DIVISIONAL RAILWAY HOSPITAL EASTERN RAILWAY/HOWRAH

No.:- HG/MED/CGHS/MOU/Emp.Pvt Hosp.

Howrah, dated 16.05.2024

The Chief Public Relation Officer, Eastern Railway/Kolkata

Sub: EOI (Expression of Interest) towards entering into Tie-up with CGHS empanelled/unempanelled Private Hospitals for treatment of multi-specialty referral & emergency cases, COVID cases or any other emergent case for Two(02) years and also for OPD consultation & related investigations for RELHS beneficiaries aged 75 years & above (till 31.10.2024 or as extended by Railway Board from time to time) at CGHS rates for cashless treatment of all Railway Beneficiaries for Divisional Railway Hospital (Orthopaedic Hospital), Eastern Railway, Howrah and/or Kamarkundu Health Unit(HU), Bandel HU, Burdwan HU, Katwa HU, Rampurhat HU, Azimganj HU & Pakur HU under Medical Department, Howrah Division.

Ref:-i) Rly. Board's L. No. 2016/H-1/11/69/Hospital Recognition dated 23.12.2016.

ii) Rly. Board's L. No. 2017/Trans/01/Policy/Pt. I dated 30.11.2017.

Please arrange to publish the attached EOI in leading daily News papers in English, Hindi and Bengali. Cost of advertisement should be debited from allocation 11.215.21

DA: Original EOI.

Chief Medical Supdt. Eastern Railway/Howrah

Copy forwarded to:-

- i) PCMD/ER/KKK for kind information please.
- ii) Ch. OS(G) for kind information to DRM/ER/HWH.
- iii) ADRM/Admn./ER/HWH for information please.
- iv) Sr. DFM/ER/HWH for information and necessary action please.

Chief Medical Supdt. Eastern Railway/Howrah

Office of the Chief Medical Superintendent,
DIVISIONAL RAILWAY HOSPITAL,
(ORTHOPAEDIC HOSPITAL),
222, CHURCH ROAD,
HOWRAH-711101,
EASTERN RAILWAY, HOWRAH

Email ID: cmshwher@gmail.com

EOI (EXPRESSION OF INTEREST)

Sub: EOI (Expression of Interest) towards entering into Tie-up with CGHS empanelled/unempanelled Private Hospitals for treatment of multi-specialty referral & emergency cases, COVID cases or any other emergent case for Two(02) years and also for OPD consultation & related investigations for RELHS beneficiaries aged 75 years & above (till 31.10.2024 or as extended by Railway Board from time to time) at CGHS rates for cashless treatment of all Railway Beneficiaries for Divisional Railway Hospital (Orthopaedic Hospital), Eastern Railway, Howrah and/or Kamarkundu Health Unit(HU), Bandel HU, Burdwan HU, Katwa HU, Rampurhat HU, Azimganj HU & Pakur HU under Medical Department, Howrah Division.

Chief Medical Superintendent, Divisional Railway Hospital (Orthopaedic Hospital), Eastern Howrah invites Expression of Interest(EOI) from all willing empanelled/unempanelled Private Hospitals for entering into Tie-up for treatment of multispecialty referral & emergency cases, COVID cases or any other emergent cases at CGHS rates for cashless treatment of all Railway Beneficiaries of Divisional Railway Hospital, Eastern Railway (Orthopaedic Hospital), Howrah and/or for Railway Beneficiaries of Kamarkundu HU, Bandel HU, Burdwan HU, Katwa HU, Rampurhat HU, Azimganj HU & Pakur HU under Medical Department, Howrah Division for two (02) years. This EOI shall also include OPD consultation & related investigations for RELHS beneficiaries (eligible Retired Railway Employees and their dependants) aged 75 years & above (till 31.10.2024 or as extended by Railway Board from time to time). Expression of interest are invited from Private Hospitals for Divisional Railway Hospital (Orthopaedic Hospital), Eastern Railway, Howrah and/or any number of Health Units (as mentioned above).

For Expression of interest, the documents may be downloaded from the website https://er.indianrailways.gov.in > Division (Howrah) > Department(Medical) > Important Notices and also may be collected from office of CMS, Orthopaedic Hospital, Eastern Railway, Howrah on any working day.

