



ALL INDIA ASSOCIATION OF COAL EXECUTIVES (AIACE)

(Regd. under The Trade Union Act 1926; Regd. No. 546 / 2016)

302, Block No. - 304, RamKrishna Enclave, Nutan Chowk, Sarkanda, Bilaspur (CG);

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AIACE/CENTRAL/2023 / 010

Dated 22.2.2023

To

The Chairman,
Coal India Limited,
Coal Bhawan,
Premise No-04 MAR, Plot No-AF-III, Action Area-1A,
Newtown, Rajarhat, Kolkata-700156

Sub: Request for proper measures as Hospitals unilaterally opt out of empanelment and other empanelled hospitals not extending CGHS Rates under CPRMSE

Dear Sir,

Coal India Ltd. has implemented a Contributory Post Retirement Medicare Scheme called CPRMSE for retired executives and CPRMSNE for retired non-executives. Under these schemes, CIL and its subsidiaries are extending medical facilities to the retired employees and/or their spouses in CIL Hospitals along with 369 empanelled hospitals across India where employees prefer to stay after retirement.

No doubt, CIL is a Maharatna company but its beneficiaries are losers in every respect. These schemes present a very rosy picture at the first glance, but after years of their implementations, retirees are now realising the dark side of these schemes they being unable to avail hassle free cashless treatment for themselves and their dependents.

Situation worsens as even these hospitals are creating problems like,

- a) Declining their empanelment with CIL, or
- b) Even if they do not decline, they are refusing to extend CGHS Rates to beneficiaries
- c) Refusing cashless treatment due to reasons best known to them.
- d) Stating that MOU with CIL has not been renewed
- e) Billing differently for different departments which are under the same roof
- f) Billing with a new Name citing change of ownership/management of hospital

Beneficiaries do not have the locus standi to argue/verify with the hospitals for their act.

During our interaction at CIL, HQ in February 2020, we were given to understand that things will improve soon, hospitals are continuously violating MOU with CIL.

Under the circumstances, we are forced to demand for,

- a) appropriate action by CIL and permission to avail medical treatment under any doctor in any hospital/clinic whose honesty must be accepted as all of them are governed by various government rules and regulations.
- b) adherence to a revised Rate of List in place of age old CGHS rates
- c) strict review/monitoring of every empanelled hospital by a high power committee of CIL for smooth implementation of CPRMSE/CPRMSNE and to devise suitable remedial measures for various hindrances ailing the scheme at various point of time

Thanking You,

With Regards,



P. K. Singh Rathor
Principal General Secretary, AIACE

Encl: Annexure-I, as above

Cc:

1. Secretary, Ministry of Coal, Govt of India.
2. Secretary, Ministry of Health and Family Welfare, Govt of India.
3. D(P)/D(F)/D(T)/D(M),CIL, Kolkata
4. CMD/D(P)/D(F), All subsidiary companies of CIL
5. CMD/D(P),SCCL, Kothagudem.
6. Chief of Medical Services, CIL, Kolkata