



PENSIONERS' RAIL SAMPARK

QUARTERLY BULLETIN OF

RAILWAY SENIOR CITIZENS WELFARE SOCIETY (RSCWS)

Estd. 1991, Regd. No. 1881 – Under Registration of Societies Act)

H.O 32, Phase- 6, Mohali, Chandigarh -160055

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AFFILIATED TO BHARAT PENSIONERS' SAMAJ (BPS)

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

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

**DEDICATED TO
THE CAUSE OF
PENSIONERS
SINCE 1991**

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Vol. 17, No. 1

JANUARY-MARCH, 2022

FOR FREE CIRCULATION TO MEMBERS RSCWS

NEWS – AT A GLANCE

1. “Life Time Arrears” Nomination Forms to be submitted by Pensioners: DOP&PW reiterates instructions regarding procedure to be followed by PSA & PDA (Banks) to deal with the same (See orders on Page 5 & 6)
2. DOP&PW is working out financial implications of the proposals of Parliamentary Committee, regarding the following issues, and all Central Govt. Depts have been asked to send the requisite information for the same:
 - a) Increasing the FMA (Fixed Medical Allowance) from Rs.1,000/- to Rs.3,000/- per month.
 - b) Grant of Additional Pension of 5% from 65 years, 10% from 70 years & 15% from 75 years of age.
3. CGHS Beneficiaries have been allowed fresh option between OPD Treatment and FMA.
4. DA & DR raised to 34% as Government approves 3% raise from January 1, 2022.

**GENERAL BODY MEETING OF RSCWS AND MEDICAL SEMINAR
MEMBERS OF RSCWS ALONG WITH THEIR SPOUSES & OTHER RAILWAY PENSIONERS
ARE CORDIALLY INVITED TO ATTEND THE GBM & MEDICAL SEMINAR**

**ON SATURDAY, 23RD APRIL, 2022 FROM 10 AM TO 1 PM
AT GOVT. MUSEUM & ART GALLERY AUDITORIUM, SECTOR 10, CHANDIGARH
(MEMBERS ARE REQUESTED TO PLEASE REACH INTIME)
PLEASE JOIN US FOR LUNCH AFTER THE MEETING .**

AGENDA:

1. Opening Address by the Chairman Sh. TS Kalra.
2. Welcoming the Guest of Honour
3. Address by the President Sh. KP Singh;
4. Report by the Secretary General;
5. Donation to “PrabhAasra” NGO helping the Needy, Poor & Destitute;
6. Medical Seminar on the subject: MEDICAL & SURGICAL Treatment & MANAGEMENT OF Cataract, Glaucoma & RETINAL problems in OLD AGE VITREO-RETINAL RETINA DISEASE Retinopathy of Prematurity SCREENING AND TREATMENT’ By Dr. Nishat Bansal, (Bansal Eye & Retina Clinic, Sector 32, Chandigarh) MBBS, DNB, FICO(II) UK, FMRF, FVRF Goldmedalist (AIOS) Vitreoretinal Surgeon;
7. To approve utilization of Rs.74,969/- of Grant in Aid for the year 2021-22 and Rs.80,000/- sanctioned by DOP&PW for purchase of Computer/ Hardware under Pensioners' Portal.
8. Approval for continuing the updating & Maintenance of Website of RSCWS www.rscws.com by Web Pro @ Rs.15,000/- PA.
9. Complimenting the young (65 years with at least 3 years membership) and Honouring the Super Senior Members, by the guest of honour
10. Any other point with the permission of the Chair;
11. Concluding Address by the President;
12. Vote of Thanks by the Secy. Genl.
13. Lunch.

MEMBERS ARE REQUESTED TO OBSERVE COVID RELATED PROTOCOL AS APPLICABLE ON THAT DATE
Secretary General, RSCWS

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LIST OF HOSPITALS & LABS EMPANELLED BY RAILWAYS IN CHANDIGARH, MOHALI & PANCHKULA AS ON 21-3-2022

- FOR CASHLESS TREATMENT OF RAILWAY MEDICAL BENEFICIARIES (EMPLOYEES & RELHS OPTees) WITH UMID CARD
ON REFERRAL BY CMS NR UMB OR IN EMERGENCY ON APPROVAL OF CMS WITHIN 24 HOURS

Sl.No.	Hospital Name	Contract up to	Contact No.
1.	Ivy Super Specialty Hospital; Sector 71, Mohali	15-12- 2022	99888-23456 (Abhishek: 8699999914)
2.	Indus Super Specialty Hospital, Opp.Old D.C. Office, Phase 1, Mohali	07-07-2022	0172- 5044945
3.	Sri Guru Harkishan Sahib Eye Institute & multispecialty Hospital, Sohana, Sector- 77, SAS Nagar, Mohali	10-07-2022	0172-2295000
4.	Mukat Hospital & Heart Institute, Sector 34-C, Chandigarh	15-10-2022)	98720-48149
5.	Grecian Super Specialty Hospital, Sec.- 69, Mohali	26-08-2022	98996-49020
6.	MAX Super Specialty Hospital, Phase-6, Mohali	18-02-2023	0172-6652000
7.	Amar Multi-Specialty Hospital, Sector-70, Mohali	12-03-2023	0172-5037683
8.	Drishti Eye Hospital, Sector-10, Panchkula.	13-12-2022	0172-2571572 98033-33344
9.	Eden Critical Care Hospital CDG (near Elante Mall) Industrial Area-1, CDG	06-08-2022	75289-77408
Lab.	Spiral CT & MRI ; Sector 44, CDG	20-12-2022	0172 4064555 98142-52733
Lab.	Atulaya Health Care; SCO 112-113, Sector 8-C, CDG	15-01-2023	0172 4558888 97795-99499

