

**Guideline for
Reimbursement Claim Processing
In
West Bengal Health Scheme (WBHS)
Portal
(<https://wbhealthscheme.gov.in>)**

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Reimbursement Claim Processing:-

1) Claim Processing From Operator End

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3) Claim Processing From Approver End

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Claim Processing From Operator End

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WEST BENGAL HEALTH SCHEME PORTAL

FOR GOVERNMENT EMPLOYEES & PENSIONERS & BENEFICIARIES OF GIA COLLEGES & UNIVERSITIES OF WEST BENGAL

Finance Department
Government of West Bengal

LOGGED IN AS - DEB-PAUL12 (Operator)

Operator Login

Idle Session Timer: 2681 seconds.

LOGOUT

Click Here For Claim Reimbursement Process Employee

- Home
- Inbox (Employee)
- Sanctioned Cases (Employee)
- Inbox (Pensioner)
- Inbox (Advance)
- Report For User Administration
- Report For Enrolment
- Report Of Claims
- Claim Reimbursement (Pensioner)
- Hospital Wise In-Treatment List
- Sanctioned Cases (Pensioner)
- E- Billing
- Rate List
- Outside State Permission

Welcome - Debabrata Paul

Inbox of Claims (Employee / Pensioner)

Sl No	Name of Emp / pen	Patient Name	Employee ID	Claim ID	Beneficiary ID
1	ARUP MIDDE	ARUP MIDDE	1945000001	E20193000150	ARUP/1234/1/5
2	ARUP MIDDE	ARUP MIDDE	1945000001	E20212000892	ARUP/1234/1/5
3	ARUP MIDDE	ARUP MIDDE	1945000001	E20213000337	ARUP/1234/1/5
4	ARUP MIDDE	ARUP MIDDE	1945000001	E20213002566	ARUP/1234/1/5

Inbox of Certificate Processing (Employee / Pensioner)

Sl No	Application Id	GPF/PPO No	Name	DDO Code
1	WB/PEN/13/000139424	NONPPO/WB/20200226140213790	DEBABRATA PAUL	TESSDA001

PREVIOUS NEXT



WEST BENGAL HEALTH SCHEME PORTAL

FOR GOVERNMENT EMPLOYEES & PENSIONERS & BENEFICIARIES OF GIA COLLEGES & UNIVERSITIES OF WEST BENGAL

Finance Department
Government of West Bengal

LOGGED IN AS - DEB-PAUL12 (Operator)

Idle Session Timer: 2693 seconds.

LOGOUT

- Home
- Inbox (Employee)
- Sanctioned Cases (Employee)
- Inbox (Pensioner)
- Inbox (Advance)
- Report For User Administration ▶
- Report For Enrolment ▶
- Report Of Claims ▶
- Claim Reimbursement (Pensioner)
- Hospital Wise In-Treatment List
- Sanctioned Cases (Pensioner)
- E- Billing ▶
- Rate List ▶
- Outside State Permission ▶



List of Online Reimbursement Claim for Employees

✖ DSC Not Validated

Search By Selecting Claim Type :

- OPD Treatment
- IPD Treatment
- Indoor and Indoor related OPD Treatment
- All

Sl No	Employee Name ▾	Patient Name ▾	Employee ID ▾	Claim ID ▾	Beneficiary ID ▾	Relation with Applicant	Initiated By
1	ARUP MIDDE	ARUP MIDDE	1945000001	E20193000150	ARUP/1234/1/5	SELF	Applicant
2	ARUP MIDDE	ARUP MIDDE	1945000001	E20212000892	ARUP/1234/1/5	SELF	Applicant
3	ARUP MIDDE	ARUP MIDDE	1945000001	E20213000337	ARUP/1234/1/5	SELF	Applicant
4	ARUP MIDDE	ARUP MIDDE	1945000001	E20213002566	ARUP/1234/1/5	SELF	Applicant

Click Here For Claim Reimbursement Process Employee

Showing List of Claim Reimbursement Employee Which Are Forwarded By Employee

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NEXT



LOGGED IN AS - DEB-PAUL12 (Operator)

Idle Session Timer: 2653 seconds.

LOGOUT



List of Online Reimbursement Claim for Employees

DSC Not Validated

Claim Details of Selected Claim Application ID E20213002566



Indoor Related Opd Treatment

HRMS ID : 1945000001 Claim Application ID : E20213002566

General Information

Claim Details

Pay (Band Pay + Grade Pay) : 33000
Entitlement of Bed Category : GENERAL
Type of Hospital :

Hospital Code	Category	Empanelled/ Non- Empanelled	Class	Name of Hospital	Address of Hospital
0411007	Private Empanelled Hospital	Empanelled	Class-1	B.M. BIRLA HEART RESEARCH CENTRE	1/1, NATIONAL LIBRARY AVENUE, KOLKATA-27

Details of Permission :

(a) For availing treatment outside West Bengal :

Sanctioning Authority	Sanctioning Department	Sanction No.	Sanction Date
-----------------------	------------------------	--------------	---------------

(b) For special cases as mention in order No. 796-F(MED),dated; 31.01.2011, No. 797-F(MED), dated 31.01.2011,No.11253-F(MED), dated; 16/11/2011 and No 7578-F(MED),dated; 04.09.2012

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1.Procedural Treatment :

2.Cost of Special Device/Implants :

(i) Coded Implant Details :

(ii) Non Coded Implant Details :

Claim Details of Selected Claim Application ID E20213002566



(II) For Non-Package treatment from 21/08/2021 To 28/08/2021

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i. Consultation Fees :

Sl No	Doctor Name	Doctor Degree	Consultation Date	Amount Claimed(₹)	Amount Admissible(₹)	Justification
1	SAUMITRA DUTTA	DM	21/08/2021	250	<input type="text"/>	<input type="text"/>
2	SAUMITRA DUTTA	DM	21/08/2021	250	<input type="text"/>	<input type="text"/>
3	SAUMITRA DUTTA	DM	22/08/2021	250	<input type="text"/>	<input type="text"/>
4	SAUMITRA DUTTA	DM	22/08/2021	250	<input type="text"/>	<input type="text"/>
			Total(₹)	1000	0	

ii. Room Rent:

Sl No	Room Type	From	To	Amount Claimed(₹)	Amount Admissible(₹)	Justification
1	GENERAL	21/08/2021	28/08/2021	4800	<input type="text"/>	<input type="text"/>
			Total(₹)	4800	0	

iii. Cost of Pathological and Radiological Investigations :

a. Coded Investigation Details :

Sl No	Investigation Code	Investigation Name	Amount Claimed(₹)	Amount Admissible(₹)	Justification
1	02001005	JOINTS ASPIRATION	750	<input type="text"/>	<input type="text"/>
			Total(₹)	750	0

(II) For Non-Package treatment from 21/08/2021 To 28/08/2021

PREVIOUS

NEXT

Filled Up Data of Selected Claim
Application ID E20213002566

i. Consultation Fees :

