Azadi Ka Amrit Mahotsav

DELHI JAL BOARD
GOVT. OF N.C.T. OF DELHI
OFFICE OF THE DEPUTY DIRECTOR
(LABOUR WELFARE)
VARUNALYA 'B' BUILDING, KAROL BAGH,
NEW DELHI-110005.

स्वच्छ भारत
एक कदम स्वच्छता की ओर

No.:F.1/DJB/DD (LW)/Medical/2025/D- 3018 **Dated:** 30/10/2025

ENDORSEMENT

Following Office Memorandum of Ministry of Health & Family Welfare, Directorate General of Central Government Health Scheme, Government of India is hereby endorsed for information and appropriate action by all the concerned from effective date of issue by the Ministry of Health & Family Welfare, Directorate General of Central Government Health Scheme, Government of India.

S. No.	Name of the Department	Office Memorandum No. & date	Brief Subject
1.	Ministry of Health & Family Welfare, Directorate General of Central Government Health Scheme, Government of India	office Memorandum F.No.5-16/CGHS (HQ)/HEC/2024 (Part-I) dated 03.10.2025, Annexure-I Part-A Tier-1 (X City) to Annexure -VI	**CGHS rates applicable for treatment at healthcare organization.**

This issues with the prior approval of Competent Authority.

Encl.: As above.

30/10/2025

(*Gopal Aggarwal*)
DEPUTY DIRECTOR (LW)

No.:F.1/DJB/DD (LW)/Medical/2025/D- 3018 **Dated:** 30/10/2025

All DDO's Through mail.

Copy for kind information please:-

1. Vice Chairman / Members of DJB.
2. Chief Executive Officer, DJB.
3. Member (A)/Member (F)/Member (WS)/Member (Dr.)/Addl.CEO /CVO.
4. Secretary DJB/ All CEs /SEs/ EEs.
5. All Director/Director (A&P)/ All Jt. Directors (Rev.)/All Jt. Dir. (F&A).
6. All Dy. Directors/MOIs/LO/ All ZRO's.
7. All AO's/All AAO's/ CSO/Dy. CSOs/SOs.
8. DD (PR) with the request to publish this order in Varun Patrika.
9. DD (IT) with the request to upload this order/Circular/Endorsement on the web-site of DJB.
10. All Unions & Association of retired employees.
11. Office Order Reg. / Standing Guard file.

30/10/2025

DEPUTY DIRECTOR (LW)

F.No.5-16/CGHS(HQ)/HEC/2024(PartI)
(Comp No. - 8365027)
भारत सरकार
स्वास्थ्य एवं परिवार कल्याण मंत्रालय
केंद्रीय सरकार स्वास्थ्य योजना महानिदेशालय

के. स. स्वा.यो. भवन, दिल्ली
दिनांक –03.10.2025

कार्यालय ज्ञापन/OFFICE MEMORANDUM

Subject: CGHS rates applicable for treatment at healthcare organisation

In reference to subject above, and in supersession of all previous memoranda on the subject, the CGHS rates package rates are hereby notified.

1. Implementation of Revised CGHS Rates

These rates will be effective from 13.10.2025 and shall apply to:

a) All healthcare services availed at CGHS-empanelled Healthcare Organisations (HCOs)

b) Medical Reimbursement Claims of individuals (in r/o Serving, Pensioners and other eligible categories of CGHS beneficiaries).

c) CGHS, cashless (credit) treatment shall be extended to Central Government pensioners and other specified categories of beneficiaries as per extant rules.

The revised rates as per **Annexure-I** are for the semiprivate ward entitlement. and are also available on the CGHS website: https://cghs.mohfw.gov.in.

In exceptional circumstances, where treatment has been availed from any non-empanelled private HCOs, reimbursement may be considered as per extant instructions, but the rate would be restricted to Non-NABH (National Accreditation Board for Hospital for Healthcare Providers) rates of the concerned city.

2. Structure of Differential Rates

Revised rates have been rationalised based on accreditation status, hospital type, city classification and ward entitlement:

a) Non-NABH and Non-NABL HCOs: 15% lower than NABH/NABL accredited HCOs. (NABL – National Accreditation Board for Testing and Calibration of Laboratories)

b) Rates for super speciality hospitals shall be 15% higher than those applicable to NABH-accredited hospitals for the corresponding Super specialities within the same city category.

c) HCO located in Y (Tier II) cities and Z (Tier III) cities rates shall be 10% and 20% respectively lower than those located in X (Tier I) Cities. Y (Tier II) rates also apply to the HCO located in North-East region and Union Territories of Jammu & Kashmir and Ladakh.

d) The new package rates mentioned in are for semi-private ward. For general ward there will be a decrease of 5% in the rates, and for the private ward entitlement, there will be an increase of 5% on the applicable admissible claim amount.

e) Rates for consultations, radiotherapy, investigations, day care procedures, and minor procedures not requiring admission shall remain uniform, irrespective of the ward entitlement.

f) For cancer surgeries, existing CGHS rules and rates continue. However, revised rates apply to chemotherapy, investigations and radiotherapy.

3. Supporting Guidelines and Definitions

Key definitions and guidelines are provided in **Annexures II–VII**, including:

a) CGHS Package Rate structure and inclusions.

b) Description of Ward Categories.

c) ICU and Nursing Care Charges.

d) Equipment Charges.

e) Admissible vs. Non-Admissible Items.

f) Definition and Criteria for Super Speciality Hospitals.

g) Relevant Office Memoranda issued by the Directorate General of CGHS.

4. Renewal of MoA with Empanelled Hospitals

a. All existing Memoranda of Agreement (MoAs) executed with private empanelled hospitals shall cease to be valid with effect from 13.10.2025 12 AM.
b. All Health Care Organisations (HCOs) are required to seek fresh empanelment through the revised Hospital Engagement Module.
c. The revised MoAs must be executed afresh within 90 days from the date of implementation of the revised rates.
d. However, in order to continue to avail the benefit of the revised rate, each HCO shall be required to submit an undertaking, on or before 13.10.2025, confirming its acceptance of the terms and conditions of the newly notified MoA.
e. In case, the HCO fails to submit the undertaking shall be deemed to be de-panelled.

This issues with the approval of the Competent Authority.

Digitally signed by
Dr Satheesh Y H
Date: 03-10-2025
12:25:06

(Dr. Satheesh Y. H.)
Director (CGHS)

Tel No. 011-26872280

Copy to:

1. All Ministries and Departments of the Government of India through the CGHS website
2. Addl. DDG(CGHS) with the directions to monitor the implementation in coordination with AD HQ.
3. Addl. Director, CGHS(HQ)/ Addl. Directors, CGHS of Cities / Zone with the directions to comply with the provision of instructions above
4. All CGHS Wellness Centres through the concerned AD, CGHS
5. All Pensioner Associations.
6. MCTC, CGHS with the directions to upload the document on CGHS Website (www.cghs.mohfw.gov.in).
7. All HCOs empanelled under CGHS through CGHS website.
8. Director, AIIMS as per list; JIPMER, Puducherry; PGIMER, Chandigarh; CNCI Kolkata & Tata Memorial Hospital, Mumbai
9. Medical Superintendent Safdarjung Hospital, Dr. RML Hospital, Delhi & Sucheta Kriplani Hospital, Delhi
10. CDAC, Noida with the request to Modify the CGHS Software as per the provisions contained above.
11. CEO & MD NHA with the request to kindly inform the Claim Processing Doctors regarding the referral process.
12. LACs/ ZACs through Addl. Directors, CGHS.
13. Sanctioning Authorities in CGHS.
14. CMO Hospital Cell, CGHS HQ.
15. CMO Hospital Empanelment Cell, CGHS

Copy of Information to:

1. PPS to the Minister for Health and Family Welfare
2. PPS to the Minister of State (H&FW), MoHFW
3. PPS to Secretary (H&FW), MoHFW
4. PSO/Senior PPS/PPS/PS to Secretary (Personnel), DoPT, MoPPG&P
5. PSO/Senior PPS/PPS/PS to Secretary (DARPG & DoPPW), MoPPG&P
6. PPS to AS & DG CGHS
7. PPS to JS (MoHFW), CGHS

(Dr. Satheesh Y. H.)
Director (CGHS)
Tel No. 011-26872280

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Annexure I

CGHS Rate List

Annexure 1 is divided into three parts, A for Tier 1, B for Tier 2, and C for Tier III cities

A) Rate list for Semiprivate ward for HCOs in X(Tier I)

List of X (Tier I) Cities

Hyderabad (UA)#	Delhi (UA)	Ahmedabad (UA)	Bengaluru (UA)
Mumbai (UA)	Pune (UA)	Chennai (UA)	Kolkata (UA)

*as per O.M. No.2/5/2017-E.II(B) dated 07.07.2017. #(UA) = Urban Agglomeration

**In case of any discrepancy, the most instructions of the Department of Expenditure shall prevail.

General Guidelines.

a) The package rates are for semi-private ward. If the beneficiary is entitled for general ward there will be a decrease of 5% in the rates; for private ward entitlement there will be an increase of 5%.

b) Rates for radiotherapy, investigations, day care procedures, and minor procedures not requiring admission shall remain uniform, irrespective of ward entitlement.

Method for Calculation and Application of CGHS Rates

CGHS Rates applicable to respective Ward entitlement:

The rates defined below are for a HCO located in Tier I city for Semiprivate Ward; for general ward there will be a decrease of 5% in the rates, and for the private ward entitlement, there will be an increase of 5% on the applicable admissible claim amount.

Let:

- **A =** Base CGHS Package Rate
- **F =** Final Rate Payable

Example Table:

Ward Entitlement	**Final Rate (F)**
General Ward	**F=A-5% of A**
Semi-Private Ward	**F=A**
Private Ward	**F=A+5% of A**

- The empanelled CGHS healthcare provider (HCO) shall apply the above formula at the time of billing based on the ward entitlement printed on the beneficiary's CGHS card.

a) Multiple Surgical Procedures in One Operation Theatre(OT) Session (i.e. procedure conducted on same date

S. No.	Scenario	Reimbursement Rule	Illustration (Symbolic)
1	Primary surgery* in a single OT session	100% of its package rate	Procedure A = ₹X → Reimbursed at X
2	Second surgery in the same session	50% of its package rate	Procedure B = ₹Y → Reimbursed at 50% of Y
3	Third & subsequent surgeries in same session	25% of each respective package rate	Procedure C = ₹Z → Reimbursed at 25%of Z

Example: (Symbolic) 3 Procedures performed in same OT session:

- Procedure A: ₹X
- Procedure B: ₹Y
- Procedure C: ₹Z

Total Reimbursement (T)= X + 50% of Y + 25% of Z

*Primary Surgery = Surgery with Highest Package Rate

b) Identical surgeries are performed at different anatomical sites

S. No.	Scenario	Reimbursement Rule	Illustration (Symbolic)
1	Identical surgeries at different anatomical sites (e.g., bilateral) during a single session	Second procedure at 50%	Procedure = ₹X each side → Total = X + 50% of X

Example (Symbolic):

- Procedure: Bilateral Knee Replacement
- Each side package rate = ₹X

Total Reimbursement= X + 50% of X

c) Any procedure within the package period of an earlier procedure (i.e procedure performed on a different date, but within same admission and within package period)

If a procedure is performed during the package period (typically upto 12days) of an earlier procedure.

CGHS Reimbursement Rule:

- The subsequent procedure performed within the package period shall be reimbursed at 75% of its applicable package rate.

Illustrative Example (Symbolic):

- Follow-up Procedure B = ₹X
- Performed within the 12-day package period of Procedure A

Reimbursement= 75% of X

Package Rates Definition

- Package rates envisage up to a maximum duration of indoor treatment as follows:
  - Up to 12 days for Specialized (Super Specialties) treatment
  - Up to 7 days for other Major Surgeries
  - Up to 3 days for/ Laparoscopic surgeries / elective Angioplasty / normal deliveries and
  - 1 day for day care / Minor (OPD) surgeries.

CGHS rates for Tier I (X City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1	CN001	Consultation OPD	350	350	350	Consultation
2	CN002	Consultation for Inpatients	350	350	350	Consultation
3	CN003	Consultation OPD – Super speciality/Psychiatry	700	700	700	Consultation
4	LB001	Urine Routine- pH, Specific Gravity, Sugar, Protein and Microscopy	85	100	100	Laboratory Investigation
5	LB002	Urine Microalbumin	207	243	243	Laboratory Investigation
6	LB003	Stool Routine and Microscopy	68	80	80	Laboratory Investigation
7	LB004	Stool for Occult Blood	85	100	100	Laboratory Investigation
8	LB005	Post Coital Smear Examination	340	400	400	Laboratory Investigation
9	LB006	Semen Analysis (Automated/Manual)	213	250	250	Laboratory Investigation
10	LB007	Haemoglobin (Hb)	43	50	50	Laboratory Investigation
11	LB008	Total Leucocytic Count (TLC)	43	50	50	Laboratory Investigation
12	LB009	Differential Leucocytic Count (DLC)	85	100	100	Laboratory Investigation
13	LB010	Erythrocyte Sedimentation Rate (ESR)	85	100	100	Laboratory Investigation
14	LB011	Total Red Cell count with MCV,MCH,MCHC,DRW	43	50	50	Laboratory Investigation
15	LB012	Complete Haemogram/CBC, Hb, RBC Count and Indices, TLC, DLC, Platelet, ESR, Peripheral Smear Examination)	255	300	300	Laboratory Investigation
16	LB013	Platelet Count	85	100	100	Laboratory Investigation
17	LB014	Reticulocyte Count	85	100	100	Laboratory Investigation
18	LB015	Absolute Eosinophil Count (AEC)	85	100	100	Laboratory Investigation
19	LB016	Packed Cell Volume (PCV)	43	50	50	Laboratory Investigation
20	LB017	Peripheral Smear Examination	85	100	100	Laboratory Investigation
21	LB018	Smear for Malaria/Filaria Parasite	85	100	100	Laboratory Investigation
22	LB019	Bleeding Time	43	50	50	Laboratory Investigation
23	LB020	Clotting Time	43	50	50	Laboratory Investigation
24	LB021	Osmotic Fragility Test	255	300	300	Laboratory Investigation

CGHS rates for Tier I (X City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
25	LB022	Bone Marrow Smear Examination	298	350	350	Laboratory Investigation
26	LB023	Bone Marrow Smear Examination with Iron Stain	680	800	800	Laboratory Investigation
27	LB024	Bone Marrow Smear Examination and Cytochemistry	10200	12000	12000	Laboratory Investigation
28	LB025	Activated Partial Thromboplastin Time (APTT)	247	290	290	Laboratory Investigation
29	LB026	Rapid Test for Malaria (Card Test)/QBC Malaria Test	85	100	100	Laboratory Investigation
30	LB027	Bleeding Disorder Panel- PT, APTT, Thrombin Time Fibrinogen, D-Dimer/ Fibrinogen Degradation Products (FDP)	680	800	800	Laboratory Investigation
31	LB028	Factor Assays-Factor VIII	1275	1500	1500	Laboratory Investigation
32	LB029	Factor Assays-Factor IX	1275	1500	1500	Laboratory Investigation
33	LB030	Platelet Function Tests	1075	1265	1265	Laboratory Investigation
34	LB031	Tests for Hypercoagulable States- Protein C, Protein S, Antithrombin	2873	3380	3380	Laboratory Investigation
35	LB032	Tests for Lupus Anticoagulant	1105	1300	1300	Laboratory Investigation
36	LB033	Tests for Antiphospholipid Antibody IgG, IgM (for Cardiolipin and B2 Glycoprotein 1)	850	1000	1000	Laboratory Investigation
37	LB034	Thalassemia Studies (Red Cell Indices and Hb HPLC)	850	1000	1000	Laboratory Investigation
38	LB035	Tests for Sickling / Hb HPLC)	850	1000	1000	Laboratory Investigation
39	LB036	Blood Group & Rh Type	77	90	90	Laboratory Investigation
40	LB037	Cross Match	170	200	200	Laboratory Investigation
41	LB038	Coomb’s Test - Direct	170	200	200	Laboratory Investigation
42	LB039	Coomb’s Test - Indirect	213	250	250	Laboratory Investigation
43	LB040	3 Cell Panel- Antibody Screening for Pregnant Female	893	1050	1050	Laboratory Investigation
44	LB041	11 Cells Panel for Antibody Identification	1942	2285	2285	Laboratory Investigation
45	LB042	Hepatitis B Surface Antigen (HBsAg)	255	300	300	Laboratory Investigation
46	LB043	Hepatitis C Virus (HCV)	425	500	500	Laboratory Investigation
47	LB044	Human Immunodeficiency Virus- HIV I and II	327	385	385	Laboratory Investigation
48	LB045	Venereal Disease Research Laboratory Test (VDRL)	85	100	100	Laboratory Investigation
49	LB046	Rh Antibody Titre	255	300	300	Laboratory Investigation

CGHS rates for Tier I (X City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
50	LB047	Platelet Concentrate Test	850	1000	1000	Laboratory Investigation
51	LB048	Routine - H & E	463	545	545	Laboratory Investigation
52	LB049	Special Stain	170	200	200	Laboratory Investigation
53	LB050	Histopathology Examination (HPE) - Frozen Section	1275	1500	1500	Laboratory Investigation
54	LB051	Histopathology Examination (HPE) - Paraffin Section	425	500	500	Laboratory Investigation
55	LB052	Pap Smear	340	400	400	Laboratory Investigation
56	LB053	Body Fluid for Malignant cells	298	350	350	Laboratory Investigation
57	LB054	Paroxysmal Nocturnal Haemoglobinuria (PNH) Panel- CD55, CD59	1275	1500	1500	Laboratory Investigation
58	LB055	Blood Glucose Random / Blood Glucose Fasting /Blood Glucose PP	34	40	40	Laboratory Investigation
59	LB056	24 Hrs Urine for Proteins, Sodium, Creatinine	255	300	300	Laboratory Investigation
60	LB057	Blood Urea Nitrogen (BUN) / Urea	85	100	100	Laboratory Investigation
61	LB058	Serum Creatinine	85	100	100	Laboratory Investigation
62	LB059	Urine Bile Pigment and Salt	60	70	70	Laboratory Investigation
63	LB060	Urine Urobilinogen	60	70	70	Laboratory Investigation
64	LB061	Urine Ketones	60	70	70	Laboratory Investigation
65	LB062	Urine Occult Blood	60	70	70	Laboratory Investigation
66	LB063	Urine Total Proteins	60	70	70	Laboratory Investigation
67	LB064	Rheumatoid Factor / Rh Factor Test	638	750	750	Laboratory Investigation
68	LB065	Bence Jones Protein	85	100	100	Laboratory Investigation
69	LB066	Serum Uric Acid	128	150	150	Laboratory Investigation
70	LB067	Serum Bilirubin total & direct	128	150	150	Laboratory Investigation
71	LB068	Serum Iron	213	250	250	Laboratory Investigation
72	LB069	C-Reactive Protein (CRP)	213	250	250	Laboratory Investigation
73	LB070	C-Reactive Protein (CRP) Quantitative	255	300	300	Laboratory Investigation
74	LB071	Body Fluid (CSF/Ascitic Fluid etc.) Sugar, Protein etc.	255	300	300	Laboratory Investigation
75	LB072	Albumin	43	50	50	Laboratory Investigation
76	LB073	Creatinine Clearance	170	200	200	Laboratory Investigation