The responses are to be submitted to the office of Chief Medical Superintendent, Orthopaedic Hospital, Eastern Railway, Howrah within one month from the date of publication of this Advertisement.

Chief Medical Supdt.
Eastern Railway/Howrah

ANNEXURE- IV

SPECIALITIES IDENTIFIED FOR TREATMENT

Critical Care Management
Orthopaedic Surgery
Cardiothoracic Surgery
Vascular surgery
Neurosurgery
Ophthalmology Surgery
Paediatric surgery
Uro-surgery
Hemodialysis
Kidney Transplantation

Gastroenterology and GI surgery

ENT surgery

Surgical or Medical (including Neonatal & Paediatric) emergencies

Cerebro Vascular Accident

Acute Myocardial Infarction and other Cardiological life saving emergencies

Gynaecology & Obstetric cases

Chronic Kidney Diseases

Burns injury

Oncology IPD cases, Oncology Radiotherapy & Chemotherapy

COVID cases or any other emergent case

OPD consultation & related investigation/s for RELHS beneficiaries aged 75 years & above Any other life saving cases and cases where emergency management is required

Emergency Treatment as per Annexure-1 of Board`s letter No. 2018/Trans Cell/Health/CGHS (e office No.3270783) dated 16.06.2021.

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

Ref: 2018/TransCell/Health/CGHS (e Office No.3270783) dated 16.06.2021

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 which are to be followed by empanelled hospitals under Unified MoU.

- 1. 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.
- 2. 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.
- 3. The valid UMID Card/CTSE Card issued to Railway Employees/Retired Railway Employees will be treated as identification as Railway Medical Beneficiary for treatment and these cards are accepted in the empanelled hospital under the jurisdiction/empanelment.
- 4. 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 up to 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.
- 5. 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.
- 6. 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.
- 7. 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.
- 8. 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.

- 9. 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.
- 10. Refusal to provide treatment to bonafide railway medical beneficiaries in emergency cases without valid ground would attract disqualification for continuation of empanelment also, the MoU will be updated including removal of ambiguities accordingly.
 - Vide Railway Board's letter No. 2023/H/28/1/RELHS/Empanelled (CGHS) dated 19.09.23 empanelled Hospital also to be followed:
- i) RELHS beneficiaries aged 75 years and above may be permitted to seek direct OPD Consultation from specialists of Private Hospitals empanelled by Railway, without referral from Railway Hospital, Health Unit under which beneficiary is registered (up to 31.10.2024 or extended by Railway Board if any).
- ii) If any CGHS listed investigation/procedures is advised and is required to be undertaken in emergency, no other authorization will be required, and the same may be undertaken from empanelled hospital at CGHS rates for that city/or as per MOU with Railways in cashless procedure. Bills along with copy of UMID card, copy of prescription /Reports and declaration form signed by the beneficiary and duly endorsed by the competent authority of the empanelled hospital will be sent to Railway under which the hospital is empanelled for payment.

TREATMENT IN EMERGENCY

- The following ailments may be treated as emergency which is illustrative only and not exhaustive, depending on the condition of the patient.
- Acute Coronary Syndromes (Coronary Artery Bye-pass Graft/percutaneous. Transluminal Coronary Angioplasty) including Myocardial Infarction. Unstable Angina, Ventricular Arrhythmias, paroxysmal Supra Ventricular Tachycardia, Cardiac Temponade, Acute Left Ventricular Failure/Severe Congestive Cardiac Failure. Accelerated Hypertension, Complete Heart Block and Stoke Adam attack, Acute Aortic Dissection.
- Acute Limb Ischemia, Rupture of Aneurysm, Medical and Surgical shock and peripheral circulatory failure.
- Cerebro-Vascular attack-Stokes, Sudden unconsciousness, Head injury, Respiratory failure, decompensated lung disease, Cerebro-Meningeal Infections, Convulsions, Acute Paralysis, Acute Visual loss.
- Acute Abdomen pain.
- Road Traffic Accidents/with injuries including fall.
- Severe Hemorrhage due to any cause.
- Acute poisoning.
- Acute Renal failure.
- Acute abdomen pain in female including acute Obstetrical and Gynaecological emergencies.
- Electric shock.
- Any other life threatening condition.