Sl No	Doctor Name	Doctor Degree	Consultation Date	Amount Claimed(₹)	Amount Admissible(₹)	Justification
1	SAUMITRA DUTTA	DM	21/08/2021	250	250	No Deductions Made
2	SAUMITRA DUTTA	DM	21/08/2021	250	250	No Deductions Made
3	SAUMITRA DUTTA	DM	22/08/2021	250	250	No Deductions Made
4	SAUMITRA DUTTA	DM	22/08/2021	250	250	No Deductions Made
			Total(₹)	1000	1000	

ii. Room Rent:

Sl No	Room Type	From	To	Amount Claimed(₹)	Amount Admissible(₹)	Justification
1	GENERAL	21/08/2021	28/08/2021	4800	4500	Inadmissible Deducted.
			Total(₹)	4800	4500	

Deduction Note

iii. Cost of Pathological and Radiological Investigations :

a. Coded Investigation Details :

Sl No	Investigation Code	Investigation Name	Amount Claimed(₹)	Amount Admissible(₹)	Justification
1	02001005	JOINTS ASPIRATION	750	750	No Deductions Made
			Total(₹)	750	

b. Non-Coded Investigation Details :

Sl No	Investigation Name	Amount Claimed(₹)	Amount Admissible(₹)	Justification
1	Blood Test	250	250	No Deductions Made

Filled Up Data of Selected Claim
Application ID E20213002566

	Amount Claimed (₹)	Amount Admissible (₹)	Justification
iv. Cost of Medicines :	2600	2600	No Deductions Made.
v. Cost of Consumables :	2000	2000	No Deductions made.
vi. Cost of Special Nursing :	105	105	No Deductions made.
vii. Cost of Miscellaneous Items:	315	315	No Deductions Made.

2. Indoor Related OPD Treatment :

a. Consultation fees :

Sl No	Doctor Name	Doctor Degree	Consultation Date	Amount Claimed(₹)	Amount Admissible(₹)	Justification
1	SAUMITRA DUTTA	DM	09/09/2021	250	250	No Deductions Made
Total(₹)				250	250	

b. Cost of Pathological and Radiological Investigations :

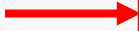
Sl No	Investigation Code	Investigation Name	Investigation Center Name	Investigation Date	Amount Claimed(₹)	Amount Admissible(₹)	Justification
1	02001005	JOINTS ASPIRATION	B.M. BIRLA HEART RESEARCH CENTRE	09/09/2021	750	750	No Deduction
Total(₹)					750	750	

	Amount Claimed (₹)	Amount Admissible (₹)	Justification
(c) Cost of Medicine :	2500	2500	No Deductions Made.
(d) Cost of Special Device/Implant :	250	250	No Deductions Made.
(e) Cost of Miscellaneous Items :	315	315	No Deductions Made.

PREVIOUS NEXT

No	Code	Name	Center Name	Date	Claimed(₹)	Admissible(₹)	Justification
1	02001005	JOINTS ASPIRATION	B.M. BIRLA HEART RESEARCH CENTRE	09/09/2021	750	750	No Deduction
Total(₹)					750	750	

Filled Up Data of Selected Claim Application ID E20213002566



	Amount Claimed (₹)	Amount Admissible (₹)	Justification
(c) Cost of Medicine :	2500	2500	No Deductions Made.
(d) Cost of Special Device/Implant :	250	250	No Deductions Made.
(e) Cost of Miscellaneous Items :	315	315	No Deductions Made.

Click Here to Calculate The Admissible Claim

Note:-

First Click Here to Calculate The Admissible Claim Then The "Save" Button Will be Visible



Gross Claim (₹):	15885	Medical Advance (₹):	0
Discount (₹):		Insurance (₹):	
Net Claim (Gross Claim - Medical Advance) (₹):	15885		
Refund of Medical Advance (₹):	0		
Admissible Claim ((Total Admissible - Advance) or (Total Admissible + Refund) - Advance) (₹)	15585		

Select the Level of Recipient User:

Operator Recommending Authority
 Approver Head Of Office(HoO)

Select the Name of User:

Enter Remarks / Objection:

PREVIOUS | NEXT

Save | Exit

No	Code	Name	Center Name	Date	Claimed(₹)	Admissible(₹)	Justification
1	02001005	JOINTS ASPIRATION	B.M. BIRLA HEART RESEARCH CENTRE	09/09/2021	750	750	No Deduction
Total(₹)					750	750	

Filled Up Data of Selected Claim Application ID E20213002566

	Amount Claimed (₹)	Amount Admissible (₹)	Justification
(c) Cost of Medicine :	2500	2500	No Deductions Made.
(d) Cost of Special Device/Implant :	250	250	No Deductions Made.
(e) Cost of Miscellaneous Items :	315	315	No Deductions Made.

Gross Claim (₹): 15885 Medical Advance (₹): 0
Discount (₹):
Net Claim (Gross Claim - Medical Advance) (₹): 15885
Refund of Medical Advance (₹): 0
Admissible Claim ((Total Admissible - Advance) or (Total Admissible + Refund)- Advance) (₹): 15585

Selected Level of Recipient User

Select the Level of Recipient User:

Operator **Recommending Authority**
 Approver Head Of Office(HoO)

Select the Name of User:

Sumit Sadhukhan

Enter Remarks / Objection:

May be approved.

Selected Name of User

4

Save

Exit

Given Remarks/Objection

3

Click Here To Save

Click Here To Exit

PREVIOUS

NEXT

No	Investigation Code	Investigation Name	Investigation Center Name	Investigation Date	Amount Claimed(₹)	Amount Admissible(₹)	Justification
1	02001005	JOINTS ASPIRATION	B.M. BIRLA HEART RESEARCH CENTRE	09/09/2021	750	750	No Deduction
					Total(₹)	750	750

	Amount Claimed (₹)	Amount Admissible (₹)	Justification
(c) Cost of Medicine :	2500	2500	No Deductions Made.
(d) Cost of Special Device/Implant :	250	250	No Deductions Made.
(e) Cost of Miscellaneous Items :	315	315	No Deductions Made.

Gross Claim (₹): 15885 Medical Advance (₹): 0
Discount (₹):
Net Claim (Gross Claim - Discount): 15885
Refund of Medical Insurance (₹): 0
Admissible Claim (Net Claim - Medical Advance + Refund) - Adv: 15585

Select the Level of Approval: Operator Recommending Authority
 Approver Head Of Office(HoO)

Select the Name of User:

Enter Remarks / Objection:

Confirmation Message Window

Warning !

Are you Sure you want to save?


Click here to Confirm

Click here to Cancel

No	Investigation Code	Investigation Name	Investigation Center Name	Investigation Date	Amount Claimed(₹)	Amount Admissible(₹)	Justification
1	02001005	JOINTS ASPIRATION	B.M. BIRLA HEART RESEARCH CENTRE	09/09/2021	750	750	No Deduction
Total(₹)					750	750	

	Amount Claimed (₹)	Amount Admissible (₹)	Justification
(c) Cost of Medicine :	2500	2500	No Deductions Made.
(d) Cost of Special Device/Implant :	250	250	No Deductions Made.
(e) Cost of Miscellaneous Items :	315	315	No Deductions Made.

