

# ECHS

(EX-SERVICEMEN CONTRIBUTORY HEALTH SCHEME)

**NEWS LETTER, NEW DELHI, APR 2018**



## MESSAGE FROM ADJUTANT GENERAL

1. ECHS has been constantly striving to address the need for quality medical care of our veterans and dependents. The unique modeling of the Scheme with involvement of our formations has been instrumental in ensuring that we achieve the intended goals of the Scheme.
2. By adoption of technology and timely policy infusions, we have been able to ensure an efficient delivery mechanism. Our focus has been to introduce transparency and integrity in our working and integration of all functions to ensure a veteran friendly mechanism.
3. I appeal to all stakeholders to imbibe and ensure an empathetic approach by displaying compassion and understanding towards our esteemed veterans. Ours is a continuous process of progress and with the persistent efforts of all stakeholders and our commitment, we will ensure growth and delivery of quality healthcare to all our veterans and their dependents. I also wish to assure all the veterans that any suggestion given by them is considered for implementation with diligence & expeditiously.
4. Wishing all veterans and their families good health and happiness.

**Jai Hind**

**(Ashwani Kumar)  
Lieutenant General  
Adjutant General**



[www.echs.gov.in](http://www.echs.gov.in)  
011-25684945



## **EX-SERVICEMEN CONTRIBUTORY HEALTH SCHEME (ECHS)**

1. **General.** 424 operational Polyclinics covering 347 districts in the country with approx 52 lakhs beneficiaries and large No of empanelled hospitals is a true depiction of reach and delivery of benefits under the Scheme. A constant effort is being made to ensure accessibility and transparency through expansion to reach additional districts having reasonable population.

2. **Important Government Orders/ Policy Letters/ Advisories.** The following Govt orders have been issued since last publication :-

(a) Central Organisation ECHS has issued advisory for delay in processing of claims above Rupees 10 Lakhs vide letter No B/49778 /AG/ECHS/Claim/Policy dated 07 Apr 2017.

(b) Central Organisation ECHS has issued for authentication of medical bills by AFV/NOK vide letter No B/49778/AG/ECHS/Claim/Policy dated 18 Apr 2017.

(c) Revised format of disability certificate for issue of ECHS White Card under Persons with Disability (PWD) Act – 1995 has been circulated to all Command Headquarters and Regional Centres vide Central Org ECHS letter No B/49701-PR/AG/ECHS/2017 dated 28 Apr 2017.

(d) Clarification in case NoK of ECHS beneficiary happens to be a Central Govt employee or an employee of any other Org, where medical facilities are provided, will it be compulsory for the NoK to join ECHS has been received vide MoD ID No 22D(11)/2015/US(WE)/D(Res) dated 23 May 2017 and the same has been promulgated to all Command Headquarters and Regional Centres vide Central Org ECHS letter No B/49701-PR/AG/ECHS/2017 dated 05 Jun 2017.

(e) Clarification regarding rates of subscription of ECHS membership / refund of Fixed Medical Allowance (FMA) in certain specific cases has been received vide MoD ID No 22D(17)/2016/US(WE)/D(Res) dated 02 Jun 2017 and the same has been promulgated to all Command Headquarters and Regional Centres vide Central Org ECHS letter No B/49701-PR/AG/ECHS/2017 dated 19 Jun 2017.

(f) Relevant extracts “Manual for Procurement of Goods 2017” received from MoD vide their ION No A/00062/Misc/FP-1 & Coord dated 07 Jun 2017 and the same has been promulgated to all Command Headquarters and Regional Centres vide Central Org ECHS letter No B/49762-Proc Policy/AG/ECHS dated 30 Jun 2017.

(g) Instructions on removal of Advertisement boards / charts / placards at Polyclinics by Hospitals has been given to all Command Headquarters and Regional Centres vide Central Org ECHS letter No B/49701-PR/AG/ECHS/2017 dated 13 Jul 2017.



