



भारत सरकार GOVERNMENT OF INDIA
 वित्त मंत्रालय MINISTRY OF FINANCE
 राजस्व विभाग DEPARTMENT OF REVENUE
 केन्द्रीय अप्रत्यक्ष कर एवं सीमा शुल्क बोर्ड
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प्रशासनिक परिपत्र सं. 04/2023/ADMINISTRATIVE CIRCULAR NO. 04/2023

विषय: विकलांग व्यक्तियों (विभागीय अधिकारी या उनके आश्रित परिवार के सदस्य होने के नाते) को उपकरण (सहायक उपकरण) की खरीद या फिटिंग के लिए वित्तीय सहायता प्रदान करने - के संबंध में।

Sub: Grant of financial assistance to persons with disability (being the departmental officials or their dependent family members) for purchase /fitting of aids/appliances (assistive devices) - Reg.

उपर्युक्त विषय पर डी जी एच आर डी, सी बी आई सी द्वारा जारी पत्र एफ.सं. InW/WF-1/MA/103/2021-WLFR दिनांक 16.08.2021 के साथ स्वास्थ्य एवं परिवार कल्याण मंत्रालय(एम ओ एच एफ डबल्यू) द्वारा जारी कार्यालय ज्ञापन संख्या एस- 11011/25/2014/सी जी एच एस-(पी) दिनांक 08.07.2014 का भी संदर्भ लें , जिसमें सी जी एच एस/सी एस (एम ए) लाभार्थियों के लिए कृत्रिम उपकरणों की सूची और दरों में संशोधन किया गया है और पात्रता के लिए सामान्य दिशानिर्देश दिए गए हैं।

Reference is invited to Letter F. No. InW/WF-1/MA/103/2021-WLFR dated 16.08.2021 issued by DGHRD, CBIC on the above subject and also to the Office Memorandum No. S-11011/25/2014/CGHS-(P) dated 08.07.2014 issued by the Ministry of Health & Family Welfare (MoHFW) revising the lists and rates of artificial appliances for CGHS/ CS (MA) beneficiaries and general guidelines for eligibility.

विकलांग व्यक्तियों (विभागीय अधिकारी या उनके आश्रित परिवार के सदस्य होने के नाते) को उपकरण (सहायक उपकरण) की खरीद/फिटिंग हेतु वित्तीय सहायता प्रदान करने की योजना के संबंध में डी जी एच आर डी का पत्र के साथ सी जी एच एस / सी एस (एम ए) लाभार्थियों के लिए कृत्रिम उपकरणों की संशोधित सूची और दरों को प्रस्तुत करने वाले अनुलग्नक सहित स्वास्थ्य और परिवार कल्याण मंत्रालय का कार्यालय ज्ञापन और पात्रता के लिए सामान्य दिशानिर्देश, सभी पात्र विभागीय अधिकारियों की जानकारी के लिए संलग्न हैं।

The Office Memorandum of MoHFW along with annexure furnishing the revised lists and rates of artificial appliances for CGHS/CS (MA) beneficiaries and general guidelines for eligibility along with the letter of DGHRD regarding the scheme for grant of financial assistance to persons with disability (being the departmental officials or their dependent family members) for purchase/fitting of aids/appliances (assistive devices) is enclosed herewith for information all the eligible departmental officials.

Signed by

Subha Chandran

शभा चंद्रन / SUBHA CHANDRAN

Date: 23-05-2023 12:02:13

सहायक आयुक्त / ASST. COMMR. OF CUSTOMS (प्रशासन /ADMIN)

प्रति To:

सभी अधिकारी एवं कर्मचारी (वेबसाइट व सूचना पट्ट द्वारा) All Officers and Staff (Through Website & Notice Board) & ई डी आई अनुभाग (आधिकारिक वेबसाइट में अपलोड करने हेतु) EDI Section (for uploading in the Official Website).

	<p>Government of India Ministry of Finance, Department of Revenue Directorate General of Human Resource Development Indirect Taxes & Customs C-4, Ground Floor, IRCON Building, West Wing, District Centre Saket, New Delhi-110017</p>	
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F.NO. InW/WF-1/MA/103/2021-WLFR-O/o ADG-I and W-DGHRD-Delhi

Dated: 16.08.2021

To

The Pr. Chief Commissioners/ Pr. Directors General	(All)
The Chief Commissioners/ Directors General	(All)
The Pr. Commissioners / Pr. Additional Directors General	(All)
The Commissioners / Additional Directors General	(All)

Sir/Madam,

Subject: Grant of financial assistance to persons with disability (being the departmental officials or their dependent family members) for purchase/fitting of aids/appliances (assistive devices)-reg.

The Governing Body constituted to administer the Customs and Central Excise Welfare Fund has approved Grant of financial assistance to persons with disability (being the departmental officials or their dependent family members) for purchase/fitting of aids/appliances (assistive devices). The approved Scheme is appended herewith.

2. The scheme is devised to grant financial assistance to the needy persons with disability (PwD) being departmental officials or their dependent family members for procuring durable, sophisticated and scientifically manufactured, modern, standard Assistive Devices to promote their physical, social, psychological rehabilitation. The Scheme comes into effect from today i.e. 16.08.2021.

