

Guidelines regarding implementation of Umbrella Scheme of Rashtriya Arogya Nidhi

(RAN).

The Umbrella Scheme of Rashtriya Arogya Nidhi (RAN) will have three components namely (i) Rashtriya Arogya Nidhi (RAN), (ii) Health Minister's Cancer Patients Fund (HMCPF) and (iii) Scheme for financial assistance for patients suffering from specified rare diseases.

2. The objectives of the three components of the RAN Scheme are given below:

(a) **Rashtriya Arogya Nidhi**— to provide financial assistance to poor patients living below threshold poverty line and suffering from life threatening diseases relating to heart, kidney, liver, etc for their treatment at Government hospitals/institutes having super specialty facilities.

(b) **Health Minister's Cancer Patient Fund** – to provide financial assistance to poor patients living below threshold poverty line and suffering from cancer, for their treatment at Regional Cancer Centres (RCCs)/Tertiary Care Cancer Centres (TCCC) and State Cancer Institutes (SCI).

(c) **Financial assistance Scheme for poor patients suffering from rare diseases** – to provide financial assistance to poor patients living below threshold poverty line and suffering from specified rare diseases for their treatment at Government hospitals/institutes having super specialty facilities.

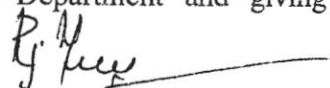
3. Details of guidelines and procedures for implementation of the Umbrella Scheme of RAN are as under.

4. General conditions governing the Umbrella Scheme of RAN are as under:

- (i) Financial assistance will be provided to poor patients living below State/UT-wise threshold poverty line as per **Annexure-I**.
- (ii) List of diseases covered for financial assistance under the Umbrella Scheme of RAN is at **Annexure-II**.
- (iii) Patients will be provided financial assistance for their treatment at Government hospitals having super specialty facilities. Those having treatment in private hospitals will not be eligible for financial assistance under the scheme.
- (iv) The financial assistance to eligible patients will be in the form of 'one-time grant'.
- (v) Government servants and their families will not be eligible under this scheme.
- (vi) There will be no reimbursement of expenditure already incurred.

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- (vii) Families covered under Ayushman Bharat – Pradhan Mantri Jan Arogya Jojna (PMJAY) will not be eligible for financial assistance under RAN and HMCPF components.
- (viii) In a bid to speed up the assistance to the needy patients, Revolving Funds are set up in Government Hospitals/Institutes listed at **Annexure-III**. Funds up to Rs. one crore for each component separately (Rs. two crore in case of AIIMS, New Delhi for RAN component only) will be placed at their disposal.
- (ix) Powers are delegated to the Medical Superintendent/Director of the hospitals with revolving funds for providing treatment up to Rs. 5 lakh for eligible patients in each case, out of revolving fund.
- (x) More hospitals shall be added in the list of hospitals with revolving fund as and when such hospitals are identified by the Technical Committee.
- (xi) Cases involving treatment beyond Rs. 5 lakh in hospitals with revolving fund and all the cases for financial assistance from hospitals not having revolving fund will be referred to Department of Health & Family Welfare, Government of India for approval.
- (xii) Funds shall be released to hospitals not having revolving fund in respect of cases approved by the Department of Health and Family Welfare along with the sanction letter.
- (xiii) No separate funds will, however, be released to hospitals having revolving funds in respect of cases received in and approved by Department of Health and Family Welfare, involving treatment beyond 5 lakh and such expenditure will be met out of the revolving funds.
- (xiv) In case of hospitals having revolving fund, the cost of treatment in all eligible cases will be met out of the revolving fund, which will be replenished from time to time, on the basis of utilization certificate and list of beneficiaries furnished by the hospitals. On utilization of 75% of the amount placed in revolving fund, hospitals will become eligible for replenishment.
- (xv) Maximum financial assistance admissible under the Scheme will be Rs. 15 lakh.
- (xvi) Financial assistance received under Prime Minister's National Relief Fund (PMNRF) or from any other source by the patient for treatment, shall be deducted from the admissible amount of financial assistance under the Umbrella Scheme of RAN.
- (xvii) For RAN and HMCPF components, there will be a Technical Committee, which shall advise the Government in technical matters such as enlisting of diseases covered under Umbrella Scheme of RAN and identifying Government hospitals/institutes for setting up of revolving funds, examining requests for financial assistance received in the Department and giving their



recommendations on any other matter of technical nature. The composition of the Technical Committee will be as under:

