BOARD DIRECTS ALL ZONES FOR EARLY ISSUE OF REVISED PPOS & REVISION OF PENSION

Finance Commissioner & Member Staff Railway Board had a detailed meeting with the Principal FA&CAOs and Principal CPOs of 4 major Zones recently, to discuss with them the reasons for the delay in issue of Revised PPOs and Revision of Pension as per orders on implementation of 7th Pay Commission and the remedial actions to be taken to expedite the same. Following are the extracts of Minutes of Meeting of Railway Board (FC & MS) with PFAs and PCPOs of CR, ER, NR & WR held on 8-2-2019

i) There are 1,14,069 cases in IR where revised PPOs are not initiated. Railways informed that these are hard core cases where data is not available. These need to be pursued and revised PPOs be issued at the earliest. The option of getting a copy of (old) PPOs from Banks should be explored to fast track revision of pension cases due to non-availability of records with Railways. Similarly PPOs of those drawing pension through Post offices and Treasuries need to be speeded up.

ii) Railways may interact with Banks and keep Accounts Department informed of the meeting so that the issue can be taken up with highest level of Banks centrally. Railways need to get in touch with CPPC of bank and get the details/PPOs for processing revision in a time bound manner.

iii) e-PPOs need to be adopted for error free, delay free transmission and also for MIS reports. Issues, if any, need to be brought to the notice of Accounts Department in Board office for taking up with CRIS and Banks.

iv) Spot check by Welfare inspectors are also needed apart from Accounts Department.

v) Dedicated cells should be formed in Personnel Department for Pension and NPS matters to coordinate with counterpart teams in Accounts. PED/IA requested MS to nominate an Executive Director in Railway Board also for coordination with Railways on NPS and Pension matters. MS agreed for the same. DG/Personnel shall issue necessary orders in the matter.

SPECIAL ISSUE ON MEDICAL FACILITIES FOR PENSIONERS ON RAILWAYS

ANNUAL GENERAL BODY MEETING & MEDICAL SEMINAR OF RSCWS
TO BE HELD ON TUESDAY, 30TH APRIL, 2019.
MEMBERS OF RSCWS ALONG WITH THEIR SPOUSES & OTHER RAILWAY PENSIONERS ARE CORDIALLY INVITED TO ATTEND THE ANNUAL GENERAL BODY MEETING OF RSCWS & MEDICAL SEMINAR ON “HEALTH PROBLEMS IN OLD AGE & THEIR MANAGEMENT”
ON 30TH APRIL, 2019 FROM 10 AM TO 1 PM (PLEASE REACH IN TIME)
AT GOVT. MUSEUM & ART GALLERY AUDITORIUM, SECTOR 10, CHANDIGARH
DRM AMBALA & CMS AMBALA HAVE BEEN REQUESTED TO BE THE SPECIALGUESTS OF HONOUR
PLEASE JOIN US FOR LUNCH AFTER THE MEETING & SEMINAR
MEMBERS WHO HAVE CROSSED 65, 80 & 90 YEARS OF AGE DURING THIS YEAR,
WILL BE HONOURED DURING THE MEETING

AGENDA: 1. ADDRESS BY THE CHAIRMAN 2. ADDRESS BY THE PRESIDENT; 3. REPORT BY THE SECRETARY GENERAL; 4. STATEMENT OF ACCOUNTS FOR FY 2018-19; 5. BIENNIAL ELECTIONS OF EXECUTIVE COMMITTEE; 6. HONOURING OF MEMBERS; 7. MEDICAL SEMINAR; 8. ANY OTHER POINT WITH THE PERMISSION OF THE CHAIR

– President & Secretary General, RSCWS

ADVANCE REGISTRATION FOR DLC (DIGITAL LIFE CERTIFICATE)
Members who could not get their DLC through RSCWS Volunteers in November, 2018, are advised to get themselves Registered after the meeting on 30-4-2019, to avoid being left out in November, 2019. They are requested to bring their PAN, AADHAR Cards & Pension Account No. for the purpose. - SG
### Revised Entitlement of Passes on Railways

**Sub:** Revised travel entitlements on Duty Passes, Privilege Passes & Post Retirement Complimentary Passes (PRCP).

1. Consequent to implementation of 7th CPC’s recommendations and notification of Railway Services (Revised Pay) Rules - 2016 (RSRP) w.e.f. 01.01.2016, the matter regarding linking of travel entitlements on Duty Passes, Privilege Passes/PTOs and PRCP with the 'Pay Level in Pay Matrix' (PLPM) has been examined in consultation with Commercial and Finance Departments. The Competent Authority has accorded his approval for the revised travel entitlements on status (i.e. Gazetted/Non-gazetted) cum PLPM basis as indicated in Annexure-I (for Duty Pass) and Annexure-II (for Privilege Pass/PRCP). In all other respects, the extant provisions of Railway Servants (Pass) Rules, 1986 (Second Edition-1993) will continue to apply.

2. The revised travel entitlements would take effect from 01.01.2016. Accordingly, PRCP/Widow Pass travel entitlement of the railway servants retired/deceased in the interregnum shall be re-fixed by the Pass Issuing Authorities. This issues with the concurrence of the Finance Directorate of Ministry of Railways.