- (h) Procedure on functional dynamics of Regional Centres has been issued to all Regional Centres vide Central Org ECHS letter No B/49701-PR/AG/ECHS/2017 dated 17 Jul 2017.
- (j) Instructions on timing of Polyclinics has been given to all Regional Centres vide Central Org ECHS letter No B/49701-PR/AG/ECHS/2017 dated 25 Jul 2017.
- (k) Instructions on procedure for reporting of untoward incidents has been given to Air HQ (VG), PD ECHS (Navy) and all Regional Centres vide Central Org ECHS letter No B/49701-PR/AG/ECHS/2017 dated 08 Aug 2017.
- (l) Remuneration of Contractual Staff (Officers) received from MoD vide ID No 22D(19)/2017/WE/D(Res) dated 16 Aug 2017 and promulgated to all Command Headquarters and Regional Centres.
- (m) Government has sanctioned Authorised Local Chemist vide letter No 22D(01)/2016/WE/D(Res)(i) dated 22 Aug 2017. Executive instructions have been issued on 29 Aug 2017.
- (n) Central Organisation ECHS has issued advisory for procedure for processing of waivers and sanctions of online claims vide letter No B/49778/AG/ECHS/Claim/Policy datd 30 Aug 2017.
- (o) Central Organisation ECHS has issued the SOP on Medicine Management on 05 Sep 2017.
- (p) Govt has approved Delegation of Powers to MD, ECHS to hire Medical Officers (MBBS) in lieu of sanctioned but vacant posts of Medical Specialists and to hire Para Medical Staff in lieu of sanctioned but vacant posts of Para Medical Staff of other categories received from MoD vide letter No 22D(24)/2017/WE/D(Res) dated 12 Sep 2017.
- (q) Format for 'Assessment and Recommendation' for Extension of Employment for the Officer-in-Charge, Medical Officer, Specialist, Dental Officer, Para Medical Staff, Para Dental Staff & Non Medical Staff at ECHS Polyclinics has been circulated to all Command Headquarters, all Area Headquarters and all Regional Centres vide Central Organisation ECHS letter No B/49760/AG/ECHS (R)/2017 dated 06 Oct 2017.
- (r) Govt of India / Ministry of Health & Family Welfare has revised the ceiling rates of knee and hip implants vide OM No Z.15025/74/2017/DIR/CGHS/EHS dated 26 Sep 2017.
- (s) Instructions on endorsing of Aadhaar Number on referrals has been circulated to all Command Headquarters, all Area Headquarters and all Regional Centres vide Central Organisation ECHS letter No B/49779-Outsourcing/AG/ECHS dated 03 Oct 2017 and even number dated 13 Oct 2017.
- (t) Central Organisation ECHS has issued the SOP on Processing of online & Manual claims (common errors/mistakes/procedural lapses) on 20 Oct 2017.

- (u) Government has given the sanction for reimbursement of bills of Empanellment hospital and individual bills of ECHS beneficiaries at Nepal at CGHS package rates applicable in Delhi vide letter No 22D(14)/2016/ WE/D (Res) dated 26 Oct 2017.
- (v) Instructions on Scrutiny of Out Patient Department/In Patient Department Claims at Regional Centre level has been issued to all Regional Centres vide Central Organisation ECHS letter No B/49779-Outsourcing/AG/ECHS dated 10 Nov 2017.
- (w) Central Organisation ECHS has issued for timely clearance of bills (individual reimbursement as well as hospital bills) vide letter No B/49778/AG/ECHS/Claim/Gen dated 13 Nov 2017.
- (x) Government of India, Ministry of Defence has enhanced the pay scales of Para medical, Para Dental & Non Medical employees by approximately 25% wef 16 Aug 2017 vide their letter No 22D(25)/2017 /WE/D (Res-I) dated 20 Nov 2017.
- (y) Government has delegated the powers to MD ECHS for making changes in respect of Name, Account No, Pan Card and certificate of incorporation vide letter No 22B(10)/2017/WE/D(Res) dated 05 Dec 2017 in case of empanelled facilities.
- (z) Instructions have been issued to all Comd HQs and Regional Centres vide Central Organisation ECHS letter No B/49701-PR/AG/ECHS/2017 dated 06 Dec 2017 on management of visitors in ECHS establishments.
- (aa) Government has amended the procedure for Contractual Employment of Staff for ECHS Polyclinics relating to maximum age limit vide ID No 22D(22)/ 2017/WE/D(Res-I) dated 18 Dec 2017.
- (ab) Instructions have been issued to all Comd HQs and Regional Centres vide Central Organisation ECHS letter No B/49701-PR/AG/ECHS/2017 dated 21 Dec 2017 that once ESM joins the scheme, no provision exists for discontinuation of membership and issue of non membership certificate.
- (ac) Instructions have been issued to all Comd HQs and Regional Centres vide Central Organisation ECHS letter No B/49760/AG/ECHS (R)2017 dated 22 Dec 2017 on Employment of Contractual Employees at ECHS ests in form of 'Policy Document'.
- (ad) SOP 04/17 regarding structured trg of ECHS Staff has been issued to all Comd HQs and Regional Centres vide Central Organisation ECHS letter No B/49701-PR/AG /ECHS/2017 dated 26 Dec 2017.
- (ae) Revised ECHS contribution and entitlement of ward in empanelled hospitals post 7<sup>th</sup> CPC has been approved by MoD (DoESW) vide MoD Note No 22D(04)2010/WE/D(Res-I) dt 29 Dec 2017. The same has been issued to all Comd HQs and Regional Centres vide Central Organisation ECHS letter No B/49701-PR/AG/ECHS dated 29 Dec 2017.

