

A Contribution from Volunteers

STEP – BY -STEP PROCEDURE - USE OF EMPANELLED HOSPITAL (EH) FACILITIES DURING EMERGENCY MEDICAL CONDITION

09 Aug 2020 → Updated 29 Dec 2020 → Updated 17 May 2021

(For queries & feedback, WhatsApp message to Cdr V K Santhanam @ 97400 72879)

References

- i. SOP Treatment Management in ECHS dated 28 Sep 2018
- ii. Central Organisation, ECHS letter B/49778/AG/ECHS/PA/Ruling dated 03 Feb 2017 (APPROVAL FOR UNLISTED PROCEDURE APPX A)
- iii. Central Organisation, ECHS letter B/49701-SC/AG/ECHS dated 10 Feb 2017 (SELF ATTESTATION BY DEPENDENTS FOR ECHS BENEFITS)
- iv. Central Organisation, ECHS letter B/49778/AG/Claim/Policy 30 Aug 2017 (Time line to intimate PC for ER & EIR)
- v. Central Organisation, ECHS letter B/49774/AG/ECHS/Referral/2020 dated 20 May 2020 (SIMPLIFICATION OF REFERRAL SYSTEM)
- vi. Central Organisation, ECHS letter B/49701-PR/AG/ECHS/2020 dated 10 Aug 2020 (WHITE CARD HOLDER AT EH)
- vii. FAQ at <https://echs.gov.in/img/Policy/2FAQ%20Medical.PDF>
- viii. This document has consolidated information from various ECHS policy letter & documents. Most of the areas have been covered pertaining to Empanelled Hospital treatment. In case of any error in this document or doubts, Policy letters shall be referred.

I) INTRODUCTION

- i. ECHS Beneficiaries have an option for treatment in Empanelled Hospitals (EH). The treatment can be under a planned Referral from Polyclinic. In a Medical Emergency, treatment will be available by directly reaching an Empanelled Hospital.
- ii. The procedure for each of the above are marginally different.
- iii. This Step – By -Step Procedure details treatment under a Medical Emergency condition in an EH.
- iv. A separate Step-By-Step Procedure for Emergency treatment in a Non-Empanelled Hospital, including reimbursement was published by Helping Hands for ECHS last year. An update will be issued shortly.

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II) SECTIONS

1. **SECTION # 1** - What is an Empanelled Hospital (EH)? How to find EH near me?
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7. **SECTION # 7** - What actions to be taken by Beneficiary on Discharge from EH?

SECTION # 1 - What is an Empanelled Hospital (EH) ? How to find EH near me?

- i. For ECHS Beneficiaries Medical treatment is provided through a chain of Polyclinic (PCs), Service Hospitals, Empanelled Hospitals (EH) and Govt Hospitals
- ii. All Govt Hospitals are deemed Empanelled. The treatment can be cashless, if they sign a Memorandum of Agreement (MoA) with the concerned ECHS Regional Centre (RC).
- iii. Empanelled Hospital (EH) are the hospitals which have a **valid MoA** and they are **NOT** under the orders of **STOP REFERRAL**.
- iv. EH covers Multi speciality Hospitals, Eye and Dental hospitals.
- v. All EH shall provide **Cashless** medical facilities to ECHS Beneficiaries.
- vi. Beneficiaries, are advised to verify that the Hospital to which you are planning to reach under Emergency condition, **has a valid MoA** and is **NOT under STOP REFERRAL so that you can get a cashless treatment**. You can reach out to your PC for this information, or ask the Hospital staff.

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vii. You can contact “Helping Hands for ECHS” WhatsApp group at Bangalore, for Help

viii. To find the EH near me - Beneficiaries can find out the list of EH with valid MoA in any City in India on their own using mobile or computer

Open in browser - echs.gov.in → select EMPANELMENT STATUS → select PAN INDIA EMP HOSPITAL WITH FACILITIES → SELECT REGION FROM DROP DOWN → click SUBMIT → List of EH will be displayed

ix. EH list is published by Regional Centres regularly. A copy is also held with the PCs for reference by Beneficiaries.

SECTION # 2 – What is an Emergency as per ECHS policies?

- i. Emergency in ECHS is defined as **“Life Threatening Conditions (a Medical Condition)”**.
- ii. Emergency conditions are as below for the purposes of using EH
 - Acute cardiac emergencies
 - Acute respiratory emergencies
 - Neurological emergencies
 - Acute visual loss
 - Acute pain abdomen
 - Acute Renal Failure
 - Acute obstetrics and gynaecological emergencies.
 - Acute kidney failure, dialysis for kidney in chronic kidney diseases
 - Acute endocrine emergencies like Diabetic ketoacidosis
 - Life threatening injuries including road traffic accidents, Head injuries, multiple injuries, Crash injuries and thermal injuries.
 - Burn injuries
 - Acute limb ischemia
 - Medical and surgical shocks
 - Heat strokes and cold injuries of life threatening in nature.
 - Acute poisoning

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- Dog bite, Snake bite & Animal bite - will be treated as an emergency & Day care treatment
- Any severe infection leading to life threatening condition
- COVID symptoms / confirmed as COVID
- Any other condition in which delay could result in loss of life or limb

SECTION # 3 – What does a Beneficiary Do under Emergency Medical condition?

