

ECHS NEWS LETTER JUL- 2010

1. **Aim.** The scheme is seven years old and has since been stabilised satisfactorily. The Aim of ECHS is to ensure that as far as medicare is concerned the transition from active service to civvy street is as smooth and trouble free as possible. Amongst all the schemes aimed at the welfare of our Veteran's community, the Ex-Servicemen Contributory Health Scheme (ECHS) is emphatically paramount, both in respect of the primacy of attention accorded towards this initiative and its particular relevance.
2. **Scheme.** The Govt accorded initial sanction for Ex. Servicemen contributory Health Scheme (ECHS) on 30 Dec 2002. The Scheme was formally launched on 01 Apr 2003. ECHS caters for medicare of all ex-servicemen in receipt of pension and their dependents. The scheme envisaged a total membership of appx. 20 Lakhs with one Crore beneficiaries at the time of launch. The Scheme was intended to be stabilized over a period of five years by setting up of 227 Polyclinics, 13 Regional centres across the country and the Central Organisation at Delhi. Govt accorded sanction of one time capital budget of 122 Crores and revenue budget of 354.50 Crores per annum.
3. **Status.** The membership as on date is appx. Over 11 Lakhs with total beneficiaries of over 34 lakhs. All 227 sanctioned Polyclinics are fully functional as on date. All the 132 military hospitals are providing the medicare subject to availability of facilities/Beds. As on date 1355 Private hospitals have been empanelled under ECHS. 152 more Private hospitals applications are under consideration with MOD for according approval. 92% of medicare is provided at Polyclinics where as 3% medicare is provided at military hospitals and 5% at empanelled private hospitals. Capital expenditure incurred till date is 50 Crores on account of procurement of land, construction of polyclinics and purchase of medical equipments. The revenue expenditure till date is 1100 Crores which is mainly due to private hospitals bills, drugs and payment of staff. The Membership has been extended to CG, DSC & TA.
4. **Review.** The Govt has set up a committee in May 08 to review the functioning of ECHS after five years by the concerned reps of MOD / ECHS central organisation, Delhi. The review committee visited various commands, Station Headquarters, Polyclinics, ESM Organisations and obtained their views to make the scheme as user friendly as possible. The additional manpower recommended by the committee in Oct 08 has been submitted to MoD and awaiting approval. The polyclinic staff pay hike has been implemented. The financial powers of CFAs have been proposed for increase and the same is awaiting MoD approval. The referral procedure has since been reviewed and the policy letter has been promulgated. Non medical officers are appointed as Oi/Cs of polyclinics. Due to increase in OPD load and to make this easier, Medical officers also have been authorised to be appointed as Oi/C polyclinics.
5. **Expansion.** Govt. approval for setting up of 199 new polyclinics and 15 regional centres has been accorded on 26 May 10. 14 polyclinics from the existing 227 will be upgraded from one type to another and 11 polyclinics will be converted from military to non military. The additional budget required for setting up of new polyclinics is one time Capital expenditure of 130 Crores and revenue 45 crores per annum.

6. **Smart Card.** The possession of Smart card is essential for availing entitled medicare under ECHS. Additional cards may be requested as required for dependents at the cost of Rs.135/- per card. The cards are required to be activated at the parent polyclinic for registration. A separate white card for life is entitled for a differently abled child. Smart Card is accepted at all polyclinics. The dependent cards of parents and children will have to be reactivated after two years for the purpose of strengthening verification and vigilance.

7. **Medicines.** As far as Medicines Supply is concerned, PVMS drugs are supplied by the AFMSDs. Not available medicines in AFMSDs are procured through local purchase by military hospitals. However, there are complaints being received regarding non availability of medicines at polyclinics. Non availability of medicines is a major cause for clientele dissatisfaction. To overcome this lacunae the proposal for reimbursement is under consideration. Members will thereafter have an option to draw medicines from pharmacy through Oic polyclinic in locality on valid ECHS Prescription. This issue was discussed with DGAFMS and DGAFMS has given directives to ensure availability of drugs at polyclinics.

8. **Automation.** To improve the ECHS management which is mainly manual. Automation of ECHS has been undertaken. A project is under way for Automation of ECHS. After automation change of polyclinic on smart card will be done instantly. Automation will reduce time delay in manual bill processing and online payment to private hospitals will be done in a week to ten days time.

9. **ECHS Hospital.** A separate veteran ECHS hospital is under consideration by the Govt for setting up at Delhi. This hospital is planned to be set up next to Army College of Medical Science at Delhi Cantt with 500 Beds at a cost of 250 Crores due to ever increasing hospitalization expenditure. On successful implementation similar hospitals would be set up in other major cities (Chandigarh, Jalandhar, Lucknow, Kolkata, Jaipur, Secunderabad, Pune, Kochi, Bangalore).

10. **Dialysis.** Management of renal patients by haemodialysis is permissible to be treated as an emergency. Such patients can even seek treatment from a non empanelled hospital and claim reimbursement at the CGHS package rates for dialysis. All related ancillary requirement like consumables and drugs can also be admitted for reimbursement.

For any queries :-

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