

**GUIDELINES FOR ASSISTANCE
UNDER
“ODISHA STATE TREATMENT FUND
SOCIETY”**



**HEALTH & FAMILY WELFARE DEPARTMENT
GOVERNMENT OF ODISHA**

GUIDELINES FOR ASSISTANCE UNDER “ODISHA STATE TREATMENT FUND”

Introduction:-

The Odisha State Treatment Fund will provide financial assistance to the poor patients who are suffering from life threatening disorders & diseases, for treatment of their major ailments. The financial assistance would be released in the form of “one time grant”, which will be released to the Medical institutions in which treatment has been/is being received.

The fund is managed by an autonomous Society known as “ODISHA STATE TREATMENT FUND SOCIETY”. The Society is registered under the Societies Registration Act, 1860.

1. ELIGIBILITY CRITERIA FOR ASSISTANCE UNDER OSTF:-

- 1.1. It is applicable to persons below the poverty line, person with annual income not exceeding Rs.40, 000 in rural area and Rs. 60,000/- in urban areas. Either BPL card or annual income certificate issued by concerned Tahsildar may be accepted for determining the eligibility.
- 1.2. The eligible patients coming within the above income criteria will be provided assistance for treatment in specified life threatening disease as mentioned in Annexure-A.
- 1.3. The assistance is admissible for treatment in Government Hospitals including the three Govt. Medical College & Hospitals and such hospitals as would be decided by the Governing Body of OSTFS from time to time.
- 1.4. The Central Government/State Government/P.S.U employees are not eligible.
- 1.5. Re-imbursment of medical expenditure already incurred for treatment/operation shall not be permissible.
- 1.6. Diseases of common nature and disease for which treatment is available free of cost under other health programmes/schemes will not be eligible for grant.
- 1.7. Assistance will normally not be provided where medical coverage under ESI, CGHS or any other scheme is available or where there is a provision for reimbursement of cost of medicine.
- 1.8. An unknown accident victim /patients referred from registered destitute home/orphanage / mental asylum are also eligible for assistance under the scheme, subject to citing sufficient reason there of for recommending the patient under the scheme.
- 1.9. Any person shall be assisted once in a financial year. Repeat assistance for the same ailment shall not be allowed in any case.

- 1.10. Where the medical facilities for treatment available within the state, assistance will not be provided for treatment outside the state. In case of doubt, the Director of Medical Education & Training shall be consulted.
- 1.11. Assistance will not be available for reimbursing the expenditure incurred by the applicant. The date of application seeking financial assistance should be prior to the treatment or during the course of treatment and not later.

2. QUANTUM OF ASSISTANCE:-

- 2.1. Financial aid so granted shall be one-time grant only with an upper limit of Rs 3.00 Lakh (Rupees Three Lakh only) for treatment within or outside the State.
- 2.2. The sanction at Medical College & Hospital/Capital Hospital/RGH shall be limited to maximum of Rs.1.00 Lakh per case. Where the quantum of assistance exceeds Rs.1.00 Lakh, Superintendent with the approval of the Revenue Divisional Commissioner concerned can make payment up to maximum limit of Rs.2.00 Lakh. If the quantum of assistance exceeds Rs.2.00 Lakh the case may be referred to Member Secretary (D.M.E.T, Odisha) of the Executive Body of the Society for consideration and approval.
- 2.3. The sanction at District Head Quarters Hospitals shall be limited to Rs.30, 000/- per case. Where the quantum of assistance exceeds Rs.30,000/-, CDMO with the approval of the Collector-Cum-District Magistrate concerned can make payment up to maximum limit of Rs.50,000/-.
- 2.4. For assistance over and above Rs. 3.00 lakh, approval of the Hon. Chief Minister, Odisha will be obtained.
- 2.5. Cases once approved and sanctioned cannot apply again within the Financial year.
- 2.6. The patient will be paid as per the actual expenditure or the ceiling limit prescribed for different disease conditions under Central Govt. Health Scheme, whichever is lesser.