1. Addl. DG/Adviser, DGHS.
2. Joint Secretary/Economic Adviser concerned.
3. Medical Superintendent, Dr. RML Hospital, New Delhi.
4. HOD, Cardiology, AIIMS, New Delhi.
5. HOD, Haematology, AIIMS, New Delhi.
6. HOD, Medical Oncology, Safdarjung Hospital, New Delhi

(xviii) Experts in rare diseases will be associated with the above Technical Committee to advise the Government in matter listed at sub para xvii above, in respect of rare diseases.

5. Conditions specific to Scheme for financial assistance for patients suffering from specified rare diseases

(i) The objective of this component is to provide financial assistance to poor patients living below State/UT-wise threshold poverty line (**Annexure-I**) and suffering from specified Rare Diseases (**Annexure-II**), to begin with, for their treatment at Government hospitals having super specialty facilities.

(ii) The rare diseases specified in **Annexure-II** are disorders identified based on availability of treatment, reasonably proven clinical outcomes and cost effectiveness. The list of specified rare diseases for financial assistance under Rare Diseases component of Umbrella Scheme of RAN will be as suggested by the relevant Technical Committee.

(iii) Patients suffering from rare diseases as specified in **Annexure-II** belonging to the socio-economic categories that are eligible to be PMJAY beneficiaries will also be considered for packages not covered under PMJAY.

6. Common application form has been prescribed (**Annexure-IV**) for submission of request for financial assistance under any of the component of the Umbrella Scheme of RAN. The application shall be signed by the treating doctor/Head of the Department and countersigned by the Medical Superintendent of the hospital concerned.

7. Application for financial assistance shall be submitted along with:

(i) Income certificate (in original) of the patient/parents/other major earning members of the family, indicating income from all sources, duly certified by the Block/Mandal Development Officer/Tehsildar/SDM/ Administrator/Special Officer of Municipal Boards/District Officer.

(ii) A copy of the entire ration card along with its cover page, with details of all the family members, issued by the Food and Civil Supplies Department of the State/UT Government duly self attested.

8. All Government hospitals, where revolving funds are set up under RAN as well as Rare Diseases components, will open separate bank accounts for the two sub components and submit the

bank details to the Ministry immediately so that funds could be transferred to them under the Umbrella Scheme of RAN.

9. Similarly all 27 Regional Cancer Centres, where revolving funds are set up under HMCPF component, will open a separate bank account for the purpose and submit the bank details to the Ministry immediately so that funds could be transferred to them under the Umbrella Scheme of RAN.

10. This has approval of the competent authority.

Enc: Annexure I to IV.

