



DEDICATED TO
THE CAUSE OF
PENSIONERS
SINCE 1991

PENSIONERS' RAIL SAMPARK

QUARTERLY BULLETIN OF

RAILWAY SENIOR CITIZENS WELFARE SOCIETY (RSCWS)

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

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FOR FREE CIRCULATION AMONG MEMBERS OF RSCWS

BOARD REMOVES HURDLES FOR MEDICAL TREATMENT IN EMERGENCY

Railway Board has accepted a couple of vital issues raised by RSCWS and removed some basic hurdles for the Railway Beneficiaries in getting emergency treatment in railway empanelled private hospitals.

As per latest instructions issued by the Board, "The empanelled Hospital will not insist on 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."

(Please see copy of Board's orders dated 16-6-2021 on Page 2 inside)

BANKS ADVISED BY DOP&PW TO ISSUE PENSION SLIPS WITH DETAILS

All Pension disbursing Banks have again been advised by the DOP&PW to issue Pension Slips to all Pensioners every month with details of monthly Pension paid along with breakup of the amount credited with deductions of Tax etc. if any. The Pension Slip be sent to the Pensioners on their registered Mobile number through SMS and email (where available) and through Social Media Apps WhatsApp etc.

BANKS TO EXPEDITE SETTLEMENT OF FAMILY PENSION CASES

DOP&PW has advised all PDA Banks to ensure expeditious settlement of Family Pension cases after the demise of the Pensioner. Banks have been advised not to ask for the details and documents which are not otherwise required. In case the deceased Pensioner & spouse were holding a joint account, the only documents to be asked for are a simple letter of request for commencement of Family Pension, Death Certificate of the Pensioner, copy of the PPO issued to the Pensioner, if available and proof of age/Date of Birth of Family Pensioner. Declaration in Form 14 is not required in this case.

In case the spouse did not have a joint account with the deceased Pensioner, then Form 14 duly filled up and signed by the spouse & two witnesses is to be submitted along with the documents cited above.

RELHS CARDS TO CONTINUE TO BE ACCEPTED FOR TREATMENT IN HU/CDG

CMS Ambala withdrew his orders which he had earlier issued on 16th June that only UMID Card will be accepted for treatment in the Health Unit Chandigarh. The orders were withdrawn on the same day when Secretary General RSCWS told him on phone that majority of the Pensioners had not yet got UMID Cards.

MEDICAL PRESCRIPTION BOOK FOR PENSIONERS AT HEALTH UNIT CDG

One thousand copies of the Medical Prescription Book for Pensioners, sponsored & got prepared by RSCWS, will be formally presented by RSCWS to the ADMO Health Unit, at Chandigarh, helping over 400 Railway Pensioners, Family Pensioners & their dependents who are registered at the Health Unit Chandigarh, to keep a record of their treatment for ready reference, for further treatment and follow-up thereof.

ON OTHER PAGES

RB's orders reg. cashless treatment in emergency	2	Activities & Achievements of RSCWS	6 & 7
Memorandum to CRB for validity of RELHS Card till issue of UMID Cards.	3	Caring for the elderly, the retirees & the pensioners - An article by Sh. TS Kalra.	8
RBI's Master Circular to PDA Banks reg. disbursement of Pension to Pensioners.	4 & 5		

Railway Board's letters no: 2018/TransCell/Health/CGHS dated 16.06.2021 to all GMs & others

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

Ref: Board's letters no: 2018/TransCell/Health/CGHS dated 28.12.2020 and 15.06.2021.

In order to improve the health delivery system and emergency treatment in railway empanelled private hospitals, Board had approved a policy vide letter dated 28.12.2020 at Reference, above. Thereafter, a number of suggestions have been received. Based on these suggestions, Board (Member Finance and Chairman & CEO) have approved a policy, as detailed in subsequent paras.

(This is in supersession of instructions contained in Board's letter No. 2018/TransCell/Health/CGHS (eOff.No.3270783) dated 28.12.2020 & 15.06.2021, as referred above.) 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.