CGHS rates for Tier I (X City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
77	LB074	Serum Cholesterol	128	150	150	Laboratory Investigation
78	LB075	Total Iron Binding Capacity (TIBC)	255	300	300	Laboratory Investigation
79	LB076	Glucose (Fasting & PP)	68	80	80	Laboratory Investigation
80	LB077	Serum Calcium –Total	128	150	150	Laboratory Investigation
81	LB078	Serum Calcium – Ionic	510	600	600	Laboratory Investigation
82	LB079	Serum Phosphorus	128	150	150	Laboratory Investigation
83	LB080	Total Protein Albumin/Globulin Ratio (A/G Ratio)	60	70	70	Laboratory Investigation
84	LB081	Immunoglobulin G (IgG)	340	400	400	Laboratory Investigation
85	LB082	Immunoglobulin M(IgM)	340	400	400	Laboratory Investigation
86	LB083	Immunoglobulin A(IgA)	340	400	400	Laboratory Investigation
87	LB084	Antinuclear Antibody (ANA)	557	655	655	Laboratory Investigation
88	LB085	Anti-double stranded DNA (anti-dsDNA)	680	800	800	Laboratory Investigation
89	LB086	Serum Glutamic Pyruvic Transaminase (SGPT) / Alanine Aminotransferase (ALT)	85	100	100	Laboratory Investigation
90	LB087	Serum Glutamic Oxaloacetic Transaminase (SGOT) /Aspartate Aminotransferase (AST)	85	100	100	Laboratory Investigation
91	LB088	Serum Amylase	255	300	300	Laboratory Investigation
92	LB089	Serum Lipase	340	400	400	Laboratory Investigation
93	LB090	Serum Lactate	425	500	500	Laboratory Investigation
94	LB091	Serum Magnesium	255	300	300	Laboratory Investigation
95	LB092	Serum Sodium	102	120	120	Laboratory Investigation
96	LB093	Serum Potassium	102	120	120	Laboratory Investigation
97	LB094	Chloride	128	150	150	Laboratory Investigation
98	LB095	Serum Bicarbonate	170	200	200	Laboratory Investigation
99	LB096	Serum Ammonia	570	670	670	Laboratory Investigation
100	LB097	Anaemia Profile (Hb, Serum Iron, TIBC, Ferritin, Transferrin Saturation,Stool Occult Blood, CBC, Reticulocyte Count)	1122	1320	1320	Laboratory Investigation

CGHS rates for Tier I (X City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
101	LB098	Serum Testosterone	340	400	400	Laboratory Investigation
102	LB099	Imprint Smear from Endoscopy	850	1000	1000	Laboratory Investigation
103	LB100	Triglycerides	128	150	150	Laboratory Investigation
104	LB101	Glucose Tolerance Test (GTT)	255	300	300	Laboratory Investigation
105	LB102	Triple Marker Test (AFP,HCG,UE3)	1275	1500	1500	Laboratory Investigation
106	LB103	Creatine Phosphokinase (CPK)/Creatine Kinase (CK)	196	230	230	Laboratory Investigation
107	LB104	Foetal Haemoglobin (HbF)	425	500	500	Laboratory Investigation
108	LB105	Prothrombin Time (PT)/ International normalized ratio (INR)	213	250	250	Laboratory Investigation
109	LB106	Lactate dehydrogenase (LDH)	187	220	220	Laboratory Investigation
110	LB107	Alkaline Phosphatase	128	150	150	Laboratory Investigation
111	LB108	Acid Phosphatase	128	150	150	Laboratory Investigation
112	LB109	CPK MB/CK MB	306	360	360	Laboratory Investigation
113	LB110	CK MB Mass/CPK MB Mass	306	360	360	Laboratory Investigation
114	LB111	Troponin I	595	700	700	Laboratory Investigation
115	LB112	Troponin T	595	700	700	Laboratory Investigation
116	LB113	Glucose-6-Phosphate Dehydrogenase (G6PD)	255	300	300	Laboratory Investigation
117	LB114	Lithium	298	350	350	Laboratory Investigation
118	LB115	Dilantin (Phenytoin)	510	600	600	Laboratory Investigation
119	LB116	Carbamazepine.	595	700	700	Laboratory Investigation
120	LB117	Cyclosporine	2125	2500	2500	Laboratory Investigation
121	LB118	Valproic acid.	510	600	600	Laboratory Investigation
122	LB119	Blood gas analysis / Arterial Blood Gas (ABG)	476	560	560	Laboratory Investigation
123	LB120	Blood gas analysis / Arterial Blood Gas (ABG) with electrolytes	680	800	800	Laboratory Investigation
124	LB121	Urine Pregnancy Test(UPT)	85	100	100	Laboratory Investigation
125	LB122	Glycosylated Haemoglobin (HbA1c)	255	300	300	Laboratory Investigation
126	LB123	Kidney Function Test (KFT)- (Sr.Creatinine,Blood Urea,BUN,Sr.Uric Acid,Sr.Sodium,Sr.Potassium,Urine R/E)	425	500	500	Laboratory Investigation

CGHS rates for Tier I (X City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
127	LB124	Liver Function Test (LFT)	425	500	500	Laboratory Investigation
128	LB125	Lipid Profile (Total cholesterol ,Triglycerides, LDL, HDL,VLDL)	417	490	490	Laboratory Investigation
129	LB126	Serum Ferritin	298	350	350	Laboratory Investigation
130	LB127	Vitamin B12 Assay.	510	600	600	Laboratory Investigation
131	LB128	Folic Acid Assay.	553	650	650	Laboratory Investigation
132	LB129	Extended Lipid Profile. (Total cholesterol, LDL,HDL, Triglycerides Apo A1, Apo B,Lp (a))	850	1000	1000	Laboratory Investigation
133	LB130	Apolipoprotein A1 (ApoA1)	340	400	400	Laboratory Investigation
134	LB131	Apolipoprotein B (Apo B)	340	400	400	Laboratory Investigation
135	LB132	Lipoprotein A / Lp A	340	400	400	Laboratory Investigation
136	LB133	CD 3,4 and 8 Counts	1054	1240	1240	Laboratory Investigation
137	LB134	CD 3,4 and 8 Percentage	1284	1510	1510	Laboratory Investigation
138	LB135	Low Density Lipoprotein (LDL)	128	150	150	Laboratory Investigation
139	LB136	Homocysteine	553	650	650	Laboratory Investigation
140	LB137	Serum Electrophoresis	595	700	700	Laboratory Investigation
141	LB138	Fibrinogen	425	500	500	Laboratory Investigation
142	LB139	Gamma-Glutamyl Transpeptidase (GGTP)	128	150	150	Laboratory Investigation
143	LB140	Fructosamine	425	500	500	Laboratory Investigation
144	LB141	Beta 2 microglobulin (B2M) /β2 microglobulin	510	600	600	Laboratory Investigation
145	LB142	Prostate Specific Antigen (PSA)- Total	404	475	475	Laboratory Investigation
146	LB143	Prostate-Specific Antigen (PSA) - Free	680	800	800	Laboratory Investigation
147	LB144	Alpha Fetoprotein (AFP)	468	550	550	Laboratory Investigation
148	LB145	Human Chorionic Gonadotropin (HCG)/ Beta HCG	383	450	450	Laboratory Investigation
149	LB146	Cancer Antigen 125 (CA 125)	680	800	800	Laboratory Investigation
150	LB147	Cancer Antigen 19.9 (CA 19.9)	680	800	800	Laboratory Investigation
151	LB148	Cancer Antigen 15.3 (CA 15.3)	680	800	800	Laboratory Investigation
152	LB149	Vanillylmandelic Acid (VMA)	1360	1600	1600	Laboratory Investigation

CGHS rates for Tier I (X City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
153	LB150	Calcitonin	1020	1200	1200	Laboratory Investigation
154	LB151	Carcinoembryonic Antigen (CEA)	510	600	600	Laboratory Investigation
155	LB152	Direct Immunofluorescence (Skin and Kidney Disease etc)	1020	1200	1200	Laboratory Investigation
156	LB153	Indirect (anti ds DNA Anti Smith ANCA)	1020	1200	1200	Laboratory Investigation
157	LB154	Calcidiol / 25-hydroxycholecalciferol / Vitamin D3 assay (Vit D3)	850	1000	1000	Laboratory Investigation
158	LB155	Serum Protein electrophoresis with immunofixation electrophoresis (IFE)	595	700	700	Laboratory Investigation
159	LB156	Anti-Cyclic Citrullinated Peptide (Anti CCP)	765	900	900	Laboratory Investigation
160	LB157	Anti-tissue Transglutaminase antibody (Anti TTG Antibody) / Tissue Transglutaminase IgA (tTg-IgA)	680	800	800	Laboratory Investigation
161	LB158	Serum Erythropoietin	1020	1200	1200	Laboratory Investigation
162	LB159	Adrenocorticotropic Hormone (ACTH)	1020	1200	1200	Laboratory Investigation
163	LB160	T3, T4, TSH -Thyroid Function Test (TFT)	383	450	450	Laboratory Investigation
164	LB161	Thyroid stimulating hormone (TSH)	170	200	200	Laboratory Investigation
165	LB162	Luteinizing hormone (LH)	340	400	400	Laboratory Investigation
166	LB163	Follicle stimulating hormone (FSH)	340	400	400	Laboratory Investigation
167	LB164	Prolactin	340	400	400	Laboratory Investigation
168	LB165	Cortisol	468	550	550	Laboratory Investigation
169	LB166	PTH(Parathormone)	850	1000	1000	Laboratory Investigation
170	LB167	C-Peptide (Connecting Peptide)	638	750	750	Laboratory Investigation
171	LB168	Insulin	425	500	500	Laboratory Investigation
172	LB169	Progesterone	340	400	400	Laboratory Investigation
173	LB170	17 Hydroxyprogesterone (17 OH Progesterone)	638	750	750	Laboratory Investigation
174	LB171	Dehydroepiandrosterone sulfate (DHEAS)	850	1000	1000	Laboratory Investigation
175	LB172	Androstenedione	850	1000	1000	Laboratory Investigation
176	LB173	Growth Hormone	510	600	600	Laboratory Investigation
177	LB174	Thyroid peroxidase antibody (TPO)	595	700	700	Laboratory Investigation
178	LB175	Thyroglobulin.	595	700	700	Laboratory Investigation

CGHS rates for Tier I (X City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
179	LB176	Hydatid Serology	697	820	820	Laboratory Investigation
180	LB177	Anti Sperm Antibodies.	765	900	900	Laboratory Investigation
181	LB178	Hepatitis B Virus (HBV) DNA Qualitative	2125	2500	2500	Laboratory Investigation
182	LB179	Hepatitis B Virus (HBV) DNA Quantitative.	2975	3500	3500	Laboratory Investigation
183	LB180	Hepatitis C Virus (HCV) RNA Qualitative.	2550	3000	3000	Laboratory Investigation
184	LB181	Human papillomavirus (HPV) Serology	1360	1600	1600	Laboratory Investigation
185	LB182	Rota Virus serology	340	400	400	Laboratory Investigation
186	LB183	Mantoux Test	170	200	200	Laboratory Investigation
187	LB184	ADA(Adenosine deaminase)	553	650	650	Laboratory Investigation
188	LB185	GeneXpert Test (Tuberculosis)	880	1035	1035	Laboratory Investigation
189	LB186	QuantiFERON TB Gold	2125	2500	2500	Laboratory Investigation
190	LB187	PCR for Tuberculosis (TB)	1020	1200	1200	Laboratory Investigation
191	LB188	PCR for Human immunodeficiency virus (HIV)	1530	1800	1800	Laboratory Investigation
192	LB189	Chlamydia antigen	850	1000	1000	Laboratory Investigation
193	LB190	Chlamydia antibody	723	850	850	Laboratory Investigation
194	LB191	Brucella serology	383	450	450	Laboratory Investigation
195	LB192	Influenza A serology	850	1000	1000	Laboratory Investigation
196	LB193	Acetylcholine receptor (AChR) antibody titre	3825	4500	4500	Laboratory Investigation
197	LB194	Anti muscle specific receptor tyrosine kinase (Anti MuSK) antibody titre	5695	6700	6700	Laboratory Investigation
198	LB195	Serum Copper	553	650	650	Laboratory Investigation
199	LB196	Serum Ceruloplasmin	553	650	650	Laboratory Investigation
200	LB197	Urinary copper	714	840	840	Laboratory Investigation
201	LB198	Serum phenobarbitone level	510	600	600	Laboratory Investigation
202	LB199	Coagulation profile	638	750	750	Laboratory Investigation
203	LB200	D-Dimer	425	500	500	Laboratory Investigation
204	LB201	CSF/Any Body Fluid for Basic studies including cell count, protein, sugar, gram stain, India Ink preparation and smear for AFB	298	350	350	Laboratory Investigation

CGHS rates for Tier I (X City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
205	LB202	PCR for Herpes simplex	1190	1400	1400	Laboratory Investigation
206	LB203	Bacterial culture and sensitivity - Aerobic	391	460	460	Laboratory Investigation
207	LB204	Bacterial culture and sensitivity - Anaerobic	595	700	700	Laboratory Investigation
208	LB205	Mycobacterial culture and sensitivity	468	550	550	Laboratory Investigation
209	LB206	Fungal culture	421	495	495	Laboratory Investigation
210	LB207	Anti measles antibody titre (with serum antibody titre)	1020	1200	1200	Laboratory Investigation
211	LB208	Viral culture	510	600	600	Laboratory Investigation
212	LB209	Antibody titre (Herpes simplex, cytomegalovirus, flavivirus, zoster varicella virus)	1785	2100	2100	Laboratory Investigation
213	LB210	Oligoclonal bands (OCBs)	1913	2250	2250	Laboratory Investigation
214	LB211	Myelin basic protein (MBP)	2975	3500	3500	Laboratory Investigation
215	LB212	Cryptococcal antigen	1275	1500	1500	Laboratory Investigation
216	LB213	D Xylose test	935	1100	1100	Laboratory Investigation
217	LB214	Faecal / Faecal fat test/ faecal chymotrypsin/ faecal elastase	850	1000	1000	Laboratory Investigation
218	LB215	H pylori serology for Coeliac disease /Celiac disease	1020	1200	1200	Laboratory Investigation
219	LB216	HBV genotyping	2444	2875	2875	Laboratory Investigation
220	LB217	HCV genotyping	4765	5606	5606	Laboratory Investigation
221	LB218	Urinary Vanillylmandelic Acid (VMA)	1857	2185	2185	Laboratory Investigation
222	LB219	Urinary metanephrine/Normetanephrine	2465	2900	2900	Laboratory Investigation
223	LB220	Urinary free catecholamine	2125	2500	2500	Laboratory Investigation
224	LB221	Serum aldosterone	1530	1800	1800	Laboratory Investigation
225	LB222	24 Hr urinary aldosterone	1275	1500	1500	Laboratory Investigation
226	LB223	Plasma renin activity	1360	1600	1600	Laboratory Investigation
227	LB224	Serum aldosterone/renin ratio	1275	1500	1500	Laboratory Investigation
228	LB225	Osmolality urine	383	450	450	Laboratory Investigation
229	LB226	Osmolality serum	383	450	450	Laboratory Investigation
230	LB227	Urinary sodium	128	150	150	Laboratory Investigation

CGHS rates for Tier I (X City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
231	LB228	Urinary Chloride	128	150	150	Laboratory Investigation
232	LB229	Urinary potassium	128	150	150	Laboratory Investigation
233	LB230	Urinary calcium	128	150	150	Laboratory Investigation
234	LB231	Thyroid binding globulin	935	1100	1100	Laboratory Investigation
235	LB232	24-hour urinary free cortisol	638	750	750	Laboratory Investigation
236	LB233	Islet cell antibody	1020	1200	1200	Laboratory Investigation
237	LB234	Glutamic Acid Decarboxylase Autoantibodies test (GAD antibodies)	1700	2000	2000	Laboratory Investigation
238	LB235	Insulin associated antibody	833	980	980	Laboratory Investigation
239	LB236	Insulin-like growth factor-1 (IGF-1)	1870	2200	2200	Laboratory Investigation
240	LB237	Insulin-like growth factor binding protein 3 (IGF- BP3)	1955	2300	2300	Laboratory Investigation
241	LB238	Sex hormone binding globulin	1309	1540	1540	Laboratory Investigation
242	LB239	Estradiol (E2)	340	400	400	Laboratory Investigation
243	LB240	Thyroglobulin antibody	595	700	700	Laboratory Investigation
244	LB241	Kappa Lambda Light Chains, Free, Serum/ Serum free light chains (SFLC)	3421	4025	4025	Laboratory Investigation
245	LB242	Serum IgE Level	323	380	380	Laboratory Investigation
246	LB243	N-terminal pro BNP (NT-pro BNP / Brain natriuretic peptide (BNP)	1760	2070	2070	Laboratory Investigation
247	LB244	HCV RNA Quantitative	1568	1845	1845	Laboratory Investigation
248	LB245	Tacrolimus Level	2248	2645	2645	Laboratory Investigation
249	LB246	Protein Creatinine Ratio (PCR), Urine / Albumin Creatinine Ratio (ACR), Urine	129	152	152	Laboratory Investigation
250	LB247	HLA B27 (PCR)	489	575	575	Laboratory Investigation
251	LB248	Procalcitonin	1760	2070	2070	Laboratory Investigation
252	LB249	TORCH Test	1095	1288	1288	Laboratory Investigation
253	LB250	Anti –Smooth Muscle Antibody Test (ASMA)	1241	1460	1460	Laboratory Investigation
254	LB251	C ANCA-IFA	1275	1500	1500	Laboratory Investigation
255	LB252	P ANCA-IFA	1275	1500	1500	Laboratory Investigation
256	LB253	Angiotensin converting enzyme (ACE)	850	1000	1000	Laboratory Investigation

CGHS rates for Tier I (X City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
257	LB254	Extractable Nuclear Antigens (ENA) - Quantitative	3910	4600	4600	Laboratory Investigation
258	LB255	Chromogranin A	4250	5000	5000	Laboratory Investigation
259	LB256	Faecal calprotectin	2321	2730	2730	Laboratory Investigation
260	LB257	C3-COMPLEMENT	553	650	650	Laboratory Investigation
261	LB258	C4-COMPLEMENT	553	650	650	Laboratory Investigation
262	LB259	H1N1 (RT-PCR)	921	1084	1084	Laboratory Investigation
263	LB260	Anti HEV IgM	850	1000	1000	Laboratory Investigation
264	LB261	Anti HAV IgM	638	750	750	Laboratory Investigation
265	LB262	HBsAg Quantitative	553	650	650	Laboratory Investigation
266	LB263	Typhidot IgM	340	400	400	Laboratory Investigation
267	LB264	Hepatitis B Core Antibody (HBcAb) Level (Hepatitis B Core IgM Antibody)	408	480	480	Laboratory Investigation
268	LB265	Hepatitis B surface antibody (anti HBs)	553	650	650	Laboratory Investigation
269	LB266	Free Triiodothyronine (FT3)	106	125	125	Laboratory Investigation
270	LB267	Free Thyroxine (FT4)	106	125	125	Laboratory Investigation
271	LB268	Widal Test	60	70	70	Laboratory Investigation
272	LB269	Dengue NS1 Ag	340	400	400	Laboratory Investigation
273	LB270	Dengue IgM and Ig G	680	800	800	Laboratory Investigation
274	LB271	Interleukin 6 (IL 6)	1360	1600	1600	Laboratory Investigation
275	LB272	Covid Antibody Test	595	700	700	Laboratory Investigation
276	LB273	Cryoglobulins	850	1000	1000	Laboratory Investigation
277	LB274	Cytogenetics	4250	5000	5000	Laboratory Investigation
278	LB275	Plasma Free Normetanephrine	1955	2300	2300	Laboratory Investigation
279	LB276	Plasma Metanephrines	1955	2300	2300	Laboratory Investigation
280	LB277	PLA2 receptor antibody quantitative	3570	4200	4200	Laboratory Investigation
281	LB278	Allergic Bronchopulmonary Aspergillosis (ABPA) Panel	2465	2900	2900	Laboratory Investigation
282	LB279	Allergy Food Screening Panel	5100	6000	6000	Laboratory Investigation
283	LB280	AMA (Anti Mitochondrial Antibody)	850	1000	1000	Laboratory Investigation