### TRAVEL ENTITLEMENT ON PRIVILEGE & POST RETIREMENT COMPLEMENTARY PASSES

#### ANNEXURE - II TO LETTER NO. E(W)/2016/PS 5-1/8 DATED 31.01.2019

<table>
<thead>
<tr>
<th>No.</th>
<th>Status</th>
<th>Pay Level in Pay Matrix (PLPM)</th>
<th>Privilege Passes</th>
<th>PRCP (after 20 years of railway service)</th>
<th>No. of Passes in a calendar year</th>
<th>Class of Pass</th>
<th>Mail/Express Trains</th>
<th>Raigad/Radhus/Express Type Trains</th>
<th>Shatabdi Express Type Trains</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>CRB &amp; Board Members</td>
<td>17</td>
<td>06 Sets</td>
<td>03 Sets</td>
<td>First Class 'A'</td>
<td>2+RE-I</td>
<td>AEM</td>
<td>AEM</td>
<td>AEM</td>
</tr>
<tr>
<td>2</td>
<td>DGs &amp; GMs</td>
<td>16</td>
<td>06 Sets</td>
<td>03 Sets</td>
<td>First Class 'A'</td>
<td>1+RE-I</td>
<td>AEM</td>
<td>AEM</td>
<td>AEM</td>
</tr>
<tr>
<td>3</td>
<td>GMs &amp; other equivalent Officers</td>
<td>15</td>
<td>06 Sets</td>
<td>03 Sets</td>
<td>First Class 'A'</td>
<td>RE-III</td>
<td>AEM</td>
<td>AEM</td>
<td>AEM</td>
</tr>
<tr>
<td>4</td>
<td>HAG Officers (Including NF-HAG)</td>
<td>14</td>
<td>06 Sets</td>
<td>03 Sets</td>
<td>First Class 'A'</td>
<td>RE-III</td>
<td>AEM</td>
<td>AEM</td>
<td>AEM</td>
</tr>
<tr>
<td>5</td>
<td>SAG Officers (Including NF-SAG)</td>
<td>13</td>
<td>06 Sets</td>
<td>03 Sets</td>
<td>First Class 'A'</td>
<td>RE-III</td>
<td>AEM</td>
<td>AEM</td>
<td>AEM</td>
</tr>
<tr>
<td>6</td>
<td>Selection Grade Officers</td>
<td>12</td>
<td>06 Sets</td>
<td>03 Sets</td>
<td>First Class 'A'</td>
<td>RE-III</td>
<td>AEM</td>
<td>AEM</td>
<td>AEM</td>
</tr>
<tr>
<td>7</td>
<td>JAG Officers</td>
<td>11</td>
<td>06 Sets</td>
<td>03 Sets</td>
<td>First Class 'A'</td>
<td>RE-III</td>
<td>AEM</td>
<td>AEM</td>
<td>AEM</td>
</tr>
<tr>
<td>8</td>
<td>Sr. Scale Officers</td>
<td>10</td>
<td>06 Sets</td>
<td>03 Sets</td>
<td>First Class 'A'</td>
<td>RE-III</td>
<td>AEM</td>
<td>AEM</td>
<td>AEM</td>
</tr>
<tr>
<td>9</td>
<td>Other Group A &amp; B Gazetted Officers</td>
<td>9</td>
<td>06 Sets</td>
<td>03 Sets</td>
<td>First Class 'A'</td>
<td>RE-III</td>
<td>AEM</td>
<td>AEM</td>
<td>AEM</td>
</tr>
<tr>
<td>10</td>
<td>8 and above</td>
<td>8</td>
<td>06 Sets</td>
<td>03 Sets</td>
<td>First Class 'A'</td>
<td>RE-III</td>
<td>AEM</td>
<td>AEM</td>
<td>AEM</td>
</tr>
<tr>
<td>11</td>
<td>5</td>
<td>06 Sets</td>
<td>03 Sets</td>
<td>First Class 'A'</td>
<td>RE-III</td>
<td>AEM</td>
<td>AEM</td>
<td>AEM</td>
<td>NE</td>
</tr>
<tr>
<td>12</td>
<td>Non-gazetted Cadre</td>
<td>5</td>
<td>06 Sets</td>
<td>03 Sets</td>
<td>First Class 'A'</td>
<td>RE-III</td>
<td>AEM</td>
<td>AEM</td>
<td>AEM</td>
</tr>
<tr>
<td>13</td>
<td>4</td>
<td>06 Sets</td>
<td>03 Sets</td>
<td>Second Class 'B'</td>
<td>RE-III</td>
<td>AEM</td>
<td>AEM</td>
<td>AEM</td>
<td>NE</td>
</tr>
<tr>
<td>14</td>
<td>3</td>
<td>06 Sets</td>
<td>03 Sets</td>
<td>Second Class 'B'</td>
<td>RE-III</td>
<td>AEM</td>
<td>AEM</td>
<td>AEM</td>
<td>NE</td>
</tr>
<tr>
<td>15</td>
<td>2</td>
<td>06 Sets</td>
<td>03 Sets</td>
<td>Second Class 'B'</td>
<td>RE-III</td>
<td>AEM</td>
<td>AEM</td>
<td>AEM</td>
<td>NE</td>
</tr>
<tr>
<td>16</td>
<td>1</td>
<td>06 Sets</td>
<td>03 Sets</td>
<td>Second Class 'B'</td>
<td>RE-III</td>
<td>AEM</td>
<td>AEM</td>
<td>AEM</td>
<td>NE</td>
</tr>
<tr>
<td>17</td>
<td>0 and above</td>
<td>0</td>
<td>06 Sets</td>
<td>03 Sets</td>
<td>Second Class 'B'</td>
<td>RE-III</td>
<td>AEM</td>
<td>AEM</td>
<td>AEM</td>
</tr>
</tbody>
</table>

**Legend:**

- **A-EM:** All Eligible Members included in the Pass (i.e. self, Family members & dependent relatives, as defined under Rule 2 (c) & (d) and subject to other conditions stipulated in the extant Railway Servants (Pass) Rules).
- **RE:** Restricted Entitlement
- **NE:** Not Entitled

**Note:**

Existing provisions regarding attendant.com anion facility shall continue to apply.

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**Rajahmundry/Chennai Express Type Trains**

| Berth/Seat Entitlement | AEM | AEM | AEM | AEM | NE | NE | NE | NE | NE | NE | NE | NE | NE | NE | NE |

**Raidhani/Duronto Express Type Trains**

| Berth/Seat Entitlement | AEM | AEM | AEM | AEM | NE | NE | NE | NE | NE | NE | NE | NE | NE | NE | NE |

**Shatabdi Express Type Trains**

| Berth/Seat Entitlement | AEM | AEM | AEM | AEM | NE | NE | NE | NE | NE | NE | NE | NE | NE | NE | NE |

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**Note:**

- **RAILWAY PENSIONERS:** Stay in touch with the latest developments on pensioners' issues. Visit RSCWS website www.rscws.com regularly. Be active members of RSCWS & attend all meetings.
- **ANNUAL SUBSCRIPTION OF RSCWS:** Rs.100/- PA / LIFE MEMBERSHIP Rs.2500 (INCLUDING THAT FOR “PENSIONERS RAIL SAMPARK” - QUARTERLY JOURNAL OF RSCWS)
- **SUBSCRIPTION MAY BE PAID TO TREASURER RSCWS BY CHEQUE OR DD IN FAVOUR OF “RAILWAY SENIOR CITIZENS WELFARE SOCIETY” AND SEND TO HIS RESIDENTIAL ADDRESS:**
  - **SH. JASPAL SINGH, TREASURER, RSCWS, FLAT NO. 1020/1, FF, SECTOR-45 B, CHANDIGARH–160047 (PH.98760-92040)**
  - **PRESIDENT & SECRETARY GENERAL, RSCWS**
MEDICAL FACILITIES FOR PENSIONERS ON RAILWAYS

RETIRERED (RAILWAY) EMPLOYEES LIBERALIZED HEALTH SCHEME (RELHS-97) & FMA
- A COMPREHENSIVE COMPILATION

BY HARCHANDAN SINGH, SECRETARY GENERAL RSCWS

Retired (Railway) Employees Liberalized Health Scheme (RELHS-97) was started in 1997 to provide the Retired Railway employees with all medical facilities as for serving employees. The Retiring Railway employees with over 20 years or more of service could opt for joining RELHS by paying one time subscription of one month's last Basic Pay or two month's Basic Pension at the time of joining the Scheme.

