

**OF PENSIONERS SINCE 1991** 

## RAILWAY SENIOR CITIZENS WELFARE SOCIETY

### **CHANDIGARH**

Website: www.rscws.com Journal: "Pensioners' Rail Sampark"

IDENTIFIED & RECOGNISED BY DOP&PW GOVT. OF INDIA - UNDER PENSIONERS'
PORTAL

### MEMBER, SCOVA (STANDING COMMITTEE FOR VOLUNTARY AGENCIES)

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Dated: 16-1-2021

No. RSCWS/HO/CHD/Memo-Med/2021-2

Dr. Surinder Mohan Sharma, Addl. Chief Medical Superintendent, Northern Railway Divisional Hospital, Ambala Cantt. – 133001

Dear Sir,

Subject: i) Improvement of Health Delivery System and Emergency Treatment in Empanelled Private Hospitals

ii) Request for implementation of orders of Railway Board regarding procedure for Medical Treatment in Empanelled Private Hospitals in Emergency & on Referral of Railway Beneficiaries (especially the Pensioners).

Ref: - i) Railway Board's letter No. 2011/H/6-4/Policy Dated 03/02/2015

- ii) Railway Board's letter No. 2018/TransCell/Health/CGHS/eOff.No. 3270783) Dated 28/12/2020. (Copy Enclosed) Reg. Improvement of Health Delivery System and Emergency Treatment in Railway Empanelled Private Hospitals
- 1. RSCWS is a recognized association of Pensioners by DOP&PW Govt. of India under Pensioners' Portal and a Member of SCOVA (Standing Committee for Voluntary Agencies). The Society is working for the welfare of the Railway Pensioners since 1991.
- 2. We deeply regret to mention that the Railway Pensioners and their families who are RELHS optees, especially those residing away from Ambala, in the tri-city of Chandigarh, Mohali and Panchkula, are being put to great hardship due to certain practices adopted in the Ambala Division, especially regarding procedure for Medical Treatment in Emergency & on Referral of Railway Beneficiaries (Pensioners) in Empaneled Private Hospitals and diagnostic centres. This is in contravention of patient friendly orders of the Railway Board and NR Head Quarters Office.
- 3. Your kind attention is invited to Railway Board's letter dated 28-12-2020 referred to at SI. No. ii) above, wherein Para 6 & 7 lay down the procedure to be followed in case of Emergency Treatment:-
  - "6 The Hospital will intimate all instances of patients admitted as Emergencies (without prior permission) to the Railway authorities at the earliest and will within 24 Hours and Railway will revert within next 24 Hours, otherwise it will be treated as deemed approval. The empanelled hospital will clearly mention/certify the emergency condition as per MOU.

7 Railway hospital as well as empanelled hospital will share the contact number and email address for communication for this purpose and will ensure to put on the website of Railways as well as of the Hospital. The documents and approvals will be shared on the email to save the time and difficulties faced by patients. The empanelled hospitals will not insist to patients to get the approval of referral/extension from the Railway hospital. Same will be coordinated and approved on the contact number and email by the empanelled hospital and Railway Hospital."

- 4. Railway Board Guidelines issued vide para 6 of letter referred to at SI. No. i) above, have laid down as under: "6. Whenever a patient needs to be referred to an outside centre for investigation, the list of empanelled diagnostic centres shall be provided to the patient/relatives and whichever centres preferred by patient, Railway shall refer the patient to that centre for that instance."
- 5.1 Railway Board vide its letter NO. 2016/H-1/11/69/HOSPITAL RECOGNITION Dated 23/12/2016 Reg: "Adoption of common format of Memorandum of Understanding for empanelled hospitals" and its Annexure, has inter-alia provided as under:
  - i) Unified MOU covers all the beneficiaries, serving employees, retired employees and their family members who may be required to be referred to these hospitals.
  - ii) Emergency shall mean any condition or symptom resulting from any cause, arising suddenly and if not treated at the earliest convenience be detrimental to the health of the patient or will jeopardize the life of the patient.
  - iii) The Hospital will intimate the Railways of such admissions.
  - iv) The authorization for Emergency treatment shall be given or denied by the concerned medical officer within 24 hours of the clinical report being submitted by the Hospital concerned.
- 5.2 Emergency Conditions and treatment thereof had earlier also been defined and dealt with in Railway Board's letter No. 2014/H-1/19/3/PNM dated 5-10-2015. Extracts of the relevant portion thereof is attached herewith as Annexure I for ready reference.
- 6. The above said orders of the Railway Board are not being followed by Ambala Division especially in respect of the conditions mentioned heretofore in this letter. All this is causing serious difficulties to the Railway Beneficiaries especially the old age pensioners and their families.
- 7. It is, therefore, requested that the above cited orders of Railway Board dated 30-2-2015 & 28-12-2020 may please be implemented and all concerned be advised to follow the same.