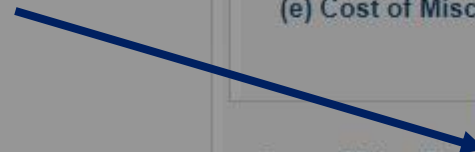
Gross Claim (₹):	15885	Medical Advance (₹):	0
Discount (₹):		Insurance (₹):	
Net Claim (Gross Claim - Discount):	15885		
Refund of Medical Advance:	0		
Admissible Claim (Net Claim - Refund of Medical Advance + Refund) - Advance:	15585		

 **Success !**

Admissibility fixation done for Claim Id- E20213002566 Successfully.

OK

Confirmation Message Window



1

Click here to Close Message Window

Select the Level of Recipient User:

Operator **Recommending Authority**
 Approver Head Of Office(HoO)

Select the Name of User: Sumit Sadhukhan

Enter Remarks / Objection: May be approved.

2

Click here to Forward the Claim to Selected User

- Home
- Inbox (Employee)
- Sanctioned Cases (Employee)
- Inbox (Pensioner)
- Inbox (Advance)
- Report For User Administration
- Report For Enrolment
- Report Of Claims
- Claim Reimbursement (Pensioner)
- Hospital Wise In-Treatment List
- Sanctioned Cases (Pensioner)
- E- Billing
- Rate List
- Outside State Permission



List of Online Reimbursement Claim for Employees

DSC Not Validated

- OPD Treatment
- IPD Treatment
- Indoor and Indoor related OPD Treatment
- All

Success !

Claim Id-E20213002566 Forwarded to Selected User Successfully .

OK

Sl No	Employee Name	Claim ID	Beneficiary ID	Relation with Applicant	Initiated By
1	ARUP MID	3000150	ARUP/1234/1/5	SELF	Applicant
2	ARUP MID	2000892	ARUP/1234/1/5	SELF	Applicant
3	ARUP MID	3000337	ARUP/1234/1/5	SELF	Applicant

Click here to Close Message Window

Confirmation Message Window

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Claim Processing From Recommending Authority End

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LOGGED IN AS - SUMITSAD
(Recommending Authority)

Recommending Authority Login

Idle Session Timer: 2695 seconds.

LOGOUT

Click Here For Claim Reimbursement Process Employee (Forwarded Claim From Operator)

- Home
- User Administration
- Inbox (Employee)
- Sanctioned Cases (Employee)
- Inbox (Pensioner)
- Sanctioned Cases (Pensioner)
- Update Basic Salary
- Update Basic Pension
- Inbox (Advance)
- Report For User Administration ▶
- Report For Enrolment ▶
- Report Of Claims ▶
- Hospital Wise In-Treatment List
- Rate List ▶
- Outside State Permission ▶

Welcome - Sumit Sadhukhan

Inbox of Claims (Employee / Pensioner)

Sl No	Name of Emp / pen	Patient Name	Employee ID	Claim ID	Beneficiary ID
1	ARUP MIDDE	ARUP MIDDE	1945000001	E20213002566	ARUP/1234/1/5

Inbox of Certificate Processing (Employee / Pensioner)

No Processing Pending.

PREVIOUS

NEXT



LOGGED IN AS - SUMITSAD
(Recommending Authority)

Idle Session Timer: 2695 seconds.

LOGOUT

- Home
- User Administration
- Inbox (Employee)
- Sanctioned Cases (Employee)
- Inbox (Pensioner)
- Sanctioned Cases (Pensioner)
- Update Basic Salary
- Update Basic Pension
- Inbox (Advance)
- Report For User Administration
- Report For Enrolment
- Report Of Claims
- Hospital Wise In-Treatment List
- Rate List
- Outside State Permission



List of Online Reimbursement Claim for Employees

DSC Not Validated

Search By Selecting Claim Type :

- OPD Treatment
- IPD Treatment
- Indoor and Indoor related OPD Treatment
- All

Sl No	Employee Name	Patient Name	Employee ID	Claim ID	Beneficiary ID	Relation with Applicant	Initiated By
1	ARUP MIDDE	ARUP MIDDE	1945000001	E20213002566	ARUP/1234/1/5	SELF	Debabrata Paul

Showing List Of Claim Reimbursement Employee Which Is Forwarded From Operator

Click Here For Claim Reimbursement Process Employee

PREVIOUS

NEXT

Filled Up Data of Selected Claim
Application ID E20213002566

i. Consultation Fees :

Sl No	Doctor Name	Doctor Degree	Consultation Date	Amount Claimed(₹)	Amount Admissible(₹)	Justification
1	SAUMITRA DUTTA	DM	21/08/2021	250	250	No Deductions Made
2	SAUMITRA DUTTA	DM	21/08/2021	250	250	No Deductions Made
3	SAUMITRA DUTTA	DM	22/08/2021	250	250	No Deductions Made
4	SAUMITRA DUTTA	DM	22/08/2021	250	250	No Deductions Made
			Total(₹)	1000	1000	

ii. Room Rent:

Sl No	Room Type	From	To	Amount Claimed(₹)	Amount Admissible(₹)	Justification
1	GENERAL	21/08/2021	28/08/2021	4800	4500	Inadmissible Deducted.
			Total(₹)	4800	4500	

Deduction Note

iii. Cost of Pathological and Radiological Investigations :

a. Coded Investigation Details :

Sl No	Investigation Code	Investigation Name	Amount Claimed(₹)	Amount Admissible(₹)	Justification
1	02001005	JOINTS ASPIRATION	750	750	No Deductions Made
			Total(₹)	750	

b. Non-Coded Investigation Details :

Sl No	Investigation Name	Amount Claimed(₹)	Amount Admissible(₹)	Justification
1	Blood Test	250	250	No Deductions Made
		Total(₹)	250	

PREVIOUS

NEXT

Amount Claimed (₹) Amount Admissible (₹)

Justification

Filled Up Data of Selected Claim Application ID E20213002566

No	Code	Name	Center Name	Date	Claimed(₹)	Admissible(₹)	Justification
1	02001005	JOINTS ASPIRATION	B.M. BIRLA HEART RESEARCH CENTRE	09/09/2021	750	750	No Deduction
Total(₹)					750	750	

Confirmation Message Window


	Amount Claimed (₹)	Amount Admissible (₹)	Justification
(c) Cost of Medicine :	2500	2500	No Deductions Made.
(d) Cost of Special Device/Implant :	250	250	No Deductions Made.
(e) Cost of Miscellaneous Items :	315	315	No Deductions Made.

Gross Claim (₹):	15885	Medical Advance (₹):	0
Discount (₹):		Insurance (₹):	
Net Claim (Gross Claim - Discount):	15885		
Refund of Medical Advance:	0		
Admissible Claim (Net Claim + Refund) - Advance:	15585		

Click Here to Calculate The Admissible Claim

1

Note:-
First Click Here to Calculate The Admissible Claim Then The "Save" Button Will be Visible

 **Success !**

Admissibility fixation done for Claim Id- E20213002566 Successfully.