ENTITLEMENT OF WARDS (as per 7th CPC Pay): General Ward: Up to Rs.47600/-;
Semi-Private Ward: Rs.47601/- to 63100/-; Private Ward: 63101/- & above

HOSPITALS EMPANELLED WITH RSCWS IN THE TRI-CITY

- FOR TREATMENT AT CGHS RATES IN OPD, IPD & DIAGNOSTICS, FOR RSCWS MEMBERS
- ON PRODUCTION OF MEMBERSHIP CARD OF RAILWAY SENIOR CITIZENS WELFARE SOCIETY (RSCWS) – Duly updated

Sl. No.	Name of Hospital	EMPANELLED FOR THE SPECIALITIES (except those outsourced)	Contact No
1.	FORTIS MULTI SPECIALITY HOSPITAL, SECTOR 62, PHASE VIII, MOHAL	All available Specialties	172-5021222 98721-70582 (Dr. Ajinder Singh.)
2.	IVY MULTI-SPECIALITY HOSPITAL, SECTOR-71, MOHALI	All available Specialties	0172-7170000, (Abhishek: 86999-99914)
3.	MUKAT MULTI-SPECIALITY HOSPITAL, SECTOR-34 A, CDG	All available Specialties	0172-4344444 98720-48149
4	EDEN CRITICAL CARE HOSPITAL Industrial Area . Phase 1, CDG (Near Elante Mall)	All available Specialties	Manpreet Sharma 75289-77408

SALIENT FEATURES OF UPDATED CCS (PENSION) RULES - 2021**CENTRAL CIVIL SERVICES (PENSION) RULES- 2021**

Since the inception of CCS Rules 1972, lots of amendments and reforms were taken up-to-date. So many OMs issued to remove the road blocks and anomalies, as such these rules become a mess. Now in CCS-21, all those amendments and changes with new reforms have been amalgamated as under :-

Salient Features Of Revised Rules :-

Revised rules do not envisage any change in the amount of entitlement of pension, family pension or gratuity on retirement or death of Government servant/pensioner.

Revised rules incorporate various executive instructions/clarifications issued from time to time and give them a statutory status.

These include recent policy procedural reforms made through OFFICE MEMORANDA etc.

Some policy/procedural changes have also been made based on advice given on issues referred by Ministries/Departments.

Salient Features Policy Changes:-

Increment earned during leave, though not actually drawn, will count as emoluments for pension/family pension/gratuity irrespective of the duration and land of leave.

Benefits of retrospective notional increase in pay after retirement (On account of court orders, review DPCs etc.) will be available for pension/gratuity.

A time limit of three months has been fixed deciding on the question of grant of compassionate allowance, on imposition of penalty of dismissal/removal.

Decision of compassionate allowance in past cases of dismissal/removal to be taken in within 6 months.

The provision for voluntary retirement after thirty years of qualifying service has been omitted being redundant.

Request for withdrawal of notice for voluntary retirement will have to be made at least 15 days before intended date of retirement to give sufficient time to the competent authority.

Provision has been made for payment of interest and fixing of responsibility in case of delayed payments of pension/family pension/gratuity.

A Government servant deputed to UN Bodies etc. will have option to pay or not to pay pension contribution. Service will be counted if contributions are paid.

Children/Siblings suffering from a disability will be considered dependant on the Government servant/Pensioner and shall be eligible for family pension, if their income is less than the entitled family pension plus dearness relief.

Documents required for determining eligibility based on income criteria have been specified in the rules.

A divorced daughter in whose case a decree of divorce was issued after the death of her parent , will be eligible for family pension if the divorce petition was filed before the death of the parents.

In case where a Government servant dies during the currency of a penalty, family pension will be calculated based on the notional pay ignoring the effect of such penalty.

If a person (e.g. spouse) eligible to receive family pension is with offence of murdering Government Servant/pensioner, family pension shall not be paid to that person till the conclusion of the criminal proceedings but to be paid to other eligible member of the family (e.g. Child)

On death of a Government Servant during service, the family members will not be required to pay any outstanding licence fee and also licence fee for a period of next three months, in respect of the Government accommodations.

It will be mandatory to process cases through "Bhavishya" an on line pension sanctioning and tracking system.

Issuing of Certificate of verification of qualifying service after completion of eighteen years of service and five years before superannuation shall be monitored at the level of Secretary of the administrative Ministry/or Department.

Timelines for processing of pension/family pension cases by HOO and PA have been streamlined / rationalised to ensure expeditious issue of PPO on retirement/death of Government Servant

The roles of CPAO and Pension Disbursing Authorities/Banks, In the pension sanction/payment process have been indicated in the rules of timelines for them have been provided.

In case a Government Servant is not able to fill up the forms due to any infirmity or the Government Servant dies after retirement but before filling pension papers, spouse/family member of the family will be allowed to submit the pension papers.

Provisional family pension will be sanctioned immediately on submission of claim for family pension along with death certificate.

Detailed provisions have been included in the rules for sanction and payment of family pension and other benefits to the family for a missing Government

The forms and formats for submission of claims and for processing of pension/family pension cases have been streamlined and rationalised to make them more compatible with the rules.

With the notification of the new Rules, the CCS (Pension) Rules, 1972 stand repealed.

PROVISION RELATING TO FAMILY PENSION ON DEATH OF A PENSIONER

Payable to following family members (Normally one at a time)

- (a) Widow/Widower
- (b) Dependent Children :- Unmarried son below 25 years, Unmarried /Widowed / divorcee daughter, children with disability (Without age limit)
- (c) Dependent siblings with disability
Dependent disable children, parents, disabled siblings can be co-authorised in the PPO, if there is no eligible family member in between.

