

A Contribution from Volunteers

STEP – BY -STEP PROCEDURE - USE OF EMPANELLED HOSPITAL (EH) FACILITIES

EMERGENCY MEDICAL CONDITION

09 Aug 2020 → 29 Dec 2020 → 17 May 2021 → 28 OCT 2021

→ 12 DEC 2021 -> 22 APR 2022

For queries WhatsApp message to Cdr V K Santhanam @ 97400 72879

This Procedure will **ANSWER over 98 % of your Queries** pertaining to Use of EH facilities.

A) ANSWERS TO YOUR QUESTIONS (detailed under respective Section)

YOUR QUESTIONS?	ANSWERS IN
<i>What is an Empanelled Hospital (EH)?</i>	SECTION 1
<i>How to find EH near me?</i>	SECTION 2
<i>What is an Emergency as per ECHS policies?</i>	SECTION 3
<i>What does a Beneficiary DO under Emergency Medical condition?</i>	SECTION 4
<i>If admitted under Emergency, What actions are taken by the EH, Polyclinic & Beneficiary?</i>	SECTION 5
<i>How do I get approval for Extension of Stay in EH?</i>	SECTION 6
<i>How do I get Approval for Unlisted Procedure to be carried out in EH? (Under Non-Emergency Medical Condition)</i>	SECTION 7
<i>What should I do when Discharged from EH?</i>	SECTION 8
<i>When can I get Follow-up Consultation / Investigation without Referral Revalidation?</i>	SECTION 9
<i>Can I go to an EH, get Treatment on own payment?</i>	SECTION 10
<i>Can I get Reimbursement for payment made by me for treatment at a Hospital as below</i>	SECTION 11

SECTION # I - What is an Empanelled Hospital (EH)?

- For ECHS Beneficiaries Medical treatment is provided through a chain of Polyclinics, Service Hospitals, Empanelled Hospitals (EH) and Govt Hospitals
- EH are the hospitals which have a **valid MoA** and they are **NOT** under the orders of **STOP REFERRAL**

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- iii. 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).
- iv. Treatment at EH is possible **ONLY** when there is a **Referral** from the PC. (Exception to this is Emergency Life-Threatening medical condition, in which Beneficiaries can go to EH without Referral)
- v. EH covers Multi speciality Hospitals, Eye and Dental hospitals & Labs.
- vi. All EH shall provide **CASHLESS** medical facilities to ECHS Beneficiaries.
- vii. Beneficiaries, are advised to verify that the Hospital to which you are planning to utilise with a Referral 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.

SECTION # 2 - How to find Empanelled Hospital (EH) near me?

- i) Beneficiaries can find out the list of EH with valid MoA in any City in India on their own using a mobile or computer

*Open in browser the site - 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*

- ii) All Polyclinics display the List of EH

SECTION # 3 – 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

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- 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
- 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 # 4 – What does a Beneficiary DO under Emergency Medical condition?

- i. If there is an Emergency Medical condition, as indicated above, ECHS Beneficiary can directly reach any EH.
- ii. 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.
- iii. **EH will commence the necessary emergency treatment without waiting for any other requirements or Referral**
- iv. The treatment will cover both as Out - Patient or as In - Patient.
- v. **The treatment shall be on CASHLESS basis.**
- vi. Under the Emergency treatment condition, EH shall provide **Non Empanelled facilities also, on cashless basis**
- vii. If Beneficiary is facing difficulties in getting the entitled treatment, contact your PC or respective Regional Centre Helplines, to get Help.

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SECTION # 5 –If admitted under Emergency, What actions are taken by the EH, Polyclinic & Beneficiary?

