ECHS beneficiaries. ECHS beneficiaries can use an implant/device of a higher cost like Intra Ocular Lenses/Coronary Stent/any other authorized implant/device/equipment by paying the difference in cost from the ceiling limit.

(Auth: Central Org ECHS letter No B/49773/AG/ECHS/Rates dt 17 Dec 2014)
Revision of ceiling rates for cardiac implants. Revised ceiling rates of Cardiac implants are as follows:-

<table>
<thead>
<tr>
<th></th>
<th>Description</th>
<th>Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>(a)</td>
<td>Single Chamber Cardiac Pacemaker without rate response</td>
<td>Rs.34,840/-</td>
</tr>
<tr>
<td>(b)</td>
<td>Single Chamber Cardiac Pacemaker with rate response</td>
<td>Rs.44,928/-</td>
</tr>
<tr>
<td>(c)</td>
<td>Dual Chamber Cardiac Pacemaker</td>
<td>Rs.83,200/-</td>
</tr>
<tr>
<td>(d)</td>
<td>Bi-Ventricular Pacemaker (CRT-P)</td>
<td>Rs.1,95,000/-</td>
</tr>
<tr>
<td>(e)</td>
<td>Implantable Cardiolverter Defibrillator (Single Chamber)</td>
<td>Rs.1,75,786/-</td>
</tr>
<tr>
<td>(f)</td>
<td>Implantable Cardioverter Defibrillator (Dual Chamber)</td>
<td>Rs.1,75,000/-</td>
</tr>
<tr>
<td>(g)</td>
<td>Combo Device (CRT-D)</td>
<td>Rs.4,90,000/-</td>
</tr>
<tr>
<td>(h)</td>
<td>Aortic Stent Graft (expandable, bifurcated and including delivery system)</td>
<td>Rs.4,40,960/-</td>
</tr>
<tr>
<td>(j)</td>
<td>Rot ablator with advancer</td>
<td>Rs.49,920/-</td>
</tr>
<tr>
<td>(k)</td>
<td>Rot ablator Burr</td>
<td>Rs.23,920/-</td>
</tr>
</tbody>
</table>

(Auth: Central Org ECHS letter No B/49773/AG/ECHS/Rates/Policy dt 06 Aug 2014)

Revision of ceiling rates for intra ocular lenses (IOL). Revised Ceiling rates for IOL are as follows:-

<table>
<thead>
<tr>
<th></th>
<th>Description</th>
<th>Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>(a)</td>
<td>Hydrophobic Foldable IOL (Multi-piece/Single piece Aspheric)</td>
<td>Rs.5,800/-</td>
</tr>
<tr>
<td>(b)</td>
<td>Hydrophilic Acrylic IOL</td>
<td>Rs.4,500/-</td>
</tr>
<tr>
<td>(c)</td>
<td>PMMA IOL (AC/PC)</td>
<td>Rs.500/-</td>
</tr>
<tr>
<td>(d)</td>
<td>Scleral Fixated IOL</td>
<td>Rs.3,500/-</td>
</tr>
</tbody>
</table>

Reimbursement for LASIK Surgery and INTACS Rings is not recommended. Therapeutic and Bandage contact Lenses for Keratoconus of Corneal Ulcers can be considered on a case to case basis.


Approved rates of investigation. The following CGHS revised rates for various investigations have been made applicable for all ECHS empanelled facilities:-

<table>
<thead>
<tr>
<th>S No</th>
<th>Investigations</th>
<th>Non-NABL rates</th>
<th>NABL</th>
</tr>
</thead>
<tbody>
<tr>
<td>(a)</td>
<td>Dengue Serology</td>
<td>Rs.510/-</td>
<td>Rs.600/-</td>
</tr>
<tr>
<td>(b)</td>
<td>FTS3</td>
<td>Rs.106/-</td>
<td>Rs.125/-</td>
</tr>
<tr>
<td>(c)</td>
<td>FTS4</td>
<td>Rs.106/-</td>
<td>Rs.125/-</td>
</tr>
<tr>
<td>(d)</td>
<td>Widal Test</td>
<td>Rs.60/-</td>
<td>Rs.70/-</td>
</tr>
</tbody>
</table>

