

Attached Table of Article 3

Classes	Items of Assistive Devices	Max. subsidy (NTD)	Min. use years	Supplementary regulations
Personal assisting tool	Chest percussion device	15,000	3	The subsidy is only available for those who require self-care at home.
	Mucus suction machine (manual)	5,000	3	
	Electric mucus suction machine (DC/AC)	10,000	3	
	Nebulizers (devices for assisting a person to inhale in the form of vapour, gas, liquid spray or fine dust)	5,000	3	
	Oxygen units, oxygen concentrator	10,000	5	Oxygen tanks and oxygen cylinders are mutually exclusive alternatives to apply for subsidies.
	Oxygen tanks for medical use	10,000	5	
	Oxygen cylinders for medical use	6,000	5	
	Respirators	10,000	5	
	Compression garments	30,000	0.5	Applicable only to burns, skin lesions, skin reconstruction or circulatory system disorders that require pressure treatment.
	Silicone sheets	8,000	0.5	Certificate of diagnosis must be issued by a plastic surgeon or physiatrist.
	Fluid wheelchair cushions, air wheelchair cushions (custom contoured seat cushions or special materials seat cushions)	10,000	1	<ol style="list-style-type: none"> 1. Certificate of diagnosis must be issued by a physiatrist. 2. The relevant therapist must issue the evaluation report and must contain the specifications and functions.
	Fluid wheelchair cushions, air wheelchair cushions (custom contoured seat cushions or special materials seat cushions)	12,000	3	<ol style="list-style-type: none"> 1. Certificate of Diagnosis must indicate that the person's limbs are paralyzed and cannot turn over and sit up on his or her own, or that there are pressure ulcers (also known as pressure sores or bedsores) primarily caused by prolonged pressure on the skin. 2. The evaluation report must be issued by the relevant therapist. 3. For home use only.

	Standing frames	15,000	5	
Orthotics and Prosthetics	Partial hand prostheses (cosmetic prosthetic hand)	10,000	2	<ol style="list-style-type: none"> 1. Certificate of diagnosis must be issued by a physiatrist or orthopedist. The part to be made must be indicated on the certificate. 2. The subsidy application shall be made in accordance with the provisions of the National Health Insurance Act and shall be renewed only when the item has reached the minimum useful life as specified in this table and is necessary to make a new one. 3. The subsidy items and the minimum useful life are calculated separately for the left and right sides.
	Partial foot prostheses	10,000	2	
	Forearm or lower leg prosthesis (including wrist disarticulation, trans-radical, ankle disarticulation, SYME or trans-tibial prostheses)	40,000	5	
	Full arm or thigh prosthesis (including elbow disarticulation, trans-humeral, knee disarticulation, or trans-femoral prostheses)	60,000	5	
	Shoulder disarticulation or hip disarticulation prostheses) (including forequarter amputation, shoulder amputation, transpelvic, or hip amputation prostheses)	70,000	5	
	Ankle foot orthoses (including lower leg braces, splints, or solid ankle supports)	3,500	3	Left side or right side is counted as a single item with its own minimum use of years.
	Knee-ankle-foot orthoses (thigh braces or long leg braces)	8,000	3	
	Hip-knee-ankle-foot orthoses (long hip braces)	10,000	3	
	Hip or knee orthoses	6,000	3	
	Spinal orthoses (back brace, back orthoses)	10,000	3	
	Upper limb orthoses (including splints or solid wrist supports)	3,500	3	
	Orthopaedic footwears, orthopaedic shoes	8,000	2	<ol style="list-style-type: none"> 1. Certificate of diagnosis : should be issued by a rehabilitation physician or an orthopedic physician. 2. Needs assessment: should be issued by a related therapist who
Orthopaedic insoles,	4,000	3		

