



कर्मचारी राज्य बीमा निगम
Employees' State Insurance Corporation

STANDARD NOTE

ON

EMPLOYEES' STATE INSURANCE SCHEME

AS ON 01.01.2024

कर्मचारी राज्य बीमा निगम
(श्रम एवं रोजगार मंत्रालय, भारत सरकार)
Employees' State Insurance Corporation
(Ministry of Labour & Employment, Govt. of India)
www.esic.gov.in

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**STANDARD NOTE ON
EMPLOYEES' STATE INSURANCE SCHEME
(As on 01.01.2024)**



The Employees' State Insurance Act, 1948 is a social security legislation that provides for medical care and cash benefit in the contingencies of sickness, maternity, disablement and death due to employment injury to workers.

1) General aspect of ESI Scheme

(i) Coverage under ESI Act, 1948:

The ESI Act, 1948 applies to factories employing 10 or more persons. The provisions of the Act are being brought into force in district area-wise in stages. The Act contains an enabling provision under which the "Appropriate

Government" is empowered to extend the provisions of the Act to class of establishments, industrial, commercial, agricultural or otherwise. Under these provisions, the State Governments have extended the provisions of the Act to Shops, Hotels, Restaurants, Cinemas including preview theatres, Road Motor Transport Undertakings, Newspaper establishments, Educational, Medical institutions employing 10 or more employees. The Central Govt. has extended the coverage under Section 1(5) to Shops, Hotels, Restaurants, Road Motor Transport establishments, Cinema including preview theatres, Newspaper establishments, establishment engaged in Insurance Business, Non-Banking Financial Companies, Port Trust, Airport Authorities, Warehousing establishments employing 20 or more Persons. Thirty-three State Governments/Union Territories have reduced the threshold for coverage of shops and establishments to 10 or more persons. The employees of registered factories and establishments drawing wages up to Rs. 21000/- per month (Rs.25,000/- for Persons with Disability) are covered under the Act. The status of coverage under ESI Act, 1948 as on 01.01.2024 is as under:

SI No	Particulars	Details
1.	No. of Districts in which ESI Scheme has been notified.	661
2.	No. of Districts fully notified under ESI Act, 1948	556
3.	No. of Districts partially notified under ESI Act, 1948	105
4.	No. of employers registered under ESI Act, 1948 (As on 31.03.2023)	20.83 Lakh
5.	No. of employees registered under ESI Act, 1948 (As on 31.03.2023)	3.05 Crore
6.	No. of Insured Persons covered (As on 31.03.2023)	3.43 Crore
7.	No. of Beneficiaries (As on 31.03.2023)	13.31 Crore

General information regarding implementation of ESI Scheme is placed at **Annexure-I**.

(ii) Extension of ESI Scheme to new areas of employment:

- i.** Extension of ESI scheme to the New areas and new sectors of employment is a continuous process for which medical arrangement by State Govt. is a pre-requisite. The Corporation extends the scheme in phased manner as follows: -
 - a.** Periodical survey is conducted by the ESIC Regional Offices/Sub Regional Offices in non-implemented area to identify the area where scheme can be extended/notified. Once the concerned state Govt. arranges the primary and secondary care medical facilities, or makes a request to ESIC to arrange the medical facilities in new areas, on completion of such medical facilities, a notification is issued by the Central Govt. for implementation of scheme.
 - b.** The threshold for coverage of factories is 10 or more persons and State Govts. have reduced the threshold limit of coverage of establishment from 20 to 10 persons or more under Sec. 1(5) of ESI Act.
 - c.** The scheme has also been extended to the new sectors of employment viz. educational institutions and private medical institutions and contract and casual employees of Municipal Corporation/Municipal Bodies. As on 01.01.2024, 30 States/UTs have notified educational institutions whereas 29 States/UTs have notified Medical institutions. Notifications of Municipal Corporations & Municipal bodies have also been taken up with the States. Nineteen States/UTs have notified the contract & casual employees of Municipal Corporation/bodies for coverage under ESI Scheme. The Central Govt. has accorded its approval under section 1(5) to all States for coverage of contract and casual employees of Municipal Corporations/ Municipal Bodies vide letter no S-38025/07/2021-SS-I dt. 09.06.2021. Hence the States can issue notification without seeking individual approval of Central Govt. for coverage of such employees.
 - d.** Scheme is not applicable to Plantations and Mines etc. as they are separately covered under the respective Acts.

- ii.** The following States/UTs have not notified educational & medical institutions as establishments coverable under ESI Act, 1948:

Sl. No.	Educational Institutions	Medical Institutions
1	Arunachal Pradesh	Arunachal Pradesh
2	Gujarat	Gujarat
3	Maharashtra	Maharashtra
4	Meghalaya	Meghalaya
5	Dadar & Nagar Haveli and Daman & Diu	Puducherry
6	Lakshadweep	Dadar & Nagar Haveli and Daman & Diu
7		Lakshadweep

(iii) Provision of Social Security for workers in the organised sector:

The ESI Act covers workers in the organized sector. As on 31.03.2023, 3.05 crores employees are covered under the Employees' State Insurance Act covering 3.43 crores insured persons family entities with total 13.31 crores beneficiaries. The remaining workers in the organized sector to which the ESI Act does not apply remain outside the social security umbrella inter-alia, due to the following reasons: -

- i. Employees of Central and State Govts. who are provided social protection under the rules of the respective Governments;
- ii. Employees of factories/establishments employing less than 10 persons.
- iii. Employees of factories/establishments situated in the non-implemented areas/districts where the ESI Scheme has not been notified so far.
- iv. Employees of seasonal factories;
- v. Employees drawing wages exceeding Rs. 21,000/- per month.
- vi. Employees of those category of establishments, which have not been notified by appropriate Govt. under Section 1(5) of ESI Act, 1948.

The employees employed in the organized sector and working in the smaller factories and establishments can be brought under the ESI Scheme gradually by lowering the threshold limit for coverage under the ESI Act. Likewise, the workers who are drawing wages above the wage limit of Rs.21,000/- per month can be brought under the ambit of the ESI Scheme by enhancing the wage ceiling limit. More categories of Establishments can also be notified by "Appropriate Government" for bringing them under the coverage of ESI Act, 1948.

(iv) The ESI Act under the Code on Social Security, 2020:

The ESI Act, 1948 along with 8 other Central Labour enactments, have been subsumed in the Code on Social Security, 2020 (Act 36 of 2020). The Code on Social Security, 2020 has not yet been implemented. The Central Govt. has notified the draft rules namely the Code on Social Security (Central) Rules, 2020 in the Gazette of India on 13.11.2020 for stakeholder consultation.

Benefits available under the ESI Act have been retained in the Code. Any member or beneficiary of the Social Security Code including under ESI Scheme would be required to seed their Aadhaar for seeking benefits as per provisions of Section 142 of the Code on Social Security.

In the Code of Social Security 2020, the coverage of the ESI scheme shall be extended pan India to all establishments employing 10 or more employees, as against the notified district/areas. However, contribution from employers and employees will be collected from the notified date when the benefits are provided by ESIC.

As per section 1(7) of the Code on Social Security, 2020 read with its First Schedule, provision for voluntary coverage of establishment with less than 10 persons has been incorporated. Coverage for plantations as an establishment, on opting by the employer has been provisioned in the Code. A major change has been brought in the coverage under ESI whereby as per the proviso of First Schedule of the Code (ibid), establishments engaged in hazardous or life-threatening occupation will have to cover every employee employed by them. The Central Govt. by notification shall notify the hazardous industries and life-threatening occupation.

Provision for special scheme for unorganized workers, gig workers, platform workers and other beneficiaries have been included in the Code.

2. Benefits provided under ESI Scheme

The Section 46 of the ESI Act, 1948 envisages following six social security benefits: -

- i. Medical benefit
- ii. Sickness benefit
- iii. Maternity benefit
- iv. Disablement benefit
- v. Dependents benefit
- vi. Funeral Expenses

In addition to the above-mentioned benefits, the scheme also provides some other need-based reliefs to insured persons. The details of the various benefits are as under. The eligibility conditions for various cash benefits is given at Annexure-II.

(i) MEDICAL BENEFIT

The Employees' State Insurance Scheme provides comprehensive medical care in the form of medical attendance, treatment, drugs and dressings, specialist consultation and hospitalization to Insured Persons and also to their family. An Insured Person and his family members are entitled to medical benefits from the day he is covered/coverable under ESI Scheme. Apart from the above there are also provisions for medical care to the IPs who cease to be in insurable employment due to permanent disablement, retirement on superannuation, Voluntary retirement as under: -

(a) Medical Benefit to insured persons who ceases to be in insurable employment on account of permanent disablement:

The Medical Benefit has been extended to permanently disabled insured person who ceased to be in insurable employment due to employment injury and his/her spouse with effect from 01.02.1991. This benefit is provided on payment of contribution by the IP at the rate of Rs.10 per month in lump sum for one year in advance till the date on which IP/IW would have vacated the employment on attaining the age of superannuation, had he not sustained such permanent disablement. This benefit is also be made available to widows of Insured Person, who were in receipt of dependent benefit, on payment of contribution as prescribed under Rule 60.

(b) Medical Benefit to retired insured persons:

Medical Benefit has also been extended to the insured persons and his spouse who retires on attaining the age of superannuation or retires under VRS or retires prematurely and who was in insurable employment for at least 5 years. This benefit is provided on payment of contribution by him at the rate of Rs.10/- per month in lump sum for one year in advance. This benefit is also be made available to spouse in case of death of retired IP, who were in receipt of Medical Benefit on payment of contribution as prescribed under Rule 61.

(ii) SICKNESS BENEFIT

1. Sickness Benefit represents periodical payments made to an insured person during the period of certified sickness. To qualify for this benefit, contribution should have been paid / payable for at least 78 days in the relevant contribution period. The maximum duration of Sickness benefit is 91 days in two consecutive benefit periods. Sickness Benefit for the first two days of sickness is not paid in case of a spell of sickness following at an interval of not more than 15 days, the spell of sickness for which Sickness Benefits were last paid. The Sickness Benefit rate is 70% of the average daily wages of an insured person w.e.f. 01.07.2011.
2. After exhausting the Sickness Benefit payable upto 91 days, an insured person, if suffering from Tuberculosis/Leprosy, mental and malignant diseases or any other specified long-term disease, is entitled to Extended Sickness Benefit at a higher rate of 80% of average daily wage for a period of two years, provided he has been in continuous service for a period of not less than two years in a factory or establishment to which the provisions of the Act applies and fulfills the contributory conditions. At present there are total 34 long-term diseases for which Extended Sickness Benefit is paid. The Director General/Medical Commissioner have also been authorized to extend the benefit to Insured Persons suffering from other rare diseases.
3. Enhanced Sickness benefit at the rate of full average daily wage is also provided to insured person eligible to sickness benefit, for undergoing sterilization operations for family planning, for upto 7 days in case of vasectomy and upto 14 days for tubectomy, the period being extendable in cases of post-operative complications.

(iii) MATERNITY BENEFIT

Maternity Benefit implies periodical payment to an insured woman in case of confinement, miscarriage or sickness arising out of pregnancy, confinement, premature birth of child or miscarriage. This benefit is also extended to a 'commissioning mother' who as biological mother wishes to have a child and prefers to get embryo implanted in any other woman and a woman who legally adopts a child of up to three months of age.

For entitlement to Maternity Benefit, the insured woman should have contributed for not less than seventy days in the immediately preceding two consecutive contribution periods with reference to the benefits periods in which the confinement occurs or it is expected to occur. The daily rate of benefit is 100% of average daily wage.

Maternity Benefit is payable for a maximum period of 26 weeks upto 2 surviving children in case of confinement of which not more than 8 weeks shall precede the expected date of

confinement. Further maternity benefit is payable for 6 weeks in case of miscarriage and additional one month in case of sickness arising out of pregnancy, confinement, premature birth of child or miscarriage or medical termination of pregnancy. Maternity Benefit continues to be payable for the whole of the period if she dies leaving behind the child but if the child also dies during the said period then for the days upto and including the day of the death of the child.

Further that the insured woman who is a commissioning mother or adopting mother shall be entitled to twelve weeks of maternity benefit from the date the child is handed over.

Furthermore, the insured woman having two or more than two surviving children shall be entitled to receive maternity benefit during a period of twelve weeks of which not more than six weeks shall precede the expected date of confinement.

(iv) DISABLEMENT BENEFIT

In case of temporary disability arising out of employment injury, disablement benefit is admissible to an IP for the entire period, so certified by the Insurance Medical Officer/Insurance Medical Practitioner for which the insured person does not work for wages. The cash benefit is not subject to any contributory conditions and is payable at a rate of 90% of the average daily wage. The temporary disablement benefit is however, not payable for an employment injury resulting in incapacity for less than three days excluding the date of accident. Where the disablement due to an employment injury results in permanent, partial or total loss of earning capacity, the periodical cash payments are made to the insured persons for life depending on the loss of earning capacity, as may be certified by a duly constituted Medical Board. The cash benefit rate is revised periodically to protect against erosion in the value of benefit due to inflation etc. subject to availability of funds.

However, commutation of periodical payment is permissible where the permanent disablement stands assessed as final and the daily rate of benefit does not exceed Rs.10/- per day, and where Benefit rate exceeds Rs.10/- per day but commuted value does not exceed Rs. 60,000/- at the time of the commencement of final award of his permanent disability.

(v) DEPENDANTS' BENEFIT

Periodical payments are paid to dependants of an insured person who dies as a result of employment injury. The widow (till re-marriage) & widowed mother receive monthly pension for life. An amount equivalent to 3/5 of dependent benefit rate is payable to the widow. Widowed mother and each child also share an amount equivalent to 2/5th of the disablement benefit. Sons get benefit till 25 years of age, provided, in case of infirmity, the benefit continues to be paid, till the infirmity lasts. Daughters are entitled to share dependents benefit till marriage. However, if the total of the dependant's benefit distributed among the widow/widows and legitimate or adopted children and widow mother of deceased person as aforesaid exceeds at any time the full rate, the share of each of the dependants shall be proportionately reduced, so that the total amount payable to them does not exceed the amount of disablement benefit at the full rate. In case the insured person does not leave behind any widow or child or widowed mother, the benefit is payable to other dependents. The periodical increases in amount of pension linked with the cost of living index is sanctioned from time to time to compensate for loss of real value. The minimum amount of the periodical monthly payment of Dependant benefit

payable to all eligible dependants shall not be less than Rs.1200/- (Rs. One thousand two hundred only) w.e.f. 01.03.2012

(vi) FUNERAL EXPENSES

Funeral expenses are paid towards the expenditure on the funeral of a deceased insured person. The amount is paid either to the eldest surviving member of the family or in his absence to the person who incurs the expenditure on the funeral of the deceased insured person. The amount of funeral expenses is Rs. 15000/-.

(vii) Other need-based benefits/ reliefs:

(a) CONFINEMENT EXPENSES

The scheme of medical bonus was introduced on 16.11.96 under Rule 56-A of the ESI (Central) Rules 1950. According to this Rule an insured woman and an insured person in respect of his wife shall be paid medical bonus on account of confinement expenses as prescribed and approved by the ESI Corporation, provided the confinement occurs at a place where necessary medical facilities under the Employees State Insurance Scheme are not available. Confinement expense are payable for two confinements only. Amount of medical Bonus under confinement expense is Rs.7500/-.

(b) REHABILITATION ALLOWANCE

Rehabilitation allowance is paid to the insured persons for each day on which they remain admitted in an Artificial limb center at double the Standard Benefit rate.

(c) Conveyance Allowance to PDB Beneficiaries

Under this Scheme, PDB beneficiaries are paid Rs. 100/- as conveyance allowance on their personal visit to Branch Office for submission of life certificate once in a year.

(d) Rajiv Gandhi Shramik Kalyan YOJANA (RGSKY)

Under Rajiv Gandhi Shramik Kalyan Yojana, which was introduced w.e.f. 01.04.2005, unemployment allowance is paid to the insured person for a maximum period of twenty four months (w.e.f. 06.09.2016) who has been rendered unemployed involuntarily on account of closure of factory/establishment, retrenchment or permanent invalidity not less than 40% arising out of non-employment injury, in case contribution in respect of him/her have been paid or payable for a minimum of two years prior to the loss of employment. The Insured Person and his/her family is also entitled to medical care during this period. This allowance shall cease to be payable in case the Insured Persons gets re-employment or attains the age of superannuation or 60 years, whichever is earlier. Daily rate of Unemployment Allowance is 50% of average daily wages for first 12 months and 25% of average wages of IP/IW for subsequent 12 months.

(e) Atal Beemit Vyakti Kalyan Yojana (ABVKY)

The Atal Beemit Vyakti Kalyan Yojana is a welfare scheme of the Employees State Insurance Corporation, under which unemployed insured persons are provided cash relief for a period of maximum 90 days. The rate of relief initially was twenty-five per cent (25%) of the average daily earning of the claimant. The scheme came into force on 01.07.2018. It was initially implemented on a pilot basis for a period of two years. The scheme has since been extended twice by one year each time. Presently the scheme is extended till 30.06.2024. The rate of relief has been enhanced from 25% to 50% of average daily earning of the IP and eligibility conditions have also been relaxed. To be eligible for relief under the scheme, the insured person must be in insurable employment for a minimum period of 12 months immediately before his/ her unemployment and should have contributed for not less than 78 days in one completed contribution period in 12 months immediately preceding to unemployment.

f) AMENDMENTS IN THE E.S.I. ACT, 1948 to provide Sickness Benefit to the Insured Women who do not fulfill the required contributory conditions as they were availing Maternity Benefit

Rule 55 of ESI (Central) Rules, 1950 has been amended to provide Sickness Benefit to those IWs who do not fulfill the required contributory conditions for Sickness benefit i.e. minimum 78 days contribution in the relevant contribution period, as they were availing Maternity Benefit.

Now, an insured woman who is in receipt of maternity benefit and due to reason of which a shorter contribution period is available to her in the contribution period in which the maternity benefit falls, shall be qualified to claim sickness benefit in the corresponding benefit period if the contribution in respect of her was payable for not less than half the number of days available for working in such contribution period. **The amendment is effective from 20.01.2017.**

g) Amendment in rule 55(1) & 56(1) of ESI (Central) Rules, 1950 to relax the eligibility conditions for sickness benefit and maternity benefit for the benefit period 01.01.2021 to 30.06.2021

In the year 2020, there was a nationwide lockdown due to the COVID-19 pandemic and large number of ESI covered units were not functional usually resulting into less number of available working days for several employees. Due to availability of less number of contributions of many IPs/IWs, were faced hardship for getting maternity benefit/sickness benefit.

For the welfare of IPs/IWs who faced difficulty in availing ESIC Benefits due to lack of minimum requirement of 78 days contribution, an agenda was placed in the 184th meeting of ESI Corporation for amending Rule 55 & 56 of ESI (Central) Rules for relaxing contributory conditions in order to provide sickness benefit to IPs and IWs who do not fulfil the required eligibility condition for sickness benefit and Maternity benefit in the benefit period January-June

2021. The Corporation had approved the said proposal and accordingly the Govt. of India has notified the amendment in Rule 55(1) & 56(1) on 25.07.2023. This amendment was effective for the benefit period 01.01.2021 to 30.06.2021 only.

3. Administration

The Headquarters of ESI Corporation is located at New Delhi having 24 Regional Offices, and 40 Sub-Regional Offices throughout the country. 605 Branch offices for administration of cash benefits to Insured Persons & 104 Dispensary Cum Branch Offices (DCBO) have been established for administration of both cash benefits as well as primary medical care to Insured Persons as on 01.01.2024.

The updated total sanctioned strength of officers (including Director General, Finance Commissioner and Chief Vigilance Officer) and staff in the Corporation is 20655 as on 01.01.2024. It does not include medical and para-medical and nursing staff and employees under the direct control of the State Governments.

The details of RO/SRO and DCBO is given at **Annexure- III**.

4. Finance

(i) General Aspect:

The ESI Scheme is financed by contribution received from employers and employees. In accordance with the decision taken by ESI Corporation in its 175th Meeting held on 18.09.2018, the Hon'ble Chairman, ESIC had approved the proposal of rationalization of contribution income by reducing the combined rate of contribution equal to 4 percent of the wages payable to an employee out of which 3.25 percent being the employers' share and 0.75 percent being the employees' share in place of the then existing 4.75 percent and 1.75 percent respectively. In pursuance of the decision, Rule 51 of the ESI (Central), Rules, 1950 has been amended by issue of Notification by Ministry of Labour and Employment. The amended provisions have come into effect from 1st July, 2019.

(ii) Investment of ESIC Fund through Portfolio Managers:

Prior to April 2019, ESIC was investing its surplus fund in Fixed Deposits of Public Sector Banks under Rule 27 of ESI (Central) Rules, 1950. For diversification in investment of ESIC surplus fund and better returns, Portfolio Managers have been appointed by the ESIC. Portfolio Managers have been investing ESIC surplus fund in Govt. Securites, AAA rated PSU bonds etc. as per approved investment policy w.e.f. 01st April 2019. Apart from Portfolio Managers, Custodian and External Concurrent Auditor (ECA) have also been appointed. ESIC has been able to earn an interest of 7.83 percent in Financial Year 2022-23.

The broad break up of investments made by ESIC as on 31.12.2023.

(Rs. in crore)

Govt. Security/Bonds/State Development Loan	91,085
AAA PSU Bonds + FD	24,999
Tri-Party Repo (TREPS), Short term FD etc.	6,414
Special Deposit Account (SDA) with Govt. of India	20,856
Total	1,43,354

5. Formation of State Autonomous Body/Society by States

The ESI Corporation in its 167th meeting approved the broad structure of State Autonomous Body and subsequently in the 172nd meeting of the Corporation, new structure of the State ESI Society has been approved, to be formed under section 58 of ESI Act, 1948. The States shall register the body as a Society as well as a Trust and ESIC shall release the fund directly to the bank account to the society. As on date, 22 States/UTs have consented to form the State ESI Society. Central Government has accorded approval for formation of society to eight states viz, Tamil Nadu, Chhattisgarh, Maharashtra, Nagaland, Tripura, Punjab, Arunachal Pradesh and Jammu & Kashmir. Presently, ESI Societies are in operation in the States of Maharashtra, Chhattisgarh, Tripura and Himachal Pradesh (Old Structure). Fund transfer to these States are being made directly to the Bank Account of the Society.

Formation of State ESI Society shall give flexibility for the states to improve the Medical Benefit delivery to the Insured Persons and the beneficiaries of the ESI Scheme by way of better Primary & Secondary Care. Dependency is on the States which have to register the Society as per Societies Registration Act and State Specific Public Trust Act.

ESIC has regularly been encouraging the States to form the Society which will provide them the Benefit:

- i. Gives autonomy in terms of availability of funds, instead of routing through the State Treasury.
- ii. Timely medical manpower engagement on contract till such time regular manpower is made available.
- iii. Timely settlement of reimbursement bills of the Insured Persons without waiting for state budgetary release.
- iv. Better availability of drugs & dressings in ESIS Hospitals and dispensaries due to availability of funds.
- v. Equipment procurement to upgrade medical services due to better decision making by the Society.
- vi. Repair & maintenance of State-run Hospitals and Dispensaries.

6. Medical benefits provided under ESI Scheme

A. General aspect:

The Employees' State Insurance Scheme provides comprehensive medical care in the form of medical attendance, treatment, drugs and dressings, specialist consultation and hospitalization to Insured Persons and also to their dependants.

An Insured Person and his dependants are entitled to medical benefits from the day of entry into insurable employment. Insured Persons and their families are being provided medical care which includes outpatient care/ inpatient care, specialized medical care and super specialty medical care as per requirement of the patients. Besides, medical facilities under AYUSH i.e. Ayurveda, Yoga, Unani, Siddha and Homeopathy are also provided.

Medical care to beneficiaries is provided through a large infrastructure comprising Hospitals, Service Dispensaries, Dispensary-cum-Branch Office (DCBO) Specialist centers, IMP clinics and arrangements with other health institutions. The range of medical services provided covers preventive, promotive, curative and rehabilitative services. In-patient services are provided through ESI Hospitals and through empanelment with private and Govt. hospitals.

Medical Infrastructures of ESIC/ESIS at a glance

Total No. of ESI Hospitals	161
Hospitals run by ESI Corporation	55
Hospitals run by State Government	106
Total number of Dispensaries	1574
Total number of DCBOs	104
Total number of ISM unit	406
Total number of Sanctioned beds in ESIC/ESIS hospitals	27810
Total number of Commissioned beds in ESIC/ESIS hospitals	20778
Total number of Doctors	2646(ESIC) 5250(ESIS)
Total number of IMPs	869

The list of hospitals being run by ESIC on its own & by State Governments under ESI Scheme is as under:

(i) **List of hospitals directly run by ESIC:**

Sl. No.	State	Name of the Hospital	Bed Sanctioned	Bed Commissioned
1.	Assam	Beltola	85	85
2.	Assam	Tinsukia	100	20
3.	Bihar	Bihta	330	330
4.	Bihar	Phulwarisharif	100	50
5.	Chandigarh	Ramdarbar	100	70
6.	Chhatisgarh	Korba	100	50
7.	Chhatisgarh	Raipur	100	50
8.	Delhi	Basaidarapur	1000	600
9.	Delhi	Rohini Hospital Dental College	300	280
10.	Delhi	Jhilmil	300	300
11.	Delhi	Okhla	500	350
12.	Gujarat	Ankleshwar	100	100
13.	Gujarat	Bapunagar	300	300
14.	Gujarat	Naroda Chest Hospital	100	50
15.	Gujarat	Vapi	100	100
16.	Haryana	Gurugram	200	150
17.	Haryana	Manesar	100	100
18.	Haryana	Faridabad	1150	920
19.	Himachal Pradesh	Baddi	100	100
20.	J&k	Bari Brahmana	100	50
21.	Jharkhand	Adityapur	100	50
22.	Jharkhand	Maithan*	110	30
23.	Jharkhand	Namkum	200	50
24.	Karnataka	Peenya	150	150
25.	Karnataka	Rajajinagar, Bangalore	750	530
26.	Karnataka	Gulbarga	630	470
27.	Kerala	Asramam, Kollam	250	200
28.	Kerala	Ezhukone	150	150
29.	Kerala	Udyogamandal	150	114
30.	Madhya Pradesh	Bhopal**	100	40
31.	Madhya Pradesh	Nandanagar, Indore	300	300
32.	Maharashtra	Andheri	500	230
33.	Maharashtra	Bibvewadi, Pune	120	120
34.	Maharashtra	Kolhapur	100	30

35.	Odisha	Angul	100	16
36.	Odisha	Rourkela	150	50
37.	Punjab	Ludhiana	300	300
38.	Rajasthan	Alwar	330	220
39.	Rajasthan	Bhiwadi	50	50
40.	Rajasthan	Bikaner	30	30
41.	Rajasthan	Jaipur	300	300
42.	Rajasthan	Kota***	60	60
43.	Rajasthan	Udaipur	100	100
44.	Tamilnadu	K.K.Nagar, Chennai	1000	915
45.	Tamilnadu	Tirunelveli	100	100
46.	Telangana	Sanathnagar	1000	800
47.	Telangana	S.S.Sanathnagar	150	214
48.	Uttar Pradesh	Bareilly	100	50
49.	Uttar Pradesh	Jajmau, Kanpur	100	50
50.	Uttar Pradesh	Lucknow	150	75
51.	Uttar Pradesh	Noida	300	300
52.	Uttar Pradesh	Sahibabad	200	150
53.	Uttar Pradesh	Varanasi	150	150
54.	Uttrakhand	Rudrapur	100	50
55.	West Bengal	Joka	650	510
		TOTAL	14295	11009

*ESI Hospital, Maithan, Jharkhand taken over by ESIC on 29.08.2023

** ESI Hospital, Sonagiri, Bhopal, Madhya Pradesh taken over by ESIC on 20.06.2023

*** ESI Hospital, Kota, Rajasthan taken over by ESIC on 20.03.2023

Note:- 04 New ESIC Hospitals have been inaugurated on 25-05-2024 at Tirupur, Kakinada, Raigarh and Bhillai. Total Hospitals under the ESI Scheme now stand at 165 with 59 ESIC Hospitals and 106 ESIS Hospitals. The sanctioned bed capacity of ESIC Hospitals has accordingly increased by 400 beds to 14695 beds.