(af) Clarification regarding ECHS membership to married disabled son has been issued to all Command Headquarters and Regional Centres vide Central Organisation ECHS letter No B/49701-PR/AG/ECHS/2018 dated 08 Jan 2018.

(ag) Manning documents for all Polyclinics for FY 2018-19 has been issued vide Central Organisation ECHS letter No B/49760/Vac/AG/ECHS/2018 dated 10 Jan 2018. AG Fund of Rs 3.13 Cr being utilised annually is released.

(ah) Government has approved GOC Sub Area as approving auth for contractual emp as against GOC Areas vide MoD ID No 25(05)/2017/(WE)/D (Res-I) datd 24 Jan 2018.

(aj) Central Organisation ECHS has issued for Disposal of Need More Info (NMI) Cases vide letter No B/49778/AG/ECHS/Claim dated 08 Feb 2018.

(ak) MoD has approved the delegation powers to MD ECHS to shift vacancies of Non -Medical staff from one Polyclinic to another/CO, ECHS/Stn HQ/ AFMSD/RC/SEMO/DGAFMS and also to employ one category of Non-Medical staff in Place of another category of Non-Medical Staff. Instructions on the same has been issued to all Command Headquarters and Regional Centres vide Central Organisation ECHS letter No B/49760/AG/ECHS (R)/2018 dated 22 Feb 2018.

(al) MoD has approved the payment of Aadhaar Charges through Government Funds through UTI BPA vide MoD ID No 18(102)/2017/WE/ D (Res-I) dated 23 Feb 18.

(am) The revised command and control matrix has been issued to all Commands Headquarters, Regional Centres and Polyclinics vide Central Organisation ECHS letter No B/49705-C&C/AG/ECHS/2018 dated 09 Mar 2018.

(an) Issue of financial document (FY 18-19) to all concerned vide Central Organisation ECHS letter No B/49791/AG/ECHS dated 27 Mar 2018.

3. **Grievance Redressal Mechanism.** Beneficiaries have following options available for seeking redress to their grievances:-

(a) **Online.**

(i) **CPGRAMS.** Centralized Public Grievance Redress & Monitoring System run by Deptt of Administrative Reforms & Public Grievances, Govt of India can be accessed on web site <http://pgportal.gov.in/>. Grievance related to ECHS are automatically routed to DoESW/Central Org ECHS.



(ii) **Army Veterans Grievance Handling Portal.** This portal is launched by Army Veteran Cell for redressing grievances of our esteem veterans. The web ID of this portal is [indianarmyveterans.gov.in](http://indianarmyveterans.gov.in).



(b) **E-Mail.** E-Mail to the Director (Complaint & Litigation) on his e-mail ID [dircomplaints-mod@nic.in](mailto:dircomplaints-mod@nic.in).

(c) **Normal Post.** Forward grievances at following address :-

**Director (Complaint & Litigation)  
Central Organisation ECHS  
Adjutant General's Branch  
Integrated HQ of MoD (Army)  
Maude Lines, Near Blood Bank,  
Sadar Bazar,  
Delhi Cantt - 10  
Email - [dircomplaints-mod@nic.in](mailto:dircomplaints-mod@nic.in).**



(d) **Helpline.** Helpline No **1800-114-115** is operationalised from 0900hr to 1700hr (Monday to Friday).

(e) Telephone numbers and e-mail IDs of important functionaries are at **Appendix.**

**Note :** Beneficiaries are requested to:-

(i) First approach concerned OIC Polyclinic/Stn HQs/Regional Centre for grievances if any and for resolving the issues expeditiously.

(ii) Lodge their grievances on-line as per Para 3 (a) for resolving them on fast track basis as also monitoring progress on their grievances.

(f) **Complaint and Litigation Reduction Scheme (CLRS).** ECHS launched 'Complaint and Litigation Reduction Scheme (CLRS)', wherein all stake holders including Veterans and their dependents, ECHS employees at all echelons and hospitals / other service providers are invited for direct communication with Central Org ECHS to reduce the complaints and litigation. This will assist us in our increased focus on formulation of caring policy and implementation initiatives preserving the time and resources of our veterans who have served the nation in a selfless manner. Please speak to 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, please call on 9971129165. In case of not getting connected, send SMS with Complaint/Litigation reference for us to call back. Your unsettled issues can also be emailed on [dircomplaint-mod@nic.in](mailto:dircomplaint-mod@nic.in).