ANNEXURE-II

PRESCRIBED FORMAT, APPLICATION FOR

EXPRESSION OF INTEREST (EOI) FOR ENTERING INTO TIE UP WITH PRIVATE HOSPITAL FOR TEREATMENT OF MULTY SPECIALTY REFERRAL & EMERFENCY CASES AT APPROVED CGHS RATES FOR CASHLESS TREATMENT OF ALL RAILWAYBENEFICIARIES UNDER MEDICAL DEPARTMENT/HOWRAH DIVISION.

	Name of the Hospital:Locality/Village		
	Police Station:-		
		Telephone No:	
	Email id		
	Contact Details: Name of the Contact Persons		
		Email id	
	Does the Hospital have split location	on(s): (Yes) or (No)	
	If yes, address of the other location(s) and distance from main location:-		
2.		THE MOU FORMAT IN PRIVATE SECTOR/ GOVT.	
3.		ICES AT CGHS(NON-NABH/NABH) RATES AS PER	
4.		SERVICES TO THE RAILWAY BENEFICIARIES IN HED ANNEXURE)	
5.	NOT LISTED IN THE CGHS RATE,	GATIONS/TREATMENT MODALITIES, WHICH ARE OUR HOSPITAL WILL PROVIDE THE SERVICES ON DISCOUNT, LIST OF WHICH ARE ENCLOSED	
6.	WE ALSO AGREE TO PROVIDE SEI	RVICES ON BILL SYSTEM OF PAYMENT	

-:::: Page No.2 ::::-

7.	OUR HOSPITAL AGREE TO PROVIDE OPD CONSULTATION & RELETED INVESTIGATION FOR RELHS BENEFICIARIES AGED 75 YEARS & ABOVE AT CGHS RATES FOR CASHLESS TREATMENT.
	——————————————————————————————————————
8.	WE HEREBY ENCLOSE A LIST OF THE FACILAITIES, WHICH ARE AVAILABLE WITH OUR HOSPITAL AS PER ANNEXURE
9.	WE ENCLOSE THE IN HOUSE HUMAN RESOURCES/SPECIALISATIONS, WHICH ARE AVAILABLE WITH OUR HOSPITAL AS PER ANNEXURE THE INFRASTRUCTURAL FACILITIES OF OUR HOSPITAL IS ALSO ENCLOSED AS PER ANNEXURE
10	OUR HOSPITAL HAS BEEN RECOGNISED FOR TREATMENT OF THE FOLLOWING GOVT. ORGANISATION/SEMI-GOVT. ORGANISATION/PRIVATE ORGANISATION AS PER ANNEXURE
13	I.WE HOPE OUR ORGANISATION WILL BE CONSIDERED FOR TIE-UP WITH ORTHOPAEDIC HOSPITAL/HOWRAH FOR PROVIDING SERVICES TO THE RAILWAY BENEFICIARIES.
(A	Il documents are to be signed and stamped by the Authorized signatory on all pages.)
	SIGNATURE
	AUTHORIZED SIGNATORY
(NAM	Е)
ADDF	RESS
DIION	NE NUMBER
	L-ID
ואואוהו	SEAL/STAMP