ii. List of Hospitals run by State Govt. under ESIS

Sl.No.	State	Name of the Hospital	Bed Sanctioned	Bed Commissioned
1	Andhra Pradesh	Tirupathi	50	50
2	Andhra Pradesh	Visakhapatnam	200	46
3	Andhra Pradesh	Rajamahendravaram	100	30
4	Andhra Pradesh	Vijayawada	110	0
5	Bihar	Dalmia Nagar	72	Non Functional
6	Bihar	Munger	30	Non Functional
7	Goa	Margao	100	60
8	Gujarat	Bhavnagar	30	30
9	Gujarat	Jamnagar	50	50
10	Gujarat	Kalol	150	40
11	Gujarat	Rajkot	50	50
12	Gujarat	Rajpur-Hirpur	50	50
13	Gujarat	Surat	200	22
14	Gujarat	Vadodara (General Hospital)	200	200
15	Gujarat	Vadodara (Chest Disease Hospital)	25	Non Functional
16	Haryana	Ballabgarh (Faridabad)	50	50
17	Haryana	Bhiwani	50	50
18	Haryana	Jagadhari	80	74
19	Haryana	Panipat	75	75
20	Himachal Pradesh	Parwanoo	50	50
21	Karnatak	Mangalore	100	100
22	Karnataka	Belgaum	100	50
23	Karnataka	Dandeli	25	25
24	Karnataka	Davanagere	100	50
25	Karnataka	Hubli	100	50
26	Karnataka	Indra Nagar	270	210
27	Karnataka	Mysore	100	50
28	Karnataka	Shahbad	25	Non Functional
29	Kerala	Ernakulam	100	65
30	Kerala	Feroke	100	100
31	Kerala	Vadavathur	65	65
32	Kerala	Thottada	50	50
33	Kerala	Alleppy	55	55

34	Kerala	Perookada	128	128
35	Kerala	Mulamkunnathukam	110	110
36	Kerala	Olarikara	102	102
37	Kerala	Palakkad	50	50
38	Madhya Pradesh	Dewas	50	50
39	Madhya Pradesh	Gwalior	100	100
40	Madhya Pradesh	Indore (T.B.)	75	36
41	Madhya Pradesh	Nagda	50	50
42	Madhya Pradesh	Ujjain	50	15
43	Maharashtra	Aurangabad	100	100
44	Maharashtra	Kandiwali	300	225
45	Maharashtra	Nagpur	200	130
46	Maharashtra	Nasik	100	100
47	Maharashtra	MGM	330	100
48	Maharashtra	Thane	100	50
49	Maharashtra	Ulhasnagar	100	0
50	Maharashtra	Washi	100	30
51	Maharashtra	Worli	300	85
52	Maharashtra	Chinchwad	100	100
53	Maharashtra	Sholapur	150	100
54	Maharashtra	Mulund	400	200
55	Odisha	Kansbahal	50	50
56	Odisha	Bhubaneshwar	100	100
57	Odisha	Choudwar	100	79
58	Odisha	Jaykapur	25	25
59	Odisha	Brajrajnagar	50	Non-functional
60	Odisha	Barbil	6	Non-functional
61	Puducherry	Gorimedu	75	75
62	Punjab	Hoshiarpur	50	50
63	Punjab	Jalandhar	100	100
64	Punjab	Mandi Gobindgar	30	2
65	Punjab	Mohali	30	30
66	Punjab	Phagwara	50	50
67	Punjab	Amritsar	125	65
68	Rajasthan	Bhilwara	50	30

69	Rajasthan	Jaodhpur	50	25
70	Rajasthan	Pali	50	20
71	Tamilnadu	Hosur	50	50
72	Tamilnadu	Madurai	209	209
73	Tamilnadu	Salem	50	50
74	Tamilnadu	Ayanavaram, Chennai	616	466
75	Tamilnadu	Sivakasi	100	100
76	Tamilnadu	Tirucharapally	50	50
77	Tamilnadu	Vellore	50	50
78	Tamilnadu	coimbatore	506	506
79	Telangana	Nacharam, Telangana (ESIS)	450	272
80	Telangana	R.C. Puram	100	100
81	Telangana	Sirpurkagarnagar	62	62
82	Telangana	Warangal	50	50
83	Telangana	Nizamabad (Diagnostic Centre)	20	0
84	Uttar Pradesh	Sarwodaynagar	144	100
85	Uttar Pradesh	Pandunagar	312	130
86	Uttar Pradesh	Kidwainagar	100	70
87	Uttar Pradesh	Azadnagar	100	100
88	Uttar Pradesh	Agra	100	100
89	Uttar Pradesh	Prayagraj	100	100
90	Uttar Pradesh	Modinagar	124	80
91	Uttar Pradesh	Aligarh	60	30
92	Uttar Pradesh	Saharanpur	50	50
93	Uttar Pradesh	Pipri	60	60
94	West Bengal	Bandel	250	177
95	West Bengal	Asansol	150	100
96	West Bengal	Baltikuri	230	230
97	West Bengal	Sealdah	254	254
98	West Bengal	Bellur-Belly	200	136
99	West Bengal	Budge-Budge	300	272
100	West Bengal	Durgapur	150	150
101	West Bengal	Gourhati	216	216
102	West Bengal	Kalyani	250	250
103	West Bengal	Kamarhati	350	273
104	West Bengal	Manicktala	422	422
105	West Bengal	Serampur	216	168
106	West Bengal	Uluberia	216	187
		Total	13515	9769

B. Primary Care:

i) Service Dispensaries

The out-patient medical care including essential lab investigations in relatively heavy dispensaries under the ESI Scheme is provided through the service system i.e. through dispensaries established under the Scheme for the exclusive use of the Insured Persons and their families, manned largely by full-time Medical Officers.

ii) Dispensary Cum Branch Office (DCBOs)

ESI Corporation in its 174th Meeting, held on 29th May 2018, decided that a Dispensary cum Branch Office (DCBO) to be opened in all notified districts which will be directly run by ESI Corporation. DCBOs are planned to supplement existing Primary Medical Care Services administered by State Govts. so as to add to the quality & quantity of such Primary Medical Care services. A DCBO Would perform the functions of both dispensary and branch office. Besides providing medicines to patient attending DCBO, it would distribute medicines to IMP/Mod-EUD referred patients. 100% of the establishment and operational cost of DCBO would be borne by ESIC and the State concerned would not be bearing any expenditure under this head.

The state-wise details of Dispensary Cum Branch Office (DCBOs) are as under: -

Sl. No.	State	State-wise No. of DCBOs
1	Andhra Pradesh	4
2	Arunachal Pradesh	1
3	Assam	1
4	Bihar	12
5	Chandigarh (Adm.)	0
6	Chhattisgarh	1
7	Delhi	0
8	Goa	0
9	Gujarat	3
10	Haryana	2
11	Himachal Pradesh	1
12	Jammu & Kashmir (UT)	5
13	Jharkhand	7
14	Karnataka	6
15	Kerala	2
16	Madhya Pradesh	9
17	Maharashtra	22

18	Manipur	1
19	Meghalaya	0
20	Mizoram	0
21	Nagaland	0
22	Odisha	1
23	Puducherry (UT)	0
24	Punjab	3
25	Rajasthan	7
26	Sikkim	0
27	Tamil Nadu	1
28	Telangana	9
29	Tripura	0
30	Uttar Pradesh	2
31	Uttarakhand	0
32	West Bengal	4
	Total	104

iii) Hospital OPDs:

Outpatient services under various specialties and super specialties like Medicine, Surgery, Paediatrics, Gyne. & Obst., ENT, Eye, Cardiology, Nephrology, Neurology, Urology, CTVS etc. are being provided through network of ESI hospitals all over the country.

iv) Additional Primary Care arrangements:

Usually, in newly implemented/ existing areas where ESIC does not have its own infrastructure, primary care medical services are being delivered through Empanelment of Insurance Medical Practitioners (IMPs) or Employer Utilization Dispensary (EUD).

- a. **Insurance Medical Practitioners (IMP):-** Private Medical Practitioners are appointed as panel doctors. A panel doctor is expected to have his own consulting room and dispensary. Each panel doctor is allowed to register up to 2000 IP family units. The IMPs under the panel system are paid capitation fee (Rs.500/- per IP per year) w.e.f. 8th September, 2016 for providing medical care to the ESI beneficiaries which include consultation, basic lab investigation and cost of medicine. Further in order to make IMP scheme more attractive, ESI Corporation in its 174th meeting held on 29th May, 2018 has revised and launched Modified IMP Scheme.

The state-wise details of Insurance Medical Practitioners (IMPs) are as under: -

SR. No.	State	State-wise No. of IMPs
1.	Andhra Pradesh	0
2.	Assam	23

3.	Bihar	17
4.	Chandigarh (Adm.)	0
5.	Chhattisgarh	0
6.	Delhi	0
7.	Goa	3
8.	Gujarat	1
9.	Haryana	0
10.	Himachal Pradesh	0
11.	Jammu & Kashmir (UT)	0
12.	Jharkhand	7
13.	Karnataka	0
14.	Kerala	0
15.	Madhya Pradesh	5
16.	Maharashtra	560
17.	Manipur	0
18.	Meghalaya	0
19.	Mizoram	0
20.	Nagaland	0
21.	Odisha	0
22.	Puducherry (UT)	0
23.	Punjab	0
24.	Rajasthan	30
25.	Sikkim	0
26.	Tamil Nadu	5
27.	Telangana	20
28.	Tripura	0
29.	Uttar Pradesh	16
30.	Uttarakhand	0
31.	West Bengal	182
	Total	869

b) Employer Utilization Dispensary (EUD):

In the areas where employer has its own set up or agrees to have its own set up in the form of Employer Utilization Dispensary (EUD), ESIC pays capitation fees to the employer based on per IP family unit per annum. In this scheme employer opens up the dispensary in his premises and provides the primary care services to the workers of its own establishment and is paid @ Rs.450/- per IP per annum. Further in order to make EUD

scheme more attractive, ESI Corporation in its 173rd meeting held on 16th February, 2018 has revised and launched Modified EUD Scheme.

C. Secondary Medical Care:

In-patient services are being provided through a chain of 161 ESI hospitals spread across the country which includes 55 directly run ESIC hospitals & 106 State ESI hospitals with a total bed strength of 27810. The services which are not available in ESIC/ESIS hospitals are provided through cashless tie-up arrangements with private hospitals.

D. Tertiary Medical Care:

In addition to facilities available in ESIC / ESIS hospitals comprehensive tie-up arrangement for all super specialty treatment has been made with 2836 Public/Private hospitals across India.

E. PRIMARY MEDICAL TREATMENT THROUGH EMPANELLED HOSPITALS: Considering difficulties faced by ESIC beneficiaries in availing medical services due to non-availability of Hospital/Dispensaries in the vicinity within a radius of 10 kms of their residence, ESI Corporation in its 183rd meeting held on 07.12.2020 has allowed ESI beneficiaries to seek medical services from nearby empanelled hospital directly without referral.

F. MEDICAL TREATMENT THROUGH AYUSHMAN BHARAT(PM-JAY): ESIC in its 178th meeting held on 13.09.2019 has given approval for Employee’s State Insurance Corporation (ESIC) collaboration with Ayushman Bharat – Pradhan Mantri Jan Arogya Yojana (AB PM-JAY) scheme for providing secondary and tertiary medical care services to ESI beneficiaries in newly implemented area of 102 designated districts/locations through PMJAY empanelled hospitals. To scale up partnership, the mutually agreed 55 districts in the state of Maharashtra, Madhya Pradesh and Chhattisgarh in addition to 102 districts have also been implemented for which addendum with the terms and conditions of earlier executed MOU dated 30.09.2019 was signed on 01-01-2021 between NHA and ESIC.

At present, the convergence between ESIC and Ayushman Bharat PMJAY scheme has been implemented in a total of 157 districts, through PMJAY empanelled hospitals. The state-wise details of the districts covered under Pradhan Mantri Jan Arogya Yojana (PMJAY) are as under:

Sr. No.	State	Districts covered (157)
1.	Assam	Biswanath, Chirang, Lakhimpur, Majuli, Sibsagar, and Udalguri (06)
2.	Chhattisgarh	Balod, Baloda Bazar, Balrampur, Bastar, Bemetara, Bijapur, Bilaspur, Dantewada, Dhamtari, Durg, Gariaband, Janjgir-Champa, Jashpur, Kabirdham, Kanker, Kondagaon, Koriya, Mahasamund, Mungeli,

		Narayanpur, Raigarh, Rajnandgaon, Sukma, Surajpur, Gaurella-Pendra-Marwahi, and Surguja (26)
3.	Jammu & Kashmir	Anantnag, Bandipore, Baramula, Doda, Ganderbal, Kishtwar, Kulgam, Kupwara, Poonch, Rajauri, Ramban, and Shopian (12)
4.	Ladakh	Kargil, and Leh (02)
5.	Jharkhand	Chatra, Dumka, Garhwa, Godda, Gumla, Jamtara, Khunti, Latehar, Lohardaga, Pakaur, Palamu, Pashchimi, Singhbhum, and Simdega (13)
6.	Karnataka	Bidar, Chickmagloor, Chikballapur, and Kodagu (04)
7.	Madhya Pradesh	Agar, Alirajpur, Anuppur, Ashok Nagar, Balaghat, Barwani, Betul, Bhind, Bhopal, Burhanpur, Chhatarpur, Chhindwara, Damoh, Datia, Dewas, Dhar, Dindori, Guna, Gwalior, Harda, Hoshangabad, Jabalpur, Jhabua, Katni, Khandwa (East Nimar), Khargone (West Nimar), Mandla, Mandsaur, Morena, Narsinghpur, Neemuch, Panna, Raisen, Rajgarh, Ratlam, Rewa, Sagar, Satna, Sehore, Seoni, Shahdol, Shajapur, Sheopur, Shivpuri, Sidhi, Singrauli, Tikamgarh, Ujjain, Umariya, and Vidisha (50)
8.	Maharashtra	Ahmednagar, Akola, Amrawati, Aurangabad, Beed, Bhandara, Buldhana, Chandrapur, Dhule, Gondia, Hingoli, Jalgaon, Jalna, Latur, Mumbai Suburban, Nagpur, Nanded, Nandurbar, Nashik, Osmanabad, Palghar, Parbhani, Raigad, Ratnagiri, Sangli, Satara, Sindhudurg, Solapur, Thane, Wardha, Washim, Yavatmal, and Gadchiroli (33)
9.	Manipur	Imphal East (01)
10.	Nagaland	Mokokchung (01)
11.	Rajasthan	Baran, Churu, Jalore, Karauli, and Pratapgarh (05)
12.	Tripura	Dhalai, Gomati, North Tripura, and Sipahijala (04)

Further ESIC has also entered into MOU with NHA to provide medical services to PMJAY beneficiaries through its underutilized Hospitals and following 15 ESIC Hospitals for such purpose have been identified and are providing treatment to PMJAY beneficiaries. MoU for above mentioned services have already been signed by ESIC with PMJAY.

S. No.	Name of the Hospital
1.	ESIC Hospital, Bihta, Bihar
2.	ESIC Hospital, Naroda Gujarat
3.	ESIC Hospital, Ankleshwar, Gujarat
4.	ESIC Hospital, Gulbarga, Karanataka
5.	ESIC Hospital, Andheri, Maharashtra
6.	ESIC Hospital, Kolhapur, Maharashtra
7.	ESIC Hospital, Bibvewadi, Pune, Maharashtra
8.	ESIC Hospital, Bhiwadi, Rajasthan
9.	ESIC Hospital, Jaipur, Rajasthan
10.	ESIC Hospital, Alwar, Rajasthan
11.	ESIC Hospital, Lucknow, U.P.
12.	ESIC Hospital, Kanpur, U.P.
13.	ESIC Hospital, Varanasi, U.P.
14.	ESIC Hospital, Bareilly, U.P.
15.	ESIC Hospital, Rudrapur, Uttarakhand

G. Opening of ESIC Hospitals to Non-Insured Persons

ESI Corporation, in recent years, has taken initiatives to provide health services to people other than its insured persons by granting approval to open its underutilized hospitals (less than 60% bed occupancy) for general public on nil/minimal user charge basis. At present, seven ESIC Hospitals are providing medical services to general public which are as under:

- i. ESIC Hospital, Gulbarga, Karnataka
- ii. ESIC Hospital, Bihita, Bihar
- iii. ESIC Hospital, Alwar
- iv. ESIC Hospital, Bareilly, UP
- v. ESIC Hospital, Varanasi, UP
- vi. ESIC Hospital, Jajmau, UP

H. SETTING UP CHEMOTHERAPY ADMINISTRATION FACILITY:

ESI Corporation has initiated for setting up chemotherapy administration facilities in all ESIC hospitals with the capacity of 100 beds and above with an aim to strengthen in-house facility. In this regard, to establish in-house chemotherapy facilities in ESIC Hospitals with the

capacity of 100 and above beds, a hub and spoke model (as per list attached) has been framed.

List of Hubs and Spoke

Hub (ESICHMC/ ESICH/ ESICH PGIMSR)	Spoke (Associated ESIC Hospital)
Sanathnagar, Telangana	Ankleshwar, Naroda, Vapi, Raipur & Korba.
K.K. Nagar, Chennai	Asramam (Kollam), Ezhukone, Udyogmandal, Angul (Orrisa), Rourkela (Orrisa) & Tirunelveli.
Rajajinagar, Karnataka	Gulbarga, Peenya, Bibvewadi (Pune), Bapunagar & Andheri.
Joka, West Bengal	Phulwarisharif, Bihta, Beltola, Adityapur & Namkum(Ranchi).
Faridabad, Haryana	Alwar, Baddi, Rudrapur, Kanpur, Manesar & Varanasi.
Basaidarapur	Ludhiana, Chandigarh, Udaipur, Bari Brahmna (J&K), Gurugram, Rohini, Jhilmil & Noida.
Okhla	Jaipur, Indore, Lucknow, Sahibabad & Bareilly.

At present Chemotherapy unit is functional in 41 hospitals.

I. AYUSH MEDICAL SERVICES:

ESI Corporation has enhanced provision of AYUSH (Ayurveda, Yoga, Unani, Siddha and Homeopathy) medical facilities in ESI hospitals and dispensaries. The ESI Policy on AYUSH-2023 has been approved in the 193rd meeting of the ESIC Corporation dated 10-02-2024.

The facilities provided in AYUSH (Ayurveda, Yoga, Unani, Siddha & Homoeopathy) in states are as under: -

S. No	State	Ayurveda		Unani		Siddha		Homoeopathy		All AYUSH System
		ESIC	ESIS	ESIC	ESIS	ESIC	ESIS	ESIC	ESIS	
1.	Andhra Pradesh	0	4	0	0	0	4	0	0	8
2.	Assam	1	0	0	0	1	0	1	0	3
3.	Bihar	1	2	1	0	0	0	2	0	6
4.	Chhatisgarh	0	0	0	0	0	0	2	0	2
5.	Delhi	21	0	0	0	15	0	4	0	40

6.	Goa	0	1	0	0	0	1	0	0	2
7.	Gujarat	4	40	0	0	1	0	4	7	56
8.	Haryana	3	3	0	0	3	0	3	0	12
9.	Himachal Pradesh	1	1	0	0	1	0	1	0	4
10.	Jammu & Kashmir	1	0	0	0	0	0	1	0	2
11.	Jharkhand	2	0	0	0	1	0	2	0	5
12.	Karnataka	2	1	0	0	2	0	3	0	8
13.	Kerala	3	11	0	0	3	13	3	0	33
14.	Madhya Pradesh	1	0	0	0	1	0	1	0	3
15.	Maharashtra	3	14	4	0	1	5	3	11	41
16.	Orissa	1	2	0	0	0	0	2	0	5
17.	Punjab	2	6	0	0	2	0	2	1	13
18.	Rajasthan	3	1	0	0	2	1	3	0	10
19.	Tamil Nadu	2	21	6	51	2	6	2	6	96
20.	Telangana	1	1	0	0	0	1	1	0	4
21.	Uttar Pradesh	7	9	0	0	6	9	6	0	37
22.	Uttarakhand	0	0	0	0	0	0	1	0	1
23.	West Bengal	1	6	0	0	1	6	1	0	15
	Total	60	123	11	51	42	46	48	25	406

J. HUMAN RESOURCE NORMS FOR ESIC HOSPITALS AND DISPENSARIES:

ESI Corporation during its 192nd meeting held on 15.12.2023 has accorded approval for Human Resource Norms for deployment of Doctors, Nurses, Allied & Health Care Professionals and administrative manpower in ESIC Health Care Institutions.

The recommendations of the committee cover various aspects of staffing norms in ESIC healthcare institutions as under: -

1. **Norms for Deployment:** The committee has proposed specific norms for the deployment of doctors, nurses, and allied healthcare professionals in hospitals with 100

beds, 200 beds, 300 beds, 500 beds, 750 beds, 1000 beds and dispensaries, emphasizing focus on quality and efficiency.

2. **Scope of Services:** The recommendations underscore the importance of providing comprehensive clinical care, including curative, palliative, and rehabilitative services, along with health promotion, prevention, and rehabilitation.
3. **Secondary Health Care Services:** ESIC hospitals up to 300 beds are advised to primarily focus on providing quality secondary care services. The norms advocates for the development of selected Super Specialty services in these hospitals based on local disease profiles.
4. **Training and Capacity Building:** The norms suggest mandatory training for all cadres through in-house programs, short fellowship programs, or higher studies to enhance capacity and utilization within ESIC.
5. **Infrastructure Development:** Includes the development of in-house dialysis services, day care beds for efficient utilization, and the establishment of Super Specialty departments with a focus on ICUs.
6. **Continuous Review and Revision:** The committee proposes a periodic review every three years to adapt staffing norms to the evolving needs of ESIC medical infrastructure.

In addition, the manpower norms highlight salient features such as the preparation of norms for hospitals with varying bed strengths, provision of ICU and HDU beds, implementation of national health programs, and the increasing role of IT in healthcare.

This comprehensive document aims to guide ESIC in enhancing the delivery of healthcare services to its beneficiaries, ensuring efficiency, quality, and responsiveness to the evolving healthcare landscape.

However, if a new hospital is to be commissioned initially with 30 beds or less than 100 beds, then the medical services infrastructure and manpower shall be calculated proportionately of the given 100 bed norms. The upgradation of the facility may be done in a step-wise manner based on OPD load and the bed occupancy rate of the IPD. The emergency and other essential services should have adequate manpower for maintenance of round the clock services, even in such cases.

K. ADOPTION OF ICMR STANDARD TREATMENT WORKFLOW IN ESIC HOSPITALS:

To provide quality healthcare services to its beneficiaries, to enhance healthcare quality, efficiency, and standardise treatment practices, ESIC has adopted Indian Council of Medical Research (ICMR) Standard Treatment Workflows (STWs) in ESIC hospitals.

L. OTHER INITIATIVES BY ESIC

- i. **AAA+ App for Self OPD Registration by IPs/Beneficiaries:** ESIC has developed the AAA+ App, a user-friendly mobile application that allows insured persons (IPs) and

beneficiaries to register themselves for outpatient department (OPD) appointments. This digital platform streamlines the registration process, reduces waiting times, and enhances convenience for patients seeking medical consultations at ESIC hospitals and dispensaries.

- ii. **Home Delivery of Medicines:** ESIC has introduced home delivery service for medicines prescribed to the eligible insured persons. Under this initiative, Senior Citizens, handicapped/ bed-ridden patients and patients seeking tele-consultation are eligible for home delivery of drugs. This aims to improve medication adherence and accessibility by ensuring that eligible beneficiaries receive their prescribed medications conveniently at their doorstep.
- iii. **Facility of Home Sample Collection:** The ESIC has introduced facility of home sample collection to eligible beneficiaries, allowing them to undergo diagnostic tests and screenings from the comfort of their homes. All ESIC beneficiaries above 40 years of age undergoing annual health check-up, senior citizens, handicapped/bed-ridden patients and those seeking tele-consultation are eligible for home sample collection. Trained healthcare professionals visit patients' residences to collect samples as per the prescribed tests, reducing the need for patients to travel to healthcare facilities and enhancing accessibility to essential healthcare services.
- iv. **5-G Ambulance Services:** ESIC has upgraded its ambulance services to incorporate 5G technology, enabling faster communication, data transfer, and real-time monitoring of patient vital signs during transit. These advanced ambulances are equipped with state-of-the-art medical equipment and staffed by trained healthcare professionals to provide timely and efficient emergency medical care to patients. Presently the 5G ambulance service is available in 06 medical colleges.

M. Kahin bhi , kabhi bhi :

The policy "Kahin bhi, kabhi bhi" aims to introduce portability in medical service delivery across India, allowing insured persons (IPs) and beneficiaries to access consultations and medications from any dispensaries or hospitals nationwide. This policy enables greater flexibility and convenience for IPs, empowering them to seek healthcare services without being restricted to specific geographical locations. By facilitating seamless access to medical care across the country, the initiative seeks to enhance the overall healthcare experience and ensure comprehensive coverage for all beneficiaries under the scheme.

N. ESIC Operational Manual 2023 for Super Speciality and Speciality services (referral policy):

In order to improve the quality of medical services to the beneficiaries, ESI Corporation during its Corporation meeting held on 31st August, 2023 has approved Operational Manual which will supersede Operational Manual 2015. ESIC has strong commitment to enhance in-house Speciality and Super Speciality services by incorporating modern technologies.

The Referral Policy aims to enhance the capabilities of ESI hospitals by integrating modern technologies to develop specialty and super specialty services in-house. This strategy focuses on maximizing the utilization of ESI infrastructure while ensuring optimal patient care. For services not available internally, the policy mandates referrals to other ESI

hospitals or government healthcare facilities based on service availability. Additionally, in-house committees are established to review and facilitate the referral process, ensuring efficient and appropriate patient management.

7. Setting up of ESIC Hospital & ESI Dispensaries

i) General Policy: -

In accordance with existing ESIC norms for setting up of ESI Dispensary, a minimum of 3000 Insured Persons population is required for a 02-doctor dispensary, 5000 IP population for 03 doctor dispensary and 10000 IP population for 05 doctor dispensary. Similarly, as approved by ESI Corporation in its 163rd meeting, following norms exist for setting up of an ESI Hospital:

Sl. No.	No. of beds	Min. No. of IPs in catchment area
1.	100 bedded hospital	50,000
2.	150 bedded hospital	1,00,000
3.	200 bedded hospital	1,50,000
4.	250 bedded hospital	2,00,000
5.	300 bedded hospital	2,50,000
6.	350 bedded hospital	3,00,000
7.	400 bedded hospital	3,50,000
8.	500 bedded hospital	4,00,000
9.	600 bedded hospital	5,00,000

The IP population should be taken in a radius of 25 Km and there should not be any other ESI Hospital within a radius of 50 Km. If there is another ESI Hospital within 50 Km, then each ESI Hospital should fulfill these norms in the respective catchment areas (for example, if the two ESI Hospitals are at a distance of 40 Km, then each hospital should satisfy these norms within a radius of 20 Km).

