



As on: 28/03/2025

Subject: GUIDELINES ON ARTIFICIAL APPLIANCES USED FOR PERMANENT PHYSICAL IMPAIRMENT (PROSTHESIS, ORTHOSIS & WHEEL CHAIR)

The current instructions on the above subject are as under:-

With a view to provide successful rehabilitation through good prostheses having increased range of motion, better control and less discomfort to the users, the guidelines on artificial appliances (Prosthesis, Orthosis & Wheel Chair) are as under:-

- i. Provisions of artificial appliances shall be applicable to:
 - a. Regular employees and their dependent family members.
 - b. Retired employees & their spouse.
 - c. Dependents of deceased employees who died while in service and have been extended post-retirement medical facility.
- ii. Artificial appliance will be provided only when it is prescribed as per category wise specification, physically verified and certified as essential by an in-house orthopaedic or empanelled orthopaedic surgeon.
- iii. Cost ceilings for artificial appliances (Prosthesis) are as indicated hereunder:-

Category of artificial appliances	Cost ceiling (Rs.)
Above Elbow prostheses	4,80,000/-
Below Elbow prostheses	2,50,000/-
Above knee prostheses	4,80,000/-
Below knee prostheses	1,50,000/-
Shoulder Disarticulation	1,00,000/-
Hip Disarticulation	1,50,000/-

- iv. Cost ceilings for Orthotic appliances are as indicated hereunder:-

Sl. No.	Description	Monetary ceiling (Rs.)
1	ANKLE FOOT ORTHOSIS (AFO): toe-off/with motion ankle joint or equivalent	23,000
2	KNEE ANKLE FOOT ORTHOSIS (KAFO): with safety stride and automatic spring lever knee joint/with wedge lock plus multifunctional ankle or equivalent.	1,22,000
3	HIP KNEE ANKLE FOOT ORTHOSIS (HKFO): Carbon fibre laminated or equivalent.	1,12,000
4	PARTIAL HAND PROSTHESIS-STANDARD: (for amputation through the metacarpals or amputation of thumb or amputation of two or more fingers from base)	72,000
5	PARTIAL FOOT PROSTHESIS-STANDARD (for amputation through metatarsals/tarsals or amputation of two or more toes from base)	54,000

- v. Wheel chair within the following cost ceilings may be provided to the employees/ dependents who are recommended usage of wheel chair by in-house orthopaedic or empanelled orthopaedic. However, power wheel chair would be provided on specific recommendations of Medical Board consisting of Incharge, Medical Services (not below E-5 level), in-house orthopaedic surgeon/treating doctor and empanelled orthopaedic surgeon :-

Type of wheel chair	Recommended User	Cost Ceiling (Rs.)
Ordinary Wheel chair	Elderly/invalid person who stays indoor and is taken care of by family members	6,000/-
Folding Wheel chair	Individual who though dependent but need to be taken outdoor, requiring use of public transport or personal vehicle.	15,000/-
Power Wheel chair	Working individual/young individual	1,80,000/-

- vi. Repair & Maintenance charges equivalent to 5% of actual cost of artificial appliance would be reimbursed every year towards repair and maintenance after completion of one year. The beneficiary will have to apply for said reimbursement in prescribed format. The said reimbursement can be availed on cumulative basis in case it is not claimed by the individual in any particular year.

- vii. There will be no cost ceiling of artificial appliance(s) required for employee who sustains a permanent disability following injuries while on duty accident on first occasion. However, on subsequent occasion, if any, the cost ceilings as prescribed for the category of artificial appliances shall be applicable.
- viii. Life norms for artificial appliances and wheel chair are indicated hereunder:-

Category of beneficiary	Life norm
Regular employee & his/her dependents	Once in ten years (maximum on three occasions)
Retired employee & spouse of retired employee/deceased employee who die while in service	Once after retirement/death of employee.
Dependent children (up to 12 years)	Once in five years up to the age of 12 years and thereafter once in ten years up to the permissible age of dependency.

- ix. Payment towards cost of artificial appliance would be made directly to the supplying agency. However, artificial appliances not exceeding the cost of Rs. 25,000/- or which are required in emergency would be reimbursed. The emergent requirement shall be required to be certified by the treating doctor and countersigned by concerned Incharge, Medical Services.
- x. In cases other than mentioned at sub para-ix. above, artificial appliances shall be purchased by ONGC Hospital/Clinic following the laid down procedure from Govt. undertaking/authorized dealers of ALIMCO/Peripheral Limbs Fitting Centre/NGO approved by Ministry of Welfare. List of these agencies/dealers are available in Central Govt. Health Scheme (CGHS).
- xi. The approving authority for sanction of expenditure on artificial appliances is In-charge HR/ER, as per clause 18.16 of the BDP-2015, with recommendation of the Medical authority and in accordance with the instructions on the subject. Financial concurrence is required.

Team – Corporate Policy

This document is for information purpose only.

For further clarity, Consolidated O.O. No. ONGC/ER/CP/MED/022 may be referred to.