

**GOVERNMENT OF INDIA
MINISTRY OF LABOUR AND EMPLOYMENT
LOK SABHA
UNSTARRED QUESTION NO. 1948
TO BE ANSWERED ON 13.03.2023**

MEDICAL TREATMENT IN ESIC

†1948. SHRI VINAYAK RAUT:

Will the Minister of LABOUR AND EMPLOYMENT be pleased to state:

- (a) whether the Government proposes to bring every district of the country under the ambit of Employees State Insurance Corporation (ESIC), if so, the details thereof particularly Maharashtra;**
- (b) whether all the district of Maharashtra have also brought under the ambit of ESIC, if so, the details thereof;**
- (c) whether there is any proposal to provide auto referral to empanelled private hospitals in case ESIC hospitals do not have expertise to treat any disease, if so, the details thereof;**
- (d) whether ESIC beneficiaries are not being referred to any other hospital despite the unavailability of necessary treatment in ESIC hospitals;**
- (e) whether the Government has made any enquiry in this regard; and**
- (f) if so, the details thereof along with the necessary steps taken by the Government to facilitate the same?**

ANSWER

**MINISTER OF STATE FOR LABOUR AND EMPLOYMENT
(SHRI RAMESWAR TELI)**

(a) to (f): The Employees' State Insurance Corporation (ESIC) has decided to implement ESI scheme in all the districts of the country. As on 01.03.2023, the ESI scheme is notified in all the states and union territories, except in Lakshadweep. At present, out of total 744 districts of the country, the ESI scheme is extended to 609 districts. It includes 483 fully covered districts and 128 partially covered districts under the scheme. As far as Maharashtra is concerned, the ESI scheme is extended to all its districts, except in the districts of Hingoli and Nandurbar.

Contd..2/-

The ESIC provides medical treatment to beneficiaries through its hospitals and dispensaries. In case the prescribed treatment is not available in the ESI hospital, the treatment is provided to ESI beneficiaries through the ESIC empaneled public/ private hospitals in a cashless manner. The beneficiaries are required to follow a prescribed referral procedure to avail the treatment. Further, in case of emergencies, the ESI beneficiaries can obtain treatment directly from the empaneled hospitals without such referral. In such cases, the tie-up hospital has to start the stabilizing treatment initially and after obtaining permission by the hospital from respective ESI institution through an online system, further treatment can be continued.