(Auth: Central Org ECHS letter No B/49773/AG/ECHS/Rates/Policy dt 26 Dec 2014)
Reimbursement of blood transfusion charges. The rates of whole blood/blood components has been revised by CGHS vide their OM No S-11045/36/2012-CGHS (HEC) dt 26 Nov 2014 and has been made effective from 15 Dec 2014 by Central Organisation, ECHS for ECHS beneficiaries as follows:

<table>
<thead>
<tr>
<th></th>
<th></th>
<th>Per unit</th>
</tr>
</thead>
<tbody>
<tr>
<td>a</td>
<td>Whole Blood</td>
<td>1450/-</td>
</tr>
<tr>
<td>b</td>
<td>Packed Red Cell</td>
<td>1450/-</td>
</tr>
<tr>
<td>c</td>
<td>Fresh Frozen Plasma</td>
<td>400/-</td>
</tr>
<tr>
<td>d</td>
<td>Platelet Concentrate (RDP)</td>
<td>400/-</td>
</tr>
<tr>
<td>e</td>
<td>Cryoprecipitate</td>
<td>200/-</td>
</tr>
<tr>
<td>f</td>
<td>Platelet Concentrate – Aphaeresis</td>
<td>Should not exceed 11000/-</td>
</tr>
</tbody>
</table>

(Auth: Central Org ECHS letter No B/49773/AG/ECHS/Rates/Policy dt 15 Dec 2014)

Authentication of medical bills by ESM/NOK. Mobile numbers of all ECHS beneficiaries need to get registered with dependant/nearest ECHS Polyclinic. All the medical bills must have signature of ECHS beneficiary/NOK/relatives of the patient when submitted for claim, so that the ECHS facilities cannot be misused by non entitled person. No bills without mobile number and authentication by AFV/NOK/relatives of AFV shall be accepted for further processing.

(Auth: Central Org ECHS letter No B/49778/AG/ECHS/Claim/Policy dt 04 Sep 2014)

**CHANGE OF ADDRESS AND POLYCLINIC**

- Submit following documents to nearest Stn Cell ECHS/ Regional Centre :-
  - Application on plain paper clearly mentioning old ECHS regn number, old address, old parent Polyclinic, new address & new parent Polyclinic.
  - Undertaking on a separate plain paper stating that no information has been concealed or suppressed and any false information submitted will lead to termination of ECHS membership.
  - Proof of new address like electricity/ telephone/ water bills/ RWA certificate etc.

- Policy for change of parent Polyclinic has been issued vide Central Organisation ECHS letter No. B/49701-PR/AG/ECHS dated 31 Jul 2014. Main points given in the letter are:-
  - ECHS beneficiary will have the choice of choosing his parent Polyclinic closest to his place of residence irrespective of his district or Station Headquarter.
  - ESM pensioner will be able to apply for ECHS card from the nearest Station Headquarter.
  - ESM holding old card with a parent Polyclinic may apply for the necessary change to his chosen Polyclinic under intimation to his parent Polyclinic. All details of ECHS beneficiary including medical equipment issued to the beneficiary will be updated in new Polyclinic.
• Feedback received from the environment showed that ECHS beneficiaries relocating to new station were not getting authorized ECHS services due to misinterpretations of policies by OsIC Polyclinics. Temporary Attachment Certificate (TAC) procedure was adopted in order to facilitate the OsIC to plan their invoice/reorder level of drugs. With the up gradation in software, a new patch in the software enables any Polyclinic to change the parent Polyclinic of a beneficiary from the reception window for both old and new smart cards. Following is to be adhered while incorporating any changes in the card:-

✔ Change in the parent Polyclinic will be allowed only twice in a year and maximum five changes can be done at the Polyclinic level. Any further change will be done through Regional Centre.
✔ Change of parent Polyclinic within NCR is not permitted. However, if any such change is unavoidable, it will be incorporated on approval from Regional Centre.
✔ Non expendable medical stores can only be issued by the parent Polyclinic.