3. The Scheme may be given wide publicity to spread awareness of the scheme to the grass-root level so that maximum benefit can be drawn by the eligible departmental officials and schemes. The jurisdictional Commissioners/Additional Directors General may forward their requests of eligible departmental officials or their dependent family members in terms of the Scheme alongwith the Minutes of the Advisory Committee recommending the request and the relevant documents as detailed in the Checklist for grant of financial assistance from the Customs & Central Excise Welfare Fund.

Yours faithfully,

Encl: As above


 16.08.2021
 (Neeta Lall Butalia)

Director General (HRD)

Copy to:-

Web master @ cbic.gov.in : With a request to put this letter on the Departmental website and may also be shown with prominence in the headlines being flashed.

SCHEME FOR GRANT OF FINANCIAL ASSISTANCE TO PERSONS WITH DISABILITY (BEING THE DEPARTMENTAL OFFICIALS OR THEIR DEPENDENT FAMILY MEMBERS) FOR PURCHASE/FITTING OF AIDS/APPLIANCES (ASSISTIVE DEVICES)

A. OBJECTIVES OF THE SCHEME:

The scheme is devised to grant financial assistance to the departmental officers or their dependent family members who are persons with disability (PwD) for procuring durable, sophisticated and scientifically manufactured, modern standard Assistive Device to promote their physical, social, psychological rehabilitation by reducing the effects of disabilities and at the same time enhance their physical and mental abilities. Assistive Devices are necessary for PwDs to improve their independent functioning and to arrest the extent of disability and occurrence of secondary disability. Financial assistance which are non reimbursable under CS (MA)/ CGHS Rules subjects to a maximum limit specified.

B. GENERAL CONDITIONS OF ELIGIBILITY:

Person with disabilities (PwD) being departmental officials, unemployed spouse and dependent first two children of departmental officers fulfilling following conditions would be eligible for assistance under the Scheme:

- i. The beneficiary must be suffering from disability of 40% or more of one or more disabilities as certified by a Medical Authority/ Board as specified in “ The Persons with Disabilities (Equal Opportunities, Protection of Right and Full Participation) Act, 1995.
- ii. The appliances should have been prescribed by a Professor/ Senior Specialist or Specialist of equivalent rank working in any Govt. hospitals in the specialties of Physical Medicine and Rehabilitation (PMR) or Orthopaedic Surgery. The prescription should be in generic name and not by proprietary name.
- iii. The claim of the beneficiary for reimbursement of the part of the expenses incurred on procuring prescribed Assistive Device must have been settle under the CGHS/ CS(MA).
- iv. Maintenance Cost of the device will be borne by the beneficiary.
- v. The beneficiary shall be eligible for financial assistance for the replacement device on completion of 5 years of the purchase of the existing devices in case of adults and 2 years in the case of children except motorized wheel chair and tricycle.
- vi. The beneficiary shall be eligible for financial assistance for the replacement Motorized wheel chair and tricycle on completion of 5 years of purchase of the existing Motorized wheel chair and tricycle.
- vii. The term ‘*dependent family*’ used in the scheme covers only unemployed spouse and dependent first two children of the departmental official in line with the Consolidated Guidelines for grant of financial assistance for medical treatment of Departmental official and dependent family.
- viii. The financial assistance to the extent of assistance which the beneficiary may have availed/ received from any other source shall be deducted from his/her claim for assistance from the Welfare fund.

- ix. The officers has to request for financial assistance from the Welfare fund within 3 months of settlement of claim when part of the claim is settled under CGHS/ CS(MA) Rules.
- x. Each proposal should be scrutinized and recommended by the Advisory Committee, headed by HoD, having at least one representative each from Group 'A' to 'C' officials, before it is sent to the Directorate General of Human Resource Development. The proposal should be forwarded within one month on receipt of the request. The time limit for requesting for financial assistance by the individual and of forwarding the proposal by the Commissioner should be strictly observed. The proposals received without recommendation of the Advisory Committee would not be placed before the Governing Body.

C. ELIGIBLE AMOUNT:

The eligible amount for calculation of admissible financial assistance shall be worked out as under:

[Total expenditure incurred on procurement of Assistive Device] – [Amount reimbursed under CGHS/ CS (MA) Rules (must not be ZERO) in any case]

D. AMOUNT OF FINANCIAL ASSISTNANCE:

50% of the eligible amount calculated in terms of the scheme subject to a maximum of Rs. 50,000/-

E. CHECK LIST OF DOCUMENTS:

- i. The disability certificate by a Medical Board.
- ii. The prescription/ advice of the of the Professor/ Senior Specialist or Specialist of equivalent rank working in any Govt. hospitals in the specialties of Physical Medicine and Rehabilitation (PMR) or Orthopaedic surgery. The prescription should be in generic name and not by proprietary name.
- iii. Copies of bills and vouchers in respect of procurement of the Assistive Devices.
- iv. Sanction Order/ other relevant documents in respect of settlement of claim of the beneficiary under the CGHS/ CS (MA) Rules of the prescribed Assistive Device.
- v. Undertaking in respect of dependency of spouse being unemployed and first two children of the departmental official and not-availing/ non-receipt of the financial assistance from any other source.
- vi. The documentary evidence of financial assistance, if any, availed/ received by the beneficiary from other sources.
- vii. Recommendations of the Advisory Committee.
- viii. Proposal has been submitted within prescribed time limit.
- ix. In case the proposal is submitted after the prescribed time limit, justification for condonation of delay has to be given.