CGHS rates for Tier I (X City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
284	LB281	AMH (Anti- Mullerian Hormone)	850	1000	1000	Laboratory Investigation
285	LB282	ANA BLOT	2550	3000	3000	Laboratory Investigation
286	LB283	ANA Profile	2550	3000	3000	Laboratory Investigation
287	LB284	Anti GBM (Glomerular Basement Membrane) Antibody	1275	1500	1500	Laboratory Investigation
288	LB285	Anti LKM (Liver Kidney Microsome) Ab	1275	1500	1500	Laboratory Investigation
289	LB286	Anti Parietal Cell Antibodies	1700	2000	2000	Laboratory Investigation
290	LB287	Anti Intrinsic Factor Antibodies	1700	2000	2000	Laboratory Investigation
291	LB288	ASO Titre /ASLO Titre	459	540	540	Laboratory Investigation
292	LB289	Aspergillus Fumigatus Specific IgE	1318	1550	1550	Laboratory Investigation
293	LB290	Autoimmune Encephalitis Panel	14450	17000	17000	Laboratory Investigation
294	LB291	Autoimmune Hepatitis Profile	2516	2960	2960	Laboratory Investigation
295	LB292	Beta-D-Glucan Assay	12750	15000	15000	Laboratory Investigation
296	LB293	C1 Esterase inhibitor (Quantitative)	2040	2400	2400	Laboratory Investigation
297	LB294	CMV Quantitative (Viral load) Test	1955	2300	2300	Laboratory Investigation
298	LB295	Double Marker (Beta-hCG,PAPP-A)	1700	2000	2000	Laboratory Investigation
299	LB296	Quadruple test (AFP,HCG,UE3,Inhibin A)	2040	2400	2400	Laboratory Investigation
300	LB297	HBeAb (Hepatitis B envelope Antibody)	306	360	360	Laboratory Investigation
301	LB298	HBeAg (Hepatitis B envelope Antigen)	306	360	360	Laboratory Investigation
302	LB299	HIAA 24 Hours Urinary	1955	2300	2300	Laboratory Investigation
303	LB300	HIV Viral Load by PCR	4250	5000	5000	Laboratory Investigation
304	LB301	HSV 1 & 2 IgG	697	820	820	Laboratory Investigation
305	LB302	Hypersensitive Pneumonitis Panel	6120	7200	7200	Laboratory Investigation
306	LB303	IgG4	1700	2000	2000	Laboratory Investigation
307	LB304	Inhibin A	765	900	900	Laboratory Investigation
308	LB305	Inhibin B	1615	1900	1900	Laboratory Investigation
309	LB306	Scrub Typhus IgM	1360	1600	1600	Laboratory Investigation
310	LB307	Interferon Gamma Release Assay (IGRA)	2550	3000	3000	Laboratory Investigation

CGHS rates for Tier I (X City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
311	LB308	KOH Mount	128	150	150	Laboratory Investigation
312	LB309	Serum AMA M2 (IFA Method)	1700	2000	2000	Laboratory Investigation
313	LB310	Serum Gastrin	1020	1200	1200	Laboratory Investigation
314	LB311	Serum Haptoglobin Levels	850	1000	1000	Laboratory Investigation
315	LB312	Skin Prick Test for Allergy	1530	1800	1800	Laboratory Investigation
316	LB313	Myositis Profile (Up to 16 Antigens)	6800	8000	8000	Laboratory Investigation
317	LB314	Paraneoplastic Panel	8500	10000	10000	Laboratory Investigation
318	LB315	TSH Receptor Antibody	1020	1200	1200	Laboratory Investigation
319	LB316	Anti-Nuclear Antibodies - IFA	1360	1600	1600	Laboratory Investigation
320	LB317	Autoimmune Liver Diseases Profile	4250	5000	5000	Laboratory Investigation
321	LB318	Citrate Urine 24 Hour	978	1150	1150	Laboratory Investigation
322	LB319	Comprehensive Allergy Panel	5950	7000	7000	Laboratory Investigation
323	LB320	Comprehensive Myeloma Protein Panel	5950	7000	7000	Laboratory Investigation
324	LB321	DCP (DES Gamma-Carboxy- Prothrombin)	2848	3350	3350	Laboratory Investigation
325	LB322	Desmoglein (DSG) 1 And 3 Antibody	4590	5400	5400	Laboratory Investigation
326	LB323	Galactomannan	2644	3110	3110	Laboratory Investigation
327	LB324	SCL 70 Antibody	1428	1680	1680	Laboratory Investigation
328	LB325	Serum Chromogranin A	3230	3800	3800	Laboratory Investigation
329	LB326	SSA- Antibody Ro Serum Test	1233	1450	1450	Laboratory Investigation
330	LB327	SSB- Antibody La Serum Test	1233	1450	1450	Laboratory Investigation
331	LB328	Stool for Clostridium difficile Toxin	2414	2840	2840	Laboratory Investigation
332	LB329	TPHA	340	400	400	Laboratory Investigation
333	LB330	UGT1A1 Gene Analysis	5100	6000	6000	Laboratory Investigation
334	LB331	Urine For Myoglobin	468	550	550	Laboratory Investigation
335	LB332	Leptospira Ig M	850	1000	1000	Laboratory Investigation
336	LB333	Chikungunya Ig M	850	1000	1000	Laboratory Investigation
337	LB334	Weil Felix Agglutination Test	425	500	500	Laboratory Investigation

CGHS rates for Tier I (X City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
338	LB335	Continuous Glucose Monitoring for 2 Weeks	3400	4000	4000	Laboratory Investigation
339	RI001	2D echocardiography	1254	1475	1475	Radiological Investigation
340	RI002	Fetal Echo	1360	1600	1600	Radiological Investigation
341	RI003	2D Transoesophageal Echocardiography (TEE)	1403	1650	1650	Radiological Investigation
342	RI004	3D Transoesophageal Echocardiography (TEE)	1403	1650	1650	Radiological Investigation
343	RI005	Stress Echo- exercise	2040	2400	2400	Radiological Investigation
344	RI006	Stress Echo- pharmacological / D Stress Echo	2550	3000	3000	Radiological Investigation
345	RI007	Stress Myocardial Perfusion Imaging (MPI)- exercise	7820	9200	9200	Radiological Investigation
346	RI008	Stress Myocardial Perfusion Imaging (MPI) - pharmacological	7820	9200	9200	Radiological Investigation
347	RI009	CT Coronary Angiography including Calcium Score Test	7820	9200	9200	Radiological Investigation
348	RI010	Cardiac CT scan	5525	6500	6500	Radiological Investigation
349	RI011	MRI Cardiac	6800	8000	8000	Radiological Investigation
350	RI012	Stress Cardiac MRI	7820	9200	9200	Radiological Investigation
351	RI013	Cardiac PET	7820	9200	9200	Radiological Investigation
352	RI014	USG Transvaginal sonography (TVS for Follicular monitoring /aspiration) /TVS for follicular monitoring/pelvic pathology/ET measurement	850	1000	1000	Radiological Investigation
353	RI015	Growth scan (including BPP, AFI, Doppler)	1700	2000	2000	Radiological Investigation
354	RI016	1st trimester scan-dating scan/NT scan/Early pregnancy scan	595	700	700	Radiological Investigation
355	RI017	USG Colour Doppler Pregnancy / Fetal Doppler/Umbilical Doppler/Uterine Vessel Doppler	1424	1675	1675	Radiological Investigation
356	RI018	Biophysical score / Biophysical profile test (BPP test)	1275	1500	1500	Radiological Investigation
357	RI019	USG Obstetrics for Anomalies scan	1700	2000	2000	Radiological Investigation
358	RI020	USG Whole Abdomen Including Pelvis and post Void urine	680	800	800	Radiological Investigation
359	RI021	Pelvic USG (gynae, infertility, prostate , KUB with post- void residual (PVR) etc).	425	500	500	Radiological Investigation

CGHS rates for Tier I (X City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
360	RI022	USG Small parts (scrotum, thyroid, parathyroid etc)	655	770	770	Radiological Investigation
361	RI023	USG Large Parts (Joints/Chest,...etc)	680	800	800	Radiological Investigation
362	RI024	USG Neonatal spine	850	1000	1000	Radiological Investigation
363	RI025	USG Breast including relevant Lymph nodes- Bilateral/Unilateral	680	800	800	Radiological Investigation
364	RI026	USG Hysterosalpingography (HSG)	2040	2400	2400	Radiological Investigation
365	RI027	Fibroscan Liver	978	1150	1150	Radiological Investigation
366	RI028	Carotid Doppler Bilateral	850	1000	1000	Radiological Investigation
367	RI029	Arterial Colour Doppler Bilateral	850	1000	1000	Radiological Investigation
368	RI030	Venous Colour Doppler Bilateral	850	1000	1000	Radiological Investigation
369	RI031	Colour Doppler, renal arteries/any other organ	850	1000	1000	Radiological Investigation
370	RI032	X Ray Abdomen AP Supine or Erect (One film)	213	250	250	Radiological Investigation
371	RI033	X Ray Abdomen Lateral view (one film)	179	210	210	Radiological Investigation
372	RI034	X Ray Chest PA /AP/ Oblique view (one film)	196	230	230	Radiological Investigation
373	RI035	X Ray Chest Lateral (one film)	196	230	230	Radiological Investigation
374	RI036	X Ray Mastoids: Towne view, oblique views (3 films)	425	500	500	Radiological Investigation
375	RI037	X Ray Extremities (Hand/Leg/Feet/Finger/Toe) bones & Joints (Hip/ Knee/Ankle / shoulder/ Wrist / fingers/Toes, etc) AP & Lateral views (standing or weight bearing)(Two films)	323	380	380	Radiological Investigation
376	RI038	X Ray Pelvis AP (one film)	170	200	200	Radiological Investigation
377	RI039	X Ray Temporomandibular (TM) Joints (one film)	213	250	250	Radiological Investigation
378	RI040	X Ray Abdomen & Pelvis for KUB	200	235	235	Radiological Investigation
379	RI041	X Ray Skull AP & Lateral (2 films)/ Extra oral radiographs - All skull views, TMJ, Lateral oblique [Dental]	340	400	400	Radiological Investigation
380	RI042	X Ray Spine AP & Lateral (2 films)	340	400	400	Radiological Investigation
381	RI043	X Ray Paranasal sinuses (PNS) view (1 film)	170	200	200	Radiological Investigation
382	RI044	Barium Swallow	1020	1200	1200	Radiological Investigation
383	RI045	Barium Upper GI study	1275	1500	1500	Radiological Investigation

CGHS rates for Tier I (X City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
384	RI046	Barium Upper GI study (Double contrast)	1700	2000	2000	Radiological Investigation
385	RI047	Barium Meal follow through	1700	2000	2000	Radiological Investigation
386	RI048	Barium Enema (Single contrast/double contrast)	1700	2000	2000	Radiological Investigation
387	RI049	Small bowel enteroclysis	1700	2000	2000	Radiological Investigation
388	RI050	General:Fistulography / Sinography/Sialography/Dacrocystography/ T-Tube cholangiogram/Nephrostogram	1080	1270	1270	Radiological Investigation
389	RI051	Intravenous Pyelography (IVP)	1403	1650	1650	Radiological Investigation
390	RI052	Micturating Cystourethrography (MCU)	952	1120	1120	Radiological Investigation
391	RI053	Retrograde Urethrography (RGU)	952	1120	1120	Radiological Investigation
392	RI054	Contrast Hystero-Salpingography (HSG)	1700	2000	2000	Radiological Investigation
393	RI055	X ray Arthrography	1700	2000	2000	Radiological Investigation
394	RI056	Ortho Scanogram	1437	1690	1690	Radiological Investigation
395	RI057	Cephalography	298	350	350	Radiological Investigation
396	RI058	Myelography	2125	2500	2500	Radiological Investigation
397	RI059	Diagnostic Digital Subtraction Angiography (DSA) cerebral vessels	11390	13400	13400	Radiological Investigation
398	RI060	X Ray Mammography – Bilateral/Unilateral	1169	1375	1375	Radiological Investigation
399	RI061	MRI Mammography	4250	5000	5000	Radiological Investigation
400	RI062	CT Scan Head/ Brain-Without Contrast / NCCT Head/Brain	880	1035	1035	Radiological Investigation
401	RI063	CT Scan Head / Brain- with Contrast -including CT angiography	1870	2200	2200	Radiological Investigation
402	RI064	CT Scan Chest - without contrast (for lungs)	1700	2000	2000	Radiological Investigation
403	RI065	High Resolution computed Tomography (HRCT Chest)	1700	2000	2000	Radiological Investigation
404	RI066	Contrast Enhanced Computed Tomograpy (CECT) Chest (Including CD)	2444	2875	2875	Radiological Investigation
405	RI067	CT Scan Lower Abdomen (incl. Pelvis) With Contrast/ CT KUB with Contrast	3825	4500	4500	Radiological Investigation
406	RI068	CT Scan Lower Abdomen (Incl. Pelvis) Without Contrast / CT KUB without Contrast	2975	3500	3500	Radiological Investigation
407	RI069	CT Scan Whole Abdomen Without Contrast	2933	3450	3450	Radiological Investigation

CGHS rates for Tier I (X City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
408	RI070	CT Scan Whole Abdomen With Contrast	4399	5175	5175	Radiological Investigation
409	RI071	Triple Phase CT abdomen	4399	5175	5175	Radiological Investigation
410	RI072	CT Urography	3825	4500	4500	Radiological Investigation
411	RI073	CT Scan Angiography Chest	4399	5175	5175	Radiological Investigation
412	RI074	CT Scan Angiography Abdomen	4399	5175	5175	Radiological Investigation
413	RI075	CT Angiography Entire Aorta (CT Aortogram)	8500	10000	10000	Radiological Investigation
414	RI076	CT Scan Enteroclysis	5865	6900	6900	Radiological Investigation
415	RI077	CT Scan Neck – Without Contrast	2125	2500	2500	Radiological Investigation
416	RI078	CT Scan Neck – With Contrast	2975	3500	3500	Radiological Investigation
417	RI079	CT Angio-Neck Vessels	5100	6000	6000	Radiological Investigation
418	RI080	CT Scan Orbits - Without Contrast	1870	2200	2200	Radiological Investigation
419	RI081	CT Scan Orbits - With Contrast	2720	3200	3200	Radiological Investigation
420	RI082	CT Scan of Para Nasal Sinuses (CT PNS)- Without Contrast	1955	2300	2300	Radiological Investigation
421	RI083	CT Scan of Para Nasal Sinuses (CT PNS)- With Contrast	2805	3300	3300	Radiological Investigation
422	RI084	CT Scan Spine (Cervical, Dorsal, Lumbar,Sacral)–without Contrast	2380	2800	2800	Radiological Investigation
423	RI085	CT Scan Temporal bone – without contrast	2125	2500	2500	Radiological Investigation
424	RI086	CT Scan / Cone Beam CT (CBCT) Dental	1275	1500	1500	Radiological Investigation
425	RI087	CT Scan Limbs -Without Contrast	2380	2800	2800	Radiological Investigation
426	RI088	CT Scan Limbs -With Contrast including CT angiography	4930	5800	5800	Radiological Investigation
427	RI089	MRI Head / Brain – Without Contrast	2338	2750	2750	Radiological Investigation
428	RI090	MRI Head / Brain– With Contrast	4250	5000	5000	Radiological Investigation
429	RI091	MRI Orbits – Without Contrast	1590	1870	1870	Radiological Investigation
430	RI092	MRI Orbits – With Contrast	4250	5000	5000	Radiological Investigation
431	RI093	MRI Nasopharynx and PNS – Without Contrast	2975	3500	3500	Radiological Investigation
432	RI094	MRI Nasopharynx and PNS – With Contrast	4250	5000	5000	Radiological Investigation
433	RI095	MR for Salivary Glands with Sialography/Maxillofacial MRI	4250	5000	5000	Radiological Investigation
434	RI096	MRI Neck - Without Contrast	2975	3500	3500	Radiological Investigation

CGHS rates for Tier I (X City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
435	RI097	MRI Neck- with contrast	4888	5750	5750	Radiological Investigation
436	RI098	MRI Shoulder – Without contrast	2975	3500	3500	Radiological Investigation
437	RI099	MRI Shoulder – With contrast	4250	5000	5000	Radiological Investigation
438	RI100	MRI shoulder both Joints - Without contrast	3400	4000	4000	Radiological Investigation
439	RI101	MRI Shoulder both joints – With contrast	5100	6000	6000	Radiological Investigation
440	RI102	MRI Wrist Single joint - Without contrast	2805	3300	3300	Radiological Investigation
441	RI103	MRI Wrist Single joint - With contrast	4250	5000	5000	Radiological Investigation
442	RI104	MRI Wrist both joints - Without contrast	3400	4000	4000	Radiological Investigation
443	RI105	MRI Wrist Both joints - With contrast	4888	5750	5750	Radiological Investigation
444	RI106	MRI knee Single joint - Without contrast	2550	3000	3000	Radiological Investigation
445	RI107	MRI knee Single joint - With contrast	4888	5750	5750	Radiological Investigation
446	RI108	MRI knee both joints - Without contrast	3400	4000	4000	Radiological Investigation
447	RI109	MRI knee both joints - With contrast	4888	5750	5750	Radiological Investigation
448	RI110	MRI Ankle Single joint - Without contrast	2975	3500	3500	Radiological Investigation
449	RI111	MRI Ankle single joint - With contrast	4250	5000	5000	Radiological Investigation
450	RI112	MRI Ankle both joints - With contrast	5525	6500	6500	Radiological Investigation
451	RI113	MRI Ankle both joints - Without contrast	2975	3500	3500	Radiological Investigation
452	RI114	MRI Hip - With contrast	4250	5000	5000	Radiological Investigation
453	RI115	MRI Hip – without contrast	2975	3500	3500	Radiological Investigation
454	RI116	MRI Pelvis – Without Contrast	2975	3500	3500	Radiological Investigation
455	RI117	MRI Pelvis – with contrast	4888	5750	5750	Radiological Investigation
456	RI118	MRI Extremities - With contrast	4888	5750	5750	Radiological Investigation
457	RI119	MRI Extremities - Without contrast	2975	3500	3500	Radiological Investigation
458	RI120	MRI Temporomandibular – B/L - With contrast / MRI TMJ (Double Joint) with contrast	4250	5000	5000	Radiological Investigation
459	RI121	MRI Temporomandibular – B/L - Without contrast / MRI -TMJ(Double Joint) without contrast	2975	3500	3500	Radiological Investigation
460	RI122	MR Temporal Bone/ Inner ear with contrast	4250	5000	5000	Radiological Investigation

CGHS rates for Tier I (X City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
461	RI123	MRI Temporal Bone/ Inner ear without contrast	2975	3500	3500	Radiological Investigation
462	RI124	MRI Abdomen – Without Contrast	2975	3500	3500	Radiological Investigation
463	RI125	MRI Abdomen – With Contrast	4888	5750	5750	Radiological Investigation
464	RI126	MRI-Prostate (Multi-parametric) (Including CD)	5865	6900	6900	Radiological Investigation
465	RI127	MRI Breast - With Contrast	4250	5000	5000	Radiological Investigation
466	RI128	MRI Breast - Without Contrast	2975	3500	3500	Radiological Investigation
467	RI129	MRI whole Spine Screening- Without Contrast	1700	2000	2000	Radiological Investigation
468	RI130	MRI Chest – Without Contrast	2975	3500	3500	Radiological Investigation
469	RI131	MRI Chest – With Contrast	4250	5000	5000	Radiological Investigation
470	RI132	MRI Whole spine – Without Contrast	3740	4400	4400	Radiological Investigation
471	RI133	MRI Cervical/ Cervico Dorsal Spine – With Contrast	4250	5000	5000	Radiological Investigation
472	RI134	MRI Dorsal/ Dorso Lumbar Spine - Without Contrast	2975	3500	3500	Radiological Investigation
473	RI135	MRI Dorsal/ Dorso Lumbar Spine – With Contrast	4250	5000	5000	Radiological Investigation
474	RI136	MRI Lumbar/ Lumbo-Sacral Spine – Without Contrast	2975	3500	3500	Radiological Investigation
475	RI137	MRI Lumbar/ Lumbo-Sacral Spine – With Contrast	4888	5750	5750	Radiological Investigation
476	RI138	Whole body MRI (For oncological workup)	7820	9200	9200	Radiological Investigation
477	RI139	MR cholecysto-pancreatography (MRCP)	7225	8500	8500	Radiological Investigation
478	RI140	MRI Angiography - with contrast	4888	5750	5750	Radiological Investigation
479	RI141	MR Enteroclysis	4250	5000	5000	Radiological Investigation
480	RI142	MRI DEFECOGRAPHY	5950	7000	7000	Radiological Investigation
481	RI143	MRI FISTULOGRAM	3825	4500	4500	Radiological Investigation
482	RI144	MRI SPECTROSCOPY	2550	3000	3000	Radiological Investigation
483	RI145	Dexa Scan Bone Densitometry - Two sites	1700	2000	2000	Radiological Investigation
484	RI146	Dexa Scan Bone Densitometry - Three sites (Spine, Hip &extremity)	2125	2500	2500	Radiological Investigation
485	RI147	Dexa Scan Bone Densitometry Whole body	2550	3000	3000	Radiological Investigation
486	PI001	Pulmonary Function Test (PFT) / (Spirometry with Diffusing Capacity of the Lungs for Carbon monoxide (DLCO)	425	500	500	Pulmonology Investigation