	shoes with ankle-foot orthoses			documents with information on the function and types of the assistive device. 3. Left side or right side is counted as a single item with its own minimum use of years
	Cast shoes	300	0.5	
	Cervical orthoses	3,500	2	
	Lumbar orthoses	1,200	3	
	Ocular prostheses	10,000	5	Left side or right side is counted as a single item with its own minimum use of years.
	Aural prostheses	12,000	1	1. Certificate of diagnosis: should be issued by a plastic surgeon or a rehabilitation physician. 2. Left side or right side is counted as a single item with its own minimum use of years.
	Nasal prostheses	10,000	1	Certificate of diagnosis: should be issued by a plastic surgeon or a rehabilitation physician.
	Prosthetic palate	20,000	1	Certificate of diagnosis: should be issued by a plastic surgeon or a rehabilitation physician.
Dentures	Dental crown	25,000	5	1. Extractions or crowns for cosmetic surgery, plastic surgery and orthodontics are not covered. 2. The subsidy amount is \$5,000 for each crown, \$40,000 for each removable denture, \$15,000 for each fixed denture, and \$40,000 for each dental implant.
	Removable denture	40,000	10	
	Fixed denture	50,000	5	
	Dental implant	60,000	Once a life	
	Skin-covering agents(cosmetics)	3,000	0.5	1. Certificate of diagnosis: should be issued by a plastic surgeon. 2. Limited to those with facial injuries, burning injuries, skin injuries which require facial reconstructjion.
	Transparent facial orthoses	12,000	0.5	Certificate of diagnosis must be issued by a plastic surgeon or physiatrist.
	Wigs for medical use	20,000	3	1. Certificate of diagnosis must be issued by a plastic surgeon. 2. For those who suffer from facial burns that cause scalp damage and cannot regrow hair.
	Other artificial facial fillers	20,000	1	Certificate of diagnosis: should be issued by a plastic surgeon or a

				rehabilitation physician who documents with information on the specifications of the prosthesis.
Assisting tool for personal care and protection	Commode chairs (including raised toilet seats , commode chairs, bath or shower chairs)	2,100	3	
	Portable shampoo basin	2,000	10	
	Portable bath-tubs	5,000	10	
	Head protection helmet (head gear)	1,000	2	
	Talking thermometer	4,000	5	
	Urine collection bags	3,000	1	
	Wearable assisting tools (including dressing bars, shoes, sock aids and other related items)	1,000	3	Certificate of diagnosis: should be issued by a rehabilitation physician.
Personal mobile assisting tool	Canes & Crutches	1,000	3	
	White canes	700	2	
	Walking frames, rollators, walking chairs & walking tables	1,500	3	
	Manual wheelchairs (mass production)	5,000	3	<ol style="list-style-type: none"> 1. Please note that you may only choose either a light-weight model or non light-weight model available on the market to apply for the subsidy. 2. No other wheelchair may be applied for a subsidy during the year of this application.
	Multi-function wheelchairs (should be available in the market with optional features)	25,000	2	<ol style="list-style-type: none"> 1. Certificate of diagnosis: should be issued by a rehabilitation physician. 2. Needs assessment: should be issued by a related therapist who documents with information on the function and types of the wheelchairs. 3. This item includes customized design and add-on devices with optional features such as lifting, reclining, and air tilting. 4. No other wheelchairs may be applied for a subsidy during the year of this application.
	Side support for	10,000	3	1. With the adjustable feature for

wheelchairs			<p>body shape.</p> <p>2. The subsidy amount is reduced by half for those who apply for one side support.</p>
Special wheelchairs back pads	10,000	3	<p>1. Certificate of diagnosis: should be issued by a rehabilitation physician.</p> <p>2. Needs assessment: should be issued by a related therapist.</p> <p>3. Requiring solid back supports should be documented with information on the specifications and functions of the back pads.</p>
Active wheelchairs	25,000	4	<p>1. The evaluation report should be issued by the relevant therapist.</p> <p>2. No other wheelchairs may be applied for a subsidy during the year of this application.</p> <p>3. The subsidy is for those with severe lower limb impairment who are highly mobile and able to push wheelchairs on their own.</p>
Electric-motor-driven wheelchairs with manual steering (Scooters)	25,000	5	<p>1. Powered wheelchairs and scooters are mutually exclusive alternatives to apply for subsidies.</p> <p>2. Certificate of diagnosis: should be issued by a rehabilitation physician.</p>
Electric wheelchair	50,000	5	<p>3. Needs assessment: should be issued by a related therapist and documented with safe driving abilities.</p> <p>4. Based on safety consideration, the scooters not for applicants who have visual impairments, intellectual function impairments, or multiple disabilities with mental disorders. The subsidization is for four-wheel scooters.</p>
Customized (Special made) motorcycle - Rear training wheel installation	60,000	6	<p>1. Customized motorcycle includes a new motorcycle and the rear training wheels or wheelchair accessible devices installed on the motorcycle.</p>
Customized (Special made) motorcycle - Wheelchair accessible device installation	80,000	6	<p>2. Please note that you may only choose to install either rear training wheels or wheelchair</p>