HIGHLIGHTS OF FACILITIES PROVIDED TO RELHS-97 BENEFICIARIES & OTHER PENSIONERS:

Following facilities are provided to the Members/Beneficiaries of RELHS-97:

1. Medical Treatment for Self, Spouse & Dependents (as per prescribed condition), Reimbursement of claims for treatment in Govt. or Recognised Private/non-railway hospitals, Ambulance services, Medical passes, Home visits etc...
2. Medical attendance for first two pregnancies of married daughters at concessional rates.
3. Treatment of private servants as applicable to serving railway employees.
4. RELHS IDENTITY CARD
   a) RELHS Identity card will be issued by the Personnel Branch of concerned Railways. RELHS Identity card can also be issued from the Personnel Department of Division from which the retiree is drawing post retirement passes. The way-side station supervisors from where such retirees may be drawing post retirement passes can get such requests for RELHS Cards and arrange to forward the same to Personnel Department of the Division for arranging a RELHS Card.
   b) Identity cards are issued with photographs of all the beneficiaries.
   c) In case of married daughters included in the card photos of them to be provided with marking on the card as "ONLY FOR CONFINEMENT AND TREATMENT DURING ANTE-NATAL AND POST NATAAL PERIODS FOR THE FIRST TWO PREGNANCIES AT CONCESSIONAL RATES".
5. Availing Medical facilities without the card: a) Retired railway employees/their eligible family members can use attested copies of RELHS identity card when one of the family members moves out of station carrying RELHS card.
6. Attested copy of the medical identity card will be considered a valid document, for availing outdoor medical facilities at Railway Hospitals and Health Units for short duration upto 10 days.
7. However, in case of emergency, indoor treatment will be allowed on the basis of attested photocopy of Medical Identity Card in Railway and private recognized hospitals but original medical identity cards will have to be produced within 15 days.
8. In cases where split card is needed for different members of family for long term duration the original medical card may be deposited with the issuing authority who may issue split medical identity card to the beneficiaries as requested by them.
9. Eligibility & Mode of Joining:
   a) All retired Railway employees and spouse of the Railway employee who dies in harness.
   b) Employees who have completed 20 years of service and fulfill other criteria to make them eligible for post-retirement complimentary passes are eligible to become members of Retired Employees Liberalized Health Scheme.
10. RELHS-97 is mandatory for all Railway employees retiring on or after 31-5-2012.
11. Minimum 20 years of qualifying service in the Railways will be necessary for joining the scheme.
   (Condition waived off subsequently).
12. Condition of minimum of 20 years of qualifying service for joining RELHS-97 is not applicable in the case of medically invalidated employees and the spouses of employees who die in harness.
13. 50% of the period from the date of 'Temporary Status' to the date of 'regularisation' in respect of Ex-casual laborers will be counted for the purpose of 20 years qualifying service for joining RELHS – 97.
14. Surviving spouses of the deceased retired railway employees who died after superannuation are eligible to join RELHS-97, subject to fulfillment of other relevant conditions.
15. RELHS is not open to Railway servants who resign from service.
16. Resignation submitted by the Railway employees on permanent absorption in PSUs is to be taken as "Technical Resignation" and that they should be permitted to join RELHS-97 subject to fulfillment of the conditions prescribed in this regard.
17. Employees who are dismissed from service are not eligible to join RELHS-97.

18. Family/Dependents Family members and dependent relatives for who are eligible under Pass Rules are eligible for treatment under RELHS.

19. **ADMISSIBILITY OF FIXED MEDICAL ALLOWANCE**
   
a) Pensioners/family pensioners who do not join RELHS are entitled for Fixed Medical Allowance @ Rs.1000 per month – provided they are residing more than 2.5 Kms from the nearest Railway Hospital or Health Unit.

b) Pensioners/family pensioners who possess RELHS card but opt-out OPD facility are entitled for Fixed Medical Allowance provided they are residing more than 2.5 Kms from Rly. Hospital or H/Unit.

c) Pensioners/family pensioners who have RELHS card & avail OPD facility are NOT entitled for Fixed Medical Allowance.

20. **REOPENING OF RELHS:** Railway Board has re-opened RELHS scheme on 31.05.2012:
   
   a) RELHS-97 will remain open-ended and Pensioners can join it any time by paying prescribed subscription.

   b) There is a lock in period of six months for referral outside the Railway Hospital. This lock-in period can be relaxed only in an emergency provided the patient is either admitted or visits the Railway Hospital and the facilities for the treatment are not available in Railway Hospital. Such referrals are to be processed only on recommendation of a specially constituted Medical Board.

   c) Condition since waived off for March 2009 and onwards retirees - that RELHS-97 will remain open for a period of another one year from the date of issue of the letter for all those retired Railway personnel who have not joined the scheme for one reason or the other. The lock-in period of six months as applicable for pre-March 2009 retirees shall be applicable for these retirees also.

   d) **ALL SUPERANNUATED PENSIONERS ELIGIBLE TO JOIN RELHS IRRESPECTIVE OF DATE OF RETIREMENT:** Facility of joining RELHS-97 to all those Railway Employees who retired at the normal age of superannuation irrespective of number of years of their service before superannuation.

21. **ALL SUPERANNUATED PENSIONERS ELIGIBLE TO JOIN RELHS IRRESPECTIVE OF DATE OF RETIREMENT:** If such employees have any previous service from any other Government Department which makes them eligible for medical facility of that Department also, they should opt for one of the two facilities viz. Medical facility of the Department of previous service or RELHS-97.

a) Henceforth joining RELHS-97 has been made mandatory for all retiring Railway personnel without any exit clause whatsoever except those who specifically Opt-out of it in the Pension Form itself.

b) Lock-in period will be clearly and prominently mentioned on the card.