3. PROCEDURE FOR SEEKING FINANCIAL ASSISTANCE IN GOVT. MEDICAL COLLEGES & HOSPITALS UNDER "OSTF" :-

- 3.1. Each department will have a nodal officer not below the rank of Asst. Professor, who will be nominated by the HOD of the concerned department.
- 3.2. The application in the prescribed format with all such necessary documents attached to it shall be submitted by the applicant to the Nodal Officer of the concerned department. The Nodal Officer will scrutinise the application and will forward the same to the HOD of the concerned department.
- 3.3. The HOD will verify the facts and forward the application along with his/her recommendation to the Screening Committee.

- 3.4. The Screening Committee at the medical colleges & hospital will be constituted under the chairmanship of the Superintendent of the respective institution and other members will be Accounts Officer/DDO, Administrative Officer and any one HOD (On rotation basis for 2years at a time) as will be nominated by the superintendent of the concerned MCH.
- 3.5. The Screening Committee meeting shall be held on every alternate day and will examine the documents submitted by the applicants duly forwarded by the HODs of the concerned department where the patient is admitted.
- 3.6. If the committee approves the same then payment shall be released to the patient immediately by an account payee cheque only and in special case bearer cheque may be issued if the committee so approves citing sufficient reason for this (In presence of two witnesses).
- 3.7. The sanctioned amount may be released in two or more instalments keeping in view the condition of the patient. The patient will be paid 50% of the sanctioned amount immediately in shape of advance soon after admission at in door and balance amount may be released either during the treatment or at the time of discharge.
- 3.8. The sanctioning power of the Committee shall be limited to Rs.1.00 Lakh Only. Where the quantum of assistance exceeds Rs.1.00 Lakh, Superintendent with the approval of the Revenue Divisional Commissioner concerned can make payment up to maximum limit of Rs.2.00 Lakh. Any application beyond Rs. 2 Lakh shall be forwarded by the Screening Committee with their views to the Executive committee of the society for consideration and approval.
- 3.9. A separate bank account in a nationalised bank nearest to the medical college only shall be opened at medical college under the signature of Superintendent and DDO concerned.
- 3.10. Each and every document relating to the patient application forms shall be kept in proper custody at the office of Superintendent.
- 3.11. Necessary books of accounts and other records are to be maintained at the level of Superintendent as per guideline, which will be produced to audit as when required.
- 3.12. Periodical SOE/UC as per OGFR Norm along with achievement report are to be submitted by DDO concerned to the Treasurer of the Society timely.
- 3.13. Achievement Report Format

Sl No.	Name Of The Patient with Address/Contact No.	Name of the Disease	Amount sanctioned	Released Cheque No./Date