1. 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.
2. 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.
3. Situation may arise where Railway hospital, after scrutinizing admission report submitted by empanelled hospital, finds that the patient is not suffering from an emergency. In such cases, the hospital bills upto the stage of such determination, shall be paid by Railway directly to Hospital. However, 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, thereafter.
4. 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.
5. 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.
6. 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.
7. 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.
8. 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.
9. Zonal Railways shall include provisions for conditions given from Para 1 to 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 accordingly.
10. The Zonal Railways shall keep above provisions in view, while projecting budget requirement under relevant head. Since expenditure is to be borne by Railways, the bills shall be paid by the Railway Unit which had empanelled the hospital, without making any reference or debit etc. to the Railway Unit to which beneficiary may belong.
11. Proper accountal & record of such payments may be maintained by Health Department to facilitate audit of such expenditure.

This issues with the concurrence of Associate Finance of Transformation Cell of Railway Board.

Copy of Memorandum No. RSCWS/HO/CHD/Memo/RB-Med/2021-8 Dated: 25-06-2021 to the CRB and copies to MS (HR), DGRHS & Secretary (Estt) Railway Board.

Subject: Validity of RELHS -97 Medical Cards for treatment in Empanelled & Railway

Hospitals to Railway Pensioners who have not yet been able to get their UMID Cards - SOS

Ref: i) Railway Board's Letter No. 2018/TransCell/Health/ CGHS Dated 28.12.2020 & 15.06.2021

ii) RSCWS Memorandum No. RSCWS/HO/CHD/Memo/RB-Med/2020-16 Dated: 30-12-2020 to DGRHS

1. Railway Pensioners are facing serious problems in getting Medical treatment in Emergency in Empanelled Hospitals in cases where they have not yet been able to get their UMID Cards generated or not yet issued due to lack of knowledge / expertise of Computer or due to Administrative delays, non-uploading of Revised PPOs on ARPAN as per orders on 7th CPC or due to other reasons or omissions in uploading of Data on UMID Portal etc.

2. Recent orders of the Railway Board issued vide letters dated 28-12-2020 & 15-6-2021 cited above, even while simplifying the system for Cashless Medical treatment in emergency in empanelled hospitals, have also created serious problems due to unjust provision that only UMID & CTSE cards shall be treated as proofs of identity for treatment by the empanelled hospitals.

3. There is no mention about the existing RELHS Cards in the said orders nor as to how those RELHS Card holders will be treated in cases where they have not yet been able to get their UMID Cards for reasons mentioned in Para 1 above. Thousands (or possibly lakhs) of Railway Beneficiaries will get deprived of the treatment in emergency due to this ambiguity in the said orders. It is a great injustice and a violation of the provisions of the RELHS wherein the optees are to get the cashless treatment in emergency or on reference by the AMO in specialized empanelled hospitals. Pensioners have paid for joining the RELHS. It is, therefore, expected of the Railway administration to issue the UMID Cards to replace the existing RELHS Card and the optees cannot be left in lurch to fend for themselves to generate UMID Cards of their own.

4. It is, therefore, requested that all General Managers may please be advised that:

i) Till UMID cards are issued to the Pensioners, RELHS – 97 Medical Cards along with any other ID Card like Pensioners' ID Card or along with any other proof of being a Railway Beneficiary may please be allowed as a valid proof of identity for getting cashless treatment in empanelled hospitals in emergency or on Referral by the AMO.

ii) Divisional & Extra- Divisional Offices be advised to launch special drive to issue UMID Cards to all Railway Beneficiaries / RELHS optees by holding special camps and opening special counters in the Divisional & Extra Divisional Offices and on all Stations where Railway Hospital & Health Units are located.