CGHS rates for Tier I (X City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
487	PI002	Lung Ventilation & Perfusion Scan (V/Q Scan)	5100	6000	6000	Pulmonology Investigation
488	PI003	Lung Perfusion Scan	4250	5000	5000	Pulmonology Investigation
489	PI004	6 Minute Walk Test	425	500	500	Pulmonology Investigation
490	PI005	FeNO Breathing Test	612	720	720	Pulmonology Investigation
491	PP001	Endo bronchial Ultrasound (EBUS) -Trans bronchial needle aspiration (TBNA) - Excluding the cost of Needle	17000	20000	20000	Pulmonology Procedure
492	PP002	Video Bronchoscopy with BAL	9350	11000	11000	Pulmonology Procedure
493	NM001	Whole Body Bone Scan with SPECT.	4250	5000	5000	Nuclear Medicine Investigation
494	NM002	Three phase whole body Bone Scan	5100	6000	6000	Nuclear Medicine Investigation
495	NM003	Brain Perfusion SPECT Scan with Technetium 99m radiopharmaceuticals.	11390	13400	13400	Nuclear Medicine Investigation
496	NM004	Radionuclide Cisternography for CSF leak	5780	6800	6800	Nuclear Medicine Investigation
497	NM005	Renal Cortical Scintigraphy with Technetium 99m Dimercaptosuccinic acid (DMSA)/DTPA	3400	4000	4000	Nuclear Medicine Investigation
498	NM006	Dynamic Renography.	3400	4000	4000	Nuclear Medicine Investigation
499	NM007	Dynamic Renography with Diuretic.	3400	4000	4000	Nuclear Medicine Investigation
500	NM008	Dynamic Renography with Captopril	5780	6800	6800	Nuclear Medicine Investigation
501	NM009	Testicular Scan with Technetium 99m Pertechnetate	1445	1700	1700	Nuclear Medicine Investigation
502	NM010	Thyroid Uptake measurements with 131-Iodine.	2125	2500	2500	Nuclear Medicine Investigation

CGHS rates for Tier I (X City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
503	NM011	Thyroid Scan with Technetium 99m Pertechnetate	1615	1900	1900	Nuclear Medicine Investigation
504	NM012	Iodine-131 Whole Body Scan	11390	13400	13400	Nuclear Medicine Investigation
505	NM013	Whole Body Scan with MIBG	11390	13400	13400	Nuclear Medicine Investigation
506	NM014	Parathyroid Scan	6218	7315	7315	Nuclear Medicine Investigation
507	NM015	Scintimammography.	5100	6000	6000	Nuclear Medicine Investigation
508	NM016	Indium labelled octreotide Scan	61200	72000	72000	Nuclear Medicine Investigation
509	NM017	FDG Whole body PET CT Scan	12219	14375	14375	Nuclear Medicine Investigation
510	NM018	Brain / Heart FDG PET CT Scan	12219	14375	14375	Nuclear Medicine Investigation
511	NM019	Gallium-68 Peptide PET / CT imaging for Neuroendocrine Tumour	12219	14375	14375	Nuclear Medicine Investigation
512	NM020	PSMA PET CT Scan	12750	15000	15000	Nuclear Medicine Investigation
513	NM021	F-DOPA PET-CT scan	12750	15000	15000	Nuclear Medicine Investigation
514	BY001	Skin Biopsy	1063	1250	1250	Biopsies
515	BY002	Punch/Wedge biopsy	2550	3000	3000	Biopsies
516	BY003	Excision Biopsy of Ulcers	4250	5000	5000	Biopsies
517	BY004	Excision Biopsy of Superficial Lumps	7820	9200	9200	Biopsies
518	BY005	Incision Biopsy of Growths/Ulcers	4250	5000	5000	Biopsies

CGHS rates for Tier I (X City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
519	BY006	Bone Marrow Aspiration and Biopsy	7225	8500	8500	Biopsies
520	BY007	Scalene Node Biopsy	7820	9200	9200	Biopsies
521	BY008	Liver Biopsy	7225	8500	8500	Biopsies
522	BY009	Muscle Biopsy	2125	2500	2500	Biopsies
523	BY010	Trucut Needle Biopsy- (excluding the cost of Needle/Biopsy Gun if used)	3273	3850	3850	Biopsies
524	RP001	USG Guided Intervention- Diagnostic	850	1000	1000	Interventional Radiological Procedure
525	RP002	USG Guided Intervention -Therapeutic	1700	2000	2000	Interventional Radiological Procedure
526	RP003	USG Guided Intervention - Specialized Procedures excluding cost of Catheter or biopsy gun	2550	3000	3000	Interventional Radiological Procedure
527	RP004	CT Guided biopsy including all the consumables	7820	9200	9200	Interventional Radiology Procedure
528	RP005	CT Guided Intervention -Percutaneous catheter drainage/tube placement excluding the cost of tube /catheter	2975	3500	3500	Interventional Radiological Procedure
529	RP006	Percutaneous transhepatic cholangiography (PTC)	1530	1800	1800	Interventional Radiological Procedure
530	RP007	Transarterial Chemoembolization (TACE)	45050	53000	53000	Interventional Radiological Procedure
531	CA001	A, B, DR Molecular Typing PCR - SSP	8768	10315	10315	Oncology Investigations
532	CA002	ABL Kinase Domain Mutation for Chronic Myeloid leukemia (TKI Resistance, Imatinib Resistance	6885	8100	8100	Oncology Investigations
533	CA003	ABL Kinase Domain Mutation for Ph Positive Acute Lymphoblastic leukemia (TKI Resistance, I	6885	8100	8100	Oncology Investigations
534	CA004	Acute Leukemia karyotyping	4713	5545	5545	Oncology Investigations
535	CA005	Acute Leukemia mutation detection (per gene)ASXL1 /c-KIT/DNMT3A/ IDH1 and IDH2 /K RAS and N RAS mutation detection	4582	5390	5390	Oncology Investigations

CGHS rates for Tier I (X City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
536	CA006	Acute Leukemia RUNX1 mutation detection	4582	5390	5390	Oncology Investigations
537	CA007	Acute Leukemia TET2 mutation detection	19567	23020	23020	Oncology Investigations
538	CA008	Acute Leukemia TP53 mutation detection	19567	23020	23020	Oncology Investigations
539	CA009	Acute Lymphoblastic leukemia karyotyping	4713	5545	5545	Oncology Investigations
540	CA010	Acute Lymphoblastic Leukemia Mutation Detection	9384	11040	11040	Oncology Investigations
541	CA011	Acute Lymphoblastic Leukemia Transcript Identification	2567	3020	3020	Oncology Investigations
542	CA012	Acute Myeloid Leukemia (AML) Panel	11365	13370	13370	Oncology Investigations
543	CA013	ALK -1	3987	4690	4690	Oncology Investigations
544	CA014	ALK rearrangement: 2p23	3987	4690	4690	Oncology Investigations
545	CA015	B-cell Acute Lymphoblastic Leukemia (B-ALL) Panel	9835	11570	11570	Oncology Investigations
546	CA016	BCL3 rearrangement 19q13.3 / BCL6 rearrangement: 3q27	2962	3485	3485	Oncology Investigations
547	CA017	BCOR alteration	5143	6050	6050	Oncology Investigations
548	CA018	BCR/ABL (Ph) duplication, trisomy 8, trisomy 21, TP53 deletion	5181	6095	6095	Oncology Investigations
549	CA019	BCR/ABL Ph: t(9;22)	2962	3485	3485	Oncology Investigations
550	CA020	BCR-ABL by PCR-Quantitative	3400	4000	4000	Oncology Investigations
551	CA021	BRAF	7650	9000	9000	Oncology Investigations
552	CA022	BRCA1 & BRCA2	17000	20000	20000	Oncology Investigations
553	CA023	C3d Single Allele Antibody for HLA Class I (C3dLSA Class I) /C3d Single Allele Antibody for HLA Class II (C3dLSA Class II)	14875	17500	17500	Oncology Investigations
554	CA024	CAN ASSIST	42500	50000	50000	Oncology Investigations
555	CA025	CCND1/IgH: t(11;14)	3987	4690	4690	Oncology Investigations
556	CA026	CD 19 and CD 20	1275	1500	1500	Oncology Investigations
557	CA027	Cell line karyotyping	9435	11100	11100	Oncology Investigations
558	CA028	Chimerism Analysis	1309	1540	1540	Oncology Investigations
559	CA029	Chromosomal breakage (fragility) studies in Fanconi's Anemia/Aplastic Anemia	4713	5545	5545	Oncology Investigations
560	CA030	Chronic Lymphocytic Leukemia (CLL) Panel	9835	11570	11570	Oncology Investigations

CGHS rates for Tier I (X City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
561	CA031	Chronic Lymphocytic Leukemia Comprehensive Mutation Profile (IGVH Gene Mutation & Usage, T	28322	33320	33320	Oncology Investigations
562	CA032	Chronic Lymphocytic Leukemia IGVH Mutation Detection	5398	6350	6350	Oncology Investigations
563	CA033	Chronic Lymphoproliferative disorder IGVH Mutation Detection	5398	6350	6350	Oncology Investigations
564	CA034	Chronic Lymphoproliferative disorder NOTCH1 mutation / NOTCH2 mutation	4582	5390	5390	Oncology Investigations
565	CA035	Chronic Lymphoproliferative disorder SF3B1 mutation	4582	5390	5390	Oncology Investigations
566	CA036	Chronic Lymphoproliferative disorder TP53 mutation	19567	23020	23020	Oncology Investigations
567	CA037	CLINICAL EXOME SEQUENCING	12750	15000	15000	Oncology Investigations
568	CA038	CLL PANEL FISH	8500	10000	10000	Oncology Investigations
569	CA039	CML Blast Crisis karyotyping	4713	5545	5545	Oncology Investigations
570	CA040	Combined High Sensitivity JAK2 V617F and Exon12 Mutation Detection	5806	6830	6830	Oncology Investigations
571	CA041	Comprehensive Molecular Testing	16422	19320	19320	Oncology Investigations
572	CA042	Comprehensive Next Generation sequencing assay for Hematolymphoid malignancies	22950	27000	27000	Oncology Investigations
573	CA043	Constitutional karyotyping	4713	5545	5545	Oncology Investigations
574	CA044	Custom Sequencing Assay	9384	11040	11040	Oncology Investigations
575	CA045	DICER1 Mutation	3298	3880	3880	Oncology Investigations
576	CA046	Donor Specific Antibodies (DSA)	6800	8000	8000	Oncology Investigations
577	CA047	EGFR Mutation DETECTION	8075	9500	9500	Oncology Investigations
578	CA048	EGFR Resistance Mutation (T790m Mutation Analysis)	6800	8000	8000	Oncology Investigations
579	CA049	ER PR Her2 Neu	2678	3150	3150	Oncology Investigations
580	CA050	ER/PR/Her2neu, Ki67	4250	5000	5000	Oncology Investigations
581	CA051	Extended Immune subset for Post Allogenic Stem Cell Transplant Monitoring	4250	5000	5000	Oncology Investigations
582	CA052	Factor V Leiden Mutation Detection	5610	6600	6600	Oncology Investigations
583	CA053	FISH for 1p33/TAL1 deletion	4233	4980	4980	Oncology Investigations

CGHS rates for Tier I (X City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
584	CA054	FISH FOR HER2 Neu	8500	10000	10000	Oncology Investigations
585	CA055	FISH for t(10;11)(p12;q14)/MLLT10(AF10)/PICALM	4233	4980	4980	Oncology Investigations
586	CA056	FISH for t(11;19)(q23;p13.1)/KMT2A/ELL	4233	4980	4980	Oncology Investigations
587	CA057	FISH for t(5;11)(q35;p15.5) NUP98/NSD1	4233	4980	4980	Oncology Investigations
588	CA058	FISH for t(6;14)(p21;q32) IGH/CCND3	4233	4980	4980	Oncology Investigations
589	CA059	FISH on Bone marrow Smear(1 marker)	2962	3485	3485	Oncology Investigations
590	CA060	FISH on bone marrow smear(2 markers)	4654	5475	5475	Oncology Investigations
591	CA061	FISH on FFPE - Block /Slide (2 markers)	4046	4760	4760	Oncology Investigations
592	CA062	FISH PANEL FOR MYELOMA	11900	14000	14000	Oncology Investigations
593	CA063	FISH Test for C19MC amplification	10838	12750	12750	Oncology Investigations
594	CA064	FISH test for CDKN2A	6333	7450	7450	Oncology Investigations
595	CA065	FISH test for CEN 10 loss - on Tissue	3528	4150	4150	Oncology Investigations
596	CA066	FISH test for ETV6 break-apart analysis - On Tissue	5925	6970	6970	Oncology Investigations
597	CA067	FISH test for MAML2 break-apart analysis - On Tissue	6086	7160	7160	Oncology Investigations
598	CA068	Fluorescent PCR + fragment length analysis per Amplicon	298	350	350	Oncology Investigations
599	CA069	GeneCORE Somatic 161 Gene Panel (NGS)	25500	30000	30000	Oncology Investigations
600	CA070	Hairy Cell Leukemia Mutation (BRAF V600E) Detection	2967	3490	3490	Oncology Investigations
601	CA071	Hematolymphoid Malignancy At Diagnosis- Cancer Cytogenetics Testing	14548	17115	17115	Oncology Investigations
602	CA072	Hematolymphoid Malignancy Follow-up- Cancer Cytogenetics Testing	12750	15000	15000	Oncology Investigations
603	CA073	Hereditary Cancer Panel	10200	12000	12000	Oncology Investigations
604	CA074	High Sensitivity JAK2 Mutation Detection (V617F)	3919	4610	4610	Oncology Investigations
605	CA075	Histone Mutation Detection Assay	7884	9275	9275	Oncology Investigations
606	CA076	HLA C, DQB Molecular Typing PCR - SSP	6265	7370	7370	Oncology Investigations
607	CA077	HLA Disease Association Next Generation Sequencing HLA-A/B/DRB1/G	3995	4700	4700	Oncology Investigations
608	CA078	HLA Disease Association Sequence based Typing HLA A/B/DRB1	4080	4800	4800	Oncology Investigations

CGHS rates for Tier I (X City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
609	CA079	HLA Drug Hypersensitivity Next Generation Sequencing HLA-A/B/DRB1 HLA-A/B/DRB1/G	3995	4700	4700	Oncology Investigations
610	CA080	HLA Drug Hypersensitivity Typing HLA-A/B/DRB1	4080	4800	4800	Oncology Investigations
611	CA081	HLA Loss Chimerism	10200	12000	12000	Oncology Investigations
612	CA082	HLA-A, B, C, DRB1, DQB1, DPB1 (Sequence Based Typing - SBT)	12750	15000	15000	Oncology Investigations
613	CA083	HLA-A, B, DRB1 (Sequence Based Typing - SBT)	8500	10000	10000	Oncology Investigations
614	CA084	HLA-A, B, DRB1(Sequence Specific Oligonucleotide - SSO)	6630	7800	7800	Oncology Investigations
615	CA085	HLA-C, DQB1(Sequence Specific Oligonucleotide - SSO)	4420	5200	5200	Oncology Investigations
616	CA086	HRR Gene Test	26350	31000	31000	Oncology Investigations
617	CA087	IGH Characterization IGH/CCND1:t(11;14), IGH/BCL2:t(14;18),BCL6(3q27), MYC(8q24) (4markers	4505	5300	5300	Oncology Investigations
618	CA088	IgH/BCL2 :t(14;18)	3987	4690	4690	Oncology Investigations
619	CA089	IGHV Gene Mutation	6375	7500	7500	Oncology Investigations
620	CA090	Interphase FISH test for Chr. 1 copy number variations	9095	10700	10700	Oncology Investigations
621	CA091	IRFA/DUSP22 gene rearrangement by FISH	13243	15580	15580	Oncology Investigations
622	CA092	JAK2 Exon 12 Mutation Detection	3919	4610	4610	Oncology Investigations
623	CA093	JAK2V617 MUTATION, WITH REFLEX TO JAK2 EX-12,CALR EX-9 MUTATION AND MPL W515, S505 MUTATION	9775	11500	11500	Oncology Investigations
624	CA094	KI67	1105	1300	1300	Oncology Investigations
625	CA095	KIR Typing	4930	5800	5800	Oncology Investigations
626	CA096	KMT2A Characterization for AML	6711	7895	7895	Oncology Investigations
627	CA097	KMT2A Characterization for B-ALL	5181	6095	6095	Oncology Investigations
628	CA098	KRAS + NRAS + BRAF + Mutation Profile	11730	13800	13800	Oncology Investigations
629	CA099	Lineage specific Chimerism - B Cell, T Cell and NK Cells	6120	7200	7200	Oncology Investigations
630	CA100	Liquid Biopsy (Onco)	25500	30000	30000	Oncology Investigations
631	CA101	Lung Basic Panel By NGS	25500	30000	30000	Oncology Investigations
632	CA102	Lymphoma Panel	5925	6970	6970	Oncology Investigations

CGHS rates for Tier I (X City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
633	CA103	Lymphoplasmacytic Leukemia / Waldenstroms Macroglobulinemia Mutation (MYD88 L265P) Detection	2967	3490	3490	Oncology Investigations
634	CA104	MDS Panel	5925	6970	6970	Oncology Investigations
635	CA105	MECOM (EVI1) rearrangement: inv(3)(q21.3q26.2)/t(3;3)	3987	4690	4690	Oncology Investigations
636	CA106	MGMT PCR	6919	8140	8140	Oncology Investigations
637	CA107	Miscellaneous Profile I(1 marker)	2962	3485	3485	Oncology Investigations
638	CA108	Miscellaneous profile II(2 markers)	4654	5475	5475	Oncology Investigations
639	CA109	MLPA per gene	3400	4000	4000	Oncology Investigations
640	CA110	Monosomy 5/deletion 5q	2962	3485	3485	Oncology Investigations
641	CA111	Monosomy 7/deletion 7q	2962	3485	3485	Oncology Investigations
642	CA112	MPN (Myelo Proliferative Neoplasm)PANEL	10200	12000	12000	Oncology Investigations
643	CA113	MSI (Micro Satellite Instability) and MMR (Mis Match Repair)	5525	6500	6500	Oncology Investigations
644	CA114	Multigene NGS Germline Panel	15300	18000	18000	Oncology Investigations
645	CA115	Multiple Myeloma (MM) Panel	12640	14870	14870	Oncology Investigations
646	CA116	Multiple Myeloma High Risk Markers (4 Markers)	4505	5300	5300	Oncology Investigations
647	CA117	Multiple Myeloma Screening Panel	6800	8000	8000	Oncology Investigations
648	CA118	MYD88 L265 Mutation Detection Test	5746	6760	6760	Oncology Investigations
649	CA119	Myelodysplastic Syndromes karyotyping	4713	5545	5545	Oncology Investigations
650	CA120	Next generation RNA sequencing assay for Chimeric Trancript in Hematolymphod malignancies	14450	17000	17000	Oncology Investigations
651	CA121	Next Generation sequencing assay for Minimal residual disease(MRD) for NPM mutated AML	22950	27000	27000	Oncology Investigations
652	CA122	NGS HLA Typing	8500	10000	10000	Oncology Investigations
653	CA123	NGS Platform-extended Panel >50 gene	30600	36000	36000	Oncology Investigations
654	CA124	NGS Platform-limited Panel(10 Genes)	15300	18000	18000	Oncology Investigations
655	CA125	NRAS (Neuroblastoma RAS) Gene	2975	3500	3500	Oncology Investigations
656	CA126	Panel Reactive Antibodies (PRA) class I	2550	3000	3000	Oncology Investigations