Selected Level of Recipient User

Select the Level of Recipient User:

Operator Recommending Authority

Approver Head Of Office(HoO)

Click here to Close Message Window

3

Select the Name of User:

Selected Name of User

Enter Remarks / Objection:

Given Remarks/Objection

Click Here To Save

2

4

Click here to Forward the Claim to Selected User

PREVIOUS

NEXT

- Home
- User Administration
- Inbox (Employee)
- Sanctioned Cases (Employee)
- Inbox (Pensioner)
- Sanctioned Cases (Pensioner)
- Update Basic Salary
- Update Basic Pension
- Inbox (Advance)
- Report For User Administration ▶
- Report For Enrolment ▶
- Report Of Claims ▶
- Hospital Wise In-Treatment List
- Rate List ▶
- Outside State Permission ▶



List of Online Reimbursement Claim for Employees

DSC Not Validated

- OPD Treatment
- IPD Treatment
- Indoor and Indoor related OPD Treatment
- All

Search Type :

Success !

Claim Id-E20213002566 Forwarded to Selected User Successfully.

Click here to Close Message Window

Confirmation Message Window

PREVIOUS NEXT

Claim Processing From Approver End

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LOGGED IN AS - SANJAY32 (Approver)

Approver Login

Idle Session Timer: 2695 seconds.

LOGOUT

- Home
- User Administration
- Generation Of Sanction Order ▶
- Claim Processing ▶
- Dsc Registration
- Report Of User Administration ▶
- Report Of Claims ▶
- Carc Certificate ▶
- Hospital Wise In-Treatment List
- Rate List ▶
- Cancel Sanction Order ▶
- Outside State Permission ▶



Welcome - Swapan Chakraborty

Inbox of Claims (Employee / Pensioner)

Sl No	Name of Emp / pen ▾	Patient Name ▾	Employee ID ▾	Claim ID ▾	Beneficiary ID ▾
1	ARUP MIDDE	<u>ARUP MIDDE</u>	1945000001	<u>E20213002566</u>	ARUP/1234/1/5

Inbox of Certificate Processing (Employee / Pensioner)

No Processing Pending.

PREVIOUS

NEXT

- Home
- User Administration
- Generation Of Sanction Order ▶
- Claim Processing ▶**
- Dsc Registration
- Report Of User Administration ▶
- Report Of Claims ▶
- Carc Certificate ▶
- Hospital Wise In-Treatment List
- Rate List ▶
- Cancel Sanction Order ▶
- Outside State Permission ▶



Click Here For Claim Reimbursement Process Employee (Forwarded Claim From Recommending Authority)

Welcome - Swapan Chakraborty

Employee / Pensioner					
	f Emp / pen ▼	Patient Name ▼	Employee ID ▼	Claim ID ▼	Beneficiary ID ▼
DE		<u>ARUP MIDDE</u>	1945000001	<u>E20213002566</u>	ARUP/1234/1/5

Inbox of Certificate Processing (Employee / Pensioner)

No Processing Pending.



WEST BENGAL HEALTH SCHEME PORTAL

FOR GOVERNMENT EMPLOYEES & PENSIONERS & BENEFICIARIES OF GIA COLLEGES & UNIVERSITIES OF WEST BENGAL

Finance Department
Government of West Bengal

LOGGED IN AS - SANJAY32 (Approver)

Idle Session Timer: 2698 seconds.

LOGOUT

- Home
- User Administration
- Generation Of Sanction Order ▶
- Claim Processing ▶
- Dsc Registration
- Report Of User Administration ▶
- Report Of Claims ▶
- Carc Certificate ▶
- Hospital Wise In-Treatment List
- Rate List ▶
- Cancel Sanction Order ▶
- Outside State Permission ▶



Select Option

Do you want to use DSC?

Yes No

PREVIOUS

NEXT



LOGGED IN AS - SANJAY32 (Approver)

Idle Session Timer: 2677 seconds.

LOGOUT

Confirmation Message Window



List of Online Reimbursement Claim for

DSC Not Validated

Warning !

You have not chosen DSC. You can approve claim but sanction order has to be generated by you or Delegated Approver of Reimbursement in later phase

Click Here To Confirm

Sl No	Employee Name				Beneficiary ID	Relation with Applicant	Initiated By
1	ARUP MIDDE	ARUP MIDDE	1945000001	E20213002566	ARUP/1234/1/5	SELF	Sumit Sadhukhan

Click here for Claim Reimbursement Process Employee (Forwarded Claim From Recommending Authority)

PREVIOUS NEXT

Filled Up Data of Selected Claim
Application ID E20213002566

i. Consultation Fees :

SI No	Doctor Name	Doctor Degree	Consultation Date	Amount Claimed(₹)	Amount Admissible(₹)	Justification
1	SAUMITRA DUTTA	DM	21/08/2021	250	250	No Deductions Made
2	SAUMITRA DUTTA	DM	21/08/2021	250	250	No Deductions Made
3	SAUMITRA DUTTA	DM	22/08/2021	250	250	No Deductions Made
4	SAUMITRA DUTTA	DM	22/08/2021	250	250	No Deductions Made
			Total(₹)	1000	1000	

Deduction Note

ii. Room Rent:

SI No	Room Type	From	To	Amount Claimed(₹)	Amount Admissible(₹)	Justification
1	GENERAL	21/08/2021	28/08/2021	4800	4500	Inadmissible Deducted.
			Total(₹)	4800	4500	

iii. Cost of Pathological and Radiological Investigations :

a. Coded Investigation Details :

SI No	Investigation Code	Investigation Name	Amount Claimed(₹)	Amount Admissible(₹)	Justification
1	02001005	JOINTS ASPIRATION	750	750	No Deductions Made
			Total(₹)	750	

b. Non-Coded Investigation Details :

SI No	Investigation Name	Amount Claimed(₹)	Amount Admissible(₹)	Justification
1	Blood Test	250	250	No Deductions Made
		Total(₹)	250	

PREVIOUS NEXT

Amount Claimed (₹) Amount Admissible (₹) Justification

2500

No Deductions Made

Filled Up Data of Selected Claim
Application ID E20213002566

	Amount Claimed (₹)	Amount Admissible (₹)	Justification
iv. Cost of Medicines :	2600	2600	No Deductions Made.
v. Cost of Consumables :	2000	2000	No Deductions made.
vi. Cost of Special Nursing :	105	105	No Deductions made.
vii. Cost of Miscellaneous Items:	315	315	No Deductions Made.

2. Indoor Related OPD Treatment :

a. Consultation fees :

Sl No	Doctor Name	Doctor Degree	Consultation Date	Amount Claimed(₹)	Amount Admissible(₹)	Justification
1	SAUMITRA DUTTA	DM	09/09/2021	250	250	No Deductions Made
Total(₹)				250	250	

b. Cost of Pathological and Radiological Investigations :

Sl No	Investigation Code	Investigation Name	Investigation Center Name	Investigation Date	Amount Claimed(₹)	Amount Admissible(₹)	Justification
1	02001005	JOINTS ASPIRATION	B.M. BIRLA HEART RESEARCH CENTRE	09/09/2021	750	750	No Deduction
Total(₹)					750	750	

	Amount Claimed (₹)	Amount Admissible (₹)	Justification
(c) Cost of Medicine :	2500	2500	No Deductions Made.
(d) Cost of Special Device/Implant :	250	250	No Deductions Made.
(e) Cost of Miscellaneous Items :	315	315	No Deductions Made.