(g) **Veteran Patient Care & Assistance (VPCA) Team.** VPCA teams were approved and promulgated vide DG (DC & W) letter No B/49717-C(Vig)/AG/ECHS/2017 dated 08 Sep 2017, wherein such teams are carrying out checks under order of Station Commanders to avert illegal practices as well as addressing the difficulties of veterans. VPCA Teams are operating in Delhi, Jalandhar & Trivandrum and based on success of this Pilot Project, these will be launched Pan India.

(h) **Right To Information (RTI).** CPIO/ PIO for Central Org ECHS is ADG AE (RTI Cell). RTI in this regard be forwarded at the address mentioned below :-

RTI Cell, Addl DG AE  
G-6, D-1 Wing  
Sena Bhawan, Gate No – 4  
IHQ of MoD (Army)  
New Delhi – 110011

(j) **Whatsapp.** ECHS launched Whatsapp No (9868857972) for its beneficiaries to positively shape the scheme. The system is known as ‘Shape your Scheme’ & Save your Scheme’ for enhancement of effectiveness & reporting of issues by beneficiaries, be it their difficulties / medical needs or unfair practices by anyone including empanelled hospitals and ECHS staff at all levels.

4. **Important Websites.** There are a No of websites dealing with issues concerning our veterans, which can be used for guidance. List of few important website addresses is as given below:-



<http://desw.gov.in>  
[http://www.dgrindia.com/jobs\\_exservicemen.html](http://www.dgrindia.com/jobs_exservicemen.html)  
<http://www.dgrindia.com/directorate/kendriya.html>  
<http://ex-servicemenwelfare.blogspot.in>  
<http://echspress.utiitsl.com>  
<http://www.iesm.org/index.htm>  
<http://indianexserviceman.blogspot.in/2012/11/message-from-chairman-iesm.html>  
<http://www.gconnect.in>  
<http://iafpensioners.gov.in/index.php/en>  
<http://echs.gov.in/images/pdf/OBP.pdf>  
<http://indianarmy.nic.in/writereaddata/docoments/welfarescheme.pdf>  
<http://indianmilitary.info/2012/11/welcome-step-by-army-official-website.html>  
<http://www.vsf-desa.com>  
<http://sainiksamachar.nic.in>  
<http://www.facebook.com/Exservicemen>  
<http://www.indianarmyveterans.gov.in>  
<http://www.armyveteranscell@gmail.com>  
<http://apajobs01@yahoo.co.in>  
<http://jobs@awpo.org>  
<http://info@awpo.org>

5. **Treatment in Non-Empanelled Hospitals in Emergency.** Specialized treatment for serious cases (beyond the facilities available at the Polyclinics) is



provided at Military and empanelled private hospitals. Rates for treatment at private empanelled hospitals are as per CGHS rates. In case of emergency, report to nearest military medical facility / empanelled hospital. In case these are not accessible then members are permitted to avail medical treatment at non-empanelled hospital on

payment. Their medical treatment bills are reimbursed at approved (CGHS) rates. The conditions of Emergency are as under :-

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

6. **Advantages of Becoming ECHS Member.**

- (a) No age or medical condition bar for becoming a member.
- (b) Present one time contribution ranges from ₹ 30,000/- to ₹ 1,20,000/- wef 29 Dec 2017.
- (c) No monetary ceiling on treatment.
- (d) Indoor/outdoor treatment, tests and medicines.
- (e) Country wide network of ECHS Polyclinics.
- (f) Familiar environment and sense of belongingness.
- (g) Covers spouse and all eligible dependents.





7. **Biannual ECHS Seminar.** Biannual ECHS Seminar was held at Manekshaw Centre from 01-02 Feb 18 which was attended by more than 60 participants. Issue of corrupt/unfair practices have been highlighted. Value points will be worked upon to enhance the effectiveness of the scheme further.

8. **Achievements of ECHS.** The following targets have been achieved by ECHS during recent times :-

(a) **Smart Card Project.** A new 64KB Radio Frequency Identification (RFID) enabled Smart Card project has been launched on 14 Jan 2018 by Hon'ble RRM for better authentication purposes and facilitating medical treatment to ECHS beneficiaries. This was necessitated as old contract for ECHS cards expired on 31 May 15.