22) Railway Hospitals, Health Units etc. would ensure adequate medical facility to serving employees, their spouse and eligible dependents & RELHS-97 card holders, their spouse and eligible dependents in emergencies. Such a facility will be extended on production of railway medical identity card/any other documentary proof that establishes the railway identity in case of serving railway employees and RELHS-97 cards in case of retired railway employees during emergencies in places other than the place where their medical card is registered.

23) **a) RATE OF CONTRIBUTION TO JOIN RELHS:** Rate of contribution to join RELHS shall be last month’s basic Pay drawn or the subscription rate indicated at different levels (as per 7th CPC) – enumerated in the table below, whichever is lower:

<table>
<thead>
<tr>
<th>S.No</th>
<th>Levels in the Pay Matrix as per 7th CPC</th>
<th>Subscription rate to join RELHS</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Level: 1 to 5. [Grade Pay Rs.1800 to 2800]</td>
<td>Rs.30,000</td>
</tr>
<tr>
<td>2</td>
<td>Level: 6. [Grade Pay Rs.4200 ]</td>
<td>Rs.54,000</td>
</tr>
<tr>
<td>3</td>
<td>Level: 7 to 11. [Grade Pay Rs.4600 to 6600]</td>
<td>Rs.78,000</td>
</tr>
<tr>
<td>4</td>
<td>Level : 12 [Grade Pay Rs.7600] and above</td>
<td>Rs.1,20,000</td>
</tr>
</tbody>
</table>

   b) The rate of subscription as above shall be applicable to those railway employees who (have retired on or after 1-1-2016 or) shall be retiring and joining RELHS on or after 1-1-2016.

c) Those who have already retired and are not member of RELHS shall be governed by the rules which were prevalent at the time of their retirement.

d) **SRPF optees rejoining** – A sum twice the amount of ex-gratia monthly payment admissible on the date of joining the scheme.

24) While making referral letter, patients or their relatives will be asked to go through t list of empanelled hospitals already displayed in OPD or office where referral letter is being prepared and to give their choice in writing which can be endorsed on the referral letter. Patients or relatives will also affix his/her signature/LTI/RTI in the side space.

25) **Medical Identity Cards – Orders issued for Uniformity and renewal**
26) Simplification of procedure for Treatment of Cancer at Tata Memorial Centre, Mumbai.

27) REIMBURSEMENT OF MEDICAL EXPENSES: Medical expenses incurred by an RELHS Beneficiary are reimbursed on production of bills/receipts along with the prescribed Form countersigned by Supt. of the hospital, when an RELHS Beneficiary or spouse/Dependent have undergone Medical Treatment:
a) In an Emergency in a Government or Non-empanelled Hospital; OR
b) When Referred to a Government or non-empanelled hospital by Railway Medical Authority,

c) For emergency Treatment without approval by ADMO

d) Railway beneficiaries, both serving employees and retired employees (members of RELHS scheme) who have subscribed to Medical Insurance Policies, may be allowed to claim reimbursement both from the insurance company as well as Railways subject to the condition that the total amount of reimbursement from both the sources should not exceed the total expenditure incurred by the beneficiary for the treatment. The beneficiary will make the first claim to the insurance company and thereafter to the Railway concerned, wherever necessary.

28) CHRONIC DISEASES: A) RSCWS Optees continue to get prescribed Medicines for Chronic Disease even after Opting out of OPD facility from Railways. Chronic Diseases are those which last for approximately 3 months or more and are certified by a ADMO to be so besides 10 Chronic Diseases enlisted by Rly Board in its letter dated 12-10-2006 – including Arthritis & related Complications; Cardiovascular Diseases; Cancer of any part of body; Diabetes Mellitus; Epilepsy Disorders; Obesity/Chronic weight loss; Tuberculosis; AIDS; Oral Health problems; Chronic Skin disorders.

29) ‘Cashless Treatment Scheme in Emergency’ (CTSE) in empanelled hospitals anywhere in India for retired employees and their dependents in emergency to residing in any city cities of the country schedules to be done in 2019. (Details are awaited from Railway Board).

30) MEDICAL CONDITION CONSIDERED AS EMERGENCY BY RAILWAYS FOR TREATMENT IN GOVERNMENT OR PRIVATE HOSPITAL FOR REIMBURSEMENT OR FOR CASHLESS TREATMENT IN EMPANELLED HOSPITALS


i) Acute cardiac conditions/syndromes.

ii) Vascular catastrophes, Cerbo-vascular accidents.

iii) Acute respiratory emergencies.

iv) Acute abdomen including acute obstetrical, gynaecological emergencies.

v) Life threatening injuries.


vii) Heat stroke and cold injuries of a life threatening nature.

viii) Acute renal failure.

ix) Severe infections leading to life threatening situations.

x) Any other condition in which delay could result in loss of life or limb

31) Revised entitlement of wards in railway empanelled hospital for railway medical beneficiaries:

<table>
<thead>
<tr>
<th>S.No.</th>
<th>Corresponding basic pay drawn by the officer in 7th CPC per month</th>
<th>Entitlement</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Upto Rs. 47,600/</td>
<td>General ward</td>
</tr>
<tr>
<td>2.</td>
<td>Rs.47,601/- to Rs. 63,100</td>
<td>Semi-private ward</td>
</tr>
<tr>
<td>3.</td>
<td>Rs.63,101/- and above</td>
<td>Private ward</td>
</tr>
</tbody>
</table>

32) CTSE (Cashless Treatment System in Emergency) anywhere in India for Residents of 4 Metro Cities: Cashless Treatment System in Emergency (CSTE) was initially proposed to be introduced for all RELHS Beneficiaries in July 2012. However, it was finally introduced in 2016 in 4 Metro Cities only - for Medical treatment in any Private Empanelled Hospital anywhere in India in case of Emergency, on one time additional payment which was originally fixed by the Railway Board in 2016, were revised in 2017 as per table below so as to be at par with CGHS:

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>General ward</td>
<td>Rs.10,000</td>
<td>Rs.6,000</td>
</tr>
<tr>
<td>Semi-private ward</td>
<td>Rs.25,000</td>
<td>Rs.15,000</td>
</tr>
<tr>
<td>Private ward</td>
<td>Rs.50,000</td>
<td>Rs.30,000</td>
</tr>
</tbody>
</table>