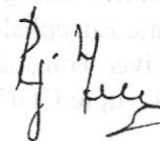
P. W. Lee

State-wise poverty line for Rural and Urban Areas w.e.f. 1/1/2019

In Rupees

State/UT	Per capita per month poverty line as fixed by erstwhile Planning Commission for 2011-12		Revised per capita threshold income per month w.e.f. 1.1.2019 under Umbrella Scheme of Rashtriya Argya Nidhi	
	Rural	Urban	Rural	Urban
ALL India	816	1000	1160	1388
Andhra Pradesh	860	1009	1191	1529
Arunachal Pradesh	930	1060	1495	1701
Assam	828	1008	1190	1387
Bihar	778	923	1134	1269
Chhattisgarh	738	849	1064	1185
Delhi	1145	1134	1571	1605
Goa	1090	1134	1668	1522
Gujarat	932	1152	1327	1530
Haryana	1015	1169	1902	1593
Himachal Pradesh	913	1064	1239	1467
J & K	891	988	1339	1397
Jharkhand	748	974	1095	1349
Karnataka	902	1089	1294	1578
Kerala	1018	987	1484	1425
Maharashtra	967	1126	1388	1484
Madhya Pradesh	771	897	1047	1258
Manipur	1118	1170	1850	1629
Meghalaya	888	1154	1248	1536
Mizoram	1066	1155	1488	1500
Nagaland	1270	1302	1976	1808
Odisha	695	861	1011	1180
Puducherry	1301	1309	1881	1838
Punjab	1054	1155	1475	1563
Rajasthan	905	1002	1272	1411
Sikkim	930	1226	1407	1808
Tamil Nadu	880	937	1266	1331
Telangana	860	1009	1264	1395
Tripura	798	920	1191	1334
Uttar Pradesh	768	941	1061	1327
Uttarakhand	880	1082	1208	1475
West Bengal	783	981	1138	1368

For Andaman Nicobar Islands use threshold levels of Tamil Nadu, for Dadra and Nagar Haveli and for Daman and Diu use levels for Gujarat, and for Lakshadweep use levels for Kerala, for Chandigarh use levels for Punjab.



Illustrative list of categories of treatment for financial assistance under RAN component

(This list is reviewed by the Technical Committee from time to time)

1. Cardiology & Cardiac Surgery:

- 1) Pacemakers including CRT/Biventricular pacemaker.
- 2) Automatic Implantable Cardioverter Defibrillator (AICD) and Combo devices.
- 3) Coronary Artery Disease including Diagnostic Cardiac Catheterization and Coronary Angiography.
- 4) Interventional procedure including Angioplasty, with or without Stents (Bare metal Stents as well as Drug Eluting Stents) Rota-ablation, Balloon Valvuloplasty.
- 5) ASD, VSD and PDA device closure.
- 6) Peripheral Vascular Angioplasty including Carotid Angioplasty & Renal Angioplasty, Aortic Surgery and Stent Grafting.
- 7) Coil Embolization and Vascular plugs.
- 8) Electrophysiological Studies (EPS) and Radio Frequency (RF) Ablation.
- 9) Cardio vascular surgery for Congenital and Acquired conditions including C.A.B.G, Valve replacement etc.
- 10) Heart/Lung Transplantation.(ceiling cost may be upto CGHS rates)
- 11) Intra Aortic Balloon Pump (IABP).
- 12) Thrombolytic Therapy for Acute Myocardial Infarction, Pulmonary Thromboembolism & Prosthetic valve Thrombosis.
- 13) IVC Filter

2. Cancer :

- 1) Radiation treatment of all kinds including Radio Therapy and Gama Knife Surgery/GRT/MRT/Brachytherapy.
- 2) Anti-Cancer Chemotherapy with supportive medication including hormonal therapy.
- 3) Bone Marrow Transplantation- Allogenic & Autologous
- 4) Diagnostic Procedures- including PET scan.
- 5) Surgery for operable malignant tumours.

3. Urology/Nephrology/Gastroenterology/GI Surgery :

- 1) Dialysis (Both Haemodialysis as well as Peritoneal)
- 2) Plasmapheresis in ABO incompatible donors
- 3) Continuous RRT in Acute Renal failure
- 4) Vascular access consumables (AV Grafts, Catheters including perm catheters) for Dialysis.
- 5) Renal transplant-The ceiling cost may be upto CGHS rates.
- 6) USG guided PCNL and USG guided SPC.
- 7) Endoscopic surgical procedures in urology including CPE with TURBT, CPE with endoscopic catheterization, CPE with clot evacuation.
- 8) Endoscopic surgical procedures in GI surgery.
- 9) Acute GI emergencies like Acute Pancreatitis, GI bleeding, Cholangitis, Peritonitis, Intestinal Obstruction, Biliary stricture, Acute Fulminant Hepatitis, Hepatic Encephalopathy, Hepatic Abscess etc.
- 10) Liver Transplantation and Surgery for portal hypertension- the ceiling cost may be upto CGHS rates.