With regards,

Yours truly,

(Harchandan Singh), Secretary General, RSCWS

**Encl: 2 Annexure** 

i) Copy of RB letter dated 28-12-2020

ii) Extract of MOA Rly. with Empanelled Hospital

Copy for information and early favourable action to:

- I) PCMD, NR, Baroda House, New Delhi-110001
- II) DRM, NR, Ambala Division, Ambala Cantt-133001
- For early implementation of orders of the Railway Board as cited above

Railway Board's OM No.2018/Trans Cell/Health/CGHS (eOff.No.3270783) Dated: 28/12/2020

# Sub: Improvement of Health Delivery System & Emergency Treatment in Railway Empanelled Private Hospitals

Several representations have been received from Railway Medical Beneficiaries including retired officials regarding problems being faced during treatment in emergency at empanelled Hospitals. In order to improve the Health Delivery System on Indian Railways and streamline the treatment in emergency at Railway empanelled hospitals, following have been approved:

- 1. Railway medical beneficiaries (serving/retired) under emergency condition can get admission in any railway empanelled hospital without any prior referral. The empanelled hospital should not insist on referral from railway hospitals or demand advance in emergency conditions and the hospital will provide cashless/Credit medical facilities to patients.
- 2. The emergency conditions are defined in Memorandum of Understanding between CGHS empanelled hospitals and Government of India (CGHS Authorities) (Annexure-I) or as amended by CGHS from time to time and same will be applicable in Indian Railways.
- 3. The valid UMID Card/CTSE Card issued will be treated as identification as Railway Medical Beneficiary. Railways have to make sure that these cards are accepted in the empanelled hospital under the jurisdiction/empanelment.
- 4. Situation may arise where Railway hospital, after 3scrutinizing admission report submitted by empanelled hospital, finds that the patient is not suffering from an emergency. In such cases the patient can continue to avail treatment at the empanelled hospital, if so desired, by paying CGHS rates or hospital rates, whichever is less on the patient's cost.
- 5. The nature and appropriateness of the emergency is subject to verification, which may be verified, inspected or medically audited by the nominated authority on random basis at its own discretion.
- 6. The Hospital will intimate all instances of patients admitted as emergencies (without prior permission to the Railway authorities, at the earliest and within 24 hours and Railway will revert within next 24 hours, otherwise it will be treated as deemed approval. The empanelled hospital will clearly mention/certify the emergency condition as per MoU.
- 7. Railway Hospital as well as empanelled hospital will share the contact number and email address for communication for this purpose and will ensure to put on the website of Railways as well as of the hospital. The documents and approvals will be shared on the email to save the time and difficulties faced by the patients. The empanelled Hospital will not insist to patients to get the approval of referral/extension from the Railway Hospital. Same will be coordinated and approved on the contact number and email by the empanelled Hospital and Railway Hospital.
- 8. Railway hospitals shall refer to the empanelled hospital for appropriate duration as per the package. In case of additional stay for treatment, same procedure will be followed as per Para 6 & 7 above.
- 9. Also, the empanelled hospitals will provide the necessary treatment in OPD or otherwise to valid Railway Medical Beneficiary at the CGHS approved rates or hospital rates, whichever is less for the treatment in non-referral and non-emergency case at Railway Medical Beneficiary's cost.
- 10. Zonal Railways shall include provisions for conditions given from 4.1 to 4.9 above, in their MoU with the referral hospitals and also include that refusal to provide treatment to bona fide railway medical beneficiaries in emergency cases without valid ground would attract disqualification for continuation of empanelment. Also, MoU to be updated including removal of ambiguities

