

**GOVERNMENT OF MIZORAM
HEALTH & FAMILY WELFARE DEPARTMENT
MIZORAM SECRETARIAT, MINECO, AIZAWL-796001**

Dated Aizawl, the 8th June, 2026

NOTIFICATION

No. B-35012/20/2025-HFW: In pursuance of the approval accorded by the 9th Core Committee Meeting of the Mizoram Universal Health Care Scheme (MUHCS) held on 21st May, 2026, and in supersession of all previously notified package rates to the extent of inconsistency, the competent authority hereby notifies the **Revised Package Rates under the Mizoram Universal Health Care Scheme (MUHCS)** for empanelled Public and Private Hospitals within Mizoram, as detailed in **Annexure-I to Annexure-IV** appended hereto.

The notified package rates shall apply to all empanelled hospitals under MUHCS with effect from the date of issuance of this Notification, except in cases where separate package rates have been approved under valid agreement executed with the Scheme, which shall continue to govern such cases until revised.

Enclosed : As Above

Sd/- K. LALRINZUALI
Commissioner & Secretary to the Govt. of Mizoram
Health & Family Welfare Department
Dated Aizawl, the 8th June, 2026

Memo No. B-35012/20/2025-HFW

Copy to:

1. Secretary to Governor, Mizoram
2. PS to Chief Minister, Mizoram
3. PS to Minister, Health & Family Welfare Department
4. PS to Speaker/Ministers/Leader of Opposition/ Deputy Speaker/Deputy Govt. Chief Whip
5. Sr. PPS to Chief Secretary, Govt. of Mizoram
6. PS to Commissioner & Secretary, Health & Family Welfare Dept.
7. All Administrative Departments
8. Principal Director, Health & Family Welfare
9. Chief Executive Officer, Mizoram State HealthCare Society, with a request to circulate the revised package rates to all empanelled public and private Hospitals within the States.
10. All Head of Departments
11. Director - DHS/ DHME/ ZMC&H/AYUSH/ Nursing
12. Mission Director, National Health Mission, Mizoram.
13. Web Manager, IT Section, Dte. of Health Services, Mizoram.
14. Guard file.


(H. LALHRUAITLUANGA)
Under Secretary to the Govt. of Mizoram
Health & Family Welfare Department

ANNEXURE- I

MEDICAL PACKAGE (BASE RATE) FOR EMPANELLED PRIVATE HOSPITALS

SN	Ward category	Base Rate (in ₹)
1	Routine	3500
2	HDU	5000
3	ICU	9600

ANNEXURE - II

S.No	Procedure Name	Public Hospital Rate (₹)	Private Hospital Base Rate (₹)
1	Normal Vaginal Delivery	DH and above : ₹2,000 (fixed) SDH,CHC, PHC : ₹1,200 (fixed)	Categories other than Govt. employee : ₹5,000 (fixed) Govt. employee : ₹18,000 (fixed)
2	Caesarean Section	₹10,000	₹24,500
3	Cholecystectomy (Open)	₹19,380	₹30,800
4	Cholecystectomy (Lap)	₹21,318	₹32,000
5	Appendicectomy (open)	₹11,000	₹27,500
6	Appendicectomy (lap)	₹13,500	₹34,500
7	Tonsillectomy	₹7,000	₹ 18,000

- Incentive gradation will be applicable in both public and private hospital except for Normal Vaginal Delivery.

ANNEXURE III

HIGH END MEDICINE (ADD -ON):

S. No	MEDICINE	Rate (in Rs.)
1	Meropenem (1gm)	₹450/vial
2	Meropenem (500mg)	₹400/vial
3	Albumin	₹5500 per bot. Max 3 bottle per admission. Medical Superintendent approval to be sought beyond 3 bottle
4	Piperacillin + Tazobactam (4.5 gm)	₹270/vial
5	Methyl Prednisolone 500 mg	₹500/vial
6	Methyl Prednisolone 1 gm	₹800/vial
7	Heparin	₹300/vial
8	Immunoglobulin IV	₹10000/bottle
9	Imipenem	₹800/vial

Annexure - IV

DAY CARE PACKAGE (SURGICAL & MEDICAL):

ENT :

S.No	NAME OF OPERATION/SURGERY/PROCEDURE	RATE IN RS	Remarks
1.	Lymph node Excision and biopsy	2000	Reserved for Public Hospital
2.	Neck abscess (Incision and drainage under GA)	4000	
3.	Fb esophagus under GA	3000	
4.	Antral Washout B/L	2500	
5.	Tru-Cut Biopsy	2000	
6.	Flap Division (pedicled flap)	3000	

OBSTETRICS & GYNAECOLOGY:

S.No	NAME OF OPERATION/SURGERY/PROCEDURE	RATE IN RS	Remarks
1	LEEP (loop electrosurgical excision procedure)	2000	Reserved for Public Hospital

SURGERY :

S.No	NAME OF OPERATION/SURGERY/PROCEDURE	RATE IN RS	Remarks
1	Lymph node Excision Biopsy (SHORT G.A)	3500	Reserved for Public Hospital
2	Fistula in Ano Surgery (SHORT G.A)	4000	

DERMATOLOGY:

S.No	NAME OF OPERATION/SURGERY/PROCEDURE	RATE IN RS	Remarks
1	Pemphigus Vulgaris (Pulse therapy / Conservative management)	3000	Reserved for Public Hospital
2	Psoriasis (Pulse therapy / Conservative management)	2500	
3	Discoid Lupus Erythematosus (Pulse therapy / Conservative management)	2500	

ORTHOPAEDICS and PMR :

S.No	NAME OF OPERATION/SURGERY/PROCEDURE	RATE IN RS	Remarks
1	DEBRIDEMENT AND REPAIR OF TENDONS AND MUSCLES	15,000	Reserved for Public Hospital
2	PHYSIOTHERAPY (one course ie, 10 sitting per site per year)	1000	