Amal
8/3/14

No.S-11011/25/2014/CGHS-(P)
Government of India
Ministry of Health and Family Welfare
Department of Health and Family Welfare

Nirman Bhawan, New Delhi,
Dated the 8th July, 2014.

OFFICE MEMORANDUM

Sub: Revision of lists and rates of artificial appliances for CGHS/CS(MA) beneficiaries and general guidelines for eligibility criteria therefor.

The undersigned is directed to state that the rates of artificial appliances were revised in 1997 vide OM No. S-11011/5/95-CGHS-(P) dated 25.6.1997. The matter of revision of rates and updation of lists of artificial appliances has been under consideration of this Ministry for some time. The matter has been examined in consultation with the experts in Directorate General of Health Services and it has been decided to update the list of the artificial appliances and revised as per the details given in ongoing paras.

2. Keeping in view the various categories of appliances, the lists of artificial appliances have been categorized as per the following three Annexure and rates of artificial appliances will be as per the Annexure-I, II and III to this OM:

Annexure-I: This contains list, rates and specifications of various types of Prosthetics (i.e. artificial limbs) like prosthetics for lower extremity, prosthetics for upper extremity [Annexure-I has been divided into Annexure IA, IB, IC, ID and IE according to type].

Annexure-II: This contains the list, rates and specifications pertaining to the orthotics (i.e. callipers & braces) including lower extremity, upper extremity and spinal orthotics.[Annexure-II has been divided into Annexure-IIA, IIB and IIC].

Annexure-III: This contains specifications and rates for items related to mobility aids.

3. The general guidelines for admissibility and reimbursement of expenses in respect of appliances mentioned in Annexures-I, II & III will be as under:

- (i). Maintenance Cost will be borne by the beneficiary.
- (ii). The appliances will be allowed for re-issue on completion of 5 years in case of adults and 2 years in the case of children except motorized wheel chair and tricycle.

contd....2/-

- (iii). Motorized wheel chair and tricycle will be re-issued after 5 years irrespective of age.
- (iv). High end prosthetics/appliances will be reimbursed only to the following category of Govt. Servants & their dependent family members subject to fulfilling of other criteria :-
 - (a) Govt. Servants & their dependent family members participating at the State level sport activities duly certified by the competent Sports Authority.
 - (b) Upper Age limit for the sophisticated prosthetic appliances will be 45 years.
 - (c) Military or para-military personnel duly certified by their respective Medical Boards that the person has sustained injury while on field duty or undergone amputation because of injury sustained while performing such duty.
 - (d) The reimbursement will be made within the ceiling limit fixed for such appliances beyond which the beneficiary will bear the cost.
- (v). For admissibility of reimbursement, the appliances need to be prescribed by a Professor/Senior Specialist or Specialist of equivalent rank working in any Govt. hospitals in the specialties of Physical Medicine and Rehabilitation (PMR) or Orthopaedic surgery. The prescription should be in generic name and not by proprietary name.
- (vi). Prosthetic components and Orthotic joints used in appliances should have BIS/CE (European) Certification for the purposes of reimbursement and fabricated by firms having qualified Prothesist/Orthotists.
- (vii). Keeping in view, the physical growth into consideration, individuals upto 12 years of age will be considered as children for the purpose of these guidelines in general. However, in order to rationalize the rates for some of the items, specific age group has been mentioned against the individual items in Annexure-I and Annexure-II, based on the size of the appliances.
- (viii). There may be certain items which are not included in Annexure, but may be prescribed by qualified Government Rehabilitation Specialist/Orthopaedic Surgeon, (not below the level of Consultants), depending on individual disabled patient's requirements for example disability car gadgets. In such cases, items costing below Rs.50,000/- can be purchased with three quotations as per prescribed specifications with the permission of HOD of the concerned departments. For items costing above Rs. 50,000/- prior permission will have to be obtained from Additional Directors, CGHS of the concerned city or concerned DDG in the Dte.GHS looking after CS(MA) Rules, on the basis of three quotations and approval of Technical Standing Committee.

contd....3/-

- (ix). The artificial appliances should be procured from any Government Undertaking/ Authorised Alimco dealers, N.G.Os approved by Ministry of Health & Family Welfare/and private manufactures. It should be certified by the prescribing Government Orthopaedic Surgeon/Government Rehabilitation Specialists (PMR) to the effect that the appliances are as per Specification and working satisfactorily.
- (x). The list of items and rates will be revised every 5 years.
- (xi). Reimbursement of items in the enclosed list will be made by HODs of the departments and CGHS in case of Pensioner CGHS beneficiaries, etc.
4. This OM supersedes all earlier orders issued from time to time under CGHS/CS (MA) Rules, 1944 on the subject for allowing reimbursement in respect of artificial appliances for CGHS/CS(MA) beneficiaries.
5. This OM will come into effect from the date of issue and will be valid till revision of the rates after five years.
6. This issues with the approval of Secretary (H&FW) and concurrence of Integrated Finance Division.