PREVIOUS

NEXT

Gross Claim (₹):

15885

Medical Advance (₹):

0

Filled Up Data of Selected Claim
Application ID E20213002566

No	Code	Name	Center Name	Date	Claimed(₹)	Admissible(₹)	Justification
1	02001005	JOINTS ASPIRATION	B.M. BIRLA HEART RESEARCH CENTRE	09/09/2021	750	750	No Deduction
Total(₹)					750	750	

	Amount Claimed (₹)	Amount Admissible (₹)	Justification
(c) Cost of Medicine :	2500	2500	No Deductions Made.
(d) Cost of Special Device/Implant :	250	250	No Deductions Made.
(e) Cost of Miscellaneous Items :	315	315	No Deductions Made.

Gross Claim (₹):	15885	Medical Advance (₹):	0
Discount (₹):		Insurance (₹):	
Net Claim (Gross Claim - Medical Advance) (₹):	15885		
Refund of Medical Advance (₹):	0		
<u>Admissible Claim ((Total Admissible - Advance) or (Total Admissible + Refund)- Advance) (₹)</u>	15585		

Select the Level of Recipient User:

- Operator Recommending Authority
 Approver Head Of Office(HoO)

Select the Name of User

Enter Remarks / Objection:

PREVIOUS

NEXT

Click Here to Raise
Objection If Required

Raise Objection

Exit

Click Here to Exit

Sl No	Investigation Code	Investigation Name	Investigation Center Name	Investigation Date	Amount Claimed(₹)	Amount Admissible(₹)	Justification
1	02001005	JOINTS ASPIRATION	B.M. BIRLA HEART RESEARCH CENTRE	09/09/2021	750	750	No Deduction
Total(₹)					750	750	

Filled Up Data of Selected Claim Application ID E20213002566

	Amount Claimed (₹)	Amount Admissible (₹)	Justification
(c) Cost of Medicine :	2500	2500	No Deductions Made.
(d) Cost of Special Device/Implant :	250	250	No Deductions Made.
(e) Cost of Miscellaneous Items :	315	315	No Deductions Made.

Gross Claim (₹):	15885	Medical Advance (₹):	0
Discount (₹):		Insurance (₹):	
Net Claim (Gross Claim - Medical Advance) (₹):	15885		
Refund of Medical Advance (₹):	0		
Admissible Claim ((Total Admissible - Advance) or (Total Admissible + Refund)- Advance) (₹)	15585		

Click Here to Calculate The Admissible Claim

Note:-
First Click Here to Calculate The Admissible Claim Then The "Save" Button Will be Visible

1

Selected Level of Recipient User

Select the Level of Recipient User:

Operator
 Recommending Authority
 Head Of Office(HoO)
 Approver

2

Select the Name of User

Enter Remarks / Objection:

---Select Sending User---

---Select Sending User---

1SH00001

3

4

Selected Name of User

5

Save Exit

Given Remarks/Objection

PREVIOUS

NEXT

Click Here To Save

Click Here To Exit

No	Investigation Code	Investigation Name	Investigation Center Name	Investigation Date	Amount Claimed(₹)	Amount Admissible(₹)	Justification
1	02001005	JOINTS ASPIRATION	B.M. BIRLA HEART RESEARCH CENTRE	09/09/2021	750	750	No Deduction
Total(₹)					750	750	

	Amount Claimed (₹)	Amount Admissible (₹)	Justification
(c) Cost of Medicine :	2500	2500	No Deductions Made.
(d) Cost of Special Device/Implant :	250	250	No Deductions Made.
(e) Cost of Miscellaneous Items :	315	315	No Deductions Made.

Gross Claim (₹):	15885	Medical Advance (₹):	0
Discount (₹):		Insurance (₹):	
Net Claim (Gross Claim - Discount):	15885		
Refund of Medical Advance:	0		
Admissible Claim (Net Claim - Refund) - Advance:	15585		

Warning !

Are you Sure you want to save?

Confirmation Message Window

Click here to Confirm

Click here to Cancel

PREVIOUS NEXT

Save Exit

Select the Level of Receipts Data:

Operator
 Recommending Authority

Approver
 Head Of Office(HoO)


Select the Name of User: 1SH00001

Enter Remarks / Objection: May be Approved.

Sl. No	Investigation Code	Investigation Name	Investigation Center Name	Investigation Date	Amount Claimed(₹)	Amount Admissible(₹)	Justification
1	02001005	JOINTS ASPIRATION	B.M. BIRLA HEART RESEARCH CENTRE	09/09/2021	750	750	No Deduction
Total(₹)					750	750	

	Amount Claimed (₹)	Amount Admissible (₹)	Justification
(c) Cost of Medicine :	2500	2500	No Deductions Made.
(d) Cost of Special Device/Implant :	250	250	No Deductions Made.
(e) Cost of Miscellaneous Items :	315	315	No Deductions Made.

Gross Claim (₹):	15885	Medical Advance (₹):	0
Discount (₹):		Insurance (₹):	
Net Claim (Gross Claim - Discount):	15885		
Refund of Medical Advance:	0		
Admissible Claim (Net Claim - Refund) - Advance	15585		

 **Success !**

Admissibility fixation done for Claim Id- E20213002566 Successfully.

Confirmation Message Window

Click here to Close Message Window

PREVIOUS

NEXT

Approve Save Send Exit

Select the Level of Recipient User:

Operator Recommending Authority
 Approver Head Of Office(HoO)

Select the Name of User:

Enter Remarks / Objection:

Sr. No	Investigation Code	Investigation Name	Investigation Center Name	Investigation Date	Amount Claimed(₹)	Amount Admissible(₹)	Justification
1	02001005	JOINTS ASPIRATION	B.M. BIRLA HEART RESEARCH CENTRE	09/09/2021	750	750	No Deduction
Total(₹)					750	750	

	Amount Claimed (₹)	Amount Admissible (₹)	Justification
(c) Cost of Medicine :	2500	2500	No Deductions Made.
(d) Cost of Special Device/Implant :	250	250	No Deductions Made.
(e) Cost of Miscellaneous Items :	315	315	No Deductions Made.

Gross Claim (₹):	15885	Medical Advance (₹):	0
Discount (₹):		Insurance (₹):	
Net Claim (Gross Claim - Medical Advance) (₹):	15885		
Refund of Medical Advance (₹):	0		
<u>Admissible Claim ((Total Admissible - Advance) or (Total Admissible + Refund)- Advance) (₹)</u>	15585		

Select the Level of Recipient User:

Operator
 Recommending Authority
 Head Of Office(HoO)
 Approver

Select the Name of User: 1SH00001

Enter Remarks / Objection: May be Approved.

PREVIOUS NEXT

Selected Name of User

Approve Save Send Exit

Given Remarks/Objection

Click Here To Forward The Claim

- Home
- User Administration
- Generation Of Sanction Order ▶
- Claim Processing ▶
- Dsc Registration
- Report Of User Administration ▶
- Report Of Claims ▶
- Carc Certificate ▶
- Hospital Wise In-Treatment List
- Rate List ▶
- Cancel Sanction Order ▶
- Outside State Permission ▶



List of Online Reimbursement Claim for Employees

DSC Not Validated

- Search by : Type :
- OPD Treatment
 - IPD Treatment
 - Indoor and Indoor related OPD Treatment
 - All

Success !