(Disclaimer: This list of facilities under RELHS-97, is only for general awareness of Pensioners. Orders of Railway Board may be referred to at the Website of RSCWS www.rscws.com or of Indian Railway).
HEALTH CARE FACILITIES IN TRICITY (CHANDIGARH, PANCHKULA, MOHALI)

1. NR Health Unit In Railway Colony, Chandigarh
   (With Doctor for 6 days a week 8 AM to 2 PM in Summer & 9 AM to 3 PM in Winter)

2. PGI & Govt, Hospital Sector 32 Chandigarh
   (On reference by Railway Doctor Chandigarh Or CMS UMB (against Reimbursement)

3. Any Government or Non empanelled Hospital
   (In Emergency – against Reimbursement

4. HOSPITALS EMPANELLED BY RAILWAYS
   (Cashless Treatment on referral by CMS Ambala & In emergency with approval by CMS within 24 hours of Admission)
   RELHS Optees can get Cashless treatment in 6 Empanelled Private Hospitals by the Railways - including Fortis Hospital, Phase 8, Mohali, IVY Hospital, Sector 71, Mohali, MAX Hospital, Phase 6, Mohali, Indus Hospital, Phase 1, Mohali, Sri Guru Harkrishan Eyes & Super Speciality Hospital, Sohana & Mukat Hospital Sector 34, Chandigarh only if referred to by CMS Northern Railway, Ambala or in case of Emergency, if approved by the CMS within 24 hours of admission.

5. HOSPITALS EMPANELLED WITH RSCWS: FORTIS, IVY, SHALBY, OJAS & MUKAT
   MEMBERS OF RSCWS ARE PROVIDED TREATMENT AT CGHS RATES BY THESE HOSPITALS
   Fortis Hospital, Phase 8, Mohali, IVY Hospital, Sector 70, Mohali, Shalby Hospital, Phase 9, Mohali, Ojas Hospital, Sector 26, Panchkula & Mukat Hospital Sector 34 Chandigarh – will provide treatment in OPD, IPD & for Diagnostics (Tests) at CGHS rates to the Members of RSCWS (Railway Senior Citizens Welfare Society) for all available specialties, against payment in cash, Debit Card or DD on production of Membership Card of RSCWS, as per agreement by these Hospitals with RSCWS. This will benefit a those Members of RSCWS in getting treatment at lower rates even if they have not joined RELHS or are denied approval by Railway Doctors for treatment in emergency in these Hospitals or are not referred to these Hospitals in. Only CGHS rates are reimbursable in non-referral cases. This will also facilitate Reimbursement by the Railways as the same is only done at CGHS rates.

REIMBURSEMENT OF MEDICAL EXPENSES BY RAILWAYS WHERE PART PAYMENT IS RECEIVED BY THE BENEFICIARY THROUGH MEDICAL INSURANCE CLAIM

Copy of RAILWAY BOARD’s letter No. 2009/H/6-4/Policy Dated: 09.04.2015

Sub: Policy on reimbursement of medical expenses by Railways where part payment has been received by the beneficiary through medical insurance claim.

Ref: Railway Board’s letter no. 2009/H/6-4/Policy, dated 28.02.2013.

Railway Board has been receiving representations from various quarters for modifying the extant policy on reimbursement of medical expenses where part payment has been made through insurance claims. After due consideration, in supersession of the above referred letter, the following instructions are issued:

1. The medical claim against the original vouchers/bills would be raised by the beneficiary first to the insurance company, which would issue a certificate, addressed to the concerned CMS/MD indicating the amount reimbursed. The insurance company will retain the original vouchers/bills in such cases and issue photocopies of bills/vouchers duly certified in ink along with stamp of the insurance company.

2. The beneficiary would thereafter prefer his/her medical claim along with photocopies of vouchers/bills duly certified, in ink, along with stamp of the insurance company to the concerned MD/CMS through the Health Unit/Hospital where the Medical I card is registered.

3. Medical Department shall scrutinize the Claim as per the extant rules of Railway, ignoring the amount already reimbursed by insurance company, and the amount found admissible, as per Railway approved rates, will be processed fee reimbursement.

4. Reimbursement from Railway will however be limited to the difference between actual amount spent by beneficiary and the amount already reimbursed by insurance company “or” the amount found admissible as per Railway Rules, whichever is lower. (Illustrative examples are enclosed as annexure 1)

5. The fact that the claim has been accepted and processed by an Insurance Company does not confer any validity/legality to the claim as far as reimbursement from Railways is concerned. Reimbursement from Railways shall be done only if the Claim is admissible as per the extant rules of Railways. Just like any other reimbursement claim, it can be rejected at any stage.
RSCWS SEeks Better & More “Patient Friendly” Medical Facilities for Railway Pensioners

Copy of Memorandum No. RSCWS/HO/CHD/289/2019-20 Dated: 31-1-2019 to CRB, MS & DGRHS from RSCWS
Subject: Appeal for Improvement of Health Care facilities for Railway Pensioners/ RELHS Beneficiaries

Railway Medical Beneficiaries, especially the old age RELHS Optees are at times put to inconvenience & hardship due to existing procedural problems especially in getting specialized medical treatment in Emergency and for getting referral for treatment in empanelled hospital. It is requested that the Railways may please simplify the system in regard to the following vital areas (none of which involves any financial implications but will reduce the hardship of the old age Pensioners):

a) Authorisation of Doctors of Railway Health Units for referral to empanelled private hospitals: Railway Board vide its orders No.2018/Trans Cell/Health/Medical issues dated 24-1-2019 has decided that the Railway Beneficiaries may be referred for treatment & Investigation to private empanelled and other Government Hospitals by “two Doctors”. This has left out the Single Doctor Health Units in cities like Chandigarh as not being authorised to refer the cases to Empanelled specialized Hospitals and thus compelling the Railway Beneficiaries to travel long distances from such cities, towns & areas which have single Doctor Health Units to reach out to the two authorized Doctors to get a referral for an ailing patient. The hardship thus continues for majority of Old age patients to get the requisite treatment.