• Based on subsequent feedback from environment, temporary attachment procedure has been abolished. ECHS beneficiaries may now receive treatment/referral from any ECHS Polyclinic on production of ECHS Smart Card. In order to minimize procedural hassles and hardships to veterans, following simplified procedure will be adopted:-

✔ A veteran reporting sick at a Polyclinic other than his parent Polyclinic can easily be identified at the reception (the computer shows the card belonging to other Polyclinic by a pop up window). The outstation veteran will be given an option of changing his parent Polyclinic or continue as a temporary member. He will be explained that in case he opts for change of Polyclinic, he will not be able to change it again for duration of six months.
✔ In case the veteran opts for change of parent Polyclinic, then the same will be executed through the registration computer. He will be entitled to draw medicines for the prescribed duration.
✔ In case the veteran opts for treatment without change in parent Polyclinic, he will be entitled to draw medicines only for duration of seven days at a time. All other facilities for medical treatment except non-expendable medical equipment such as hearing aid will be entitled to him at par with those available at parent Polyclinic.
✔ An intimation regarding outstation member joining the Polyclinic as permanent member (opting for new parent Polyclinic) will be sent to previous parent Polyclinic and Regional Centre as per format given in Central Org ECHS letter No. B/49711/AG/ECHS dated 25 Mar 2011.
✔ On receipt of intimation, the previous parent Polyclinic will send details of non-expendable medical equipment issued to the beneficiary to new parent Polyclinic by post.
✔ OIC Polyclinic will submit a monthly return to the Regional Centre regarding outstation members who have opted for his Polyclinic as parent Polyclinic as per format given in Central Org ECHS letter No. B/49711/AG/ECHS dated 25 Mar 2011.
✓ Record of non-expendable medical equipment issued to the member by parent polyclinic should be available in the Smart card. In case the record is not available then the same will be obtained by post from erstwhile parent Polyclinic before issuing such stores to the member.

**ROUTINE MEDICAL TREATMENT**

- Report to Polyclinic.
- OPD treatment at Polyclinic. Hospital admission/ referral to specialist at service hospital/ empanelled hospital by MO Polyclinic.
- Beneficiary can go to empanelled hospital of his choice.
- In military stations, ECHS beneficiaries referred to local Service Hospital subject to availability of bed space and / or specialist facility.
- Patients referred directly to civil empanelled facilities of patient’s choice by MO/Med specialist at ECHS Polyclinics in case of non existence of medical facility at the Service Hospital.
- In non-military Stations, direct referral to Empanelled Hospital is permitted.
- Patients desirous of treatment in Service Hospitals will be referred to Service Hospital even from non military stations.
- After referral, report to referred Hospital for required consultation / treatment / diagnostic procedure.
- No payment by ECHS member to the referred medical facility.

**EMERGENCY MEDICAL TREATMENT (EMPANELLED HOSPITAL)**

- Report to empanelled hospital. Prove identity through ECHS Smart Card/receipt.
- Empanelled hospital to inform the nearest ECH Polyclinic within 24 hours and get Emergency Referral (ER) from PIC Polyclinic.
- No payment to be made by ECHS patient. Hospital will raise bill to ECHS.

**EMERGENCY TREATMENT (NON EMPANELLED HOSPITAL)**

- ESM or his representative to inform the nearest Polyclinic within 48 hours of emergency admission.
- Emergency Report to be collected from OIC Polyclinic.
- Patient to clear the hospital bill and claim reimbursement from parent Polyclinic.
- Reimbursement is limited to CGHS rates only.
- Claim to be submitted within a month of discharge.

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- Emergency Report to be collected from OIC Polyclinic.
- Patient to clear the hospital bill and claim reimbursement from parent Polyclinic.
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- Claim to be submitted within a month of discharge.
ISSUE OF MEDICINE ON DISCHARGE FROM EMPANELLED HOSPITALS

“Whenver medicine needs to be continued post discharge of an ECHS beneficiary from an empanelled hospital, the same will be issued by the treating hospital at the time of discharge for seven days and cost of the same be billed in the consolidated final hospital bill submitted to ECHS.”