TERMS & CONDITIONS

1. DEFINITIONS & INTERPRETATIONS

- 1.1 The following terms and expressions shall have the following meanings for purposes of this tie-up.
- 1.1. 1. "Agreement" shall mean the Agreement and all Schedules, supplements, appendices, appendages and modifications thereof made in accordance with the terms of this agreement.
- 1.1.2. Benefit" shall mean the extent or degree of service the beneficiaries are entitled to receive as per the rules on the subject.
- 1.1.3 "Railway Medical Card/UMID Card" shall mean the RMA/UMID Card issued by the Railway Authorities.
- 1.1.4 "RMA/UMID Card Holder" shall mean a person having a RMA/UMID Card issued by the Railway Authorities.
- 1.1.5 "Railway Beneficiary" shall mean a person who is eligible for coverage of Medical Services provided by Railways.
- 1.1.6 "Coverage" means the types of persons to be eligible as the beneficiaries of the Railway Health Services, subject to the terms, conditions and limitations.
- 1.1.7 "Emergency" shall mean any condition or symptom resulting from any cause, arising suddenly and if not treated
 - at the early convenience, be detrimental to the health of the patient or will jeopardize the life of the patient.
- 1.1.8 "Empanelment" shall mean the hospitals, authorized by the Railway for treatment purposes for particular period.
- 1.1.9 "Hospital" shall mean the tie up private hospital performing under the Agreement providing medical treatment and the health care of Railway Beneficiaries.
- 1.1.10 "De-recognition of Hospital" shall mean debarring the hospital on account of adopting unethical practices or fraudulent means in providing medical treatment to or not following the good industry practices of the health care for the Railway Beneficiaries after following certain procedure of inquiry.
- 1.1.11 "Party" shall mean either the Railway or the Hospital and "Parties" shall mean both the Railway and the Hospital.
- 1.1.12 'CGHS Package Rate" shall mean all inclusive including lump sum cost of inpatient treatment Day care/diagnostic procedure for which a Railway Beneficiary has been permitted by the competent authority or for treatment under emergency from the time of admission to the time of discharge including (but not limited to) i) Registration charges. (ii) Admission charges (iii) Accommodation charges including patients' diet. (iv) Operation charges (v) Injection charges (vi) Dressing charges (vii) Doctor/Consultant Visit charges (Viii) ICU/ICCU charges, (ix) Monitoring charges. (x) Transfusion charges and Blood processing charges (xi) Pre Anaesthetic check up and Anaesthesia charges. (xii) Operation theatre charges, (xiii) Procedural charges/ Surgeons Fees, xiv) Cost of surgical disposables and all sundries used during Hospitalization. (xv) Cost of Medicines and consumables (xvi) Related routine and essential investigations (xvii) Physiotherapy charges etc. (xviii) Nursing care charges etc. Package rates also include two post operative consultations.
- 1.1.13 Cost Of implants/stents/grants are reimbursable in addition to Package Rates as per CGHS ceiling rates or as per actual, whichever is lower.
- 1.1.14. During in-patient treatment of the Railway beneficiary, hospital will not ask the beneficiary or his/herattendant to purchase separately the medicines/sundries/equipment or accessories from outside and will provide the treatment within the package rate, fixed by the CGHS which includes the cost of all the items. However, the following items are not admissible for reimbursement/ payment by Railway.
 - · Toiletries.
 - Sanitary napkins.
 - Talcum powder
 - Mouth fresheners
 - Diet charges for patient attendant/s.
 - Telephone bills/Dietary/Nutritional/supplments.
 - Any other item as decided by Railway.

- 1.1.15 In cases of conservative treatment/ where there is no CGHS package rate, calculation admissible amount would be done item wise as per CGHS KOLKATA 2014 rate or as per hospital rates, whichever is less and if no CGHS Rate then Hospital rates (with discount as fixed).
- 1.1.16 Package rates envisage up to a maximum duration of indoor treatment as follows:-
 - Up to 12 days for Specialized (Super Specialities) treatment
 - Up to 07 days for other Major Surgeries.
 - Up to 03 days for Laparoscopic surgeries/ Elective Angioplasty/ Normal Delivery.
 - 01 day for day care/Minor (OPD) surgeries.

However, if the beneficiary has to stay in the hospital for his/her recovery for period more than the period covered in package rates, in exceptional cases supported by relevant medical records and certified as such by hospital, the additional bill amount may be allowed to the hospital, which shall be limited to accommodation charges as per entitlement, investigations charges at approved rates, doctors visit charges (not more than 02 visits per day per visit by specialists/consultants) and cost of medicines for additional stay.

- 1.1.17 No additional charges on account of extended period of stay shall be allowed if that extension is due to infection on the consequences of surgical procedure / faulty investigation procedures etc.
- 1.1.18 The empanelled hospital cannot charge more than CGHS approved rates when a patient is admitted with valid Railway Medical Card with prior permission or under emergency. In case of any instance of overcharging the overcharged amount over and above CGHS rate (except inadmissible items and difference paid due to implant/stent of a specific brand chosen by the Railway beneficiary) shall be considered unethical practice by the hospital and may lead to cancellation of contract. The applicable KOLKATA city-specific CGHS rates are available in the website of CGHS. The entire current rate schedule should be deemed to be an integral part of this contract and will be attached as Annexure with the formal Agreement.