(b) **Simplifications Carried Out in Online Smart Card Application.** Subsequent to the launch of Smart Card Online Portal, ESMS projected various issues which have been earnestly addressed and the online application process has been simplified to facilitate the veterans. In addition, facilitation centres for hand holding of veterans have been created. A major facilitation centre has been established at Central Org ECHS for hand holding of veterans in Delhi NCR and in addition, facilitation centres have been created at all RCs & Polyclinics while the Fmns have created centres for hand holding of veterans at Stn HQs & Veterans Cells. All functionaries are taking initiatives to help veterans in filling up of Online form.

(i) Based on the feedback from the environment, major simplification measures have been carried out to enhance the convenience of veterans.

(aa) Affidavit for dependents, Discharge / Service Book, Part – II orders for adding dependents, Birth Certificate of dependents has been done away with.

(ab) Self declaration to be done online as per proforma on portal.

(ii) Following numbers have been provided for assistance on call & Whatsapp.

(aa) 7703818578

(ab) 7701976194

(ac) 8448086480

(ad) 8448086481

(ae) 8448086482

(iii) Photograph specification simplified as under :-

- (aa) Front facing passport size colour photograph.
- (ab) Photo should not be more than 6 months old.
- (ac) Background : plain white

(iv) Requirement of e-mail from the registration has been removed and made optional in the application. However, providing e-mail ID in the application will facilitate meaningful communications to beneficiaries.

(v) The password configuration has been simplified to only include a combination of at least eight Numerals & Characters.

(vi) 'Forgot Password' feature has been added with security questions.

(vii) Captcha available in the registration and login form has been simplified.

(viii) Date field has been simplified.

(ix) Providing of PAN number for primary beneficiary and spouse has been made optional. However, providing pan number (if held) for other dependents is essential.

(x) Drug allergy to be provided only if applicable and is optional.

(xi) Temporary save & edit option has been created.

(xii) Option to download filled application form before proceeding for payment has been created to cross check correctness of details in the form.

(c) **Proposal for Modernization of ECHS Website.** Proposal to carry out modernization of present static web page to a Dynamic Page, which is more functional & user friendly has been approved by the Government. Once implemented, the site will be interactive and shall provide richer user experience with host of features to aid the beneficiaries.

(d) **SMS Intimation to ECHS Beneficiaries on the Progress of Re-Imbursement Claims by UTI-ITSL.** ECHS has introduced a system for intimating the beneficiary regarding progress of their re-imburement claims at each stage through SMS. Introduction of this new system will not only keep the beneficiary updated about progress of their claims but will also apprise them of observation if any on their claims and will also guide them about the action required to be taken for speedy clearance of claims. This facility will go a long way in improving transparency, accountability and shall enhance ESM satisfaction level by faster settlement of individual re-imburement claims.

(e) **Payment of BPA Services for Reimbursement Claims by ECHS.** The payment of the BPA fees was borne by the individual for the reimbursement claims. The govt has now approved the payment of BPA fee for individual reimbursement claims by the ECHS wef 01 Mar 2018.

(f) **Shortage/Availability of Medicines.** Govt has accorded sanction to operationalise the concept of Authorised Local Chemist (ALC) on 22 Aug 2017. Implementation instructions have been given to all Command Headquarters and Regional Centres on 29 Aug 2017. In addition, in coordination with O/o DGAFMS, the responsibility of medicine procurement has been de-centralised to SEMO's. This methodology is intended to ensure one point local contact for medicine requirement and address the adverse effects of the long lead time in the earlier central procurement system. For coordination and management of medicines at ECHS Polyclinics, a comprehensive SOP has been issued to the environment on 05 Sep 2017. Once the ALC is empanelled, medicine non availability will be consigned to the history.

(g) **Aadhaar Authentication.** Aadhaar authentication proposal by an authorised agency of UIDAI (UTI in our case) alongwith charges has been approved by Ministry of Defence which will facilitate new Smart Card proposal having Aadhaar enablement.

(h) **Pan India Profile.** A case for arriving at Pan India profile of ECHS Polyclinics to include upgradation / downgradation and opening of additional Polyclinics has been under consideration with Ministry of Defence (DoESW). Salient highlights of the proposal are :-

- (i) Issue of expansion and upgradation / downgradation of Polyclinics automatically based on Daily Average Sick Report (DASR).
- (ii) Opening of 102 new ECHS Polyclinics.
- (iii) Provision of sufficient manpower to optimise delivery of healthcare to veterans at Polyclinics.

(j) **RFP for BPA – TPA for ECHS post expiry of Contract with UTI-ITSL.** Proposal for contracting of firms for role of Bill Processing Agency (BPA) and Third Party Administrator (TPA) for online bill processing through BPA and establishing a vigilance mechanism through TPA respectively is under consideration with MoD (DoESW).