(ii) Updating of Norms:

Further, in order to boost adequate health infrastructure availability so as to match ESIC expansion plan to cover whole of India, ESI Corporation during its 188th meeting held on 18/19th June, 2022, has given approval for further updating of the existing norms on setting up of ESI hospitals and dispensaries based on futuristic IP population & geographical necessity throughout the country, as per below:

- i. Instead of considering the present IP population, health facilities may be created based on projected futuristic number of IP population in upcoming 05 years in case of hospitals and 03 years in case of dispensaries. For setting up of new ESI hospitals, remaining conditions may be kept same as approved in the 163rd ESI Corporation meeting.
- ii. In respect of non-notified districts or non-notified areas of partially implemented districts, new dispensary may be established based on number of coverable employees instead of Insured Person, as ascertained during the pre-implementation survey data, so as to arrange medical facilities before the implementation of new areas.
- iii. For implementation of ESI Scheme in partially implemented and non-implemented districts, if any location (non-implemented area) does not fulfill the criteria/ norms for setting up of ESI dispensary, Regional Director/ State Govt. may make necessary arrangement through empanelment of Insurance Medical Practitioner (IMP), Modified-Insurance Medical Practitioner(m-IMP), Modified Employer Utilization Dispensary (mEUD) as per norms for providing primary care medical services and Tie-up arrangement with public/private hospitals and/or PMJAY for arrangement of secondary care medical services.
- v. Norms of minimum 15000 Insured Persons for setting up of a 100 bedded ESI Hospital in North East Region/ Hilly area will continue to prevail as approved earlier. The status of medical infrastructure in the North-East region under the ESI Scheme is as under: -

Sl. No.	State	Date of implementation of ESI Scheme	No. of		
			Hospitals	Dispensaries	IMP
1	Arunachal Pradesh	01.11.2020	-	1(DCBO)	-
2	Assam	28.09.1958	2	26 + 1(DCBO)	23
3	Manipur	01.06.2018	-	1(DCBO)	-
4	Meghalaya	28.09.1980	-	2	-
5	Mizoram	01.12.2015	-	1	-
6	Nagaland	01.03.2008	-	3	-
8	Tripura	01.01.2009	-	5	-

8. Occupational Disease Centres (ODCs)

ESI Corporation has set up one IOHER Centre at Basaidarapur & six Zonal Occupational Disease centres for providing early detection & prompt treatment, apart from taking steps for preventive & promotive aspect pertaining to occupational health. These institutions are as under: -

1	ESIC Hospital Basaidarapur, New Delhi (IOHER)	North Zone
2	ESIC Hospital and Medical College, K.K. Nagar, Chennai	South Zone
3	ESIC Hospital and Medical College, Joka, Kolkata	East Zone
4	ESIC Hospital and Medical College, Bihta, Bihar	East Zone
5	ESIC Hospital, Andheri, Mumbai	West Zone
6	ESIC Hospital and Medical College, Alwar, Rajasthan	West Zone
7	ESIC Hospital, Nandanagar, Indore	Central Zone

9. Expenditure on Medical Care

State Governments are being reimbursed at a ceiling rate of ₹3,000/- per Insured Person per annum. Various sub-ceilings under this broader ceiling of ₹3000/- are as under:

- Annual ceiling on entitlement for medical care expenditure has been enhanced to ₹2,600 per IP per annum from earlier ceiling of ₹2150/- with maximum sub ceiling of ₹1,300 for expenditure under "Administration" head.
- Entitlement of ₹200 per IP per annum for incurring expenditure under Project Implementation Plan (PIP).
- Entitlement of ₹ 200 per IP per annum on pro-rata basis based on extent of implementation of ESIC Dhanwantri module in State ESI hospitals & dispensaries during previous financial year.

Besides, Additional Entitlement of ₹200 per IP per annum as incentive where bed occupancy in all the State ESI Hospitals is more than 70% during the concluded financial year and ₹20 per IP per annum for expenditure under preventive and promotive health services, are being reimbursed over and above the ceiling of ₹3,000/-.

Additionally, the expenditure on super specialty treatment (including diagnostic) is being totally borne by ESI Corporation.

In order to accelerate the pace of implementation/extension of ESI Scheme to new geographical areas/better infrastructure and services by the State Government, the ESI Corporation has taken a decision in its 177th meeting that the Corporation will bear entire expenditure within the ceiling on medical care incurred by the State Government for an initial period of 03(Three) years w.e.f. 2019-20. This will facilitate the State Government to allocate fund to improve medical services without any constraints.

10. Medical Education

The ESI Corporation established Medical colleges, Dental colleges, Nursing colleges and paramedical Institute with a view to improve the quality of services provided under the ESIScheme. Accordingly, Medical Education Project have been set-up at various locations, which are being run by ESIC: -

(i) PGIMSR:

Two (02) Postgraduate Institutes of Medical Sciences & Research (PGIMSRs): Basaidarapur, New Delhi & Andheri (E), Mumbai (MH). Admission in PG Institute at Andheri (E), Mumbai has been suspended since A.Y 2019-20 due to the fire incident on 17.12.2018, however the courses will resume after re-commissioning the Hospital.

(ii) Medical Colleges:

ESIC has established 08 ESIC Medical Colleges i.e at Rajaji Nagar Bengaluru (Karnataka); K. K. Nagar Chennai (TN); Joka Kolkata (WB); Gulbarga (Karnataka); Faridabad (Haryana); Sanathnagar Hyderabad (Telangana); Alwar (Rajasthan) & Bihta (Bihar).

(iii) Dental Colleges:

ESIC has established 02 Dental Colleges i.e. at Rohini, Delhi and Gulbarga, Karnataka. ESIC Dental College, Rohini, Delhi started in 2010-11 and ESIC Dental College, Gulbarga started in 2017-18.

(iv) Nursing College:

ESIC is running 02 Nursing Colleges at Indiranagar, Bengaluru (Karnataka) and Gulbarga, Karnataka. ESIC Nursing College, Indiranagar, Bengaluru started in 2013-14 and ESIC Nursing College, Gulbarga, Karnataka started in 2015-16.

(v) Para Medical Institute:

ESIC is running 01 Para Medical Institute at Gulbarga, Karnataka since 2019-20. Presently Para Medical Courses in eight (08) disciplines i.e. Diploma in OT & Anaesthesia Technology; Diploma in Medical Records; Diploma in Medical Laboratory Technology (DMLT); Diploma in Medical imaging Technology (DMIT); Diploma in ophthalmic Technology (DOT); Diploma in Health Inspector (DHI); Diploma in Dental Hygiene (DDH) & Diploma in Dental Mechanics (DDM).

(vi) DNB Courses:

- i. DNB broad specialty courses in 11 hospitals in 13 subjects with 109 seats in ESIC Hospitals.
- ii. PG Courses in 7 Medical Colleges with 394 PG seats.
- iii. Super Specialty courses (DM / M.Ch / DrNB / FNB) in four Medical Colleges in 17 disciplines'.

(vii)Handing over of ESIC Medical Colleges:

Transfer of existing infrastructure to State Governments / Starting MBBS course in existing infrastructure due to review of decision by the Corporation regarding Medical Education, the ESIC Medical Colleges at (i) Coimbatore, Tamil Nadu (ii) Paripally, Kerala and (iii) Mandi, Himachal Pradesh were transferred to the respective State Governments where MBBS courses are being run by the state government.

11. Property Management Division

The Project Management Division of ESIC is responsible for construction of building of ESIC/ESIS institution and upkeep thereof. It also formulates policies relating to Annual Repair & Maintenance and Special Repair & Maintenance of ESIC/ESIS buildings.

(i) General Policy: -

The Corporation had decided to run all the ESI Hospitals/Dispensaries/Regional Offices/Branch Offices in its own buildings as far as feasible. Construction of other buildings such as Specialist Centers, Offices of the Directorate Medical of ESI Scheme in the State, Central Medical Stores etc. are sanctioned on merits in each case. ESI Corporation has built the following building for various purpose.

(iii) List of major projects (Capital works) under execution during 01.01.2023 to 31.12.2023

S.No.	Name of the Project
Hospital projects	
1	Construction of PGIMSR and PG hostel cum staff housing at ESIC hospital Andheri, Mumbai, Maharashtra
2	Renovation of existing hospital and setting up of 50 bedded SST facilities at Pandu Nagar, Kanpur, Uttar Pradesh
3	Construction of 100 bedded ESIS hospital, Bahadurgarh, Haryana
4	Construction of 100 bedded ESIS hospital at Kakinada, Andhra Pradesh
5	Reconstruction of 100 bedded ESIS hospital at Rajamahendravaram, Andhra Pradesh
6	Construction of 100 bedded ESIC hospital at Raigarh, Chhattisgarh
7	Construction of 100 bedded (upgradable to 200 bedded) ESIC hospital at Bhilai, Chhattisgarh
8	Construction of 100 bedded ESIS hospital at Shivamogga, Karnataka
9	Construction of 100 bedded ESIS hospital Siliguri, West Bengal.
10	Construction of additional 50 bedded ESIS hospital at Asansol, West Bengal
11	Construction of 100 bedded ESI hospital at Ranchi (expandable to 200 Beds) Jharkhand
12	Construction of 100 bedded ESI hospital at Haldia, West Bengal
13	Construction of 100 bedded ESI hospital at Doddaballapur, Karnataka
14	Construction of 100 bedded ESIC hospital at Phulwarisharif, Bihar
15	Construction of 200 bedded ESIC hospital at Beltola, Assam
16	Construction of 100 bedded ESI hospital at Tirupur, TamilNadu

17	Construction of 100 bedded ESIC hospital at Ompura, J&K
18	Construction of 200 bedded (upgradable to 300 beds) ESIS hospital, staff qtr. and SRO at Surat, Gujarat
19	Construction of new OPD building with 200 beds at ESIC hospital, Sanathnagar, Telangana
20	Construction of 300 bedded (upgradable to 500 bedded) ESIC hospital at Indore, Madhya Pradesh
21	Construction of 100 bedded ESIS hospital at Bawal, Haryana
22	Construction of 30 bedded ESIS hospital (expandable to 100 beds), Kala Amb, Himachal Pradesh
23	Construction of 100 bedded ESIS hospital at Vizianagram, Andhra Pradesh
24.	Construction of ESIS hospital Davangere, Karnataka
25	Construction of 100 bedded ESIS hospital and 32 nos. residential quarters including ESI branch office at Ulhasnagar , Mumbai, Maharashtra.
26	Construction of 200 bedded ESIC hospital at Butibori, Nagpur, Maharashtra.
27	Repair and renovation work of 100 bedded existing ESIC hospital & staff quarters at Kolhapur, Maharashtra
28	Construction of 228 Nos. Type-III staff quarters at D N Nagar, Andheri, Mumbai, Maharashtra
29	Construction of 200 bedded (Upgradable to 500 bedded including 50 beds of SST) ESIC hospital at Bibewadi, Pune, Maharashtra
30	Construction of 300 bedded (including 50 beds SST) hospital at Haridwar Uttarakhand.
31	Construction of 400 bedded(350 + 50 SST) ESI hospital at Sheelanagar, Vishakhapatnam, A.P
32	Construction of 100 bedded ESI hospital at Tuticorin, T.N
33	Construction of 100 bedded ESI hospital at Sriperumbudur, T.N
Dispensary/Office Building Projects	
34	Construction of ESI dispensary cum diagnostic centre at Mayur Vihar Phase-I, Delhi
35	Construction of 04 Doctor ESIC dispensary cum branch office at Gaya, Bihar
36	Construction of 03 Doctor ESI dispensary Behror, Rajasthan
37	Construction of 05 Doctor dispensary at Neemrana, Rajasthan
38	Construction of 05 Doctor dispensary at Sitapura, Rajasthan
39	Construction of 2 Dr. dispensary, BO and staff quarter at Abu Road, Rajasthan.
40	Construction of 5 Doctor ESIC dispensary cum branch office & TOR at Selaqui, Uttarakhand
41	Construction of Model dispensary at Pydibhimavaram, Andhra Pradesh
42	Construction of 02 Doctor ESIC dispensary and branch office at Gorakhpur, Uttar Pradesh
43	Construction of 02 Doctor ESIC dispensary at Nunhai, Agra, Uttar Pradesh
44	Construction of branch office in Alwaye, Kerela
45	Construction of 04 Doctor ESI dispensary, Alwar, Rajasthan.
46	Construction of 5 Doctor dispensary & B.O. Panchkula, Haryana
47	Construction of 2 Doctor dispensary and branch Office at Korratty, Kerala
48	Construction of 2 Doctor dispensary and branch Office at Navaikulam, Kerala

49	Construction of 03 Doctor dispensary at Bhilwara, Rajasthan.
50	Construction 03 Doctor dispensary at Bhawani Mandi, Rajasthan.
51	Construction of RCC ramp for existing building (G+7) 300 bedded ESIC Modal hospital, Sodala. Jaipur. Rajasthan.
52	Construction of 3 Dr. dispensary and Branch Office at Bharatpur, Rajasthan
53	Construction of 5 Dr. dispensary and Branch Office at Udyog Nagar, Kota
54	Construction of 2 Dr. dispensary and Branch Office Surendranagar, Gujarat
55	Construction of ESI dispensary, RDD office (NZ), SRO and sub-store at Chalappuram, Kerala
56	Construction of 5 Dr. dispensary Chakkorathakulam, Kerala
57	Construction of 5 Dr. dispensary and Branch Office at Sector-22, Noida.

SI.No.	FOUNDATION STONE LAYING (01.01.2023 TO 31.12.2023)
1	Foundation Stone for 100 bedded ESI Hospital Tripura, Agartala
2	Foundation Stone for ESI Dispensary at Rai, Sonipat, Haryana
3	Foundation Stone for ESI Dispensary at Barhi, Sonipat, Haryana

SI.No.	INAUGURATIONS (01.01.2023 TO 31.12.2023)
1	Inauguration of DIMS Building, Panchkula, Haryana
2	Inauguration of 30 bedded ESI hospital at Bikaner, Rajasthan
3	Inauguration of OPD Block, Andheri, Maharashtra

(iv) Capital Construction outlay

Sanctioned cost for Construction of Hospitals, Annexes, Dispensaries and other offices is as follows: -

SI.No.	Name of the Project	Administrative approval & expenditure sanction (Rs. In Crores)
1.	Medical Institute	260.13
2.	ESI Hospitals/Dispensaries/Offices of Directorate of ESI Scheme/Central Medical Stores etc.	4729.33*
3.	Regional Offices/Branch Offices/Staff Quarters	149.92
	Total	5139.38

*The sanctioned cost of DCBO is included in SI.No.2.

12. INDIAN SYSTEMS OF MEDICINE

E.S.I. Corporation is committed to promote AYUSH (Ayurveda, Yoga, Unani, Siddha and Homeopathy) facilities along with Allopathy System of Medicine in all ESIC and ESIS Hospitals and Dispensaries across the country. Accordingly, AYUSH facilities have been developed in phased manner.

ESI Corporation has taken various steps for strengthening of AYUSH and bringing those services for the benefit of insured persons and their families. The details are as under: -

- (i) It has been approved to bear the entire expenditure on setting up of new AYUSH units in the states for the first five years by ESIC Corporation for encouraging the State Governments for setting up of AYUSH units (in the 134th meeting of the ESIC Corporation held on 21/12/2005).
- (ii) DG ESIC Homoeopathic Rate Contract no. Homoeo-3 published on dated 23.02.2023 for procurement of Homoeopathic drugs.
- (iii) Conducted 18th & 19th meetings of Sub Committee of ESIC on AYUSH held on 16.06.2023 & 17.11.2023 respectively with a view to review the ESI policy on Ayush.
- (iv) Organized fortnight long celebrations of International Day of Yoga -2023 with the theme Yoga for Vasudhaiva Kutumbakam and the domestic tag line 'Har Angan Yoga' in ESIC/ESIS Hospitals by conducting health talks on yoga for prevention of diseases, yoga demonstration at hospitals and also industrial clusters. Hon'ble Labour & Employment Minister inaugurated IDY celebrations at ESIC Medical College Hospital, Faridabad on dated 21.06.2023.
- (v) ESI Hospitals have organized International Year of Millets-2023 from 1.07.2023 to 15.07.2023 by conducting various activities viz. Health talks on millets, Exhibition of healthy Millet diet, providing millet dishes in patients' diet, Poster making competition, displaying "Millets and their easy nutritious recipes" etc.
- (vi) Ayurveda Day celebrated on 08.11.2023 in ESIC Head Quarters office. Field locations Celebrated the National Ayurveda Day from 04.11.2023 to 10.11.2023 by conducting Health talks, Health camps and exhibitions on the theme "Ayurveda for one health" with a tagline 'Ayurveda for everyone on every day i.e. हर दिन हर किसी के लिए आयुर्वेद'.
- (vii) DG ESIC Ayurvedic Rate Contract No. Ay-9 published on 17.11.2023 for procurement of Ayurvedic medicines.
- (viii) ESIC participated in Arogya fair & Arogya expo held on time to time organized by Ministry of Ayush for promotion of Ayush services.

- (ix) There are 406 AYUSH units available in ESIC/ESIS hospitals and dispensaries across the country. The details of AYUSH facilities available in various states as on 01.01.2024 is given at Annexure- 'V'.

13. Recovery of contribution and details of prosecution cases

i) Recovery of contribution: -

A total contribution of Rs. 17403.05 Crores were collected during the financial year 2022-23. The contribution income also includes the contribution income recovered from the defaulting employers by the Recovery Officers.

Arrear of contribution amounting of Rs. 5444.73 Crores is outstanding dues as on 31.03.2023 against the defaulting employers. An amount of Rs 2819.67 crores is Immediately not recoverable dues arrear at present, due to various reasons which are given as under: -

A Total Contributions (including interest on contributions) of Rs. 17403.05 crores were received during the Financial year 2022-23 against the contributions (including interest on contributions) of Rs.15308.98 crores last financial year (2021-22). There is an increase in contributions of Rs. 2094.07 crores over the previous year, which is 13.67% more over the previous year. It also includes the dues of contribution recovered from the defaulting employers by the Recovery officers.

A) Not immediately recoverable dues

(Amount in Crores)

a) Amount of arrears disputed in courts	1577.77
b) Amount under liquidation	607.74
c) Amount pending with Claim Commissioner	13.61
d) Amount due from factories/Establishment closed or whereabouts of employers not known.	338.59
f) Amount for which decree obtained but not executed	1.59
Total	2539.30

B. Dues from sick industries

I) Cases in respect of Factories/Estts. Registered with BIFR/NCLT but rehabilitation scheme yet to be sanctioned	179.15
g) Factories/Establishments which have been declared sick but rehabilitation scheme has been sanctioned.	101.22
Total	280.37

C. Immediately Recoverable dues as on 31.03.2023

a) Employers whereabouts known but unit is closed	127.04
b) Recoverable dues pending for recovery action with Recovery Officer	2498.02
Total	2625.06
Grand Total (A+B+C)	5444.73

Damages levied / recovered

The damages are levied on belated payment of contributions from the employers under Section 85-B of the ESI Act, 1948. A sum of Rs. 36.49 crores were recovered as damages during the year 2022-23 against the sum of Rs. 29.88 crores recovered during the preceding year 2021-22.

Details of Recovery made for financial year 2022-23

Rs. In Lakhs

Sl.No	Region	Target fixed for 2022-23	Recovery made for 2022-23	% recovery for financial year 2022-23
	ANDHRA PRADESH			
1	Vijayawada	1369	1443.03	105.41
2	Visakhapatnam	1414	741.22	52.42
3	Tirupati	1484	498.57	33.60
	ASSAM			
4	Guwahati	464	372.1	80.19
	BIHAR			
5	Patna	1053	997.15	94.70
	CHHATTISGARH			
6	Raipur	1363	618.3	45.36
	DELHI			
7	Rajendra Place	1105	884.02	80.00
8	Rohini	346	350.11	101.19
9	Okhla	1468	1470.11	100.14
10	Nandnagri	457	284.54	62.26
	GOA			
11	Panaji	369	370.45	100.39
	GUJARAT			
12	Ahmedabad	1730	510.06	29.48
13	Baroda	487	267.21	54.87
14	Surat	468	180.4	38.55
	HARYANA			
15	Faridabad	2275	753.66	33.13
16	Gurgaon	1607	1158.33	72.08

17	Ambala (Karnal)	324	358.22	110.56
	HIMACHAL PRADESH			
18	Baddi	500	502.48	100.50
	JAMMU & KASHMIR			
19	Jammu	690	336.58	48.78
	JHARKHAND			
20	Ranchi	730	730.34	100.05
	KARNATAKA			
21	Bengaluru	2970	1501.44	50.55
22	Hubballi	800	429.77	53.72
23	Bommasandra	1124	785.37	69.87
24	Peenya	1403	730.36	52.06
25	Mysuru	361	427.84	118.52
26	Gulbarga (Kalaburagi)	319	358.3	112.32
27	Mangalore	217	64.21	29.59
	KERALA			
6	Thrissur	1058	661.3	62.50
29	Kollam	859	568.95	66.23
30	Ernakulam	707	604.11	85.45
31	Kozhikode	992	360.62	36.35
32	Thiruvananthapuram	619	688.82	111.28
	MADHYA PRADESH			
33	Indore	928	845.4	91.10
34	Bhopal	967	486.32	50.29
	MAHARASHTRA			
35	Mumbai	2976	918.52	30.86
36	Thane	2490	1256.96	50.48
37	Marol	4025	1652.87	41.07
38	Pune	4417	2534.92	57.39
39	Nagpur	1329	703.29	52.92
40	Aurangabad	503	402.42	80.00
41	Nasik	590	307.56	52.13
	ORISSA			
42	Odisha	2291	852.67	37.22
	PUDUCHERRY			
43	Puducherry	1088	981.64	90.22
	PUNJAB			
44	Chandigarh	1310	1169.65	89.29
45	Ludhiana	902	904.63	100.29
46	Jalandhar	586	307.88	52.54
	RAJASTHAN			
47	Jaipur	1536	734.81	47.84

48	Udaipur	580	177.19	30.55
49	Jodhpur	626	222.46	35.54
	TAMIL NADU			
50	Chennai	4038	3683.46	91.22
51	Madurai	1025	850	82.93
52	Coimbatore	1422	1438.91	101.19
53	Tirunelveli	697	436.67	62.65
54	Salem	980	630.98	64.39
	TELANGANA			
55	Hyderabad	8423	2578.87	30.62
	UTTAR PRADESH			
56	Kanpur	461	197.08	42.75
57	Noida	761	575.54	75.63
58	Varanasi	122	160.19	131.30
59	Lucknow	2240	1231.95	55.00
	UTTARAKHAND			
60	Dehradun	363	347.63	95.77
	WEST BENGAL			
61	Kolkata	4940	1560.7	31.59
62	Sikkim	153	54	35.29
63	Barrackpore	327	327.3	100.09
64	Durgapur	500	405.29	81.06
	TOTAL	84728	48945.73	57.77

ii) Prosecution Cases: -

Prosecution cases were filed against defaulting employers under section 85(a to g) of the ESI Act and under section 406/409 of the Indian Penal Code. The details of cases pending at the beginning of the financial year filed and decided during the year 2022-2023 under the above provisions is as under:

S.No	Particulars	Sec. 85 (a to g) of ESI Act 1948	Sec.406 & 409 of IPC	Total
1	No. of Prosecution cases pending as on 01/ 04/22	11427	915	12342
2	No. of prosecution cases filed during the year 2022-23	629	2	631
3	Total (1+2) above	12056	917	12973
4	Cases withdrawn	8	0	8
5	Total No. of prosecution cases decided during the period	889	29	918

a)	Convicted with imprisonment	16	0	16
b)	Convicted with fine	225	2	227
c)	Acquitted	31	0	31
d)	Closed/Dismissed	617	27	644
6	Total (4+5) above	897	29	926
7	Number of prosecution cases pending as on 31.03.23 (3-6)	11159	888	12047

iii) Recovery of arrears: -

- a) Out of the total arrears of Rs. 5444.73 crores as on 31.03.2023, an amount of Rs. 2625.06 crores accounting for 48.21% of the total arrears falls in the category of immediately recoverable arrears. The remaining amount of Rs. 2819.67 Crores accounting for 51.79% of the total dues falls in the category of Not immediately recoverable arrears for the present due to claims disputed in courts, factories having gone into liquidation, factories registered with BIFR, amount pending with claim commissioner, closure of the factories and whereabouts of the defaulting employers in certain cases are not knowns.
- b) In order to ensure effective recovery of the dues of the corporation, the provision of section 45-C to 45-I has been made in the Principal Act by an amendment in ESI Act 1989, thereby enabling the corporation to set up its own recovery machinery for realizing the dues of the corporation. Accordingly, corporation's own recovery Machinery is now functioning in all the regions/ Sub- regions. A Recovery cell has also been set up at the Hqrs Office to monitor the progress of recovery of the dues and watching the performance of the Recovery Officers in the Regions/Sub-Regions.
- c) During the year 2022-2023, the dues of Rs. 489.45 Crores were recovered from the defaulting employers as against the target of recovery of Rs. 847.28 Crores. The recovery during the period 2021-22 was Rs 423.62 Crores.

14. Conduct of inspection through Central Analysis and Intelligence Unit (CAIU)

- (i) With an aim to achieve the objective of simplifying business regulations, a transparent inspection policy, with system driven triggers equipped with relevant norms and criteria, has been framed by ESIC, with due approval of Ministry of Labour and Employment, Govt. of India. The scheme envisages objective criteria for selection of the units for inspections and in cases of complaints, to ensure more accountability, transparency and to minimize frequent inspection of the same unit. It also emphasizes the objective of conducting inspections/investigations, only on the basis of evidence-based inputs after analyzing the field level data. To deal with complaint cases and in pursuance of the Govt. of India policy for making transparent and accountable Labour Inspection system, Central Analysis and Intelligence Unit (CAIU), has been setup by ESIC at headquarters. The mandate is, to analyze the available data of compliance/to call for additional information if required from the field offices with reference to the complaint and decide the necessity of the investigation/inspection of records against such complaint. A detailed methodology for

selection criteria of the cases by the CAIU has been worked out accordingly. Field offices have been directed to forward all such complaints to CAIU that cannot be redressed without investigation/inspection of records relating to default in compliance by factories/establishment, along with the feedback/recommendation in the matter.

- (ii) Besides, field offices have also been advised to review the cases identified under System Driven Inspection Criteria as per provisions made in Inspection Policy of ESIC and the Guidelines/Instruction issued by headquarters on functioning of CAIU and send such cases to CAIU for inspection approval with full justification. During the year-**2023**, total **2220** complaints/references received in CAIU, in which **41** received from PMOPG Portal, **14** received from RTI and **8** received from Ministry. Out of which **634** cases have been approved from inspection/Investigation/Surprises Physical Verification, after analysis of data of compliance. Remaining cases are examined and actions deemed fit are taken and intimated to respective field offices.

15. Public Grievances Redressal Machinery set-up in ESIC

- i. The ESI Corporation being a premier social security Organisation is catering to the needs of more than 13.50 crores of ESI Beneficiaries i.e. about 10% of the population of the country. Being a service organization ESIC is handling numerous Public grievances/queries from all stake-holders throughout the year.
- ii. In pursuance of the instructions issued by the Directorate of Public Grievances, Govt. of India, the Corporation is making all out efforts for qualitative and speedy redressal of all the Public Grievances received.
- iii. Public Grievances are received through various channels like Telephone, Postal, Email, CPGRAMS, Social Media etc. The Corporation monitors Public Grievances through a vast network of designated Public Grievance Officers posted in all the field offices/ESIC hospitals.
- iv. To provide guidance/information to the stake holders/beneficiaries and making the grievance filing easy and convenient, the Corporation has set up a Multilingual Toll-Free helpline number 1800-11-2526 through which Stakeholders & public can register their grievances telephonically and get a grievance registration number for the same. They can also seek status of their grievance from this helpline by providing such grievance registration number. This facility has helped those IPs/IWs who are either illiterate or lacking writing/computer skills.
- v. All out efforts are made to redress all grievances at the earliest and within the maximum time limit of 30 days. As a result, the Corporation has been able to settle following number of grievances received on CPGRAMS portal satisfactorily during the period 01-01-2023 to 31-12-2023

Year	Brought forwarded	Received	Settled	Average Disposal Time (Days)	Pending as on 31-12-2022
01-01-2023 to 31-12-2024	361	17467	17394(99%)	8	434*

Pending as on 31-12-2024	Pending 0-15 Days	Pending 16-30 Days	Pending 31-45 Days	Pending 46-60 Days
434	317	89	25	3

- vi. For quick and on the spot redressal of Grievances of beneficiaries Suvidha Samagams are also periodically arranged at Regional Offices/Sub-Regional Offices/Divisional Offices on second Wednesday (AN) (If holiday, then next working day) of each month and at Branch offices on 2nd Friday of each month regularly. Medical Superintendent of the ESIC/ESIS Hospitals, where the ESIC and ESIS Hospitals are located in the same town/city are also part of these Suvidha Samagam organized by the Regional Offices/Sub-Regional Offices/Divisional offices and on the spot medical related grievances are settled through them.
- vii. In many cases where telephone numbers are available, feedback/Satisfaction level are also obtained from the complainant and in case of any dissatisfaction remedial measures are taken promptly.
- viii. The Director General, ESIC also conducts Suvidha Samagam through VC at ESIC hqrs to provide prompt redressal of grievances of various stakeholders.

16. Public Relations

The ESI Corporation has a setup of Public Relations Branch with Insurance Commissioner (PR) as the Divisional Head consisting of full-fledged P.R. Branch at Hqrs. Office, New Delhi assisted by one Nodal Officer each at the Regional, Sub-Regional & Hospital level. The major activities of Public Relations Branch in ESIC are: -

- Publicity and interacting with media for dissemination of information on new initiatives through Advts., Press Releases etc.
- Organizing meetings, seminars, outreach programmes, exhibitions, health check-up camps, health melas, awareness camps, foundation stone laying/inaugural ceremonies etc.
- Publication of brochures/pamphlets/booklets/Annual Reports and other literature for the Corporation.
- Monitoring & updating of ESIC Information Website- 'www.esic.gov.in'.
- Managing & handling of all the official Social Media Handles of ESIC.

