ALL INDIA ASSOCIATION OF COAL EXECUTIVES (AIACE)

(Regd under The TU Act, 1926, Reg no 546/2016, PAN -- AAEAA7978E)

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AIACE/CENTRAL/2017/ 45

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To, The CMD MCL, Sambalpur.

Sub: Cashless treatment facility in empanelled hospitals who are covered under CPRMSE of CIL.

Dear Sir,

Retired executives who are covered under CPRMSE of CIL and are settled in Odisha have opted MCL to avail the benefit under it. At present, as per our information the following system is followed at MCL if a retired employee/ spouses wish to undergo treatment in any of the empanelled hospital within India.

- The empanelled hospital prepares an estimate of the ex- executive and sends the same to Chief of Medical Services (CMO) posted in the company HQ.
- 2. Upon receipt and scrutiny of the estimate, CMO sends the same to finance department to ascertain availability of funds in the account of the employee concerned and upon receipt of fund position, he passes this information to the concerned hospital.
- 3. After receipt of information and advice from the CMO ,the empanelled hospital initiates action for treatment of the patient.

- 4. It may be noted here that there is no time limit and no standard operating procedure (SOP) has been developed at MCL to inform the fund position to the hospital.
- 5. Retired executives are in trouble in emergency cases where medical intervention is required immediately.
- 6. In such cases, retired employees are forced to deposit money from their pocket and send the bills after discharge from the hospital and wait for the mercy of the officers/ dealing assistants of different departments at MCL ,HQ for reimbursement.
- 7. Instances are there ,where such bills are not passed/ held up for months together due to some procedural lacuna on the part of the retired executive/ Hospitals who raise the bills.

To overcome such difficulties and to implement the CPRMSE of CIL in its true spirit and hassle free, we propose the following:

MCL may consider developing a software and this can be accessed by an authorized officer of the empanelled hospital and concerned departments of MCL where the following details of the employee can be furnished.

- a. A copy of the medical card issued to the patient.
- b. After entering the estimate amount in another window of the software the following information should be flashed: Sufficient Fund available/ Not available. Concerned hospital should not be allowed to know the actual amount available in the credit of the ex-employee.
- c. If Sufficient Fund is available then concerned hospital should intimate/ confirm to CMS MCL/ Finance department regarding treatment of the ex employee.
- d. In another window concerned employee and officers of the department who are responsible to pass the bill can view the amount available at any point of time if they wish to do so.

If this type of software is developed and introduced, then it will be beneficial to all concerned. Let MCL be pioneer in CIL to introduce this system.

Regards

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