AMOUNT OF FAMILY PENSION

On death of a pensioner :-

- (i) Enhanced rate i.e. 50% of last pay for 7 years or till the date pensioner would have reached the age of 67 years, whichever is earlier.

Thereafter, @ 30% of basic pay.

Minimum Family pension :- Rs 9000/- Per Month

Maximum Family Pension

- (i) Rs 1,25,000/- PM enhanced rate
- (ii) Rs 75,000/- PM at ordinary rate

SHARING OF FAMILY PENSION

Family pension is paid to more than one person, in equal shares, if deceased pensioner is survived by :-

- (i) More than one widow (Not applicable in cases where bigamy/ polygamy is not allowed.
- (ii) A widow and an eligible child from a wife who pre-deceased the government servant.
- (iii) A widow and an eligible child from a divorced wife or void or voidable marriage.
- (iv) Children from two or more pre deceased wives
- (v) Twin children

TWO FAMILY PENSION

A child is eligible for family pension in respect of both parents, if they were Government Servant/Pensioner. A family member can draw family pension in respect of a deceased pensioner for the military as well as civil service.

Family pension in respect of one employee is for family pension in respect of other employee.

Total of two family pensions should not exceed maximum (Enhanced or Ordinary) Family Pension .

FAMILY PENSION TO A CHILD WITH DISABILITY

Family pension is payable for life to a dependent child is suffering from a disability.

Family pension to a mentally retarded child is payable through a guardian or person nominated by pensioner or his/her spouse.

Disabled children/siblings are dependent if their income is less than entitled family pension payable on death of a pensioner.

A family pension to a disable child admissible if disability occurred before, death of pensioner or his/her spouse.

Disability certificate to be produced only once, if the disability is permanent and once in every five years if disability is temporary.

FAMILY PENSION TO UNMARRIED/WIDOWED/DIVORCED DAUGHTERS

Family Pension is payable to unmarried/widowed/divorced daughter above 25 years of age

- (i) After all other children have either attained the of 25 years of age or have married or started earning their livelihood and
- (ii) There is no eligible disabled child to receive the family pension

Family pension to widowed/divorced daughter payable only if her husband died or divorce took place during lifetime of pensioner or his/her spouse but divorce took place after their death.

In such cases family pension will commence from the date of divorce only.

PROCEDURE FOR CLAIMING FAMILY PENSION

On death of a pensioner or family pensioner

Spouse and disabled child/sibling or dependent person (Previously Co-Authorised in PPO) to apply to Bank in FORM-12 along with death certificate.

Bank to commence family pension within one month.

In other cases where FP is not previously authorised in PPO family member has to apply to HOO in FORM-10 for issue of fresh PPO

The claimant has to attach death certificate and proof of income

PROCEDURE FOR AUTHORISATION OF FAMILY PENSION

HOO to forward case to PAO along with sanction for family pension in FORM-13 within one month of receipt of claim.

PPO to be issued by PAO and sent to CPAO within one month thereafter.

CPAO to issue SSA and send it to the Bank within 10 days thereafter.

Bank to make payment of family pension with arrears within 15 days thereafter.

NOTE: Updated Railway Service (Pension) Rules may also soon be issued & notified on similar lines as updated for CCS (Pension) Rules – 2021 salient features of which are reproduced above)

DOPPW Letter No. 1/2(40)/2022-P&PW (E) dated 31 March 2022
To The CMDs of Pension Disbursing Banks CPPCs of Pension Disbursing Banks

Subject: Nomination by pensioners under the Payment of Arrears of Pension (Nomination) Rules, 1983 for payment of life-time arrears.

1. I am directed to say that in accordance with the Payment of Arrears of Pension (Nomination) Rules, 1983 notified on 10.09.1983 (Annexure-I), pensioners who retired before the notification of the Rules were required to submit nomination to the respective Pension Disbursing Authority. Every employee who retired or will retire after the notification of the Rules, was/is required to submit the nomination, in triplicate, in Form "A" to the Head of Office or the Department from where he retired/ is retiring. The Head of Office is required to return a duly attested duplicate copy of the nomination in Form "A" to the pensioner. The triplicate copy of the nomination is to be passed on to the Pension Disbursing Authority along with the Pension Payment Order, through the PAO/CPAO.
2. The pensioner can, subsequently, modify the nomination (if nominee pre-deceases the pensioner, or otherwise) by submitting Form "A" in triplicate to the Pension Disbursing Authority. The Pension Disbursing Authority is required to return to the pensioner the duly attested copy of the nomination within thirty days of the receipt of the nomination. The triplicate copy is to be sent to the Account Officer of the Department from where the pensioner had retired while the original copy of the nomination shall be recorded with the PDA. If any arrears of pension accrue after the death of a pensioner, such arrears of pension are paid to the person in whose favour a nomination under the Payment of Arrears of Pension (Nomination) Rules, 1983 exists.
3. Representations have been received in this Department from some pensioners/pensioner's associations that, quite often, when pensioners submit their nomination to the Pension Disbursing Authority (PDA), there is reluctance on the part of the bank staff to accept these nominations as they are not quite conversant with the above rules. Further, in case a nomination is accepted by the bank, the pensioner is not aware of its safe custody and its retrieval when needed because he is not sure whether the nomination is fed in to the system of the Bank.
4. The matter has been examined in this Department. The procedure for submission and acknowledgement of nomination for life-time arrears of pension in the Payment of Arrears of Pension (Nomination) Rules, 1983. All retiring Government employees are mandatory required to submit the nomination for arrears of pension in Form "A" while filling up the pension papers. This nomination is then forwarded to the Pension Disbursing Authority along with PPO.
5. In most cases, the problem of non-availability of nomination may be due to improper handling of the nomination by the Banks, as the Banks may not be keeping a proper record of the nomination. The problem may also arise if the nomination submitted at the time of retirement becomes invalid on account of the nominee predeceasing the pensioner or for some other reason and the pensioner fails to submit a fresh nomination to the Bank in Form "A" or the staff in the Bank Branches does not accept the nomination due to ignorance.
6. In view of the above, all Ministries/Departments, Account Offices/CPAO and Pension Disbursing Authorities/Banks are enjoined upon to strictly follow the procedure for handling of the nominations of the pensioners submitted under the Payment of Arrears of Pension (Nomination) Rules, 1983. In short, the following actions are required to be taken by Ministries/Departments, Account Offices/CPAO and Pension Disbursing Authorities/Banks in this regard :-