RAILWAY PENSIONERS! FOR YOUR WELFARE & AWARENESS - BE ACTIVE MEMBERS OF RSCWS

SUBSCRIPTION FOR RSCWS @ RS.300/- PA OR LIFE MEMBERSHIP RS.2500

DONATE & SUBSCRIBE LIBERALLY TO "SOCIAL WELFARE FUND" (SWF)

DONATIONS & SUBSCRIPTIONS MAY BE SENT BY NEFT OR DEPOSITED IN THE BANK ACCOUNT OF RSCWS IN FAVOUR OF

" Railway Senior Citizens Welfare Society" in Punjab & Sindh Bank, Sector 7, Chandigarh,

SB Account No. 08561000100242, IFSC Code PSIB 0000856 OR BE PAID TO THE

TREASURER RSCWS IN CASH OR AT-PAR CHEQUE OR DD AT HIS FOLLOWING ADDRESS:

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

OR SH. C.P. SINGH. TREASURER RSCWS AT THE OFFICE OF ACCOUNTANT, GURDWARA, SECTOR 8 D, CHANDIGARH

MASTER CIRCULAR OF RESERVE BANK OF INDIA (RBI) - 2021**REG. DISBURSEMENT OF GOVERNMENT PENSION BY AGENCY BANKS****Introduction**

Payment of pension to retired government employees, including payment of basic pension, increased Dearness Relief (DR), and other benefits as and when announced by the governments, is governed by the relevant schemes prepared by concerned Ministries/Departments of the Government of India and State Governments. This Master Circular consolidates important instructions on the subject issued by the Reserve Bank of India till June 30, 2020 (listed in Appendix). It does not replace or supersede any existing government instructions on the matter. The instructions issued by Pension Sanctioning Authority of the Central and State Governments and circulated by RBI in the past will continue to remain in operation subject to changes being made by the competent authority. In case of any doubt or apparent contradiction, agency banks may be guided by the relevant government instructions. Contents of various circulars issued in this connection by the Reserve Bank of India are summarised hereunder.

General Instructions**Government orders on DR, etc. on websites**

2. In order to obviate the time lag between issue of DR orders and payment of DR to the beneficiary and to render expeditious service to senior citizens, the following actions are required to be taken:

- a. It has been decided to discontinue the procedure of forwarding government orders in respect of dearness relief etc. to pension paying agency banks. Agency Banks may, therefore, act on the copies of government orders supplied by government to them through post, fax, e-mails or by accessing from the website and authorize their pension paying branches to make payments to the pensioners immediately.
- b. All agency banks are advised to scrupulously follow all the guidelines /instructions contained in various notifications of Government (Central as well as States) and take necessary action immediately without waiting for any further instructions from RBI.

Timing of pension disbursement by agency banks.

3. The pension paying banks will credit the pension amount in the accounts of the pensioners based on the instructions given by respective Pension Paying Authorities.

Recovery of excess/wrong payment made to a pensioner

4. Details of the uniform procedure for recovery of excess/wrong payments made to pensioners drawing pensions under the Scheme for payment of pension to Central/Civil/Defence/Railways pensioners through agency banks have been put in place by RBI in consultation with Government of India are given below:

- a. As soon as the excess/wrong payment made to a pensioner comes to the notice of the paying branch, the branch should adjust the same against the amount standing to the credit to the pensioner's account to the extent possible including lumpsum arrears payment.
- b. If the entire amount of overpayment cannot be adjusted from the account, the pensioner may be asked to pay forthwith the balance amount of overpayment.
- c. In case the pensioner expresses his inability to pay the amount, the same may be adjusted from the future pension payments to be made to the pensioners. For recovering the overpayment made to pensioner from his future pension payment in instalments 1/3rd of net (pension + relief) payable each month may be recovered unless the pensioner concerned gives consent in writing to pay a higher instalment amount.
- d. If the overpayment cannot be recovered from the pensioner due to his death or discontinuance of pension, action has to be taken as per the letter of undertaking given by the pensioner under the scheme.

Pensioner may also be advised about the details of over payment/wrong payment and mode of its recovery.

Refund of excess pension payment to Government

5. Whenever any excess / overpayment is detected the entire amount thereof should be credited to the Government account in lump sum immediately when the excess/overpayment is due to an error on the part of the agency bank. This action is independent of recovery from the pensioner.

6. If the excess/wrong payment to the pensioner is due to errors committed by the government, banks may take up the matter with the full particulars of the cases with respective Government Department for a quick resolution of the matter. However, this must be a time bound exercise and the government authority's acknowledgement to this effect must be kept on the bank's record. The banks may take up such cases with government departments without reference to the Reserve Bank of India.