(k) List of persons on website who are defaulters so that they don't find entry in ECHS ests.

(l) Progressing case of disempanelment of hospitals who are not providing facilities despite empanelment.

### **Participative Policy Making (PPM)**

(m) ECHS is providing health care to approximately 52 lakhs ECHS beneficiaries through a chain of 28 Regional Centres and 426 ECHS Polyclinics. Policies prepared at ECHS focus on concerns of our veterans and their dependents factoring honest governance norms. Due to sensitivity of health related issues and large coverage, it is essential that all stake holders are provided an opportunity to express their views prior to policy formulation.

(n) Towards this end, ECHS commences 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 will be uploaded on ECHS website under Participative Policy Making and will be available for comments for next ten days. The e-mail ID for response will be indicated with each draft policy document. ECHS website is being re-organised shortly for the purpose.

### **Project 'SPARSH'**

(o) A need was identified to create an environment of belongingness and introduction of stress busters by participation of stakeholders. It was felt that by involvement/partnership of the Veterans and contribution by the serving community through our AWWA initiative. We will be able to provide the healing touch, to take our outreach to the next level.

(p) The project intends to mobilise ECHS volunteers by :-

(i) Integrating veterans community into day to day activities of ECHS.

(ii) Involving serving community by reaching out to the veterans in ECHS Polyclinics.

(iii) Involving NCC/NSS/NGOs willing to serve those who have served the nation.

(q) The project is a volunteer based programme which counts on the time and effort of the volunteer to achieve its aim. The volunteer will be contributing based on his / her skill sets, assisting, counselling, helping and involving himself/herself in any way.

(r) The project has been launched on 10 Oct 2017 by President AWWA alongwith all Regional Presidents wherein sharing & caring will be extended to our veterans who need the same the most.

9. **Cases under Process with MoD.** The under mentioned cases have been taken up with MoD:-

(a) Procurement of 105 Tata Winger Ambulances. MoD has accorded approval for procurement by MGO Branch.

- (b) Procurement of 17+3 (Nepal Polyclinics Ambulance Vehicles for further modification to work as MMU (Mobile Medical Unit). MoD has accorded approval for procurement by MGO Branch.
- (c) Procurement of Vehicles and Generators for ECHS Nepal.
- (d) Revision of Fixed Medical Allowance (FMA) to personnel residing in districts not covered by ECHS Polyclinics.
- (e) Procedure for Empanelment of Hospitals under ECHS.
- (f) RFP for Establishing of Data Centre and ECHS Management System (EMS) for ECHS.
- (g) SMS gateway for ECHS.
- (h) Authorisation of IT infra for CO ECHS and its subordinates offices.
- (j) Extension of contract with UTI-ITSL.
- (k) Revised authorisation of Bandwidth to ECHS.
- (l) Revision of Authorized Land and Plinth Area.
- (m) Pan India Profile.
- (n) Regional Centres, ECHS at Delhi II (Pathankot) and Bhubaneswar (Odisha).
- (o) Requirement of contractual manpower based on Board of Officers.
- (p) Revision of agreement between contractually engaged persons and Stn Commander for rendering service to ECHS Polyclinic.
- (q) 100% reservation for ESM in ECHS.
- (r) Increase in manpower at ECHS Branch Embassy of India, Kathmandu Nepal.
- (s) ECHS Facility to Short Service Commissioned Officers (SSCOs)/ Emergency Commissioned Officers (ECOs) / Non Pensioner War Veterans of (1962, 1965, 1971 & Kargil War) and World War – II Veterans as under:-
  - (i) ECHS membership for World War-II Veterans.
  - (ii) ECHS facilities to ECOs, Veterans of 62, 65 & 71 Wars.
  - (iii) Short Service Commissioned Officers (SSCOs).
- (t) Introduction of revised Persons with Disabilities (PWD) Act – 2016.

- (u) Online Pharmacy and GEM Procurement : Authorised Local Chemists with ECHS.
  - (v) Online Integration of Rates and Discount on MRP.
  - (w) Proposed revision of CGHS rates and listed procedure for Dental in ECHS Polyclinic.
  - (x) Policy amendments to permit to ECHS Beneficiaries under Alternative System of Medicines Ayush.
  - (y) Scales of Medical Eqpt for ECHS Plyclinics.
  - (z) Profiling & Manning of ECHS Ests (incl Veteran Hosp & Veteran Wings).
10. **Important DO's & Don'ts.**

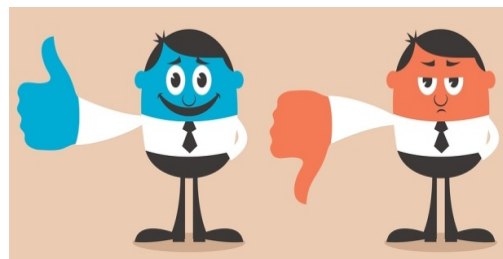
(a) **DO's.**

(i) Report to the nearest ECHS Polyclinic in case of any ailment.