MEDICAL FACILITIES FOR IN-PATIENT TREATMENT AND POST-OPERATIVE FOLLOW UP TREATMENT TO ECHS BENEFICIARIES RESIDING IN DISTRICTS NOT COVERED BY ECHS

- ECHS beneficiaries who are holding a valid ECHS Card and are residing in districts not covered by ECHS shall be eligible to obtain treatment from Government Hospitals and submit the medical re-imbursement claim to the ECHS Polyclinic (i.e. they can avail the treatment without obtaining referral from Polyclinic located outside their district).
- Re-imbursement shall be limited to the CGHS rates applicable to the nearest ECHS Polyclinic and as per the ceiling rates and ward entitlements or as per actual whichever is lower.
- ECHS beneficiaries who are holding a valid ECHS card and are residing in districts not covered by ECHS shall be eligible to obtain post-operative follow-up treatment from Government Hospitals in follow up cases of Renal Transplant, Surgery Knee and Hip Joint Replacement, Cancer Treatment, Neuro Surgery and Cardiac Surgery. However, prior permission (referral) is to be obtained from the OIC of nearest ECHS Polyclinic.
- Permission shall be issued for 3 to 6 months at a time and may be extended based on medical requirement. Reimbursement for consultation, procedures and investigations shall be limited to CGHS rates applicable to the nearest ECHS polyclinic and as per the ceiling rates and ward entitlements or as per actual whichever may be lower. OPD medicines shall be obtained from the concerned Polyclinic for a maximum period of 3 months at a time.

FACILITIES FOR SENIOR CITIZENS

- ‘PRIORITY’ for out of turn attendance at reception, examination by Doctors, lab tests and issue of medicines etc is given to ECHS members who are 75 years & above (Male) and 70 years & above (Female).

MEDICINES

- ECHS member not required to purchase any medicines prescribed by an ECHS doctor/ empanelled hospital. Medicines will be provided by the ECHS Polyclinic.
- At times, brand name of the particular medicine issued may be different from that prescribed by an empanelled hospital. However, drug of the same chemical composition (Generic name) will be issued.
- Please do not insist on a brand name of any medicine.
- It is ensured that the standard and quality medicines are provided to the ECHS clientele.
- Issue of medicines for chronic illness / long term treatment and outstation cases as follows:-
  ✓ Medicines from the parent ECHS Polyclinic will be issued up to a maximum of 90 days for chronic diseases where review not required.
  ✓ Such patient when visiting some other outstation, can be issued medicines from any specified ‘Out station polyclinic’ (Other than parent Polyclinic) up to a maximum 90 days at a time against ‘Temporary Attachment Certificate’ obtained from parent polyclinic.
  ✓ Without ‘Temporary Attachment Certificate’ medicines will be issued by outstation Polyclinic for seven days only.
  ✓ Reimbursement of medicine cost in exceptional cases only. Permitted ONLY if patient referred by Polyclinic for certain specialty treatment and the medicines were prescribed to be taken with immediate effect on discharge from Hospital.

**DOs AND DON’Ts**

**DOs**
- Do visit your ECHS Polyclinic whenever you need Medical Aid.
- Do exercise your option of being referred to empanelled facility of your choice in the same station but only when referral is advised by Polyclinic and service hospital facilities are not available.
- Do carry your referral Form and ECHS Card to the Empanelled facility.
- Do try to choose a Service / Empanelled Hospital in an emergency-you won’t have to pay.
- Do inform your Polyclinic within 48 hrs when admitted in an Emergency.
- Do allow some time for Polyclinic to procure super specialty drugs prescribed for you, if not readily available.

**DON’Ts**
- Do not go to Empanelled Hospital without referral from ECHS Polyclinic except in Emergency.
- Do not pay bills in Empanelled Hospitals. There is no provision for re-imbursement. ECHS will clear hospital bills.
- Do not insist for referral for facilities available in the Polyclinic, it is not authorized.
  - Do not insist on particular brand name of drug from Polyclinic. Doctor may issue you different brand but with same Pharmacological composition.
  - Do not ask for drugs prescribed by private doctors without referral from Polyclinic.
  - Do not purchase drugs your self and ask for re-imbursement it is not authorized.
  - Do not accept sub-standard treatment at Empanelled Hospital Report to your ECHS Polyclinic for any ill-treatment/sub standard medical treatment.
  - Do not get treated in a non-empanelled facility without obtaining prior sanction, as grant of ‘Ex Post Facto’ sanction is not permissible.
NEW INITIATIVES

In order to further improve the medical cover to our ESM in the North-East States, the following steps have been initiated:-