4. Orthopedics:

- 1) Treatment of Traumatic & Pathological Fracture.*
- 2) Implants for joint replacement.**
- 3) Spinal fixation Implant.**

*Only Indigenous implants for use in Fracture and Poly Trauma will be permitted under the scheme.

**Justification for Non Indigenous Implants would be provided by the treating doctor.

5. Neurosurgery – Neurology :

- 1) Brain Tumours
- 2) Head injury
- 3) Intracranial aneurysms & aneurysms of neck vessels.
- 4) Vascular Malformations of brain & spinal cord
- 5) Spinal Tumors
- 6) Degenerative /Demyelinating diseases of brain/spinal cord
- 7) Cerebrospinal Stroke
- 8) Status Epileptics
- 9) Movement Disorders
- 10) Neurological infections (Acute/chronic)
- 11) Traumatic Spinal Injury
- 12) Occlusive Vascular Disease of Brain
- 13) Guillain-barre syndrome
- 14) Myasthenia Gravis in Crisis (medical and surgical)
- 15) Acute Polymyositis with Ventilatory Failure
- 16) Acute or Chronic Autoimmune Diseases

6. Endocrinology :

- 1) Complications and sequel of diabetes which require one time treatment e.g. Amputation or Renal Transplant or Retinal detachment, Glaucoma etc..
- 2) GH deficiency
- 3) Adrenal insufficiency (Acute/Chronic)
- 4) Cushing's Disease
- 5) Endocrine surgery with post surgical treatment for one year.
- 6) Metabolic Bone Disease/Renal Tubular Acidosis.

7. Mental Illness :

Any treatment requiring one time grant for mental disorders including

- 1) Organic Psychosis (acute/ chronic).
- 2) Functional psychosis including Schizophrenia, Bio-polar Disorders, delusional disorders and other acute polymorphic psychosis
- 3) Severe OCD, Somatoform disorders.
- 4) Developmental disorders including Autism spectrum disorders and Severe behavioral disorders during childhood.
- 5) Psycho diagnostics, neuropsychological assessments, IQ assessment, blood tests like serum lithium and drug level of carbamazepine, valporate, phenytoin and any other similar medications.
- 6) CSF studies screening for substances abuse/toxicology.

8. Gynecology :

Uterine Artery Embolization for Post Partum Hemorrhage

9. Rare Diseases :

1. Disorders amenable to treatment with Hematopoietic Stem Cell Transplantation (HSCT)

- i. Lysosomal storage disorders in early stages for which Enzyme replacement Therapy (ERT) is presently not available (eg Metachromatic Leukodystrophy, Krabbe's disease and severe form of Mucopolysaccharoidosis (MPS) type I within first 2 years of age.
- ii. Adrenoleukodystrophy (early stages), before the onset of hard neurological signs.
- iii. Immune deficiency disorders eg Severe Combined Immunodeficiency (SCID), Chronic Granulomatous disease, Wiskot Aldrich Syndrome, etc
- iv. Osteopetrosis
- v. Fanconi Anemia
- vi. Others to be decided on case to case basis

2. Disorders amenable to organ transplantation

- i. Liver Transplantation -Metabolic Liver diseases and other Inborn Errors of Metabolism (small molecule diseases)
 - i. Tyrosinemia (failure to respond to nitisinone therapy or have documented evidence of malignant changes in hepatic tissue)
 - ii. Glycogen storage disorders (GSD) I, III and IV due to poor metabolic control, multiple liver adenomas, or high risk for Hepatocellular carcinoma or evidence of substantial cirrhosis or liver dysfunction or progressive liver failure,
 - iii. MSUD (Maple Syrup Urine Disease),
 - iv. Urea cycle disorders,
 - v. Organic acidemias,
 - vi. Wilson's disease (Decompensated cirrhosis)
 - vii. Bile acid synthetic defects (Decompensated cirrhosis)
 - viii. CriglerNajjar Type 1,
 - ix. Alpha 1 antitrypsin deficiency (Decompensated cirrhosis)
 - x. Progressive familial Intrahepatic Cholestasis (PFIC)(Decompensated cirrhosis)
 - xi. Others to be decided - case to case basis
- ii. Renal Transplantation-
 - i. Fabry's disease,
 - ii. Autosomal recessive Polycystic Kidney Disease (ARPKD),
 - iii. Autosomal dominant Polycystic Kidney Disease (ADPKD)
 - iv. Others on case to case basis
- iii) Patients requiring combined liver and kidney transplants -Rarely Methyl Malonic aciduria may require combined liver & Kidney transplant) etc