(Ravi Kant)

Under Secretary to the Government of India

1. All Ministries/Departments, Government of India
2. DDG(M), Dte.GHS/CMO(SRA), Dte.GHS, Dte.GHS, MoHFW
3. Director, CGHS, Nirman Bhawan, New Delhi
4. Addl.DDG(HQ), CGHS, MoHFW, Nirman Bhawan, New Delhi
5. AD(HQ), CGHS, R.K.Puram, Sector-12, New Delhi
6. All Addl. Directors/Joint Directors of CGHS cities outside Delhi
7. Additional Director (SZ)/(CZ)/(EZ)/(NZ)/(MSD), CGHS, New Delhi
8. JD(HQ), JD (Grievance)/JD (R&H), CGHS, Delhi
9. Rajya Sabha/Lok Sabha Secretariat, New Delhi
10. Registrar, Supreme Court of India, New Delhi
11. U.P.S.C. Dholpur House, New Delhi
12. Office of the Comptroller & Auditor General of India, Bahadur Shah Zafar Marg, New Delhi
13. PPS to Secretary (H&FW)/Secretary (AYUSH)/Secretary (HR)/Secretary (AIDS Control), Ministry of Health & Family Welfare
14. PPS to DGHS/AS&DG (CGHS)/AS&FA/AS&MD, NRHM/AS(H), MoHFW, New Delhi
15. CGHS(P) Section/MS Section/Hospital Empanelment Cell, CGHS/MG-II Section, Dte.GHS, Nirman Bhawan, New Delhi

contd....4/-

16. CGHS-I/II/III/IV, MoHFW, Nirman Bhawan, New Delhi
17. Estt.I/Estt.II/Estt.III/Estt.IV Section, MoHFW, Nirman Bhawan, New Delhi
18. Admn.I/Admn.II Section, Dte.GHS, MoHFW, Nirman Bhawan, New Delhi
19. Integrated Finance Division, MoHFW, Nirman Bhawan, New Delhi
20. All Officers/Sections/Desks in the Ministry
21. Deputy Secretary (Civil Service News), Department of Personnel & Training, 5th Floor, Sardar Patel Bhawan, New Delhi
22. Shri Umraomal Purohit, Secretary, Staff Side, 13-C, Ferozshah Road, New Delhi
23. All Staff Side Members of National Council (JCM)
24. ED(H)/Planning, Railway Board, Ministry of Railways, Rail Bhawan, Rafi Marg, New Delhi - 110001
25. Central Organisation, ECHS, Department of Ex-Servicemen Welfare, Ministry of Defence, New Delhi
26. Chairman, Employees State Insurance Corporation, Ministry of Labour & Employment, Panchdeep Bhawan, C.I.G. Marg, New Delhi-110002
27. UTI-ITSL, 153/1, First Floor, Old Madras Road, Ulsoor, Bengaluru-560008.
28. Swamy Publishers (P) Ltd., P.B. No.2468, R.K. Puram, Chennai-600028
29. Swamy Publishers (P) Ltd., 4855, 24, Ansari Road, Dayaganj, New Delhi
30. Sr.Technical Director, NIC, MoHFW, Nirman Bhawan, New Delhi with the request to upoad this OM on the Ministry's website under the link of CS (MA) Rules - OMs and Circulars
31. Hindi Section, MoHFW, Nirman Bhawan, New Delhi for providing Hindi version of this OM.
32. Guard file

