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Integrated Headquarters
Ministry of Defence (Navy)
New Delhi – 110011

MH/3865/SeHAT

17 Feb 22

The Flag Officer Commanding-in- Chief
[for CSO (P&A)/ CMO]
Headquarters, Western Naval Command
Mumbai- 400 001

The Commander-in-Chief
[for CSO (L, A&P)/ CSO (Med)]
Andaman & Nicobar Command
C/o Navy Office
Port Blair-744 102

The Flag Officer Commanding-in- Chief
[for CSO (P&A)/ CMO]
Headquarters, Eastern Naval Command
Visakhapatnam-530 014

The Flag Officer Commanding-in- Chief
[for CSO (P&A)/ CMO]
Headquarters, Southern Naval Command
Kochi- 682 004

DELIVERY OF MEDICINES: SeHAT OPD

1. Refer to the following:-

- (a) IHQ MoD(N)/ DGMS (N) letter MH/3865/Sehat dated 19 Jul 21 and 16 Feb 22.
- (b) HQIDS note 70012/4/1/DCIDS (Med) dated 03 Jan 22 and 02 Feb 22 (not addressed to all, copy attached).

2. SeHAT Telemedicine OPD has been developed for providing online Teleconsultation services to all serving personnel and dependents as well as as ECHS beneficiaries. This project steered by HQIDS was launched on 27 May 21 by the Hon'ble Defence Minister. The first phase of implementation in the /N was at Mumbai, Visakhapatnam and Kochi. Currently, the project has been expanded to the entire Navy.

3. It has been seen that the utilization of the SeHAT OPD is low across all the three services. During analysis one of the roadblocks identified is the distribution of medicines to the patients. The online services of SeHAT OPD ends with generation of e-prescription, which can be downloaded by the patient. Modalities for the delivery of medicines to beneficiaries post generation of e-prescription has been left at the discretion of the Services.

Contd/-

4. Various modalities for delivery of medicines was brainstormed at this Dte Gen based on the feasibility, constraints of services/ location, legal implications and need for accounting of medicines, etc. Some of the proposed modalities are as mentioned in paras below.

(a) **BHDC Model**. A pilot project was undertaken at BHDC for home delivery of medicines. The medicines are being delivered in Delhi NCR region by outsourcing the services to a courier service company. It has been ensured that the medicine packets reach the beneficiary within 24 to 48 hours.

(b) **ECHS Model**. Centrally ECHS has proposed a model whereby outsourcing the procurement of medicines to Integrated Service Provider (ISPs) such as e-pharmacies, who will ensure better availability of medicines at polyclinics and provide the option of home delivery to the beneficiary. The beneficiaries can demand the medicines online from these service providers when prescribed on SeHAT. In the interim (i.e upto 30 Apr 22), sanction to purchase medicines from local market and reimburse the cost has been extended due to ongoing pandemic.

(c) **Station Welfare Measure**. In smaller stations, where most personnel/ dependents are residing in close geographic proximity to the Health Care Facility, home delivery of medicines can be made part of communal duties in consultation with Station Commanders. Personnel from all Station/ units can pool in manpower and vehicles as per a roster and provide services of home delivery of medicines.

(a) **Self Collection**. If the beneficiary so wishes, then he may be encouraged to self collect the medicines from the authorised Health Care Facility.

4. It is reiterated that SeHAT module addresses only the mild illnesses and for follow-up, as other cases would need physical check-up and investigations.

5. It is requested that the above modalities may be examined and road map on establishing the most suitable method of delivery of SeHAT prescribed medicines in Stations under your AOR be forwarded to this Dte Gen by **10 Mar 22**. It is also requested that alternative solutions if any may be forwarded to this Dte Gen.

(Ajit Gopinath)
Surg Cmde
Cmde(MS)- HS

Encl :- As above

Copy to:-

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