

Office of the West Bengal Clinical Establishment Regulatory Commission

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**Case Reference: INT/NAD/2023/036**

Mr. Mrityunjoy Mukherjee. .... **Complainant**

vs

Apollo Multispeciality Hospital..... **Respondent/ Respondents**

**ORDER SHEET**

Office Note	Order No.	Date	Order
	1.	15/03/2023	<p>The complaint would relate to billing.</p> <p>The facts would reveal, the complainant visited the CE for Hysterectomy of his wife Mrs Mithu Mukherjee aged about 63 years. Dr. Saikat Gupta, concerned Onco Surgeon advised admission for surgery.</p> <p>According to the complainant, Dr. Gupta gave an estimate of Rs. 5,00,000/- to 5,50,000/- lakhs. Since the complainant had insurance to the tune of Rs. 15,00,000/- he did not verify the cost component from the insurance desk.</p> <p>The surgery was done. The patient was discharged after treatment. The CE billed a sum of Rs. 6,28,709/-. It</p>

was submitted to TPA for sanction. TPA sanctioned Rs. 4,64,664/- leaving a balance sum of Rs. 1,64,045/- payable by the complainant.

The TPA also asked the complainant to pay for the consumable. The complainant did not raise any issue on that count.

Honouring the rejection memo the CE discounted the bill to the extent of Rs. 39,341/- that would take care of the issues pointed out by the TPA save and except the doctor's fees amounting to Rs. 1,20,000/-.

The dispute would thus centre around doctor's fees to the extent of Rs. 1,20,000/-.

According to the complainant, he already approached the insurance people. According to TPA, since the AMH package would deserve only one surgeon fee the additional sum of Rs. 1,20,000/- on account of doctor's fees was not payable under the policy.

Dr. Vatia, representing the CE, would contend, the surgery was done in a phased manner and the CE billed



accordingly.

Ms. Ghosh, also representing CE, would contend, this was a dispute between the insurer and the insured. CE billed according to the treatment given. There is no scope for any dispute at their end.

We have heard the parties in detail. This issue could be effectively gone into in case the dispute is referred to Ombudsman Insurance.

Mr. Mukherjee is granted liberty to approach Ombudsman Insurance within a period of fortnight from date with copy to the CE.

Ms. Ghosh in her usual fairness, in deference to the desire of the Commission, would agree to keep the said sum of Rs. 1,20,000/- in a suitable interest bearing fixed deposit with their banker Axis Bank so that money could be secured.

Such deposit would be subject to the result of the Dispute Redressal Mechanism, if availed by the



complainant before the Ombudsman Insurance.

CE is directed to share a copy of the fixed deposit receipt with Mr. Mukherjee for his perusal. CE must complete the process of fixed deposit within a week from date.

In case the complainant fails to raise any dispute before the Ombudsman Insurance within the time stipulated the CE would be entitled to withdraw the fixed deposit.

In case dispute is referred and decided, the parties would abide by the result of the said Redressal Mechanism.

Ms. Ghosh also offers all necessary assistance that Mr. Mukherjee would be required before the said authority.

The complaint is disposed of accordingly.

Sd/-

The Hon'ble Chairperson



			Sd/- Prof. (Dr.) Sukumar Mukherjee – Member
			Sd/- Prof. (Dr.) Makhan Lal Saha – Member
			Sd/- Dr. Maitrayee Banerjee – Member
			Sd/- Sri. Sutirtha Bhattacharya, IAS (Retd)- Member
			Sd/- Sri S. K. Thade, IAS (Retd) – Member
			Sd/- Smt. Damayanti Sen, IPS-Member
			Sd/- Smt Madhabi Das – Member

*Authenticated*  
*[Signature]*

Secretary  
West Bengal Clinical Establishment  
Regulatory Commission

*[Handwritten mark]*