CGHS rates for Tier I (X City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
657	CA127	Panel Reactive Antibodies (PRA) class II	2550	3000	3000	Oncology Investigations
658	CA128	PCR + Sanger Sequencing per Amplicon	723	850	850	Oncology Investigations
659	CA129	PDGFRA (4q12), PDGFRB (5q33), FGFR1 (8p11.2) rearrangement	5181	6095	6095	Oncology Investigations
660	CA130	PDGFRA rearrangement: 4q12	3987	4690	4690	Oncology Investigations
661	CA131	PDGFRB rearrangement: 5q33	3987	4690	4690	Oncology Investigations
662	CA132	PDL 1	4250	5000	5000	Oncology Investigations
663	CA133	PDL-1-28-8 (FDA Approved)	6375	7500	7500	Oncology Investigations
664	CA134	Ph: t(9;22) karyotyping	3362	3955	3955	Oncology Investigations
665	CA135	Ph-like ALL Panel (4 Markers)	4505	5300	5300	Oncology Investigations
666	CA136	PIK3CA GENE MUTATION	4590	5400	5400	Oncology Investigations
667	CA137	PIK3CA Mutation Testing	4845	5700	5700	Oncology Investigations
668	CA138	Ploidy analysis	3362	3955	3955	Oncology Investigations
669	CA139	PML-RARA t(15;17), variants	4450	5235	5235	Oncology Investigations
670	CA140	PRA Screen	2550	3000	3000	Oncology Investigations
671	CA141	PTPRT: Deletion 20q	3987	4690	4690	Oncology Investigations
672	CA142	RARA Variant - ZBTB16 / RARA : t(11;17) (1 marker)	2576	3030	3030	Oncology Investigations
673	CA143	RHOA Mutation Detection Assay	5925	6970	6970	Oncology Investigations
674	CA144	ROS 1	8262	9720	9720	Oncology Investigations
675	CA145	RQ PCR based assay for MRD monitoring of Acute Leukaemia	8075	9500	9500	Oncology Investigations
676	CA146	RQ-PCR BCR-ABL (P210)	9316	10960	10960	Oncology Investigations
677	CA147	RQ-PCR PML-RARA	9316	10960	10960	Oncology Investigations
678	CA148	RT-PCR Multiplex, Acute Leukaemia Panel	6205	7300	7300	Oncology Investigations
679	CA149	RT-PCR Multiplex, BCR-ABL (P190, P210)	5398	6350	6350	Oncology Investigations
680	CA150	RT-PCR Nested, IGH Chain Gene Rearrangement /TCR Gene Rearrangement	3919	4610	4610	Oncology Investigations
681	CA151	Single Antigen Class I	11050	13000	13000	Oncology Investigations
682	CA152	Single Antigen Class II	11050	13000	13000	Oncology Investigations

CGHS rates for Tier I (X City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
683	CA153	Slide / Images for Second Opinion- Cancer Cytogenetics	782	920	920	Oncology Investigations
684	CA154	STR Panel studies	3783	4450	4450	Oncology Investigations
685	CA155	Surface Marker Complete Panel	10340	12165	12165	Oncology Investigations
686	CA156	Surface Marker Individual	1615	1900	1900	Oncology Investigations
687	CA157	t(1;22) and Trisomy 21 in Acute Megakaryoblastic Leukemia (AML -M7) (2 Markers)	4046	4760	4760	Oncology Investigations
688	CA158	T-cell Acute Lymphoblastic Leukemia (T-ALL) Panel	12895	15170	15170	Oncology Investigations
689	CA159	TCR-A rearrangement: 14q11	3987	4690	4690	Oncology Investigations
690	CA160	TERT Promoter Mutation Assay	4934	5805	5805	Oncology Investigations
691	CA161	TFE-3 FISH	10268	12080	12080	Oncology Investigations
692	CA162	TPMT (Thiopurine Methyl Transferase) Genotyping	4335	5100	5100	Oncology Investigations
693	CA163	Trisomy 12	2061	2425	2425	Oncology Investigations
694	CA164	Trisomy 21	2061	2425	2425	Oncology Investigations
695	CA165	Trisomy 4, 10 & 17	2962	3485	3485	Oncology Investigations
696	CA166	Trisomy 8	2061	2425	2425	Oncology Investigations
697	CA167	V Beta Repertoire Analysis by Flow Cytometry for T-Cell Clonality	10340	12165	12165	Oncology Investigations
698	CA168	XX/XY (Chimerism Studies) in Sex mismatch Bone Marrow Transplantation (BMT)	2061	2425	2425	Oncology Investigations
699	CT001	Single drug Chemotherapy	1445	1700	1700	Chemotherapy
700	CT002	Multiple drugs Chemotherapy/Targeted therapy/Immunotherapy	1955	2300	2300	Chemotherapy
701	CT003	Neoadjuvant Chemotherapy	2295	2700	2700	Chemotherapy
702	CT004	Adjuvant Chemotherapy	1870	2200	2200	Chemotherapy
703	CT005	Concurrent-chemoradiation	1615	1900	1900	Chemotherapy
704	CT006	Intravesical Instillation of BCG excluding the cost of BCG	2550	3000	3000	Chemotherapy
705	RT001	Level 1- Brachytherapy (Eye Plaque or SIVA or CVS per insertion or application)	5950	7000	8050	Radiotherapy
706	RT002	Level 2- Brachytherapy (Simple ICA with Xray based 2D planning, ILRT, Endobilliary BCT)	8500	10000	11500	Radiotherapy

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			Non-NABH	NABH	Super Speciality	
707	RT003	Level 3- Brachytherapy (Surface Mould, Radical Interstitial BCT, Intraoperative Template or interstitial brachytherapy catheter insertion)	21250	25000	28750	Radiotherapy
708	RT004	Level 4- Brachytherapy (ICA with CT based Planning)	25500	30000	34500	Radiotherapy
709	RT005	Level 5- Brachytherapy (Complex ICA with interstitial with CT or MR based planning)	34000	40000	46000	Radiotherapy
710	RT006	Level 1- Radiation Therapy (1-10 fractions on Cobalt)	12750	15000	17250	Radiotherapy
711	RT007	Level 2- Radiation Therapy (More than 10 fractions on Cobalt OR Upto 10 fractions on LA clinical (without CT or TPS planning) without IGRT OR Hemibody palliative RT (1-2 fractions weekly))	23800	28000	32200	Radiotherapy
712	RT008	Level 3- Radiation Therapy (LA 3D with conventional fractionation of 2-5 Gy OR Weekly hypofractionation of >5 Gy with 3D CRT plan in 1-2 fractions. No IGRT allowed.)	42500	50000	57500	Radiotherapy
713	RT009	Level 4- Radiation therapy (LA 3D with IGRT conventional fractionation of 2- 5 Gy OR Weekly hypofractionation >5 Gy with 3D CRT plan in 1-2 fractions. with IGRT)	53550	63000	72450	Radiotherapy
714	RT010	Level 5- Radiation Therapy (LA IMRT/ Rapid Arc/VMAT with < 5Gy per fraction and <10 IGRT (CBCT or MVCT or EPID) OR Cobalt Radical with LA boost including electron boost OR TSET OR TBI)	127500	150000	172500	Radiotherapy
715	RT011	Level 6- Radiation Therapy (LA 4D/DE or DIBH with 3D CRT/ IMRT/ Rapid Arc/VMAT with >10 IGRT (CBCT or MVCT or EPID) OR LA IMRT/ Rapid Arc/VMAT with <5Gy per fraction and >10 IGRT (CBCT or MVCT or EPID) OR Adaptive RT OR CSI OR Multisite	153000	180000	207000	Radiotherapy

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Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
		treatment outside one FOV or one plan OR SBRT OR SRS OR SRT (per fraction dose >5Gy))				
716	IT001	Radiosynovectomy with Yttrium	21250	25000	28750	Radio-Isotope Therapy
717	IT002	131-Iodine Therapy 51-100mCi	12172	14320	16468	Radio-Isotope Therapy
718	IT003	131-Iodine Therapy >100mCi	16809	19775	22741	Radio-Isotope Therapy
719	IT004	Samarium-153 therapy for metastatic bone pain palliation	17043	20050	23058	Radio-Isotope Therapy
720	IT005	131-Iodine Therapy <15mCi	6299	7410	8522	Radio-Isotope Therapy
721	IT006	131-Iodine Therapy 15-50mCi	9486	11160	12834	Radio-Isotope Therapy
722	IT007	Phosphorus-32 therapy for metastatic bone pain palliation	12040	14165	16290	Radio-Isotope Therapy
723	PT001	Cervical Traction (per session)	255	300	300	Physiotherapy
724	PT002	Lumbar Traction (per session)	255	300	300	Physiotherapy
725	PT003	Exercises /Post Natal Exercises/Prenatal Exercises/Therapeutic Exercises/Orthopaedic Rehabilitation (Joint Replacement/Post Surgery)/Hand Rehab (per session)	255	300	300	Physiotherapy
726	PT004	Chest Physiotherapy/ Breathing Exercise &Postural Drainage per Session/Post Covid Rehabilitation /Pulmonary Rehabilitation/Cardiac Rehabilitation (per session)	255	300	300	Physiotherapy
727	PT005	Ultra Sonic Therapy /Short Wave Diathermy / Microwave/ Long Wave Diathermy /Infrared/IFT) (per session)	255	300	300	Physiotherapy
728	PT006	Electrical Muscle Stimulation/Cryotherapy/TENS (per session)	340	400	400	Physiotherapy
729	PT007	Hot Pack/ Cold Pack/Wax Bath/Moist Heat (per session)	255	300	300	Physiotherapy
730	PT008	Shock Wave Therapy/Matrix Rhythm Therapy/Laser/PEMF -Pulse Electro Magnetic Therapy (per session)	340	400	400	Physiotherapy

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Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
731	PT009	Gait Assessment (per session)	510	600	600	Physiotherapy
732	PT010	Gait Training (per session)	255	300	300	Physiotherapy
733	PT011	Tilt Training/Neuro-Rehab Basic (per session)	255	300	300	Physiotherapy
734	PT012	Neuro Rehabilitation Advanced (per session)	680	800	800	Physiotherapy
735	PT013	Paediatric Rehabilitation (per session)	255	300	300	Physiotherapy
736	BT001	Speech Therapy per session of at least 40 minutes	340	400	400	Behavioural Therapy
737	BT002	Occupational Therapy per session of at least 40 minutes	340	400	400	Behavioural therapy
738	BT003	Applied Behaviour Analysis based behaviour therapy (ABA based Behaviour therapy) per session of at least 40 minutes	340	400	400	Behavioural therapy
739	BT004	Special education per session of at least 40 minutes	340	400	400	Behavioural therapy
740	BT005	Biofeedback per session	2550	3000	3000	Behavioural therapy
741	DI001	Intraoral Periapical (IOPA) Radiograph X-ray/RVG(Single Film)	170	200	200	Dental Investigation
742	DI002	Intraoral Occlusal/Bite Wing X-Ray	255	300	300	Dental Investigation
743	DI003	Digital OPG with X ray film/ CD	425	500	500	Dental Investigation
744	DI004	Biopsy of Oral tissue- Soft	1020	1200	1200	Dental Biopsy
745	DI005	Biopsy of Oral tissue - Hard (bone, tooth)	1700	2000	2000	Dental Biopsy
746	DP001	Abscess - Drainage-Dental	1275	1500	1500	Dental Procedure
747	DP002	Scaling	850	1000	1000	Dental Procedure
748	DP003	Curettage and Root Planning - Per Tooth	298	350	350	Dental Procedure
749	DP004	Curettage and Root Planning - Per Arch	1700	2000	2000	Dental Procedure
750	DP005	Gingivoplasty - Per Quadrant	850	1000	1000	Dental Procedure
751	DP006	Gingivectomy - Per Quadrant	1020	1200	1200	Dental Procedure
752	DP007	Flap Surgery- Per Tooth	383	450	450	Dental Procedure
753	DP008	Flap Surgery- Per Quadrant	1700	2000	2000	Dental Procedure
754	DP009	Flap Surgery and Bone Graft per quadrant	2550	3000	3000	Dental Procedure
755	DP010	Extraction - Normal Tooth	340	400	400	Dental Procedure
756	DP011	Complicated Extraction per tooth under LA	680	800	800	Dental Procedure

CGHS rates for Tier I (X City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
757	DP012	Extraction Impacted - Soft tissue/ 3rd Molar/wisdom tooth extraction	1700	2000	2000	Dental Procedure
758	DP013	Multiple Extraction and Treatment Procedures for Special Children, Patients with Systemic Diseases, Patient with Special Needs Which Requires Admission and Treatment Under GA	5100	6000	6000	Dental Procedure
759	DP014	Extraction - Orthodontic Extraction	638	750	750	Dental Procedure
760	DP015	Operculectomy- Pericoronal flap excision	1700	2000	2000	Dental Procedure
761	DP016	Extraction Impacted – Bony	4250	5000	5000	Dental Procedure
762	DP017	Alveoloplasty - Per Tooth	255	300	300	Dental Procedure
763	DP018	Alveoloplasty - Per Quadrant	1020	1200	1200	Dental Procedure
764	DP019	Frenectomy	2125	2500	2500	Dental Procedure
765	DP020	Excision of hyperplastic tissue - per arch	1020	1200	1200	Dental Procedure
766	DP021	Surgical Augmentation/Alveolectomy per Arch	2975	3500	3500	Dental Procedure
767	DP022	Bone replacement graft for ridge preservation - per site	1700	2000	2000	Dental Procedure
768	DP023	Minor oral surgery, cyst, granuloma, residual infection, mucocele, epulis under LA	1700	2000	2000	Dental Procedure
769	DP024	Application of Desensitizing Medicament	425	500	500	Dental Procedure
770	DP025	Fluoride Application for Children	850	1000	1000	Dental Procedure
771	DP026	Temporary restoration	128	150	150	Dental Procedure
772	DP027	Glass ionomer Cement Restoration	510	600	600	Dental Procedure
773	DP028	Composite - Occlusal Pit/Class I	425	500	500	Dental Procedure
774	DP029	Composite -Class I with buccal extension/Class II Class III/Class IV/Class VI/Diastema Closure/MOD	850	1000	1000	Dental Procedure
775	DP030	RCT-Single Rooted tooth	1700	2000	2000	Dental Procedure
776	DP031	RCT Multiple root and/ canal tooth	2550	3000	3000	Dental Procedure
777	DP032	Re-RCT - Anterior	2125	2500	2500	Dental Procedure
778	DP033	Re-RCT - Posterior	2550	3000	3000	Dental Procedure
779	DP034	Medication -intracanal medicament (only lesion cases)	425	500	500	Dental Procedure

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Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
780	DP035	Apicectomy-Single tooth	1700	2000	2000	Dental Procedure
781	DP036	Apicectomy-Multiple tooth	2550	3000	3000	Dental Procedure
782	DP037	Apexification with any bio-compatible material	1700	2000	2000	Dental Procedure
783	DP038	Root end resection and Retro grade filling	2550	3000	3000	Dental Procedure
784	DP039	Surgical - Apicectomy/ Periapical surgery without bone grafting	595	700	700	Dental Procedure
785	DP040	Tissue Conditioning, Maxillary/Mandibular	255	300	300	Dental Procedure
786	DP041	Core build-up/ Post and Core - Custom made /Inlay/onlay	1275	1500	1500	Dental Procedure
787	DP042	Crown lengthening - Per Tooth	425	500	500	Dental Procedure
788	DP043	Crown - PMMA Crown	850	1000	1000	Dental Procedure
789	DP044	Crown - All Metal-Nickel Free	1700	2000	2000	Dental Procedure
790	DP045	Crown - Metal with Ceramic Facing	2550	3000	3000	Dental Procedure
791	DP046	Crown - Recementation	510	600	600	Dental Procedure
792	DP047	Crown - Removal	425	500	500	Dental Procedure
793	DP048	Odontoplasty /Enameloplasty	425	500	500	Dental Procedure
794	DP049	Pulpectomy (Anterior Tooth)	1700	2000	2000	Dental Procedure
795	DP050	Pulpectomy (Posterior Tooth)	2550	3000	3000	Dental Procedure
796	DP051	Pulpotomy	850	1000	1000	Dental Procedure
797	DP052	Veneer - Ceramic paediatric	2550	3000	3000	Dental Procedure
798	DP053	Interceptive Orthodontic Treatment of the Primary Dentition/Transition Dentition	5950	7000	7000	Dental Procedure
799	DP054	Limited Orthodontic Treatment of the Primary Dentition	4250	5000	5000	Dental Procedure
800	DP055	Occlusion Analysis/Adjustment/Occlusal Equilibration	425	500	500	Dental Procedure
801	DP056	Tooth Splinting -General	1275	1500	1500	Dental Procedure
802	DP057	Splinting - Periodontally weak teeth	1530	1800	1800	Dental Procedure
803	DP058	Night Guard	1700	2000	2000	Dental Procedure
804	DP059	Bridge/ Fixed Partial denture (per missing/ extracted tooth) metal crown	1700	2000	2000	Dental Procedure
805	DP060		2550	3000	3000	Dental Procedure

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			Non-NABH	NABH	Super Speciality	
		Bridge/ Fixed Partial denture (per missing/ extracted tooth) metal crown with Ceramic facing				
806	DP061	Removable Partial Denture - Flexible Per Arch	6375	7500	7500	Dental Procedure
807	DP062	Removable Partial Denture - Cast Metal Up to 3 Teeth	3400	4000	4000	Dental Procedure
808	DP063	Removable Partial Denture - Cast Metal (additional Per tooth)	255	300	300	Dental Procedure
809	DP064	Removable Partial Denture - Acrylic Up to 3 teeth	1700	2000	2000	Dental Procedure
810	DP065	Removable Partial Denture - Tooth Addition (per tooth)	255	300	300	Dental Procedure
811	DP066	Add Clasp to existing Partial Denture	425	500	500	Dental Procedure
812	DP067	Add Tooth to existing Partial Denture	340	400	400	Dental Procedure
813	DP068	Tooth Supported Overdenture Per Arch	6375	7500	7500	Dental Procedure
814	DP069	Complete Denture - Per Arch	8500	10000	10000	Dental Procedure
815	DP070	Removable orthodontic appliance / Post Orthodontic R O A -per arch	2125	2500	2500	Dental Procedure
816	DP071	Fixed orthodontic per arch	12750	15000	15000	Dental Procedure
817	DP072	Space Maintainers - Fixed	3400	4000	4000	Dental Procedure
818	DP073	Minor Treatment to Control Habits-Removable Appliance Therapy	2125	2500	2500	Dental Procedure
819	DP074	Minor Treatment to Control Habits-Fixed Appliance Therapy	3400	4000	4000	Dental Procedure
820	DP075	Functional orthodontic appliance	5100	6000	6000	Dental Procedure
821	DP076	Feeding appliance for Cleft Palate	4250	5000	5000	Dental Procedure
822	DP077	Expansion plate	5525	6500	6500	Dental Procedure
823	DP078	Maxillofacial Prosthesis -Sal/auricular/orbital/Nasal/Palatal/facial lost/ Speech Aid	5950	7000	7000	Dental Procedure
824	DP079	Obturator Prosthesis - Surgical/Definitive/Modification	4250	5000	5000	Dental Procedure
825	DP080	Removal of - Lateral Exostosis/Torus Mandibularis/Torus Palatines/Surgical reduction of Osseous Tuberosity	2550	3000	3000	Dental Procedure
826	DP081	Sialolithotomy/Sialodocotomy/ Closure of Salivary Fistula	1700	2000	2000	Dental Procedure
827	DP082	Excision of Salivary gland	12750	15000	15000	Dental Procedure
828	DP083	Release of fibrous bands & grafting in (OSMF) treatment under GA	17000	20000	20000	Dental Procedure
829	DP084	Facial Space Abscess	4250	5000	5000	Dental Procedure

