

by Department of Expenditure a copy of which has already been sent to you they are requested to furnish the reply relating to para 5.1 to 5.8 directly to Shri H P Bhalla under intimation to this Department.

2. The name of Appellate Authority is Shri M P Singh, Director (PP), Department of Pension and Pensioners' Welfare, 3rd Floor, Lok Nayak Bhawan, Khan Market, New Delhi-110003.

V K Wadhwa, Under Secretary to the Govt of India

Copy to :— E V Branch. (DS-EV) D/o Expenditure, M/o Finance N Block alongwith a copy of the letter dated 17.7.07 from Sh H P Bhalla for sending him a suitable reply on the briefs pertaining to D/o Exp, under intimation to this Deptt

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## REPLIES OF RAILWAY BOARD ON ISSUES RAISED UNDER RTI BY RSCWS CHANDIGARH

### (ii) Reg Recognition of Private Hospitals

1. Rly Bd's letter No.2006/H-1/13nRTI dt 19.04.07 to Harchandan Singh (Secy RSCWS)

**Question (1) (a)** List of Pvt Hospitals and Diagnostic Centers recognized by the Rlys – Station wise for treatment of Rly employees, their dependents and Retirees (covered under the RELHS).

**Answer :** The list as available in Railway Board is attached. Annexure 'A' (Eleven pages@).

Very shortly, this list will be posted on Website and will be kept updated so that it is accessible to everybody. More information can be obtained from respective Zonal Headquarters of Indian Railways.

(b) Which of these provide "Cashless" treatment against direct payment by the Railways and which of them do not provide this facility?

**Answer :** All the pvt recognized Hospitals provide "Cashless" treatment against direct payment by the Rlys.

**Question (2)** What are the a) criteria, b) guidelines, c) policy and d) procedure for recognition of Private Hospitals and Diagnostic Centers of the Railways?

**Answer :** Following criteria, guidelines, policy & procedures are followed :—

1. Necessity of recognizing a Private Hospital/Diagnostic Centre is assessed based on :—
  - Number of times services required to be availed from a Private Hospital/Diagnostic Centre on regular basis.
  - How far is the nearest Raillway Hospital/Health Unit where such Services are available.
2. Locally available suitable Private Hospital/ other Centres are short listed based on availability of quality of services and the convenience of Railway beneficiaries to travel upto the centre.

Amongst the Private Hospital/other Centres, the centre offering providing quality services, is considered. On many occasions more than one centre is recognized.

**Question (3) (a)** Is there a proposal/policy decision to recognize more Private Hospitals and Diagnostic Centers by the Railways?

**Answer :** Yes, there is a policy decision to recognize more Private Hospitals and other Diagnostic Centres.

(b) If yes, what are the details of the same? AND what instructions have been issued (to Zonal Rly) by the Rly Bd to send the proposals for Recognition of Hospitals & Diagnostic Centers?

**Answer :** (i) Instructions are available in IRMM- 2000 Para 633©. (It is available in Website)

(ii) Further instructions issued vide – 2005/ H-1/II/Policy dated 07.08.06 (Annexure 'B'\*) & 2005/ H/6-4/Policy dated 16.4.07 (Annexure 'C'\*)

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\*/\*\*Would be printed in the next issue

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### Reg : Medical Condition considered as Emergency by Railways

2. Railway Board's letter No.2006/H-1/13(RTI) dated 17.4.07. (RTI Cell/ 2007/60)

To Harchandan Singh (Secy RSCWS, Chandigarh)

**Q (1)** Whether following conditions are considered to be an "emergency" by the Railways, for reimbursement of medical expenses for treatment in Private/Government Hospitals?

**CONDITIONS OF EMERGENCY-(UNDER ECHS)**

- \* Acute Cardiac Conditions/Syndromes including Myocardial Infarction, Unstable Angina, Ventricular Arrhythmias, Paroxysmal Supra-ventricular Tachycardia, Cardiac Tamponade, Acute Left Ventricular Failure/ Severe congestive Cardiac Failure, Accelerated hypertension, Complete dissection.
- \* Vascular Catastrophes including Acute limb ischemia, Rupture of aneurysms, medical and surgical shock and peripheral circulatory failure.
- \* Cerebro-Vascular Accidents including Strokes, Neurological Emergencies including coma, cerebro meningeal infections, convulsions, Acute paralysis, Acute visual loss.
- \* Acute respiratory Emergencies indulging respiratory failure and decompensated lung disease.
- \* Acute abdomen including acute obstetrical and gynecologist emergencies
- \* Life threatening injuries including Road traffic accidents, Head Injuries, Multiple Injuries, Crush Injuries and Thermal Injuries.
- \* Acute poisoning and Snake bite

- \* Acute endocrine emergencies including Diabetic Ketoacidosis
- \* Heat stroke and cold injuries of Life threatening nature
- \* Acute Renal Failure
- \* Severe infections, leading to life threatening sequel-including Septicemia, disseminated TB.
- \* Any other condition, in which delay could result in loss of life or limb.

**Ans.** All the conditions enlisted in the application as "emergency" (under ECHS) are considered as emergency conditions by Railways also.

While Issuing the circular No. 2005/H/6- 4/ Policy-I1 dated 31.01.07\*\*\* by Railway administration, all the conditions (under ECHS) have been included and considered by defining in a separate pattern. The pattern in which they are considered is given in the above mentioned circular.

\*\*\*See B P - 03/2007 - pp 11-12

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**FLASH**

**Pension Portal :** U can place your grievance on line in the website. It has an Interactive post for this purpose. Visit DOP & PW website : [www.pensionerportal.gov.in](http://www.pensionerportal.gov.in)

*Shyam Sunder, President, BPS*

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