- Spreading awareness among ESM by delivering talk about ECHS during ESM Rallies.
- Annual Book Inspection of Polyclinics is being carried out regularly and suggestions to enhance ESM satisfaction are being given.
- To improve the knowledge base of Polyclinic staff, Orientation Cadres have been introduced.
- To improve the satisfaction level of ECHS members, all Polyclinics have been asked to identify medicines required by chronic patients and ensure their availability.
- OsIC Polyclinics have been asked to open register to note contact number of patients so that they could be informed about availability of NA medicines.
- Med Offrs have been asked to have quarterly interaction with SEMOs to resolve problems related to medicines and procedures.
- New applicants are being informed the dispatch of their ECHS card to respective Station HQ, through SMS.
- Details of Government hospitals in the region have been compiled and provided to all Polyclinics for information of members.
- Infrastructure for On Line Billing has been created in the Regional Centre.
- Following SOPs have been prepared to streamline functioning at various levels:-
  - ‘Management of medical stores’ in Polyclinics
  - Functioning of Regional Centre
  - Functioning of Stn Cell, ECHS
- After renewal of Guwahati CGHS rates, large number of hospitals have been approached for empanelment to cover more cities. Following are the hospitals which have been approached in areas where there is no empanelled facility available:-
  - Kohima. Oking Hospital and Bethel Hospital.
  - Silchar. Cachar Cancer Hospital.
  - Churachandpur. Excel Diagnostic Centre, Jerusalem Clinic, Nazareth Nursing Home and Sielmat Christian Hospital.
  - Agartala ILS Hospital.
- Though there has not been any complaint of conflict between Polyclinic staff and ESM patients in the region but as a check, CCTV are being installed in all Polyclinics. Dibrugarh and Tinsukia Polyclinics have already installed CCTV.
FREQUENTLY ASKED QUESTIONS (FAQs)

GENERAL

Q1. What is the Ex-Servicemen Contributory Health Scheme (ECHS)?
Ans. ECHS was authorised by Government of India on 30 Dec 2002, and has been introduced from 01 April 2003. It is a publicly funded medicare scheme for those who are ex-servicemen and pensioners & their eligible dependants. It provides medical care through outpatient treatment at around 426 Polyclinics all over India, and in-patient hospitalization & treatment through Military Hospitals and empanelled Civil Hospitals & Diagnostic Centers at all these locations. Treatment/hospitalization in Service Hospitals will be available to ECHS members, subject to availability of specialty, medical staff and bed space.

Q2. Is ECHS for army ex-servicemen only?
Ans. No, this scheme is for all ex-servicemen, who have served in Army/Navy/Air force/Indian Coast Guard/Special Frontier Force/DSC.

Q3. Where are the application forms available?
Ans. Forms are available at all Station Headquarters, CSDs and at Rajya Sainik Board offices. For those having access to the internet, forms can also be downloaded from website ‘www.echs.gov.in/downloads.html’, ‘www.indianarmy.nic.in/arechs.htm’ or “www.irfcnausena.mil.in”.

Q4. What are the benefits of this scheme?
Ans. ECHS provides cashless medical coverage for the Ex-servicemen and their dependants in the established polyclinic/military hospitals/empanelled hospitals across India.

Q 5 What are the salient features of ECHS?
Ans (a) No age or medical condition bar for becoming a member.
(b) One time contribution ranging from Rs 15,000/- to Rs 60,000/- (depending upon Grade Pay).
(c) Indoor/outdoor treatment, tests and medicines are entitled.
(d) Country wide network of ECHS Polyclinics.
(e) Familiar environment and sense of belongingness.
(f) Covers spouse and all eligible dependents.