- i) **EH will intimate the PC** at the earliest, but **within 48 hrs.** from time of **admission**, the following: -
 - a) Service No, Rank & Name of the ECHS Beneficiary admitted
 - b) Details ECHS membership
 - c) Hospital Name, Date and Time of admission & Diagnosis
- ii) **EH will generate an Emergency Referral (ER)** document with above details and send it to the PC BY e-mail
- iii) PC will approve the ER received from the EH and send it back to the EH BY e mail with a Referral document digitally signed by OIC PC
- iv) Patient / NOK is recommended to co-ordinate with EH & PC for timely actions.
- v) The treatment is under “**PACKAGE RATES**” concept. This means it will cover In-Patient treatment, Day care & Diagnostic procedure for which Beneficiary has been permitted (a referral) or under Emergency. These will be “**FROM TIME OF ADMISSION TO TIME OF DISCHARGE**” including **(but not limited)**” to the following :-
 - Registration & Admission Charges
 - Accommodation Charges
 - Diet Charges
 - Operation charges
 - Dressing charges
 - Injection charges
 - Doctor/Consultant visit charges
 - ICU/ICCU charges
 - Monitoring charges
 - Transfusion charges
 - Anaesthesia charges
 - Operation Theatre charges
 - Procedure charges
 - Surgeon's fee
 - Cost of Surgical disposables and all sundries used during hospitalisation
 - Cost of medicines
 - Related routine & essential Investigations
 - Physiotherapy charges
 - Nursing care charges

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SECTION # 6 – How do I get approval for Extension of Stay in EH?

- i) **Duration of Stay as In - Patient details are given below**

DURATION OF STAY AS IN-PATIENT	APPROVAL BY
Up to 12 days	Referral from PC is sufficient
13 to 30 days Extension	OIC, Polyclinic
31 to 60 days Extension (03 stages)	Director, Regional Centre (through OIC Polyclinic & Joint Director, Hosp Services (JDHS))
61 to 120 days Extension (05 stages)	Managing Director (MD), ECHS (through OIC Polyclinic, JDHS, Director Medical at Central Org , Dy MD ECHS)

- 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.
- iii) **The EH will initiate** the need for extension **in the BPA Portal with necessary documents** & also the duration of extension. This is a fully automated procedure (since Apr 2022). The status of approval can be easily found out by the Hospital , PC, Reg Ctr, MD ECHS Office , in the Automated system
- iv) **It is also the responsibility of the concerned PC or Regional Center or MD ECHS** to accord **Approval** well on time.
- v) **Next Of Kin (NOK)** of the patient need not **run around as every stage status will be available in the system.**

SECTION # 7 – How do I get Approval for Unlisted Procedure to be carried out in EH? (Refer CO ECHS letter dated 09 Dec 2021)

- i. The Approval for Unlisted Procedure under **NON – EMERGENCY Medical condition** is necessary and **required to be obtained by the EH.**
- ii. This is partially automated (online systems) EH to PC and PC to EH. Rest of the stages are still manual
- iii. The **onus of obtaining the approval rests with the EH.**

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- iv. **The Appx A form has 04 Parts that are required to be completed by various agencies.**
- v. Part 1 - The EH will generate Appx A form on the BPA portal and all necessary details including name & digital signature of the Doctor are to be completed. This action is Part 1 of Appx A form and is submitted by EH in the BPA portal to the Nodal PC.
- vi. Part 2 - A Pop up will appear in the BPA portal of the Nodal PC. PC will complete Part 2 of the Appx A form and OIC PC will affix digital signature.
- vii. PC will take a printout of the signed Appx A and obtain Approval of Specialist in Service Hospital.
- viii. Part 3 & 4 - The Service Hospital Specialists / SEMO doctors will fill up Part 3 & 4 of and affix signature / stamp.
- ix. The approved Appx A signed hard copy will sent to OIC PC by OIC Stn HQ / OIC Stats
- x. OIC PC will scan and upload the approved Appx A on the BPA portal duly filled & signed by EH shall be sent to PC.
- xi. **The total time expected to be taken from Initiation of Appx A to receiving the Approval by EH is approx. 2 days / 48 Hrs.**
- xii. ECHS Beneficiary can contact the EH for receipt of Approval of the Unlisted Procedure. A SMS to the registered mobile number may also be received about the approval status.
- xiii. The Appx A flow is **partially automated to-date**, as below
Initiated by EH on BPA Portal → Pop Up in BPA portal of Nodal PC → Print out by PC → Part 1 signed by OIC PC → Signed copy sent to OIC Stn HQ / OIC Stats →--→
Cost of Procedure less than 2 Lakhs – Approved by SMO/SMO/PMO/CMO
Cost of Procedure 2 to 4 Lakhs – Approved by Service Specialist in concerned speciality
Cost of Procedure above 4 Lakhs – Approved by concerned Senior Advisor / Consultant
On Approval as above OIC Stn HQ / OIC Stats send approved copy to OIC PC → OIC PC uploads copy in BPA portal → Beneficiary contacts EH for status of Approval & getting the Unlisted Procedure done
- xiv. **NOK should NOT be made to run around for this Approval**
- xv. In **Emergency Cases**, the **Unlisted Procedure** shall be carried out by EH, **without waiting for Appx A approval.**