4. PROCEDURE FOR SEEKING FINANCIAL ASSISTANCE AT DISTRICT HOSPITALS/ CAPITAL HOSPITALS/RGH UNDER "OSTF" :-

- 4.1. The head of all clinical departments in the DHH/Capital Hospital/RGH will be designated as Nodal Officer for OSTF.
- 4.2. The patient will submit the application form in the prescribed format with all such necessary documents attached to Nodal Officer.
- 4.3. After due scrutiny of the applications, it will be forwarded to the Screening Committee through ADMO (Medical)/Dy.CMO of Capital Hospital/RGH.
- 4.4. The Screening Committee at the District hospitals shall be constituted under the chairmanship of the Chief District Medical Officer of the respective district /CMO, Capital Hospital/RGH and other members will be ADMO (Medical) at DHH/Dy.CMO, Capital Hospital/RGH and another Medical Officer, on rotation basis for a period of two years, of the rank of J.D (L2)/Senior Class 1 as will be nominated by the CDMO/CMO of the concerned institution.
- 4.5. The Screening Committee meeting shall be held every alternate day and will examine the documents submitted by the applications duly forwarded by the MO of the concerned discipline, where the patient is admitted.
- 4.6. If the committee approves the same then payment shall be released to the patient immediately by account payee cheque only and in special case bearer cheque may be issued if the committee so approves the same citing the sufficient reason for this (In presence of two witnesses).
- 4.7. The sanctioning power of the Committee shall be limited to Rs.30, 000/- only for district headquarter hospital and Rs. 1 Lakh for Capital Hospital and RGH. Where the quantum of assistance exceeds Rs.30,000/-, CDMO with the approval of the Collector-Cum-District Magistrate concerned can make payment up to maximum limit of Rs.50,000/-.
- 4.8. A separate bank account in a Nationalised bank nearest to the DHH/Capital Hospital/RGH only under the signatory of CDMO/CMO and ADMO (Medical) of DHH /DDO at Capital Hospital & RGH concerned to operate the fund and which will enable the patient to draw and use the fund immediately during their treatment.
- 4.9. Each and every documents relating to the patient application forms shall be kept in proper custody at the office of ADMO (Medical)/DDO of the concerned Institution.
- 4.10. Necessary books of accounts and other records are to be maintained at their level as per guidelines, which will be produced to audit as when required.
- 4.11. Periodical SOE/UC as per OGFR Norm along with achievement report, are to be submitted by DDO concerned to the Treasurer of the Society timely.
- 4.12. Achievement Report Format :-

Sl No.	Name Of The Patient with Address/Contact No.	Name of The Disease	Amount Sanctioned	Released Cheque No./Date

5. PROCEDURE FOR SEEKING FINANCIAL ASSISTANCE AT SDH/CHC/PHC/UGPHC Level UNDER "OSTF" :-

- 5.1. The head of all clinical departments/2nd MO of the institution will be designated as Nodal Officer for OSTF.
- 5.2. The patient will submit the application form in the prescribed format with all such necessary documents attached to it to the Nodal Officer.
- 5.3. After due scrutiny of the applications, the Nodal Officer will forward the application form to the Medical Officer and the Medical Officer concerned may verify the documents and recommend the same to the District level Screening Committee.
- 5.4. The Screening Committee at the District hospitals shall be constituted under the chairmanship of the Chief District Medical Officer of the respective district and other members will be ADMO (Medical) at DHH and another Medical Officer of the rank of J.D (L2)/Senior Class 1 as will be nominated by the CDMO of the concerned institution.
- 5.5. The district level Screening Committee meeting will consider these cases in the same pattern as followed in case of District Head Quarter Hospital applications.

6. PROCEDURE FOR SEEKING FINANCIAL ASSISTANCE AT "SHISHU BHAWAN, CUTTACK" UNDER "OSTF" :-

- 6.1. Each Unit will have a nodal officer not below the rank of Asst. Professor, who will be nominated by the Head of the concerned unit.
- 6.2. The application in the prescribed format with all such necessary documents attached to it shall be submitted by the applicant to the Nodal Officer of the concerned unit. The Nodal Officer will scrutinise the application and will forward the same to the Head of the concerned unit.
- 6.3. The Head of the concerned unit will verify the facts and forward the application along with his/her recommendation to the Screening Committee.
- 6.4. The Screening Committee at "Shishu bhawan" will be constituted under the chairmanship of the Superintendent and other members will be DDO & HOD, on rotation basis for a period of two years.
- 6.5. The Screening Committee meeting shall be held every alternate day and will examine the documents submitted by the applicants duly forwarded by the unit Head.