Q6. Medical cover starts from the date of application or receipt of Smart Card?
Ans. ECHS facilitates medical cover right from the day of submission of application form by showing the receipt. Receipt of application form can be used for temporary period till the Ex-Servicemen receive the smart card. For all retirees who have retired before 01 April 2003 and have not yet taken membership their service particulars/record will be scrutinized and verified by their respective record offices. Temporary card receipt in respect of these individual will be given only after the authenticated record is received from record office. This process may take 2-3 months from the date of fulfilling formalities. However, the temporary card receipt can be issued by dependent Stn HQ to individual if additional affidavit as per format is submitted.
Q7. I am serving in the army, I will retire next year. Can I apply for ECHS membership in advance?
Ans. Yes, you can apply at the time of your release from service. Please fill the documents required for smart card along with your release documents from service at least six months in advance to your respective Record offices and you can collect ECHS card at least 15 days before date of retirement. Please contact your Unit/Record Office for details. In case of officers please contact MP 5 & 6, or MPRS (O) for AMC/MNS/Dental Corps Offrs Ph. 011-26106329, 011 26195662.

Q8. I want to enroll my wife for the scheme. How should I proceed?
Ans. Collect and submit the application form at nearby Polyclinic/Stn HQ along with the copy of PPO/MRO, 4 photographs, photocopy of DO part II of marriage, photo identity proof of spouse, affidavit and DD of 135/- in favor of dependant Regional Centre. Spouse has no income limit and will be given membership irrespective of income criteria.

Q9. Are my family members covered in the scheme?
Ans. Yes, ECHS cover ex-servicemen along with his/her dependent family member.

Q. 10. Who are exempted from ECHS contribution?
Ans. War widows, Pre-1996 retirees and battle causalities are exempted.

Q11. What is the subscription/ contribution rate for ECHS membership?
Ans. The latest subscription rate effective from 01 Jun 2009 is as under:-
(a) Sep to Hav - Rs 15,000.
(b) Nb Sub - Rs 27,000
(c) Sub to Major - Rs 39,000
(d) Lt Col and above - Rs 60,000

Q12. How can I get information about ECHS policies and facilities?
Ans. You can call 1800-114-115 between 0900 to 1700 hours. If you have internet facility you can see policies at www.echs.gov.in.

ELIGIBILITY

Q1. Who are eligible to become ECHS members?
Ans. 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

Q2. How can I enroll my dependents for ECHS?
Ans. Collect and submit the application form at nearby polyclinic /Stn Cell along with the copy of PPO/MRO, 4 photographs, affidavit and DD of 135/- per person. The income of each dependant should be less than Rs.3500/- + plus amount of dearness.
relief on the basic pension of Rs 3500 as on date of consideration (Auth: Cent Org letter No. B/4970-PRE/AG/ECHS dt 04 Feb 2009).

Q3. I have declared my parents as dependents. Will they receive ECHS benefits for life time?
Ans. Yes, parents are entitled for lifetime ECHS service but their dependency should be proved in PPO and endorsed with DO Part II verified by Records office.

Q4. In case of death of ECHS pensioner, will the parents be entitled to ECHS benefits?
Ans. Yes, the parents are entitled to the ECHS membership provided they are dependants of the ESM and the names are included in the Discharge Book of ECHS Member and the income should be less than Rs.3500/- + plus amount of dearness relief on the basic pension as on date of consideration.

Q5. I am a short service commissioned officer. Am I entitled to be an ECHS member?
Ans. No, short service commissioned officers are not entitled to be an ECHS member, unless you are a battle casualty and drawing disability pension.

Q6. Are ex-Cadets eligible for ECHS Membership?
Ans. Ex-Cadets and disabled cadets who have been boarded out on medical grounds are not eligible for ECHS membership as they do not qualify for ESM status (Auth: Cent Org ECHS letter No. B/49701-PR/AG/ECHS dt 07 Sept 2011)

Q7. Are step mothers/ex-recruits eligible for ECHS membership?

SMART CARD

Q1. What is ECHS smart card and how to make it functional?
Ans. A smart 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 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.

Q2. How many smart cards can be made?
Ans. One primary card will be issued to pensioner/ Family Pensioner and each member will have an individual card to provide flexibility of treatment across the country as per their requirement. In addition a war disabled/ battle casualty and disabled dependent can be issued a white card for life dependency once eligibility is established. Existing members will have the option of continuing with the current card albeit with limited facilities or to opt for the new card.
Q3. What is the cost of ECHS smart card?
Ans. The cost of each card is Rs 135/- and is to be borne by the member.

Q4. I have lost my card, what should I do?
Ans. Visit Station Head Quarter/Polyclinic. Collect and submit application form along with documents which includes affidavit of loss of card and DD @ Rs 135/per card in favor of dependent Regional Centre.
Note: FIR is NOT mandatory/ required to be lodged.