10. Miscellaneous :

Any life saving procedure/ any other major illness/treatment/intervention not covered under any of the components of Umbrella Scheme of RAN and recommended by the Technical Committee could be considered for financial assistance .



(A) List of hospitals/institutes, where revolving funds are set up under RAN and Rare Diseases components of the Umbrella Scheme of RAN

1. AIIMS, New Delhi
2. Dr. RML Hospital, New Delhi
3. Safdarjung Hospital, New Delhi.
4. Lady Hardinge Medical College & Smt. SK Hospital, New Delhi.
5. PGI, Chandigarh
6. JIPMER, Pudducherry
7. NIMHANS, Bangalore
8. SGPGIMS, Lucknow
9. CNCI, Kolkata
10. KGMC, Lucknow
11. NEIGRIHMS, Shillong
12. RIMS, Imphal.
13. SKIMS, Srinagar.
14. Sree Chitra Tirunal Institute of Medical Sciences and Technology, Thiruvananthapuram.

(B) List of 27 Regional Cancer Centres, where revolving fund are set under HMCPCF component

1. Kamala Nehru Memorial Hospital, Allahabad, Uttar Pradesh.
2. Chittaranjan National Cancer Institute, Kolkata, West Bengal
3. Kidwai Memorial Institute of Oncology, Bangalore, Karnataka. (SCI)
4. Regional Cancer Institute (WIA), Adyar, Chennai, Tamil Nadu. (SCI)
5. Acharya Harihar Regional Cancer, Centre for Cancer Research & Treatment, Cuttack, Orissa. (SCI)
6. Regional Cancer Control Society, Shimla, Himachal Pradesh.
7. Cancer Hospital & Research Centre, Gwalior, Madhya Pradesh.
8. Dr. B.R.A. Indian Rotary Cancer Institute, (AIIMS), New Delhi.
9. R.S.T. Hospital & Research Centre, Nagpur, Maharashtra. (TCCC)
10. Pt. J.N.M. Medical College, Raipur, Chhatisgarh.
11. Post Graduate Institute of Medical Education & Research (PGIMER), Chandigarh.
12. Sher-I- Kashmir Institute of Medical Sciences, Soura, Srinagar.
13. Regional Institute of Medical Sciences, Manipur, Imphal.
14. Govt. Medical College & Associated Hospital, Bakshi Nagar, Jammu.
15. Regional Cancer Centre, Thiruvananthapuram, Kerala
16. Gujarat Cancer Research Institute, Ahmadabad, Gujarat.
17. MNJ Institute of Oncology, Hyderabad, Andhra Pradesh. (SCI)
18. Pondicherry Regional Cancer Society, JIPMER, Pondicherry.
19. Dr. B.B. Cancer Institute, Guwahati, Assam.
20. Tata Memorial Hospital, Mumbai, Maharashtra.
21. Indira Gandhi Institute of Medical Sciences, Patna, Bihar. (SCI)
22. Acharya Tulsi Regional Cancer Trust & Research Institute (RCC), Bikaner, Rajashtan.
23. Regional Cancer Centre, Pt. B.D. Sharma Post Graduate Institute of Medical Sciences, Rohtak, Haryana.
24. Civil Hospital, Aizawl, Mizoram. (TCCC)
25. Sanjay Gandhi Post Graduate Institute of Medical Sciences, Lucknow. (TCCC)
26. Government Arignar Anna Memorial Cancer Hospital, Kancheepuram, Tamil Nadu.
27. Cancer Hospital, Tripura, Agartala. (SCI)