ANNEXURE-IA**LOWER EXTREMITY PROSTHETICS (Above 12 years)**

Sl. No.	Name of Prosthesis	Approved Rate/Price
1.	Trans tibial prosthesis (Below Knee Prosthesis) (Its components include-S.S. Pylon/tube, SACH FOOT, Foot Adapter , Bonded Pylon/Pylon with 4 screw Adaptor, Tube Clamp Adaptor, Socket Adaptor, Sleeve Suspension, Foam Cover, Covering Socks, Socket charges, etc.)	Rs.20,000/-
2.	Trans tibial Prosthesis (Below Knee Prosthesis) with silicone / PU liner	Rs. 37000/-
2.a	Trans tibial Prosthesis (Below Knee Prosthesis) with silicone / PU liner with shuttle lock mechanism	Rs.45500/-
3.	Symes Prosthesis Its component includes- SYME'S FOOT, Foot Adapter Sleeve Suspension, Socket Mounting Adaptor, Covering Socks Socket charges, etc.	Rs.19300/-
4.	Partial Foot Prosthesis (Shoe with filler)	Rs.7000/-
5.	Trans Femoral Prosthesis (Above Knee Prosthesis) (Its components include-S.S. Pylon/tube, SACH FOOT, Foot Adapter, Bonded Pylon / Pylon with 4 screw Adaptor (400mm) Polycentric Prosthetic Knee Joint, Socket Adaptor ,TES Belt, Foam cover, Covering Socks, Socket fabrication & fitment charges)	Rs. 40840/-
6.	Trans Femoral Prosthesis (Above Knee Prosthesis) with Suction Valve	Rs.40840 + 3800=44640/-
7.	Trans Femoral Prosthesis (Above Knee Prosthesis) with Silicon/ PU liner	Rs.61140/-
7.a	Trans Femoral Prosthesis (Above Knee Prosthesis) with Silicon /PU liner with shuttle lock mechanism	Rs. 69640/-
8.	Knee Disarticulation Prosthesis (Its components include-S.S. Pylon/ tube, SACH FOOT, Foot Adapter , Bonded pylon / Pylon with 4 screw Adaptor (400mm) Polycentric Prosthetic Knee Joint, Socket Adaptor ,TES Belt, Foam cover, Covering Socks, Socket fabrication & fitment charges)Rs. 51940/-
9.	Hip Disarticulation Prosthesis (Its components include-S.S. Pylon/ tube, SACH FOOT, Foot Adapter , Bonded pylon / Pylon with 4 screw Adaptor (400mm) Single axis Prosthetic Knee Joint, Hip Joint (basic), Tube (Angle tube adaptor, 10 degree) Short Tube, Socket Adaptor, Foam cover, Covering Socks, Socket fabrication & fitment charges.)	Rs.60300/-

ANNEXURE-IB

LOWER EXTREMITY PROSTHETICS (CHILD UPTO THE AGE OF 12 YEARS)

Sl. No.	Name of Prosthesis	Approved rate/Price (Child 7-12 years)	Approved rate/Price (Child 0-6 years)
1.	Trans tibial prosthesis (Below Knee Prosthesis) (Its components include-S.S. Pylon/ tube, SACH FOOT, Foot Adapter , Bonded pylon / Pylon with 4 screw Adaptor, Tube Clamp Adaptor, Socket Adaptor, Sleeve Suspension, Foam cover, Covering Socks, Socket charges, etc.)	Rs.18,140/-	Rs.5000/-
2.	Trans Tibial Prosthesis (Below Knee Prosthesis) with silicone / PU liner	Rs. 35,140/-	Not applicable
2.a	Trans Tibial Prosthesis with silicone / PU liner with shuttle lock mechanism	Rs. 35140+ 8500 =43640	Not Applicable
3.	Symes Prosthesis Its component includes- SYME,S FOOT , Foot Adapter Sleeve Suspension, Socket mounting adaptor, Covering Socks Socket charges	Rs.19300/-	Rs.5000/-
4.	PARTIAL FOOT PROSTHESIS (Shoe with filler)	Rs.4000/-	Rs.1500/-
5.	Trans Femoral Prosthesis (Above Knee Prosthesis) (Its components include-S.S. Pylon/ tube, SACH FOOT, Foot Adapter , Bonded pylon / Pylon with 4 screw Adaptor (400mm) Polycentric Prosthetic Knee Joint, Socket Adaptor ,TES Belt, Foam cover, Covering Socks, Socket fabrication & fitment charges)	Rs. 49,980/-	Rs.12000/-
6.	Trans Femoral Prosthesis (Above Knee Prosthesis) with Suction Valve	Rs.49980 + 3800=53,780/-	Not Applicable
7.	Trans Femoral Prosthesis (Above Knee Prosthesis) with Silicon / PU liner	Rs.70,280/-	Not Applicable
7.a.	Trans Femoral Prosthesis (Above Knee Prosthesis) with Silicon/PU liner with shuttle lock mechanism	Rs. 70280+ 8500=78780	Not Applicable
8.	Knee Disarticulation Prosthesis (Its components include-S.S. Pylon/		

	tube, SACH FOOT, Foot Adapter , Bonded pylon / Pylon with 4 screw Adaptor (400mm) Polycentric Prosthetic Knee Joint, Socket Adaptor ,TES Belt, Foam cover, Covering Socks, Socket fabrication & fitment charges)	Rs. 49,980/-	Rs.12000/-
9.	Hip Disarticulation Prosthesis (Its components include-S.S. Pylon/ tube, SACH FOOT, Foot Adapter , Bonded pylon / Pylon with 4 screw Adaptor (400mm) Single axis Prosthetic Knee Joint, Hip Joint (basic), Tube (Angle tube adaptor, 10 degree) Short Tube, Socket Adaptor, Foam cover, Covering Socks, Socket fabrication & fitment charges.)	Rs.60300/-	Rs.15000/-

NOTE:

1. Prescription of Trans Tibial Prosthesis may be considered as Below Knee Prosthesis.
2. Prescription of Trans Femoral Prosthesis may be considered as Above Knee Prosthesis.

