IHQ MoD (NAVY) ECHS NEWS LETTER – MAR 2018

1. **General**. Ex-Servicemen Contributory Health Scheme (ECHS) was launched on 01 Apr 2003. The Scheme aims to provide quality healthcare to Ex-Servicemen pensioners and dependents through a network of ECHS Polyclinics, Service medical facilities and Civil Empanelled/Govt Hospitals spread across the country. The scheme has been structured to provide cashless treatment, as far as possible, for its beneficiaries. Treatment provided under ECHS is as per the allopathic medical system and it is a Govt funded Scheme.

2. **Growth of ECHS**. ECHS has made phenomenal growth over the last 10 years. The Govt had initially sanctioned Central Organisation ECHS, 13 Regional Centres and 227 Polyclinics. This was expanded in Oct 2010 with 15 more Regional Centres and 199 additional polyclinics being added to it. 28 Regional Centres are fully operational and out of 426 Polyclinics, 423 have been operationalised. The endeavour is to make the remainder Polyclinics functional at the earliest. Approximately 16 lakhs ESMs have been enlisted with the Scheme and the total beneficiaries base including dependents is approximately 52 lakhs.

3. **ECHS Smart Card**. Online application system has been inaugurated on 14 Jan 18 on Veteran's Day. ECHS application will have to apply online on ECHS website www.echs.gov.in . The physical submission of application will not be required anymore. Salient features of New Smart Card are as follows:-

(a) The new Smart Card is of the capacity of 64 kb which can store vital information of the beneficiaries including their Medical History, Referral History, Medicine Issue Logs etc.

(b) The payment for Smart Card will also be done through online mode with options using Net Banking, Debit/Credit Card, Wallet Payments.

(c) Considering the fact that a large number of our veterans are not IT savvy enough to conveniently use the online facilities, it is considered that a lot of handholding would need to be done by all echelons of the organisation for filling up ECHS Smart Card application. For handholding of the veterans, a nodal person with required IT resources i.e PC, Scanner, Printer and internet access have been deployed at each Station HQ, Regional Centres and Polyclinics to facilitate the filling up online application form. Also a major facilitation centre has been established at Central Organisation for handholding of Veterans in Delhi,NCR.

(d) New card will have to be collected from the office of respective Station HQs except for Future Retiree Officers for whom card will be handed over as part of Retirement kit.

(e) Based on the feedback since 14 Jan 18, photo specifications for Smart Card have been simplified as follows:-

(i) Front facing passport size color photograph
(ii) Photo should not be more than 06 months old
(iii) Background to be plain white

(f) Requirement of following document to be uploaded for Smart Card has been done away with:-

(i) Affidavit regarding dependents. Self declaration to be done online as per proforma
(ii) Discharge/ Service Book
(iii) Part II orders for adding dependents
(iv) Birth Certificate of the dependents

(g) Following numbers have been provided for assistance on call & Whatsup:-

(i) 7703818578
(ii) 7701976194
(iii) 8448086481

4. **ECHS Contribution**. All serving personnel contribute towards their ECHS membership according to their ranks from their retirement benefits. This one time contribution has been increased for personnel retiring w.e.f. 29 Dec 17 as follows vide GoI letter No. 22D(04)/2010/WE/D(Res-I) dated 29 Dec 17:-

Ser	Category	One time Contribution	Ward Entitlement
(a)	Recruit to Havs & equivalent in Navy & AF	Rs. 30,000/-	General
(b)	Nb Sub/Sub/Sub Maj or equivalent in Navy & AF (including Hony Nb Sub/MACP Nb Sub and Hony Lt/Capt)	Rs. 67,000/-	Semi Private
(c)	All Officers	Rs. 1,20,000/-	Private

(No arrears have to be paid by personnel retired prior 29 Dec 17)

5. **Complaint & Litigation Reduction Scheme (CLRS)**. To reduce complaints and litigation regarding ECHS issues, a new scheme 'Complaint & Litigation Reduction Scheme' has been initiated. All Veterans and their dependents, ECHS employees at all echelons and hospitals/other service providers can communicate directly with Central Organisation, ECHS to minimise complaints and litigations. This will assist them in increased focus on formulation of caring policy and implementing initiatives preserving the time and resources of Veterans. Personnel can speak to the officer handling Non-Medical complaints on Tele No. 9968263812 while issues related to medical aspects be discussed on Tele No. 9910244611. In case of non resolution, MD ECHS may be contacted on 9971129165. Unsettled issues can also be emailed on dircomplaint-mod@nic.in"

6. **ECHS Participative Policy Making (PPM)**. ECHS is providing health care to 52 lakhs ECHS beneficiaries through 28 Regional Centres and 426 ECHS Polyclinics. Policies prepared at ECHS focus on concerns of our veterans & their dependents. Towards this end, ECHS has commenced Participative Policy Making (PPM) wherein all stake holders will be given an opportunity to express their views so that there is an institutional mechanism to factor these views prior to policy rollout. Draft Policy Documents are being uploaded on ECHS website (www.echs.gov.in) under Participative Policy Making and is available for comments for next ten days. The email id for response will be indicated with each draft policy document. Recently, draft SOP on Referral System was uploaded under this scheme for correction by all stake holders.