Q5. My card is damaged. What should I do?
Ans. Visit Station head quarter/polyclinic. Collect and submit application form along with DD @ Rs 135/per card in favor of dependant Regional Center. Submit your damaged card when you receive the duplicate card.

Q6. How many ECHS cards will be issued for a family?
Ans. ECHS smart card will be issued one for each dependent, mentioned in the Discharge Book and applied for in the application, provided the dependant meets eligibility conditions as per rules.

MEDICARE

Q1. Will the members have to initially make payment to the empanelled hospital and then seek reimbursement?
Ans. No. The ECHS organisation will make direct payment to the empanelled hospital. There is no burden of any payment on the ECHS member either for treatment or medicines. The ECHS will NOT reimburse the member for any payments made by him knowingly or inadvertently.

Q2. What is parent Polyclinic?
Ans. Every member will be allotted a parent Polyclinic, one nearest to his permanent/temporary residence as given in the application form.

Q3. Can I take treatment from other Polyclinics?
Ans. Yes, 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. However, for new smart cards issued wef 01Jun 2010, TAC is not required.

Q4. How can I change my parent Polyclinic?
Ans (a) Change of Parent Polyclinic (Old Card holder). The member is to submit the following to nearest Stn HQs for change of Parent Polyclinic:-
   (i) An application on plain paper clearly giving following details:-
      (aa) Old ECHS Regn Number.
      (ab) Old & New Address.
      (ac) Old & New Parent Polyclinic.
(ii) An undertaking on a separate plain paper stating that:-
   (aa) No information has been concealed or suppressed.
   (ab) Any false information submitted will make him liable for
termination of his ECHS membership.

(iii) Proof of new address like electricity/telephone/water bills/RWA
Certificate etc.

(iv) A fresh ECHS application form with relevant columns filled and
Super scribed “CHANGE OF ADDRESS “and “CHANGE OF
PARENT POLYCLINIC”.

(v) Return all the old cards to Stn cell ECHS at the time of collection of new
cards.

(vi) DD on the name of concerned Regional Centre @ Rs 135/- per card
requested.

(b) Change of Parent Polyclinic (New Card holder). The ECHS beneficiaries
who want to change their 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.

Q5. What is the procedure for treatment?
Ans  (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 facility on referral from the
polyclinic.
(d) Patients will be referred to the local Service Hospital in the station (if
available) subject to availability of specialty/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.
Q6. My age is more than 80 years. Do I have any choice to get treatment only at service hospital?
Ans. Yes, ECHS members who are 80 years and above will be given preference for admission to service hospitals, if that is their choice, depending upon bed availability in the concerned service hospital.

Q7. What is the procedure for emergency?
Ans. In case of an emergency, treatment can be availed as follows:-
(a) **Service Hospital.** Free treatment. 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 required 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-imbursement along with 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 along with a written application by the member to the OIC Polyclinic explaining circumstances 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 ECHS/CGHS approved rates and subject to conditions.

Q8. Can ECHS beneficiary avail treatment in hospitals of national repute like AIIMS, PGI Chandigarh?
Ans. Yes, planned treatment in the institutes of national repute like AIIMS, PGI Chandigarh, SGPGI, Lucknow, NIMHANS Bangalore, Tata Memorial Hosp Mumbai (for oncology), JIPMER Pondicherry, CMC Vellore, Shankar Nethralaya Chennai and Medical Colleges and hospitals under central or state governments, is permitted.

Q9. What are the conditions for emergency treatment?
Ans. ECHS is designed to be a cashless scheme. Treatment is to be availed at authorized 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 catastrophes.
(c) Cerebro-Vascular accidents.
Q.10. Is there any provision to get medicines on discharge from empanelled hospital?
**Ans.** Yes, ECHS beneficiary can collect medicines, if prescribed by treating doctor, from empanelled hospital on discharge for a maximum period of seven days. The cost of such medicines will be included in the reimbursement bill by empanelled facility and the ECHS member need not pay any amount.