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ANNEXURE-IC

HIGH END LOWER EXTREMITY PROSTHETICS

Sl. No.	Name of Prosthesis	Approved Rate/Price (Above 12 years of age)	Approved Rate/Price CHILD (7-12 Years)	Approved Rate/Price CHILD (0-6) Years
1.	Trans tibial prosthesis (Below Knee Prosthesis) (Its components include- S.S. Pylon/ tube, DYNAMIC RESPONSE FOOT, Foot Adapter, Bonded pylon / Pylon with 4 screw Adaptor, Tube Clamp Adaptor, Socket Adaptor, Sleeve Suspension, Foam cover, Covering Socks, Socket charges, etc.)	Rs.26,700/-	Not Applicable	Not Applicable
2.	Trans tibial Prosthesis (Below Knee Prosthesis) with silicone / PU liner	Rs.43700/-	Not Applicable	Not Applicable
3.	Trans tibial Prosthesis (Below Knee Prosthesis) with silicone / PU liner with shuttle lock mechanism	Rs.52200	Not Applicable	Not Applicable
4.	Trans Femoral Prosthesis (Above Knee Prosthesis) (Its components include- S.S. Pylon/ tube, DYNAMIC FOOT, Foot Adapter, Bonded pylon / Pylon with 4 screw Adaptor (400mm) Polycentric Prosthetic Knee Joint, Socket Adaptor, TES Belt, Foam cover, Covering Socks, Socket fabrication & fitment charges)	Rs. 47,540/-	Not Applicable	Not Applicable
5.	Trans Femoral Prosthesis (Above Knee Prosthesis) with Suction Valve	Rs.47540 + 3800=51,340/-	Not Applicable	Not Applicable
6.	Trans Femoral Prosthesis (Above Knee Prosthesis) with Silicon / PU liner	Rs.64,540/-	Not Applicable	Not Applicable

7	Trans Femoral Prosthesis (Above Knee Prosthesis) with Silicon / PU liner with shuttle lock mechanism	64540+ 8500=73040/-	Not Applicable	Not Applicable
8.	Knee Disarticulation Prosthesis (Its components include- S.S. Pylon/ tube, DYNAMIC FOOT, Foot Adapter , Bonded pylon / Pylon with 4 screw Adaptor (400mm) Polycentric Prosthetic Knee Joint, Socket Adaptor ,TES Belt, Foam cover, Covering Socks, Socket fabrication & fitment charges)	Rs.58640/-	Not Applicable	Not Applicable
9.	PARTIAL FOOT PROSTHESIS			
9a.	Shoe filler with carbon plate	Rs.9000/-	Rs.5000/-	Rs.3000/-
9b.	GREAT TOE SILICON PROSTHESIS	Rs.9000/-	Rs.5000/-	Rs.3000/-
9c.	Silicone Prosthesis For Second Toe to Vth Toe	Rs.7500/-each	Rs.4000/-	Not Applicable

RECOMMENDED CRITERIA FOR HIGH END PROSTHESIS

1. Dynamic foot can be prescribed only for Military, paramilitary, commando persons / police personals sustaining amputation in saddle and likely go back to active and strenuous work.
2. Dynamic foot can also be prescribed for young / children and dynamic athletes of University, cultural activities, State/ National or international level.
3. Shoe filler with carbon plate can be prescribed only for Military, paramilitary, commando persons / police personals sustaining amputation in saddle and likely go back to active and strenuous work.
4. Shoe filler with carbon plate can also be prescribed for young / children and dynamic athletes of University, Participating in cultural activities, at State / National or international level.
5. In case of Bilateral Upper Limb amputation, Externally Powered Prosthesis /Myoelectric Prosthesis may be prescribed for one side and body powered Prosthesis or Passive Prosthesis for the other side.

ANNEXURE-ID**UPPER EXTREMITY PROSTHETICS**

Sl. No.	Name of Prosthesis	Approved Rate/Price (Above 12 years of age)	Approved Rate/Price CHILD (7-12 Years)	Approved Rate/Price CHILD (0-6) Years
1.	Trans Radial or Below Elbow / Wrist Disarticulation Passive Prosthesis	Rs.10,000/-	Rs.5000/-	Rs.2000/-
2.	Body Powered Prosthesis (Trans Radial or Below Elbow / Wrist Disarticulation) Its components includes trans radial kit and socket	17000/-	12000/-	Not Applicable
3.	Trans Humeral or Above Elbow / Elbow Disarticulation Passive Prosthesis	Rs.20,000/-	Rs.10,000/-	Rs.5,000/-
4.	Body Powered Prosthesis (Trans Humeral or Above Elbow / Elbow Disarticulation)	28000/-	22000/-	Not Applicable
5.	Shoulder Disarticulation Passive Prosthesis	Rs.30,000/-	Rs.20,000/-	Rs.10,000/-
6.	Shoulder Disarticulation body powered Prosthesis	Rs. 37,000/-	28000/-	Not Applicable

ANNEXURE-IE

HIGH END UPPER EXTREMITY PROSTHETICS (ADULT)