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			Non-NABH	NABH	Super Speciality	
830	DP085	Partial Ostectomy / sequestrectomy for removal of non-vital bone	1700	2000	2000	Dental Procedure
831	DP086	Alveolus – Closed Reduction stabilization of Teeth	3400	4000	4000	Dental Procedure
832	DP087	Alveolus – Open Reduction stabilization of Teeth	5100	6000	6000	Dental Procedure
833	DP088	Arch bar fixation	4250	5000	5000	Dental Procedure
834	DP089	Oroantral Fistula closure	4250	5000	5000	Dental Procedure
835	DP090	Osseous, Oste periosteal, or Cartilage graft of the Mandible or Maxilla - autogenous or non-autogenous bone graft	2550	3000	3000	Dental Procedure
836	DP091	Osteoplasty - for Orthognathic deformities/ Mandibular Rami/ Body of Mandible	25500	30000	30000	Dental Procedure
837	DP092	Maxilla - Closed Reduction	5100	6000	6000	Dental Procedure
838	DP093	Maxilla - Open Reduction	8500	10000	10000	Dental Procedure
839	DP094	Mandible - Closed Reduction	5100	6000	6000	Dental Procedure
840	DP095	Mandible – Open Reduction	8500	10000	10000	Dental Procedure
841	DP096	Cyst of Maxilla/mandible by enucleation/excision/marsupialization upto 4 cms under LA	4250	5000	5000	Dental Procedure
842	DP097	Cyst of Maxilla/mandible by enucleation/excision/marsupialization more than 4 cms under LA	5100	6000	6000	Dental Procedure
843	DP098	Cyst of Maxilla/mandible by enucleation/excision/marsupialization more than 4 cms under GA and admission	21250	25000	25000	Dental Procedure
844	DP099	Temporomandibular(TM) joint ankylosis- under GA/Open /Closed Reduction	17000	20000	20000	Dental Procedure
845	DP100	Segmental / Hemi Mandibulectomy with graft	21250	25000	25000	Dental Procedure
846	DP101	Segmental /Hemi Mandibulectomy without graft	17000	20000	20000	Dental Procedure
847	DP102	Sub-Total mandibulectomy with graft	29750	35000	35000	Dental Procedure
848	DP103	Sub-Total mandibulectomy without graft	25500	30000	30000	Dental Procedure
849	DP104	Maxillectomy/Mandibulectomy- Total with graft	29750	35000	35000	Dental Procedure
850	DP105	Maxillectomy/Mandibulectomy- Total without graft	25500	30000	30000	Dental Procedure

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			Non-NABH	NABH	Super Speciality	
851	DP106	Maxillectomy- partial with graft	21250	25000	25000	Dental Procedure
852	DP107	Maxillectomy- partial without graft	17000	20000	20000	Dental Procedure
853	DP108	Malar and/or Zygomatic arch - Closed Reduction	5100	6000	6000	Dental Procedure
854	DP109	Malar and/or Zygomatic arch - Open Reduction	8500	10000	10000	Dental Procedure
855	DP110	Distraction osteogenesis of mandible or maxilla under GA	25500	30000	30000	Dental Procedure
856	DP111	Facial bones - Complicated Reduction with fixation	38250	45000	45000	Dental Procedure
857	OI001	Refraction with auto refraction - Both Eyes	170	200	200	Ophthalmology Investigation
858	OI002	Indirect Ophthalmoscopy (Fundoscopy) - Both Eyes	255	300	300	Ophthalmology Investigation
859	OI003	Orthoptic check-up- with synoptophore- Both Eyes	170	200	200	Ophthalmology Investigation
860	OI004	Lees' charting or Hess' charting- Both Eyes	255	300	300	Ophthalmology Investigation
861	OI005	Perimetry (Visual Field Testing) -Goldman- Both Eyes	425	500	500	Ophthalmology Investigation
862	OI006	Perimetry /Humphrey Visual Field (HVF) test- Automated- Both Eyes	680	800	800	Ophthalmology Investigation
863	OI007	Fluorescein angiography for fundus or iris- Both Eyes	1700	2000	2000	Ophthalmology Investigation
864	OI008	Indocyanine green angiography - Both Eyes	1700	2000	2000	Ophthalmology Investigation
865	OI009	Ultrasound A- Scan/optical biometry[lenstar, IOL master] - Both Eyes	850	1000	1000	Ophthalmology Investigation
866	OI010	Ultrasound B- Scan - Both Eyes	425	500	500	Ophthalmology Investigation

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			Non-NABH	NABH	Super Speciality	
867	OI011	Fundus Photo Test /disc photo for glaucoma- Both Eyes	425	500	500	Ophthalmology Investigation
868	OI012	Corneal endothelial cell count with specular microscopy- Both Eyes	510	600	600	Ophthalmology Investigation
869	OI013	Corneal topography /pentacam- Both Eyes	1700	2000	2000	Ophthalmology Investigation
870	OI014	Corneal pachymetry (corneal thickness)/ CCT - Both Eyes	451	530	530	Ophthalmology Investigation
871	OI015	OCT (Optical Coherence Tomography) /Ocular OCT Angiography - Both Eyes	1785	2100	2100	Ophthalmology Investigation
872	OI016	UBM- Ultrasound bio microscopy- Both Eyes	850	1000	1000	Ophthalmology Investigation
873	OI017	Non Contact tonometry (NCT) - Both Eyes	128	150	150	Ophthalmology Investigation
874	OI018	IOP measurement with Schiotz - Both Eyes	85	100	100	Ophthalmology Investigation
875	OI019	IOP measurement with applanation tonometry - Both Eyes	170	200	200	Ophthalmology Investigation
876	OI020	Diurnal variation of IOP - Both Eyes	1275	1500	1500	Ophthalmology Investigation
877	OI021	90 D lens examination/Three mirror examination for retina - Both Eyes	128	150	150	Ophthalmology Investigation
878	OI022	Gonioscopy- Both Eyes	255	300	300	Ophthalmology Investigation
879	OI023	EOG- Electrooculogram - Both Eyes	1760	2070	2070	Ophthalmology Investigation
880	OI024	ERG- Electroretinogram- Both Eyes	1530	1800	1800	Ophthalmology Investigation

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			Non-NABH	NABH	Super Speciality	
881	OI025	VEP- visually evoked potential - Both Eyes	1530	1800	1800	Ophthalmology Investigation
882	OI026	X Ray orbit -Bilateral	298	350	350	Ophthalmology Investigation
883	OI027	Dacryocystography - Bilateral	1700	2000	2000	Ophthalmology Investigation
884	OI028	Orbital Angiographical Studies - Bilateral	4250	5000	5000	Ophthalmology Investigation
885	OI029	Neostigmine test - Both Eyes	4250	5000	5000	Ophthalmology Investigation
886	OI030	Lipi View One Eye	765	900	900	Ophthalmology Investigation
887	OI031	Lipi View Both Eyes	1275	1500	1500	Ophthalmology Investigation
888	OI032	Schirmer Test	255	300	300	Ophthalmology Investigation
889	OI033	Vitreous biopsy per eye	4250	5000	5000	Ophthalmology Biopsy
890	OP001	Subconjunctival/sub-tenon’s injections in one eye	425	500	500	Ophthalmology Procedure
891	OP002	Subconjunctival/sub-tenon’s injections in both eyes	680	800	800	Ophthalmology Procedure
892	OP003	Pterygium surgery with auto conjunctival graft per eye	11390	13400	13400	Ophthalmology Procedure
893	OP004	Conjunctival Peritomy per eye	1275	1500	1500	Ophthalmology Procedure
894	OP005	Conjunctival wound repair or exploration following blunt trauma per eye	7225	8500	8500	Ophthalmology Procedure
895	OP006	Removal of corneal foreign body	340	400	400	Ophthalmology Procedure
896	OP007	Cauterization of ulcer/subconjunctival injection in one eye	425	500	500	Ophthalmology Procedure
897	OP008	Cauterization of ulcer/subconjunctival injection in both eyes	680	800	800	Ophthalmology Procedure
898	OP009	Corneal grafting—Penetrating keratoplasty per eye	17000	20000	20000	Ophthalmology Procedure
899	OP010	Bandage contact lenses for corneal perforation/PED per eye	1700	2000	2000	Ophthalmology Procedure

CGHS rates for Tier I (X City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
900	OP011	Scleral grafting or conjunctival flap for corneal perforation per eye	7225	8500	8500	Ophthalmology Procedure
901	OP012	Keratoconus correction with therapeutic contact lenses - Both Eyes	7225	8500	8500	Ophthalmology Procedure
902	OP013	Ultraviolet (UV) radiation for cross-linking for keratoconus /C3R/KXL - Both Eyes	17000	20000	20000	Ophthalmology Procedure
903	OP014	EDTA for band shaped keratopathy - Both Eyes	2550	3000	3000	Ophthalmology Procedure
904	OP015	Arcuate keratotomy for astigmatism /Limbal Relaxing Incision - Both Eyes	5780	6800	6800	Ophthalmology Procedure
905	OP016	Re-suturing (Primary suturing) of corneal wound per eye	4250	5000	5000	Ophthalmology Procedure
906	OP017	Penetrating keratoplasty with glaucoma surgery per eye	29750	35000	35000	Ophthalmology Procedure
907	OP018	Penetrating keratoplasty with vitrectomy per eye	29750	35000	35000	Ophthalmology Procedure
908	OP019	Penetrating keratoplasty with IOL implantation per eye	29750	35000	35000	Ophthalmology Procedure
909	OP020	DALK- Deep anterior lamellar keratoplasty per eye	36550	43000	43000	Ophthalmology Procedure
910	OP021	Keratoprosthesis stage I and II per eye	36550	43000	43000	Ophthalmology Procedure
911	OP022	DSAEK Descemet's stripping automated endothelial keratoplasty/DMEK-Descemet membrane endothelial keratoplasty per eye	36550	43000	43000	Ophthalmology Procedure
912	OP023	ALTK- Automated lamellar therapeutic keratoplasty per eye	36550	43000	43000	Ophthalmology Procedure
913	OP024	Bleb repair with conjunctival autograft per eye	12750	15000	15000	Ophthalmology Procedure
914	OP025	Bleb compression sutures per eye	5950	7000	7000	Ophthalmology Procedure
915	OP026	Bleb needling with MMC/5-FU per eye	6800	8000	8000	Ophthalmology Procedure
916	OP027	Probing and Syringing of lacrimal sac- in one eye	850	1000	1000	Ophthalmology Procedure
917	OP028	Probing and Syringing of lacrimal sac- in both eye	1275	1500	1500	Ophthalmology Procedure
918	OP029	Dacryocystorhinostomy-Plain	11390	13400	13400	Ophthalmology Procedure
919	OP030	Dacryocystorhinostomy-Plain with intubation and/or with lacrimal implants excluding the cost of implant per eye	17000	20000	20000	Ophthalmology Procedure
920	OP031	Dacryocystorhinostomy-conjunctival with implant excluding the cost of implant per eye	17000	20000	20000	Ophthalmology Procedure
921	OP032	Canaliculoplasty per eye	4497	5290	5290	Ophthalmology Procedure
922	OP033	Dacryocystectomy per eye	7820	9200	9200	Ophthalmology Procedure

CGHS rates for Tier I (X City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
923	OP034	Punctal plugs for dry eyes - Both Eyes	383	450	450	Ophthalmology Procedure
924	OP035	Chalazion incision and curettage in one eye	1700	2000	2000	Ophthalmology Procedure
925	OP036	Chalazion incision and curettage in both eyes	2550	3000	3000	Ophthalmology Procedure
926	OP037	Ptosis surgery with Fasanella-Servat procedure /Ptosis surgery with LPS resection one lid Ptosis surgery with Sling surgery one lid	17000	20000	20000	Ophthalmology Procedure
927	OP038	Ectropion surgery- one lid	7225	8500	8500	Ophthalmology Procedure
928	OP039	Ectropion surgery- both lids	11390	13400	13400	Ophthalmology Procedure
929	OP040	Epicanthus correction - Both Eyes	7225	8500	8500	Ophthalmology Procedure
930	OP041	Cantholysis and canthotomy- Both Eyes	2975	3500	3500	Ophthalmology Procedure
931	OP042	Entropion surgery- one lid	7225	8500	8500	Ophthalmology Procedure
932	OP043	Entropion surgery- both lids	11390	13400	13400	Ophthalmology Procedure
933	OP044	Tarsorrhaphy- Both Eyes	2550	3000	3000	Ophthalmology Procedure
934	OP045	Suturing of lid lacerations- Both Eyes	4250	5000	5000	Ophthalmology Procedure
935	OP046	Lid retraction repair per eye	7225	8500	8500	Ophthalmology Procedure
936	OP047	Concretions removal- Both Eyes	425	500	500	Ophthalmology Procedure
937	OP048	Bucket handle procedure for lid tumours per eye (for non-malignant conditions)	11390	13400	13400	Ophthalmology Procedure
938	OP049	Eyelid reconstruction with flap one eye	17000	20000	20000	Ophthalmology Procedure
939	OP050	Eyelid reconstruction with flap both eyes	21250	25000	25000	Ophthalmology Procedure
940	OP051	Cheek rotation flap for lid tumours per eye (for non-malignant conditions)	17000	20000	20000	Ophthalmology Procedure
941	OP052	Orbitotomy per eye	23375	27500	27500	Ophthalmology Procedure
942	OP053	Enucleation per eye(for non-malignant conditions)	11390	13400	13400	Ophthalmology Procedure
943	OP054	Enucleation with orbital implants and artificial (Cost of implants included) per eye	17000	20000	20000	Ophthalmology Procedure
944	OP055	Evisceration per eye	11390	13400	13400	Ophthalmology Procedure
945	OP056	Evisceration with orbital implants and artificial (Cost of implants included) prosthesis per eye	17000	20000	20000	Ophthalmology Procedure

CGHS rates for Tier I (X City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
946	OP057	Telecanthus correction- Both Eyes	11390	13400	13400	Ophthalmology Procedure
947	OP058	Orbital decompression /with incision or excision biopsy per eye	29750	35000	35000	Ophthalmology Procedure
948	OP059	Exenteration per eye	17000	20000	20000	Ophthalmology Procedure
949	OP060	Exenteration with skin grafting per eye	29750	35000	35000	Ophthalmology Procedure
950	OP061	Fracture orbital repair per eye	29750	35000	35000	Ophthalmology Procedure
951	OP062	Retinal laser procedures -green laser for PRP,retinal tears, ROP,endolaser per eye	2975	3500	3500	Ophthalmology Procedure
952	OP063	Retinal detachment surgery (RDS) per eye	23375	27500	27500	Ophthalmology Procedure
953	OP064	Retinal detachment surgery (RDS) with scleral buckling per eye	29750	35000	35000	Ophthalmology Procedure
954	OP065	Buckle removal per eye	7225	8500	8500	Ophthalmology Procedure
955	OP066	Silicone oil removal per eye	7820	9200	9200	Ophthalmology Procedure
956	OP067	Anterior retinal cryopexy per eye	4250	5000	5000	Ophthalmology Procedure
957	OP068	Squint correction for one eye	11390	13400	13400	Ophthalmology Procedure
958	OP069	Squint correction for both eyes	17000	20000	20000	Ophthalmology Procedure
959	OP070	Trabeculectomy per eye	17000	20000	20000	Ophthalmology Procedure
960	OP071	Trabeculotomy /kahook dual blade goniotomy excluding blade cost per eye	17000	20000	20000	Ophthalmology Procedure
961	OP072	Trabeculectomy with Trabeculotomy- Both Eyes	29750	35000	35000	Ophthalmology Procedure
962	OP073	Microincisional trabeculectomy(MIT) per eye	21250	25000	25000	Ophthalmology Procedure
963	OP074	Surgical posterior capsulotomy one eye	8500	10000	10000	Ophthalmology Procedure
964	OP075	Goniotomy per eye	4250	5000	5000	Ophthalmology Procedure
965	OP076	Glaucoma surgery with Glaucoma valves (Cost of Valve extra) per eye	17000	20000	20000	Ophthalmology Procedure
966	OP077	Cost of the Glaucoma valve/Glaucoma Ahmed valve per eye	15000	15000	15000	Ophthalmology Procedure
967	OP078	AC wash per eye	4250	5000	5000	Ophthalmology Procedure
968	OP079	Endocyclophotocoagulation per eye	15300	18000	18000	Ophthalmology Procedure
969	OP080	Cyclocryotherapy /Trans scleral cyclophotocoagulation TSCPC per eye	4250	5000	5000	Ophthalmology Procedure
970	OP081	YAG Laser iridotomy / Hyaloidotomy/Laser suture lysis post trabeculectomy per eye	4250	5000	5000	Ophthalmology Procedure
971	OP082	YAG Laser capsulotomy per eye	4250	5000	5000	Ophthalmology Procedure

CGHS rates for Tier I (X City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
972	OP083	ALT-Argon laser trabeculoplasty per eye	4250	5000	5000	Ophthalmology Procedure
973	OP084	TTT- Transpupillary thermal therapy per eye	7225	8500	8500	Ophthalmology Procedure
974	OP085	PTK- Phototherapeutic keratectomy /PRK for keratoconus per eye	11390	13400	13400	Ophthalmology Procedure
975	OP086	Argon/diode laser for retinal detachment per eye	7225	8500	8500	Ophthalmology Procedure
976	OP087	Intralase application for keratoconus /CAIRS Corneal allogenic intrastromal ring segments per eye excluding the cost of the rings	17000	20000	20000	Ophthalmology Procedure
977	OP088	Vitrectomy- pars plana including Fluid air exchange (per eye)	29750	35000	35000	Ophthalmology Procedure
978	OP089	Vitrectomy +membrane peeling +fluid air exchange+endolaser+ gas/silicon oil tamponade per eye	34000	40000	40000	Ophthalmology Procedure
979	OP090	Macular hole surgery- Vitrectomy +membrane peeling + ILM peeling+ fluid air exchange+endolaser+ gas/silicon oil tamponade per eye	34850	41000	41000	Ophthalmology Procedure
980	OP091	Vitrectomy +phaco fragmentation/ IOL drop +/- secondary IOL per eye	21250	25000	25000	Ophthalmology Procedure
981	OP092	Anterior vitrectomy per eye	6800	8000	8000	Ophthalmology Procedure
982	OP093	Membranectomy one eye	10200	12000	12000	Ophthalmology Procedure
983	OP094	Membranectomy both eyes	12750	15000	15000	Ophthalmology Procedure
984	OP095	Intravitreal injections of antibiotics excluding the cost of the antibiotic per eye	4250	5000	5000	Ophthalmology Procedure
985	OP096	Intravitreal Injection of drugs (Ranibizumab/ Aflibercept etc) excluding the cost of the drug per eye	4250	5000	5000	Ophthalmology Procedure
986	OP097	Intravitreal Insertion of Drug Implant excluding cost of the Drug Implant (Ozurdex,...etc) per eye	5100	6000	6000	Ophthalmology Procedure
987	OP098	Extracapsular cataract extraction (ECCE) with IOL excluding the cost of IOL per eye	11390	13400	13400	Ophthalmology Procedure
988	OP099	Small Incision Cataract Surgery (SICS) with IOL excluding the cost of IOL per eye	11390	13400	13400	Ophthalmology Procedure
989	OP100	Phaco with foldable IOL (silicone and acrylic)/PMMA IOL / MICS surgery excluding the cost of IOL per eye	14450	17000	17000	Ophthalmology Procedure
990	OP101		14450	17000	17000	Ophthalmology Procedure