Claim Id-E20213002566 Forwarded to Selected User Successfully.

Click here to Close Message Window

Confirmation Message Window

Claim Processing From Head of Office (HoO) End

[Go to Contents](#)

[PREVIOUS](#)

[NEXT](#)



WEST BENGAL HEALTH SCHEME PORTAL

FOR GOVERNMENT EMPLOYEES & PENSIONERS & BENEFICIARIES OF GIA COLLEGES & UNIVERSITIES OF WEST BENGAL

Finance Department
Government of West Bengal

LOGOUT

Idle Session Timer: 2694 seconds.

Head of Office (HoO) Login

LOGGED IN AS - 1SH00001 (Head of Office)



- Home
- User Administration
- Update Head Of Office Details
- Certificate Generation ▶
- Generation Of Sanction Order ▶
- Certificate Processing ▶
- Claim Processing ▶
- Dsc Registration
- Cancel Sanction Order ▶
- Create Mapping Of Beneficiary ▶
- Update Mapping Of Beneficiary ▶
- Head Of Account (Emp) ▶
- Transfer Of Enrolled Beneficiary
- Claim Forwarding Letter
- Approve Basic Salary / Pension ▶
- Report For User Administration ▶
- Report For Enrolment ▶
- Report Of Claims ▶
- Opt Out Cases ▶

Welcome - MALAY KUMAR DE , CHIEF SECRETARY

Inbox of Claims (Employee / Pensioner)

SI No	Name of Emp / pen ▾	Patient Name ▾	Employee ID ▾	Claim ID ▾
1	ARUP MIDDE	ARUP MIDDE	1945000001	E20213002566

Inbox of Certificate Processing (Employee / Pensioner)

SI No	Application Id	GPF/PPO No	Name	DDO Code
1	WB/PEN/01/000138969	2222222222	Tarak Mondal	TESSDA001
2	WB/PEN/01/000139040	PPO/ED/9856	Sourav Biswas	TESSDA001

Details of DDO Under This Head of Office

DDO Code	DDO Designation	Operator-Employee Mapping Pending	Operator-Pensioner Mapping Pending
TESSDA001	ASSISTANT SEC	<u>3</u>	<u>2</u>
TESEDI002	ASSISTANT SECRETARY	<u>1</u>	<u>1</u>

PREVIOUS NEXT



WEST BENGAL HEALTH SCHEME PORTAL

FOR GOVERNMENT EMPLOYEES & PENSIONERS & BENEFICIARIES OF GIA COLLEGES & UNIVERSITIES OF WEST BENGAL

Finance Department
Government of West Bengal

Idle Session Timer: 2672 seconds.

LOGOUT

LOGGED IN AS - 1SH00001 (Head of Office)

[Click Here For Claim Reimbursement Process Employee \(Forwarded Claim From Approver\)](#)

- Home
- User Administration
- Update Head Of Office Details
- Certificate Generation ▶
- Generation Of Sanction Order ▶
- Certificate Processing ▶
- Claim Processing ▶**
 - Employee**
 - Pensioner
 - Advance
 - Reallocate Claim Processing
- Dsc Registration
- Cancel Sanction Order ▶
- Create Mapping Of Beneficiary ▶
- Update Mapping Of Beneficiary ▶
- Head Of Account (Emp) ▶
- Transfer Of Enrolled Beneficiary
- Claim Forwarding Letter
- Approve Basic Salary / Pension ▶
- Report For User Administration ▶
- Report For Enrolment ▶
- Report Of Claims ▶

Welcome - MALAY KUMAR DE, CHIEF SECRETARY

Inbox of Claims (Employee / Pensioner)

Sl No	Name of Emp / pen	Patient Name	Employee ID	Claim ID
1	ARUP MIDDE	ARUP MIDDE	1945000001	E20213002566

Claim Processing (Employee / Pensioner)

Application Id	GPF/PPO No	Name	DDO Code
WB/PEN/01/000138969	2222222222	Tarak Mondal	TESSDA001
WB/PEN/01/000139040	PPO/ED/9856	Sourav Biswas	TESSDA001

Details of DDO Under This Head of Office

DDO Code	DDO Designation	Operator-Employee Mapping Pending	Operator-Pensioner Mapping Pending
TESSDA001	ASSISTANT SEC	3	2
TESEDI002	ASSISTANT SECRETARY	1	1

PREVIOUS NEXT



LOGGED IN AS - 1SH00001 (Head of Office)

Idle Session Timer: 2697 seconds.

LOGOUT

- Home
- User Administration
- Update Head Of Office Details
- Certificate Generation
- Generation Of Sanction Order
- Certificate Processing
- Claim Processing
- Dsc Registration
- Cancel Sanction Order
- Create Mapping Of Beneficiary
- Update Mapping Of Beneficiary
- Head Of Account (Emp)
- Transfer Of Enrolled Beneficiary
- Claim Forwarding Letter
- Approve Basic Salary / Pension
- Report For User Administration

DSC Message Window

USB Token / Smartcard PIN code

Select a USB/SmartCard Device:

Card Holder	Manufacturer	Model	Slot
CRGCORPORA...	Aladdin Knowle...	eToken	2

Enter the PIN code to access your SmartCard:

.....

OK Cancel

No

Select Device

Enter The PIN To Access Device

Click Here To Confirm

Click Here To Cancel

Note:-

This DSC Window Only Appear
When You Select DSC Option To
Proceed The Claim

PREVIOUS NEXT



LOGGED IN AS - 1SH00001 (Head of Office)

Idle Session Timer: 2695 seconds.

LOGOUT

- Home
- User Administration
- Update Head Of Office Details
- Certificate Generation
- Generation Of Sanction Order
- Certificate Processing
- Claim Processing
- Dsc Registration
- Cancel Sanction Order
- Create Mapping Of Beneficiary
- Update Mapping Of Beneficiary
- Head Of Account (Emp)
- Transfer Of Enrolled Beneficiary
- Claim Forwarding Letter
- Approve Basic Salary / Pension
- Report For User Administration
- Report For Enrolment
- Report Of Claims

Confirmation Message Window

←

List of Online Reimbursement Claim for

✔ Success !

Valid DSC!! DSC Validation successfully Done

OK

✔ DSC Validated

Sl No	Employee Name	Beneficiary ID	Relation with Applicant	Initiated By			
1	ARUP MIDDE	ARUP MIDDE	1945000001	E20213002566	ARUP/1234/1/5	SELF	Swapan Chakraborty

Click Here To Close Message Window

PREVIOUS NEXT



LOGGED IN AS - 1SH00001 (Head of Office)

Idle Session Timer: 2661 seconds.