- 6.6. If the committee approves the same then payment shall be released to the patient immediately by account payee cheque only and in special case bearer cheque may be issued if the committee so approves the same citing the sufficient reason for this (In presence of two witnesses).
- 6.7. The sanctioned amount may be released in two or more instalments keeping in view the condition of the patient. The patient will be paid 50% of the sanctioned amount immediately in shape of advance soon after admission at in door and balance amount may be released either during the treatment or at the time of discharge.
- 6.8. The sanctioning power of the Committee shall be limited to Rs.1.00 Lakh Only. Any application beyond the above stated limit shall be forwarded to the Executive committee of the society for consideration and approval.
- 6.9. A separate bank account in a nationalised bank nearest to the Shishuvawan only shall be opened at "Shishu bhaawan" under the signatory of Superintendent and DDO concerned to operate the fund and which will enable the patient to draw and use the fund immediately during their treatment.
- 6.10. Each and every documents relating to the patient application forms shall be kept in proper custody at the office of Superintendent.
- 6.11. Necessary books of accounts and other records are to be maintained at their level as per guideline, which will be produced to audit as when required.
- 6.12. Periodical SOE/UC as per OGFR Norm along with achievement report, are to be submitted by DDO concerned to the Treasurer of the Society timely.
- 6.13. Achievement Report Format :-

Sl No.	Name Of The Patient with Address/Contact No.	Name of The Disease	Amount Sanctioned	Released Cheque No./Date

7. PROCEDURE FOR SEEKING FINANCIAL ASSISTANCE FOR TREATMENT AT PRIVATE & OTHER HOSPITALS UNDER "OSTF" :-

In the eventuality of providing financial assistance to the patients for treatment at Private or any other hospitals as would be declared eligible Hospital by Governing Body of the Society, the payment will be made by D.M.E.T(O).

Annexure-A

THE LIST OF AILMENTS ELIGIBLE UNDER OSTF:-

A) Cardiology & Cardiac Surgery:

1. Pacemakers
2. CRT/Biventricular pacemaker
3. Automatic Implantable Cardioverter Defibrillator (AICD)
4. Combo devices
5. Diagnostic Cardiac Catheterization including Coronary Angiography
6. Interventional procedure including Angioplasty, Rota-ablation, Balloon Valvuloplasty.
7. ASD, VSD and PDA surgery.
8. Peripheral Vascular Angioplasty, Carotid Angioplasty, Renal Angioplasty
9. Coil Embolization and Vascular plugs
10. Stents including Drug Eluting Stents
11. Electrophysiological Studies (EPS) and Radio Frequency (RF) Ablation
12. Heart surgery for Congenital and Acquired conditions including C.A.B.G
13. Vascular Surgery and all major cardiac surgeries
14. Cardiac Transplantation, etc.

B) Cancer:

1. Radiation treatment of all kinds
2. Anti-Cancer Chemotherapy
3. Bone Marrow Transplantation- Allogenic & Autologous
4. Diagnostic Procedures- Flow cytometry/cytogenetics /IHC Tumour Markers, etc.

(C) Urology/Nephrology/Gastroenterology:

1. Dialysis and its consumable (Both hemodialysis as well as Peritoneal)
2. Plasmapheresis in acute renal failure
3. Continuous renal replacement therapy in acute renal failure in ICU patients.
4. Vascular access consumables (Shunts, catheters) for Dialysis
5. Renal transplant
6. PCN and PCNL Kits
7. Lithotripsy (for Stones)
8. Disposables/Stents for endoscopic surgical procedures in Urology & Gastroenterology

(D) Orthopedics:

1. Artificial prosthesis for limbs
2. Implants and total hip and knee replacement
3. External fixators

4. AO implants, used in the treatment of bone diseases and fractures
5. Spiral fixation Implant- Pedicle Screws (Traumatic, Paraplegic, Quadri.)
6. Implant for Fracture fixation (locking plates & modular)
7. Replacement Hip –Bipolar /fixed

(E) Surgery: All major surgeries.

(F) Investigations: Ultra-sound, Doppler studies, Radio-nucleotide scans, CT Scan, Mammography, Angiography for all organs, M.R.I, E.E.G, E.M.G, Urodynamic studies, Cardiac Imaging- Stress Thallium & PET, CT Coronary angiographic Cardiac MRI, Investigation for CMV, BK Virus, TMT, Echocardiography.