Action by Ministries/Departments and attached/subordinate offices thereunder

- i) Obtain nomination in Form "A" from the retiring employees, in triplicate. The Head of Office or Department must return the duly attested duplicate copy of the nomination to the retiring employee, as acknowledgement, within 30 days of the receipt of the nomination from the retiring employee.
- ii) Affix the acceptance of nomination in the triplicate copy of the nomination form and forward it to the Account Officer, along with the pension papers/pension case, for onward submission to the Pension Disbursing Authority along with the Pension Payment Order.

Action by the Account Officers

- i) Forward the triplicate copy of the nomination form, duly accepted by the Head of Office, along with Pension Payment Order, to the Central Pension Accounting Office for onward transmission to the Pension Disbursing Authority along the Pension Payment Order/Special Seal Authority.

Action by the Central Pension Accounting Office

- i) Forward the triplicate copy of the nomination from, duly accepted by the Head of Office, along with Pension Payment Order to the Pension Disbursing Authority/Bank along with the Pension Payment Order/Special Seal Authority.

Action by the Pension Disbursing Authority/Bank

- i) Retain the triplicate copy of the nomination of the pensioner, as received from Accounts Officer/CPAO, for record.
- ii) Keep proper record in the system in respect of the nomination received from the Account Office/CPAO.
- iii) Review the availability of nomination under the Payment of Arrears of Pension (Nomination) Rules, 1983 in respect of all pensioners. In case, nomination in respect of any pensioner is not available in the record of the PDA/Bank, the concerned pensioner may be advised by the PDA/Bank to submit the same in Form "A" forthwith.
- iv) Accept any modification of existing nomination/fresh nomination from the pensioner in Form "A" (in triplicate) of the Payment of Arrears of Pension (Nomination) Rules, 1983 and return to the pensioner the duly attested duplicate copy of the nomination within thirty days of receipt of nomination.
- v) Send the triplicate copy of the nomination to the CPAO/Accounts Officer of the department from where the pensioner had retired and retain the original copy of the nomination for record.
- vi) Instruct the staff dealing with pensioner to accept any fresh nomination or modification in the existing nomination submitted by the pensioner in Form "A"
- vii) Keep a proper record in their system in respect of the fresh nominations/modifications received from the pensioners.
- viii) Indicate the status of availability of nomination under the Payment of Arrears of Pension (Nomination) Rules, 1983 in Pension Seva Portals or any other similar portal nominated by them.

- ix) Indicate the status of availability of nomination under the Payment of Arrears of Pension (Nomination) Rules, 1983 in the monthly pension slip issued by them to the pensioners.
7. The above instructions may be circulated widely for strict compliance by all concerned.
8. This issue with the approval of Competent Authority.

MEMORANDUMS SUBMITTED BY RSCWS

Copy of Memorandum No. RSCWS/HO/CHD/Memo –GM NR/2022-1 Dated: 12-1-2022 To the General Manager,
Northern Railway, Baroda House, New Delhi – 110001

**Subject: i) Adequate Budgetary Allocations for Medical & Health Care, to Ambala Division
ii) Urgent need for additional Supplementary Grants for the above to Ambala Div.**

1, Kind attention is invited towards the serious problems being faced by the Railway Beneficiaries, particularly of the tricity of Chandigarh, Mohali & Panchkula, because of refusal to give cashless treatment by some of the empanelled private hospitals due to non-payment of heavy amounts of their outstanding Bills by the Railways.

2. Fortis and Max are the two top private hospitals in the private sector. Fortis Hospital Mohali had already withdrawn its empanelment with the Railways till their outstanding Bills were paid. They are ready to resume the empanelment, but only after their pending payments are released. MAX Hospital Mohali is empanelled alright but refusing to give Cashless Treatment till their outstanding bills are cleared by the Railways..

3. Total outstanding Bills of four of the main empanelled hospitals, in Chandigarh & Mohali are above Rs5 to 6 Crores with some of them being outstanding for more than 2 to 3 years, that too without any intimation in writing by the Railways as to the reasons for withholding the specific Bills. The reasons for the same need to be ascertained and recorded in each case and communicated to the hospital concerned.

4. We are given to understand that the main reason for non-payment of Bills to the empanelled hospitals is on account of inadequate allocation of funds for the Medical Department under the specified Heads in the Ambala Division which is causing serious crisis.

5. The main sufferers are the Railway Beneficiaries, especially the old aged Pensioners and their families with limited resources. They have to run from pillar to post for getting treatment causing serious problems especially in emergency with only one ADMO in the Railway Health Unit at Chandigarh to assist them. With their limited resources, they cannot afford to get the treatment in cash either in private or Government hospitals and then wait endlessly for the reimbursement of some part thereof.