Withdrawal of pension by old/ sick/ disabled/ incapacitated pensioners

7. In order to take care of problems/ difficulties faced by sick and disabled pensioners in withdrawal of pension / family pension from the banks, agency banks may categorise such pensioners as under:

- a. Pensioner who is too ill to sign a cheque / unable to be physically present in the bank.
 - b. Pensioner who is not only unable to be physically present in the bank but also not even able to put his/her thumb impression on the cheque/ withdrawal form due to certain physical defect / incapacity.
8. With a view to enabling such old/sick/incapacitated pensioners to operate their accounts, banks may follow the procedure as under:
- a. Wherever thumb or toe impression of the old/sick pensioner is obtained, it should be identified by two independent witnesses known to the bank, one of whom should be a responsible bank official.

- b. Where the pensioner cannot even put his/her thumb/ toe impression and also would not be able to be physically present in the bank, a mark can be obtained on the cheque/withdrawal form, which should be identified by two independent witnesses, one of whom should be a responsible bank official.
9. Accordingly, the agency banks are requested to instruct their branches to display the instructions issued in this regard on their notice board so that sick and disabled pensioners could make full use of these facilities. Agency Banks are also advised to strictly implement the instructions issued by RBI regarding the facilities to be provided to the sick and disabled persons and sensitise staff members in the matter and to refer to the FAQs on pension disbursement hosted on our website www.rbi.org.in in case of any doubt.
- Reimbursement of pension payments**
10. Link branches of agency banks may submit reimbursement claims to Reserve Bank of India, Central Accounts Section, Nagpur / Government Banking Division at Regional Office for Central/State Government pension payments.
- Continuation of either or survivor pension account after death of pensioner**
11. All agency banks disbursing Central Government pension have been advised that in case the spouse (Family pensioner) opts for existing joint account for credit of family pension, banks should not insist on opening a new account when the spouse is the survivor and having a joint account with the pensioner and in whose favour an authorisation for payment of family pension exists in the Pension Payment Order (PPO).
- Life Certificate- Issuance of Acknowledgement**
12. There have been complaints that life certificates submitted over the counter of pension paying branches are misplaced causing delay in payment of monthly pensions. In order to alleviate the hardships faced by pensioners, agency banks were instructed to mandatorily issue duly signed acknowledgements. They were also advised to consider entering the receipt of life certificates in their CBS and issue a system generated acknowledgement which would serve the twin purpose of acknowledgement as well as real time updation of records.
13. Single Window System was introduced to facilitate prompt settlement of reimbursement claims and reconciliation. The underlying objective is to make each pension paying bank responsible in its own right to effect settlement without the intervention of RBI Offices or SBI in the process eliminating cause of delay in reimbursement claims.
14. All agency banks may issue instructions to their dealing branches to adhere to the recommendations of the Prabhakar Rao Committee relating to pension payments. A checklist may be provided to the inspecting officers/auditors, which may at a minimum include the items given in Annex 1. Agency banks may also instruct their internal auditors/inspectors to comment on the quality of customer service in their reports which may be made available to Reserve Bank's inspecting officers, as and when they visit the branches.
15. Grievances of pensioners are not being addressed properly at the branch level especially after the setting up of Centralised Pension Processing Centres (CPPCs). To provide hassle free service to the pensioners, there should be a forum for regular interaction and settlement of grievances. Accordingly, agency banks should appoint one/two nodal officers at each Region/Zone for monitoring the resolution of grievances of pensioners on regular basis and the GM/CGM concerned should review the position at monthly intervals
16. At locations outside the CPPCs, there should be designated nodal officers for pension related complaints who should be easily accessible to pensioners and who should hold regular meetings at different locations in their jurisdiction on the lines of Pension Adalat. Each bank should establish toll free dedicated pension line manned by trained persons with access to the database to answer queries, note down and redress complaints.
17. Following several complaints from pensioners alleging inordinate delay in disbursing revised pension and arrears, agency banks are advised as under:
- a. Pension paying banks should compensate the pensioner for delay in crediting pension/ arrears thereof at a fixed interest rate of 8 per cent per annum for the delay after the due date of payment and the compensation shall be credited to the pensioner's account automatically without any claim from the pensioner on the same day when the bank affords credit for revised pension/ pension arrears, in respect of all delayed pension payments made since October 1, 2008.
- b. Pension paying banks have been advised to put in place a mechanism to obtain immediately the copies of pension orders from the pension paying authorities directly and make payments without waiting for receipt of instructions from the Reserve Bank of India so that pensioners should get benefits announced by the Governments in the succeeding month's pension payment itself.
- c. When the agency bank is calculating pension, the branch should continue to be a point of referral for the pensioner lest he/she feel disenfranchised. All branches having pension accounts should guide and assist the pensioners in all their dealings with the bank.
- d. Suitable arrangements should be made to place the arithmetic and other details about pension calculations on the web, to be made available to the pensioners through the net or at the branches at periodic interval as may be necessary and sufficient advertisement is made about such arrangements.
- e. All claims for agency commission by banks in respect of pension payments must be accompanied by a certificate from ED/CGM in charge of government business that there are no pension arrears to be credited/ delays in crediting regular pension/arrears thereof.
- f. All agency banks disbursing pension are advised to provide considerate and sympathetic customer service to the pensioners, especially to those pensioners who are of old age.