2. DURATION OF CONTRACT:

The contract shall remain in force for a period of 02 years or till it is modified or revoked, whichever is earlier.

The contract may be extended for another year subject to fulfillment of all the terms and conditions of this contract and with mutual consent of both parties.

3. CONDITION FOR PROVIDING TREATMENT OF SERVICES

A. GENERAL CONDITIONS:-

The hospitals shall be empanelled for identified specialties which are not available or not possible to be dealt in Railway Hospitals. The different conditions for which cases will be referred are provided in Annexure A.

The hospitals shall investigate/treat the Railway beneficiaries only for the condition for which the patient has been referred to them. No undue/unnecessary investigation shall be done by the Hospital.

It is agreed that Railway beneficiaries shall be attended to on priority.

Railway has the right to monitor the treatment provided in the empanelled hospitals.

B. AUTHORIZATION LETTER FOR TREATMENT:-

The treatment/procedure shall be performed on the basis of the authorization letter issued by the CMS or authorized representative.

C. INVESTIGATION PRIOR TO ADMISSION:-

All investigations regarding fitness for the surgery will be done prior to the admission for any elective procedure and are part of the package.

D. ADDITIONAL PROCEDURE/INVESTIGATIONS:-

The hospital has been empanelled for treatment of the Railway beneficiaries. For any material/additional procedure/investigation other than the condition for which the authorization was initially given, would require the permission of the competent authority except under emergency.

E. PROCEDURE WHERE REFERRED CASE NEEDS TREATMENT IN A SPECIALTY(S) WHICH ARE NOT AVAILABLE IN THE HOSPITAL:-

The empanelled hospital shall not undertake treatment of referred cases in specialilies which are not available in the hospital. But it will provide necessary treatment to stabilize the patient and transport the patient and transport the patient and transport the patient safely to the nearest Railway/Government/Empanelled Hospital under intimation to Railway Authorities. However, in such cases, the empanelled hospital will charge as per the CGHS rates only for the treatment provided.

F. CHANGES IN INFRASTRUCTURE/STAFF TO BE NOTIFIED TO RAILWAY:-

The Hospital shall immediately communicate to Railway Authorities about any change in the infrastructure / Shifting of premises. The empanelment will be temporarily withheld in case of shifting of the facility to any Other location without prior permission of Railway. The new establishment of the same Hospital shall attract a fresh inspection, at the prescribed fee, for consideration of continuation of empanelment.

G. ANNUAL REPORT:-

The Hospital will submit an annual report regarding number of admitted Railway beneficiaries, bill submitted to the Railway and payment received. Annual audit report of the hospitals will also be submitted along with the statement. The Hospital shall submit all the medical records in digital format.

H. MEETINGS

Authorized signatory/representative of the empanelled health care organizations shall attend the periodic meetings held by Railway required in connection with improvement of working conditions and for redressal of grievances.

1. INSPECTIONS

During the visit by Railway officials, the empanelled health care organization's authorities will cooperate in carrying out the inspection.

J. PUBLICITY:-

The Hospital will not make any commercial publicity projecting the name of Railway or Government of India. However, the fact of empanelment by the specific Railway Division/Zone shall be displayed at the premises of the empanelled health care Organization indicating that the charges will be as per CGHS approved rates.

4. TREATMENT IN EMERGENCY:

The following ailments may be treated as emergency which is illustrative only and not exhaustive, depending on the condition of patient and if any changes done by CGHS will apply for Railway too.

- Acute of Coronary Syndromes (Coronary Artery B ye-pass Graft/ Percutaneous, Transluminal Coronary Angioplasty) including Myocardial Infarction, Unstable Angina, Ventricular Arrhythmias, Paroxysmal supra- Ventricular Tachycardia, Cardiac Temponade, Acute Left Ventricular Failure/Severe Congestive Cardiac Failure, Accelerated Hypertension, Complete Heart Block and Stroke Adam attack, Acute Aortic Dissection.
- Acute Limb Ischemia, Rupture of Aneurysm, Medical and Surgical shock and peripheral circulatory failure.
- Cerebro-vascular Accidents (Strokes), sudden unconsciousness, Head injury, Respiratory failure, decompensated lung disease, Cerebro-Meningeal Infections, Convulsions, Acute Paralysis, Acute Visual loss.
- · Acute abdomen pain.
- Road Traffic Accidents/with injuries including fall.
- Severe Hemorrhage due to any cause.
- Acute poisoning.
- Acute Renal Failure.
 - Acute abdomen pain in female including acute Obstetrical and Gynaecological emergencies.
 - Electric shock.
 - Any other life threatening condition.