17. Compliance under RTI Act, 2005

- (i) The Right to Information Act 2005 has been implemented in all offices in ESI Corporation including ESI Hospitals and Dispensaries directly run by the Corporation:
- (ii) Central Public Information Officer (CPIO) have been designated in all Regional/Sub-Regional/Divisional Offices/Hospitals, Dispensaries, Branch offices Directorate (Medical) Delhi, Directorate (Medical) Noida/NTA and Hqrs. Office. Appellate Authority has also been designated for each office.
- (iii) A person, who desires to obtain any information under this Act, shall make a request in writing or through electronic means in English or Hindi or in the official language of the area in which the application is being made, accompanying such fee as may be prescribed under sub-section (1) of section 6 and under sub-sections (1) and (5) of section 7 of RTI Act, 2005 as amended from time to time.
- (iv) The information to the applicant is ordinarily provided in the form in which it is sought.
- (v) Manual of the Right to Information has been published as per provisions of RTI Act, 2005, 11163 requests for information were received during the period 01.01.2023 to 31.12.2023 out of which information was provided in 9701 cases, 47 cases transferred to CPIOs of other Public Authorities and 73 cases were rejected.
- (vi) 1087 Appeals were also received during this period out of which 849 Appeals decided.
- (vii) The name and the address of the Appellate Authority is mentioned in the reply/decisions communicated to the applicant.

18. Training

(i) ESIC National Training Academy:

The National Training Academy is the apex training centre of the ESIC under Training Division with the Insurance Commissioner as head of NTA. Its job is to impart training to all group 'A' and 'B' (including medical and non-medical) officers of ESIC. Presently the NTA is situated at Dwarka, Delhi.

Setting up ESIC National Training Academy

In the year 2005, National Training Academy of ESIC was set up to impart training to all group 'A' and 'B' officers of ESIC with the Additional Commissioner as its head and it started functioning from ESIC Regional Office, Mumbai Building.

In addition, following Zonal Training institutes (ZTIs) were also set up to impart training to group 'C' and 'D' staff of ESIC headed by ZTI in-charge of the level of Director/Joint Director.

1. ZTI (North Zone) at R.O. Delhi.
2. ZTI (South Zone) at ESIC Medical College Gulbarga.
3. ZTI (West Zone) at R.O. Mumbai.
4. ZTI (East Zone) at R.O. Kolkata.

(ii) Training Programme

In the calendar year 2023 a total number of 180 training programme of 853 days were conducted by NTA and ZTIs (North, South, East & West Zone), where 11063 participants were trained.

(iii) Keeping pace with the times

With the advent of new technologies and need of the hour, NTA has also geared up its mechanism of imparting trainings. In the changed times, NTA is devising and imparting e-trainings by video conference tools and other suitable online applications, cutting costs on one hand and ensuring maximum participation on the other.

Some of the Training conducted by NTA during F.Y. 2022-23 are as under:

1	Capacity Building Programme on "Occupational Disease"
2	Capacity Building Digital Literacy Training Programme
3	Common Inspection Scheme
4	ESIC Act, General office Procedures, Pay Fixation, Project Panchdeep, RTI, Inspection & Survey, Service Rules , Soft Skills etc.
5	"ICMR National Ethical Guidelines for Biomedical and Health Research involving human Participants 2017" And Relevant regulations of the country
6	"Latest guidelines of NTEP"
7	Training on "Gem & Procurement"
8	Training Programme For IO/PO.
9	Training Programme of Accounts Cadre of ESI in the work profile & procedures of Divisional Accounts in CPWD
10	Training Programme on Effective Law Enforcement
11	Training on "Alzheimer and Dementia"
12	Finance & Accounts Division and Internal Audit
13	Training on Health & Hygiene, Sexual Harassment at Workplace, Dhanwantri Module, E-office etc.
14	Capacity Building Workshop on Official Language (Rajbhasha)
15	Training on GST/GFR-2017/e-Procurement/Taxation from General Branch, Cash Branch & Finance and Account Branch
16	The Art of Living Training Programme for Building Competence for personal Excellence

प्रशिक्षण विवरणी 01जनवरी, 2023 से 31 दिसम्बर, 2023							
TRAINING DETAIL FROM 01 January 2023 to 31 December 2023							
क्र. सं. S. No	दिनांक Date	विषय Topic	प्रशिक्षुओं Trainees	स्थान Venue	माध्यम Mode	सत्र Sessions	प्रतिभागियों की संख्या No. of Participants
1.	02.01.2023 to 06.01.2023	पैरामेडिकलस्टाफकेलिएक्षमतानिर्माणप्रशिक्षणकार्यक्रम Capacity Building Training Programme to Paramedical Staff	पैरामेडिकलस्टाफ अ.प्र.स.(द.क्षे.) Paramedical Staff (SZ)	अ.प्र.स. (द.क्षे.) ZTI (SZ)	Offline	5	36
2.	02.01.2023 to 06.01.2023	नवनियुक्त एम.टी.एस. (WZ) ईएसआईअधिनियम, सामान्यकार्यालयप्रक्रियाओं, आरटीआई, लाभ, राजस्व, कानूनी, वसूलीऔरवित्तकार्यों, ईआरपीमॉड्यूलआदिपर Induction Training for newly joined M.T.S. (WZ) on ESI Act, General office Procedures, RTI, benefits, Revenue, Legal, Recovery & Finance Functions, ERP Modules etc	नवप्रवेशितएम.टी.एस. (WZ) Newly Joined M.T.S. (WZ)	अ.प्र.स. (प.क्षे.) ZTI (WZ)	Offline	5	30
3.	09.01.2023 to 13.01.2023	नर्सिंग कार्मिकों के लिए क्षमता विकास प्रशिक्षण कार्यक्रम Capacity Building Training Programme to Nursing Personnel	पैरामेडिकलस्टाफ अ.प्र.स.(द.क्षे.) Paramedical Staff (SZ)	अ.प्र.स. (द.क्षे.) ZTI (SZ)	Offline	5	39
4.	10/01/2023 to 12/01/2023	व्यावसायिकरोगनियंत्रणकेलिएक्षमताविकासप्रशिक्षणकार्यक्रम "ODC Training" under Capacity Building Programme	दिल्ली और एनसीआर के चिकित्सक Doctors of Delhi/NCR	रा.प्र.अ. NTA	Offline	3	34

5.	16.01.2023 to 20.01.2023	नि.श्रे.लि. और उ.श्रे.लि. कर्मिकों के लिए क्षमता विकास प्रशिक्षण कार्यक्रम Capacity Building Training Programme LDC/UDCs	नि.श्रे.लि. और उ.श्रे.लि. LDC, UDC	अ.प्र.स. (द.क्षे.) ZTI (SZ)	Offline	5	24
6.	18/1/2023	"यूटीआई मॉड्यूल के कामकाज पर वीसी" "VC on Functioning of UTI Module"	गुजरात क्षेत्र के पैनलबद्ध अस्पताल और ईएसआईएस उपयोगकर्ता Gujarat Region empaneled Hospitals and ESIS Users	रा.प्र.अ. NTA	Online	1	100
7.	18.01.2023 to 20.01.2023	कार्यालय प्रक्रिया और टिप्पणी प्रारूपण पर क्षमता निर्माण प्रशिक्षण कार्यक्रम Capacity Building Training Programme on Office Procedure & Noting Drafting	नि.श्रे.लि., उ.श्रे.लि. और सहायक LDC, UDC, Assistant	अ.प्र.स. (पू.क्षे.) ZTI (EZ)	Offline	3	27
8.	23.01.2023 to 25.01.2023	ईएसआई अधिनियम, आचरण नियम, स्वास्थ्य और स्वच्छता, कार्यस्थल पर यौन उत्पीड़न, धनवंतरी मॉड्यूल, ई-ऑफिस, सॉफ्ट स्किल्स आदि पर पैरामेडिकल स्टाफ (पश्चिम क्षेत्र) के लिए सॉफ्ट स्किल ट्रेनिंग। Soft Skill Training for Paramedical Staff (West Zone) on ESI Act, Conduct Rules, Health & Hygiene, Sexual Harassment at Workplace, Dhanwantri Module, E-office, Soft Skills etc.	पैरामेडिकलकर्मचारी Paramedical Staff	अ.प्र.स. (प.क्षे.) ZTI(WZ)	Offline	3	25

9.	23.01.2023 to 27.01.2023	क्षमतानिर्माणपुनश्चर्याप्रशिक्षणकार्यक्रम Capacity Building Refresher Training Programme	स.सु.अ./शा. अ./का.अ./सहायक/(द.क्षे.) SSO/BMs/OS/Asistants (SZ)	अ.प्र.स. (द.क्षे.) ZTI (SZ)	Offline	5	32
10.	30.01.2023	राजभाषा पर क्षमता निर्माण कार्यशाला (राजभाषा) Capacity Building Workshop on Official Language (Rajbhasha)	एमटीएस, नि.श्रे.लि., उ.श्रे.लि. सहायक, और पैरामेडिकल कर्मचारी MTS, LDC, UDC, Assistant, Nursing & Paramedical Staffs	अ.प्र.स. (पू.क्षे.) ZTI (EZ)	Online	1	103
11.	30.01.2023 to 03.02.2023	पैरामेडिकल कर्मचारी के लिए क्षमता निर्माण प्रशिक्षण कार्यक्रम Capacity Building Training Programme to Paramedical Staff	पैरामेडिकल कर्मचारी (द.क्षे.) Paramedical Staff (SZ)	अ.प्र.स. (द.क्षे.) ZTI (SZ)	Offline	5	25
12.	06/2/2023	"यूटीआई मॉड्यूल के कामकाज पर वीसी" "VC on Functioning of UTI Module"	बिहार क्षेत्र के पैनल बद्ध अस्पताल और ईएसआईएस उपयोगकर्ता Bihar Region empaneled Hospitals and ESIS Users	रा.प्र.अ. NTA	Online	1	50
13.	06.02.2023 to 10.02.2023	पैरामेडिकल स्टाफ के लिए क्षमता निर्माण प्रशिक्षण कार्यक्रम Capacity Building Training Programme to Paramedical Staff	पैरामेडिकल कर्मचारी (द.क्षे.) Paramedical Staff (SZ)	अ.प्र.स. (द.क्षे.) ZTI (SZ)	Offline	5	29

14.	13.02.2023 to 17.02.2023	क्षमतानिर्माणप्रशिक्षणकार्यक्रम Capacity Building Training Programme	स.सु.अ./शा. अ./का.अ./सहायक/(द.क्षे.) SSO/BMs/OS/As sistants (SZ)	अ.प्र.स. (द.क्षे.) ZTI (SZ)	Offline	5	28
15.	13.02.2023 to 17.02.2023	नएभर्तीहुएयूडीसीकेलिएइंडक्शनट्रेनिंग Induction Training for newly recruited UDCs	उ.श्रे.लि. UDC	अ.प्र.स. (प.क्षे.) ZTI (WZ)	Offline	5	30
16.	14.02.2023 to 16.02.2023	आईओ/पीओ के लिए प्रशिक्षण कार्यक्रम Training Programme for IO/PO	AD/DD	रा.प्र.अ. NTA	Offline	3	15
17.	15.02.2023 to 17.02.2023	लेखा परीक्षा, लेखा, बजट, वित्तीय प्रबंधन पर क्षमता निर्माण कार्यशाला Capacity Building Workshop on Audit, Accounting, Budgeting, Financial Management	नि.श्रे.लि., उ.श्रे.लि. LDC, UDC	अ.प्र.स. (पू.क्षे.) ZTI (EZ)	Offline	3	27
18.	16/02/2023	"यूटीआई मॉड्यूल के कामकाज पर वीसी" "VC on Functioning of UTI Module"	गोवा और महाराष्ट्र क्षेत्र के पैनेलबद्ध अस्पताल और ईएसआईएस उपयोगकर्ता Goa & Maharashtra Region empaneled Hospitals and ESIS Users	रा.प्र.अ. NTA	Online	1	150
19.	20.02.2023 to 24.02.2023	नि.श्रे.लि., उ.श्रे.लि. के लिए क्षमता निर्माण प्रशिक्षण कार्यक्रम Capacity Building Training Programme to LDC/UDCs	नि.श्रे.लि., उ.श्रे.लि. LDC, UDC	अ.प्र.स. (द.क्षे.) ZTI (SZ)	Offline	5	34

20.	20.02.2023 to 24.02.2023	नए भर्ती हुए यूडीसी के लिए इंडक्शन ट्रेनिंग Induction Training for newly recruited UDCs	उ.श्रे.लि. UDC	अ.प्र.स. (पू.क्षे.) ZTI (EZ)	Offline	5	27
21.	27.02.2023 to 03.03.2023	पैरामेडिकलस्टाफकेलिएक्षमतानिर्माणप्रशिक्षणकार्यक्रम Capacity Building Training Programme to Paramedical Staff	पैरामेडिकलकर्मचारी(द.क्षे.) Para-Medical Staff	अ.प्र.स. (द.क्षे.) ZTI (SZ)	Offline	5	33
22.	27.02.2023 to 01.03.2023	आईओ/पीओ के लिए प्रशिक्षण कार्यक्रम Training Programme for IO/PO	AD/DD	रा.प्र.अ. NTA	Offline	3	18
23.	06.03.23 to 10.03.23	प्रवेश प्रशिक्षण और क्षमता निर्माण पुनश्चर्या प्रशिक्षण कार्यक्रम (ऑफलाइन) Capacity Building Refresher Training Programme (Offline)	नि.श्रे.लि., उ.श्रे.लि. LDC, LDCs	अ.प्र.स. (द.क्षे.) ZTI (SZ)	Offline	5	30
24.	13.03.23 to 17.03.23	प्रवेश प्रशिक्षण (ऑफलाइन) Induction training (Offline)	उ.श्रे.लि. UDC	अ.प्र.स. (प.क्षे.) ZTI (WZ)	Offline	5	28
25.	13.03.23 to 17.03.23	प्रवेश प्रशिक्षण और क्षमता निर्माण पुनश्चर्या प्रशिक्षण कार्यक्रम (ऑफलाइन) Capacity Building Refresher Training Programme (Offline)	पैरामेडिकलकर्मचारी(द.क्षे.) Para-Medical Staff	अ.प्र.स. (द.क्षे.) ZTI (SZ)	Offline	5	21
26.	15.03.23 to 16.03.23	ऑनलाइन क्षमता निर्माण डिजिटल साक्षरता प्रशिक्षण कार्यक्रम (ऑनलाइन) Online Capacity Building Digital Literacy Training Programme (Online)	एमटीएस, नि.श्रे.लि., उ.श्रे.लि. सहायक, और पैरामेडिकल कर्मचारी MTS/LDC/UDC/ Para-Medical Staff	अ.प्र.स. (द.क्षे.) ZTI (SZ)	Online	2	51

27.	16.03.23	"गर्मी से संबंधित बीमारियों पर वीसी" "VC on Heat Related Illnesses"	चिकित्सक, ईएसआईसी भारत Doctors, ESIC India	रा.प्र.अ. NTA	Online	1	100
28.	17.03.23	"यूटीआई मॉड्यूल के कामकाज पर वीसी" "VC on Functioning of UTI Module"	तेलंगाना क्षेत्र के पैनलबद्ध अस्पताल और ईएसआईएस उपयोगकर्ता Telangana Region empaneled Hospitals and ESIS Users	रा.प्र.अ. NTA	Online	1	100
29.	20.03.23	ऑनलाइन क्षमता निर्माण डिजिटल साक्षरता प्रशिक्षण कार्यक्रम (ऑनलाइन) Online Capacity Building Digital Literacy Training Programme (Online)	नर्सिंग अर्दली/ एमटीएस, नि.श्रे.लि., उ.श्रे.लि. Nursing Orderly/MTS/LD C/UDC	अ.प्र.स. (पू.क्षे.) ZTI (EZ)	Online	1	51
30	22.03.23 to 24.03.23	सेवानिवृत्तियोजनापरकार्यशाला (ऑफलाइन) Workshop on Retirement Planning (Offline)	एमटीएस, नि.श्रे.लि., उ.श्रे.लि., सहायक MTS/LDC/UDC/ Assistant	अ.प्र.स. (पू.क्षे.) ZTI (EZ)	Offline	3	24
31	23.03.23	पोस्ट कोविड कार्यस्थल व्यवहार पर वेबिनार" (ऑफलाइन) Webinar on Post Covid Workplace Behaviour" (Offline)	नर्सिंग कार्मिक / पैरा-मेडिकल स्टाफ/ नि.श्रे.लि., उ.श्रे.लि., सहायक/ स.सु.अ./शा. अ. Nursing Personnel/Para- Medical	अ.प्र.स. (द.क्षे.) ZTI (SZ)	Offline	1	53

			Staff/LDC/UDC, Assis./SSO/BM				
32	23.03. 23 to 25.03. 23	बेसिक लाइफ सपोर्ट और सॉफ्ट स्किल्स पर क्षमता निर्माण कार्यशाला (ऑफलाइन) Capacity Building Workshop on Basic Life Support & Soft Skills (Offline)	नर्सिंग कार्मिक / पैरा-मेडिकल स्टाफ Nursing Personnel/Para- Medical Staff	अ.प्र.स. (द.क्षे.) ZTI (SZ)	Off ine	3	27
33	27.03. 23 to 29.03. 23	सेवानिवृत्त होने वाले ग्रुप 'सी' अधिकारियों के लिए सेवानिवृत्ति योजना पर कार्यशाला (ऑफलाइन) Workshop on Retirement Planning to Retiring Group 'C' Officials(offline)	सेवानिवृत्त होने वाले ग्रुप 'सी' अधिकारी Retiring Group'C' Officials	अ.प्र.स. (द.क्षे.) ZTI (SZ)	Off ine	3	15
34	27.03. 23 to 31.03. 23	प्रवेश प्रशिक्षण और क्षमता निर्माण पुनश्चर्या प्रशिक्षण कार्यक्रम (ऑफलाइन) Induction training and Capacity Building Refresher Training Programme (Offline)	नि.श्रे.लि., उ.श्रे.लि., सहायक LDC/UDC/Assist ant	अ.प्र.स. (पू.क्षे.) ZTI (EZ)	Off ine	5	29
35	27.03. 23 to 31.03. 23	प्रवेश प्रशिक्षण (ऑफलाइन) Induction training (Offline)	नि.श्रे.लि., उ.श्रे.लि., सहायक LDC/UDC/Assist ant	अ.प्र.स. (प.क्षे.) ZTI (WZ)	Off ine	5	30
36	03.04. 2023 to07.0 4.2023	प्रवर श्रेणी लिपिको के लिए प्रवेश प्रशिक्षण Induction Training for UDC	नवनियुक्त प्रवर श्रेणी लिपिक Newly recruited UDC	अ.प्र.स. (द.क्षे.) ZTI (SZ)	Off ine	20	25
37	10.04. 2023	यू.टी.आई मॉड्यूल की कार्यप्रणाली पर ऑनलाइन प्रशिक्षण OnlineTraining on "functioning of UTI Module"	छत्तीसगढ़ क्षेत्र के पैनलबद्ध अस्पताल और ईएसआईएस उपयोगकर्ता Chattisgarh Region empaneled	रा.प्र.अ. NTA	Onl ine	1	80

			Hospitals and ESIS Users				
38	10.04.2023 to 13.04.2023	क्षमता निर्माण प्रशिक्षण कार्यक्रम Capacity Building Training Programme	सहायक Assistant	अ.प्र.स. (पू.क्षे.) ZTI (EZ)	Offline	15	37
39	10.04.2023 to 14.04.2023	क्षमता निर्माण प्रशिक्षण कार्यक्रम Capacity Building Training Programme	नर्सिंग कार्मिक Nursing Personnel	अ.प्र.स. (द.क्षे.) ZTI (SZ)	Offline	20	15
40	13.04.2023	निक्शीऔर डोट्स सेंटर की सुविधाओं पर ऑनलाइन प्रशिक्षण Online Training on " facilities of NIKSHY & DOTS Centre"	दिल्ली के अस्पताल और औषधालयों के डॉक्टर Delhi Hospitals/ Dispensaries Doctors	रा.प्र.अ. NTA	Online	1	50
41	17.04.2023 to 21.04.2023	नव नियुक्त प्रवर श्रेणी लिपिकों के लिए प्रवेश प्रशिक्षण Induction Training for Newly recruited UDCs	प्रवर श्रेणी लिपिकों UDC	अ.प्र.स. (पू.क्षे.) ZTI (EZ)	Offline	19	35
42	17.04.2023 to 21.04.2023	क्षमता निर्माण पुनश्चर्याप्रशिक्षणकार्यक्रम Capacity Building Refresher Training Programme	सा.सु.अ/शा.प्र./का .अधि./सहायक SSO/BMs/OS/As sistants	अ.प्र.स. (द.क्षे.) ZTI (SZ)	Offline	20	28
43	17.04.2023 to 21.04.2023	नवनियुक्त प्र.श्रे.लि. (WZ) ईएसआईअधिनियम, सामान्यकार्यालयप्रक्रियाओं, आरटीआई, हितलाभ, राजस्व, कानूनी, वसूलीऔरवित्तकार्यों, ईआरपीमॉड्यूलआदिपर Induction Training for newly UDC (WZ) on ESI Act, General office Procedures, RTI, Benefits, Revenue, Legal,	नवनियुक्त प्र.श्रे.लि. newly UDCs	अ.प्र.स. (प.क्षे.) ZTI (WZ)	Offline	04	29

		Recovery & Finance Functions, ERP Modules etc.					
44	24.04.2023 to 28.04.2023	क्षमता निर्माण पुनश्चर्याप्रशिक्षण Capacity Building Refresher Training	अ.श्रे.लि., प्र.श्रे.लि. LDCs & UDCs	अ.प्र.स. (द.क्षे.) ZTI (SZ)	Offline	20	28
45	24.04.2023 to 28.04.2023	नव नियुक्त बहू कार्य कर्मिकों के लिए प्रवेश प्रशिक्षण Induction Training for Newly recruited MTSs	नव नियुक्त बहू कार्य कर्मिक Newly recruited MTS	अ.प्र.स. (पू.क्षे.) ZTI (EZ)	Offline	19	38
46	24.04.2023 to 28.04.2023	नवनियुक्त प्र.श्रे.लि. (WZ) ईएसआईअधिनियम, सामान्यकार्यालयप्रक्रियाओं, आरटीआई, हितलाभ, राजस्व, कानूनी, वसूलीऔरवित्तकार्यों, ईआरपीमॉड्यूलआदिपर Induction Training for newly UDC (WZ) on ESI Act, General office Procedures, RTI, Benefits, Revenue, Legal, Recovery & Finance Functions, ERP Modules etc.	नवनियुक्त प्र.श्रे.लि. newly UDC	अ.प्र.स. (प.क्षे.) ZTI (WZ)	Offline	04	30
47	26.04.2023 to 27.04.2023	क्षमता निर्माण डिजिटल साक्षरता पर ऑनलाइन प्रशिक्षण कार्यक्रम Online Capacity Building Digital Literacy Training Programme	बहू कार्य कर्मिक और अ.श्रे.लि., प्र.श्रे.लि., नर्सिंग कर्मिक, पैरा-मेडिकल स्टाफ Nursing Personnel, Para-medical Staff, MTS, LDC, UDC	अ.प्र.स. (द.क्षे.) ZTI (SZ)	Online	04	54
48	26.04.2023 to 27.04.2023	वित्त एवं लेखा प्रभाग और आंतरिक लेखापरीक्षा में तैनात अधिकारियों और कर्मचारियों के लिए प्रशिक्षण Training of the officers and staff posted in Finance &	D.D. (F), A.D.(F), S.S.O., Assistant, U.D.C	अ.प्र.स. (प.क्षे.) ZTI (WZ)	Offline	02	58

		Accounts Division and Internal Audit, held at Pune.					
49	01.05.2023 to 05.05.2023	क्षमता निर्माण पुनश्चर्याप्रशिक्षण Capacity Building Refresher Training	अ.श्रे.लि./प्र.श्रे.लि. LDC/UDC	अ.प्र.स. (द.क्षे.) ZTI (SZ)	Offline	05	18
50	08.05.2023 to 12.05.2023	प्रवेश प्रशिक्षण Induction Training	बहू कार्य कार्मिक MTS	अ.प्र.स. (द.क्षे.) ZTI (SZ)	Offline	05	30
51	09.05.2023 to 12.05.2023	क्षमता निर्माण प्रशिक्षण कार्यक्रम Capacity Building Training Programme	पैरा-मेडिकल स्टाफ Para-Medical Staff	अ.प्र.स. (पू.क्षे.) ZTI (EZ)	Offline	04	34
52	10.05.2023 to 12.05.2023	Soft Skill Training for Para-Medical Staff (West Zone) on ESI Act, Conduct Rules, Health & Hygiene, E-office, Sexual Harassment at work Place, Dhanwantri Module, Soft Skills & Service Rules etc	पैरा-मेडिकल स्टाफ Para-Medical Staff	अ.प्र.स. (प.क्षे.) ZTI (WZ)	Offline	03	25
53	15.05.2023 to 19.05.2023	क्षमता निर्माण पुनश्चर्याप्रशिक्षणकार्यक्रम Capacity Building Refresher Training Programme	सा.सु.अ/शा.प्र./का .अधि./सहायक SSO/BMs/OS/As sistants	अ.प्र.स. (द.क्षे.) ZTI (SZ)	Offline	05	33
54	15.05.2023 to 19.05.2023	प्रवेश प्रशिक्षण Induction Training	नवनियुक्त प्र.श्रे.लि. Newly Recruited UDCs	अ.प्र.स. (पू.क्षे.) ZTI (EZ)	Offline	05	38
55	15.05.2023 to 26.05.2023	नवनियुक्त प्र.श्रे.लि. (WZ) ईएसआईअधिनियम, सामान्यकार्यालयप्रक्रियाओं, आरटीआई, हितलाभ, राजस्व, कानूनी, वसूलीऔरवित्तकार्यों, ईआरपीमॉड्यूलआदिपर	नवनियुक्त प्र.श्रे.लि. Newly Recruited UDCs	अ.प्र.स. (प.क्षे.) ZTI (WZ)	Offline	10	35

		Induction Training for newly joined M.T.S. (West Zone) on ESI Act, General office Procedures, RTI, Benefits, Revenue, Legal, Recovery & Finance Functions, ERP Modules etc.					
56	22.05.2023 to 26.05.2023	प्रवेश प्रशिक्षण Induction Training	नव नियुक्तसा.सु.अ Newly Recruited SSOs	अ.प्र.स. (पू.क्षे.) ZTI (EZ)	Offl ine	05	34
57	22.05.2023 to 26.05.2023	क्षमता निर्माण प्रशिक्षण कार्यक्रम Capacity Building Training Programme	पैरा-मेडिकल स्टाफ Para-Medical Staff	अ.प्र.स. (द.क्षे.) ZTI (SZ)	Offl ine	05	33
58	29.05.2023 to 09.06.2023 (Continuing)	प्रवेश प्रशिक्षण Induction Training	नवनियुक्त प्र.श्रे.लि. Newly Recruited UDCs	अ.प्र.स. (द.क्षे.) ZTI (SZ)	Offl ine	10	40
59	31.05.2023	यू.टी.आई मॉड्यूल की कार्यप्रणाली पर ऑनलाइन प्रशिक्षण Online Training on "functioning of UTI Module"	उत्तर पूर्व के इम्पेनल अस्पताल और ईएसआईसी उपयोगकर्ता North East Region Empaneled Hospitals and ESIC Users	रा.प्र.अ. NTA	Onl ine	1	80
60	29.05.2023 to 02.06.2023	नवनियुक्त एम.टी.एस. (WZ) ईएसआईअधिनियम, सामान्यकार्यालयप्रक्रियाओं, आरटीआई, हितलाभ, राजस्व, कानूनी, वसूलीऔरवित्तकार्यो, ईआरपीमॉड्यूलआदिपर	बहू कार्य कार्मिक M.T.S. (West Zone)	अ.प्र.स. (प.क्षे.) ZTI (WZ)	Offl ine	05	21