ACTIVITIES & ACHIEVEMENTS OF RSCWS (1991-2021)

RSCWS was formed in 1991 for the welfare of Railway Pensioners settled in and around tri-city of Chandigarh & for redressal of their grievances. The Society has since substantially grown both locally and in other parts of the country – especially during the last 15 years (since 2006 onwards).

Multiple achievements have been made in this period to fulfill the objectives of the Society in respect of provision of better health care facilities in the tri-city, redressal of individual and collective problems of Pensioners at Ministerial, Railway Board, Zonal & Divisional levels, and above all, continuous inter-action among the Railway Pensioners and greater awareness among them about the related issues. Some of the main achievements of RSCWS are briefly enlisted below for the information of the members:

1. KEEPING PENSIONERS IN TOUCH WITH PAST, PRESENT & FUTURE

a) Holding of quarterly General Body & Monthly/Bi-monthly Executive Committee Meetings in open halls till the pandemic (instead of at someone's residence earlier). Practice will be resumed after pandemic.

b) Holding Medical Seminars in all General Body Meetings for greater health awareness

2. Regularly holding Virtual meetings of Executive Committee and Virtual General Body Meetings during pandemic, thus keeping the members in touch even while ensuring social distance.

3. Constantly working for the welfare of the Railway Pensioners and for redressal of their grievances & resolving of their problems both at individual and collective levels through Pensioners' Portal (CPENGRAMS), Memorandums, Emails, personal phone calls & other available channels.

4. Holding Informal Meetings with DRM, CMS, CMD, FA&CAO, GM, DGRHS, RB, DOP&PW & others up to the pandemic. All issues continue to be pursued through Phone and Emails during the Pandemic with equal vigour and effective results.

5. Publication of Quarterly journal "Pensioners Rail Sampark" from 2006 onwards.

6. Starting, maintaining and regular updating of the website of RSCWS;

7. Raising membership of RSCWS within Tri-city and spreading it in other parts of the country.

8. Regular publication of the Directory of the society;

9. Collection of advertisements for the Journal, Directory & Website of RSCWS.

10. Improvement in Health Care Facilities.

11. Starting of Lock-up Dispensary at Chandigarh (in 1996-97) for 2 days a week.

12. Upgrading of Lock-up dispensary to Health Unit (in 2013-14 in a new building);

13. Posting of a full time Doctor (ADMO) at Chandigarh HU (2020-21) and

14. Opening of the health unit for 6 days a week, instead of 2 days a week

15. Improvement of health care services in the NR Health Care Unit Chandigarh

16. Authorisation of ADMO/CDG for referring patients to Empanelled Hospitals

17. Empanelment of five Private Hospitals with the Railways for cashless treatment in emergency and on referral by authorised Medical Officer of Railways.