It is requested that:

a) The Doctors of the Railway Health Units be authorized to refer the Railway Beneficiaries/RELHS Optees to private empanelled hospitals and if so required, the Health Unit Doctor may get the approval from the other authorized Doctor on Phone and record it on the referral documents.

b) Waiving of condition of Referral from Railway Doctor of RELHS Optees for OPD Consultation & treatment in Government Hospitals: It is requested that RELHS Optees be not required to get a referral from Railway Doctor for treatment in Centre or State Government Hospitals of their choice & convenience – on Reimbursement basis.

b) Simplification of Procedure for RELHS Beneficiaries for Treatment at private empanelled hospitals without referral by the Railway Doctor, if they are advised specialized treatment by a Specialist in a Central Government/State Govt. Hospital – as has now been allowed to CGHS Beneficiaries vide Ministry of Health & Family Welfare, OM No.Z15025/105/2017/DIR/CGHS/EHS dated 9-11-2017 – Reg. Simplification of procedure for treatment at private hospitals empanelled under CGHS/CS (MA) Rules, 1944.


It is requested that the guidelines for the CGHS issued by MOH&FW vide their letter cited above may please be considered for their application to the Railway Medical beneficiaries; And similar guidelines may also please be issued regarding adequate validity of Approval for Treatment in Emergency in the Empanelled Private Hospitals for Railway Beneficiaries.

d) Special provisions for Treatment of the RELHS Beneficiaries who are above 80 years of age especially regarding “Priority for Treatment in Hospitals”; “Settlement of Medical Reimbursement Bills” & “Referral to Private Hospital of choice” – as prescribed for the CGHS Beneficiaries vide MOH&FW OM No. Z–16025/98/2017/CGHS-III dated 11-7-2017.

e) OPD Consultation in Empanelled Hospitals for Railway Medical/RELHS Beneficiaries – as per procedure prescribed for the CGHS Beneficiaries vide MOH&FW OM No. Z15025/117/2017/DIR/CGHS/EHS Dated dated-15-1-2018 regarding Simplification of referral System under CGHS.


g) i) Expedient implementation of CTSE (Cashless Treatment System in Emergency) in empanelled hospitals to all RELHS Beneficiaries all over India and expedient issue of SMART CARDS for the same. Incidentally, the same has yet not been completed in the four Metro cities where the same are held up since 2016. It may please be expedited.

ii) Detailed instructions for extension of CTSE for other Cities – as referred to in Railway Board’s letter No.2014/H/28/1/Smart Card/Part A, dated 02.11.2018 may be issued early and SMART CARDS for the same may also please be expedited.

iii) Waiving of additional charges for CTSE from RELHS Beneficiaries as they had already made one-time payment for joining RELHS which fully covered Cashless Treatment in Emergency in local Empanelled hospitals where card was registered and against reimbursement in other cities in India.
RSCWS URGES UPON CMD NR TO IMPLEMENT RAILWAY BOARD’S ORDERS TO IMPROVE MEDICAL FACILITIES

In a memorandum to CMD Northern Railway, RSCWS, has requested him to implement Board’s orders to improve Medical Facilities in the Health Units & Hospitals, as advised vide Railway Board’s Letter NO. 2018/Trans Cell/Conclave/Health Dated 23-3-2018 (Copy attached)

Copy of Railway Board’s Letter No.2018/Trans Cell/Conclave/Health Dated 23-3-2018 to all GMs

During conclave “Sampark, Samanvay, Samvad” held on December 16, 2017, GM/WR was nominated to frame ‘Guidelines on Hospitals and Medicines’. Full Board in its meeting on March 06, 2018 considered the guidelines submitted by GM/WR and decided the following:

1. Road Mobile Van with a suitable ex-cadre contract doctor and para-medical staff be provided wherever rail services are inadequate to cater to the healthcare needs of staff and their families on road side stations.

2. Wherever posts are available but not getting filled in by normal recruitment process in categories such as essentially required for patient care, these may be filled in on contract basis. Where posts are not available, the activities, which are essential for the functioning of hospital, may be outsourced.

3. For Hospitals/Health Units which do not have Lady Doctors, engagement of a Lady Doctor on part-time contract basis may be done on lines similar to engagement of part-time Dental Surgeons.

4. Scheme to call medical consultants to Railway Hospitals for providing professional services on case-to-case basis may be extended to Health Units also. Health Units may also be permitted to seek consultancy of private consultants by referring as an OPD case. For this purpose, consultants can be empanelled.

5. For engagement of Honorary Visiting Specialists (INS), the rates will be notified by DG/RHS. The number of MS required may be decided by GM based on recommendations of CMD and PFA.

6. For procedures/surgeries performed at non-Railway hospitals, follow up visits to the treating doctor/hospital are considered essential. Upto three follow up visits may be permitted in normal course. However, if more follow up visits are required, the same may be permitted with the approval of MD/CMS/CMO.

7. A Hospital Administrator should be appointed by the GMs for all zonal hospitals.

8. Implementation of Hospital Information Management System should be expedited and separate feedback given to DG/RHS for information of Board.

9. If a firm has been approved for supply of medicines for any of the zones, the same should be applicable for all Indian Railways.

10. The annual procurement of medicines of 50% of the last year quantity may be done without waiting for indents by respective Zonal Railways/Pus. There should be a 30% option clause which should be operated after finalization of the final vetted demand.

11. The limit of 15% of AMI on Local Purchase may be reviewed by GMs and fixed in consultation with PFA.

12. The LP suppliers need to be selected in a manner that the distance from the hospital is within 5 kms, and as far as possible these are open on 24 hrs basis.

13. Facility of kidney/liver transplant is generally not available at CGHS rates. It needs to be examined by DG/RHS as to how other government departments are managing the situation.

14. For making advance payments to non-Railway hospitals in case of emergencies such as road accidents, a suitable cash imprest may be sanctioned by GMs for Hospital/Health Unit as considered necessary by CMD.

15. Medicine Procurement Process needs to be examined and streamlined. This may be done by Transformation Cell along with a Doctor nominated by DG/RHS.

Copy of Memorandum No. RSCWS/HO/CHD/Memo/2019-1 Dated: 11-1-2019 to MS RB from SG RSCWS Transformation Cell along with a Doctor nominated by DG/RHS.

Subject: Grant of Full Sets of Post Retirement Complementary Passes (PRCP) after 20 years of Railway Service – Appeal for extension of Benefit to Pre-2006 Pensioners

1. Railway Board vide their letter dated 16-12-2013 cited above, had decided that employees retiring after completing 20 years or more of Railway service be granted Full sets of Post Retirement Complementary Passes (PRCT) every year i.e. 2 Sets to those who retired from Group C and 3 Sets to those who retired from Group A & B.