In emergency the empanelled hospital will not refuse admission or demand an advance payment from the Railway beneficiary of his family member(s) and will provide credit facilities to the patient whether the patient is a serving employee of Railway or a pensioner availing facilities, on production of a valid Railway Medical Card (UMID Card etc.) and the hospital shall submit the bill for reimbursement to the concerned Railway Authorities. The refusal to provide the treatment to bonafide Railway beneficiaries in emergency cases on credit basis, without valid ground, would disqualification for continuation of empanelment.

The hospital will intimate all instances of Railway Beneficiaries admitted as emergencies without prior permission to Railway authorities through mutually accepted means to Railway authorities at the earliest and within 24 hours and Railway will revert within next 24 hours, otherwise it will be treated as deemed approved. The empanelled hospital will clearly mention/certify the emergency condition as per MOU.

If Railway finds that patient is not suffering from emergency, in such case the hospital bill up to the stage of such determination will be paid by Railway directly to the hospital. However, the patient can continue to avail treatment at the empanelment hospital, if so desired by paying CGHS Rates or hospital rates whichever is less on the patients cost thereafter.

A Valid Medical Card will include UMID (Unique Medical Identity) Card where the beneficiary has opted to register with a Railway Medical Unit under Howrah Division, Eastern Railway and also valid CTSE (Cashless Treatment Scheme in Emergency) Card. The card will be treated as identification as Railway medical beneficiary.

5. ENTITLEMENTS FOR VARIOUS TWES OF WARDS:-

The entitlements for various types of wards to the Railway beneficiaries shall be the same as in the case of CGHS beneficiaries. Accordingly, Railway beneficiaries are entitled to facilities of private, semi-private or general wards depending on their pay drawn in pay band/pension. These entitlements are amended from time to time and the latest order in this regards needs to be followed. The entitlement is as follows;-

No.	Corresponding basic pay drawn by the officer in 7 th CPC per month	Entitlement
1	Up to Rs. 47,600/-	General Ward
2	Rs. 47,601/- to Rs.63,100/-	Semi Private Ward
3	Rs.63,101/- and above	Private Ward

- **a**. Private ward is defined as a hospital room where single patient is accommodated and which has an attached toilet (lavatory and bath). The room should have furnishings like wardrobe, dressing table, bed-side table, sofa set, carpet etc. as well as a bed for attendant. The room has to be air-conditioned.
- **b.** Semi-Private Ward is defined as a hospital room where two to three patients are accommodated and which has attached toilet facilities and necessary furnishings.
 - General Ward is defined as a hall that accommodation four to ten patients.
 Treatment in higher category of accommodation than the entitled category is not permissible.

6. APPROVED RATES TO BE CHARGED:-

- 6.1 The empanelled hospital shall charge from the Railway beneficiary as per the rates for a particular procedure/package deal as prescribed by the CGHS and which shall be attached as Annexure (rate list) to the contract agreement as an integral part of the contract. The rates notified by CGHS shall also be available on web site of Ministry of Health & Family Welfare or from the link http://cghskolkata.nic.in
 The rates accepted will be either the CGHS prescribed rates or as per agreed rates with Railways, whichever is lower.
- 6.2 The package rate will be calculated as specified above (1.1.12 to 1.1.18). No additional charge on account of extended period of stay shall be allowed if, that extension is due to infection as a consequence of surgical procedure or due to any improper procedure and is not justified.
- 6.3 The procedure and package rates or any diagnostic investigation, surgical procedure and other medical treatment for Railway beneficiary under this Agreement shall be as per the latest CGHS rate of KOLKATA list during the validity period of this Agreement. The empanelled health care organization agrees that during the in-patient treatment of the Railway beneficiary, the Hospital will not ask the beneficiary or his attendant to purchase separately the medicines/sundries/ equipment or accessories from outside and will provide the treatment within the package deal rate, fixed by the CGHS which includes the cost of all the items. Appropriate action, including removal from Railway empanelment and/or termination of this Agreement, may be initiated on the basis of a complaint, medical audit or inspections carried out by Railway team. The hospital shall agree to charge CGHS rates to Railway beneficiaries on production of valid I-Card Documentary proof, even though treatment is not sought as referred Railway beneficiary but they are attending in emergency.