18. Empanelment of Private Hospitals with RSCWS for treatment of members of RSCWS on CGHS rates.

19. Identification and recognition of RSCWS by DOP & PW under Pensioners' Portal and getting sanction of Grant-in-Aid of Rs. 75000/- p.a.

20. Nomination of RSCWS as a member of SCOVA for representing grievances of Pensioners at the highest level of MOP&PW.

21. Undertaking social welfare activities for helping the needy, poor, and destitute.

22. Registration of DLC (Digital Life Certificates) of Pensioners at their residence with the Bio-metric devices provided by the DOP&PW.

23. Resolving of individual problems on top priority basis through personal Phone Calls especially regarding healthcare issues (including approval of AMO/CMS for cashless treatment in empanelled hospitals in emergency and for referrals to empanelled hospitals and issue of medicines for longer periods especially in case of Chronic Diseases etc.)

24. Restoration of pension due to non-registration of some DLCs due to system errors of the Banks, release of additional pensions after 80 years of age, issue of revised PPOs and amendment thereof.

25. Sponsoring of Medical Prescription Book for Pensioners at Health Unit, NR, Chandigarh

26. Orders on important issues on continued representations by RSCW.

27. Defining of conditions of emergency for cashless treatment in empanelled hospitals (RTI 2007)
28. Revision of Fixed Medical Allowance (FMA) from Rs.100/- to Rs.300/- (in 2009) and thereafter to Rs.500/- (in 2014). And further to Rs.1000/- by the 7th CPC.
29. Reduction of charges of CSTE Card from Rs.50,000/- to a maximum of Rs.30,000.
30. Rationalisation and streamlining of system of issue of 'UMID Cards'.
31. Implementation of Railway Board's orders for issue of medicines for 3 months for patients suffering from chronic diseases; And follow-up orders thereof by the CMS, Ambala to ADMO Health Unit Chandigarh
32. Authorisation of ADMO Health Unit, Chandigarh, to refer patients to empanelled hospitals, after getting telephonic approval from the CMS, Ambala.
33. Simplification of procedure of cashless system in emergency by empanelled hospitals (issue of orders by Railway Board dated 28.12.2020, as a result of continuous representations by RSCWS).
34. Further substantial improvement in the procedure vide RB letter dated 16-6-2021 for cashless system in emergency by empanelled hospitals (modifying the Board's letter dated 28.12.2020, as specifically demanded by RSCWS).
35. Reimbursement of cost of OPD Medicines during COVID – 19 and extension of orders thereon in stages, from March, 2020 to July, 2021.

LIST OF PVT HOSPITALS EMPANELLED BY RAILWAYS IN CHANDIGARH, MOHALI & PANCHKULA

- FOR CASHLESS TREATMENT OF RAILWAY MEDICAL BENEFICIARIES (EMPLOYEES & RELHS OPTees)
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- 2021	9988823456 (Abhishek: 8699999914)
2.	Indus Super Specialty Hospital, Opp.old D.C. Office, Phase 1, Mohali	07-07-2021 Extension Awaited	0172- 5044945
3.	Sri Guru Harkishan Sahib Eye Institute & multispecialty Hospital, Sohana, Sector 77, SAS Nagar, Mohali	10-07-2021 . (Extension awaited)	0172-2295000
4.	Mukat Hospital & Heart Institute, Sector 34-C, Chandigarh	15-10-2021	9872048149
5.	Grecian Super Specialty Hospital, Sec. 69, Mohali	26-08-2021	9899649020
6.	MAX Super Specialty Hospital, Phase6, Mohali	18-02-2022	0172-6652000
7.	Amar Hospital Multi-Speciality Heart Centre, Sector, 70, Mphali	12-03-2022	0172-5037683
8.	Drishhti Eye Hospital, Sector10, Panchkula	13-12-2022	0172-2571572 98033-33344

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)