LOGOUT

- Home
- User Administration
- Update Head Of Office Details
- Certificate Generation
- Generation Of Sanction Order
- Certificate Processing
- Claim Processing
- Dsc Registration
- Cancel Sanction Order
- Create Mapping Of Beneficiary
- Update Mapping Of Beneficiary
- Head Of Account (Emp)
- Transfer Of Enrolled Beneficiary
- Claim Forwarding Letter
- Approve Basic Salary / Pension
- Report For User Administration
- Report For Enrolment
- Report Of Claims



List of Online Reimbursement Claim for Employees

DSC Validated

DSC Validation Confirmation

Search By Selecting Claim Type :

- OPD Treatment
- IPD Treatment
- Indoor and Indoor related OPD Treatment
- All

Sl No	Employee Name	Patient Name	Employee ID	Claim ID	Beneficiary ID	Relation with Applicant	Initiated By
1	ARUP MIDDE	ARUP MIDDE	1945000001	E20213002566	ARUP/1234/1/5	SELF	Swapan Chakraborty

Showing List of Claim Reimbursement Employee Which Are Forwarded By Approver

Click Here For Claim Reimbursement Process Employee

PREVIOUS NEXT

Filled Up Data of Selected Claim
Application ID E20213002566

i. Consultation Fees :

SI No	Doctor Name	Doctor Degree	Consultation Date	Amount Claimed(₹)	Amount Admissible(₹)	Justification
1	SAUMITRA DUTTA	DM	21/08/2021	250	250	No Deductions Made
2	SAUMITRA DUTTA	DM	21/08/2021	250	250	No Deductions Made
3	SAUMITRA DUTTA	DM	22/08/2021	250	250	No Deductions Made
4	SAUMITRA DUTTA	DM	22/08/2021	250	250	No Deductions Made
			Total(₹)	1000	1000	

Deduction Note

ii. Room Rent:

SI No	Room Type	From	To	Amount Claimed(₹)	Amount Admissible(₹)	Justification
1	GENERAL	21/08/2021	28/08/2021	4800	4500	Inadmissible Deducted.
			Total(₹)	4800	4500	

iii. Cost of Pathological and Radiological Investigations :

a. Coded Investigation Details :

SI No	Investigation Code	Investigation Name	Amount Claimed(₹)	Amount Admissible(₹)	Justification
1	02001005	JOINTS ASPIRATION	750	750	No Deductions Made
			Total(₹)	750	

b. Non-Coded Investigation Details :

SI No	Investigation Name	Amount Claimed(₹)	Amount Admissible(₹)	Justification
1	Blood Test	250	250	No Deductions Made
		Total(₹)	250	

PREVIOUS

NEXT

Amount Claimed (₹)

Amount Admissible (₹)

Justification

Filled Up Data of Selected Claim
Application ID E20213002566

	Amount Claimed (₹)	Amount Admissible (₹)	Justification
iv. Cost of Medicines :	2600	2600	No Deductions Made.
v. Cost of Consumables :	2000	2000	No Deductions made.
vi. Cost of Special Nursing :	105	105	No Deductions made.
vii. Cost of Miscellaneous Items:	315	315	No Deductions Made.

2. Indoor Related OPD Treatment :

a. Consultation fees :

Sl No	Doctor Name	Doctor Degree	Consultation Date	Amount Claimed(₹)	Amount Admissible(₹)	Justification
1	SAUMITRA DUTTA	DM	09/09/2021	250	250	No Deductions Made
Total(₹)				250	250	

b. Cost of Pathological and Radiological Investigations :

Sl No	Investigation Code	Investigation Name	Investigation Center Name	Investigation Date	Amount Claimed(₹)	Amount Admissible(₹)	Justification
1	02001005	JOINTS ASPIRATION	B.M. BIRLA HEART RESEARCH CENTRE	09/09/2021	750	750	No Deduction
Total(₹)					750	750	

	Amount Claimed (₹)	Amount Admissible (₹)	Justification
(c) Cost of Medicine :	2500	2500	No Deductions Made.
(d) Cost of Special Device/Implant :	250	250	No Deductions Made.
(e) Cost of Miscellaneous Items :	315	315	No Deductions Made.

Gross Claim (₹):

15885

Medical Advance (₹):

0

PREVIOUS

NEXT

Filled Up Data of Selected Claim
Application ID E20213002566

b. Cost of Pathological and Radiological Investigations :

Sl No	Investigation Code	Investigation Name	Investigation Center Name	Investigation Date	Amount Claimed(₹)	Amount Admissible(₹)	Justification
1	02001005	JOINTS ASPIRATION	B.M. BIRLA HEART RESEARCH CENTRE	09/09/2021	750	750	No Deduction
Total(₹)					750	750	

	Amount Claimed (₹)	Amount Admissible (₹)	Justification
(c) Cost of Medicine :	2500	2500	No Deductions Made.
(d) Cost of Special Device/Implant :	250	250	No Deductions Made.
(e) Cost of Miscellaneous Items :	315	315	No Deductions Made.

Gross Claim (₹): 15885 Medical Advance (₹): 0
Discount (₹):
Net Claim (Gross Claim - Medical Advance) (₹): 15885
Refund of Medical Advance (₹): 0
Insurance (₹):

Select the Level of Recipient User:
 Operator Recommending Authority
 Approver Head Of Office(HoO)

Select the Name of User:

Enter Remarks / Objection:

PREVIOUS

NEXT

Click Here To Approve

Approve

Raise Objection

Send

Exit

Click Here to Exit



LOGGED IN AS - 1SH00001 (Head of Office)

Idle Session Timer: seconds.

LOGOUT

- Home
- User Administration
- Update Head Of Office Details
- Certificate Generation
- Generation Of Sanction Order
- Certificate Processing
- Claim Processing
- Dsc Registration
- Cancel Sanction Order
- Create Mapping Of Beneficiary
- Update Mapping Of Beneficiary
- Head Of Account (Emp)
- Transfer Of Enrolled Beneficiary
- Claim Forwarding Letter
- Approve Basic Salary / Pension
- Report For User Administration

DSC Message Window

USB Token / Smartcard PIN code

Select a USB/SmartCard Device:

Card Holder	Manufacturer	Model	Slot
CRGCORPORA...	Aladdin Knowle...	eToken	2

Enter the PIN code to access your SmartCard:

.....

OK Cancel



Link for Employees

Select Device

Enter The PIN To Access Device

Claim Id-E2021300

- OPD Treatment
- OPD Treatment
- Indoor and Indoor related OPD Treatment
- All

Click on Verify Stamp digital Signature Button

Stamp Digital Signature

Click Here To Cancel

Click Here To Confirm

Confirmation Message Window

Click Here To Close Message Window

Valid DSC!! DSC Validation successfully Done

OK

PREVIOUS NEXT



LOGGED IN AS - 1SH00001 (Head of Office)

Idle Session Timer: 2675 seconds.

LOGOUT

- Home
- User Administration
- Update Head Of Office Details
- Certificate Generation ▶
- Generation Of Sanction Order ▶
- Certificate Processing ▶
- Claim Processing ▶
- Dsc Registration
- Cancel Sanction Order ▶
- Create Mapping Of Beneficiary ▶
- Update Mapping Of Beneficiary ▶
- Head Of Account (Emp) ▶
- Transfer Of Enrolled Beneficiary
- Claim Forwarding Letter
- Approve Basic Salary / Pension ▶
- Report For User Administration ▶
- Report For Enrolment ▶
- Report Of Claims ▶



List of Online Reimbursement Claim for Employees

DSC Validated

Search By Selecting Claim Type :

- OPD Treatment
- IPD Treatment
- Indoor and Indoor related OPD Treatment
- All

Claim Id-E20213002566 Approved and Sanction Order Placed Successfully. Now click on Verify Stamp digital Signature Button

Stamp Digital Signature

Click Here To Stamp Digital Signature

PREVIOUS

NEXT



WEST BENGAL HEALTH SCHEME PORTAL

FOR GOVERNMENT EMPLOYEES & PENSIONERS & BENEFICIARIES OF GIA COLLEGES & UNIVERSITIES OF WEST BENGAL

Finance Department
Government of West Bengal

LOGGED IN AS - 1SH00001 (Head of Office)

Idle Session Timer: 2649 seconds.