		Induction Training for newly joined M.T.S. (West Zone) on ESI Act, General office Procedures, RTI, Benefits, Revenue, Legal, Recovery & Finance Functions, ERP Modules etc.					
61	05.06.2023 to 09.06.2023	नव नियुक्त बहू कार्य कर्मिकों के लिए प्रवेश प्रशिक्षण Induction Training for newly recruited M.T.S.	बहू कार्य कर्मिक M.T.S. (East Zone)	अ.प्र.स. (पू.क्षे.) ZTI (EZ)	Offline	05	33
62	12.06.2023 to 16.06.2023	क्षमता निर्माण प्रशिक्षण कार्यक्रम Capacity Building Training Programme	सा.सु.अ/शा.प्र./का.अधि./सहायक SSO/BMs/OS/As sistants	अ.प्र.स. (द.क्षे.) ZTI (SZ)	Offline	05	23
63	12.06.2023 to 16.06.2023	नवनियुक्त एम.टी.एस. (WZ) ईएसआईअधिनियम, सामान्यकार्यालयप्रक्रियाओं, आरटीआई, हितलाभ, राजस्व, कानूनी, वसूलीऔरवित्तकार्यों, ईआरपीमॉड्यूलआदिपर Induction Training for newly joined M.T.S. (West Zone) on ESI Act, General office Procedures, RTI, Benefits, Revenue, Legal, Recovery & Finance Functions, ERP Modules etc.	बहू कार्य कर्मिक M.T.S. (West Zone)	अ.प्र.स. (प.क्षे.) ZTI (WZ)	Offline	05	22
64	12.06.2023 to 23.06.2023	नव नियुक्त प्रवर श्रेणी लिपिकों के लिए प्रवेश प्रशिक्षण Induction Training for newly recruited UDC	प्रवर श्रेणी लिपिक UDC	अ.प्र.स. (पू.क्षे.) ZTI (EZ)	Offline	10	33
65	14.06.2023	"यूटीआई मॉड्यूल की कार्यप्रणाली पर वीसी" Online Training on "functioning of UTI Module"	तमिलनाडु क्षेत्र के इम्पैनल अस्पताल और ईएसआईसी उपयोगकर्ता	रा.प्र.अ. NTA	Online	01	150

			Tamilnadu Region Empaneled Hospitals and ESIC Users				
66	14.06.2023 to 15.06.2023	क्षमता निर्माण डिजिटल साक्षरता पर ऑनलाइन प्रशिक्षण कार्यक्रम Online Capacity Building Digital Literacy Training Programme	बहू कार्य कार्मिक और अवर श्रेणी लिपिक, नर्सिंग अर्दली और अन्य जूनियर लेवल के पैरा-मेडिकल स्टाफ MTS, LDC, Nursing Orderlies and Other Junior level Para-medical Staff	अ.प्र.स. (द.क्षे.) ZTI (SZ)	Online	02	54
67	19/06/23	"यूटीआई मॉड्यूल की कार्यप्रणाली पर वीसी" Online Training on "functioning of UTI Module"	दिल्ली/एनसीआर क्षेत्र के इम्पेनल अस्पताल और ईएसआईसी उपयोगकर्ता Delhi/NCR Region Empaneled Hospitals and ESIC Users	रा.प्र.अ. NTA	Online	01	60
68	19.06.2023 to 20.06.2023	आईओ/पीओ के लिए प्रशिक्षण कार्यक्रम Online Training Programme for IOs/POs	IOs/POs Doctors/MS/Dea n/ AC/ Director/JD/DD/ AD	रा.प्र.अ. NTA	Online	02	455
69	19.06.2023 to 23.06.2023	नवनियुक्त एम.टी.एस. (WZ) ईएसआईअधिनियम, सामान्यकार्यालयप्रक्रियाओं, आरटीआई, हितलाभ, राजस्व,	बहू कार्य कार्मिक M.T.S. (West Zone)	अ.प्र.स. (प.क्षे.) ZTI (WZ)	Offline	05	22

		कानूनी, वसूली और वित्त कार्य, ईआरपी मॉड्यूल आदि पर Induction Training for newly joined M.T.S. (West Zone) on ESI Act, General office Procedures, RTI, Benefits, Revenue, Legal, Recovery & Finance Functions, ERP Modules etc.					
70	19.06.2023 to 23.06.2023	क्षमता निर्माण प्रशिक्षण कार्यक्रम Capacity Building Training Programme	बहू कार्य कार्मिक और अवर श्रेणी लिपिक LDCs & UDCs	अ.प्र.स. (द.क्षे.) ZTI (SZ)	Offline	05	27
80	22/06/23	'मॉडर्न लाइफस्टाइल में प्राणायाम, योग और मेडिटेशन की भूमिका पर ऑनलाइन प्रशिक्षण Online Training on "Role of Yoga, Pranayam and Meditation in modern lifestyle"	ईएसआईसी चिकित्सा कॉलेज अस्पताल और दिल्ली औषधालय ESIC Medical Colleges, Hospitals and Delhi Dispensaries	रा.प्र.अ. NTA	Online	01	140
81	26.06.2023 to 30.06.2023	प्रवेश प्रशिक्षण Induction Training	बहू कार्य कार्मिक और अवर श्रेणी लिपिक MTS & LDCs	अ.प्र.स. (द.क्षे.) ZTI (SZ)	Offline	05	28
82	27.06.2023 to 28.06.2023	क्षमता निर्माण डिजिटल साक्षरता पर ऑनलाइन प्रशिक्षण कार्यक्रम Online Capacity Building Digital Literacy Training Programme	बहू कार्य कार्मिक और अवर श्रेणी लिपिक, नर्सिंग अर्दली और अन्य जूनियर लेवल के पैरा-मेडिकल स्टाफ MTS, LDC, Nursing Orderlies and Other Junior	अ.प्र.स. (द.क्षे.) ZTI (SZ)	Online	02	54

			level Para-medical Staff				
83	28/06/23	सॉफ्ट स्किल का ऑनलाईन प्रशिक्षण Online Training on "Soft Skill"	भारत के ईएसआईसी नर्सिंग और पैरामेडिकल कार्मिक Nursing & Para-medical Staff of ESIC, India	रा.प्र.अ. NTA	Online	01	202

S.No	Date	Topic	Trainees	Venue	Mode	Sessions/Days	No. of Participants
84	07/07/23	"यूटीआई मॉड्यूल की कार्यप्रणाली" पर ऑनलाईन प्रशिक्षण Online Training on "functioning of UTI Module"	उत्तर-पूर्वी क्षेत्र के पैनेल अस्पताल तथा कराबीनि प्रयोगकर्ता North East Region Empaneled Hospitals and ESIC Users	NTA	Online	1	44
85.	03.07.2023 to 07.07.2023	क्षमता निर्माण प्रशिक्षण कार्यक्रम Capacity Building Training Programme	पूर्वी क्षेत्र के बहु कार्य कर्मचारी MTS of EZ	ZTI (EZ)	Offline	05	35
86	03.07.2023 to 07.07.2023	पुनश्चर्या प्रशिक्षण Induction Training	प्रवर श्रेणी लिपिक UDCs	ZTI (SZ)	Offline	05	21
87	10.07.2023 to 14.07.2023	क्षमता निर्माण प्रशिक्षण कार्यक्रम Capacity Building Training Programme	नर्सिंग कार्मिक Nursing Personnel	ZTI (SZ)	Offline	05	28

88	10.07.2023 to 21.07.2023	नव नियुक्त प्रवर श्रेणी लिपिको के लिए प्रवेश प्रशिक्षण Induction Training for newly recruited UDC	पू.क्षे. के प्रवर श्रेणी लिपिक UDC of EZ	ZTI (EZ)	Offline	10	30
89	17.07.2023 to 18.07.2023	लैंगिक मामले तथा कार्यस्थल पर महिलाओं के यौन शोषण की रोकथाम' विषय पर ऑनलाइन प्रशिक्षण Online Training on "Gender issues and Prevention of Sexual Harassment of Women at Workplace	सभी कराबीनि कार्मिक All ESIC Staff	NTA	Online	02	677
90	17.07.2023 to 21.07.2023	क्षमता निर्माण प्रशिक्षण कार्यक्रम Capacity Building Refresher Training Programme	सा.सु.अ/शा.प्र./का. अधि./सहायक SSO/BMs/OS/Assistants	ZTI (SZ)	Offline	05	35
91	17.07.2023 to 28.07.2023	नव नियुक्त प्रवर श्रेणी लिपिको के लिए प्रवेश प्रशिक्षण Induction Training for newly recruited UDC	प्रवर श्रेणी लिपिक UDC of WZ	ZTI (WZ)	Offline	10	24
92	19/07/23	सॉफ्ट स्किल का ऑफलाइन प्रशिक्षण Offline Training on "Soft Skill"	दिल्ली/ एनसीआर के नर्सिंग कार्मिक, पैरा-मेडिकल स्टाफ Nursing & Paramedical Staff of ESIC Delhi/NCR	NTA	Offline	1	34
93	20/07/23	सॉफ्ट स्किल का ऑफलाइन प्रशिक्षण Offline Training on "Soft Skill"	दिल्ली/ एनसीआर के चिकित्सा अधिकारी Medical Officers of Delhi/NCR	NTA	Offline	1	33

94	21/07/23	"यूटीआई मॉड्यूल की कार्यप्रणाली" पर ऑनलाइन प्रशिक्षण Online Training on "functioning of UTI Module"	गुजरात के पैनेल अस्पताल तथा कराबीनि प्रयोगकर्ता Gujarat Region Empaneled Hospitals and ESIC Users	NTA	Online	1	40
95	19.07.2023 to 20.07.2023	क्षमता निर्माण डिजिटल साक्षरता पर ऑनलाइन प्रशिक्षण कार्यक्रम Online Capacity Building Digital Literacy Training Programme	बहू कार्य कार्मिक और अवर श्रेणी लिपिक और अन्य जूनियर लेवल के पैरा-मेडिकल स्टाफ MTS, LDC and Other Junior level Para-medical Staff	ZTI (SZ)	Online	02	55
96	24.07.2023 to 28.07.2023	क्षमता निर्माण प्रशिक्षण कार्यक्रम Capacity Building Training Programme	पैरा-मेडिकल स्टाफ Paramedical Staff	ZTI (EZ)	Offline	05	38
97	24.07.2023 to 28.07.2023	क्षमता निर्माण प्रशिक्षण कार्यक्रम Capacity Building Refresher Training Programme	अवर श्रेणी लिपिक और प्रवर श्रेणी लिपिक LDCs & UDCs	ZTI (SZ)	Offline	05	27
98	24.07.2023 to 29.07.2023	Management Development Programme	उप निदेशक DD	NTA (VGSO M)	Offline	06	30
99	28/7/23	"यूटीआई मॉड्यूल की कार्यप्रणाली" पर ऑनलाइन प्रशिक्षण Online Training on "functioning of UTI Module"	राजस्थान के पैनेल अस्पताल तथा कराबीनि प्रयोगकर्ता Rajasthan Region Empaneled Hospitals and ESIC Users	NTA	Online	1	80
100	31/7/23	Online Training on "Update on Diabetes"	भारत के चिकित्सा अधिकारी Medical	NTA	Online	1	90

			Officers of ESIC India				
101	31.07.2023 to 04.08.2023	क्षमता निर्माण प्रशिक्षण कार्यक्रम Capacity Building Training Programme	पैरा-मेडिकल स्टाफ Paramedical Staff	ZTI (SZ)	Offline	05	40
102	31.07.2023 to 16.08.2023	Administrative Training Programme	उप निदेशक DD	NTA (VVGNL I)	Offline	14	30
103	31/7/23 to 4/8/23	पुनश्चर्या प्रशिक्षण Induction Training	बहू कार्य कार्मिक MTS	WZ, ZTI	Offline	5	17
104	31/7/23 to 4/8/23	क्षमता निर्माण प्रशिक्षण कार्यक्रम Capacity Building Training	SSOs	ZTI,EZ	Offline		35
105	4/8/23	"यूटीआई मॉड्यूल की कार्यप्रणाली" पर ऑनलाइन प्रशिक्षण Online Training on "functioning of UTI Module"	उड़ीसा के पैनेल अस्पताल तथा कराबीनि प्रयोगकर्ता Odisha Region Empaneled Hospitals and ESIC Users		Online	1	60
106	7-11/8/23	पुनश्चर्या प्रशिक्षण Induction Training	बहू कार्य कार्मिक MTS	ZTI,WZ	Offline	5	18
107	7-11/8/23	पुनश्चर्या प्रशिक्षण Induction Training	बहू कार्य कार्मिक MTS	ZTI,EZ	Offline	5	36
108	7-11/8/23	पुनश्चर्या प्रशिक्षण Induction Training	प्रवर श्रेणी लिपिक/ आशुलिपिक UDCs /Stenographers	ZTI,SZ	Offline	5	34
109	9/8/23	"सूचना का अधिकार अधिनियम, 2005" (एनटीए) " Right to Information Act, 2005" (NTA)	सभी संवर्ग All cadets	NTA	Online	1	170

110	9/8/23	"स्वास्थ्य सेवा के कानूनी पहलू" पर ऑनलाइन प्रशिक्षण Online Training on "Legal aspects of Healthcare"	ईएसआईसी भारत के चिकित्सा अधिकारी Medical Officers of ESIC India	NTA	Online	1	202
111	11/8/23	बीएमडब्ल्यू और हाथ की स्वच्छता पर ऑफलाइन प्रशिक्षण Offline Training on BMW & Hand Hygiene	चिकित्सा अधिकारी/नोडल अधिकारी- ईएसआईसी इंडिया की बीएमडब्ल्यू Medical Officers/Nodal Officer-BMW of ESIC India	NTA	Offline	1	28
112	14-18/8/23	क्षमता निर्माण कार्यक्रम Capacity Building Programme	नर्सिंग कार्मिक Nursing Personnel	ZTI,SZ	Offline	5	38
113	16-17/8/23	क्षमता निर्माण डिजिटल साक्षरता पर ऑनलाइन प्रशिक्षण कार्यक्रम Online Capacity Building Digital Literacy Training Programme	बहु कार्य कार्मिक और अवर श्रेणी लिपिक /नर्सिंग अर्दली और अन्य जूनियर स्तर के पैरामेडिकल स्टाफ MTS/LDC/Nursing orderlies and other junior level Paramedical Staff	ZTI,SZ	Online	2	50+
114	18/8/23	"मरीज़ के अधिकार और मरीज़ की सुरक्षा" पर ऑनलाइन प्रशिक्षण Online Training on "Patient's Right and Patient's safety"	ईएसआईसी भारत के चिकित्सा अधिकारी Medical Officers of ESIC India	NTA	Online	1	80

115	21/8/23 to 5/9/23	"प्रशासनिक प्रशिक्षण कार्यक्रम": ईएसआईसी के उप निदेशक से क्षेत्रीय निदेशक 'बी'/संयुक्त निदेशक के पद पर पदोन्नति के लिए अनिवार्य प्रशिक्षण "Administrative Training Programme" : Mandatory Training for promotion from Deputy Director to Regional Director 'B'/Joint Director of ESIC	उप निदेशक DD	NTA, VVG NLI	Offline	16	28
116	21- 26/8/23	बैच- II "प्रबंधन विकास कार्यक्रम": ईएसआईसी के उप निदेशक से क्षेत्रीय निदेशक 'बी'/संयुक्त निदेशक के पद पर पदोन्नति के लिए अनिवार्य प्रशिक्षण Batch- II "Management Development Programme" : Mandatory Training for promotion from Deputy Director to Regional Director 'B'/Joint Director of ESIC	उप निदेशक DD	NTA	Offline	6	29
117	21- 25/8/23	पुनश्चर्या प्रशिक्षण Induction Training	बहु कार्य कार्मिक MTS	ZTI,WZ	Offline	5	17
118	21- 25/8/23	क्षमता निर्माण प्रशिक्षण कार्यक्रम	UDCs	ZTI,EZ	Offline	5	37

		Capacity Building Refresher Training Programme					
119	21-25/8/23	क्षमता निर्माण प्रशिक्षण कार्यक्रम Capacity Building Refresher Training Programme	SSO/BMs/OS/PA & Assistants.	ZTI,SZ	Offline	5	26
120	22/8/23	"डेंगू बुखार के निदान और उपचार में हालिया रुझान" पर ऑनलाइन प्रशिक्षण Online Training on "Recent trend in diagnosis and treatment of Dengue Fever"	भारत के चिकित्सा अधिकारी Medical Officers of ESIC India	NTA	Online	1	120
121	28-29/8/23	"गर्भनिरोधक अद्यतन, सुरक्षित गर्भपात और एमटीपी अधिनियम" पर ऑफलाइन प्रशिक्षण Offline Training on "Contraceptive Updates, Safe Abortion and MTP Act"	दिल्ली/ एनसीआर के क रा बी नि चिकित्सा अधिकारी Medical Officers of ESIC Delhi/NCR	NTA	Offline	2	27
122	28/8/23 to 01/09/23	पुनश्चर्या प्रशिक्षण Induction Training	बहू कार्य कार्मिक MTS	ZTI,SZ	Offline	5	23
123	28/8/23 to 01/09/23	क्षमता निर्माण प्रशिक्षण कार्यक्रम Capacity Building Training	सहायक Assistants	ZTI,EZ	Offline	5	39
124	11/9/23	"आरटीआई अधिनियम'2005" पर ऑनलाइन प्रशिक्षण Online Training on "RTI Act'2005"	क रा बी नि भारत के चिकित्सा अधिकारी Medical Officers of ESIC India	NTA	Online	1	150

125	15/9/23	"सामग्री प्रबंधन" पर ऑनलाइन प्रशिक्षण Online Training on "Material Management"	क रा बी नि भारत के चिकित्सा अधिकारी Medical Officers of ESIC India	NTA	Online	1	140
126	18/9/23	"सार्वजनिक खरीद" पर ऑनलाइन प्रशिक्षण Online Training on "Public Procurement"	क रा बी नि भारत के चिकित्सा अधिकारी Medical Officers of ESIC India	NTA	Online	1	160
127	21/9/23	"नैतिकता और शासन" पर ऑनलाइन प्रशिक्षण Online Training on "Ethics & Governance"	क रा बी नि भारत के चिकित्सा अधिकारी Medical Officers of ESIC India	NTA	Online	1	100
128	26/9/23	"उपकरण प्रबंधन" पर ऑनलाइन प्रशिक्षण Online Training on "Equipment Management"	क रा बी नि भारत के चिकित्सा अधिकारी Medical Officers of ESIC India	NTA	Online	1	110
129	11/9/23 to 22/9/23	नवनियुक्त यूडीसी के लिए प्रेरण प्रशिक्षण Induction Training for newly recruited UDCs	प्रवर श्रेणी लिपिक UDCs	ZTI,EZ	Offline	12	36
130	25/9/23 to 27/9/23	क्षमता निर्माण प्रशिक्षण कार्यक्रम Capacity Building Training Programme	ड्रेसर/नर्सिंग एवं पैरामेडिकल स्टाफ Dressers/nursing & paramedical staff	ZTI,EZ	Offline	3	38
131	28/8/23 to 1/9/23	नव नियुक्त बहु कार्य कार्मिकों के लिए प्रवेश प्रशिक्षण Induction Training for newly recruited MTS	बहु कार्य कार्मिक MTSs	ZTI,SZ	Offline	5	23
132	4/9/23 to 8/9/23	पुनश्चर्या प्रशिक्षण Induction Training	यूडीसी/आशुलिपिक UDCs/Stenographer	ZTI,SZ	Offline	5	20

133	11/9/23 to 15/9/23	क्षमता निर्माण पुनश्चर्या प्रशिक्षण कार्यक्रम Capacity Building Refresher Training Programme	एलडीसी और यूडीसी LDC & UDCs	ZTI,SZ	Offline	5	22
134	18/9/23 to 22/9/23	पैरामेडिकल स्टाफ के लिए क्षमता निर्माण प्रशिक्षण कार्यक्रम Capacity Building Training Programme for paramedical staff	नर्सिंग कार्मिक स्टाफ Nursing personnel staff	ZTI,SZ	Offline	5	52
135	25/9/23 to 29/9/23	पैरामेडिकल स्टाफ के लिए क्षमता निर्माण प्रशिक्षण कार्यक्रम Capacity Building Training Programme for paramedical staff	पैरा-मेडिकल स्टाफ paramedical staff	ZTI,SZ	Offline	5	42
136	13/9/23 to 14/9/23	क्षमता निर्माण डिजिटल साक्षरता पर ऑनलाइन प्रशिक्षण कार्यक्रम Online Capacity Building Digital Literacy Training Programme	एमटीएस, एलडीसी, नर्सिंग ऑर्डरली और अन्य जूनियर स्तर के पैरामेडिकल स्टाफ MTS,LDC,Nursing Orderlies AND OTHER Junior level paramedical staff	ZTI,SZ	Online	2	42
137	4/9/23 to 15/9/23	नव नियुक्त प्रवर श्रेणी लिपिको के लिए प्रवेश प्रशिक्षण Induction Training for newly recruited UDC	प्रवर श्रेणी लिपिक UDCs	ZTI,WZ	Offline	12	24
138	25/9/23 to 27/9/23	पैरा-मेडिकल स्टाफ के लिए सॉफ्ट स्किल प्रशिक्षण Soft Skill Training for paramedical staff	पैरा-मेडिकल स्टाफ paramedical staff	ZTI,WZ	Offline	3	22

139	11/9/23 to 26/9/23	"प्रशासनिक प्रशिक्षण कार्यक्रम" के लिए बैच - III: क रा बी नि में उप निदेशक से क्षेत्रीय निदेशक / संयुक्त निदेशक के पद पर पदोन्नति के लिए अनिवार्य प्रशिक्षण BATCH - III for "Administrative Training Programme" : Mandatory Training for promotion from Deputy Director to Regional Director 'B'/Joint Director of ESIC(NTA)	उप निदेशक DD	NTA, VVGNLI	Offline	16	31
140	11/9/23 to 16/9/23	प्रबंधन विकास कार्यक्रम : बैच- III": क रा बी नि में उप निदेशक से क्षेत्रीय निदेशक / संयुक्त निदेशक के पद पर पदोन्नति के लिए अनिवार्य प्रशिक्षण BATCH- III for Management Development Programme" : Mandatory Training for promotion from Deputy Director to Regional Director 'B'/Joint Director of ESIC(NTA)	उप निदेशक DD	NTA	Offline	6	31

141	25/9/23 to 30/9/23	प्रबंधन विकास कार्यक्रम के लिए बैच- IV: ईएसआईसी (एनटीए) के उप निदेशक से क्षेत्रीय निदेशक 'बी'/संयुक्त निदेशक के पद पर पदोन्नति के लिए अनिवार्य प्रशिक्षण BATCH- IV for Management Development Programme" : Mandatory Training for promotion from Deputy Director to Regional Director 'B'/Joint Director of ESIC(NTA)	उप निदेशक DD	NTA	Offline	6	29
142	4- 5/10/23	कैंसर के विभिन्न प्रकार और बचाव' पर ऑफलाइन प्रशिक्षण Offline Training "Various Types of Cancer-latest update and prevention"	दिल्ली/ एनसीआर, उत्तर क्षेत्र के चिकित्सा अधिकारी Medical Officers of ESIC Delhi/NCR, North Zone	NTA	Offline	02	28
143	02.10.2 023 to 06.10.2 023	क्षमता निर्माण पुनश्चर्या प्रशिक्षण Capacity Building Refresher Training	सा.सु.अ/शा.प्र./का. अधि./अनुवाद अधिकारी/ सहायक SSO/BMs/OS/PA/ Hindi Translator/Assista nt	ZTI (SZ)	Offline	05	17
144	03.10.2 023 to 06.10.2 023	नव नियुक्त बहू कार्य कार्मिक के लिए प्रारम्भिक प्रशिक्षण Induction Training for newly recruited	बहु कार्य कार्मिक MTS	ZTI (EZ)	Offline	34	04

145	9/10/23	यूटीआई मॉड्यूल की कार्यप्रणाली पर ऑनलाइन प्रशिक्षण Online Training on "functioning of UTI Module"	छत्तीसगढ़ के पैनल अस्पताल तथा कराबीनि प्रयोगकर्ता Chattisgarh Region Empaneled Hospitals and ESIC Users	NTA	Online	01	50
146	18/10/23	संक्रमण रोकथाम के मूल सिद्धांतों पर प्रशिक्षण Online Training on "Celebrating the Fundamentals of Infection Prevention"	क रा बी नि भारत के चिकित्सा अधिकारी Medical Officers of ESIC India	NTA	Online	01	220
147	19/10/23	नैतिकता और शासन पर ऑनलाइन प्रशिक्षण Online Training on "Ethics & Governance"	क रा बी नि भारत के चिकित्सा तथा गैर चिकित्सा अधिकारी Medical & Non Medical Officers of ESIC India	NTA	Online	01	530
148	20/10/23	खरीद पर ऑनलाइन प्रशिक्षण Online Training on "Procurement"	क रा बी नि भारत के चिकित्सा तथा गैर चिकित्सा अधिकारी Medical & Non Medical Officers of ESIC India	NTA	Online	01	520
149	09.10.2023 to 13.10.2023	प्रारम्भिक प्रशिक्षण Induction Training	प्रवर श्रेणी लिपिक तथा आशुलिपिक UDCs/Stenographers	ZTI (SZ)	Offline	05	31
150	09.10.2023 to 20.10.2023	प्रारम्भिक प्रशिक्षण Induction Training	प्रवर श्रेणी लिपिक UDCs	ZTI (EZ)	Offline	10	35
151	16.10.2023 to 20.10.2023	प्रारम्भिक प्रशिक्षण Induction Training for newly recruited	बहू कार्य कार्मिक MTS	ZTI (SZ)	Offline	05	22

152	16.10.2 023	आरक्षण मामलों पर ऑनलाइन प्रशिक्षण Online Training Programme on "Reservation Matters"	क रा बी नि भारत के सभी संवर्गों के अधिकारी और कर्मचारी All India Officers and Staff in different cadre	NTA	Online	1	225
153	18.10.2 023 to 19.10.2 023	क्षमता निर्माण डिजिटल साक्षरता प्रशिक्षण कार्यक्रम Online Capacity Building Digital Literacy Training Programme	बहू कार्य कार्मिक और अवर श्रेणी लिपिक नर्सिंग कार्मिक, कनिष्ठ पैरा-मेडिकल स्टाफ MTS/LDC/Nursing Orderlies & other junior Level Paramedical Staff	ZTI (SZ)	Online	02	54
154	27.10.2 023	जाँच अधिकारी/ पीठासीन अधिकारी के लिए ऑनलाइन प्रशिक्षण Online Training Programme for IOs/POs	उत्तर क्षेत्र के जाँच अधिकारी/ पीठासीन अधिकारी/ चि.अ./अ.आ./निदेश क/सं.नि.उप नि./सहा. नि. IOs/POs Doctors/MS/Dean / AC/ Director/JD/DD/A D of North Zone	NTA	Online	1	65
155	30.10.2 023 to 03.11.2 023	क्षमता निर्माण प्रशिक्षण कार्यक्रम Capacity Building Training Programme	पैरा-मेडिकल स्टाफ Paramedical Staff	ZTI (SZ)	Offline	05	22
156	30.10.2 023 to 03.11.2 023	क्षमता निर्माण प्रशिक्षण कार्यक्रम Capacity Building Training Programme	अवर श्रेणी लिपिक LDCs	ZTI (EZ)	Offline	05	25

157	03.11.2 023	साइबर सुरक्षा व साइबर स्वच्छता पर ऑनलाइन प्रशिक्षण online training on Cyber Security and Cyber Hygiene	सभी अधिकारी और कर्मचारी All ESIC Officer & Staff	NTA	Online	1	362
158	6- 8/11/23	प्रशासनिक मामलों पर ऑफलाइन प्रशिक्षण Offline Training on "Administrative Issues"	क रा बी नि भारत के चिकित्सा अधीक्षक Medical Superintendents, ESIC India	ESIH, Basai& AIIMS	Offline	3	42
159	06.11.2 023 to 10.11.2 023	प्रारम्भिक प्रशिक्षण Induction Training	प्रवर श्रेणी लिपिक तथा आशुलिपिक UDC/Stenographe r	ZTI (SZ)	Offline	05	20
160	06.11.2 023 to 10.11.2 023	क्षमता निर्माण प्रशिक्षण कार्यक्रम Capacity Building Training	सहायक Assistant	ZTI (EZ)	Offline	05	32
161	16.11.2 023 to 18.11.2 023	जीवन का मूल आधार तथा सॉफ्ट स्किल पर क्षमता निर्माण कार्यशाला Capacity Building workshop on Basic Life support & Soft skills	नर्सिंग कार्मिक/ पैरा- मेडिकल स्टाफ Nursing Personnel / Paramedical Staff	ZTI (SZ)	Offline	03	25
162	20.11.2 023 to 24.11.2 023	क्षमता निर्माण प्रशिक्षण कार्यक्रम Capacity Building Training	अवर श्रेणी लिपिक LDC	ZTI (EZ)	Offline	05	27
163	20.11.2 023 to 24.11.2 023	क्षमता निर्माण प्रशिक्षण कार्यक्रम Capacity Building Refresher Training programme	सा.सु.अ/शा.प्र./का. अधि./वै. सहा./अनुवाद अधिकारी/ सहायक	ZTI (SZ)	Offline	05	22

