Dear Shri Patil ji,

This is in reference to the matter raised by you on cochlear implantation under Rashtriya Bal Swasthaya Karyakram in the State of Karnataka, on 12th September, 2018.

I have got the matter examined in my Ministry and it may be mentioned that cochlear implantation is already part of the overall comprehensive approach consisting of early identification and management of childhood deafness and not a stand-alone process.

The comprehensive approach includes: a) New-born screening for hearing impairment with priority for SNCU admitted children; b) Setting up of diagnostic and evaluation facilities with appropriate screening equipment as per guidelines (Resource Manual for DEC Equipment); c) Provision of hearing aids and d) Provision of speech therapy at District Early Intervention Centers, RBSK.

Under RBSK, cochlear implant surgery is only for children below 2 years of age, provided the child has undergone adequate trial with hearing aid amplification with no significant improvement. Research shows the importance of early cochlear implantation in preverbal children with deafness, as they benefit the most, provided they continue to be supported during the post-operative period also, as per the guidelines. Further States are to form a pre-authorization committee of technical experts from the public sector to authorize surgical intervention under RBSK, as per RBSK Guidelines (Procedure and Model costing-RBSK).

As per the guidelines, the child must also get the required post-operative support including speech therapy, support for timely supply and replenishments of batteries and other post-operative/fitting related services including the device maintenance for next two years at least and at no extra cost to the families. All these components need to be factored and included in the cost. State also needs to develop guidelines for procurement of implants and may consider following the established process as under Assistance to Disabled Persons for purchase/fitting of aids/appliances scheme (ADIPS), Ministry of Social Justice and Empowerment.
Further, I advise that State should also take advantage of the nationally available ADIP scheme as per guidelines of Ministry of Social Justice and Empowerment and supplement it with resources under RBSK as per the RBSK Guidelines.

With regards,

Yours sincerely

(Jagat Prakash Nadda)

Shri Shivanand Patil
Hon'ble Minister, Health and Family Welfare
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