7. **Referral System SOP Revision**. Based on the feedback from Veterans, SOP for referral procedure is being revised. Draft SOP was put on ECHS website under ''Participating Policy Making'' section for further inputs from Veterans. New SOP will be promulgated shortly after incorporation of inputs by the Veterans.

8 **Case for Additional ECHS Polyclinics under IN**. The case of 08 additional Polyclinics has been taken up with Central Organisation, ECHS/MoD for inclusion in Phase-III expansion of ECHS. These ECHS polyclinics are being planned for Ambernath, Navi Mumbai, Cuttack, Keonjhar, Rourkela, Baripada, Bhadrak and Chalakudy. The case is likely to be approved by Deptt of ESW/MoD upon operationalisation of the 03 remaining sanctioned polyclinics.

9. **Empanelment of Hospitals**. Recently many reputed hospitals have been empanelled with ECHS at Mumbai/Kochi/Vizag. There were certain complaints regarding very few hospitals getting empanelled at Mumbai. Now, this issue has been partially addressed by empanelment of S.L Raheja Hospital (Mumbai), Fortis Hospital Ltd (Mumbai), Hiranandani Hospitals (Navi Mumbai), Apollo Hospital Enterprise Ltd (Navi Mumbai), Wockhardt Hospital Ltd (Thane) and Fortis Hospital Ltd (Kalyan) at Mumbai. As on date, RC Mumbai, RC Visakhapatnam and RC Kochi have 24 (Twenty four), 17 (Seventeen) and 96 (Ninety six) empanelled hospitals respectively. As on 25 Dec 17, 2656 medical facilities have been empanelled with ECHS after GoI sanction.

10. **Availability of Medicines**. Availability of medicines in ECHS Polyclinics has been a matter of concern for long. There have been dynamic changes over the years to enhance the satisfaction levels related to medicine availability. Following steps have been initiated in this direction:-

(a) **Procurement by SEMO**. Medicines required by ECHS Polyclinics were procured by AFMSDs earlier. Now it has been decided that procurement of ECHS drugs and consumables will be undertaken completely by SEMOs. AFMSD has been delinked from procurement procedure. Funds for the same are made available to the SEMOs for local procurement of medicine.

(b) **Implementation of Procedure for Authorised Local Chemist**. To further improve availability of medicines, a procedure for Authorised Local Chemist (ALC) has been promulgated w.e.f. Aug 17. In all stations with ECHS Polyclinics, local medical stores/chemist will be empanelled for supply of Non-Available, Emergent, Life Saving and essential drugs on as required basis. The empanelment of local medical stores/chemist will be done by a Board of Officers constituted by the Station Commander. When an emergent/life saving/essential drugs prescribed by the Medical Officer is not available, OiC Polyclinic will raise demand to the empanelled local medical stores/chemist and the chemist will supply the required drugs to the Polyclinics within 24 hours for handing over to the patient.

(c) **SoP on ECHS Medicine Management**. There is a need to outline the medicine management guidelines for all to enhance medicine availability. SoP for ECHS medicine management has been laid down laying down procedure right from the procurement stage till it is received by the entitled patient.

(d) **Satisfaction Level of Medicine**. Availability of medicine is a KRA w.r.t effective delivery of benefits under the ECHS scheme. In order to monitor process, a monthly feedback is being sought from all Polyclinics giving out status of satisfaction level of patients in all Polyclinics. The level is measured by measuring weighted data of number of patients getting 100%, 50%, 25% & less than 25% medicines.

11. **Revised Income Criteria for Dependents**. Consequence to implementation of the 7th Pay Commission and revision of income criteria for dependency of family, the income criteria for

ECHS dependency also stand revised to Rs 9000/- plus amount of Dearness Relief on the basic pension.

12. **Self Attestation of Dependents above 18 years of Age**. In order to institute a check mechanism for preventing unauthorized dependents above 18 years of age availing ECHS facility, a self attested proforma available on Central Organisation, ECHS website shall be filled and rendered by all beneficiaries who have dependent children above 18 years of age. This form will be self attested by primary beneficiary, dependent and the same shall be countersigned by the OIC of parent polyclinic. Validity of this proforma will be one year.