6. It is therefore, requested that:

a) Budgetary allocation for Medical and health care may be adequately increased by the Railways – especially for the Ambala Division to overcome the refusal by empanelled private hospitals to give Cashless Treatment to Railway Beneficiaries, both in emergency & referral cases

b) As at present, Special Supplementary Grants be given early to NR Ambala Division, to clear all the outstanding Bills of the empanelled Hospitals.

c) Issue of Guidelines for systematized payment of Bills of empanelled hospitals by the Railways especially in respect of the following:

i) Divisions be advised to make time bound payments to the empanelled hospitals to ensure continuity of empanelment.

ii) If any payments are withheld, the concerned empanelled hospital be advised the specific reason for withholding the particular amount and the specific item for which the same is withheld. Only the part of the amount objected to be withheld. The balance amount be released within the specified period. Such steps will help in getting proper health care for Railway Beneficiaries and also bring in proper transparency.

Copy of Memorandum No. RSCWS/HO/CHD/ Memo/ 2022-2 Dated: 19-1-2022 To the
Divisional Railway Manager, Northern Railway, DRM Office, Ambala Cantt.-133002

Sub: Implementation of Health Delivery System & Emergency Treatment in Railway Empanelled Private Hospitals Revised Instructions.

Ref: Railway Board's letter no: 2018/TransCell/Health/CGHS dated 16-6-2021.

Please refer to the above cited letter of Railway Board, non implementation of which is causing serious problems to the Railway Beneficiaries, especially the old aged pensioners in Ambala Division residing at Chandigarh, Panchkula & Mohali and the surrounding areas.

i) a) Empanelled Hospitals should not ask the family members of the Patients, to go to the CMS Ambala to get the approval for Cashless Treatment in Emergency and extension thereof, as both of these are – contrary to the orders of the Railway Board cited above, which directs that the permission must be sought & given through Email & Telephone within 24 hours and no body should be sent personally for the same.

b) Hospitals also do not follow up with the CMS telephonically as per above said orders of the Railway Board, to get the permission early.

ii) The permission is not being given by the CMS office within the prescribed period of 24 hours by Email or Telephone as directed by the Railway Board.

iii) The Approval or extension thereof, is given, by the CMS Ambala, for a limited period of 2 to 5 days even in cases where no period can be humanly assessed without personally examining the Patient and in cases where no time limit is prescribed by the Railway Board or under the CGHS packages.,

iv) For proper understanding of the condition of the patient, empanelled hospitals should be asked to send symptomatic diagnosis condition at the time of admission and the specific condition of emergency in the letter seeking the approval for Treatment in Emergency and the number of days required for the treatment thereof.

2. It is therefore, requested that the above cited problems may please be addressed and the following steps may please be taken for effective implementation of Board's orders:

a) The instructions contained in the Board's letter dated 16-6-2021s cited above, may please be issued to all the Doctors & Medical Officers of the Division and to the empanelled hospitals for following the same effectively. (Copies of the orders issued by the CMS, DMW, Patiala are being sent herewith for similar action by the Ambala Division).

b) Necessary clause in MOUs with the empanelled hospitals may be added as per orders of the Railway Board dated 16-6-2021.

c) The empanelled hospitals be advised to send prevailing symptomatic diagnostic Report, on the prescribed proforma, reflecting the specific Emergency Conditions prescribed by the Railway Board in the Annexure to the orders dated 16-6-2021 and the number of days required for the treatment thereof..

An early action will mitigate the trouble being countered by the Railway employees & the Pensioners.

Copy of Memorandum No. RSCWS/HO/CHD/ Memo-RB/ 2022-4 Dated: 20-1-2022

To the Director General Railway Health Services, Railway Board, Rail Bhawan, New Delhi – 110001.

Subject: OPD & IPD Treatment of Railway Beneficiaries in CGHS empanelled private hospitals on CGHS rates on Reimburseable cash payment

Railways have empanelled very few private hospitals in various towns and cities, even though Railway employees and pensioners are spread over all parts of the country. Orders of the Railway Board (issued vide letter No.2018/Trans Cell/Health/CGHS Dated: 26-10-2018) have not been implemented by the Zonal Railways, citing untenable reasons and causing serious problems especially to the old aged Pensioners who have to travel long distances to reach out to the nearest Railway Hospital or to its empanelled hospitals which are beyond their reach especially due to inadequate resources & age related or emergency medical problems.

These problems are getting further compounded as some of the reputed empanelled hospitals are refusing to give Cashless treatment both referral & in emergency conditions due to with-holding of their outstanding bills for big amounts for long periods by the Railways. The problem is fast increasing.

It is therefore requested that :

i) More CGHS empanelled private hospitals be empanelled by the Railways in all cities & townships.

ii) OPD & IPD Treatment be allowed to the Railway Beneficiaries in CGHS empanelled private hospitalson CGHS rates on Reimburseable cash payment till these are empanelled by the Railways.

Copy of Memorandum No. RSCWS/HO/CHD/ Memo RB/2022- 5 Dated: 21-1-2022To the Director General Railway Health Services, Railway Board, Rail Bhawan,New Delhi

Sub: Extension of all orders of Ministry of Health & Family Welfare / CGHS Central Government employees & Pensioners regarding Medical facilities, to Railway Beneficiaries / RELHS Optees.

Railway employees & Pensioners (RELHS Optees) are denied some of the Medical facilities which are made available to other Central Government employees & pensioners under CGHS & ECHS. This is because of non-extension of the orders of MOHFW / CGHS on the Railways even though the same are extended to all ECHS beneficiaries & all CGHS Beneficiaries. This is discriminatory. It is therefore requested that Railway Beneficiaries (employees & Pensioners) be given all medical facilities as

Copy of Memorandum No. RSCWS/HO/CHD/ Memo/GM NR/ 2022-8 Dated: 9-2-2022 To Shri Ashutosh

Gangal, General Manager, Northern Railway, Baroda House, New Delhi

Subject: MEDICAL FACILITIES URGENTLY REQUIRED IN CHANDIGARH TRI-CITY:

1. We solicit your kind attention towards the serious problems being faced by the Railway Pensioners & other Beneficiaries, especially the old aged Pensioners & their dependents residing in Chandigarh, Panchkula & Mohali (Tri-city) due to lack of requisite Medical and health care facilities.