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Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
		Pars plana lensectomy with/without IOL excluding the cost of IOL per eye				
991	OP102	Secondary IOL implantation- AC IOL PC IOL or scleral fixated IOL excluding the cost of IOL per eye	17000	20000	20000	Ophthalmology Procedure
992	OP103	Cataract extraction with IOL with capsular tension rings (Cionni's ring)(cost of the ring included) excluding the cost of IOL per eye	29750	35000	35000	Ophthalmology Procedure
993	OP104	Paediatric cataract surgery +parsplana capsulotomy + anterior vitrectomy excluding the cost of IOL - one eye	17000	20000	20000	Ophthalmology Procedure
994	OP105	Paediatric cataract surgery +parsplana capsulotomy + anterior vitrectomy excluding the cost of IOL - Both Eyes	21250	25000	25000	Ophthalmology Procedure
995	OP106	IOL exchange [excluding IOL cost] per eye	8500	10000	10000	Ophthalmology Procedure
996	OP107	IOL reposition per eye	5100	6000	6000	Ophthalmology Procedure
997	OP108	IOL explantation per eye	6800	8000	8000	Ophthalmology Procedure
998	OP109	Iridodialysis repair or pupillary reconstruction /Cyclodialysis repair per eye	11390	13400	13400	Ophthalmology Procedure
999	OP110	Iris cyst removal /synechiolysis/surgical iridectomy per eye	4250	5000	5000	Ophthalmology Procedure
1000	OP111	Lid Abscess incision and Drainage per eye	4250	5000	5000	Ophthalmology Procedure
1001	OP112	Orbital Abscess incision and Drainage per eye	7225	8500	8500	Ophthalmology Procedure
1002	OP113	Excision Biopsy of lid, conjunctiva, cornea per eye	7820	9200	9200	Ophthalmology Procedure
1003	OP114	Paracentesis (eye) per eye	4250	5000	5000	Ophthalmology Procedure
1004	OP115	Scleral graft for scleral melting or perforation per eye	11390	13400	13400	Ophthalmology Procedure
1005	OP116	Amniotic membrane grafting /symblepharon release with AMG per eye	11390	13400	13400	Ophthalmology Procedure
1006	OP117	Intraocular foreign body removal per eye	7225	8500	8500	Ophthalmology Procedure
1007	OP118	Electrolysis (eye) - Both Eyes	850	1000	1000	Ophthalmology Procedure
1008	OP119	Perforating injury repair (eye) per eye	11390	13400	13400	Ophthalmology Procedure
1009	OP120	Botulinum injection for blepharospasm or squint /epiphora/entropion/lid retraction (excluding cost of drug) per eye	4250	5000	5000	Ophthalmology Procedure

CGHS rates for Tier I (X City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1010	OP121	C3F8 GAS Injection intravitreal for descemetopexy/retinopexy/pneumatopexy (per eye)	4250	5000	5000	Ophthalmology Procedure
1011	OP122	Silicone Oil injection (per eye)	4250	5000	5000	Ophthalmology Procedure
1012	OP123	Epiretinal Membrane (ERM) Peeling (per eye)	5950	7000	7000	Ophthalmology Procedure
1013	OP124	Epiretinal Membrane (ERM) Removal (per eye)	2550	3000	3000	Ophthalmology Procedure
1014	OP125	Internal limiting membrane (ILM) peeling (per eye)	2550	3000	3000	Ophthalmology Procedure
1015	OP126	Punctoplasty (per eye)	5525	6500	6500	Ophthalmology Procedure
1016	OP127	Punctal plug(Collagen/silicone) per eye	3400	4000	4000	Ophthalmology Procedure
1017	OP128	Laser Trabeculoplasty Gonioplasty - Both Eyes	13600	16000	16000	Ophthalmology Procedure
1018	OP129	Eye laser pulse therapy /Lipiflow/IPL [Intense pulse light] per eye	2975	3500	3500	Ophthalmology Procedure
1019	OP130	Malyugin Ring /pupil dilator/iris expander per eye	8500	10000	10000	Ophthalmology Procedure
1020	OP131	Globe exploration per eye	8500	10000	10000	Ophthalmology Procedure
1021	OP132	Scleral Fixation Tissue glue /fibrin glue per eye	7140	8400	8400	Ophthalmology Procedure
1022	OP133	PFCL Injection Per Eye Including Cost of The Drug	2321	2730	2730	Ophthalmology Procedure
1023	OP134	Methylprednisolone Injection IV Infusion per day Excluding the cost of the drug	2125	2500	2500	Ophthalmology Procedure
1024	OP135	Retinoblastoma[RB] EUA both eyes	2550	3000	3000	Ophthalmology Procedure
1025	OP136	RB intravitreal/intravenous/subtenons chemotherapy affected eye excluding the cost of the chemotherapy drug	2975	3500	3500	Ophthalmology Procedure
1026	OP137	RB TTT/ Cryotherapy affected eye	3825	4500	4500	Ophthalmology Procedure
1027	OP138	Plaque brachytherapy-surface affected eye	12750	15000	15000	Ophthalmology Procedure
1028	OP139	Plaque brachytherapy-intraocular affected eye	17000	20000	20000	Ophthalmology Procedure
1029	OP140	Simple limbal stem cell transplant SLET per eye	17000	20000	20000	Ophthalmology Procedure
1030	OP141	Mucous membrane grafting MMG one eyelid	17000	20000	20000	Ophthalmology Procedure
1031	OP142	Mucous membrane grafting MMG two eyelids	21250	25000	25000	Ophthalmology Procedure
1032	OP143	iStent Inject per eye including the cost of consumables and implant	68000	80000	80000	Ophthalmology Procedure
1033	OP144	Orthoptic exercises per session	213	250	250	Ophthalmology Physiotherapy

CGHS rates for Tier I (X City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1034	OP145	Pleoptic exercises per session	213	250	250	Ophthalmology Physiotherapy
1035	EI001	Impedance with stapedial reflex / Impedance Audiometry	510	600	600	ENT Investigation
1036	EI002	Pure Tone Audiogram / Pure Tone Audiometry / PTA	383	450	450	ENT Investigation
1037	EI003	Short Increment Sensitivity Index (SISI) Tone Decay	340	400	400	ENT Investigation
1038	EI004	Speech Assessment	340	400	400	ENT Investigation
1039	EI005	Speech Discrimination Score	340	400	400	ENT Investigation
1040	EI006	Multiple hearing assessment test to Adults	340	400	400	ENT Investigation
1041	EI007	BERA (Brain stem evoked response audiometry)	2125	2500	2500	ENT Investigation
1042	EI008	OAE (Otoacoustic Emission Test)	1071	1260	1260	ENT Investigation
1043	EI009	Hearing Aid Trail	170	200	200	ENT Investigation
1044	EI010	Vestibular Evoked Myogenic Potential (VEMP)	2338	2750	2750	ENT Investigation
1045	EI011	Cold Calorie Test for Vestibular function	510	600	600	ENT Investigation
1046	EI012	Electronystagmography (ENG)	1275	1500	1500	ENT Investigation
1047	EI013	Videonystagmography(VNG)	2125	2500	2500	ENT Investigation
1048	EI014	Video Laryngoscopy	5100	6000	6000	ENT investigation
1049	EI015	Videostroboscopy	4675	5500	5500	ENT Investigation
1050	EI016	Fibreoptic examination of Larynx (FOL) under LA	4250	5000	5000	ENT Investigation
1051	EI017	Fibro optic Nasal Endoscopy	1955	2300	2300	ENT Investigation
1052	EP001	Removal of foreign body From Nose	595	700	700	ENT Procedure
1053	EP002	Removal of foreign body From Ear/otoscopy diagnostic or therapeutic	595	700	700	ENT Procedure
1054	EP003	Syringing (Ear)	425	500	500	ENT Procedure
1055	EP004	Polyp removal under LA (Larynx)	4250	5000	5000	ENT Procedure
1056	EP005	Polyp removal under GA (Larynx)	7820	9200	9200	ENT Procedure
1057	EP006	Peritonsillar abscess Drainage under LA	7225	8500	8500	ENT Procedure
1058	EP007	Myringoplasty	23375	27500	27500	ENT Procedure
1059	EP008	Stapedectomy	23375	27500	27500	ENT Procedure

CGHS rates for Tier I (X City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1060	EP009	Myringotomy with Grommet Insertion	11390	13400	13400	ENT Procedure
1061	EP010	Tympanotomy	23375	27500	27500	ENT Procedure
1062	EP011	Tympanoplasty	29750	35000	35000	ENT Procedure
1063	EP012	Mastoidectomy	29750	35000	35000	ENT Procedure
1064	EP013	Otoplasty	29750	35000	35000	ENT Procedure
1065	EP014	Labyrinthectomy	29750	35000	35000	ENT Procedure
1066	EP015	Skull Base Surgery	45050	53000	53000	ENT Procedure
1067	EP016	Facial Nerve Decompression	36550	43000	43000	ENT Procedure
1068	EP017	Septoplasty	23375	27500	27500	ENT Procedure
1069	EP018	Submucous Resection	11390	13400	13400	ENT Procedure
1070	EP019	Septo-Rhinoplasty	36550	43000	43000	ENT Procedure
1071	EP020	Rhinoplasty- Non-cosmetic	29750	35000	35000	ENT Procedure
1072	EP021	Fracture Reduction of Nasal Bone	11390	13400	13400	ENT Procedure
1073	EP022	Intra Nasal Diathermy	5100	6000	6000	ENT Procedure
1074	EP023	Turbinectomy	11390	13400	13400	ENT Procedure
1075	EP024	Endoscopic Dacryocystorhinostomy (DCR)	29750	35000	35000	ENT Procedure
1076	EP025	Endoscopic Surgery (ENT)	29750	35000	35000	ENT Procedure
1077	EP026	Septal Perforation Repair	23375	27500	27500	ENT Procedure
1078	EP027	Antrum Puncture	2550	3000	3000	ENT Procedure
1079	EP028	Lateral Rhinotomy	17000	20000	20000	ENT Procedure
1080	EP029	Cranio-Facial resection	36550	43000	43000	ENT Procedure
1081	EP030	Angiofibroma Excision	36550	43000	43000	ENT Procedure
1082	EP031	Endoscopic Hypophysectomy	45050	53000	53000	ENT Procedure
1083	EP032	Endoscopic Optic Nerve Decompression	45050	53000	53000	ENT Procedure
1084	EP033	Tonsillectomy	23375	27500	27500	ENT Procedure
1085	EP034	Uvulo-palatoplasty	29750	35000	35000	ENT Procedure
1086	EP035	Functional Endoscopic Sinus Surgery (FESS) for Antrochoanal polyp	29750	35000	35000	ENT Procedure

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Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1087	EP036	Functional Endoscopic Sinus Surgery (FESS) for Ethmoidal polyp	29750	35000	35000	ENT Procedure
1088	EP037	Polyp removal ear	4250	5000	5000	ENT Procedure
1089	EP038	Polyp removal Nose (Septal polyp)	7225	8500	8500	ENT Procedure
1090	EP039	Mastoidectomy plus Ossiculoplasty including TORP (Total Ossicular Replacement Prosthesis) or PORP (Partial Ossicular Replacement Prosthesis)	29750	35000	35000	ENT Procedure
1091	EP040	Endolymphatic sac decompression	36550	43000	43000	ENT Procedure
1092	EP041	Diagnostic endoscopy under GA	4250	5000	5000	ENT Procedure
1093	EP042	Young's operation for Atrophic rhinitis	17000	20000	20000	ENT Procedure
1094	EP043	Vidian neurectomy for vasomotor Rhinitis	23375	27500	27500	ENT Procedure
1095	EP044	Nasal Packing-anterior	2125	2500	2500	ENT Procedure
1096	EP045	Nasal Packing-Posterior	2550	3000	3000	ENT Procedure
1097	EP046	Ranula Excision	17000	20000	20000	ENT Procedure
1098	EP047	Tongue Tie excision	7225	8500	8500	ENT Procedure
1099	EP048	Sub Mandibular Duct Lithotomy	5780	6800	6800	ENT Procedure
1100	EP049	Adenoidectomy	17000	20000	20000	ENT Procedure
1101	EP050	Palatopharyngoplasty	29750	35000	35000	ENT Procedure
1102	EP051	Pharyngoplasty	36550	43000	43000	ENT Procedure
1103	EP052	Styloidectomy	17000	20000	20000	ENT Procedure
1104	EP053	Direct Laryngoscopy including Biopsy under GA	11390	13400	13400	ENT Procedure
1105	EP054	Oesophagoscopy with foreign body removal from Oesophagus	11390	13400	13400	ENT Procedure
1106	EP055	Bronchoscopy with foreign body (FB) removal	11390	13400	13400	ENT Procedure
1107	EP056	Ear Lobe Repair one side	3400	4000	4000	ENT Procedure
1108	EP057	Excision of Pinna for non-cancerous Growth/Injuries - Skin Only	7820	9200	9200	ENT Procedure
1109	EP058	Excision of Pinna for non-cancerous/ Injuries - Skin and Cartilage	11390	13400	13400	ENT Procedure
1110	EP059	Partial Amputation of Pinna	11390	13400	13400	ENT Procedure
1111	EP060	Total Amputation of Pinna	17000	20000	20000	ENT Procedure

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Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1112	EP061	Total Amputation & Excision of External Auditory Meatus	17000	20000	20000	ENT Procedure
1113	EP062	Excision of Cystic Hygroma	17000	20000	20000	ENT Procedure
1114	EP063	Excision of Cystic Hygroma Extensive	23375	27500	27500	ENT Procedure
1115	EP064	Excision of Branchial Cyst	23375	27500	27500	ENT Procedure
1116	EP065	Excision of Branchial Sinus	23375	27500	27500	ENT Procedure
1117	EP066	Excision of Pharyngeal Diverticulum	23375	27500	27500	ENT Procedure
1118	EP067	Excision of Carotid Body / Carotid Body Tumours	36550	43000	43000	ENT Procedure
1119	EP068	Operation for Cervical Rib	29750	35000	35000	ENT Procedure
1120	EP069	Estlander Operation (Estlander flap in plastic surgery of lips)	29750	35000	35000	ENT Procedure
1121	EP070	Abbe Operation (Abbe flap in plastic surgery of lips)	23375	27500	27500	ENT Procedure
1122	EP071	Cheek Advancement	29750	35000	35000	ENT Procedure
1123	EP072	Excision of the Maxilla	36550	43000	43000	ENT Procedure
1124	EP073	Excision of mandible-segmental	29750	35000	35000	ENT Procedure
1125	EP074	Parotidectomy - Superficial	29750	35000	35000	ENT Procedure
1126	EP075	Parotidectomy - Total	36550	43000	43000	ENT Procedure
1127	EP076	Repair of Parotid Duct	23375	27500	27500	ENT Procedure
1128	EP077	Removal of Submandibular Salivary gland	23375	27500	27500	ENT Procedure
1129	EP078	Hemithyroidectomy	29750	35000	35000	ENT Procedure
1130	EP079	Partial Thyroidectomy (lobectomy)	29750	35000	35000	ENT Procedure
1131	EP080	Subtotal Thyroidectomy	36550	43000	43000	ENT Procedure
1132	EP081	Total Thyroidectomy	45050	53000	53000	ENT Procedure
1133	EP082	Resection Enucleation of thyroid Adenoma	23375	27500	27500	ENT Procedure
1134	EP083	Excision of Lingual Thyroid	29750	35000	35000	ENT Procedure
1135	EP084	Excision of Thyroglossal Cyst/Duct/Fistula	29750	35000	35000	ENT Procedure
1136	EP085	Laryngectomy	45050	53000	53000	ENT Procedure
1137	EP086	Hyoid Suspension	23375	27500	27500	ENT Procedure
1138	EP087	Genioplasty	29750	35000	35000	ENT Procedure

CGHS rates for Tier I (X City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1139	EP088	Phonosurgery	23375	27500	27500	ENT Procedure
1140	EP089	Microlaryngeal Surgery	23375	27500	27500	ENT Procedure
1141	EP090	Laryngofissure	36550	43000	43000	ENT Procedure
1142	EP091	Tracheal Stenosis Excision	36550	43000	43000	ENT Procedure
1143	EP092	Tracheostomy	11390	13400	13400	ENT Procedure
1144	CC001	ICU/CCU/PICU/MICU/HDU (For all categories of ward entitlement, inclusive of Room Rent)	5400	5400	5400	Critical Care
1145	CC002	Compressed Air / Piped Oxygen per hour	85	100	100	Critical Care
1146	CC003	Ventilator charges (Per day) inclusive of associated disposables	2550	3000	3000	Critical Care
1147	CC004	Non invasive Ventilator charges (Per day)(inclusive of associated disposables)	510	600	600	Critical Care
1148	CC005	Pneupac Ventilator in Nursery (Per day)	2210	2600	2600	Critical Care
1149	CC006	Incubator charges (Per day)	1275	1500	1500	Critical Care
1150	CC007	Neonatal ICU charges (Per day) inclusive of incubator	5400	5400	5400	Critical Care
1151	CC008	Exchange Transfusion	2975	3500	3500	Critical Care
1152	CC009	Phototherapy per session (up to 6 Hours)	340	400	400	Critical Care
1153	CC010	Resuscitation/CPR/Intubation	1275	1500	1500	Critical Care
1154	CC011	PICC line (peripherally inserted Central Cannulisation)	4250	5000	5000	Critical Care
1155	CC012	Nebulization Per Session	43	50	50	Critical Care
1156	CC013	PICC Line Removal	850	1000	1000	Critical Care
1157	CC014	Ryles Tube Insertion	765	900	900	Critical Care
1158	BC001	Blood Component Charges - Whole Blood per Unit	1550	1550	1550	Blood Component Charges
1159	BC002	Blood Component Charges - Packed Red Cell per Unit	1550	1550	1550	Blood Component Charges
1160	BC003	Blood Component Charges - Fresh Frozen Plasma	400	400	400	Blood Component Charges
1161	BC004	Platelet Concentrate- Random Donor Platelet (RDP)	400	400	400	Blood Component Charges
1162	BC005	Blood Component Charges - Cryoprecipitate	250	250	250	Blood Component Charges
1163	BC006	Platelet Concentrate – Single Donor Platelet (SDP)- Apheresis per unit	11000	11000	11000	Blood Component Charges
1164	GP001	Dressings of wounds	255	300	300	General Procedure

CGHS rates for Tier I (X City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1165	GP002	Aspiration Pleural Effusion - Diagnostic	595	700	700	General Procedure
1166	GP003	Aspiration Pleural Effusion - Therapeutic	595	700	700	General Procedure
1167	GP004	Abdominal / Peritoneal Aspiration – Diagnostic/Ascitic tapping / Paracentesis - Diagnostic	595	700	700	General Procedure
1168	GP005	Abdominal / Peritoneal Aspiration – Therapeutic/Ascitic tapping / Paracentesis - Therapeutic	638	750	750	General Procedure
1169	GP006	Removal of Sutures (All)	170	200	200	General Procedure
1170	GP007	Venesection	595	700	700	General Procedure
1171	GP008	Sternal puncture	1700	2000	2000	General Procedure
1172	GP009	Urinary bladder Catheterisation	595	700	700	General Procedure
1173	GP010	Incision & Drainage under local Anaesthesia (Large)	1955	2300	2300	General Procedure
1174	GP011	Intercostal Drainage	2975	3500	3500	General Procedure
1175	GP012	Drainage of abscess with anaesthesia	11390	13400	13400	General Procedure
1176	GP013	Excision of lumps under anaesthesia	11390	13400	13400	General Procedure
1177	HN001	Temporal Bone Subtotal Resection	36550	43000	49450	Head and Neck Surgery
1178	HN002	Benign Tumour Excisions of Head and Neck	23375	27500	31625	Head and Neck Surgery
1179	SK001	Excision of Moles	850	1000	1000	Skin Procedure
1180	SK002	Excision of Warts	850	1000	1000	Skin Procedure
1181	SK003	Excision of Molluscum Contagiosum	850	1000	1000	Skin Procedure
1182	SK004	Excision of Venereal Warts	850	1000	1000	Skin Procedure
1183	SK005	Excision of Corns	850	1000	1000	Skin Procedure
1184	SK006	Intradermal (ID) Injection Keloid (Intralesional Injection) including the cost of the drug	850	1000	1000	Skin Procedure
1185	SK007	Chemical Cautery (s)/Cryotherapy	850	1000	1000	Skin Procedure
1186	CI001	Electrocardiogram (ECG)	149	175	175	Cardiology Investigation
1187	CI002	Treadmill Test (TMT)	952	1120	1120	Cardiology Investigation
1188	CI003	Holter analysis per day	2125	2500	2500	Cardiology Investigation
1189	CI004	Ambulatory BP monitoring per day	850	1000	1000	Cardiology Investigation