S.No	Name of Hospital	EMPANELLED FOR THE SPECIALITIES	Contact No
1.	FORTIS MULTI-SPECIALITY HOSPITAL, SECTOR-62, PHASE-VIII, MOHALI	All available Specialities	172-5021222 9872170582 (Dr. Ajinder S.)
2.	IVY MULTI-SPECIALITY HOSPITAL, SECTOR-71, MOHALI	All available Specialities	0172-7170000, (Abhishek: 8699999914)
3.	MUKAT MULTI-SPECIALITY HOSPITAL, SECTOR 34 A, CHD	All available Specialities	0172-4344444 9872048149
	EDEN CRITICAL CARE HOSPITAL IndustrialArea – 1, CHD (Near Elante Mall)	All available Specialities	Manpreet Sharma 7528977408

CARING FOR THE ELDERLY, THE RETIREES & THE PENSIONERS



by T. S. KALRA, PRESIDENT RSCWS

Once a VVIP, probably it was Abraham Lincoln, before he became US president, was driving on a busy road, when he spotted an old black woman standing on road side, trying in vain to cross over. He stopped his car near her and led her by her arm across to the other side. She did not even know how to offer thanks; simply smiled and walked off. But Abraham had a very deep, peaceful sleep on that night, dreaming plentiful blessings from the old woman. That's the return you get for doing something for the needy without expecting any return.

In many developed cities abroad, you'll find even old infirm people on wheel chairs, able to fend their way on city streets and cross over to the other side with full safety. Further, while shopping in the Malls, they are provided specific aids/gadgets to pick up their items from the shopping shelves.

The elderly sick are given preferential attention in health care centres and even registered for free taxi service to the hospital of their choice. Here, we have seen, that railway retirees were made to shuttle from their residences in the tricity to the far away HU/CHD and Ambala Divl hospital for getting medicines and referrals for treatment in empanelled hospitals. It has been due to long sustained efforts of our RSCWS that things are changing for the better now.

Abroad, it is given to understand that life style for old people is created in such a way that they are required to keep themselves least dependent on their children or other attendants. In the colonies/residential blocks for senior citizens, all possible amenities and socializing arrangements are provided for the elderly, including a medical centre nearby.

In Switzerland there is a novel concept of 'Time Investment', whereby when you are physically fit and free, you get yourself registered for looking after the needs of the elderly. The time thus spent is duly recorded in your Time Investment book, which can be encashed later on when you grow old and need outside care.

On the whole I feel why should we expect our children to look after us like the legendary Shraavan Kumar. We have lived our lives well; now let our young children enjoy themselves while continuing keeping good contact with us and coming to our assistance during urgency or medical emergency. We should enjoy bringing up our children as good, successful citizens but let them and the grand kids decide the time, attention & quality company they can spare for us in our greying years.

The State and the Society, indeed, should look after the seniors, especially taking care of their medical and socializing needs, keeping them happily busy and not letting them feel lonely & isolated.

Slowly, the 'privilege' of separate queues has been allowed to senior citizens but not quite effectively implemented. For example there are separate queues for them at registration counters at PGIMER Chandigarh. But thereafter they have to wait for many hours for their turn to see the doctor, in common with other patients. Likewise in banks, post offices, cinema halls and other queuing counters, they get preference only if other 'customers' allow them the leeway. The senior officers/officials in offices/business establishments should empathize with the elderly and give them precedence over others.

In Railways, two aspects are important for the pensioners; one – their health care, medical matters & pension disbursement and secondly, to a lesser extent, personnel matters like PPOs, travel passes etc. There should be some nominated nodal officers as well as supervisory staff in medical & personnel depts, whom the retirees can contact freely, on phone or in person, for their needs & grievances. Administration should also regularly keep posting the senior citizens organisations, like RSCWS, about the latest office orders and developments which may, inter alia, concern the retirees/pensioners also.

People, retiring after 30-40 years of service, have a rich experience which can be used in advisory/consultancy capacity. Those in privileged positions today must not forget that after 60 they all have to leave their seats of 'power' and sit outside the play-field boundary line alongwith those who are above 60, 70, 80 and more. That's when they may really feel that while in chair 'I should have done such & such for my and my ageing railway men/women's needs.' Obviously there must not be any departmental biases left; the retirees, the pensioners should be treated as elderly members of the railway family at large, given due respect as seniors and not at all be considered as liabilities for the railway administration.

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