

GOVERNMENT OF INDIA (BHARAT SARKAR)  
MINISTRY OF RAILWAYS (RAIL MANTRALAYA)  
(RAILWAY BOARD)

No. 2016/F(E)III/1(1)/7

New Delhi, Dated: 16.02.2017.

The ~~GMs/FA&CAOs,~~  
All Zonal Railways/Production Units/RDSO.  
(As per mailing list)

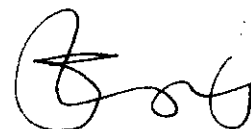
**Subject:** Policy letter on Cashless Treatment Scheme in Emergency situations (CTSE) in empanelled hospitals for retired Railway employees and their dependent family members.

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Please refer to Board's letter No. 2014/H/28/1/smartcard/Part A dated 14.07.2016 on the above subject vide which broad outlines of the Cashless Treatment Scheme in Emergency situations (CTSE) were circulated to all Zonal Railways and Production Units. The Scheme has been launched as a 'pilot scheme' in four (4) Metro cities (Delhi-NCR, Mumbai, Kolkata and Chennai) and their suburbs for one year (the period of one year of pilot scheme shall start only after the website starts working and not from the date of issue of Board's letter No. 2014/H/28/1/smart card/Part A dated 14.07.2016).

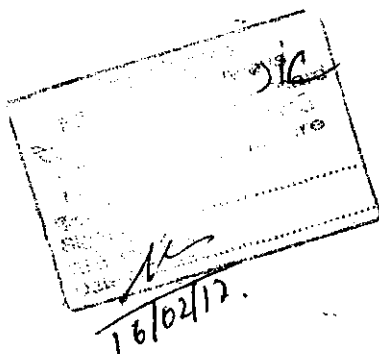
2. In respect of above, option of CTSE, may be taken from retirees, who intend to settle in the four Metro cities mentioned in para 1 above, in addition to RELHS, at the time of filling of pension papers. Also, this form may be included in the list of 'forms to be submitted' by a retiring Railway servant. The CTSE option may be taken in Annexure 3 of the Board's letter dated 14.07.2016, a copy of which is enclosed.

3. This issues with the approval of Executive Director Finance (Estt.).



(SANJAY PRASHAR)  
Deputy Director Finance (Estt.)III,  
Railway Board.

D.A.: One



**Annexure-3****Declaration to be taken from RELHS members on becoming a member of CTSE.**

1. I hereby apply to become a member of the Cashless Treatment Scheme in Emergency (CTSE) at private hospitals empanelled by railway. I request Indian Railway to issue individual CTSE photo identity card(s) for following members, whose name(s) feature in RELHS card, of my family.

	Name	Relation	DOB dd/mm/yyyy	Aadhar Number	Special feature of Dependent <sup>1</sup>
i.		Self			
ii.					
iii.					
iv.					
v.					

I hereby undertake to inform the Sr. DPO concerned either through this website or in writing, whenever any of my above mentioned family members become ineligible under RELHS and surrender his/her card.

2. I have been made aware that this CTSE card entitles me for treatment in private hospitals ONLY AT THE TIME OF EMERGENCY. In routine illness or any illness which does not require immediate intervention/investigation, I shall continue to report to my authorized medical officer in Railway.

3. I have been explained that under CTSE scheme if I go to the empanelled private hospital I shall have to deposit a prefixed amount of money as per my entitlement to private/semi-private/general ward at the time of admission itself (the amount is liable to be revised from time to time). If the disease/condition turns out to be a non-emergency, then this amount shall be retained by hospital towards part payment of the bill amount. If my disease/condition turns out to be emergency, then the whole bill

<sup>1</sup> The special feature, if any, of the dependent may be written like widowed daughter, student son differently abled etc.

amount shall be paid by the railway and the prefixed amount deposited, by me at the time of admission, shall be refunded by Hospital to me.

4. I hereby declare that I shall abide by the rules of the CTSE scheme in letter and spirit.

5. I undertake that I shall not allow others to misuse the CTSE Cards issued to me and my family members by way of utilizing it for obtaining treatment for a non-bonafide person. I further undertake that I shall not allow other family members to misuse the Cards by way of utilizing it for non-emergency disease treatment at Private empanelled hospital. Any misuse is liable to disqualify the card holder from membership of the CTSE scheme, with forfeiture of the intial deposited amount.

6. In case of loss of CTSE cards, I shall lodge a complaint with police and inform the Sr. DPO concerned either through this website or in writing for issue of New card to me on deposition of 'CTSE card Making Charges' prevalent at that time.

7. I hereby declare that I have been explained and I understand that Cashless treatment under CTSE scheme shall be available only in Railway empanelled hospitals for the stated purpose. In case I have to undertake treatment in a private non empanelled hospital, I shall have to pay the entire bill myself and shall claim reimbursement later on as per extant rules.

(Signature of the Employee)

Name:

Contact no.

E mail