7. MODE OF PAYMENT FOR TREATMENT OF BENEFICIARIES:-

Payment will be made through bill/bills and it should be submitted to office of CMS/Howrah, Eastern Railway in duplicate along with photocopy of Medical Card, Railway referral letter or consent of authorized Medical Officer for emergency treatment, all vouchers for treatment and investigations in favour of the Railway beneficiary within 6 (six) months from date of discharge of the patient.

8. MEDICAL AUDIT OF BILIS:-

There shall be a continuous Medical Audit of the services provided by the empanelled Private Hospital.

9. DUTIES AND RESPONSIBILITIES OF EMPANELLED HEALTH CARE ORGANIZATIONS:-

It shall be the duty and responsibility of the empanelled Hospital at all times to obtain, maintain and sustain the valid registration, recognition and high quality and standard of its services and healthcare and to have all Statutory/mandatory licenses, permits or approvals of the concerned authorities under or as per the existing laws.

10. NON-ASSIGNMENT

The Empanelled Hospital shall not assign, in whole or in part, its obligations to perform under the agreement, except with the Railway's prior written consent at its sole directions and on such terms and conditions as deemed fit by the Railway. Any such assignment shall not relieve the Hospital from any liability or obligation under this contract.

11. EMPANELLED HEALTH CARE ORGANIZATION'S INTEGRITY AND OBLIGATIONS DURING AGREEMENT PERIOD:-

- 11.1 The empanelled Hospital is responsible for and obliged to conduct all contracted activities in accordance with the Agreement using state-of-the art methods and economic principles and exercising all means available to achieve the performance specified in the agreement. The hospital is obliged to act within its own authority and abide by the directives issued by the Railway. The Hospital is responsible for managing the activities of its personnel and will hold itself responsible for their misdemeanors, negligence, misconduct or deficiency in services, if any.
- 11.2 For over-billing and unnecessary procedures, the extra amount so charged will be deducted from the pending future bills of the empanelled Hospital and the Railway shall have the right to issue a written Warning to the Health Care Organization not to do so in future. The Recurrence, if any, will lead to the stoppage of referred to that particular Health Care Organization of De-recognition from Railways.

12 PERFORMANCE BANK GUARANTEE (PBG):-

Health Care Organization that are recommended for empanelment after the initial assessment shall also have to furnish a performance bank guarantee (Hospitals/Cancer Unit 10,00,000/-, Single Specialty Hospital 2,00,000/-, Eye Centre 2,00,000/-, Dental Clinic 2,00,000/-, Diagnostic Centre 2,00,000/-) only valid for a period of 30 (thirty) months i.e. to say 6 (six) months beyond empanelment period to ensure efficient service and to safeguard against any default. (PBG for charitable organization will be 50% of above amount).

If they have given the same to one Railway then they not need to give to other Railway since if one hospital is empanelled with a particular Railway then it is deemed empanelled by other Railway too and other Railways can simply sign the MOU with them in same term and conditions for beneficiaries from their Railways.

13. **TERMINATION FOR DEFAULT:-**

- The Railway may, without prejudice to any other remedy for breach of Agreement by written notice of 13.1 default sent to the Hospital terminating the Agreement in whole or part –
- 13.1.1 If empanelled Hospital fails to provide any or all of the services for which it has been empanelled within the period(s) specific in the Agreement or within any extension thereof, if granted by the Railway, pursuant to Condition of Agreement, or if the Health Care Organization fails to perform any other obligation(s) under the Agreement.
- 13.1.2 If the hospital in the judgment of the Railway has engaged in corrupt or fraudulent practices in competing for or in executing the Agreement.
- 13.1.3 In case of any wrong doings as specified in Memorandum of Agreement by one its hospital Railway reserves the right to remove all empanelled hospitals of that particular group from its empanelled list of hospitals.