2. a) Health Unit, Chandigarh lacks all basic facilities and is located at far end of the city. Patients avoid going there on both these counts and are forced to go to the overcrowded Government Hospitals or to the nearby Private Hospitals for their treatment.

b) Health Unit has only one Doctor instead of two Doctors originally sanctioned for the same. Adequate Paramedical Staff is also not provided for.

c) There is no Specialist to attend to any Emergency.

d) There is no Emergency Ward or even a bed for a serious patient to lie down nor an Oxygen Cylinder or any other requisite facility to meet an Emergency.

e) There is no Ambulance available, nor any public or private vehicle available anywhere around the Health Unit to rush the patient to an empanelled Hospital after getting a referral from the Railway Doctor.

f) Many patients have to return home empty handed and have to make multiple trips to the Health Unit either due to the Doctor being away on leave etc or due to non-availability of the prescribed medicines in the stock which have to be recouped from the Divisional Hospital Ambala or through Local purchase by CMS UMB. It is horrifying for the seriously and chronically sick patients to make multiple trips to the Health Unit to get the prescribed medicines.

3. It is earnestly requested that the following facilities may please be provided in Chandigarh Health Unit:

a) Provision of requisite staff in the Health Unit, Chandigarh – with at least one more Doctor on regular basis and Specialised Doctors on rotation, another Pharmacist, and a Nurse and other staff as per yard stick & original sanction.

b) Provision of requisite facilities like Path Lab, X-Ray, ECG, an Emergency Ward and an Ambulance with requisite facilities thereof.

c) Increase in the Stock of Medicines of Health Unit Chandigarh to reduce waiting time and multiple visits by the Patients to get the prescribed medicines.

d) The doctor incharge of HU/CDG be given powers for local purchase of medicines.

4. Up-gradation of Health Unit, Chandigarh to Sub-Divisional Hospital –:

. Keeping in view the rising strength of Railway Beneficiaries in the tri-city particularly on account of diversion of many more Trains through Chandigarh and settlement of many more pensioners in the tri-city of Chandigarh, Panchkula and Mohali, the NR Health Unit Chandigarh be upgraded as a Sub-Divisional Hospital and be located on the main entrance side of the Chandigarh Railway Station so as to be more conveniently accessible to the patients.

5. Lock-up Dispensaries at Mohali & Sector 17 (reservation Office) Chandigarh:

The present Health Unit is located far away beyond the Chandigarh Railway Station at an average distance of 15 to 20 kilometers from Mohali and 10 to 15 Kilometers from most parts of Chandigarh with no Public Transport available to and from the HU, thus making it very cumbersome & costly for the patients to reach the Health Unit for consulting the Railway Doctor, to get the prescribed medicines or to get a referral for an empanelled Hospital etc.

It is therefore requested to please:

a) Set up a Lock-Up dispensary at Mohali station since a number of pensioners are settled in Mohali area and beyond.

b) Provide a Lock up dispensary at Chandigarh Reservation office, (ISBT) Sector 17, Chandigarh for the benefit of Chandigarh settled railway beneficiaries..

Copy of Memorandum No. RSCWS/HO/CHD/ Memo/GM NR/ 2022-9 Dated: 14-2-2022 To Shri Ashutosh Gangal, General Manager, Northern Railway, Baroda House, New Delhi – 110001

Subject: MEDICAL FACILITIES FOR RAILWAY BENEFICIARIES IN CHANDIGARH TRI-CITY: AND UPGRADATION OF THE EXISTING HEALTH UNIT TO A SUB-DIVISIONAL HOSPITAL

1. We solicit your kind attention towards the serious problems being faced by the Railway Pensioners & other Beneficiaries, especially the old aged Pensioners & their dependents residing in Chandigarh, Panchkula & Mohali (Tri-city) due to lack of requisite Medical and health care facilities.

2. a) The existing Health Unit, Chandigarh lacks all basic facilities and is located at a forlorn location, at the back of Chandigarh railway station which itself is located at far end of the city. Patients avoid going there on both these counts and are forced to go to the overcrowded Government Hospitals or to the nearby Private Hospitals in their respective areas for their treatment.

b) Health Unit has only one ADMO instead of two Doctors originally sanctioned for the same. Adequate Paramedical Staff is also not provided for.

c) There is no Specialist to attend to any Emergency.

d) There is no In-Door-Patient or Emergency ward for attending to serious Patients to provide any Indoor facility

e) There is no Ambulance available, nor any public or private vehicle available anywhere around the Health Unit to rush the patient to an empanelled Hospital after getting a referral from the Railway Doctor.

f) Many patients have to return home empty handed and have to make multiple trips to the Health Unit either due to non availability of Pathological test facilities or some times the lone Doctor being away on leave etc or due to non-availability of the prescribed medicines in stock which have to be recouped from the Divisional Hospital Ambala or through Local purchase by CMS UMB. It is so taxing for the seriously and chronically sick patients to make multiple trips to the Health Unit to get the prescribed medicines.

3. It is earnestly requested that the following facilities may please be provided in Chandigarh Health Unit:

a) Provision of requisite staff in the Health Unit, Chandigarh – with at least one more Doctor on regular basis and Specialised Doctors on rotation, another Pharmacist, and a Nurse and other staff as per yard stick & original sanction.

b) Provision of requisite facilities like Path Lab, X-Ray, ECG , an Emergency section and an Ambulance with requisite facilities thereof.

c) Increase in the Stock of Medicines of Health Unit Chandigarh to reduce waiting time and multiple visits by the Patients to get the prescribed medicines.

d)The doctor incharge of HU/CDG be given powers for local purchase of medicines in the tricity itself..

