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**Employees' State Insurance Corporation**  
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**PRESS RELEASE**

**ESI Scheme extends its coverage in all the Districts of the Country where the Scheme has not been implemented so far – says Sh. Bandaru Dattatreya, Hon'ble Minister of State for Labour & Employment (Independent Charge), Govt. of India**

**ESIC approves its Annual Report and Annual Accounts for the year 2014-15**

The ESI Corporation has taken some very important decisions towards extending the social security cover of ESI Scheme to whole of India and for creating medical infrastructure for serving the workers. It is likely that the number of Insured Persons will increase substantially.

Shri Bandaru Dattatreya, Hon'ble Minister of State for Labour & Employment (Independent Charge), Govt. of India chaired the 167<sup>th</sup> Meeting. The Employees' State Insurance Corporation today approved its Annual Report and Annual Accounts for the year 2014-15 for submitting to the Central Government and laying on the table of both Houses of the Parliament. The Hon'ble Minister announced that the ESI Scheme is on the path of sustained growth. **It is now catering to social security needs of more than 2.03 crores insured persons which is like to increase to 8 crores in next two-three years. The number of beneficiaries covered under the Scheme is now 7.89 crores, which is likely to go beyond 30 crores in next 2-3 years.**

Shri Shankar Aggarwal, IAS, Secretary, Labour & Employment, Govt. of India was also present in the meeting. **Sh. Deepak Kumar, Director General, ESIC** briefed the tripartite body i.e. the Corporation about the recent initiatives/developments/achievements of ESIC.

**The ESI Corporation in its 167<sup>th</sup> Meeting deliberated and decided the following important new initiatives:-**

• **Extension of ESI Scheme in all the District of the Country:**

At present, ESI Scheme is being implemented in industrial/commercial clusters. ESIC has decided to extend the coverage of ESI Scheme in whole of the area of 393 districts where it is extended in main industrial/commercial pockets only by 31.12.2016.

Presently, the ESIC coverage is limited to metropolitan/urban pockets/industrial clusters (revenue village wise) being notified and implemented in a phased manner. Over the years, coverage has not increased substantially. These metropolitan/urban pockets/industrial clusters (of revenue villages) are located sparsely in 393 districts in the country. Surveys of all the remaining 271

districts will be done, where ESI Scheme has not been implemented so far and the whole of the area of 393 districts will be covered under ESI Scheme.

Initially, ESIC will provide primary care to Insurance Medical Practitioners and secondary and tertiary care through the facilities already located with respect to the earlier notified pockets of revenue villages in respective district. Gradually, new dispensaries/hospitals will be developed based on the geographical requirements.

- **Sub-Committee of ESIC for working out the modalities for setting up of a new structure in the form of subsidiary Corporation at the State level**

ESIC to directly run the Health Services in all the States and states should not be asked to bear the cost of medical expenses. For this, ESIC has set up Sub-Committee of ESIC for working out the modalities for setting up of a new structure at the State level in the form of a subsidiary Corporation in which State Govt. and Central Govt. as well as Employees' and Employers' Organizations would be duly represented. Two meetings of the Sub-Committee were held and the following recommendation/decisions have been accepted/approved by ESIC.

1. The State Government should be advised to notify such organisation before 31<sup>st</sup> March, 2016 and in the first phase, such organisation, will cater to ESIS medical facilities.
  2. ESIC will bear full expenditure of establishing and running ESIS facilities, upto the ceiling for three years starting from 1<sup>st</sup> April, 2016. For those State Govts. which form such organization after 1<sup>st</sup> April, 2016 the ESIC shall bear the total expenditure for 3 years from the following financial year. For the rest of the States who do not adopt this system, the present system of sharing 7/8<sup>th</sup> & 1/8<sup>th</sup> would continue.
  3. ESIC should make effort to provide uniform medical facilities across all the States, formulate and adopt fresh financial norms.
  4. The Regional Board of ESIC will continue to function as before with slight modification in its role regarding medical benefit in view of this new organisation.
- **Sub-Committee of ESIC for establishing ESI Hospitals and Dispensaries based on geographical necessity while opening new Health facilities**