13. **Refund of One Time Contribution deducted/recovered for ECHS Membership**. MoD has clarified that in case Next of Kin (NOK) of ECHS beneficiary happens to be a Central Govt Employee or an employee of any other organization, where medical facility is provided, it is not compulsory for the NOK to join ECHS. In case, where subscription has been deducted for ECHS membership from the NOK of ECHS beneficiary refund of the amount will be claimed separately by NOK. MD, ECHS will sanction refund of such claim to NOK, after verifying concerned record towards deduction of ECHS subscription.

14. **Certificate of Disability**. The format of disability certificate has been revised and same is available on ECHS website www.echs.gov.in**.** The certificate is applicable for Ex-Servicemen and their dependents. The certificate prepared is applicable for issue by service hospital to its dependent clientele. Civil doctors issuing / signing the ibid certificate is not desirable. The revised certificate has combined the certificate which was existing earlier and is intended for following purpose:-

(a) Disability certificate under Persons with Disability (PWD) Act-1995.
(b) Certificate for issue of ECHS White Cards.

15. **Empanelment of Prosthetic Centers of Ottobock and Endolite**. Prosthetic Centers of Ottobock and Endolite have been empanelled with ECHS. The guidelines have been framed for prescription, empanelment, rates for repair and issue of prosthesis and mobility appliances by the empanelled prosthesis centers of Ottobock and Endolite. The detail information is available on ECHS website www.echs.gov.in .

16. **Revision of Pay for Contractual Staff** . In order to get better talent to look after ESM, the pay for following contractual staff has been revised w.e.f. 16 Aug 17
.

Ser	Category	Existing (In Rs)	New (In Rs)
(a)	Officer-in-Charge Polyclinic	60,000/-	75,000/-
(b)	Medical Officer	60,000/-	75,000/-
(c)	Medical Specialist & Gynecologist	70,000/- (for 1st year contract appointment) 80,000/- (for 2nd year contract appointment)	87,500/- (for 1st year contract appointment) 1,00,000/- (for 2nd year contract appointment)
(d)	Dental Officer	60,000/-	75,000/-

17. **Treatment at Non-Empanelled Hospital in Emergency**. Specialized treatment for serious cases is provided at Military and empanelled private hospitals. Rate for treatment at private empanelled hospital are as per ECHS rates. In case of emergency the patient may report to the nearest military medical facility /empanelled hospital. In case these are not accessible then members are permitted to avail treatment at non- empanelled hospitals on payment. Their medical treatment bills are reimbursed at approved CGHS rates. The conditions of emergency are as under:-

(a) Acute Cardiac condition/ syndromes.
(b) Vascular catastrophies.
(c) Cerebro-Vascular Accidents.
(d) Acute respiratory emergencies.
(e) Acute abdominal pain
(f) Life threatening injuries.
(g) Acute poisoning 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

18. **Enhancement of Upper Age Limit for ECHS Contractual Staff**. GoI has approved enhanced upper age limit for contractual employment of medical and para medical staff in ECHS w.e.f. 18 Dec 17. Enhanced age limit will provide quality healthcare to our veterans due to increased availability and help ESM employees to have employment opportunities for longer duration.

S.No.	Category	Existing Age Limit	New Age Limit
(a)	Oi/C Polyclinic	65 yrs	65 yrs (No change)
(b)	Medical Officer		68 yrs
(c)	Specialist (Medical Specialist, Radiologist & Gynecologist)		70 yrs
(d)	Dental Officer		65 yrs (No change)
(e)	Radiographer	55 yrs	58 yrs
(f)	Lab Technician		
(g)	Physiotherapist		
(h)	Pharmacist		
(j)	Nursing Assistant		
(k)	Dental Assistant/Technician/Hygienist		
(l)	Non Medical Staff	55 yrs	55 yrs (No change)

19. **Vigilance Mechanism in ECHS.** A Vigilance framework with a nominated nodal Officer will be set up at each echelon of the scheme to introduce checks and balances in the system to ensure efficient and effective functioning of the system. In this regard a vigilance cell will be established under the Stn Commander. This cell will report through the Stn Commander to Area Headquarter to Command Headquarter to Central Organisation ECHS. All cases will be examined for refining the mechanism. Initially, the Vigilance Cell has been set at Delhi, Jalandhar and Thiruvananthapuram under a Medical Officer.

