



OFFICE OF THE CHIEF EXECUTIVE OFFICER

MIZORAM STATE HEALTHCARE SOCIETY

DINTHAR, AIZAWL - 796009, MIZORAM

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No: D.12019/22/2026-MSHCS/MUHCS

Dated: 30th January, 2026

CIRCULAR

In pursuance of the decision made by 4th MUHCS Core Committee meeting under the chairmanship of Hon'ble Minister, H&FW etc., the Resident Commissioner/Controlling Officer of Mizoram House shall issue Provisional Authorization letter to employees of Mizoram House within their jurisdiction for seamless utilization of Mizoram Universal HealthCare Scheme in empanelled network of hospitals.

Copy of Provisional Authorization letter duly signed by the Resident Commissioner/Controlling Officer must be forwarded to the Chief Executive Officer, Mizoram State Health Care Society for further approval.

Enclosed: Format of Provisional Authorization letter

Sd/- Dr. LALHRIATZUALI RALTE, IAS

Chief Executive Officer

Mizoram State Health Care Society

Aizawl, Mizoram

Copy to :

1. PS to Hon'ble Minister, H&FW etc. & Chairman, MUHCS Core Committee
2. PS to Principal Secretary, General Administration Department
3. Sr. PA to Secretary, H&FW Department
4. Principal Director, H&FW Department
5. Director of Hospital & Medical Education, H&FW Department
6. Director of Health Services, H&FW Department
7. Under Secretary to the Govt. of Mizoram, General Administration Department with a request to inform all RCs/DRCs of Mizoram House
8. Under Secretary (EA) to the Govt. of Mizoram, Finance Department
9. Under Secretary (G) to the Govt. of Mizoram, H&FW Department
10. Website Information Manager, MSHCS for uploading on the website
11. Guard file

(Dr. LALHRIATZUALI RALTE, IAS)

Chief Executive Officer

Mizoram State Health Care Society

Aizawl, Mizoram

MIZORAM UNIVERSAL HEALTHCARE SCHEME (MUHCS)



Provision Authorization Letter for Treatment under MUHCS
(to be submitted to Mizoram State Health Care Society)

For Employees working in Mizoram House with Dependant Family Members

Details of Govt. Servant

Name of Govt. Servant :

Designation :

Name/City of Mizoram House :

Employee Unique ID :

Pay Level :

Mobile No. :

Details of Patient

Name of Patient :

Age :

Sex :

Relation to Govt. Servant :

Aadhaar No. :

Other Details

Provisional Diagnosis :

Name of Hospital :

Authorised Signatory