			SSO/BM/OS/PA/ Hindi Translator & Assistant				
164	21.11.2 023 to 22.11.2 023	क्षमता निर्माण डिजिटल साक्षरता प्रशिक्षण कार्यक्रम Online Capacity Building Digital Literacy Training Programme	बहू कार्य कार्मिक और अवर श्रेणी लिपिक नर्सिंग कार्मिक, कनिष्ठ पैरा-मेडिकल स्टाफ MTS/LDC/Nursing Orderlies & other junior Level Paramedical Staff	ZTI (SZ)	Online	02	40
165	20- 22/11/2 3	पूर्वी क्षेत्र के लिए व्यवसाय संबंधी रोग' पर ऑफलाइन प्रशिक्षण Offline Training on 'Occupational Disease for East Zone''	नोडल अधिकारी Nodal Officers	ESIH, Joka	Offline	03	13
166	22/11/2 3	रोगाणुरोधी प्रतिरोध रोकथाम' पर ऑनलाइन प्रशिक्षण Online Training on " Preventing Antimicrobial Resistance together''	भारत के चिकित्सा अधिकारी Medical Officers of ESIC India	NTA	Online	01	60
167	27.11.2 023 to 01.12.2 023	प्रारम्भिक प्रशिक्षण Induction Training	प्रवर श्रेणी लिपिक तथा आशुलिपिक UDC/Stenographer	ZTI (SZ)	Offline	05	17
168	28.11.2 023 to 13.12.2 023	"प्रशासनिक प्रशिक्षण कार्यक्रम" के लिए बैच - V : क रा बी नि में उप निदेशक से क्षेत्रीय निदेशक / संयुक्त निदेशक के पद पर	उप निदेशक/ अपर आयुक्त Deputy Director/Additional Commissioner	NTA	Offline	14	36

		पदोन्नति के लिए अनिवार्य प्रशिक्षण BATCH V for "Administrative Training Programme" : Mandatory Training for promotion from Dy. Director to Regional Director 'B'/Joint Director of ESIC					
169	04.12.2023 to 08.12.2023	प्रारम्भिक प्रशिक्षण Induction Training Programme	नवनियुक्त बहू कार्य कार्मिक और पदोन्नत अवर श्रेणी लिपिक Newly MTS & Promoted LDCs	ZTI (SZ)	Offline	05	21
170	04.12.2023 to 15.12.2023	प्रारम्भिक प्रशिक्षण Induction Training Programme	प्रवर श्रेणी लिपिक (नवनियुक्त) Newly UDC	ZTI (EZ)	Offline	10	35
171	06.12.2023 to 21.12.2023	क रा बी नि में कनिष्ठ अभियंता(विद्युत) से सहायक अभियंता(विद्युत) के पद पर पदोन्नति के लिए अनिवार्य 'क' स्तर का प्रशिक्षण Mandatory Level 'A' Training of Junior Engineer (Electrical) for promotion to the post of Assistant Engineer (Electrical) of ESIC	कनिष्ठ अभियंता (विद्युत) Junior Engineer (Electrical)	NTA	Offline	12	30
172	12.12.2023 to 26.12.2023	प्रारम्भिक प्रशिक्षण Induction Training Programme	प्रवर श्रेणी लिपिक UDC	ZTI (NZ)	Offline	15	22

173	11.12.2023 to 15.12.2023	क्षमता निर्माण प्रशिक्षण कार्यक्रम Capacity Building Refresher Training Programme	सा.सु.अ/शा.प्र./का. अधि./वै. सहा./अनुवाद अधिकारी/ सहायक SSO/BMs/OS/PA/ Hindi Translator & Assistant	ZTI (SZ)	Offline	18	05
174	12/12/23	वार्षिक कार्य निष्पादन मूल्यांकन रिपोर्ट तथा वार्षिक संपत्ति विवरणी पर ऑनलाइन प्रशिक्षण Online Training on "APAR and Annual Property Retrun"	क रा बी नि भारत के चिकित्सा तथा गैर चिकित्सा अधिकारी Medical & Non Medical Officers of ESIC India	NTA	Online	01	930
175	13/12/23	हेपेटाइटिस तथा लीवर की विफलता पर ऑनलाइन प्रशिक्षण Online Training on "Hepatitis and Liver Failure"	चिकित्सक (सभी संवर्ग) Doctors (in all cadres)	NTA	Online	01	80
176	18.12.2023 to 22.12.2023	क्षमता निर्माण प्रशिक्षण कार्यक्रम Capacity Building Training	अवर श्रेणी लिपिक LDC	ZTI (EZ)	Offline	05	32
177	18.12.2023 to 22.12.2023	क्षमता निर्माण प्रशिक्षण कार्यक्रम Capacity Building Training Programme	नर्सिंग कार्मिक Nursing Personnel	ZTI (SZ)	Offline	05	35
178	20.12.2023 to 21.12.2023	क्षमता निर्माण डिजिटल साक्षरता प्रशिक्षण कार्यक्रम Online Capacity Building Digital Literacy Training	बहू कार्य कार्मिक और अवर श्रेणी लिपिक नर्सिंग कार्मिक, कनिष्ठ पैरा-मेडिकल स्टाफ MTS, LDC, Nursing Orderlies and Other Junior	ZTI (SZ)	Online	02	45

			level Paramedical Staff					
179	26.12.2023 to 29.12.2023	क्षमता निर्माण प्रशिक्षण कार्यक्रम Capacity Building Training	आशुलिपिक/ वै. सहा./अनुवाद अधिकारी/ Stenographers/ Pas/ Hindi Translators	ZTI (EZ)	Offline	04	29	
180	27.12.2023 to 29.12.2023	सहायकों के लिए भर्ती नियमावली, विभागीय पदोन्नति, रोस्टर तथा सेवा में आरक्षण' पर क्षमता निर्माण कार्यशाला Capacity Building Workshop on Recruitment Rules, DPC, Rosters & Reservation in services for Dealing Assistant	निम्न श्रेणी लिपिक LDCs, UDCs & Assistant	ZTI (SZ)	Offline	03	22	

आयोजित प्रशिक्षणों की संख्या/No of Training Conducted : **180**
 प्रशिक्षण दिनों की कुल संख्या/Total Number of Training Days : **853**
 प्रशिक्षण प्राप्त करने वाले प्रतिभागियों की कुल संख्या/Total Number of participants given training : **11063**

19. Function of Procurement Cell & Rate Contract Cell

(i) The functions of Procurement Cell are as under:

- Policy matters related to equipment procurement.
- Framing specifications of equipment costing more than Rs.50 Lakhs as per ESIC Medical Equipment Manual for all ESI Institutions.
- Sanction/Approval of equipment proposals received from ESIC Institutions outside ESIC Norms/or beyond DOP of Deans/Medical Superintendents for procurement by user units.

- Issue of instructions and monitoring statutory adherence of all Public Procurement guidelines including Make in India guidelines.
- Augmenting and strengthening of equipment capacity for ESI Institutions requiring equipment for delivery of Super Speciality Services and issue of instructions for Optimum Utilisation of equipment.
- GeM coordination and follow up for incorporation for procurement modalities and issue of instructions in respect of updated decisions on procurement of equipment related to GeM (Demonstration of equipment, freezing of cost for procurement of accessories, consumables, AMC/CMC inter-alia etc.) for ease of procurement by ESIC Institutions.
- Enhancement of Delegation of powers of Deans/ Medical Superintendents of ESI Institutions in respect of procurement of equipment.
- Monitoring of Medical Equipment Dashboard.
- Updation/Revision of medical equipment norms for ESI Institutions.
- Coordination with concerned authorities (GeM, Ministry of Health & Family Welfare, DPIIT, Deptt of Pharmaceuticals etc.) for resolution of issues/ complaints of ESI Institutions in procurement of equipment.
- Facilitating optimum time period for procurement/receiving donations of equipment/consumables for management of COVID.
- Release/Return of EMD and PBG in coordination with user units.
- Coordination with GeM for creation of online category in respect of new equipment.

(ii) Rate Contract Cell: -

ESI Corporation established under the ESI Act, 1948, provides comprehensive Medical Care Services through a network of 161 Hospitals, 1574 Dispensaries and 158 DCBO's. ESI Corporation provides cashless Drugs & Dressings material to its beneficiaries. These are procured through Running DG ESIC Rate contracts formulated at ESIC Hqrs to ensure uniform supply of quality generic drugs to the end users at competitive rates. DG ESIC Rate contracts are operated by respective ESI Institutions, all over the country for procurement of drugs, as per their requirement.

The function of Rate Contract Cell is enumerated briefly as follow:

1. Availability of Drugs & Dressings for all ESI Institutions;
 - a) Through GeM: 103 CPSU Drugs.
 - b) Through DG ESIC Rate Contracts: 838 Drugs (Approx.)0

DG ESIC Rate Contracts:

- a. Running DG ESIC Rate Contract/s are finalized through open e-tendering processed online on e-procurement portal of Govt. of India i.e. Central Public Procurement Portal after seeking due exemption from SCoGeM.
- b. All DG ESIC e- tender enquiries and Rate Contracts adhere to all statutory Govt. of India decisions on public procurement guidelines, GeM, GFR, CVC & Make in India inter alia.
- c. All DG ESIC e- Tender Enquiries adhere to incorporation of Integrity Pact as per

CVC guidelines.

d. DG ESIC Rate Contracts with eligible Pharmaceuticals firms are published for a validity of two years.

e. Details of currently valid DG ESIC Rate Contracts:

S. No.	DG ESIC Rate Contract	Validity of RC	No. of items approved
1	DG ESIC RC No. 142C to 146C & 147B	Valid upto 31.10.2023	506 items
2	DG ESIC RC 149 to 153	Valid upto 31.10.2024	332 items
3	DG ESIC RC 154 to 158	Under process	

The process of formulation of Rate Contract is given at **Annexure-VI**.

20. Super Specialty Treatment Cell

ESI Corporation in its 143rd Meeting has approved Super Specialty Treatment (SST) services on cashless basis to its beneficiaries w.e.f. 01.08.2008 which is provided through the tie-up arrangement with Corporate/Trust/ Private Hospitals at CGHS rates. The expenditure on SST is borne by the ESI Corporation only over and above the ceiling prescribed for expenditure on medical care from time to time.

Accordingly, for smooth and seamless delivery of the cashless medical treatments services for IP's & their dependents, tie-up arrangement is made for Specialty/Super Specialties which are not available in-house. As on date, Pan India, ESIC has tie-ups with **2546** private and Government Hospitals for providing smooth and seamless delivery of cashless medical treatment for IP's and their dependent.

During the period 23-24, the following initiatives have been undertaken by SST Cell Hqrs. Office which have been duly intimated to all stake holders through website upload (copies enclosed) and emails.

- i. In the 190th ESI Corporation Meeting held on 19-20th Feb. 2023, the DoP for approval of High Cost Treatment cases for ESI Beneficiary has been revised for case to case basis.
- ii. CGHS vide their OM dated 12.4.23 had revised the rates of consultation fee, room rent and ICU charges for all health care organizations (HCOs) empaneled under CGHS. The same were duly adopted by ESIC.
- iii. In case of direct/emergency admission cases, UTI had enabled feature to click and upload real-time photo of the ESI Beneficiary in their portal for ease of identification and verification of the admitted beneficiary
- iv. The service agreement between ESIC and UTI-ITSL (Bill processing agency for ESIC) has been extended on the same terms and conditions for further one-year w.e.f 16.05.2023.
- v. To mitigate repeated NMIs and bill pendency and to bring more transparency,

instructions were issued for Mandatory online approval for extension of stay/additional procedures, etc.

- vi. Instructions were issued for all user locations to comply with preventive measure as elaborated under National Policy on Rare Diseases 2021 and ESIC's operational Manual to minimize the occurrence and severity of rare diseases.

S. No	Letter Number	Subject
01.	U-16/30/555/2023-SST Agenda	Revised delegation of power for High Cost Treatment cases
02.	U-16012/2/2023-SST	Adoption of CGHS OM on revision of consultation fee, room rent and ICU charges for all Health Care Organization empaneled under CGHS.
03.	U-160/12/2/2021-SST	Enabling feature to upload ESI Beneficiary photograph in BPA (UTI-ITSL) portal for all direct/emergency cases admitted in tie-up hospitals for availing cashless medical treatments.
04.	U-16030/4/2021-SST (Renewal of Service agreement with UTI)	Extension of service agreement between ESIC and UTI-ITSL for further 01 year
05.	U-16012/2/2021-SST	Mandatory online approval for extension of stay/additional procedure, etc.
06.	U-16012/392/2022-SST	Parental Screening and preventive measures for rare diseases.

21. Recruitment Division

The activities of Recruitment Division in ESIC mainly involve around conduct of recruitment and selection for vacancies in Teaching, Medical, Paramedical & Nursing, Administrative and Technical cadres for which consultation of UPSC is not necessary. The Recruitment Division publishes advertisements, holds Examinations and Interviews, compile, declare and publishes the results.

During the year 2023, the Recruitment Division conducted interviews for multiple recruitment notifications for medical posts and conducted recruitment for huge number of vacancies in paramedical cadres as detailed hereunder:

Medical Posts:

Sl. No.	Post	No. of vacancies	Present Status
1.	Recruitment of IMO Gr. II	1120	Advertisement released on 14.12.2021. Result of Part I Written Examinations declared on 18.5.2022.

			Interviews of 3702 shortlisted candidates scheduled w.e.f. 28.11.2023 to 9.1.2024.
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Paramedical Posts:

Sl. No.	Post	No. of vacancies	Present Status
1.	Recruitment in 12 Group C Paramedical Posts for 21 Regions	1038	Advertisement released on 29.9.2023. Written Exam held on 10.12.2023. Result is under process.

Limited Departmental Competitive Examination

Sl. No.	Recruitment Activity	Details of Recruitment	Present Status
1.	Advance Increment Test for existing Stenographers.	Advance Increment Test was conducted on 14.12.2023.	Result is under process.
2.	Half Yearly Computer Skill Test for Employees appointed to the post of UDC on the Compassionate Ground/under Sports Quota	Half Yearly Computer Skill Test held on 15.3.2023 and 22.8.2023.	Result declared on 29.5.2023 and 11.10.2023 respectively.

Teaching Faculty Posts

Sl. No.	Post	Present Status
1.	Associate Professor	Advertisement for 115 vacancies released on 05/04/2022. Interviews conducted from 28.11.23 to 4.12.2023.
2.	Assistant Professor	Advertisement for 491 vacancies released on 16/06/2022. Interviews scheduled from 9.1.2024 to 3.2.2024.

Specialist Gr-II (Sr./Jr. Scale) Posts

Sl. No.	Status
1.	Recruitment of 132 vacancies for the post of Specialist Gr.-II (Sr./Jr. Scale) for 7 regions (Tamilnadu (Spell-I), Kerala, Karnataka, Rajasthan, Haryana, (Spell-I), Delhi (Spell-I) & Haryana (Spell-II)) completed in 2023.
2.	Interviews of Specialist Gr.-II (Sr./Jr.Scale) 72 vacancies in 4 regions (MP, Delhi (Spell-II), Telangana, Tamilnadu (Spell-II)) conducted during Dec.2023.

Mission Recruitment

In the year 2023, appointment/promotion to a total number of **2161 of** candidates were given under Mission Recruitment Rozgar Mela in the cadre of Dy. Director, Specialists Gr. II, Paramedical Cadres, UDC, Steno and MTS.

22. Information Communication Technology Division

Preamble:

1. PANCHDEEP 1.0: ESIC'S E-GOVERNANCE PROJECT

With a view to provide hassle-free health and social security services to the stakeholders as well as for transforming its business into total e-governance, ESIC rolled out an ambitious project "Panchdeep" through a national digital network in all the 2300+ locations.

1.2 Project Panchdeep is one of the largest e-governance programmes of the country to provide online facilities to the employers, insured persons, ESI staff, third parties, government agencies, suppliers and other stakeholders. It provides registration of employers and beneficiaries, deposition of contribution, disbursement of cash benefits and documentation of medical services for all insured people.

1.3 The task for conceiving, integrating, capacity building, application development and implementing the project was assigned in 2009 to a System Integrator on a BOOT model (got live in 2011) and included on-premise Data Centre, Recovery Centre, procurement, provisioning & management of Infrastructure, MPLS connectivity, Facility management and IT Infrastructure procurement in all 2300 locations, for 5 years. At present, it is being maintained (O & M) based on SLA through a System Integrator.

1.4 Significant progress have been made in 2023-24 in the field of Information and Communication Technology (ICT). In 2023, the contract with the previous system integrator got over and new system integrator M/s. Electronics Corporation of India Limited has taken over the project for functional management of IT project 'Panchdeep' of ESIC (including operations & maintenance, AMCs and augmentation of IT infrastructure & comprehensive management). This contract has initially been awarded for a period of 03 (three) years which is extendable further on existing terms & conditions by ESIC as per requirement.

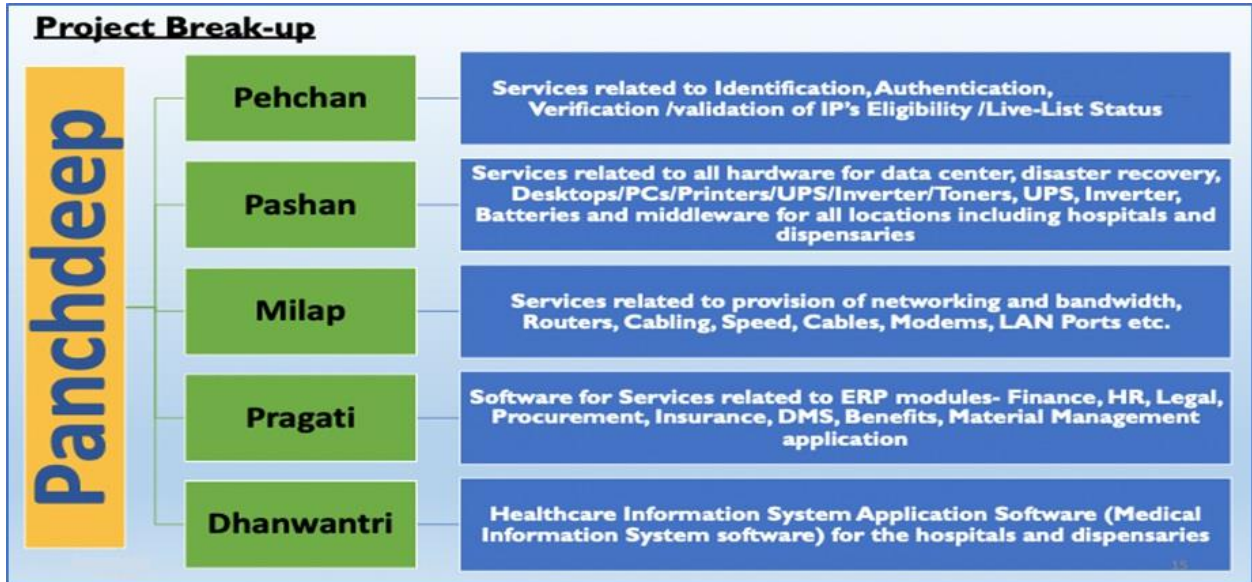
2. Salient Features of IT Project 'Panchdeep'

2.1 ESIC e-governance structure has five components which are as follows: -

(i) Pehchaan, which includes all services related to identification, authentication and verification of Insured Persons (IPs). It initially included capturing of biometrics (for de-duplication) and issuance of Smart Identity Cards for availing benefits from different ESI institutions, across the country. Later, with inclusion of the ePehchan, these smart cards were discontinued. Now, Aadhaar can be used for identification and authentication of Insured Persons (IPs) and their family members. IPs can also seed their Aadhar Number with their IP Number using diverse Aadhar seeding methods, such as OTP, biometric and face authentication to streamline the process for improved IPs convenience. IPs can also generate ABHA IDs using their IP Numbers.

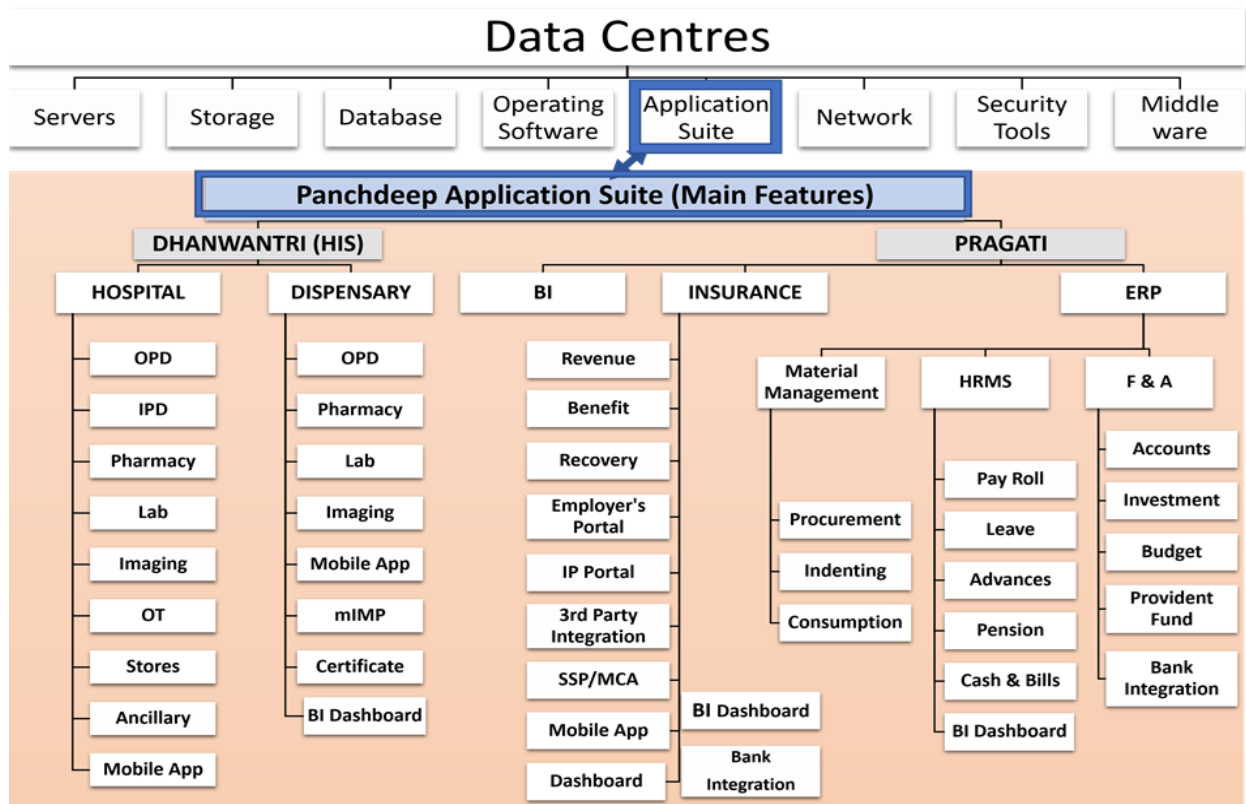
(ii) Milaap comprises of all services related to provisioning network and bandwidth.

- (iii) Pashaan consists of services related to hardware for Data Centre, Disaster Recovery, desktops /PCs and middleware.
- (iv) Dhanwantri includes all services related to hospitals, dispensaries, OPD, IPD, laboratories, imaging services.
- (v) Pragati for all services related to ERP, Insurance, Benefit, HRMS, Material Management and Finance.



2.2 Panchdeep Application Suite

The suite of applications is a centralized web-based solution that enables users of various ESI offices to access the applications from web browsers in addition to the dedicated LAN/WAN. The solution is driven by a flexible & configurable workflow engine to ensure it meets all workflow requirements of ESI scheme such as administration, requirement of medical facilities, contribution made by employers and administration of ESIC employees. The solution also consists of a self-service portal for the employees covered under the scheme. The key application system is captured in the diagram below: -



2.3 ESIC's ICT initiatives have led to the digitization of key processes, reducing paperwork and administrative burdens for all stakeholders including the Insured Persons, Employers and staff. The introduction of online portals and mobile applications has empowered beneficiaries to conveniently access their benefit and healthcare related information, promoting transparency and accessibility. ESIC's commitment to leveraging technology has also resulted in improved data analytics capabilities, enabling data-driven decision-making to enhance the effectiveness and sustainability of the provisions of the scheme and eGovernance.

3. Beneficiary-centric value-added initiatives

3.1 **Online claim of Cash Benefits** - The Claims for ESI Benefits like Maternity Benefit, Sickness Benefit (SB), Extended Sickness Benefit (ESB), and Temporary Disablement Benefit (TDB), can now be submitted online by the Insured person through IP Portal. The status of the claim can also be tracked online. ESIC has been able to expedite claims processing, ensuring timely disbursement of benefits to insured individuals, directly to their bank accounts, during critical times.

3.2 **SMS for suggestion & feedback on Services** - The SMS seeking suggestions and feedback from the Insured person is aimed at assessing the quality and experience in availing the services at ESI Health centres and Branch offices. An SMS is sent to beneficiary urging the Insured person to provide their feedback/ suggestion on the quality of services. They may use the link provided in the SMS to submit their rating for the experience of services extended to them and also provide feedback through a text box provided on this web page.

3.3 **The AAA+ Mobile App** - Envisioned to utilize the ever-increasing penetration of smartphones in our daily lives, the Ask an Appointment or AAA+ Mobile App aims at providing

the Insured Person and beneficiaries the facility to book a doctors' appointment at the click of a button thus eliminating the requirement of standing in queues for OPD consultation. The facilities of booking appointment on the AAA+ Mobile App have been bolstered with several provisions such as: -

- a. The elder members (60 years and above) of the insured family can request home collection of laboratory samples using the AAA+ Mobile App.
- b. The insured person is now able to schedule appointments on the same day for the open time slots.
- c. The insured person or beneficiary can now obtain an OPD check-in number through the mobile application, eliminating the necessity of waiting in line for a registration number.
- d. The patients who have booked a AAA+ consultation, can receive priority service at the pharmacy counter through the provision of a dedicated worklist for their prescriptions.
- e. Contents have been made available in various regional languages as well.

3.4 Edit IP Details/Particulars - Previously, alterations to the IP's information and that of the insured family could be made by the employer without any limitations on frequency etc. and without requiring an approval from ESIC. However, a structured procedure and workflow have now been implemented at the branch office level to safeguard against potential misuse of the previous provisions. Additionally, IP now has the option to initiate changes to their personal or family details through the IP portal as well. They are provided with the capacity to monitor the status of their change requests.

3.5 Addition of New Born Details to the Insured family - The details of babies born at ESI hospitals are being automatically forwarded by the hospital staff from the Dhanwantri application to the respective employer for approval. Upon confirmation by the employer, the details of the new born becomes part of the insured persons family. The provision not only saves time of the insured person, but also helps in smooth experience in the need of a referral for advanced treatment to an empanelled centre from the Hospital.

3.6 Implementation of Aadhaar in ESIC - ESIC has been authorized to seed & authenticate Aadhaar of IPs and beneficiaries, on a voluntary basis, under the provisions of rule 5 of the Aadhaar Authentication for Good Governance (Social Welfare, Innovation, Knowledge) Rules, 2020 read with subclause (ii) of the clause (b) of sub-section (4) of section 4 of the Aadhaar (Targeted Delivery of Financial and other Subsidies, Benefits and Services) Act, 2016. The seeding of Aadhaar shall be pivotal in ensuring targeted delivery of ESI benefits and de-duplication of IP database. As on 01.01.2024, about 48.76 lakhs of Aadhaar of beneficiaries have already been seeded.

3.7 Dashboards - The division ensured that the dashboards available for the public and the top managements are being constantly improved and facilitated with more useful Data and functionality to benefit all stake holders alike.

3.8 Transfer Module - Various modules for transfer of ESIC Officers/Officials as per the transfer latest policy were made available to ensure smooth bias free activity of transfer of the employees in an objective way.

3.9 Pension Payment Slip - The pension payment slip of the ESIC pensioners has now been made available online for convenience and efficiency benefiting both pensioners and ESIC in managing pension disbursements.