4. Up-gradation of Health Unit, Chandigarh to Sub-Divisional Hospital –:

. Keeping in view the rising strength of Railway Beneficiaries in the tri-city particularly on account of diversion of many more Trains through Chandigarh and settlement of many more pensioners in the tri-city of Chandigarh, Panchkula and Mohali, the NR Health Unit Chandigarh be upgraded to a Sub-Divisional Hospital and provided with all the facilities as per norms. It should also be located on the main entrance side of the Chandigarh Railway Station so as to be properly accessible to the patients.

6. Lock-up Dispensaries at Mohali & Sector 17 (reservation Office) Chandigarh:

The present Health Unit is located far away beyond the Chandigarh Railway Station at an average distance of 15 to 20 kilometers from Mohali and 10 to 15 Kilometers from most parts of Chandigarh with no Public Transport available to and fro the HU, thus making it very cumbersome & costly for the patients to reach the Health Unit for consulting the Railway Doctor, to get the prescribed medicines or to get a referral for an empanelled Hospital etc.

It is therefore requested to please:

a) Set up a Lock-Up dispensary at Mohali station since a number of pensioners are settled in Mohali area and beyond.

b) Provide a Lock up dispensary at Chandigarh Reservation office, (ISBT) Sector 17, Chandigarh for the benefit of Chandigarh settled railway beneficiaries..

MEMBERS OF RSCWS PLEASE PAY YOUR SUBSCRIPTION @ RS.400/- PA OR LIFE MEMBERSHIP RS.3500/-

DONATIONS & SUBSCRIPTIONS MAY BE deposited in the Bank account of RSCWS in favour of

“Railway Senior Citizens Welfare Society” in Punjab & Sind Bank, Sector 7, Chandigarh,

in SB Account No. 08561000100242, IFSC Code PSIB 0000856

OR MAY BE PAID TO

SH. C.P. SINGH. TREASURER, RSCWS, 351, SAVITRI TOWER S 1, VIP ROAD, ZIRAKPUR (PB)-140603

OR IN THE GURDWARA SAHIB, SECTOR 8 D, CHANDIGARH WHERE HE WORKS AS AN ACCOUNTANT.

(PHONE NO. OF SH C P SINGH IS :- 98880-54477)

NOTE: MEMBERS, WHO SEND THEIR SUBSCRIPTION THROUGH BANK ACCOUNT, ARE REQUESTED TO FOLLOW IT UP WITH A LETTER TO THE TREASURER (WITH THEIR FULL NAME, POSTAL ADDRESS & MOBILE NO.) AND UPDATE IN THE RSCWS-1 GROUP SIMULTANEOUS LY.

IN CASE OF NEW MEMBERS, MEMBERSHIP FORM & 2 STAMP SIZE PHOTOS EACH OF SELF & SPOUSE MAY BE SENT TO HIM TO ENABLE HIM TO SEND THE RECEIPT & MEMBERSHIP CARD OF RSCWS.

SECRETARY GENERAL, RSCWS

**MEMBERS WHO CONTRIBUTED TO SOCIAL WELFARE FUND (RSCWS)
IN YEAR 2021-22(TO HELP THE NEEDY & THE DESTITUTES)**

S.N	NAME & ADDRESS OF MEMBERS. SARV SHRI/ Smt.	RECP. NO.	SWF Rs.	COMPOSITE TOTAL Rs.
11-5-21	Mrs. JAGJIT KAUR; 32, PHASE-6. MOHALI	3156	27000/-	27000/-
11-5-21	HARCHANDAN SINGH; [LM]; 32, PHASE-6. MOHALI	3157	1000/-	28000/-
12-7-21	Smt. NARINDER PAL KAUR SAHOTA. MOHALI. [NEW LM]	3164	2500/-	30500/-
11-4-21	O.S. DOGRA	3179	3100/-	33600/-
12-4-21	AMARJIT SINGH, DERA BASSI	3180	200/-	33800/-
24-4-21	D.S.NIGAH. SEC-70.	3181	500/-	34300/-
10-5-21	HARCHARAN SINGH, SEC-19. [LM]	3183	1000/-	35300/-
7-6-21	S.S.ARORA. PANCHKULA	3187	1000/-	36300/-
12-6-21	MAM CHAND. PANCHKULA	3188	200/-	36500/-
6-8-21	Smt. TRIPAT PAL KAUR, PHASE-7.	3191	500/-	37000/-
13-8-21	TARLOK SINGH. LUDHIANA	3192	700/-	37700/-
3-10-21	K.P.SINGH, SEC-28. CDG. [LM]	3194	1000/-	38700/-
9-10-21	HARCHANDAN SINGH, PHASE-6. [LM]	3196	2100/-	40800/-
23-10-21	GURMUKH SINGH. MANIMAJRA.	3202	500/-	41300/-
23-10-21	SURINDER SINGH, PHASE-3/B-2. [LM]	3203	5000/-	46300/-
23-10-21	BALWANT SINGH SAINI.	3204	400/-	46700/-
23-10-21	J.B. BHANDARI.	3213	500/-	47200/-
23-10-21	S.S. BRAR, [LM]; 256, SEC-35/A, CHANDIGARH. [LM]	3222	2000/-	49200/-
23-10-21	ANOOP KUMAR. [LM]; 73; VIKAS NAGAR. BALTANA. [LM]	3223	1100/-	50300/-
23-10-21	SATICH SHARMA, RV, SEC-4. PKL. [LM]	3224	500/-	50800/-
23-10-21	DESH RATTAN. ZIRAKPUR. [LM]	3225	500/-	51300/-
23-10-21	H.S. SACHDEVA. SEC-46. [LM]	3226	500/-	51800/-
7-11-21	B.S.CHAWLA. PHASE-4. MOHALI. [LM]	3229	1000/-	52800/-
29-7-21	N.P.MOHAN, SEC-15. CDG. [LM]	3234	1100/-	53900/-
17-8-21	MOHINDER SINGH, SEC-101, SANETA. MOHALI	3237	200/-	54100/-
23-8-21	MOHINDER SINGH, SEC-49. CHANDIGARH	3238	400/-	54500/-
21-9-21	B.B.SHARMA, SEC-21. CDG. [LM]	3241	1000/-	55500/-
27-9-21	AJIT SINGH WALIA. SEC-46	3244	200/-	55700/-
28-9-21	MAST RAM. SEC-70. [LM]	3245	1000/-	56700/-
29-9-21	GURPREET SINGH GREWAL. [LM]	3246	500/-	57200/-
5-10-21	J.S.JASSAL. PTA. [LM]	3247	1100/-	58300/-
13-10-21	BRAVO OVERSEAS SALES.	3250	1000/-	59300/-
3-3-22	HARCHANDAN SINGH. 32, PHASE-6. MOHALI	3259	1000/-	60300/-
3-3-22	Mrs. JAGJIT KAUR. 32, PHASE-6. MOHALI	3260	27000/-	87300/-
28-3-22	UNKNOWN-----?	3261	500/-	87800/-
	TOTAL		87800/-	