2. Railway Board vide their letter dated 12-3-2014 cited above, had decided that the above said orders dated 16-12-2013 - shall be effective from 01.01.2006 i.e. those who retired on or after 1-1-2006 with 20 years or more service will also get Full sets of PRCPs.

3. This left out the Pre-2006 Retirees with 20 years or more of Railway service who continue to get lesser number of PRCPs i.e. only 1 Set for those who retired from Group C and 2 Sets for those who retired from Group A & B. This is a discrimination and against the law of natural justice and settled law of Parity between the old and new Pensioners.

4. It is, therefore, requested that the Pre-2006 Retirees with 20 years or more service, may also please be granted Full Sets of Post Retirement Complementary Passes (PRCP) i.e. 2 Sets to those who retired from Group C and 3 Sets to those who retired from Group A & B.

NEWS IN BRIEF

- 12% DA to Central Government Employees & Pensioners from January, 2019
- Exemption from Income Tax if Taxable Income is below Rs.5 Lakhs for FY 2019-20 / AY 2020-21.
- No change in Income Tax Rates for AY 2020-21 than those for AY 2018-19
The earlier Pay Commissions.

1. The revised pension has unjustly been fixed at Rs.8345 vide Para 7 of DOP&PW OM dated 4-1-2019 w.e.f. 1.1.2006, whereas the same should have been fixed as Rs.9230 in terms of para 4.2 of OM dated 1.9.2008, for the pre-2006 pensioners who retired from the pay scale of Rs.6500-10500/- in the 5th CPC or equivalent pay scales in the earlier Pay Commissions @ 50% of the minimum Revised Pay of Rs.18460 in the replacement Scale of Rs.7450-11500 with corresponding Pay Band of Rs.9300-34800 plus Grade Pay of Rs.4600.

2. a) Revised pay scale in 6th CPC for 5th CPC scale of Rs.6500-10500 was Rs.7450-11500 with corresponding Pay Band of Rs.9300-34800 & Grade Pay of Rs.4600 as per MOF DOE OM dated 13.11.2009.

b) While calculating revised minimum Pension for Pre-2006 Pensioners who retired from 5th CPC scale of Rs.6500-11500 (or its equivalent in earlier CPCs) only the Grade Pay of Rs.4600 & Minimum Pay of Rs.6500 has been considered instead of considering the minimum Revised Pay of the replacement scale of Rs.7450-11500 in Pay Band plus the grade Pay of Rs.4600, ignoring the orders for replacement scale of Rs.7450-11500.

3) a) This is totally unjustified and against Para 4.2 of DOP&PW OM dated 1-9-2008 which has been partially adopted and cited in abstract merely to tailor make the results.

b) Para 4.2 of DOP & PW OM dated 1.9.2008, reads as under:

“4.2 The fixation of pension will be subject to the provision that the revised pension, in no case, shall be lower than fifty percent of the pay in the revised pay band plus the grade pay corresponding to the pre-revised pay scale from which the pensioner retired. In case of HAG + and above, this will be fifty percent of the minimum of the revised pay scale.”

4. Pre-2006 Pensioners have been denied the benefit of the following orders issued vide Para 3 of MOF DOE OM No.1/1/2008-IC dated 13.11.2009, which reads as follows:

“3. It has now been decided that the posts which were in the pre-revised scale of Rs.6500-10500 as on 1.1.2006 and which were granted the normal replacement pay structure of pay grade of Rs.4200 in the pay band PB-2, will be granted grade pay of Rs.4600 in the pay band PB-2 corresponding to the pre-revised scale of Rs.7450-11500 w.e.f. 1.1.2006. Further, in terms of provisions of CCS(RP) Rules, 2008, in case a post already existed in the pre-revised scale of Rs.6500-10500 it should be merged with the post in the scale of Rs.7450-11500.”

5. a) The benefit of this up-gradation was allowed to those in service with effect from 01-01-2006 and to those who retired after 01-01-2006. But the benefit of this up-gradation was not extended to the pre-2006 pensioners. Thus, creating discrimination between the Pre & Post-2006 Pensioners - in violation of settled law by the Apex Court in D. K. Nakara’s case as well as in Major Genl. Bains Case.

6. This led to multiple litigations by the affected pensioners in various Courts wherein clear verdicts were given against this discrimination. But the benefit of all the judgements on this issue was confined by the Department concerned, to the Petitioners only thus depriving the same to other similarly placed pensioners thereby creating another class between a homogenous class of Pensioners.

7. The Pensioners’ Associations, including the RSCWS & BPS, have all through been requesting the GOI for a general order extending the benefit to similarly placed pensioners as per law of natural justice. But the belated orders issued vide DOP&PW’s OM dated 4-1-2019, cited above, granting the minimum Pension of Rs.8345 instead of Rs.9230 is a total violation of Articles 14, 16 & 39 of the Constitution, verdicts of various courts on this issue as well as the Government’s orders issued vide DoP&PW’s OM dated 1-9-2008 & 30-7-2015 – extending the benefit of Para 4.1 to all pre-2006 Pensioners – as cited above.

8. Keeping in view the orders of MOF dated 13-11-2009, CAT Bangalore in OA.No.170/00730/2017 in its judgement dated 18-6-2018, reproduced below, has held that the concerned Pensioners who retired from the pre-revised scale of Rs.6500-10500, were entitled to a minimum Pension of Rs.9230 from 1-1-2006.

“The OM dtd.13.11.2009 had clearly stipulated that the posts which were in the pre-revised pay scale of Rs.6500-10500 as on 1.1.2006 and which were granted the normal replacement pay structure of grade pay of Rs.4200 will be granted grade pay of Rs.4600 corresponding to the pre-revised scale of Rs.7450-11500 with effect from 01.01.2006. This makes evidently clear that the applicants were to be considered against the pay scale of Rs.7450-11500 with grade pay of Rs.4600. The revised pay and pension has to be calculated on that basis and that comes to Rs.9230. The manner of computing the pension by the respondents is therefore completely wrong and bereft of any logic. Therefore, we hold that the order of August 2017 at Annexure-A12 is completely erroneous and unjustified and the same stands quashed. The respondents are directed to grant revised pension of Rs.9230/- to the applicant w.e.f. 01.01.2006 along with consequential benefits within a period of one(1) month from the date of receipt of copy of this order.”