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Application for Financial Assistance under Umbrella Scheme Rashtriya Arogya Nidhi (RAN) and Health Minister's Discretionary Grant (HMDG)

(Please tick mark (/))

Rashtriya Arogya Nidhi		HEALTH MINISTER'S DISCRETIONARY GRANTS	
Health Minister's Cancer Patient Fund			
Rare Diseases			

1	Name of the Patient (in Block Letters)	
2	Age	
3	(a) Permanent Address along with Pin Code	
	(b) Address for correspondence	
4	(a) Email Address (if available)	
	(b) Mobile No. (if available)	
5	(a) Father's /Mother's name	
	(b) Husband/wife's name	
6	Applicant's Relationship with the Patient	
7	Disease from which suffering (Name of the disease)	
8	Whether the applicant or the person on whom the patient is dependent, is an employee of Centre/State Government /Pensioner	
9	Monthly Income of the applicant and all family members from all sources issued by Tehsildar/BDO/SDO/SDM/DC. (Original Income Certificate should be attached. However, where online certificates are issued, self attested copy of income certificate may be enclosed)	
10	Amount of Financial Assistance required	
11	Whether financial assistance has been received from (a) any Ministry/Department other than Ministry of Health & Family Welfare such as Prime Minister National Relief Fund or CM Relief Fund for treatment of the same disease.	
	(b) Ministry of Health & Family Welfare earlier. If so, full details may be given.	
12	Attach self attested copy of the Ration Card	

P. K. Singh

13	Aadhar Card No., if any (Attach self attested copy)	
	I hereby share my Aadhaar Number issued by UIDAI & voluntarily give my consent to link my Aadhaar Number with my request for financial assistance under RAN/HMCPF/Rare Disease/HMDG Schemes. I also authorize Ministry of Health & Family Welfare to use my Aadhaar card details & identity information for authentication with UIDAI.	

DECLARATION

1. I declare that the information given above is correct and complete in all respect.
2. I am not covered for benefits under Pradhan Mantri Jan Arogya Yojna (PMJAY).

OR

(For rare diseases)

Though I am covered under PMJAY, the amount of financial assistance required, indicated at Column 10 above, is only for packages not covered under PMJAY.

Date :

Signature of the Applicant/Patient

TO BE FILLED BY THE M.O. INCHARGE OF THE CASE/HOSPITAL, ETC, WHERE THE PATIENT IS RECEIVING TREATMENT

1. Name of the Patient & Hospital Registration No. _____

2. Gist of Reports of important Investigations done _____

3. Diagnosis-A short Note on the present clinical conditions may be indicated _____

4. If the patient has been operated, please Indicate the date of operation _____

5.(a)The name of the Hospital where the patient is receiving treatment. _____

(b) Whether Hospital is Government or Private. _____

6. Amount recommended for treatment _____

7. Probable date of operation/intervention _____

P. H. Hye

8. Item wise break up of expenditure recommended in Column 6

Name of consumables/medicines required for operation/treatment	Cost (In Rupees)
1.	
2.	
3.	
4.	
5.	

9. Certified that the patient is not covered for benefits under PMJAY.

OR

(For rare diseases)

For patients covered under PMJAY, the amount recommended for treatment under Column 6 above, is only for packages not covered under PMJAY.

Signature of the HOD/MO-in-charge
(Note below the level of Consultant/Assistant Professor with Official Seal.

1. Certified that the patient's particulars given above are true to the best of my knowledge and belief.
2. Details of Bank account (including IFSC Code) of the hospital to which funds are to be transferred (Bank details are to be provided in cases of hospitals, where revolving funds have not been set up).

Name of the Bank & Address	
Account No.	
IFSC code	
PAN/TIN/TAN	
Details of the account holder- name of hospital/institute	
Mobile Number	
E-mail id	

Signature of the Medical Superintendent of the Hospital/Medical Institution with Official Seal

P. V. K. S.