3.10 **Use of Local Language for website content** - The content on the ESIC website were made available in various local languages so as to make them more useful to the insured person and beneficiaries.

3.11 **Ayushman Bharat Health Account (ABHA) Number** - In pursuance of the Government of India initiative of Digital Health Mission, ESIC under the guidance of National Health Authority (NHA) has started to generate ABHA number for all its beneficiaries. This initiative shall enable the availability of Digital Health records across all participating health institution/organizations.

3.12 **Facilitating Service Pensioners with Digital Life Certificate by Onboarding Jeevan Pramaan Application-** ESIC has more than 17000 pensioners and family pensioners who are drawing Service Pension from different accounting units located across different cities of India. Till now they had been submitting life certificate annually in physical form to respective accounting units for continuation of their pension. ESIC has boarded on Jeevan Pramaan Application platform. Now, the Service Pensioners drawing pension from any of the accounting units can submit their Digital Life Certificate from anywhere, using mobile phone/PC without the need to visit ESIC offices.

23. MANAGEMENT SERVICE UNIT

1. **ISO Certificate in ESIC:** - All Offices/units were expected to get themselves audited for quality services and get certified under the latest version of Quality Management Services (QMS). Total 77 Nos. of units have been awarded with ISO Certificate.
2. **MP/VIP reference:** - 281 No. of MP/VIP references have been disposed as per due protocol.
3. **Productivity Linked Bonus:** - Productivity Linked Bonus (PLB) has been granted to employees of ESIC for the year 2022-23.
4. **Review of Citizen/Clients Charter:** - Citizen's-Client's Charter of Employees' State Insurance Corporation for the year 2023 has been revised, published and circulated.
5. **Preparation of Job Cards:** - Work profile of Zonal ICs was published on 08.04.2023
6. **Delegation of Powers:** - DoP of Zonal ICs & Zonal MCs has been finalized and circulated on 25.08.2023.

24. e - Procurement/Government at e-Market Places/ Swachhta Action Plan (SAP) e-Procurement:

ESIC has undertaken e-Tender through NIC/NICSI from 01.02.2019 and onward on Central Public Procurement Portal (CPP Portal). Thus, ESIC has complied the directive of Govt. of India issued vide No.10/1/2011-PPD Dated 17.05.2016 for making it compulsory that e-Procurement of all tenders should be done through on CPP Portal.

Government at e-Market Places:

As per direction of Govt. of India Circular No. F-26/4/2016-PPD dated 3rd May, 2016, all procurements have to be made through GeM. Accordingly, ESIC issued a Circular No. D-13/11/All India Circular/2016-Genl. Dated 25.07.2017 for making it compulsory for all Ros/SROs/Hospitals to procure all goods & Services available on portal through GeM. Accordingly, ESIC is complying the directives of Govt. of India.

Swachhta Action Plan (SAP):

As Per direction of Ministry of Labour & Employment, Govt. of India vide their letter No. D-31016/3/2014-Admn-II dated 17.01.2017, ESIC has undertaken activities for cleanliness/Awareness drive during Swachhta Action Plan commencing from 01.04.2018. The directives are circulated every year to all the Regional Office/Sub-Regional Offices/ESIC Hospital & Medical/Dental Colleges across the country for compliance.

25. General information and statistical data regarding the Employees' State Insurance Scheme

General information regarding benefits, coverage etc. under the ESI Scheme and the latest statistical data regarding the scheme are summarized at Annexures given below.

1.	General Information regarding ESI Scheme	Annexure – I(A & B)	86-93
2.	Benefits & Contributory conditions	Annexure - II	93-98
3.	List of Regional Office/Sub-Regional Office/Dispensary-cum-Branch Office	Annexure – III	98-103
4.	Revenue & Expenditure of Corporation	Annexure – IV	104
5.	Progress made under ISM/AYUSH as on 01.01.2024	Annexure – V	105-113
6.	Process of formulation of Rate Contract	Annexure – VI	114-115

25.(1) General information regarding Employees' State Insurance Scheme

I. (A) COVERAGE UNDER THE ESI ACT, 1948:

- i. The Act is applicable to factories employing 10 or more persons
- ii. Under Section 1(5) of the Act, the Scheme has been extended to shops, hotels, restaurants, cinemas including preview theatres, road motor transport undertakings and newspaper establishments employing 10 or more coverable employees in 33 States/UTs. (Except – Arunachal Pradesh, Dadar & Nagar Haveli Daman & Diu and Lakshadweep)
- iii. The Scheme has further been extended under Section 1(5) of the Act to Educational Institutions in 30 States/UTs. (Except - Arunachal Pradesh, Gujarat, Maharashtra, Meghalaya, Dadar and Nagar Haveli Daman & Diu and Lakshadweep) and to Private Medical Institutions in 29 the States/UTs. (Except - Arunachal Pradesh, Gujarat, Maharashtra, Meghalaya, Dadar and Nagar Haveli Daman & Diu, Lakshadweep and Puducherry)
- iv. The scheme has been also extended to contract & casual employees of Municipal Corporation & Municipal bodies in 19 States/UTs
- v. The existing wage-limit for coverage under the Act, is Rs. 21,000/- per month w.e.f. 01.01.2017(Rs. 25000/- per month in case of persons with disability)

(B) Areas covered:

The ESI Scheme is being implemented District wise in stages. The Scheme has already been implemented in different areas in the following States/Union Territories: -

- I. **States:** All the States.
- II. **Union Territories:** Notified in all union territories.

Out of the 36 notified States & UT's, entire area in 17 states/UT's are notified for coverage under ESI Scheme.

(C) Expansion of ESI Scheme (Vision 2022)

The Second-generation reforms namely ESIC 2.0 contained an agenda for "Extending the coverage of ESI Scheme". It was desired to extend the ESI Scheme to all the States and Union Territories, to implement the Scheme to 393 Complete Districts, where the Scheme was then partially implemented. Previously the extension of ESI Scheme was done in centers which included a conglomeration of revenue villages, where sufficient number of coverable employees were present, after setting up the medical infrastructure. Under ESIC 2.0, the extension of the scheme is being made to complete districts, which is a departure from the focused area concept and hence required extensive medical arrangements. ESI Scheme was extended to 31 states and Union Territories at the time of launch of ESIC 2.0 initiatives. In furtherance of second-generation reforms ESIC 2.0, ESIC has worked out an action plan for All India coverage of ESI scheme as per Vision – 2022

At present, the scheme is extended to 36 States and Union Territories. There has been a massive geographical expansion of ESI Scheme since the launch of ESIC 2.0 and the scheme as on 01.01.2024 stands extended to 661 districts of the country which includes 556 complete districts and 105 partially notified districts. The Scheme is non-notified in 117 districts.

Health being state subject, some issues with the states in primary and secondary care medical arrangement is resulting in slow pace of coverage. ESIC has taken the initiative to supplement medical care where it is lacking from the state governments, in order to extend coverage as per the timelines.

Annexure-I(B)

II. Statistical Data regarding ESI Scheme (All India)

S. No.	Heads	All India	
		As on 31.03.2021	As on 31.03.2022
1	No. of Employees covered	27862710	30542660
2	No. of I.P's Covered	31020570	34297410
3	No. of Beneficiaries	120359812	133073951
4	No. of Insured Women	5869434	6760814
5	No. of Employers' registered	1594083	2083340
6	No. of Contributing Employer	644038	706552

The RO/SRO wise bifurcation of the data is given below:

Region-Wise Coverage as on 31.3.2023									
S. No	RO/SRO	Total Employers	Contributory employers	No. of Employees	No. of Ips/Family (IP) units covered	Total No. of Beneficiaries	Total No. of Fully Implemented Districts	Total No. of Partially Implemented Districts	Total No. of Non-Implemented Districts
1	2	3	4	5	6	7	8	9	10
	ANDHRA PRADESH								
1	I)VIJAYAWADA & YENAM	33417	12066	575510	632060	24523936	6	0	0
2	II)TIRUPATHI	13826	4189	262340	289610	11236874	4	0	0
3	iii)VISAKHAPAT NAM	17467	6518	355660	395250	15335703	3	0	0

	NORTH-EAST REGION								
4	ASSAM	24143	7310	267430	289920	1124890	34	0	0
5	ARUNACHAL PRADESH	167	39	1100	1200	4656	1	0	24
6	MEGHALAYA	1865	441	14040	15380	59674	2	0	10
7	NAGALAND	713	190	3410	3670	14240	0	4	12
8	TRIPURA	1685	558	15200	16430	63748	8	0	0
9	MANIPUR	714	112	3690	3900	15132	2	0	14
10	MIZORAM	282	85	1810	1960	7605	1	0	10
11	BIHAR	39936	7854	376980	411210	1595495	16	22	0
12	CHANDIGARH (UT)	8747	3270	127660	141210	547895	1	0	0
13	CHATTISGARH	29880	11402	502070	557400	2162712	11	17	0
	DELHI								
14	I) RAJENDER PLACE	49440	11018	316600	356900	1384772	2	0	0
15	ii) NAGAR	32968	6469	164940	184390	715433	4	0	0
16	iii) ROHINI	36918	12629	222210	244420	948350	2	0	0
17	iv) OKHLA	48043	11694	543690	626670	2431480	3	0	0
18	GOA	10268	4363	174580	195110	757027	2	0	0
	GUJARAT & Dadra & Nagar Haveli & Daman & Diu								
19	i) AHMEDABAD & Dadra & Nagar Haveli & Daman & Diu	54034	19424	722820	819270	3178768	4	10	9
20	ii) VADODRA	20548	9679	420860	481060	1866513	1	4	3
21	iii) SURAT	18981	7238	368360	401630	1558324	1	2	2
	HARYANA								
22	I) FARIDABAD	51775	20701	829090	966280	3749166	14	0	0
23	II) GURGOAN	42854	12386	1036680	1263620	4902846	1	0	0
24	iii) AMBALA	26647	9160	289470	320410	1243191	7	0	0

25	H.P.	13839	6025	326520	368090	1428189	12	0	0
26	J & K and Ladakh	10797	3478	119510	134600	522248	8	14	0
27	JHARKHAND	34669	10821	452220	494210	1917535	9	15	0
	KARNATAKA								
28	i) BANGALORE	53408	15985	867090	996300	3865644	2	0	0
29	ii) HUBLI	20843	9946	352470	381360	1479677	9	0	0
30	III) PEENYA	28282	9250	455060	525060	2037233	3	0	0
31	IV) BOMASUNDRARA	33458	7941	599130	695850	2699898	1	0	0
32	V) GULBARGA	12705	4951	175720	194500	754660	8	0	0
33	VI) MYSORE	10303	4704	248260	274460	1064905	6	0	0
34	vii) MANGALORE	9536	5395	183700	196810	763623	2	0	0
	KERALA & Lakshadweep								
35	I) THRISSUR & Lakshadweep	10569	5614	146700	160290	621925	2	0	1
36	II) ERNAKULAM	26998	10996	368780	407270	1580208	3	0	0
37	III) KOLLAM	11892	4945	126310	150650	584522	3	0	0
38	IV) KOZHIKODE	16105	6119	150670	163650	634962	5	0	0
39	v) THIRUNANTHANPURAM	10311	3383	119560	132070	512432	1	0	0
	MADHYA PRADESH								
40	i) INDORE	36006	12911	648810	716080	2778390	16	7	0
41	ii) BHOPAL	29536	8130	356740	395280	1533686	11	17	1
	MAHARASHTRA								
42	i) LOWER PAREL	46877	13393	451760	500270	1941048	1	0	0
43	ii) MAROL	58730	17406	685460	756320	2934522	2	0	0
44	iii) THANE	51386	18486	680790	760450	2950546	4	0	0
45	iv) NAGPUR	27459	8708	351880	378730	1469472	9	0	2
46	V) AURANGABAD	23496	6741	275050	303980	1179442	11	0	0
47	v) PUNE	91473	29659	1319620	1497740	5811231	15	0	0
48	VI) NASIK	16785	6142	235310	258000	1001040	2	0	0
	ODISHA								

49	i) BHUBANESHW AR	37957	11561	633640	703330	2728920	26	2	2
50	ii) JHARSUGUDA	10847	3756	197240	215120	834666			
51	PUDUCHERRY & MAHE & YENAM	5993	2455	98230	108580	421290	4	0	0
	PUNJAB								
52	I)CHANDIGARH (PUNJAB)	25470	11242	465700	521070	2021752	15	0	0
53	II)JALANDHAR	16159	8362	292850	316850	1229378	7	0	0
54	III)LUDHIANA	21449	11590	398320	439020	1703398	1	0	0

APPENDIX I-B

Region-Wise Coverage as on 31.3.2023

S.N o	RO/SRO	Total Employer s	Contribu tory employ ers	No. of Employees	No. of Ips/Famil y (IP) units covered	Total No. of Beneficiarie s	Total No. of Fully Imple ment ed Distri cts	Total No. of Partially Impleme nted Districts	Total No. of Non- Imple mente d Distric ts
1	2	3	4	5	6	7	8	9	10
	RAJASTHA N								
55	I)JAIPUR	64597	24516	907480	1035680	4018438	17	0	0
56	ii)UDAIPUR	12130	5160	210080	237480	921422	7	0	0
57	III)JODHPU R	18140	8037	187530	209530	812976	9	0	0
58	SIKKIM	987	509	26400	28420	110270	2	0	2
	TAMIL NADU & SRO ERODE								
59	i) CHENNAI	90507	30230	1702000	1931640	7494763	11	2	0

60	ii) Andaman Nicobar	524	114	3520	3710	14395	0	1	2
61	iii) TRIRUNELV ELLI	13392	6213	176690	194770	755708	4	0	0
62	iv) SALEM	24766	10119	463620	516140	2002623	11	0	0
63	v) COIMBATO RE & ERODE	43147	16212	801540	920630	3572044	3	0	0
64	vi) MADURAI	19652	9929	414110	454510	1763499	7	0	0
65	TELANGANA	110070	33483	1545930	1740420	6752830	33	0	0
	UTTAR PRADESH								
66	I)KANPUR	42142	12590	476870	523820	2032422	14	1	11
67	ii) VARANASI	11565	3320	137910	151480	587742	6	0	2
68	III) NOIDA	68658	22023	1205130	1400020	5432078	7	0	2
69	IV) LUCKNOW	39993	9245	546100	597830	2319580	14	0	18
70	UTTRAKH AND	24741	9294	568400	664230	2577212	6	0	7
	WEST BENGAL								
71	i) KOLKATA	91673	31784	1241770	1337040	5187715	16	0	0
72	ii) BARRACKP ORE	18018	6757	290080	309780	1201946	2	0	0
73	III) DURGAPUR	19982	8127	258200	275330	1068280	5	0	0
	ALL INDIA	208334 0	706552	3054266 0	3429741 0	1330739 51	492	118	134

APPENDIX I-B

Region-Wise Coverage as on 31.3.2023

RO/SRO	Total Employ ers	Contrib utory	No. of Employe es	No. of Ips/Fam ily (IP) units covered	Total No. of	Total No. of Fully Impl	Total No. of Partiall y	Total No. of Non- Impl
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S.No			employers			Beneficiaries	emented Districts	Implemented Districts	emented Districts
1	2	3	4	5	6	7	8	9	10
	RAJASTHAN								
55	I)JAIPUR	64597	24516	907480	1035680	4018438	17	0	0
56	ii)UDAIPUR	12130	5160	210080	237480	921422	7	0	0
57	III)JODHPUR	18140	8037	187530	209530	812976	9	0	0
58	SIKKIM	987	509	26400	28420	110270	2	0	2
	TAMIL NADU & SRO ERODE								
59	i) CHENNAI	90507	30230	1702000	1931640	7494763	11	2	0
60	ii) Andaman Nicobar	524	114	3520	3710	14395	0	1	2
61	iii) TRIRUNELVELLI	13392	6213	176690	194770	755708	4	0	0
62	iv) SALEM	24766	10119	463620	516140	2002623	11	0	0
63	v) COIMBATORE & ERODE	43147	16212	801540	920630	3572044	3	0	0
64	vi) MADURAI	19652	9929	414110	454510	1763499	7	0	0
65	TELANGANA	110070	33483	1545930	1740420	6752830	33	0	0
	UTTAR PRADESH								
66	I)KANPUR	42142	12590	476870	523820	2032422	14	1	11
67	ii) VARANASI	11565	3320	137910	151480	587742	6	0	2
68	III) NOIDA	68658	22023	1205130	1400020	5432078	7	0	2
69	IV) LUCKNOW	39993	9245	546100	597830	2319580	14	0	18
70	UTTRAKHAND	24741	9294	568400	664230	2577212	6	0	7

	WEST BENGAL								
71	i) KOLKATA	91673	31784	1241770	1337040	5187715	16	0	0
72	ii) BARRACKP ORE	18018	6757	290080	309780	1201946	2	0	0
73	III) DURGAPUR	19982	8127	258200	275330	1068280	5	0	0
	ALL INDIA	2083340	706552	30542660	34297410	133073951	492	118	134

Annexure-II

25(2). Benefits & Contributory Conditions

Sl. No.	Name of the benefit (s)	Contributory conditions	Duration of Benefit	Quantum of Benefit
(i) (a)	Sickness Benefit	Payment for at least 78 days in the relevant contribution period.	91 days in any two consecutive benefit periods.	(70% of daily average wages)
(b)	extended sickness benefit (for 34 specified long-term diseases)	Continuous employment for a period of two years and contribution for 156 days in four consecutive contribution periods.	Two years (Maximum)	80% of daily average wages
(c)	ENHANCED SICKNESS BENEFIT (for undergoing sterilization operation for family welfare.)	Same as for Sickness Benefit.	7 days for vasectomy and 14 days for tubectomy; extendable in cases in post-operative complication etc.	100% of daily average wages
(ii)	DISABLEMENT BENEFIT (employment injury)	There are two types of benefits comes under Disablement Benefit which are as under: -		

(a)	Temporary Disablement Benefit	He/She should be an employee on the date of employment injury.	Till the incapacity lasts.	90% of the daily average wages
(b)	Permanent Disablement Benefit	-do-	For life	Depends upon the loss of earning capacity of the workers which is determined by a Medical Board.
(iii)	DEPENDANTS BENEFIT (Rule 58)	The deceased should be an employee on the date of fatal accident.	<ol style="list-style-type: none"> 1. To widow/widows for life or until remarriage 2. To widowed mother during life. 3. To legitimate or adopted son until he attains the age of twenty-five years. 4. To legitimate or adopted daughter till marriage. 5. To legitimate or adopted son or daughter wholly dependent on the earning of the insured person at the time of his/her death, who have attained the age of twenty-five years and are infirm, till infirmity lasts. 6. To other dependents for life or till marriage or upto the age of 18 years, as the case may be. 	90% of the daily average wages to be divided amongst the dependents in the prescribed ratio.
(iv)	MATERNITY BENEFIT	Payment of contribution for 70 days immediately preceding two consecutive contribution periods.	An Insured Woman shall be entitled to maternity benefit for 26 weeks of which not more than 8 weeks can precede the expected date of confinement. A commissioning mother and an adopting mother are	100% of daily average wages.

			<p>eligible for maternity benefit for 12 weeks.</p> <p>Maternity benefit for 6 weeks for miscarriage and additional one month for sickness arising out of pregnancy/confinement/premature birth of child/miscarriage is also provided.</p> <p>Insured woman having two or more than two surviving children shall be entitled to receive maternity benefit during a period of twelve weeks of which not more than six weeks shall preceded the expected date of confinement.</p>	
(v)	FUNERAL EXPENSES	The deceased worker should be an insured person on the date of death.	-----	Rs. 15,000/-.
(vi)	REHABILITATION ALLOWANCE	Entitlement to medical benefit or if disabled due to employment injury.	For each day on which insured person remains admitted in Artificial Limb Centre for fixation/repair or replacement of artificial limb.	At 100% of daily average wages.
(vii)	MEDICAL BENEFIT TO RETIRED/DISABLED INSURED PERSONS AND HIS/HER SPOUSE	On payment of Rs.10/- p.m. in lump-sum for one year in advance (I)the Insured persons who retire from insurable employment on attaining the age of	Period for which annual contribution has been paid.	Full Medical care by ESIC.

		<p>Superannuation or under VRS or rematurely after being in insurable employment for not less than five years; and</p> <p>(ii) the insured persons who cease to be in Insurable employment on account of permanent disablement due to an employment injury; get medical care.</p> <p>(iii) This benefit is also be made available to widows of Insured Person, who are in receipt of dependant benefit, on payment of contribution as prescribed under Rule 60 till the date on which IP/IW would have vacated the employment on attaining the age of superannuation.</p>		
(viii) Confinement Expenses	To an Insured Woman or an I.P. in respect of his wife in case	Up to two confinements only.	Rs. 7500/- per case.	

		facilities for confinement are not available in ESI Institutions.						
(ix)	Vocational Rehabilitation Allowance Development Scheme under PDB Beneficiaries	Not more than 45 years of age and disability not i.e. than 40% due to Employment Injury	All the days of training in Vocational Rehabilitation Center.	Rs. 123/- per day or the actual amount charged by Vocational Rehabilitation Centre, whichever is higher.				
(x)	Unemployment Allowance	An I.P. who has lost employment due to closure of factory, retrenchment or permanent disablement of at least 40% arising out of non-employment injury and the contribution in respect of him have been paid/payable for a minimum of two years prior to the loss of employment.	Maximum period of two year during life time w.e.f. 06.09.2016	IP/IW would get the benefit as per the following slab: <table border="1" data-bbox="1187 705 1438 951"> <tr> <td>0 to 12 months</td> <td>13 months or more</td> </tr> <tr> <td>50% of the Average Daily wages</td> <td>25% of Average wages</td> </tr> </table>	0 to 12 months	13 months or more	50% of the Average Daily wages	25% of Average wages
0 to 12 months	13 months or more							
50% of the Average Daily wages	25% of Average wages							
(xi)	Vocational Rehabilitation Skill Development Scheme (under Rajiv Gandhi Shramik Kalyan Yojana)	IP/IW should be in receipt of Unemployment Allowance under Rajiv Gandhi Shramik Kalyan Yojana.	Short duration of ten weeks or other longer duration courses of upto six months at Advance Vocational Training Institutions.	Entire fee charged by the Institutions is to be paid by the Corporation. To and for Rail/Bus fare to IP/IW who has to travel to attend the training program at AVTIs as charged, is reimbursed.				

(xii)	Conveyance allowance to the PDB beneficiaries for submitting live certificate	Conveyance Allowance	Conveyance Allowance to Permanent Disablement Benefit (PDB) beneficiaries-regarding	Under this Scheme, PDB beneficiaries are paid Rs. 100/- as conveyance allowance on their personal visit to Branch Office for submission of life certificate once in a year.
(xiii)	Atal bimit vyakti kalyan yojana (ABVKY)	Atal Beemit Vyakti Kalyan Yojana provides relief to Insured person who become unemployed in the form of cash compensation up to Ninety (90) days @ 50% average daily earning, ; Provided the employee have completed one year of insurable employment and have contributed not less than Seventy eight (78) days in one periods immediately preceding to the claim of relief.	Cash compensation up to Ninety (90) days, once in a lifetime, to be claimed in one or more spells .	Per day Rate of relief under ATAL Bimit Vyakti Kalyan Yojan is 50% of average earning per day.

25(3) List of Regional Office/Sub-Regional Office/Dispensary-cum-Branch Office**(a) List of Regional Office/Sub-Regional Office:**

Sl. No.	Name of State/ UT	District/ Location	Regional Office (ro)/ Sub- Regional Office (SRO)
1	ANDHRA PRADESH	VIJAYWADA	RO
2		VISHAKHAPATNAM	SRO
3		TIRUPATHI	SRO
4	ASSAM	GUWAHATI	RO
5	BIHAR	PATNA	RO
6	CHATTISGARH	RAIPUR	RO
7	DELHI	DELHI	RO
8		ROHINI	SRO
9		NAND NAGRI	SRO
10		OKHLA	SRO
11	GOA	PANAJI	RO
12	GUJARAT	AHMEDABAD	RO
13		SURAT	SRO
14		VADODARA	SRO
15	HARYANA	FARIDABAD	RO
16		GURGAON	SRO
17		KARNAL	SRO
18	HIMACHAL PRADESH	BADDI	RO
19	J&K	JAMMU	RO
20	JHARKHAND	RANCHI	RO
21	KARNATAKA	BANGALORE	RO
22		BOMMASANDRA	SRO
23		PEENYA	SRO
24		MANGALORE	SRO
25		HUBLI	SRO

26		GULBARGA	SRO
27		MYSORE	SRO
28	KERALA	THRISSUR	RO
29		THIRUVANANTHAPURAM	SRO
30		KOLLAM	SRO
31		ERNAKULAM	SRO
32		KOZHIKODE	SRO
33	MADHYA PRADESH	INDORE	RO
34		BHOPAL	SRO
35	MAHARASHTRA	MUMBAI	RO
36		MAROL	SRO
37		THANE	SRO
38		PUNE	SRO
39		NAGPUR	SRO
40		AURANGABAD	SRO
41		NASIK	SRO
42	ODISHA	BHUBANESHWAR	RO
43		JHARSUGUDA	SRO
44	PUDUCHERRY	PUDUCHERRY	RO
45	PUNJAB	CHANDIGARH	RO
46		JALANDHAR	SRO
47		LUDHIANA	SRO
48	RAJASTHAN	JAIPUR	RO
49		JODHPUR	SRO
50		UDAIPUR	SRO
51	TAMILNADU	CHENNAI	RO
52		COIMBATORE	SRO
53		MADURAI	SRO
54		TIRUNELVELI	SRO
55		SALEM	SRO

56	TELANGANA	HYDERABAD	RO
57	UTTAR PRADESH	NOIDA	SRO
58		KANPUR	RO
59		LUCKNOW	SRO
60		VARANASI	SRO
61	UTTARAKHAND	DEHRADUN	RO
62	WEST BENGAL	KOLKATA	RO
63		BARRACKPORE	SRO
64		DURGAPUR	SRO

(b) District wise functional DCBOs

S.No.	State/UT	NAME OF THE DISTRICT	LOCATION
1	Assam	DARRANG	1. MANGALDOI
2	Andhra Pradesh	GUNTUR	2. GUNTUR
		TIRUPATI	3. TIRUPATI
		SRIKAKULAM	4. SRIKAKULAM
		ANAKAPALLE	5. ANAKAPALLE
3	Arunachal Pradesh	ITANAGAR	6. PAPUMPARE
4	Andaman & Nicobar Island	PORT BLAIR	7. PORT BLAIR
5	Bihar	BHAGALPUR	8. BHAGALPUR
		BEGUSARAI	9. BEGUSARAI
		BHOJPUR	10. ARA
		PATNA	11. PATNA
		GAYA	12. GAYA
		NALANDA	13. BIHAR SHARIF
		VAISHALI	14. HAJIPUR
6	Chhattisgarh	RAJNANDGAON	15. RAJNANDGAON
7	Gujarat	BHAVNAGAR	16. BHAVNAGAR
		BHARUCH	17. ANKELSHWAR
		VALSAD	18. VAPI
8	Haryana	FARIDABAD	19. FARIDABAD
		JHAJJAR	20. BAHADURGARH
9	Himachal Pradesh	MANDI	21. MANDI
10	J&K	SRINAGAR	22. SRINAGAR

		UDHAMPUR	23. UDHAMPUR
		REASI	24. KATRA
		KATHUA	25. KATHUA
		SAMBA	26. BARIBRAHMA
11	Jharkhand	HAZARIBAGH	27. HAZARIBAGH
		EAST SINGHBHUM	28. GHATSHILA
		PALAMU	29. PALAMU
		WEST SINGHBHUM	30. CHAIBASA
12	Karnataka	CHIKKABALLAPURA	31. CHIKKABALLAPURA
		CHAMRAJNAGAR	32. CHAMRAJNAGAR
		KODAGU	33. KODAGU
		UTTARA KANNADA	34. UTTARA KANNADA
		CHIKKAMAGLURU	35. CHIKKAMAGLURU
		HAVERI	36. HAVERI
13	Kerala	IDDUKKI	37. MUNNAR
		MALLAPURAM	38. THAZHEKODE
14	Laddakh	LEH	39. LEH
15	Madhya Pradesh	KHARGONE	40. SANAWAD
		NEEMUCH	41. KHOR
		SAGAR	42. BINA
		KHANDWA	43. KHANDWA
		HOSHANGABAD	44. HOSHANGABAD
		REWA	45. REWA
		CHINDWARA	46. CHINDWARA
		SINGRAULI	47. SINGRAULI
16	Maharashtra	MUMBAI	48. COLABA
		AURANGABAD	49. WALUJ
		BULDHANA	50. KHAMGAON
		GONDIA	51. GONDIA
		SANGLI	52. SANGLI
		RAIGARH	53. PANVEL
		CHANDRAPUR	54. CHANDRAPUR
		WARDHA	55. WARDHA
		YAVATMAL	56. YAVATMAL
		PALGHAR	57. PALGHAR
		THANE	58. MURBAD
		NASIK	59. SINNAR
		JALNA	60. JALNA
		AHMEDNAGAR	61. AHMEDNAGAR
		SATARA	62. SHIVRAL

17	Manipur	WEST IMPHAL	63. WEST IMPHAL
18	Orissa	SUNDERGARH	64. VEDVYAS
19	Punjab	BARNALA	65. BARNALA
		PATIALA	66. RAJPURA
		FEROZPUR	67. FEROPUR
20	Rajasthan	JHUNJHUNU	68. JHUNJHUNU
		CHITTORGARH	69. CHITTORGARH
		AJMER	70. AJMER
		PALI	71. PALI
		JODHPUR	72. JODHPUR
		UDAIPUR	73. UDAIPUR
		CHURU	74. CHURU
21	Tamilnadu	CHENNAI	75. AMBATTUR INDUSTRIAL ESTATE
22	Telangana	HYDERABAD	76. SANATHNAGAR
		KUMARAMBHEEM ASIFABAD	77. SIRPUR KAGHAZNAGAR
		MAHABUBNAGAR	78. MAHABUBNAGAR
		NIZAMABAD	79. NIZAMABAD
		PEDDAPALLI	80. RAMAGUNDAM
		SANGAREDDY	81. SADASIVPET
		WARANGAL URBAN	82. WARANGAL
		YADADRI BHUVANAGIRI	83. BIBINAGAR
		RANGAREDDY	84. L.B. NAGAR
23	Uttar Pradesh	KANPUR DEHAT	85. KANPUR DEHAT
		HAPUR	86. HAPUR
24	West Bengal	MALDA	87. MALDA
		24 SOUTH PARGANAS	88. FALTA
		BANKURA	89. BANKURA

25(4) Revenue & Expenditure of Corporation

Up-to October, 2023 (Unaudited figures) ESIC received contribution of Rs. 10654 Crore and incurred total expenditure of Rs. 8983 Crore out of which 67.26 percent is medical expenditure & 6.85 percent is for cash and other benefits.

