

No.D.12015/1/2025-FEA
GOVERNMENT OF MIZORAM
FINANCE DEPARTMENT
(Economic Affairs)

MINECO, Aizawl
May 05, 2026

OFFICE MEMORANDUM

Subject: Inclusion of GIA-funded State-Owned Societies, Boards and Other GIA-funded State Organizations and State funded Co-terminus Employees, Work-charged Employees, Contract Employees and Provisional Employees to the Mizoram Universal Healthcare Scheme 2.0 (MUHCS 2.0) – reg.

Whereas Finance Department had issued Notifications vide even no. dated 28/03/2025, 25/04/2025 and 04/06/2025 regarding the Rates of contribution, Entitlements on Accommodation, Mode of Travel and Ceiling on Coverage per family per year for employees of GIA-funded State-Owned Societies, Boards and Other GIA-funded State Organizations, State funded Co-terminus Employees, Work-charged Employees, Contract Employees and Provisional Employees respectively.

It is hereby clarified that, as per the decision of MUHCS Core Committee meeting held on 28.04.2026, the entitlements and coverage as mentioned in the said Notifications remain the same. However, these Notifications shall stand modified to the extent as notified as under:

1. All the Employees serving under the Government of Mizoram who fall under the above categories shall **compulsorily subscribe to MUHCS 2.0** and shall not be eligible for enrolment as General Beneficiary.
2. **Family Declaration** shall be made afresh by all the aforementioned Employees as per the form enclosed herewith at Annexure-I and only the dependent family members as defined in CS(MA) Rules, 1944 (amended from time to time) should be included in the family declaration.
3. New employees in these categories who are recruited after this Office Memorandum is issued may join the MUHCS 2.0 from the month of joining the service by paying the applicable amount from that month as prescribed in the earlier Notifications.
4. The deduction of the contribution shall be remitted to the Heads of Accounts as prescribed in the earlier Notifications vide even no. dated 22.04.2025, 25.04.2025 and 09.06.2025 in respect of Provisional Employees, Work-charged and Contract Employees, and GIA-funded State-Owned Societies, Boards and Other GIA-funded State Organizations and State funded Co-terminus Employees respectively by means of Challan by the Controlling Officer through the concerned Treasury Officer:

5. The Treasury Officer shall submit the remittance challans attaching corresponding schedules to Finance Department (EA) and the details of family to Mizoram State Health Care Society (MSHCS).
6. All claims shall be checked by the Mizoram State Healthcare Society (MSCHS) in line with this O.M and with the General Guidelines issued by Health & Family Welfare Department.

Sd/- RAMCHUANA

Secretary to the Govt. of Mizoram,
Finance Department

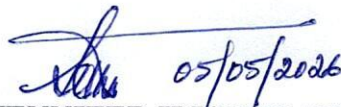
Memo No.D.12015/1/2025-FEA

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Dated Aizawl, the 05th May, 2026

Copy to:

- 1) Secretary to Governor, Government of Mizoram.
- 2) PS to Hon'ble Chief Minister, Government of Mizoram.
- 3) PS to Speaker/Dy. Speaker/Ministers/Ministers of State, Government of Mizoram.
- 4) Sr. PPS to Chief Secretary, Government of Mizoram.
- 5) Sr. PS to Finance Commissioner, Government of Mizoram.
- 6) All Administrative Departments, Government of Mizoram.
- 7) All Heads of Departments, Government of Mizoram.
- 8) CEO, Mizoram State Health Care Society (MSHCS) for information and necessary action.
- 9) All Treasury Officers with a request to ensure that the contribution is paid by the respective employees at the time of passing of salary bill.
- 10) Regional Manager, SBI Regional Business Office with a request to circulate to all branches of SBI.
- 11) Website Manager.
- 12) Guard File.



(JENNIFER H.L DUHAWMI)

Additional Secretary to the Govt. of Mizoram,
Finance Department (EA)

DETAILS OF FAMILY
{See Section – 4(I) of CS(MA) Rules, 1944}
(To be used in MUHCS 2.0)

Name of Employee : _____ Name of Deptt. : _____

Whether GIA/Work-charged/Contract/Co-terminus/PE : _____

Designation : _____ Date of Appointment : _____

Employee No.(as generated by IFMIS, if available)/Office I.D. No. : _____

Date of Birth : _____

Pay Matrix Level : _____

Lump sum contribution (wherever applicable) : _____

The details of my family members as on __/__/____ (dd/mm/yyyy) is as below:-

(Employee details to be filled in Sl. No. 1 and Relationship may be written as SELF)

Sl. No.	Names of the family members	Date of Birth	Relationship with the Govt. Servant	Aadhaar Card No.	If Aadhaar is not available, other document clearly showing the relationship
1	2	3	4	5	6
1					
2					
3					
4					
....					

Date.....

Signature of the Employee
Mobile No.: _____

DECLARATION OF THE CONTROLLING AUTHORITY

After careful checking of the documents submitted by the _____ Employee. I satisfy myself that the above _____ (number of the members) persons are truly the family members as per the CS(MA) Rules, 1944 of _____ for the purpose of medical treatments under MUHCS.

Date.....

Signature of the Controlling Officer
(with seal)

List of eligible family members:

Sl. no.	Relationship with the employee	Documents ¹ to be enclosed along with the declaration
1	Spouse	Attested copy of Certificate of Marriage issued by concerned Registrar of Marriage or EPIC/ADHAAR of the employee or his/her spouse that shows their relationship.
2	Parents/Stepmother	1) Attested copy of EPIC/ID/ADHAAR of the employee or of the parents/stepmother that shows the relationship between the parents/stepmother and the employee. 2) In case of Stepmother, Marriage Certificate of the parents is to be submitted.
3	Parents-in-law (for female employees only)	Attested copy of EPIC/ID/ADHAAR that shows their relationship with the husband of employee supported by the option exercised by the employee that she chose her parents-in-law over her natural parents to be included in the family members.
4	Children/Stepchildren (son/daughter) below 25 years of age	Attested copy of Birth Certificate/ID cards showing the relationship with the Govt. servant directly or indirectly.
5	Minor brother below 18 years of age	Attested copy of Birth Certificate.
6	Dependent unmarried daughter/ sister above 25 years of age	Attested copy of – 1) ID cards showing the relationship directly or indirectly. 2) Non-marriage Certificate/ Testimonial issued by concerned Registrar of Marriages. 3) Income certificate to show the dependency.
7	Dependent divorced or widowed daughter/ sister	Attested copy of – 1) ID cards showing the relationship directly or indirectly. 2) Divorced Certificate/ Testimonial issued by concerned Registrar of Marriages. 3) Income certificate to show the dependency.
8	Adopted children/children taken as wards	Attested copy of order of adoption or other legal documents issued by District Magistrate/District Court.
9	Disabled son/brother	Attested copy of – 1) ID cards showing the relationship directly or indirectly. 2) Permanent disability certificate issued by Social Welfare Department.

¹**Note:** Documents can be authenticated by the Controlling Officer as follows –

- (i) EPIC – by scanning the bar code on the ID or by searching the EPIC No. from the voter's service portal <https://electoralsearch.eci.gov.in/>
- (ii) Aadhaar – by scanning the QR code on the Aadhaar.