Sl. No.	Name of Prosthesis	Approved Rate/Price (Above 12 years of age)	Approved Rate/Price CHILD (7-12 Years)	Approved rate/Price CHILD (0-6) Years
1.	Externally Powered below elbow or Trans radial / Wrist Disarticulation prosthesis (It includes:- Hand, Lithium ion Battery (one pair) with cover, Electrodes, Wrist Unit Battery Charger & Transformer, Electrode cable, Connector block cable Silicone Glove, Flexible Inner Liner and socket, etc)	Rs.1,29,500/-	Not Applicable	Not Applicable
2.	Externally Powered Trans Humeral / Elbow Disarticulation Prosthesis (It includes:- Hand, Lithium ion Battery (one pair) with cover, Electrodes, Wrist Unit, Mechanical Elbow, Battery Charger & Transformer, Electrode cable, Connector block cable Silicone Glove, Flexible inner Liner and sockets, etc)	Rs.1,76,500/-	Not Applicable	Not Applicable
3.	Silicone Finger Prosthesis each	Rs.7000/-	Rs.5000/-	Not Applicable
4.	Silicone Thumb Prosthesis	Rs.8000/-	Rs.6000/-	Not Applicable
5.	Silicone Partial Hand Prosthesis	Rs.35000/-	Rs.25000/-	Rs.10,000/-

ANNEXURE-IIA

SPINAL ORTHOTICS

Sl. No.	Name of Prosthesis	Approved Rate/Price (Above 12 years of age)	Approved Rate/Price CHILD (7-12 Years)	Approved Rate/Price CHILD (0-6) Years
1.	Soft / Semi rigid Cervical Collar	200/-	200/-	Not Applicable
2.	Philadelphia or Two post Cervical collar / Head Cervical Orthosis (Moulded collar)	1500/-	1500/-	1200/-
3.	Soft L.S. corset / Belt	700/-	500/-	Not Applicable
4.	SOMI BRACE / Three Post Cervical Orthosis	2000/-	2000/-	Not Applicable
5.	Four Post Cervical Orthosis	1200/-	1000/-	800/-
6.	Rigid L.S.O / Chair Back Orthosis	1200/-	1000/-	Not Applicable
7.	Rigid TLSO / Taylor,s brace, Knight Taylor,s brace, William,s brace	1500/-	1200/-	1000/-
8.	Hyperextension brace / ASH / CASH / JEWETT BRACE	1200/-	1000/-	Not Applicable
9.	CTLSO (MILWAUKEE BRACE)	5000/-	5000/-	Not Applicable
10.	Head Cervical Thoraco Orthosis (HCTO)	1500	1500/-	1200/-
11.	TLSO BI- Valve / Body Jacket	3000/-	3000/-	2500/-
12.	UNDER ARM BRACE (Boston Brace / Miami Brace / Wilmington Brace / NYOH Brace)	3500/-	3500/-	Not Applicable
13.	HALO BRACE	15000/-	Not Applicable	Not Applicable

Abbreviations:

1. L.S.O--- Lumbo Sacral Orthosis
2. ASH- Anterior Spinal Hyperextension Brace
3. CASH-- Cruciform Anterior Spinal Hyperextension
4. TLSO---- Thoraco Lumbo Sacral Orthosis
5. CTLSO----- Cervical Thoraco Lumbo Sacral Orthosis

ANNEXURE-IIB

LOWER EXTREMITY ORTHOTICS

Sl. No.	Name of Prosthesis	Approved Rate/Price (Above 12 years of age)	Approved Rate/Price CHILD (7-12 Years)	Approved Rate/Price CHILD (0-6) Years
1.	Soft Heel Pad / M.T. Pad with Insole (One Piece)	200/-	200/-	Not Applicable
2.	Arch Support (Unilateral)	300/-	200/-	200/-
3.	Silicone / PU arch support (One Piece)	350/-	250/-	Not Applicable
4.	Medial / Lateral Wedge	100/-	100/-	100/-
5.	Soft Insole cross link polymer (One Piece)	100/-	100/-	Not Applicable
6.	Soft Insole (Plastozone) One Piece	300/-	200/-	Not Applicable
7.	Silicone / PU Insole (One Piece)	500/-	Not Applicable	Not Applicable
8.	Silicone Heel Cushion (One Piece)	300/-	Not Applicable	Not Applicable
9.	Molded / customized Insole (One Piece)	600/-	500/-	400/-
10.	Silicone Toe separator (One Piece)	200/-	100/-	Not Applicable
11.	UCBL (Unilateral)	800/-	600/-	500/-
12.	SMO without shoes (One Piece)	1200/-	1000/-	800/-
13.	Flat Feet / CTEV Shoes Pair (Leather)	1200/-	800/-	700/-
14.	Molded Shoe (Leather)-one side normal & one side affected	2200/-	1600/-	Not Applicable
15.	Molded Shoe (Leather)-both side affected	3000/-	2000/-	Not Applicable
16.	Shoe Raise	Rs. 50 per ½ inch	Rs. 50 per ½ inch	Not Applicable
17.	Open toe shoes for paraplegic one pair	1500/-	-Not Applicable	Not Applicable
18.	D.B. Splint with / without shoe	Not Applicable	Not Applicable	800/-
19.	AFO Conventional (One Side)	2500/-	2000/-	1500/-
20.	AFO Conventional (Bilateral)	3500/-	2700/-	2000/-

