1. Reference this HQ following Letter Nos :-
   (a) B/49762/AG/ECHS dated 04 Aug 2006.
   (b) B/49770-P/AG/ECHS/Referral dt 05 Apr 2007.

2. ECHS Smart card has Pan-Inida validity. Procedure of ‘Temporary Attachment Certificate’ (TAC) was initiated to facilitate provisioning and issue of drugs/medicines and consumables by a Polyclinic to outstation ECHS beneficiaries. Patients temporarily relocating to a new station are given TAC for facilitating issue of medicines for the required and prescribed duration. The purpose of TAC therefore is to assist polyclinics in management of demand and supply of drug/medicines.

3. However, feedback regarding utility of TAC, received from the government shows that ECHS members temporarily relocating to new stations are not getting authorized ECHS services, due to wrong perception/interpretation by OsIC Polyclinics.

4. It is once again reiterated that ECHS patients will be provided treatment for all known diseases, including referral to empanelled hospital, at any Polyclinic he reports. The purpose of TAC is to enable issue of drugs for longer duration to chronic patients. However this debar a patient from availing of requisite treatment without a TAC, including referrals to service/empanelled facility.

5. Non-expendables medicals stores can only be issued by the Parent Polyclinics

6. TAC procedure to move between Polyclinics of NCR is not permitted (To avoid medicine issue and overcrowding)

Sd/-xxxxxxxxxx
(D Mahapatra)
Col
Dir (Med)
For MD ECHS
1. ECHS Members/Dependents suffering from chronic diseases requiring long term and continuous treatment need to visit their Parent Polyclinic at least once a month for review of medical condition/collection of medicines. However, when they visit any outstation location, they are issued medicines from the nearest Polyclinic for only 07 (seven) days at a time, as per present policy. This has caused considerable dissatisfaction amongst the ECHS members. The policy has now been reviewed and a revised procedure evolved as laid down in the succeeding paragraphs.

2. **Acute/Fresh Illness.** There is no change in procedure in case of occurrence of an acute or fresh illness. ECHS beneficiaries can report to any/nearest Polyclinic for immediate medical requirement. Medicines will be issued for duration as prescribed to treat the illness.

3. **Chronic Illness/Long Term Treatment Cases.** There are certain chronic cases where lifelong treatment is necessary and medicines for the same are issued by the Parent Polyclinic, after monthly review for 30 days at a time. Such patients, when visiting some other station, can now be issued medicines from any specified ‘Outstation Polyclinic’ of choice (other than their Parent Polyclinic) for 30 days at a time. The procedure to be followed will be as under:–

   (a) A ‘Temporary Attachment Certificate’ is to be obtained from the Parent Polyclinic before the patient moves to a new location temporarily. Performa for the same is attachment as per appendix ‘A’ to this letter.

   (b) Part –A of Temporary Attachment Certificate (TAC) in original is to be deposited with Oi/c of Outstation polyclinic from where subsequent issue of medicines is desired.

   (c) Part-B of TAC is to be retained by the Patient and endorsement is obtained on it during each time the medicines are issued to him by the Outstaion Polyclinic.

   (d) Part-B of TAC is to be deposited back with the Parent Polyclinic once the patient returns back to the place os his permanent residence for continuation of ongoing treatment.

   (f) TAC can not be issued for more than one polyclinic for the same duration. Deposition of Part-B of one TAC is a mandatory pre-requisite for recommencement of issue of medicines from Parent Polyclinic and for eligibility of issue of another TAC at a letter, if required.

   (g) Once issued , a TAC will be valid for a maximum period of 06 (six) month only.

4. **Action at Parent Polyclinic.** Parent Polyclinic issuing the TAC has to ensure the following :-

   (a) A ‘TAC issued Register’ is to be maintained as per format attachment at appendix ‘B; to this letter.

   (b) Entries are to be made in this Register, both at the time of issue of the certificate and receipt/submission of Part-B of TAC.

   (c) Part-B of TAC is to be kept in file for record and audit.
(d) If Part-B of a particular TAC is not received within the stipulated validity period of 06 (six) months, the Oi/c polyclinic is required to confirm from the concerned outstation Polyclinic about the welfare/status of the patient and amend his records if required, with necessary authentication.

(e) The phrase ‘TAC issued’ will be entered in MIS against the patient’s/ESM’s name while updating OPD records.

(f) Further continuation of issue of medicines to a patient who has been issued with TAC will only commence after its Part-B has been duly submitted back in the Polyclinic.

5. **Action at ‘outstation Polyclinic’**.

   ‘Outstation Polyclinic’ receiving the TAC has to ensure the following:

   (a) A ‘TAC’ receipt Register is to be maintained as per format attached Appendix at ‘B’ to this letter.

   (b) Entries in this Register are to be made both at the time of receipt of TAC and after each issue of medicines to the Patient.

   (c) The phrase ‘Medicines issued on TAC’ will be entered in MIS against the patient’s/ESM’s name while updating OPD records.

   (d) Part-A of the TAC is to be kept in file for records and audit.

   (e) Photocopy-Duplicate/ any copy other than the original ink signed copy of a TAC is not to be entertained for issue of medicines.

   (f) Medicines are not to be issued on TAC’s which have outlived their validity period.

   (g) Any clarification required for issue of medicines to a TAC holder is to be sought from the Oi/c of respective Parent Polyclinic.

6. TACs will be utilized only for issue of drugs and consumables. They will under no circumstances be utilized for issue of non-expendable items.

7. You are requested to disseminate the policy to all concerned please.

   Sd/-xxxxxxxxx
   (G Ghose)
   Col
   Director (Medical)
   For Managing Director
1. Ref this HQ:

(a) Letter No B/49774/AG/ECHS/Referral dt 01 Sep 04.

(b) Letter No B/49762/AG/ECHS dt 04 Aug 06.

2. Several instances have come to notice where certain Polyclinic have either denied or are reluctant to provide treatment to outstation ECHS members. Some Polyclinics have even demanded Temporary Attachment Certificate (TAC) prior to entertaining any outstation Patient. Some other Polyclinic have refused treatment in spite of TAC on the ground that TACs are meant only for issue of medicines.

3. It is once again reiterated that ECHS patients will be provided treatment for all known diseases, including referral to empanelled hospitals, at any polyclinic he reports. The purpose of TAC is to enable issue of drugs for longer duration to chronic patients. However, this does NOT debar a patient from availing of requisite treatment without a TAC.

4. You are requested to issued necessary instruction to all concerned, so that all patients are provided treatment while on visits to any station in the country through the nearest ECHS Polyclinic.

Sd/-xxxxxxxxxxx
(G Ghose)
Col
Dir (Med)
For MD