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- xvi. **APPX A - NOT REQUIRED Condition** – If the Service specialist of any AFMS hospital has advised any Unlisted Investigation on Hospital Investigation form countersigned by CO/COMDT/ SEMO/SMO/PMO/CMO, THERE WILL BE NO REQUIREMENT by Empanelled Hospital or BPA to ask for APPX A, to carry out the Investigation or to process the claim respectively. **(Authy – CO ECHS letter B/49770/ECHS/Treat/policy/2021 dated 26 Oct 2021)**

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

SECTION # 8 - What should I do when Discharged from EH?

- i. **The entire treatment shall be Cashless & No Payment** will be required to be made.
- ii. EH shall provide the patient free of cost, one set of entire treatment documents including DVD/X-Ray, etc.
- iii. The Discharge Summary shall have, along with clinical notes/advise/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.
- vii. **The entire treatment shall be Cashless & No Payment will be required to be made.**
- viii. EH shall provide the patient with one copy of entire treatment document including DVD/X-Ray, etc., free of cost.
- ix. The discharge Summary shall have, along with clinical notes/advise/remarks, precautions, or any other routine that the patient needs to follow post treatment / operation.

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- x. 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.
- xi. 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.
- xii. If the review is not included in discharge summary, a separate Referral from the PC is required to be obtained.

SECTION # 9 – When can I get Follow-up Consultation / Investigation without Referral Revalidation?

- i) Certain Post-Operative Follow-Up treatment, requiring frequent consultation from Specialists of Empanelled Hospital (EH), **DO NOT** require Referral revalidation on each occasion.
- ii) Beneficiaries are advised to get the Referral revalidated at PC **once in Six (06) months**
- iii) Below **Follow-Up cases** are covered by the above for Consultation & Investigation
 - a. *Post Cardiac Surgery including Coronary Angioplasty*
 - b. *Post Organ Transplant (Liver, Kidney, Heart, and such) cases*
 - c. *Post Neuro Surgery*
 - d. *Post Brain Stroke*
 - e. *Cancer Treatment*
 - f. *End Stage Renal Failure/ follow-up cases of Liver failure*
 - g. *Liver Failure*
 - h. *Auto Immune disorder like Rheumatoid Arthritis*
 - i. *Neurological disorder - Dementia, Alzheimer's disease, Parkinsonism, etc*
- iv) Medicines prescribed will be provided by the PC
- v) During the Follow-Up and in a **Non-Emergency** condition, Referral / Approval is to be obtained, for any Unlisted Investigation or Procedure
- vi) During the Follow-Up, if there is an **Emergency** condition for an Investigation / Procedure, No Referral is needed, even if these are Unlisted Investigation / Procedure.

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SECTION # 10 – Can I go to an EH, get Treatment on own payment?

- i. Any EH can offer consultation/investigation/ treatment in routine cases at CGHS rates.
- ii. The ECHS beneficiary must disclose his/her identity and must be willing to make payment voluntarily.
- iii. Such expenditures cannot be claimed from ECHS on any ground, as they are neither Referral based nor Emergency Medical condition cases.
- iv. This arrangement is between **ECHS patients and EH exclusively**, based on **willingness of both** and is purely voluntarily.
- v. No ECHS beneficiary will insist for this, if EH is unwilling for the said support.
- vi. No medicines prescribed by EH can be demanded from PCs based on this voluntary treatment
- vii. Any resultant prescription for any tests will not be valid, unless approved by the PC MO.

SECTION # 11 – Can I get Reimbursement for payment made by me for treatment at a Hospital as below?

- i) If an EH does **NOT** have a **valid MoA** or the EH is under **STOP Referral** and Beneficiary has taken treatment under Medical Emergency conditions and makes payment, the amount will be reimbursed as per CGHS rates.
- ii) If an EH does **NOT** have a **valid MoA** or the EH is under **STOP Referral**, and Beneficiary with a valid Referral from the PC chooses to take treatment in this hospital, due to having taken treatment earlier in the same hospital, the payment made for the treatment will be reimbursed as per CGHS rates.

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