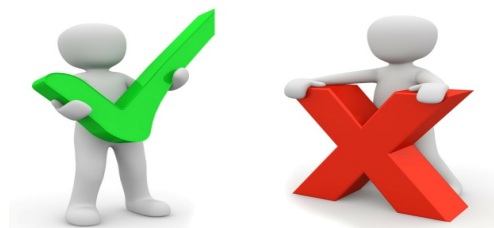
(ii) Obtain a referral before availing treatment in any empanelled hospital/ facility.

(iii) Ask treating physician to prescribe only generic medicines.

(iv) Inform the nearest ECHS Polyclinic within 48 hours, if an ECHS beneficiary gets admitted to a non-empanelled/ empanelled facility in an emergency.



(b) **Don'ts.** Do not get treated in a non-empanelled facility or unless it is an emergency without obtaining prior sanction, as grant of 'Ex Post Facto' sanction is not permissible. Planned treatment in a non-empanelled hospital is not permitted.



11. **Conclusion.** The ECHS is striving hard to ensure that our veterans and their dependents are provided with quality healthcare and all necessary measures are being instituted to ensure the same. It is our endeavour to dedicate ourselves and optimize all available resources to achieve the established goals.

**Appendix**

(Ref para 3 (e) of News Letter)

**IMPORTANT TELEPHONE NUMBERS & E-MAIL IDs****CENTRAL ORGANISATION ECHS**

<b>Appointments</b>	<b>Telephone No</b>	<b>E-Mail</b>
MD ECHS	011-25684846	<a href="mailto:mdechs-mod@nic.in">mdechs-mod@nic.in</a>
Dy MD ECHS	011-25683719	<a href="mailto:dymdechs-mod@nic.in">dymdechs-mod@nic.in</a>
Dir (Medical)	011-25683476	<a href="mailto:dirmedechs-mod@nic.in">dirmedechs-mod@nic.in</a>
Dir (Ops & Coord)	011-25684847	<a href="mailto:diropsechs-mod@nic.in">diropsechs-mod@nic.in</a>
Dir (Complaint & Litigation)	011-25690327	<a href="mailto:dircomplaints-mod@nic.in">dircomplaints-mod@nic.in</a>
Dir (Finance)	011-25683475	<a href="mailto:dirpfcechs-mod@nic.in">dirpfcechs-mod@nic.in</a>
Dir (Stats & Automation)	011-25684645	<a href="mailto:diritechs-mod@nic.in">diritechs-mod@nic.in</a>
Jt Dir (Stats & Automation)	011-25695245	<a href="mailto:jditechs-mod@nic.in">jditechs-mod@nic.in</a>
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Jt Dir (Ops)	011-25690325	<a href="mailto:jdops@echhs.gov.in">jdops@echhs.gov.in</a>
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<b><u>Department of Ex-Servicemen Welfare</u></b>		
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Jt Secy ESW	011-23011804	<a href="mailto:jsesw@nic.in">jsesw@nic.in</a>
US (WE)	011-23014946	<a href="mailto:us-ic@desw.gov.in">us-ic@desw.gov.in</a>

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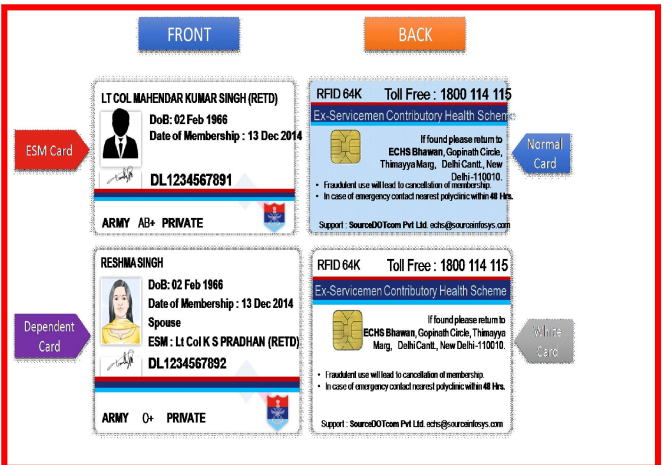
**PHOTOGRAPHS**