	Motorcycle modification - Rear training wheel installation	10,000	6	<p>accessible devices to apply for a subsidy.</p> <p>3. Applicants for customized motorcycles or motorcycle modifications should have a special driver's license and vehicle license.</p> <p>4. Please note that you may only choose either a customized motorcycle or motorcycle modification to apply for a subsidy.</p> <p>5. When you apply for a customized motorcycle subsidy again, you should attach the proof of scrapping for the original motorcycle.</p>	
	Motorcycle modification - Wheelchair accessible device installation	30,000	6		
	Motorcycle modification - Motorcycle reverse gear shift	8,000	3		
	Car adaptations - Throttle and brake linkage	15,000	6	<p>Documents should include:</p> <ol style="list-style-type: none"> Adapted car driver's license for persons with disabilities; and adapted car vehicle license ° Car adaptation invoice with information for each car adaptation by the manufacturers (with company stamp) ° 	
	Transfer assisting devices	Sliding board (including sliding mats, lifting belts, and turntables)	3,000	3	
		Devices for self-lifting from a bed	6,000	3	
		Push up bars	1,000	5	
		Transfer sling	4,000	3	
	Mobile or stationary hoists	40,000	10	<ol style="list-style-type: none"> Certificate of diagnosis: should be issued by a rehabilitation physician. Needs assessment: should be issued by a related therapist. 	
Assistive devices for daily	Assistive products for eating and drinking (including special cutleries, spoons, chopsticks, cups, plates, lower pressed edges and non-slip pads, etc.)	500	3	Certificate of diagnosis: should be issued by a rehabilitation physician.	

ly life				
Fur nit ure and alte rati ons for ho me s and oth er pre mis es	Beds with manual or powered adjustment (with optional features)	15,000	5	<ol style="list-style-type: none"> 1. Certificate of Diagnosis must indicate that the person is paralyzed and unable to turn over and sit up on his or her own. 2. The evaluation report must be issued by the relevant therapist. 3. For home use only. 4. Beds with manual adjustment and beds with powered adjustment are mutually exclusive alternatives to apply for subsidies.
	Doors (widening, folding doors, remove door threshold , and automatic doors)	6,000	10	<ol style="list-style-type: none"> 1. Needs assessment: should be issued by a home visiting therapist. 2. Applicants should prepare housing plan (labeled adapted locations), before and after repairs photographs, and a copy of house ownership certificate (for those non-owned houses, the application should include copies of lease contracts, houseownership certificate and the owner's agreement). Invoices or receipts should not only show total amount of expense, it should include details of the expense. 3. Fixed and portable ramps are mutually exclusive alternatives to apply for subsidies. 4. Those who apply for ramp construction subsidy, the construction is only allowed on self-owned land.
	Handrails or grab bars (including long handrails)	30,000	10	
	Faucets(Single handle types, single-valve type, or automatic types)	3,000	10	
	Fixed ramps	10,000	10	
	Non-slip surfaces	3,000	10	
	Kitchen improvements	20,000	10	
	Bathroom improvements	20,000	10	
	Non-fixed ramps	5,000	10	
	Lift table	6,000	5	
As sist ive De vic es for Co m mu	Voice Mobile	4,000	3	
	Braille (or vibrating) watches (or alarm clocks) for the visually impaired	3,000	5	
	Voice annunciator for visually impaired	300	3	
	Fax machine	4,000	3	<ol style="list-style-type: none"> 1. Applicants must be hearing or speech impaired. 2. Only one application per

nic ati on and Inf or ma tio n				household is eligible for this subsidy.
	Braille frame (Manual Braille writing equipment)	1,800	10	
	Braille typewriter	32,000	7	
	Digital audio recording and playing devices	2,500	5	
	Special glasses or magnifying glass for people with low vision	6,000	4	
	Image-enlarging video systems - portable	40,000	4	<ol style="list-style-type: none"> 1. Evaluation report must be issued by the visual related professionals 2. To apply for a braille display, you should first have basic PC accessories (e.g. PC, monitor, keyboard) 3. You may select either one of the following to apply for a subsidy: Braille display, video magnifier (desktop) or portable video magnifier. 4. If you apply for a braille display and a screen reader at the same time, it is considered the same item.
	Image-enlarging video systems - desktop	80,000	6	
	Braille displays	100,000	4	
	Screen reader	12,000	6	
	Video magnification software for the visually impaired	18,000	6	<ol style="list-style-type: none"> 1. You should first have basic PC accessories (e.g. PC , monitor, keyboard) 2. Evaluation report must be issued by the visual related professionals
	Keyboard frames (hole board)	1,000	4	<ol style="list-style-type: none"> 1. Certificate of diagnosis must be issued by a rehabilitation physician when applying for a Sip & Puff (or head) mouse, Eye Tracking Mouse, Special mouse-like or keyboard-like devices as computer interface. 2. Needs assessment: should be issued by a related therapist
	Sip & Puff (or head) mouse	15,000	4	
	Eye Tracking Mouse	100,000	4	
Special mouse-like or keyboard-like devices as computer interface	5,000	4		
Video conference	5,000	4		