14. INDEMINITY:-

- 14.1 The empanelled Hospital shall at all times, indemnify and keep indemnified Railway/the Government against all actions, suits, claims and demands brought or made against it in respect of anything done or purported to be done by the Health Care Organization in execution of or in connection with the services under this Agreement and against any loss or damage to Railway/the Government in consequence to any action or suit being brought against the Railway/the Government, along with (or otherwise), Health Care Organization as a party for anything done or purported to be done in the course of the execution of this Agreement. The Health Care Organization will at all times abide by the job safety measures and other statutory requirements prevalent in India and will keep free and indemnify the Railway from all demands or responsibilities arising from accidents or loss of life, the cause or result of which is the Hospital's negligence or this conduct.
- The Health Care Organization will pay all indemnities arising from such incidents without any extra cost 14.2 to Railway and will not hold the Railway responsible or obliged. Railway/the Government may at its discretion, and shall always be entirely at the cost of the Health Care Organization, defend such unit, either jointly with the Health Care Organization entire or singly in case the latter chooses not to defend the case.

15. ARBITRATION:

If any dispute or difference of any kind whatsoever (the decision whereof is not herein otherwise provided for) shall arise between the Railway and the Hospital, upon or in relation to or in connection with or arising out of the Agreement, shall be referred to for arbitration by the PCMD of the Zone (In case of PU, neighboring zone) who will give written award of his decision to the parties. The decision of the PCMD will be final and binding. The provisions of the Arbitration and Conciliation Act, 1996 shall apply to the arbitration proceedings. The venue of the arbitration proceedings shall be at the city of PCMD office.

16. MISCELLANEOUS:-

- Nothing under this Agreement shall be construed as establishing or creating between the parties any relationship of Master and Servant or Principal and Agent between Railway and the Health Care Organization. The Health Care Organization shall work for perform their duties under this Agreement or otherwise.
 - 16.2 The Health Care Organization agrees that any liability arising due to any default or negligence in not represent or hold itself out as agent of the Railway.
 - 16.3 The Railway will not be responsible in any way for any negligence or misconduct of the Health Care Organization and its employees for any accident, injury or damage sustained or suffered by any Railway beneficiary or any third party resulting from or by any operation conducted by and on behalf of the Hospital or in the course of doing its performance of the medical services shall be borne exclusively by the Hospital who shall alone be responsible for the defect and /or deficiencies in rendering such services.
 - 16.4 The Hospital shall notify the Government (Railway Hospital) of any material change in their status and their shareholdings or that of any Guarantor of the in particular where such change would have an impact on the performance of obligation under this Agreement.
 - 16.5 This Agreement can be modified or altered only on written agreement signed by both the parties.
 - 16.6 Should the Hospital Health Care Organization get wound up or partnership is dissolved, the Railway shall have the right to terminate the Agreement. The termination of Agreement shall not relieve the hospital or their heirs and legal representatives from the liability in respect of the services provided by the Health Care Organization during the period when the Agreement was in-force.
 - 16.7 The Health Care Organization shall bear all expenses incidental to the preparation and stamping of this agreement.

17. OTHER SERVICES TO BE PROVIDED:-

The empanelled Private Health Care Organization will, on the request of RAILWAY, agree to provide training to RAILWAY medical, Para-medical and Nursing Staff.

18. EXIT FROM THE PANEL

The Rates fixed by the CGHS for the city of KOLKATA shall continue to hold good unless revised by CGHS. In case the notified rates are not acceptable to the empanelled Health Care Organizations, or for any other reason, the Health Care Organization no longer wishes to continue on the list under Railway, it can apply for exclusion from the panel by giving one month notice. Patients already admitted shall continue to be treated as per agreed rates between the two parties.

19. NOTICES

Any notice given by one party to the other pursuant to this Agreement shall be sent to other party in writing be registered post or by facsimile and confirmed by original copy by post to the other Party's address as given in the formal Agreement.

NOTE:- An agreement/unified MoU will be made after completion of all processing as directed by Railway Board.