10. It is, therefore, requested that the minimum revised pension may please be fixed as Rs.9230 w.e.f. 1-1-2006 for the pre-2006 pensioners who retired from the pay scale of Rs.6500-10500/- in the 5th CPC or equivalent pay scales in the earlier Pay Commissions.
RSCWS URGES FOR REVISION OF PENSION OF PRE-1996 PENSIONERS WHO RETIRED FROM POSTS IN 4TH CPC PAY SCALE OF RS.1400-2300

Copy of Memorandum No. RSCWS/HO/CHD/2019-9 Dated: 18-2-2019 to Sh. K. V. Eapen, Secretary, AR PG & Pension, Govt. of India, from RSCWS

Subject: Revision of Pension of Pre-1996 Pensioners w.e.f. 1-1-2006 - Regarding: Minimum Revised Pension of Pensioners who retired from posts in 4th CPC Pay Scale of Rs.1400-2300 which were placed in replacement scale of Rs.5000-8000/PB-2 Rs.9300-34800 + GP Rs.4200.


1. We draw your kind attention to the unjust suffering of thousands of Pre-1996 Pensioners who retired from posts in 4th CPC Pay Scale of Rs.1400-2300 who have unjustly been denied the benefit of replacement scale of Rs.5000-8000/PB-2 Rs.9300-34800 + GP Rs.4200 in fixation of their minimum revised Pension from 1-1-2006.

2. Various courts in their judgements on this issue, have held that the Revised Minimum Pension has to be fixed at 50% of the pay with respect to the scale of pay applicable to the post in question and not to the corresponding scale of pay at which the incumbent has retired. Kind attention is invited towards some of the judgments of the Apex Court, High Courts and various Benches of CAT:

   a) Apex Court in the case of Major General (Retd) SPS Vains in SLP (CIVIL) NO. 12357 of 2006 decided on 9-9-2008, has re-established the finality of the judgment of the Constitutional Bench in D.S. Nakara vs UOI (1983) 1 SCC 305 - wherein creation of different classification of homogeneous group of Pensioners was held to be violative of Article 14 of the Constitution of India.

   b) CAT Ernakulam in its judgement in OA 180/00200/2014 dated 16 July, 2015 had held that "Any modification of the Cabinet resolution by a subsequent administrative order is ultra vires. Accordingly, the O.As are allowed. The respondents are directed to issue revised Pension Payment Orders to the applicants in the O.As specifying that pension of pre-2006 retirees will be calculated on the basis of 50% of the minimum of the pay band plus grade pay corresponding to the pre-revised pay scale of the respective post held at the time of retirement, proportionate to the length of his service and fix higher of the two as pension with effect from 1.1.2006 and corresponding family pension and grant all consequential benefits including arrears."

   c) CAT Ernakulam in its judgement dated 13-7-2012 in O.A No 33/2012 had quash and set aside impugned order and directed the respondent to refix the pensionary benefits of the applicant from 1.1.2006 as if he was drawing the pre-revised V CPC scale of pay Rs.5000-8000 and grant arrears thereof.

   d) In its final judgment dated 16-12-2016, the Hon’ble High Court of Kerala, in WPC No. 34171/2016, WPC No. 22153/2016 and WPC 21477/2016, has held that the “computation of pension in the matter of implementation of the 6th pay commission report has to be at 50% of the pay with respect to the scale of pay applicable to the post in question and not to the corresponding scale of pay to the one at which the incumbent has retired.”

2. e) All these judgements have been implemented and the Petitioners have been given the benefit of the same as cited above. Denying the same to other similarly placed pensioners is discriminatory and violative of Article 14 of the Constitution.

3. It is, therefore, requested that the Minimum Revised Pension for Pre-1996 Pensioners retired from posts in scale Rs.1400-2300, be fixed at Rs.6750 from 1-1-2006 with proportionate Family Pension, in case of posts which were placed in replacement scale of Rs.5000-8000/PB-2 Rs.9300-34800 + GP Rs.4200 at 50% of the revised pay with respect to the scale of pay as applicable to the post from which the incumbent Pensioner had retired and not corresponding to the normal scale of pay at which the Pensioner had retired.

PLEASE SEE COPIES OF FOLLOWING MEMORANDUMS, BESIDES OTHERS, AND UP-TO-DATE ORDERS OF GOVT. ON PENSIONERS ISSUES ON RSCWS WEBSITE www.rscws.com

- Revision of pension w. e. f. 1.1.2006 & 1-1-2016 of Pre-2006 pensioners who retired from the 5th CPC scale of Rs.6500-10500 – Reg Revision of Fitment Table as per 6th CPC and Concordance Table as per 7th CPC for Revision of Pension of Pre-2006 pensioners who retired from 5th CPC Pay Scale of Rs.6500-10500 or equivalent in earlier CPCs (Memo to Joint Secretary, DOP&PW, Dated: 21-1-2019)
- Revised Minimum Pension of Pre-2006 Pensioners as per scale of pay of the post and not the corresponding scale of pay at which the incumbent retired – Request for Application of judgements of various Courts for Revision of Pension of similarly placed Pre-2006 Pensioners (Memo to MOS Personnel, PG & Pension, Dated: 31-1-2019)
- Revision of Pension of Pre-1996 Pensioners w.e.f. 1-1-2006 Reg. Revised Minimum Pension at 50% of the revised pay with respect to the scale of pay as applicable to the post from which the incumbent Pensioner had retired and not corresponding to the scale of pay at which the Pensioner had retired - Case of Pre-1996 Pensioners retired from posts in scale Rs.1400-2300 which were placed in replacement scale of Rs.5000-8000/PB-2 Rs.9300-34800 + GP Rs.4200. (Memo to MS Railway Board Dated: 18-2-2019)
- Validity of year-ending Passes – Request for Clarification regarding last date of Application to be 31st May of next year (Memo to MS Railway Board Dated: 18-2-2019)
Ivy Hospital, Mohali

is empaneled by Northern Railway, DMW & RCF Kapurthala for the cashless treatment of Railway beneficiaries in emergency and on reference by authority.

In non-referral cases, members of RSCWS (Railway Senior Citizens Welfare Society) shall be treated and charged on CGHS rates for all specialties in IPD, OPD & Diagnostics for the various specialties against cash/credit card/Debit Card/DD facilities, on production of Membership Card or letter of Authority of RSCWS.

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