systems			
Speech-generating devices (Speech output scanner)	15,000	4	
Communication boards or pens	10,000	4	<ol style="list-style-type: none"> 1. Certificate of diagnosis: should be issued by a rehabilitation or an otolaryngology physician. 2. Needs assessment: should be issued by a related therapist and indicated the person with speech function impairments or communication limitations.
Voice generators- Pneumatic artificial larynx	2,000	1	<ol style="list-style-type: none"> 1. Certificate of diagnosis: those shall have the certificate of diagnosis with total laryngectomy or severe respiratory dysfunction when applying for an-Electrolarynx.. 2. Pneumatic artificial larynx and Electrolarynx are mutually exclusive alternatives to apply for subsidies.
Voice generators- Electrolarynx	20,000	5	
Assistive products for telephoning	3,000	3	
Telephone amplifier	2,000	5	
Telephone signal indicators with flashing and vibration	2,000	5	
Hearing aids	15,000	3	<ol style="list-style-type: none"> 1. Certificate of diagnosis: should be issued by an otolaryngology physician. 2. Needs assessment: should be issued by an audiologist who documents the report (including hearing tests). 3. Persons with single ear hearing loss between 55dB-110dB are qualified for subsidization of only one hearing aids; Hearing loss is defined as the average of the hearing thresholds at 500Hz~4000Hz in air conduction hearing tests. 4. Left side or right side is counted as a single item with its own minimum use of years.
Assisted GPS	10,000	2	<ol style="list-style-type: none"> 1. Needs assessment: should be issued by a related therapist. 2. Applicants should be capable of

				going out independently, but they have dementia or mental retardation and are at risk of getting lost.
	Flashing fire alarms	2,000	5	Those shall be given based on the “household” as a unit.
	Door signal indicators with flashing	2,000	5	
	Indicators with vibration	2,000	5	
As sist ive pro duc ts for han dli ng obj ect s and dev ice s	Assistive products for controlling from a distance	15,000	4	1. Needs assessment: should be issued by a home visiting therapist. 2. Applicants should prepare housing plan (labeled adapted locations), before and after repairs photographs, and a copy of house ownership certificate (for those non-owned houses, the application should include copies of lease contracts, house ownership certificate and the owner’s agreement). Invoices or receipts should not only show total amount of expense, it should include details of the expense.
	Hand supports to permit manual activities	2,000	4	Including operating sticks.
	Devices with mouth control	2,000	2	
	Special devices for handwriting	800	1	
	Household accessories (including special door handles, cooking utensils, bottle and can openers, special switches, long-handled pliers, non-slip mats for diet-related devices and other related items)	800	3	Certificate of diagnosis must be issued by a physiatrist.
Ot her s	Cochlear implant	600,000	Once a life	1. Applicants must have the following conditions: (1) Got little improvement from wearing hearing aids and doing audiologic (hearing) rehabilitation for six months.

			<p>(2) History of sensorineural hearing loss were less than 5 years.</p> <p>2. Needs assessment: should be issued by a team which is composed of audiologists, speech therapists, social workers, psychotherapists, and experts and scholars of hearing functions impairments.</p> <p>3. According to “Implementation and management regulations of medical equipment with specific medical technology for inspection and examination purposes”, implant surgeries should only be performed at health care settings which are approved by municipality or county (city) competent authority where the application located.</p> <p>4. Certificate of diagnosis: should be issued by an otolaryngology physician.</p>
Notes :	<p>1. If the purchase price or lease cost is less than the subsidy amount specified in this table, the full purchase price or lease cost will be covered.</p> <p>2. For those who have been approved to receive subsidies for assisting tools, no other application shall be applied for the same item during the minimum useful life of this assisting tool.</p>		