LOGOUT

- Home
- User Administration
- Update Head Of Office Details
- Certificate Generation
- Generation Of Sanction Order
- Certificate Processing
- Claim Processing
- Dsc Registration
- Cancel Sanction Order
- Create Mapping Of Beneficiary
- Update Mapping Of Beneficiary
- Head Of Account (Emp)
- Transfer Of Enrolled Beneficiary
- Claim Forwarding Letter
- Approve Basic Salary / Pension
- Report For User Administration
- Report For Enrolment
- Report Of Claims

Confirmation Message Window

List of Online Reimbursement Claim for

Success !

Sanction Order Digitally Signed successfully

OK

DSC Validated

OPD Treatment

IPD Treatment

Indoor and Indoor related OPD Treatment

All

Successfully. Now click on Verify Stamp digital Signature Button

Signature

Click Here To Close Message Window

PREVIOUS NEXT



WEST BENGAL HEALTH SCHEME PORTAL

FOR GOVERNMENT EMPLOYEES & PENSIONERS & BENEFICIARIES OF GIA COLLEGES & UNIVERSITIES OF WEST BENGAL

Finance Department
Government of West Bengal

Idle Session Timer: 2695 seconds.

LOGOUT

LOGGED IN AS - 1SH00001 (Head of Office)

Click Here For Generation Of Sanction Order Employee



- Home
- User Administration
- Update Head Of Office Details
- Certificate Generation
- Generation Of Sanction Order**
- Certificate Processing
- Claim Processing
- Dsc Registration
- Cancel Sanction Order
- Create Mapping Of Beneficiary
- Update Mapping Of Beneficiary
- Head Of Account (Emp)
- Transfer Of Enrolled Beneficiary
- Claim Forwarding Letter
- Approve Basic Salary / Pension
- Report For User Administration
- Report For Enrolment
- Report Of Claims

Employee

Pensioner

Welcome - MALAY KUMAR DE , CHIEF SECRETARY

Inbox of Claims (Employee / Pensioner)

No Claims Pending.

Inbox of Certificate Processing (Employee / Pensioner)

Sl No	Application Id	GPF/PPO No	Name	DDO Code
1	WB/PEN/01/000138969	2222222222	Tarak Mondal	TESSDA001
2	WB/PEN/01/000139040	PPO/ED/9856	Sourav Biswas	TESSDA001

Details of DDO Under This Head of Office

DDO Code	DDO Designation	Operator-Employee Mapping Pending	Operator-Pensioner Mapping Pending
TESSDA001	ASSISTANT SEC	<u>3</u>	<u>2</u>
TESEDI002	ASSISTANT SECRETARY	<u>1</u>	<u>1</u>

PREVIOUS

NEXT



LOGGED IN AS - 1SH00001 (Head of Office)

Idle Session Timer: 2694 seconds.

LOGOUT

PREVIOUS

NEXT

- Home
- User Administration
- Update Head Of Office Details
- Certificate Generation
- Generation Of Sanction Order
- Certificate Processing
- Claim Processing
- Dsc Registration
- Cancel Sanction Order
- Create Mapping Of Beneficiary
- Update Mapping Of Beneficiary
- Head Of Account (Emp)
- Transfer Of Enrolled Beneficiary
- Claim Forwarding Letter
- Approve Basic Salary / Pension
- Report For User Administration
- Report For Enrolment
- Report Of Claims



Generate Sanction Order for Reimbursement Claim for Employees

Select Option

Category of Sanction Order :

- Sanction Order without DSC
- Sanction Order with DSC

Click Here To
Generate Sanction
Order Report

OPD Treatment IPD Treatment Indoor and Indoor related OPD Treatment

Sl No	Claim ID	Claim Type	Patient Name	Patient Beneficiary ID	Relation with Applicant	Employee No. / HRMS ID	Generate
1	E20213002566	Indoor and Indoor related OPD Treatment	ARUP MIDDE	ARUP/1234/1/5	SELF	1945000001	
2	E20202000073	IPD Treatment	DEBABRATA MIDDE	ARUP/1234/3/5	FATHER	1945000001	
3	E20202000079	IPD Treatment	SOUMYA MIDDE	ARUP/1234/4/5	MINOR BROTHER	1945000001	
4	E20201000575	OPD Treatment	ARUP MIDDE	ARUP/1234/1/5	SELF	1945000001	
5	E20201000089	OPD Treatment	DIPIKA MIDDE	ARUP/1234/5/5	WIFE	1945000001	
6	E20202000027	IPD Treatment	SOUMYA MIDDE	ARUP/1234/4/5	MINOR BROTHER	1945000001	
7	E20203000120	Indoor and Indoor related OPD Treatment	DEBABRATA MIDDE	ARUP/1234/3/5	FATHER	1945000001	

Government of West Bengal
Office of the Chief Secretary
Personnel And Administrative Reforms Department
Office Of The Chief Secretary

No: 1SH000010002610(2)

Dated: 02/09/2021

To

1. The Principal Accountant General (A & E),
West Bengal, Treasury Building Kol - 1.
2. Treasury Officer, Testing
14 A, M G Road, Kolkata-700055

Claim ID: E20213002566

**Sub:- Sanction order for Reimbursement Claim under West Bengal Health Scheme
of Sri ARUP MIDDE , ACCOUNTS OFFICER**

Sl. No	Particulars	Details
1.	HRMS ID / Registration No. of employee	1945000001
2.	Name of Employee	Sri ARUP MIDDE
3.	Name of Patient	ARUP MIDDE
4.	Beneficiary ID of Patient	ARUP/1234/1/5
5.	Relationship with the Employee	SELF
6.	HOO Code of Head of Office	1SH00001
7.	Designation of Head of Office	Chief Secretary
8.	DDO Code of Drawing & Disbursing Officer	TESSDA001
9.	Designation of Drawing & Disbursing Officer	ASSISTANT SEC
10.	Type of Treatment	IPD Treatment
11.	Period of treatment	21/08/2021 to 30/08/2021
12.	Name of Hospital where treatment availed	B.M. BIRLA HEART RESEARCH CENTRE
13.	Type of Hospital	Empanelled
14.	Head of Account	HR-42-2408-01-001-00-001-12-00-V
15.	Amount Claimed	Rs. 15885 /-
16.	Amount Sanctioned in figure	Rs. 15585 /-
17.	Amount Sanctioned in figure words (Rupees)	Fifteen Thousand Five Hundred and Eighty Five Only
18.	Name of Claimant (In case of death) and Relation	Arup Midde , SELF

All officers concerned are requested to access WBHS portal using their Login for verification and necessary action.

TARAK
MOND
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Digitally Signed. Does not require any Ink Signature.

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