**MEMBERS ! CONTRIBUTE LIBERALLY TO THE SOCIAL
WELFARE FUND OF RSCWS
TO HELP THE POOR, NEEDY & THE DESTITUTE**

DONATIONS FROM SOCIAL WELFARE FUND, RSCWS TO NGOS HELPING THE NEEDY & DESTITUTE FROM 2014-15 TO 2021-22.



Representatives of RSCWS handing over a cheque of Rs.10,000/- for Pingalwara, Amritsar, through Incharge of Pingalwara, Palsora, Chandigarh – a pioneer NGO looking after the crippled & handicapped for the last over 100 years

SL. NO.		AMOUNT	DONATION BY CHEQUE OR IN KIND (Name of item)	NAME & ADDRESS OF NGOs, Charitable Society & Others
1	2014-15	5000/- 10,000/- 7,500/- 7,500/- 5,000/- 10,000/- TOTAL	By Cheque By Cheque By Cheque By Cheque By Cheque By Cheque	a. Bharat Pensioners' Samaj. New Delhi b. PM relief Fund. c. Jyoti Sarup Kanya. Kharar d. Guru Asra Trust. e. World Peace Mission Trust. CDG f. Universal Disabled Caretakers. Panchkula
2	2015-2016	10,000/- 10,000/- 10,000/- 10,000/- 2,500/- 10,000/- 10,000/- 10,000/ TOTAL	By Cheque By Cheque By Cheque By Cheque By Cheque By Cheque By Cheque By Cheque	a. SAS Free Poly Clinic. Village. Mohali b. Jyoti Sarup Kanya. Kharar c. Guru Asra Trust. d. World Peace Mission Trust. CDG e. Society for Disowned People. Panchkula f. SAS Free Poly Clinic. Mohali g. Universal Disabled Caretakers Society. PKL h. PM Relief Fund
3	2016-2017	10,000/- 10,000/- 10,000/- 10,000/- 10,000/- 10,000/- TOTAL	By Cheque By Cheque By Cheque By Cheque By Cheque By Cheque	a. Gur Asra Trust b. Jyoti Sarup Kanya. c. Prabh Asra d. World Peace Mission e. SAS Free Poly Clinic f. Society for Disowned
4.	2017-2018	10,000/- 10,000/- 1,100/- 7,800/- 10,000/- TOTAL	By Cheque By Cheque By Cheque Two Wheel Chairs By Cheque	a. Bharat Pensioners' Samaj b. Prabh Asra Trust c. Railway Pensioners Welfare Ass. Ludhiana d. Station Supdt./CDG e. AFFD [Armed Family Fund]
5.	2018-2019	3,600/- 24,000/- 4,364/- 20,000/- 15,000/- 20,000/- 10,000/- TOTAL	Two Double Folder Sretcher Four (Symphony) Air-Coolers Medicines By Cheque By Cheque By Cheque By Cheque	a. Station Supdt./CDG b. Govt. Primary Railway School, CDG c. Old Age Home, Sec-15 d. SAS Free Poly Clinic. e. Akal Trust, Ratwara Sahib. Naya Gaon. f. Kerala Govt. for flood on appeal of PM g. Brave Hearts of CAPF [Bharat ke veer]
6.	2019-2020	500/- 2,620/- 1,000/- 10,000/- 11,363/- 10,000/- 35,483/- TOTAL	By Cheque 110 Sets of Tooth-Brush & Paste By Cheque By Cheque Aquagaurd Water Purifier By Cheque	a. Servants of the People Society b. Govt. Primary Rly School c. Servants of the People Socy. Sec-15 d. SAS Free Poly Clinic. e. Govt Primary Rly School f. Society for Disowned People
7.	2020-2021 TOTAL	1,00,000 10,000/- 1,10,000	By Cheque By Cheque	a. PM Cares Fund b. All India Pingalwara Charitable Society [Regd], Palsora. CDG
8.	2021-2022	500/- 10,000/-	By Cheque By Cheque	a. Servants of the People Society b. Pingalwara Charitable Society Palsora. CDG.



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PRS: January-March 2022

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