On the recommendation of the 46th Indian Labour Conference on Social Security concerning ESIC, a Sub-Committee was constituted to give recommendations for Establishing ESI Hospitals and Dispensaries based on Geographical necessity while opening New Health facilities. The following recommendations of the Sub-Committee has been approved and will be implemented as per requirement in a phased manner :-

1. The health facility should be created not based on the present Insured Persons population but on the basis of projected population of the Insured Persons after a period of 3 years for dispensaries and five years for hospitals and also the geographical necessity.
2. ESIC should directly run at least two hospitals and one super specialty hospital in every state. These numbers may be more considering the futuristic Insured Persons population and geographical necessity.

3. ESIC will establish proportionate number of dispensaries and at least one doctor dispensaries in newly implemented areas. For one doctor dispensary the futuristic norms Insured Persons should be 2000.
4. The doctors working in difficult areas/State will be given additional incentive as is being given in many of the States under the National Health Mission.
5. ESIC will take over some ESIS dispensaries in each State to be developed as Model Dispensary-cum-Diagnostic Centre giving priority to underserved States.

- **Increasing Bed strength of ESI Hospitals by 50% :**

Under the Health Reforms Agenda of ESIC 2.0, various initiatives/decisions like expansion of ESI coverage, improvement in health services have been taken by ESIC. Besides setting up of new infrastructure for providing health services, bed strength of ESIC Hospitals may be increased by 50% if the Bed occupancy of the concerned ESI Hospital has been consistently more than 70% in last 3 financial years.

- **Upgradation of Dispensaries (and Norms and Standards for) to 6 and 30 Bedded Hospitals**

As per the recommendation of 46th Indian Labour Conference, ESIC to expand to cover all states/UT, all districts where ESI Scheme is running at present should be covered fully, Medical facilities should be expanded. The Corporation approved Norms and Standards for upgradation of dispensaries to 6 bedded and 30 bedded.

- **Provision of Medical Care Services in newly implemented areas:**

Under ESIC – 2.0 launched by Hon'ble Prime Minister of India on 20th July, 2015, ESI Scheme has to expand its coverage at a very fast pace in a time bound manner. This will entail accelerated expansion of medical services also. Primary medical care facilities in these newly implemented areas will be provided to the Insured Persons and their family members within one month, using one or more the following options :-

- i. Setting up of an ESIC One doctor dispensary
- ii. Tie-up with the existing Govt. facilities
- iii. Mobile Medical Van
- iv. Through Insured Medical Practitioner (IMPs)
- v. Through private Nursing Homes
- vi. Through use of Technology (like tele-medicine)

The total cost of the above mentioned medical services will be directly borne by ESI Corporation for first three years or through the subsidiary Corporation in the State being proposed to be set up, whichever is earlier.

- As per the recommendations of the Sub-Committee for establishments of Hospitals and Dispensaries based geographical necessity, it has been decided that **ESIS Hospital, Pandu Nagar, Kanpur (U.P.)** may be upgraded and taken over for directly run by ESIC.

The Dental College building/Para-Medical College building will be converted **into Super Specialty** Hospital at Pandu Nagar, Kanpur.

- It has also been decided to **upgrade ESI Dispensary, Digha, Patna (Bihar) into 100 bedded ESIC Hospital and shift the ESIC Model Hospital, Phulwari Sharif at same hospital building**, subject to fulfilling the criteria of land and other requirement etc.

The Hon'ble Minister as well as the Members of the Corporation reiterated their commitment for protecting the interests of the working class and the beneficiaries of the ESI Scheme. ESIC is committed for bringing improvement towards delivery of quality services.

**(R.K. Gautam)**  
**Jt. Director (Public Relations)**