**INAUGURATION OF PROJECT SPARSH : 10 OCT 2017**



**HELPING OF VETERANS AT ECHS PC BATALA**



**FORMAT OF NEW SMART CARD**



**SWACHH BHARAT ABHIYAN : 02 OCT 2017**

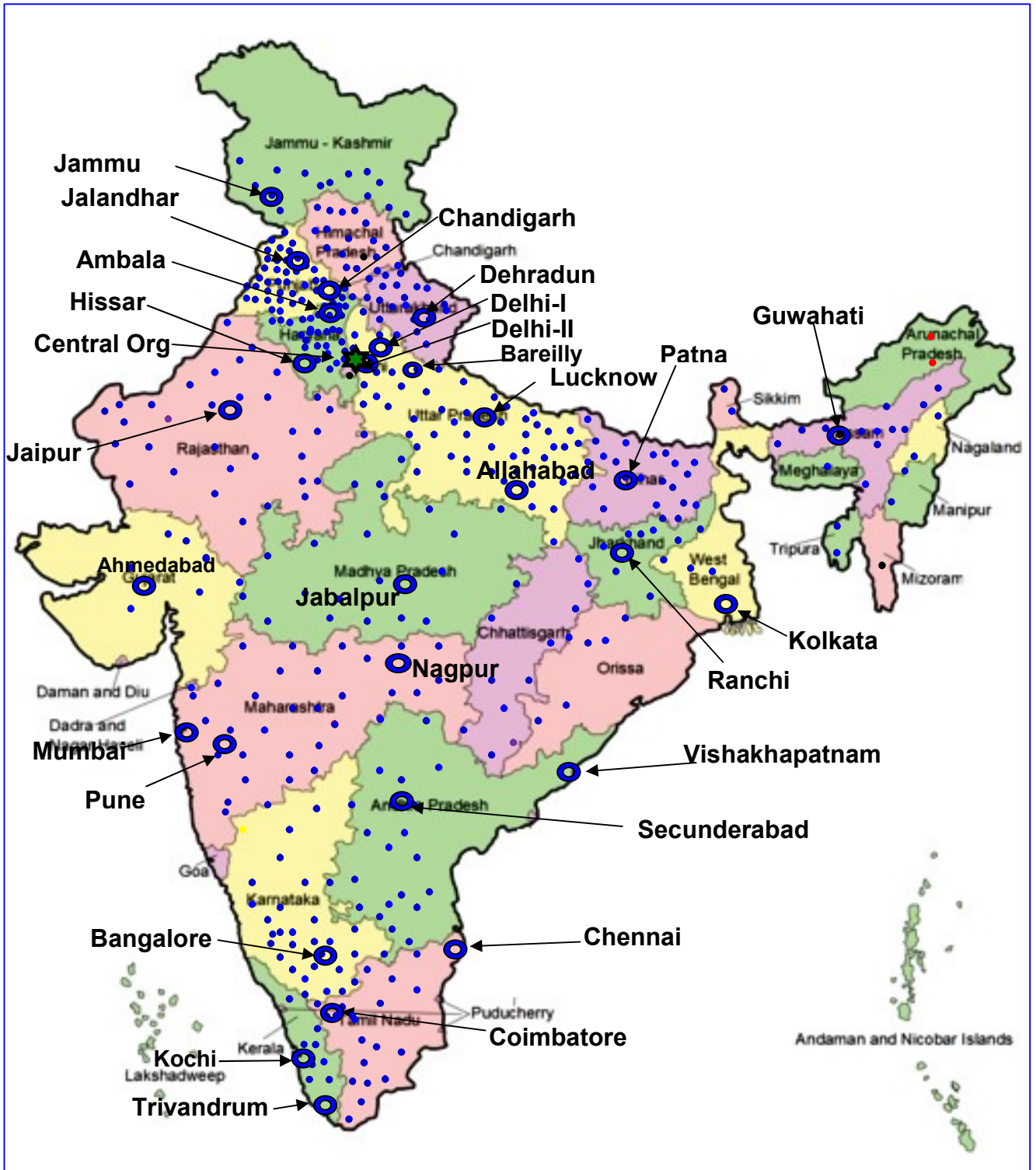


**ECHS SEMINAR : 01-02 FEB 2018**



**ECHS SEMINAR : 01-02 FEB 2018**

**ECHS NETWORK**



<b>LEGEND</b>	
	<b>Central Organisation, ECHS</b>
	<b>Functional Regional Centres</b>
	<b>Functional Polyclinics</b>
	<b>Polyclinics Awaiting Operationalisation</b>