Q.11. Can I avail treatment directly at empanelled hospital without referral from Polyclinic?
**Ans.** No, you have to be referred by the Polyclinic to avail planned treatment in empanelled facility. However, in emergency you can avail treatment facilities directly in empanelled hospitals subject to certain conditions.

Q.12. Are patients entitled travelling allowances for treatment?
**Ans.** Yes, 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 authorized to move along with 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:**
- **(i)** Production of original rail tickets/public bus ticket for reimbursement is compulsory.
- **(ii)** Travel by Pvt Car/Taxi or by Civil Air is not authorised.
- **(iii)** Reimbursement will be limited to rail fare authorised or actual expenditure whichever is less.

Q.13. My hometown is far away from nearest polyclinic but near to Govt. hospital, Can I avail treatment there and claim reimbursement?
**Ans.** Yes, ECHS beneficiary is permitted to avail the facilities/services of nearest Govt hosp without referral from Polyclinic subject to following conditions:
- **(a)** Distance from nearest Polyclinic should be more than 50 Km
- **(b)** Applicable for residents of hilly areas including all North Eastern region except Assam and Meghalya.
- **(c)** Treatment permitted for maximum period of 07 days. Nearest/parent Polyclinic to be informed at the earliest by telephone/fax/telegram that will initiate the referral and be attached with bill while claiming re-imbursement.
Q14. What is the procedure for issue of medicines?

Ans  
(a) Members/dependants are required to visit polyclinics and register themselves for issue of any kind of medicine prescribed by authorized medical attendant. Superspeciality medicines may take some time for procurement. Medicines will be issued for duration as prescribed by the treating doctors.

(b) Medicine will be issued 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 up to 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 actions will be taken:-

   (i) In 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 medicines requirement for 07 days at a time from an empanelled chemist and issue to the patient. Vitamins, minerals, nutritional supplements and Tonics will NOT 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.
## EMPANELLED FACILITIES IN NORTH-EAST REGION

<table>
<thead>
<tr>
<th>S. No.</th>
<th>Empanelled Facilities</th>
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<tbody>
<tr>
<td>1</td>
<td>Arya Hospital, Guwahati</td>
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<td>2</td>
<td>Down Town Hospital, Guwahati</td>
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<tr>
<td>3</td>
<td><strong>Hayat Hospital, Guwahati</strong> (New empanelment)</td>
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<tr>
<td>4</td>
<td>North East Dental Lab, Guwahati</td>
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<td>5</td>
<td>Aditya Diagnostic and Hospital, Dibrugarh</td>
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<td>6</td>
<td><strong>Brahmaputra Diagnostics &amp; Hospital, Dibrugarh</strong> (New empanelment)</td>
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<td>7</td>
<td>Woodland Hospital, Shillong</td>
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<td>8</td>
<td>Shija Hospital &amp; Research Centre, Imphal</td>
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<td>9</td>
<td>Babina Healthcare &amp; Hospitality Industries, Imphal</td>
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<td>10</td>
<td>Synod Hospital, Aizawl</td>
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<td>11</td>
<td>Grace Nursing Home, Aizawl</td>
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<td>12</td>
<td>Greenwood Hospital, Aizawl</td>
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<td>13</td>
<td>Trinity Diagnostic centre, Aizawl</td>
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<td>14</td>
<td>Aizawl Hospital &amp; Research Centre, Aizawl</td>
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<tr>
<td>Agartala</td>
<td>Maj Kakali Dhar (Retd) (Offg)</td>
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<td>Aizawl</td>
<td>Maj VL Khawhirning (Retd)</td>
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<td>Bongaigaon</td>
<td>Col SG Roy Chowdhury (Retd)</td>
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<td>Dr RK Mahoto (Offg)</td>
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<td>Tezpur</td>
<td>Wg Cdr AK Choudhury (Retd)</td>
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<tr>
<td>Tinsukia</td>
<td>Col Chaitanya Gohain (Retd)</td>
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Refurbished room for On Line Billing in Regional Centre ECHS, Guwahati
ECHS beneficiaries are the most important visitors in our premises and they are not an interruption to our work.

They are in fact the purpose of our existence.

We are not doing them a favour by serving them; actually they are doing us a favour by giving us an opportunity to serve them.

Toll Free No. 1800-114-115 (0900-1700 Hours)