(G) All other diseases covered under **Chief Minister Relief Fund**, over and above the listed indicators shall be eligible under the said scheme. As enumerated in the guidelines for assistance from CMRF, it will mainly be for treatment or major ailments namely (a) Cancer (b) Cardiac Surgery (C) Cardiology Treatment (D) Renal Transplant (E) Acute Renal Failure (F) Brain Tumor (G) Multi organ failure (H) Severe accidents with multiple injuries (I) Thalassemia (J) Liver related diseases (K) Brain Hemorrhage (L) Brain Paralysis (M) 30% and above burn cases and (N) Any serious disease which involves huge expenditures for treatment and not for common ailments (O) Major accidents (P) Sickle cell anaemia. In case of any doubt the nature of ailments, CDMO/ADMO/SUPERINTENDENTS of Medical Colleges Hospitals /Director, AHRCC, Cuttack/ Referral Hospitals recognised by Govt. Of Odisha will be consulted.

(H) Any other major illness / treatment/ intervention/ investigation considered appropriate by Screening Committee of the Institutions for assistance could be considered for grant following the proper procedure outlined earlier.

**APPLICATION FORM FOR FINANCIAL ASSISTANCE OUT OF
OSTF FUND**

1. Name of the Patient (in Block Letters) :- _____
2. Age :- _____
3. (A) Permanent Address :- _____

(B) Address for Correspondence :- _____

5. Whether the Applicant or the person :- _____
on whom He/She depends is an :- _____
Employee of Centre/State Govt. _____
6. Name of the Applicant if the :- _____
Application is not made by the _____
Patient. _____
7. Application's Relationship to the _____
Patient. _____
8. Disease from which suffering :- _____
9. Name of Hospital where the treatment :- _____
is being received. _____
10 BPL card No (Only-1997) :- _____
(Enclosed Photocopy of BPL card No.) _____
11. Income of the patient/parent, (Annual):- _____
Duly issued by "Tehsildar "
(For those having no BPL No.) _____
12. Quantum of one-time financial :- _____
Assistance required. _____
13. Whether Financial Assistance for the :- _____
same purpose (i) has been received _____
from (ii) a request has been /is being _____
made to some Department/Agency/Authority _____
other than the Department of Health & Family _____
Welfare, GoO, if so, Give Full Particulars. - _____
:- _____
14. Any Other information _____

DECLARATION

I Mr./Mrs. _____ son/ daughter of
Mr./Mrs. _____ hereby declare that, the information given above is
correct and complete in all respects and that I am in no position at all to arrange for
/provide funds for the purpose stated above. I also declare that neither I nor my
parents are employees of the Central/State Government or a local body.

*N:B:- In case it is detected subsequently that, any fraudulent or misleading
information has been furnished , the applicant shall be liable for any legal
action as deemed fit.*

Place

Dated:

Signature of the Applicant/Patient.

TO BE FILLED BY THE NODAL OFFICER OF THE CASE/HOSPITAL ETC.

WHERE THE PATIENT IS RECEIVING THE TREATMENT.

- 1. Patient's Name :- _____
- 2. Name of the Hospital :- _____
- 3. Indoor Registration Number :- _____
- A short note on the present clinical condition of the patient. :- _____
- 4. List of Report of Important Investigation Done. :- _____
- 5. Diagnosis :- _____

- 6. If the patient has been operated, :- _____
 - a. the date of operation. :- _____
- 7. Name of the Treating Physicians :- _____
- 8. The Amount of money recommended :- _____
- 1. Item wise Break-up of expenditure :- _____
 - Of amount recommended at :- _____

**Name of the consumables/medicines required Cost in Rupees.
for operation/treatment**

- A)
- B)
- C)

N:B :- A photocopy of the bed head ticket to be enclosed by the Nodal Officer.

Scrutinised By

Verified &Recommended By

Signature of the Nodal Officer

Signature Recommending Officer

An amount of Rs. _____ (_____) is recommended for the treatment of patient vide Cheque No _____ //Date _____.

Approved By

Signature of the Medical Superintendent
In charge of the Hospital/ CDMO/CMO
With Official Seal.