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W.P.No.9420 of 2024

IN THE HIGH COURT OF JUDICATURE AT MADRAS

DATED : 07.11.2025

CORAM

THE HONOURABLE MR.JUSTICE M.DHANDAPANI

W.P.No.9420 of 2024

Shanmugam

.. Petitioner

Vs.

1. The Principal Secretary to Government,
Health and Family Welfare,
State of Tamil Nadu,
Secretariat,
Chennai - 600 009.
2. The Plan Director,
Tamil Nadu Health Plan,
Medical and Village Welfare Work Department,
Directorate, Teynampet,
Chennai - 600 006.
3. The District Collector,
Salem District,
Salem.
4. The Joint Director,
Welfare Department,
Salem District,
Salem.



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5. The Administrative Officer,
Manipal Hospitals,
Salem, Salem District.

.. Respondents

Prayer: Writ Petition filed under Article 226 of the Constitution of India to issue a Writ of Mandamus directing the respondents to consider the petitioner's representation dated 08.05.2023 and reimburse the medical expenses of Rs.3,37,939/- to the petitioner incurred for the treatment of the petitioner.

For Petitioner : Mr. V. Elangovan

For Respondents 1 to 4 : Mr. E. Sundaram
Government Advocate

ORDER

This Writ Petition has been filed to issue a Writ of Mandamus directing the respondents to consider the petitioner's representation dated 08.05.2023 and reimburse the medical expenses of Rs.3,37,939/- to the petitioner incurred for his the treatment.

2. The learned counsel appearing for the petitioner submitted that the petitioner has two daughters and a son. They are all got married. The daughters are residing separately with their family. The petitioner and his



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wife are residing with his son and he is taking care of them including their medical assistance and the petitioner had joined in the Chief Minister's Comprehensive Health Insurance and registered the same in the name of his wife Tmt.Sigamani with ID No.0133080530603290005919. During April, 2023, as the petitioner fell ill and felt chest pain, he was admitted in Surya Sugalaya Hospital at Salem and diagnosed with coronary artery disease. Therefore, for further treatment, he was shifted to Manipal Hospital at Salem, the fifth respondent herein. On 20.04.2023, he was stenting with left main LAD and LCX and after treatment, he was discharged on 22.04.2023. He spent a sum of Rs.3,37,939/- for the said treatment and apart from that, he spent a sum of Rs.50,000/- for medicine and other miscellaneous expenses. Therefore, the petitioner made a representation on 08.05.2023 to the respondents. Since no order was passed on the representation by the respondent concerned, the petitioner has approached this Court.

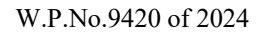
3. The learned Government Advocate appearing for the respondents 1 to 4, by filing counter affidavits, submitted that after receipt of the application from the petitioner, the Joint Director of Health Services, Salem conducted an enquiry and submitted a report on 23.07.2024. According to the report, the statement received from the District Project Officer that the



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patient's relatives did not approach the Insurance Scheme Liaison Officer posted at Manipal Hospital, Salem, until after the treatment to the petitioner was completed and discharged from the hospital. There was no emergency need with the Insurance Co-ordinator for availing treatment under the scheme. Further, the petitioner's relatives have not submitted the required documents to avail the treatment under the Chief Minister's Comprehensive Health Insurance Scheme and the petitioner also signed the declaration in the estimate form provided by the hospital on 20.04.2023 accepting to get the treatment as a private patient.

4. It is also further submitted by the learned Government Advocate that the Chief Minister's Comprehensive Health Insurance Scheme is a cashless scheme under which pre-authorisation request for approval of processing with treatment from the hospital is essential and payment for claims raised towards treatment given to the patient as per the package cost is made only to the hospital. As per the norms of the said scheme, the beneficiary can avail cashless treatment for approved procedures in empanelled hospitals under the scheme and reimbursement of treatment expenses is not permissible. The scheme offers 1,513 procedures which include 52 important diagnostics procedures, 11 follow up procedures and 8



High end procedures in 1822 empanelled hospitals consisting 853 Government Hospital and 969 private hospitals.

5. It is also submitted by the learned Government Advocate that the Chief Minister's Comprehensive Health Insurance Scheme was formulated by the Government of Tamil Nadu only to enable the poor and needy to get best medical assistance without incurring any expenses and not for the hospital to enrich out of it. The second respondent has taken note of the cashless treatment based on the monitoring system envisaged in the scheme, terms and conditions and memorandum of undertaking entered by the hospitals. However, the petitioner has opted to undergo treatment by cash mode at the time of admission in the admission form and now requesting for reimbursement after discharged from the hospital which is not permissible as per the scheme norms. Therefore, he prayed for dismissal of this Writ Petition.

6. Heard the learned counsel appearing for the petitioner and the learned Government Advocate appearing for the respondents 1 to 4.



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7. Considering the submissions made by the learned counsel appearing for the petitioner and the learned Government Advocate, this Court finds that admittedly, the petitioner was admitted in Surya Sugelaya Hospital at Salem and diagnosed with coronary artery disease and for further treatment, he was shifted to Manipal Hospital at Salem, the fifth respondent herein. On 20.04.2023, he was stenting with left main LAD and LCX and after treatment, he was discharged on 22.04.2023. As per the Chief Minister's Comprehensive Health Insurance Scheme, which is a cashless scheme, pre-authorisation request for approval of processing with treatment from the hospital is essential and payment for claims raised towards treatment given to the patient as per the package cost is made only to the hospital. The beneficiary can avail cashless treatment for approved procedures in empanelled hospitals under the scheme and reimbursement of treatment expenses is not permissible. At the time of admission, the relatives of the petitioner did not approach the Insurance Scheme Liaison Officer posted at Manipal Hospital, Salem and submit the required documents as per the scheme. If the petitioner wanted to undergo treatment under the Chief Minister's Comprehensive Health Insurance Scheme, he should have approached the Liaison Officer before taking treatment but he has not done so. Further, the petitioner has also opted to undergo treatment by cash mode at the time of admission. In the admission



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form and declaration in the estimate form provided by the hospital on 20.04.2023, the petitioner signed accepting to get the treatment as a private patient and now requesting for reimbursement after discharge from the hospital, which is not permissible as per the norms of the scheme. Therefore, this Writ Petition stands dismissed. No costs.

08.11.2025

SRM

Index :Yes/No
Speaking/Non-speaking order
Internet :Yes
Neutral Citation :Yes/No

To

1. The Principal Secretary to Government,
Health and Family Welfare,
Secretariat, Chennai - 600 009.
2. The Plan Director,
Tamil Nadu Health Plan,
Medical and Village Welfare Work Department,
Directorate, Teynampet, Chennai - 600 006.
3. The District Collector,
Salem District, Salem.
4. The Joint Director,
Welfare Department,
Salem District, Salem.

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M.DHANDAPANI,J.

SRM

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