- If there is an Emergency Medical condition, as indicated above, ECHS Beneficiary can directly reach any EH.
- At EH, Beneficiary or NOK will prove their identity using the ECHS Card or Temporary Slip. Carry your ECHS Medical note book so that past medical conditions and medications being taken are known to the EH doctors.
- EH will commence the necessary emergency treatment without waiting for any other requirements.**
- The treatment will cover both as Out - Patient or as In - Patient.
- The treatment shall be on Cashless basis.**
- Under the Emergency treatment condition, EH shall provide Non empanelled facilities also, on cashless basis
- If Beneficiary is facing difficulties in getting the entitled treatment, contact your PC or respective Regional Centre Helplines, to get Help.

SECTION # 4 –If admitted under Emergency, What actions are taken by the EH, Polyclinic & Beneficiary?

- EH will intimate the PC** at the earliest, but **within 48 hrs.** from time of **admission**, the following: -
 - Service No, Rank & Name of the ECHS Beneficiary admitted
 - Details ECHS membership
 - Hospital Name, Date and Time of admission & Diagnosis
- EH will generate an Emergency Referral (ER) document with above details and send it to the PC. (e-mail)

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- iii) PC will approve the ER received from the EH and send it back to the EH (e-mail) with a Referral
- iv) Patient / NOK is recommended to co-ordinate with EH & PC for timely actions.

SECTION # 5 – How To obtain Approval for Extension of Stay, if admitted, in an EH as In-Patient?

- i. If a Beneficiary is admitted in an EH under an Emergency Medical condition, the Referral issued by the PC (as above) is sufficient for a period of 12 days
- ii. In case the In-Patient treatment is required to be extended beyond 12 days, it is the **responsibility of the EH to get the hospital extension completed well on time in coordination with the PC. Patient or NOK should not be made to run around by EH.**
- iii. It is **the responsibility of the concerned PC to accord sanction well on time.** NOK of the patient may coordinate, so that the approval is received on time.
- iv. **Approval Authority & Duration for Sanction** - The current duration for sanction for admission & extension as In-Patient in EH is as below
 - ✓ Up to 12 days as In Patient – No sanction required with Referral
 - ✓ Approval for stay extension - By OIC Polyclinic – from 13 to 30 days.
 - ✓ Approval for stay extension - By Director, RC – from 31 to 60 days.
 - ✓ Approval for stay extension - By MD ECHS - Above 60 days up to 120 days.
- v. **Duration of Hospitalisation for Ailments (a guideline only)**

Duration of hospitalisation for various ailments is as below, though it may vary, on case-to-case basis

 - Specialised procedures - 12 days.
 - Other major procedures - 07 to 08 days.
 - Laparoscopic surgery - 03 days.
 - Day care/Minor procedures - 01 day

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SECTION # 6 – How To obtain Approval for Unlisted Procedure? (Only under Non-Emergency condition)

- i. Unlisted Procedure approval uses a Form called Appx A
- ii. **In an Emergency Medical condition, the Unlisted Procedure, if required, shall be carried out by EH without waiting for approval.** This will be justified in Discharge summary by the EH.
- iii. In a Non-Emergency condition, prior approval as per Appx A form shall be obtained by the EH, before undertaking the procedure.
- iv. EH shall complete in all respects Appx A form and send it by email to the PC. **The onus of obtaining the approval rests with the EH**
- v. Approval for the same shall be provided by the PC, well on time
- vi. **NOK should not be made to run around for this approval by EH , but may coordinate with EH & PC.**

SECTION # 7 - What actions are to be taken by the Beneficiary on Discharge from EH?

- i. **The entire treatment shall be Cashless & No Payment will be required to be made.**
- ii. EH shall provide the patient with one copy of entire treatment document including DVD/X-Ray, etc., free of cost.
- iii. The discharge Summary shall have, along with clinical notes/advice/remarks, precautions, or any other routine that the patient needs to follow post treatment / operation.
- iv. On discharge as an In-Patient, EH will issue medicines for up to Seven (07) days, subject to the value not being more than Rs 2000.00. Medicines beyond this cost will be issued by the PC.
- v. If the EH has included in discharge summary a need for Review, the patients can go directly at that point in time for review, without any Referral from PC.
- vi. If the review is not included in discharge summary, a separate Referral from the PC is required to be obtained.

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