Annexure-I to: RB OM No.2018/TransCell/Health/CGHS (eOff.No.3270783 Dt: 28/12/2020

#### TREATMENT IN EMERGENCY

The following ailments may be treated as emergency which is illustrative only and not exhaustive, depending on the condition of the patient:

- ❖ Acute Coronary Syndromes (Coronary Artery Bye-pass Graft/ Percutaneous, Transluminal Coronary Angioplasty) including Myocardial Infarction, Unstable Angina, Ventricular Arrhythmias, Paroxysmal Supra Ventricular Tachycardia, Cardiac Tamponade, Acute Left Ventricular Failure / Severe Congestive Cardiac Failure, Accelerated Hypertension, Complete Heart Block and Stoke Adam attack, Acute Aortic Dissection.
  - iii) Acute Limb Ischemia, Rupture of Aneurysm, Medical and Surgical shock and peripheral circulatory failure.
  - iv) Cerebro-Vascular attack/Stokes, Sudden unconsciousness, Head injury, Respiratory failure, decompensated lung disease, Cerebro-Meningeal Infection, Convulsions, Acute Paralysis, Acute Visual loss
  - v) Acute Abdomen pain.
  - vi) Road Traffic Accidents / with injuries including fall.
  - vii) Severe Hemorrhage due to any cause.
  - viii) Acute poisoning.
  - ix) Acute Renal Failure.
  - x) Acute abdomen pain in female including acute Obstetrical and Gynecological emergencies.
  - xi) Electric shock.
  - xii) Any other life-threatening condition.

xiii)

### **EXTRACTS OF AGREEMENT BETWEEN CMS & EMPANELLED HOSPITALS**

1.1.7 "Emergency" shall mean any condition or symptom resulting from any caus arising suddenly and if not treated at the early convenience, be detrimental to the health of the patient or will jeopardize the life of the patient.

### 4. TREATMENT IN EMERGNCY

The following ailments may be treated as emergency which is **illustrative only and not exhaustive**, depending on the condition of the patient:

- Acute Coronary Syndromes (Coronary Artery Bye-pass Graft / Percutaneous, Transluminal Coronary Angioplasty) including Myocardial Infarction, Unstable Angina: Ventricular Arrhythmias, Paroxysmal Supra Ventricular Tachycardia, Cardiac Tmponade, Acute Left Ventricular Failure / Severe Congestive Cardiac Failure, Accelerated Hypertension, Complete Heart Block and Stoke Adam attack, Acute Aortic Dissection.
- Acute Limb Ischemia, Rupture of Aneurysm, Medical and Surgical shock and peripheral circulatory failure.
- Cerebro-Vascular attack-Stokes, Sudden unconsciousness, Head injury, Respiratory failure, decompensated lung disease, Cerebro-Meningeal
- Infections, Convulsions, Acute Paralysis, Acute Visual loss.
- Acute Abdomen pain.
- Road Traffic Accidents / with injuries including fall.
- Severe Hemorrhage due to any cause.
- Acute poisoning.
- Acute Renal Failure.
- Acute abdomen pain in female including acute Obstetrical and Gynecological emergencies.
- Electric shock. Any other life threatening condition.

In emergency the empanelled hospital will not refuse admission or demand an advane payment from the Railway beneficiary or his family member(s) and will provide credit facilities to the patient whether the patient is a serving employee or a pensioner, on production of a valid Railway Medical Card and the hospital shall submit the bill for reimbursement to the concerned Railway Authorities. The refusal to provide the treatment to bonafide Railway beneficiaries in emergency cases and other eligible categories of beneficiaries on credit basis, without valid ground, would attract disqualification for continuation of empanelment.

The nature and appropriateness of the emergency is subject to verification, which may be verified, inspected or medically audited by the nominated authority on random basis at its own direction.

The Hospital will intimate all instances of patients admitted as emergencies without prior permission to Railway Authorities within the prescribed time.

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