

Dated-16/07/2020

No. 77-F(MED)WB

**MEMORANDUM**

**Sub: Revision of guidelines for reimbursement of the cost of Special Devices under West Bengal Health Scheme.**

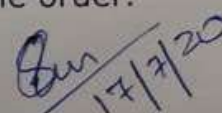
Cost of Special Devices like Hearing Aid, Artificial Appliance, Wheel Chairs/Clutches, CPAP and BIPAP machine is reimbursable under West Bengal Health Scheme. But there are some ambiguities and lack of completeness regarding the mode of admissibility of such special devices in the existing Order No. 9205-F(MED) dated 10.05.2009 and Order No. 3733-F(MED) dated 10.05.2013. Revision of guidelines for reimbursement of the cost of special devices has been under active consideration to the government from some time past.

Now, in continuation of the above mentioned orders of Finance Department, the Governor is pleased to issue a fresh guidelines for reimbursement towards the cost of special devices in the following manner for the benefit of members enrolled under West Bengal Health Scheme:-

Sl. No.	Particulars	Name of Special Devices				
		Hearing Aid	Artificial Appliances	Wheel Chairs/Clutches	CPAP machine	BIPAP machine
1	Maximum Admissible Amount in each case.	Rs. 30,000/- or cost price whichever is less.	Actual Cost.	Actual Cost	Rs. 50,000/- or cost price whichever is less.	Rs. 1,00,000/- or cost price whichever is less.
2	Maximum nos. of occasion for allowing for reimbursement	2 (Two) times per ear for each beneficiary.	Unlimited for each beneficiary.	Unlimited for each beneficiary.	1 (One) time for each beneficiary.	1 (One) time for each beneficiary.
3	Minimum time span between two claims of same organ or limb.	5 (Five) Years	4 (Four) Years	4 (Four) Years	Not applicable	Not applicable
4	Authority of issuing the Essentiality Certificate.	It shall be given by the ENT specialist in an official letter head of recognized hospitals on the basis of	It shall be advised by the specialist surgeons / physicians as a case of OPD or noted in	It shall be advised by the specialist surgeons / physicians as a case of OPD or noted in discharge summary	It shall be advised by the specialized surgeon / physician of recognized hospitals in discharge	It shall be advised by the specialized surgeon / physician of recognized hospitals in discharge

		Audiometry Report.	discharge summary against an IPD treatment of recognized hospitals.	against an IPD treatment of recognized hospitals.	summary against an IPD treatment on the basis of Polysomnography Report.	summary against an IPD treatment on the basis of Polysomnography Report.
5	Requirement of documents.	Original copy of OPD prescription and audiometry report are mandatory.	Either original copy of OPD prescription or original copy of discharge summary of IPD treatment is mandatory.	Either original copy of OPD prescription or original copy of discharge summary of IPD treatment is mandatory.	Original copy of discharge summary of IPD treatment is mandatory.	Original copy of discharge summary of IPD treatment is mandatory.
6	Requirement of prior approval from West Bengal Health Scheme Authority, Finance Department.	Not Required	Not Required	Not Required	Mandatory	Mandatory
7	Form to be used for claiming reimbursement	Form-C1	Form-C1	Form-C1	Form-C1	Form-C1
8	Attachment of <b>Annexure-I</b> with claim.	Not required.	Not required.	Not required.	Not required.	Not required.

This will come into effect from the date of issuance of the order.

  
 (Shilpa Gourisaria, IAS)  
 Joint Secretary, Finance Department  
 Government of West Bengal