20. **Clarification Regarding Rates Of Subscription Of ECHS Membership/Refund Of Fixed Medical Allowance (FMA) in Certain Specific Cases:-**

Sl. No	Point of doubt	Clarification
(a)	For ESM who retired between 01 Apr 2003 to 31 Mar 2004 and to whom FMA was being paid but was stopped and ECHS membership was not given due to non recovery of subscription, what should be the rate of subscription to be deducted from them at the time of applying for ECHS membership and how should the FMA be refunded.	(i) Rates of the subscription of ECHS contribution that was applicable at the time of their retirement may be deducted. (ii) Payment of FMA which was stopped may be claimed separately by the ESM.
(b)	ESM who retired between 01 Apr 2003 to 31 Mar 2004 and from whom subscription was deducted in PPO but the process of membership of ECHS was not completed in terms of submission/ processing of application form. These ESM are now approaching for membership. Whether ECHS subscription already deducted is to be treated as final, or should they be asked to deposit the difference in old and new rates of ECHS subscription?	Once subscription has been deducted and endorsed in PPO, old rates will be applicable for this category of ESM, irrespective of the date on which they apply for membership.
(c)	Whether old rates applicable at the time of their retirement or the new rates applicable at time of application should be paid by those who retired between 01 Apr 2003 to 31 Mar 2004 and in whose case ECHS contribution was not deducted and FMA has been paid due to oversight/ error in PPO.	New rates of subscription prevalent at the time of application will be applicable for ESM who apply for ECHS at a later date.
(d)	From whom should the ECHS subscription be deducted in cases where both husband and wife are serving in Armed Force and they retire at different dates.	The scheme being compulsory in nature, husband/wife who retires first should pay the contribution and avail benefits of the scheme and no subscription should be deducted from husband/ wife who retire later. He/ she will be eligible for benefits under the scheme as a spouse.

21. **Fixed Medical Allowance (FMA)**. Following clarification has been issued by MoD regarding grant of Fix Medical Allowance to Armed Forces pensioners/ family pensioner in such cases where date of retirement is prior to 01 Apr 2003 and who had opted not to avail medical facilities at OPD of Armed Forces hospitals/MI rooms and are not members of ECHS:-

(a) The Government of India, Ministry of Defence conveys the sanction of the President for enhancement of Fixed Medical Allowance (FMA) from Rs 500/- to Rs 1000/- per month.

(b) Ex-Servicemen who retired on or after 01 Apr 2003 have to become member of ECHS compulsorily and not eligible to draw Fixed Medical Allowance. These orders are applicable only in such cases, where the date of retirement is prior to 01 Apr 2003 and who had opted not

to avail medical facilities at OPD of Armed Forces Hospitals/ MI Room and are not member of ECHS.

(c) These orders will take effect from 01 Jul 2017.

22. **Construction of ECHS Polyclinics**. Stress has been laid on getting permanent buildings for Naval Polyclinics to provide better infrastructure and facilities for our ESM. Status of polyclinics in Southern India is as follows:-

(a) **ECHS Polyclinic Painavu**. Foundation stone was laid on 15 Dec 16.Construction of building has commenced on 30 Oct 17 by PWD. EDC is Dec 2018.

(b) **ECHS Polyclinic Muvattupuzha**. The work of building construction is progressing fast. EDC is May 2018. A canteen has already been constructed in the same compound and is operational.

(c) **Tirunelveli**. ECHS building at Tirunelveli was commissioned in Sep 17.

23. **ESM Initiative for Acquisition of land for ECHS Polyclinic**. Due to non-availability of suitable Defence/Govt land at Muvattupuzha, all ESM have contributed one month pension to the local ESM Trust and bought 40 cents of land at a suitable location in the city. 30 cents of land was gifted to Defence Estate Officer/ Navy which got converted to A-I Defence land. Now, a building is being constructed by PWD through ECHS Budget and will be ready by mid 2018. In the balance 10 cents of land, ESM Trust has already made a building for CSD canteen which has been hired to the local Army Unit. The Trust intends to return contribution of all ESM with interest from monthly rent generated by hiring of the building for canteen. Additional 10 cents of land has been acquired by the Trust for parking area for the Polyclinic and canteen. This example of land acquisition by our ESM is unique and is example of resolve of the System to find innovative solution to all pending issues so as to serve our ESM in a better way.

24. **Sparsh: Healing Touch to ECHS Beneficiaries**. The Project ‘‘ SPARSH ’’ was launched on 10 Oct 17 to extend sharing & caring to our veterans & their dependents undergoing treatment in ECHS Polyclinic. The project is a volunteer based programme which counts on the time and effort of the volunteers to achieve its aim. The volunteer will be contributing based on his/ her skill sets, assisting, counseling, helping and involving himself/ herself in various activities of the Polyclinics.

(a) Integrating veteran’s community into day to day activities of ECHS and making it more beneficiary friendly.

(b) Involving serving community by reaching out to the veterans in ECHS Polyclinics, service hospitals and empanelled hospitals. Making serving fraternity more connected with veterans and enhance the concept of Armed Forces as ‘‘one large family’’.

(c) Involving NCC/NSS/ NGOs willing to serve those who have served the nation. This will motivate young generation and best talent will be willing to join Armed Forces.

25. **ECHS Website.** All information regarding ECHS, including list of empanelled facilities, forms for membership and latest policies etc are available on **www.echs.gov.in.**

.