S.No.	Particulars	Amount (Rs. In Crore)
1.	Revenue of ESI Corporation	15,848
	Actual from 1.4.2023 to 31.10.2023 (Unaudited):- 1. Contribution Income Rs. : 10654 a. Interest and Other Income Rs. : 5194	
2.	Total Expenditure	8,983
	Actual from 1.4.2023 to 31.10.2023 (Unaudited):- 1. Medical Expenditure Rs. : 7,100 2. Cash & Other benefits Rs. : 614 3. Administrative Expenditure Rs. : 735 a. Capital Expenditure Rs. : 534	

Annexure-V

25(5) Progress made under Ayush as on 01.01.2024 Status of AYUSH (Ayurvedic, Yoga, Unani, Siddha, & Homeopathy) in various States of the country as on 01.01.2024 in ESIC/ESIS Hospitals and Dispensaries:

AYUSH Units in ESIC Hospitals:

SN o	Name of the State	Location of the Hospital	Ayurveda	Yoga	Homoeo pathy	Total
1.	Assam	Beltola, Guwahati	1	1	1	3
2.	Bihar	Phulwarishariff, Patna	1	1	0	2
3.	Bihar	Bihata	0	1	0	1
4.	Chhattisgarh	Raipur	0	1	0	1
5.	Chhattisgarh	Korba	0	1	0	1
6.	Delhi	Basaidarapur	1	1	1	3
7.	Delhi	Jhilmil	1	1	1	3
8.	Delhi	Okhla	1	1	1	3
9.	Delhi	Narela	1	0	1	2
10.	Delhi	Rohini	1	1	1	3
11.	Gujarat	Ankleshwar	1	1	0	2
12.	Gujarat	Bapunagar, Ahmedabad	1	1	1	3
13.	Gujarat	Naroda	1	1	0	2
14.	Gujarat	Vapi	1	1	0	2
15.	Haryana	Faridabad	1	1	1	3
16.	Haryana	Gurgoan	1	1	1	3
17.	Haryana	Manesar	1	1	1	3
18.	Himachal Pradesh	Baddi	1	1	1	3
19.	Jammu & Kashmir	Bari Brahmna	1	1	0	2
20.	Jharkhand	Adityapur	1	1	0	2
21.	Jharkhand	Namkum, Ranchi	1	1	1	3
22.	Karnataka	Rajaji Nagar, Bengaluru	1	1	1	3
23.	Karnataka	Peenya, Bengaluru	1	1	1	3
24.	Karnataka	Kaliburgi	0	1	0	1
25.	Kerala	Ashramam, Kollam	1	1	1	3
26.	Kerala	Ezhukone	1	1	1	3
27.	Kerala	Udyogmandal	1	1	1	3

28.	Madhya Pradesh	Nanda Nagar, Indore	1	1	1	3
29.	Maharashtra	Andheri, Mumbai	1	1	1	3
30.	Maharashtra	Bibvewadi	1	1	0	2
31.	Maharashtra	Kolhapur	1	1	0	2
32.	Orissa	Rourkela	1	1	0	2
33.	Orissa	Angul	0	1	0	1
34.	Punjab	Chandigarh	1	1	1	3
35.	Punjab	Ludhiana	1	1	1	3
36.	Rajasthan	Alwar	1	1	0	2
37.	Rajasthan	Bhiwadi	1	1	1	3
38.	Rajasthan	Jaipur	1	1	1	3
39.	Tamil Nadu	K.K. Nagar, Chennai	1	1	1	3
40.	Tamil Nadu	Tirunelveli	1	1	1	3
41.	Telangana	Sanathnagar, Hyderabad	1	1	0	2
42.	Uttrakhand	Rudarpur	0	1	0	1
43.	Uttar Pradesh	Bareilly	1	1	1	3
44.	Uttar Pradesh	Noida Sector -24	1	1	1	3
45.	Uttar Pradesh	Lucknow	1	1	1	3
46.	Uttar Pradesh	Varanasi	1	1	1	3
47.	Uttar Pradesh	Sahibabad	1	1	1	3
48.	Uttar Pradesh	Jajmau, Kanpur	1	1	0	2
49.	West Bengal	Joka	1	1	1	3
		Total	43	48	31	122

AYUSH Units in ESIC Dispensaries

SNo.	Location of Dispensary	Ayurveda	Homoeopathy	Total
1.	Azadpur	1	0	1
2.	Dwaraka Sec-7	1	1	2
3.	Kalkaji	1	0	1
4.	Mangol puri	1	1	2
5.	Maya puri	1	1	2
6.	Mayur Vihar	1	0	1
7.	Modi mill	1	1	2
8.	Najafgarh	1	0	1
9.	Nand Nagri	1	1	2
10.	NIA 1	1	1	2

11.	Rohini Sec.5	1	0	1
12.	Sarojini Nagar	1	1	2
13.	Seelampur	1	0	1
14.	Tilak Vihar	1	0	1
15.	Wazirpur	1	0	1
16.	Noida Sec-12	1	1	2
17.	Inderlok	0	1	1
18.	Jwalapuri	0	1	1
19.	Sabzi Mandi	1	0	1
20.	Shastri Nagar	0	1	1
	Total	17	11	28

AYUSH units in ESIS Hospitals

Sl. No.	Name of the State	Location of the hospital	Ayur veda	Yoga	Unani	Siddha	Homeo pathy	Total
1.	Andhra Pradesh	Rajahmundry	1	0	0	0	1	2
2.	Andhra Pradesh	Tirupati	1	0	0	0	1	2
3.	Andhra Pradesh	Visakhapatnam	1	0	0	0	1	2
4.	Andhra Pradesh	Vijayawada	1	0	0	0	1	2
5.	Goa	Margao	1	0	0	0	1	2
6.	Gujarat	GH Rh, Ahmedabad	1	1	0	0	0	2
7.	Gujarat	Gh Kalol	1	1	0	0	0	2
8.	Gujarat	Gh Rajkot	1	1	0	0	0	2
9.	Gujarat	Gh Jamnagar	1	1	0	0	0	2
10.	Gujarat	Gh Bhavnagar	1	1	0	0	0	2
11.	Gujarat	Gh Vadodara	1	1	0	0	0	2
12.	Gujarat	Gh Surat	1	1	0	0	0	2
13.	Haryana	Jagadhari	1	0	0	0	0	1
14.	Haryana	Panipat	1	0	0	0	0	1
15.	Himachal Pradesh	Parwanoo	1	0	0	0	0	1
16.	Karnataka	Indranagar, Bangalore	1	0	0	0	0	1
17.	Kerala	Mulamkunnathu kavu, Thrissur	1	0	0	0	0	1
18.	Maharashtra	Mulund	1	1	1	0	1	4
19.	Maharashtra	Nashik	1	1	1	0	1	4
20.	Maharashtra	Nagpur	1	1	1	0	1	4
21.	Maharashtra	Aurangabad	1	1	0	0	0	2

22.	Maharashtra	Solapur	1	1	0	0	1	3
23.	Maharashtra	Chinchwad, Pune	1	1	1	0	1	4
24.	Maharashtra	Worli	1	1	0	0	0	2
25.	Maharashtra	Thane	0	1	0	0	0	1
26.	Maharashtra	MGM Hospital, Parel	0	1	0	0	0	1
27.	Maharashtra	Navi Mumbai	0	1	0	0	0	1
28.	Maharashtra	Uhlash Nagar	0	1	0	0	0	1
29.	Orissa	ESISH Choudwar	2	0	0	0	0	2
30.	Punjab	Mohali	1	0	0	0	0	1
31.	Punjab	Phagwara	1	0	0	0	0	1
32.	Punjab	Mandigobindgar h	1	0	0	0	0	1
33.	Punjab	Hoshiarpur	1	0	0	0	0	1
34.	Punjab	Jalandhar	1	0	0	0	0	1
35.	Rajasthan	Jodhpur	0	0	0	0	1	1
36.	Tamil Nadu	Ayanavaram	1	0	1	1	1	4
37.	Tamil Nadu	Hosur	1	1	0	1	0	3
38.	Tamil Nadu	Madurai	1	1	1	1	1	5
39.	Tamil Nadu	Salem	1	1	0	1	0	3
40.	Tamil Nadu	Sivakasi	1	0	0	1	0	2
41.	Tamil Nadu	Trichy	1	1	0	1	0	3
42.	Tamil Nadu	Vellore	1	1	0	1	0	3
43.	Tamil Nadu	Coimbatore	1	1	1	1	1	5
44.	Telangana	Nacharam	1	0	0	0	1	2
45.	Uttar Pradesh	Pandunagar, Kanpur	1	0	0	0	1	2
46.	Uttar Pradesh	Kidwai Nagar, Kanpur	1	0	0	0	1	2
47.	Uttar Pradesh	Saharanpur	1	0	0	0	1	2
48.	Uttar Pradesh	Nani, Prayagraj	1	0	0	0	1	2
49.	Uttar Pradesh	Agra	1	0	0	0	1	2
50.	Uttar Pradesh	Modi Nagar, Ghaziabad	1	0	0	0	1	2
51.	Uttar Pradesh	Sarvodiya nagar, Kanpur	0	0	0	0	1	1
52.	West Bengal	Bandel	1	0	0	0	1	2
53.	West Bengal	Budge Budge	1	0	0	0	1	2
54.	West Bengal	Kamarhati	1	0	0	0	1	2
55.	West Bengal	Sealdah	1	0	0	0	1	2

56.	West Bengal	Uluberia	1	0	0	0	1	2
57.	West Bengal	Gaurhati	1	0	0	0	1	2
	Total Units		52	24	7	8	28	119

Ayush units in ESIS Dispensaries

Sl. No.	Name of the State	Location of the Dispensary	Ayur veda	Yoga	Unani	Siddha	Homeo pathy	Total
1.	Bihar	Hathidah	1	0	0	0	0	1
2.	Bihar	Jamal Road	1	0	0	0	0	1
3.	Bihar	Samastipur	0	0	1	0	0	1
4.	Gujarat	AHD D-1	1	0	0	0	0	1
5.	Gujarat	AHD D-2	1	0	0	0	0	1
6.	Gujarat	AHD D-3/5/8	1	0	0	0	0	1
7.	Gujarat	AHD D-10	1	0	0	0	0	1
8.	Gujarat	AHD D-12	1	0	0	0	0	1
9.	Gujarat	AHD D-13/14	1	0	0	0	0	1
10.	Gujarat	AHD D-15	1	0	0	0	0	1
11.	Gujarat	AHD D-19	1	0	0	0	0	1
12.	Gujarat	AHD D-20	1	0	0	0	0	1
13.	Gujarat	AHD D-22	1	0	0	0	0	1
14.	Gujarat	AHD D-32	1	0	0	0	0	1
15.	Gujarat	AHD D-34	1	0	0	0	0	1
16.	Gujarat	AHD D-35	1	0	0	0	0	1
17.	Gujarat	AHD D-36	1	0	0	0	0	1
18.	Gujarat	AHD D-37/40	1	0	0	0	0	1
19.	Gujarat	AHD D-42	1	0	0	0	0	1
20.	Gujarat	AHD D-44	1	0	0	0	0	1
21.	Gujarat	AHD D-45	1	0	0	0	0	1
22.	Gujarat	AHD D-47	1	0	0	0	0	1
23.	Gujarat	AHD D-49	1	0	0	0	0	1
24.	Gujarat	Nandiad d-1/2	1	0	0	0	0	1
25.	Gujarat	Kadi-d-1	1	0	0	0	0	1
26.	Gujarat	Baroda d-6/15	1	0	0	0	0	1
27.	Gujarat	Baroda d-10/11	1	0	0	0	0	1
28.	Gujarat	Navsari d-1	1	0	0	0	0	1
29.	Gujarat	Bharuch d01	1	0	0	0	0	1
30.	Gujarat	Baroda d-2	1	0	0	0	0	1
31.	Gujarat	Baroda d-8/17	1	0	0	0	0	1
32.	Gujarat	Surat d-1	1	0	0	0	0	1
33.	Gujarat	Surat d-6/8/9	1	0	0	0	0	1
34.	Gujarat	Morbi D-1/2	1	0	0	0	0	1
35.	Gujarat	Rajkot D-1	1	0	0	0	0	1

36.	Gujarat	Rajkot D-2	1	0	0	0	0	1
37.	Haryana	Udyog Vihar, Gurgaon	1	0	0	0	0	1
38.	Kerala	Pattathanam, Kollam	1	0	0	0	0	1
39.	Kerala	Kottarakkara, Kollam	1	0	0	0	0	1
40.	Kerala	Kottayam	1	0	0	0	0	1
41.	Kerala	Alappuzha	1	0	0	0	0	1
42.	Kerala	Ernakulam	1	0	0	0	1	2
43.	Kerala	Plakkad	1	0	0	0	0	1
44.	Kerala	Poonkunnam Thrissur	1	0	0	0	0	1
45.	Kerala	Eranjipalam, Kozhikode	1	0	0	0	0	1
46.	Kerala	Kannur	1	0	0	0	1	2
47.	Kerala	Karamana, Thiruvananthapuram	0	0	0	0	1	1
48.	Kerala	Peroorkada	1	0	0	0	0	1
49.	Kerala	Pathirappally Alappuzha	0	0	0	0	1	1
50.	Kerala	Alagappanagar, Thrissur	0	0	0	0	1	1
51.	Kerala	Mulavana, Kollam	0	0	0	0	1	1
52.	Kerala	Kadampanadu, Pathanamthitta	0	0	0	0	1	1
53.	Kerala	Vadavathoor, Kottayam	0	0	0	0	1	1
54.	Kerala	Velloor, Kottayam	0	0	0	0	1	1
55.	Kerala	Kottayam, Kollam	0	0	0	0	1	1
56.	Kerala	Kalamassery, Ernakulam	0	0	0	0	1	1
57.	Kerala	Aluva, Ernakulam	0	0	0	0	1	1
58.	Kerala	Chalappuram, Kozhikode	0	0	0	0	1	1
59.	Maharashtra	Somwaripeth, Nagpur	1	0	0	0	0	1
60.	Maharashtra	Wadi, Nagpur	1	0	0	0	0	1
61.	Maharashtra	Ichalkarnji, (under AMO Pune)	1	0	0	0	0	1
62.	Maharashtra	Nanded(under AMO Aurangabad)	1	0	0	0	0	1
63.	Maharashtra	Kohlapur	1	0	0	0	0	1
64.	Maharashtra	Buttbori, Nagpur	1	0	0	0	0	1
65.	Maharashtra	Highanghat, V.R.Nagpur	1	0	0	0	0	1
66.	Punjab	Chandigarh	1	1	0	0	0	2
67.	Tamil Nadu	ESIS Disp. No. 4 Jaipur	1	0	0	0	0	1
68.	Tamil Nadu	Tambaram, Chennai	1	0	0	1	0	2
69.	Tamil Nadu	Tiruvotriyur, Chennai	0	0	0	1	0	1
70.	Tamil Nadu	Triplicane, Chennai	0	0	0	1	0	1
71.	Tamil Nadu	Avadi, Chennai	1	0	0	1	1	3
72.	Tamil Nadu	Koratur, Chennai	0	0	0	1	0	1
73.	Tamil Nadu	Sriperumputhur, Chennai	0	0	0	1	0	1

74.	Tamil Nadu	Rajapalayam, Madurai	1	0	0	1	0	2
75.	Tamil Nadu	Kovilpatti, Madurai	0	0	0	1	1	2
76.	Tamil Nadu	Thoothukudi, Madurai	1	0	1	1	1	4
77.	Tamil Nadu	Dindigul, Madurai	0	0	0	1	0	1
78.	Tamil Nadu	Thirunagar, Madurai	1	0	0	1	0	2
79.	Tamil Nadu	Pollachi, Coimbatore	0	0	0	1	0	1
80.	Tamil Nadu	Thudialur, Coimbatore	1	0	0	1	0	2
81.	Tamil Nadu	Tiruppur I, Coimbatore	1	0	0	1	0	2
82.	Tamil Nadu	Udumalaipet, Coimbatore	1	0	0	1	0	2
83.	Tamil Nadu	Kattur I, Coimbatore	0	0	0	1	0	1
84.	Tamil Nadu	Kumbakonam, Salem	1	0	0	1	0	2
85.	Tamil Nadu	Ambur, Salem	0	0	1	1	0	2
86.	Tamil Nadu	Ranipet, Salem	0	0	1	1	0	2
87.	Tamil Nadu	Pallipalayam,Salem	1	0	0	1	0	2
88.	Tamil Nadu	Perianaicken palayam	0	0	0	1	0	1
89.	Tamil Nadu	Peelamedu	0	0	0	1	0	1
90.	Tamil Nadu	Singanallur (St)	0	0	0	1	0	1
91.	Tamil Nadu	Nagaercoil	0	0	0	1	0	1
92.	Tamil Nadu	Munichalai	0	0	0	1	0	1
93.	Tamil Nadu	Palanganatham	0	0	0	1	0	1
94.	Tamil Nadu	Thirunelveli	0	0	0	1	0	1
95.	Tamil Nadu	Sivakasi	0	0	0	1	0	1
96.	Tamil Nadu	Vickramasinga puram	0	0	0	1	0	1
97.	Tamil Nadu	Ponnagaram	0	0	0	1	0	1
98.	Tamil Nadu	136, Nedunsalai Nagar, Salem (Static)	0	0	0	1	0	1
99.	Tamil Nadu	Trichy (Static)	0	0	0	1	0	1
100.	Tamil Nadu	Sipcot colony, Hosur	0	0	0	1	0	1
101.	Tamil Nadu	Thuvakudi	0	0	0	1	0	1
102.	Tamil Nadu	Nandambakkam	1	0	0	1	0	2
103.	Tamil Nadu	Adyar, Chennai	0	0	0	1	0	1
104.	Tamil Nadu	Pallavaram	1	0	0	1	0	2
105.	Tamil Nadu	Kodambakkam, Chennai	0	0	0	1	0	1
106.	Tamil Nadu	Saidapet-I, Chennai	0	0	0	1	0	1
107.	Tamil Nadu	Tondiarpet, Chennai	0	0	0	1	0	1
108.	Tamil Nadu	Ambattur, Chennai	1	0	0	1	0	2
109.	Tamil Nadu	Poonamallee, Chennai	0	0	0	1	0	1
110.	Tamil Nadu	Red Hills, Chennai	0	0	0	1	0	1
111.	Uttar Pradesh	Kabari Market, Kanpur	1	0	0	0	0	1

112.	Uttar Pradesh	Govind Nagar, Kanpur	0	0	0	0	1	1
113.	Uttar Pradesh	Kiran colony nagar, Ghaziabad	0	0	0	0	1	1
114.	Uttar Pradesh	Sarojini Nagar, Lucknow	1	0	0	0	0	1
115.	Uttar Pradesh	Mohan Nagar	1	0	0	0	0	1
	Total		71	1	4	43	18	137

AYUSH Units at a Glance

S.No	Type of location	Ayurveda	Yoga	Unani	Siddha	Homeopathy	Total
1	ESIC Hospitals	43	48	0	0	31	122
2	ESIC Dispensaries	17	0	0	0	11	28
3	ESIS Hospitals	52	24	07	08	28	119
4	ESIS Dispensaries	71	01	04	43	18	137
	Total	183	73	11	51	88	406

STATEMENT SHOWING FACILITIES PROVIDED IN AYUSH (AYURVEDIC, YOGA, UNANI, SIDDHA & HOMOEOPATHY) IN THE VARIOUS STATES OF THE COUNTRY AS ON 01/01/2024 in ESIC/ESIS.

Sr. No.	State	Ayurveda		Unani	Siddha	Homoeopathy		Yoga		All AYUSH System
		ESIC	ESIS	ESIS	ESIS	ESIC	ESIS	ESIC	ESIS	
1.	Andhra Pradesh	0	04	0	0	0	04	0	0	8
2.	Assam	01	0	0	0	01	0	01	0	3
3.	Bihar	01	02	01	0	0	0	02	0	6
4.	Chhattisgarh	00	00	00	00	00	00	02	0	02
5.	Delhi	21	0	0	0	15	0	04	0	40
6.	Goa	0	01	0	0	0	01	0	0	2
7.	Gujarat	04	40	0	0	01	0	04	07	56
8.	Haryana	03	03	0	0	03	0	03	0	12
9.	Himachal Pradesh	01	01	0	0	01	0	01	0	4
10.	Jammu & Kashmir	01	0	0	0	0	0	01	0	2
11.	Jharkhand	02	0	0	0	01	0	02	0	5

12.	Karnataka	02	01	0	0	02	0	03	0	8
13.	Kerala	03	11	0	0	03	13	03	0	33
14.	Madhya Pradesh	01	0	0	0	01	0	01	0	3
15.	Maharashtra	03	14	04	0	01	05	03	11	41
16.	Orissa	01	02	0	0	0	0	02	00	05
17.	Punjab	02	06	0	0	02	0	02	01	13
18.	Rajasthan	03	01	0	0	02	01	03	0	10
19.	Tamil Nadu	02	21	06	51	02	06	02	06	96
20.	Telangana	01	01	0	0	0	01	01	0	4
21.	Uttar Pradesh	07	09	0	0	06	09	06	0	37
22.	Uttarakhand	00	00	00	0	00	00	01	0	1
23.	West Bengal	01	06	0	0	01	06	01	0	15
	Total	60	123	11	51	42	46	48	25	406

25(6) Process of formulation of Rate Contract

The function of Rate Contract Cell is enumerated briefly as follow:

1. Availability of Drugs & Dressings for all ESI Institutions;

- a) Through GeM ; 103 CPSU Drugs.
- b) Through DG ESIC Rate Contracts: 901 Drugs

1.1 DG ESIC Rate Contracts:

- a. Running DG ESIC Rate Contract/s are finalized through open e-tendering processed online on e-procurement portal of Govt. of India i.e. Central Public Procurement Portal after seeking due exemption from SCoGeM.
- b. All DG ESIC e- tender enquiries and Rate Contracts adhere to all statutory Govt. of India decisions on public procurement guidelines, GeM, GFR, CVC & Make in India inter alia.
- c. All DG ESIC e- Tender Enquiries adhere to incorporation of Integrity Pact as per CVC guidelines.
- d. DG ESIC Rate Contracts with eligible Pharmaceuticals firms are published for a validity of two years.

1.2: Process of formulation of Rate Contract:

Drug Schedules for forthcoming Tender Enquiries are finalized after due process of Addition/Deletion of drugs by a broad-based Drug Selection Committee.

- a. DG ESIC e- tender enquiries on e-procurement portal of Govt. of India i.e. Central Public Procurement Portal (CPP Portal) and simultaneously on official ESIC website.
- b. The e- tender enquiries are also shared with ASSOCHAM, FICCI, Confederation of India Industry (CII), PHD Chamber of Commerce and Industries, India Drug Manufactured Association, Organization of Pharmaceutical Procedures of India and Bulk Drug Manufacturer's Association for wider publicity and participation.
- c. Bids are invited from eligible Pharmaceuticals firms in two bid system i.e. Technical Bid and Price Bid.
- d. Final Rate Contract is awarded to the approved pharmaceutical firms after approval from Director General.

1.3 Eligibility Criteria for Vendor selection:

- a. Eligibility Criteria as defined under the Tender Enquiry, play a very important Role in deciding the Right Firm with the Right Capacity capable of delivering drugs of the Right Quality at the Right time in the Right Quantity.
- b. Eligibility criteria for DG ESIC Tender Enquiry are:
 - Item wise Turnover, EMD and Security Deposit based on annual expenditure incurred in the financial year for the item.
 - Valid Drug manufacturing License or Import license.
 - Good Manufacturing Practice Certificate (GMP)/WHO-GMP Certificate
 - Good Laboratory Practice Certificate
 - Non-Conviction Certificate
 - Manufacturing & Marketing and Production certificates issued from Statutory

Licensing Authorities.

- Compliance to all relevant Acts/Enactments i.e GST, The Drugs and Cosmetics Act, 1940, The Legal Metrology Act, 2009 and The Indian Statistical Institute Act, 1959 etc.)
2. Improving synergy with ESIC and State ESI Institutions - Zonal Medical Commissioners, Deans, Medical Superintendents, Director insurance Medical services (DIMS) and State Medical Officer (Nodal Officer) coordinate and regularly monitor uninterrupted supply of drugs in all ESI Institutions.
 - 3.Improving synergy with Pharmaceutical firms- Regular Video Conferences are held to expedite pending payment issues of DG ESIC RC approved vendors & resolution of other issues inter alia.
 4. Central Monitoring Of ESI Institutions- Online monitoring of Inventory record, Expiry of drugs, adherence to GeM procurement of ESI Institutions through Dhanwantri modules:
 - A. Budget Expenditure & Procurement of Drugs & Medical Items through GeM & non-GeM
 - B. Monthly reporting of Inventory and Expiry of drugs.
 5. Central Monitoring of Performance of DG ESIC RC Approved pharmaceutical firms:
 6. Issuance of amendments in rates/ manufacturing site/pack size etc. and initiation of punitive action for not adhering to the Terms & Conditions of the Rate Contract, non-supply, deviation from standard quality for seamless delivery of drugs across all ESI Institutions pan India.
 7. Proactive role in COVID Management- Enhancement of Purchase committee value to Rs 10 Lakhs (from Rs 2.5 Lakhs) in order to facilitate procurement of COVID related drugs and facilitating inter hospital coordination for smooth delivery of services to ESI beneficiaries from time to time.
 8. Inter- Ministerial procedural co-ordinationa.
 - a) Regular coordination with SCoGeM to:
 - Facilitate procurement of drugs, reagents, surgical consumables, orthopaedic implants etc through GeM.
 - Regular meeting for implementation of Rate Contract facility on GeM.
 - Coordinating solutions to procedural difficulties faced by user units on GeM.
 - b) Regular coordination with Department of Pharmaceuticals and Department for Promotion of Industry and Internal Trade (DPIIT):
 - Exemption of 90 items Imported/Proprietary medicines for procurement through DGESIC Rate Contracts sought.
 9. Regular Training of User Units:
 - Regular trainings are coordinated with ICT division to ESI Institutions for knowledge updation of various modules of Materials Management on Dhanwantri.