21	Polypropylene / Customized A.F.O without shoes	1200/-	1000/-	800/-
22.	FRO (Floor Reaction Orthosis)	1800/-	Not Applicable	Not Applicable
23.	Pneumatic walker	3500/-	Not Applicable	Not Applicable
24.	Knee Orthosis Polypropylene (Valgum /Varus, immobilizer etc.)	1500/-	1200/-	900/-
25.	P.T.B Brace without shoes	1800/-	1500/-	1200/-
26.	Knee Sleeve without hinge	500/-	500/-	Not Applicable
27.	Knee Sleeve with hinge	800/-	800/-	Not Applicable
28.	Off loader Knee Orthosis	17000/-	Not Applicable	Not Applicable
29.	KAFO conventional with shoe (One side)	4000/-	3200/-	2000/-
30.	Bilateral KAFO conventional with shoe	5500/-	4500/-	4000/-
31.	KAFO custom molded without shoe (One side)	4000/-	3200/-	2000/-
32.	Femoral Fracture Brace Non weight relieving	1500/-	1000/-	800/-
33.	Femoral Fracture Brace weight relieving	4000/-	3200/-	2000/-
34.	HKAFO Conventional with shoes (One side)	5000/-	4000/-	3000/-
35.	Bilateral HKAFO Conventional with shoes	6500/-	5500/-	4500/-
36.	HKAFO Polypropylene custom moulded without shoes (One side)	5000/-	4000/-	3000/-
37.	Trilateral Orthosis	4000/-	3200/-	2000/-
38.	HIP Abduction Orthosis (Conventional)	Not Applicable	1000/-	1000/-
39.	Pavlik Harness for CDH	Not Applicable	Not Applicable	2500/-
40.	Hip Bracing (Immobilizer)	2000/-	1500/-	Not Applicable
41	SWASH Brace	Not Applicable	18000/-	18000/-
42	Reciprocating Gait Orthosis	32000/-	Not Applicable	Not Applicable

ANNEXURE-IIIC

UPPER EXTREMITY ORTHOTICS

Sl. No.	Name of Prosthesis	Approved Rate/Price (Above 12 years of age)	Approved Rate/Price CHILD (7-12 Years)	Approved Rate/Price CHILD (0-6) Years
1.	Finger orthosis static (One Piece)	150/-	100/-	100/-
2.	Finger orthosis dynamic (One Piece)	200/-	100/-	100/-
3.	Hand Orthosis	400/-	300/-	300/-
4.	Thumb Spica / stabilizer	300/-	200/-	200/-
5.	Knuckle bender	500/-	350/-	Not Applicable
6.	Wrist Hand Orthosis (Static) P.P	700/-	500/-	400/-
7.	Wrist Hand Orthosis (dynamic)	1000/-	700/-	500/-
8.	Elastic Wrist Hand Orthosis	400/-	300/-	200/-
9.	Tennis Elbow support	200/-	200/-	Not Applicable
10.	Adjustable arm sling	300/-	300/-	Not Applicable
11.	Elbow orthosis (static)	900/-	700/-	500/-
12.	Elbow orthosis (Dynamic)	1000/-	800/-	600/-
13.	Fracture Brace (Below Elbow)	1200/-	800/-	700/-
14.	shoulder brace (Immobilizer)	1000/-	800/-	700/-
15.	Gun slinger shoulder orthosis	1000/-	Not Applicable	Not Applicable
16.	Humeral fracture brace without elbow hinge and forearm support	1200/-	800/-	800/-
17.	Humeral fracture brace with elbow hinge and forearm support	1600/-	1200/-	1000/-
18.	Shoulder Elbow Wrist Hand Orthosis (Air plane splint)	2200/-	1600/-	1400/-

ANNEXURE-III**MOBILITY AIDS**

S.NO.	NAME OF ORTHOSIS	Approved Rate/Price (Above 12 years of age)	Approved Rate/Price CHILD (7-12 Years)	Approved Rate/Price CHILD (0-6) Years
1.	Walking Stick (Adjustable) Aluminium	350/-	350/-	Not Applicable
2.	Tripod / Quadripod walking stick Aluminium	750/-	Not Applicable	Not Applicable
3.	Auxillary Crutch / Elbow crutch (Aluminium) Adjustable	850/-	650/-	Not Applicable
4.	Walker/Rollator (Aluminium)	1500/-	1200/-	900/-
5.	C.P.Chair / C.P.Stand	Not applicable	7300/-	7000/-
6.	Commode Chair	2500/-	2500/-	Not Applicable
7.	Wheel Chair Folding (Chrome Plated)	7000/-	4000/-	Not Applicable
8.	Motorized Wheel chair			
	(i) Quadriplegic wheel chair with Chin and Head Control	1,10,000/-	Not Applicable	Not Applicable
	(ii) Quadriplegic wheel chair with joy stick	60,000/-	Not Applicable	Not Applicable
	(iii) Motorized wheel chair (Handle driven)	35,000/-	Not Applicable	Not Applicable
9.	Tricycle Hand Propelled	6000/-	Not Applicable	Not Applicable