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Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1190	CI005	Head Up Tilt Test (HUTT)	7820	9200	9200	Cardiology Investigation
1191	CI006	External Loop/event recording -first day Rs.1500	1275	1500	1500	Cardiology Investigation
1192	CI007	External Loop/event recording - subsequent Days 1000/day (Maximum up to 6 days)	850	1000	1000	Cardiology Investigation
1193	CI008	Diagnostic Electrophysiological studies conventional (Including catheter)	61710	72600	72600	Cardiology Investigation
1194	CI009	Stress Thallium / Myocardial Perfusion Scintigraphy	11390	13400	13400	Cardiology Investigation
1195	CI010	Rest Thallium / Myocardial Perfusion Scintigraphy	8160	9600	9600	Cardiology Investigation
1196	CI011	Venography	4250	5000	5000	Cardiology Investigation
1197	CI012	Lymphangiography	4250	5000	5000	Cardiology Investigation
1198	CI013	Sinogram	1700	2000	2000	Cardiology Investigation
1199	CI014	Digital Subtraction Angiography-Peripheral artery	12419	14610	14610	Cardiology Investigation
1200	CI015	Digital Subtraction Angiography- venogram	12419	14610	14610	Cardiology Investigation
1201	CI016	Coronary Angiography	11390	13400	13400	Cardiology Investigation
1202	CI017	Cardiac Catheterization (CATH)	12665	14900	14900	Cardiology Investigation
1203	CP001	Balloon Coronary Angioplasty / Percutaneous transluminal coronary angioplasty (PTCA) /Percutaneous coronary intervention (PCI) with Vascular closure device (VCD) excluding the cost of Stent. Cost of Drug Eluting Balloon allowed in lieu of Stent	82450	97000	111550	Cardiology Procedure
1204	CP002	Balloon Coronary Angioplasty / Percutaneous transluminal coronary angioplasty (PTCA) / Percutaneous coronary intervention (PCI) without Vascular closure device (VCD) excluding the cost of Stent.Cost of Drug Eluting Balloon allowed in lieu of Stent	71166	83725	96284	Cardiology Procedure
1205	CP003	Rotablation excluding the cost of Rotablator Burr/Advancer	52553	61827	71101	Cardiology Procedure
1206	CP004	Balloon Mitral Valvotomy / Percutaneous Transvenous Mitral Commissurotomy (PTMC)	82450	97000	111550	Cardiology Procedure

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Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1207	CP005	Temporary Pacemaker Implantation (TPI) (Temporary Cardiac Pacing) Single Chamber	17952	21120	24288	Cardiology Procedure
1208	CP006	Permanent pacemaker implantation (PPI)- Single Chamber excluding the cost of Pacemaker	29920	35200	40480	Cardiology Procedure
1209	CP007	Permanent pacemaker implantation- Dual Chamber excluding the cost of Pacemaker	40205	47300	54395	Cardiology Procedure
1210	CP008	Permanent pacemaker implantation (PPI)- Biventricular excluding the cost of pacemaker	46400	54588	62776	Cardiology Procedure
1211	CP009	Automatic implantable cardioverter defibrillator (AICD) Single Chamber - excluding the cost of Device	46750	55000	63250	Cardiology Procedure
1212	CP010	Automatic implantable cardioverter defibrillator (AICD) Dual Chamber excluding the cost of Device	48947	57585	66223	Cardiology Procedure
1213	CP011	Combo Device Implantation excluding the cost of Device	55165	64900	74635	Cardiology Procedure
1214	CP012	Radiofrequency (RF) Ablation Conventional	82450	97000	111550	Cardiology Procedure
1215	CP013	Radiofrequency (RF) Ablation Atrial Tachycardia/CARTO	153000	180000	207000	Cardiology Procedure
1216	CP014	Intra-aortic balloon pump (IABP) excluding the cost of the balloon	29750	35000	40250	Cardiology Procedure
1217	CP015	Intra vascular coiling excluding cost of the coils	64600	76000	87400	Cardiology Procedure
1218	CP016	Balloon Septostomy	28050	33000	37950	Cardiology Procedure
1219	CP017	Aortic Valve Balloon Dilatation (AVBD) / Pulmonary Valve Balloon Dilatation (PVBD)	52734	62040	71346	Cardiology Procedure
1220	CP018	Peripheral Angioplasty with Vascular Closure Device (VCD) excluding the cost of Stent	51893	61050	70208	Cardiology Procedure
1221	CP019	Peripheral Angioplasty without Vascular Closure Device (VCD) excluding the cost of Stent	45050	53000	60950	Cardiology Procedure
1222	CP020	Renal Angioplasty excluding the cost of Stent	51425	60500	69575	Cardiology Procedure
1223	CP021	Transcatheter Aortic Valve Implantation (TAVI) / Transcatheter Aortic Valve Replacement (TAVR) – Procedure Cost. (Approval of Director, CGHS in consultation with Special Technical Committee (STC) is required for this procedure)	85000	100000	115000	Cardiology Procedure

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Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1224	CP022	TAVI / TAVR Implant (cost of implant only)	1284000	1284000	1284000	Cardiology Implant(Valve)
1225	CP023	Cost of Intravascular ultrasound (IVUS) Catheter excluding GST(Procedure Charge included in PTCA)	55000	55000	55000	Cardiology Add on Procedure
1226	CP024	Cost of Fractional flow reserve (FFR) Catheter excluding GST (Procedure Charge included in PTCA)	33000	33000	33000	Cardiology Add on Procedure
1227	CP025	Catheter cost of Intracoronary optical coherence tomography (OCT) / Intravascular optical coherence tomography (IVOCT) / Intravascular Ventricular Assist System excluding GST(Procedure cost is included in PTCA)	65000	65000	65000	Cardiology Add on Procedure
1228	CP026	IVL (Coronary Intra vascular Lithotripsy / Shock wave Lithotripsy – Including GST (Approval of Director, CGHS in consultation with Special Technical Committee (STC) is required for this procedure)	268000	268000	268000	Cardiology Add on Procedure
1229	CV001	Varicose vein Surgery-Trendelenburg Operation with Suturing or Ligation	21505	25300	29095	Cardiovascular And Cardiac Surgery Procedure
1230	CV002	Radio Ablation of Varicose Veins (RFA Ablation) excluding the cost of RFA Catheter	7948	9350	10753	Cardiovascular And Cardiac Surgery Procedure
1231	CV003	Laser Ablation of Varicose Veins	37400	44000	50600	Cardiovascular And Cardiac Surgery Procedure
1232	CV004	Atrial Septal Defect (ASD) closure excluding the cost of the Device	93500	110000	126500	Cardiovascular And Cardiac Surgery Procedure
1233	CV005	Ventricular Septal Defect (VSD) with Graft / VSD Device Closure excluding the cost of the Device	102000	120000	138000	Cardiovascular And Cardiac Surgery Procedure
1234	CV006	Tetralogy of Fallot (TOF)/TAPVC/TCPC/REV/RSOV repair	153000	180000	207000	Cardiovascular And Cardiac Surgery Procedure
1235	CV007	BD Glenn/Left Atrium Myxoma	153000	180000	207000	Cardiovascular And Cardiac Surgery Procedure

CGHS rates for Tier I (X City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1236	CV008	Senning/Arterial Switch Operation (ASO) with graft	153000	180000	207000	Cardiovascular And Cardiac Surgery Procedure
1237	CV009	Double Switch Operation (DSO)	200600	236000	271400	Cardiovascular And Cardiac Surgery Procedure
1238	CV010	Atrioventricular(AV) Canal Repair	200600	236000	271400	Cardiovascular And Cardiac Surgery Procedure
1239	CV011	Fontan Procedure	232900	274000	315100	Cardiovascular And Cardiac Surgery Procedure
1240	CV012	Conduit Repair	200600	236000	271400	Cardiovascular And Cardiac Surgery Procedure
1241	CV013	Coronary Artery Bypass Graft surgery (CABG)	153000	180000	207000	Cardiovascular And Cardiac Surgery Procedure
1242	CV014	Coronary Artery Bypass Graft surgery (CABG) + Intra-Aortic Balloon Pump (IABP)	200600	236000	271400	Cardiovascular And Cardiac Surgery Procedure
1243	CV015	Coronary Artery Bypass Graft surgery (CABG) + Valve Replacement excluding the cost of the valve	232900	274000	315100	Cardiovascular And Cardiac Surgery Procedure
1244	CV016	CABG without bypass.	200600	236000	271400	Cardiovascular And Cardiac Surgery Procedure
1245	CV017	Ascending Aorta Replacement	232900	274000	315100	Cardiovascular And Cardiac Surgery Procedure
1246	CV018	Double Valve Replacement (DVR)	200600	236000	271400	Cardiovascular And Cardiac Surgery Procedure
1247	CV019	Mitral valve Replacement(MVR)/ Aortic valve Replacement (AVR)/ Tricuspid Valve Replacement (TVR) / Pulmonary valve replacement (PVR)	153000	180000	207000	Cardiovascular And Cardiac Surgery Procedure
1248	CV020	Mitral valve (MV) Repair + Aortic valve (AV) Repair / Tricuspid Valve (TV) Repair + Pulmonary valve (PV) repair	153000	180000	207000	Cardiovascular And Cardiac Surgery Procedure

CGHS rates for Tier I (X City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1249	CV021	Aorta Femoral Bypass	109650	129000	148350	Cardiovascular And Cardiac Surgery Procedure
1250	CV022	Blalock-Taussig Shunt (BT Shunt) / Coarctation	129200	152000	174800	Cardiovascular And Cardiac Surgery Procedure
1251	CV023	Pulmonary Artery Banding (PA Banding) Septostomy	129200	152000	174800	Cardiovascular And Cardiac Surgery Procedure
1252	CV024	Pericardiocentesis	8500	10000	10000	Cardiovascular And Cardiac Surgery Procedure
1253	CV025	Pericardiectomy	129200	152000	174800	Cardiovascular And Cardiac Surgery Procedure
1254	CV026	Patent Ductus Arteriosus (PDA)-Device Closure	93500	110000	126500	Cardiovascular And Cardiac Surgery Procedure
1255	CV027	Heart Transplant Surgery (As per Guidelines mentioned in OM.No. Z-42011/11/2021-MG/EHS Dated 1st December, 2023)	1500000	1500000	1500000	Cardiovascular And Cardiac Surgery Procedure
1256	CV028	Aortic Arch Replacement	232900	274000	315100	Cardiovascular And Cardiac Surgery Procedure
1257	CV029	Aortic Dissection	232900	274000	315100	Cardiovascular And Cardiac Surgery Procedure
1258	CV030	Thoraco Abdominal Aneurysm Repair	200600	236000	271400	Cardiovascular And Cardiac Surgery Procedure
1259	CV031	Embolectomy	64600	76000	87400	Cardiovascular And Cardiac Surgery Procedure
1260	CV032	Vascular Repair	64600	76000	87400	Cardiovascular And Cardiac Surgery Procedure
1261	CV033	Bentall Repair with Prosthetic Valve	232900	274000	315100	Cardiovascular And Cardiac Surgery Procedure
1262	CV034	Bentall Repair with Biologic Valve	200600	236000	271400	Cardiovascular And Cardiac Surgery Procedure

CGHS rates for Tier I (X City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1263	CV035	Coarctation dilatation / Balloon dilatation of Aortic coarctation -Excluding the cost of Balloon	66946	78760	90574	Cardiovascular And Cardiac Surgery Procedure
1264	CV036	Coarctation dilatation with Stenting	53550	63000	72450	Cardiovascular And Cardiac Surgery Procedure
1265	CV037	Septostomy- Blade	53550	63000	72450	Cardiovascular And Cardiac Surgery Procedure
1266	CV038	Aortic stent grafting for aortic aneurysm	153000	180000	207000	Cardiovascular And Cardiac Surgery Procedure
1267	CV039	Inferior Vena Cava (IVC) filter implantation- excluding the cost of filter	28050	33000	37950	Cardiovascular And Cardiac Surgery Procedure
1268	CV040	Video Assisted Thoracoscopic Surgery (VATS) for Decortication of Lungs/Thymectomy/Other Major Surgeries	153000	180000	207000	Cardiovascular And Cardiac Surgery Procedure
1269	GS001	Sclerotherapy Injection / Banding of Haemorrhoids (cost of drug/sclerotherapy agent/band extra)	595	700	700	General Surgery
1270	GS002	Injection for Varicose Veins (cost of drug/sclerotherapy agent extra)	595	700	700	General Surgery
1271	GS003	Suturing of small wounds	1169	1375	1375	General Surgery
1272	GS004	Secondary suture of wounds	3740	4400	4400	General Surgery
1273	GS005	Debridement of wounds - Small	1403	1650	1650	General Surgery
1274	GS006	Phimosis Under LA	5100	6000	6000	General Surgery
1275	GS007	Removal Of Foreign Bodies -without C-ARM	1275	1500	1500	General Surgery
1276	GS008	Toe Nail Removal	850	1000	1000	General Surgery
1277	GS009	Excision of Cervical Lymph Node under Local Anaesthesia	2635	3100	3100	General Surgery
1278	GS010	Excision of Axillary Lymph Node under General Anaesthesia	7225	8500	8500	General Surgery
1279	GS011	Excision of Inguinal Lymph Node under Local Anaesthesia	2550	3000	3000	General Surgery
1280	GS012	Excision of Sebaceous Cysts	4250	5000	5000	General Surgery
1281	GS013	Excision of Superficial Lipoma	4250	5000	5000	General Surgery
1282	GS014	Excision of Superficial Neurofibroma	4250	5000	5000	General Surgery

CGHS rates for Tier I (X City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1283	GS015	Excision of Dermoid Cysts	4250	5000	5000	General Surgery
1284	GS016	Excision of Keloid	7820	9200	9200	General Surgery
1285	GS017	Excision of mammary fistula	23375	27500	27500	General Surgery
1286	GS018	Haemorrhoidectomy	28050	33000	33000	General Surgery
1287	GS019	Stapler haemorrhoidectomy excluding the cost of Stapler	29750	35000	35000	General Surgery
1288	GS020	Debridement of Large wounds including Diabetic Wound under Anaesthesia	23375	27500	27500	General Surgery
1289	GI001	Gastro Oesophageal Reflux Study (GER Study)	2550	3000	3000	Gastro and Hepatobiliary Investigation
1290	GI002	Meckel's Scan	2550	3000	3000	Gastro and Hepatobiliary/Nuclear Medicine Investigation
1291	GI003	Hepatobiliary Scintigraphy.	3400	4000	4000	Gastro and Hepatobiliary/Nuclear Medicine Investigation
1292	GI004	Gastrointestinal Bleed (GloB.) Study with Technetium 99m labeled RBCs.	5100	6000	6000	Gastro and Hepatobiliary/Nuclear Medicine Investigation
1293	GI005	Gastric Emptying	2125	2500	2500	Gastro and Hepatobiliary/Nuclear Medicine Investigation
1294	GI006	Hepatosplenic scintigraphy with Technetium-99m radiopharmaceuticals	4250	5000	5000	Gastro and Hepatobiliary/Nuclear Medicine Investigation
1295	GI007	Diagnostic Angiography	7820	9200	9200	Gastroenterology/Interventional Radiology Investigation
1296	GI008	Oesophageal pH metry	7820	9200	9200	Gastroenterology / Endoscopic Procedures

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Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1297	GI009	Oesophageal Manometry	7820	9200	9200	Gastroenterology / Endoscopic Procedures
1298	GI010	Small Bowel Manometry	8500	10000	10000	Gastroenterology / Endoscopic Procedures
1299	GI011	Anorectal manometry	36550	43000	43000	Gastroenterology / Endoscopic Investigation
1300	GI012	Colonic manometry	29750	35000	35000	Gastroenterology / Endoscopic Investigation
1301	GI013	Biliary Manometry	36550	43000	43000	Gastroenterology / Endoscopic Investigation
1302	GI014	Breath Tests (Urea breath test/ H. pylori breath test)/RUT	2457	2890	2890	Gastroenterology / Endoscopic Investigation
1303	MG001	Gastroscopy/Upper GI Endoscopy with or without Biopsy	3400	4000	4000	Gastroenterology / Endoscopic Procedures
1304	MG002	Lower GI Endoscopy(Colonoscopy/Sigmoidoscopy) with or without Biopsy	5100	6000	6000	Gastroenterology / Endoscopic Procedures
1305	MG003	Endoscopic mucosal resection	11390	13400	13400	Gastroenterology / Endoscopic Procedures
1306	MG004	Endoscopic Polypectomy - GIT	17000	20000	20000	Gastroenterology / Endoscopic Procedures
1307	MG005	Oesophageal Stricture dilatation	7820	9200	9200	Gastroenterology / Endoscopic Procedures
1308	MG006	Balloon dilatation of achalasia cardia	11390	13400	13400	Gastroenterology / Endoscopic Procedures
1309	MG007	Gastrointestinal (GIT) Foreign body removal	17000	20000	20000	Gastroenterology / Endoscopic Procedures
1310	MG008	Oesophageal stenting excluding the cost of stent	11390	13400	13400	Gastroenterology / Endoscopic Procedures

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			Non-NABH	NABH	Super Speciality	
1311	MG009	Band ligation of oesophageal varices	7225	8500	8500	Gastroenterology / Endoscopic Procedures
1312	MG010	Sclerotherapy of oesophageal varices	7225	8500	8500	Gastroenterology / Endoscopic Procedures
1313	MG011	Glue injection of varices	11390	13400	13400	Gastroenterology / Endoscopic Procedures
1314	MG012	Argon plasma coagulation	7820	9200	9200	Gastroenterology / Endoscopic Procedures
1315	MG013	Pyloric balloon dilatation	7225	8500	8500	Gastroenterology / Endoscopic Procedures
1316	MG014	Enteral stenting excluding cost of the stent	17000	20000	20000	Gastroenterology / Endoscopic Procedures
1317	MG015	Duodenal stricture dilation	7225	8500	8500	Gastroenterology / Endoscopic Procedures
1318	MG016	Single balloon enteroscopy	11390	13400	13400	Gastroenterology / Endoscopic Procedures
1319	MG017	Double balloon enteroscopy	17000	20000	20000	Gastroenterology / Endoscopic Procedures
1320	MG018	Capsule endoscopy excluding the cost of capsule	11390	13400	13400	Gastroenterology / Endoscopic Procedures
1321	MG019	Piles banding	4250	5000	5000	Gastroenterology / Endoscopic Procedures
1322	MG020	Colonic stricture dilatation	7225	8500	8500	Gastroenterology / Endoscopic Procedures
1323	MG021	Hot biopsy forceps procedures	7225	8500	8500	Gastroenterology / Endoscopic Procedures
1324	MG022	Colonic stenting excluding cost of the stent	11390	13400	13400	Gastroenterology / Endoscopic Procedures

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			Non-NABH	NABH	Super Speciality	
1325	MG023	Junction biopsy	4250	5000	5000	Gastroenterology / Endoscopic Procedures
1326	MG024	Conjugal microscopy	7225	8500	8500	Gastroenterology / Endoscopic Procedures
1327	MG025	ERCP (Endoscopic Retrograde Cholangio – Pancreatography) Diagnostic	11390	13400	13400	Gastro and Hepatobiliary Investigation
1328	MG026	Endoscopic sphincterotomy by ERCP	17000	20000	23000	Gastroenterology / Endoscopic Procedures
1329	MG027	Common Bile Duct (CBD) stone extraction by ERCP	17000	20000	23000	Gastroenterology / Endoscopic Procedures
1330	MG028	Common Bile Duct (CBD) stricture dilatation by ERCP	17000	20000	23000	Gastroenterology / Endoscopic Procedures
1331	MG029	Biliary stenting (plastic and metallic) by ERCP	17000	20000	23000	Gastroenterology / Endoscopic Procedures
1332	MG030	Mechanical lithotripsy of CBD stones by ERCP	29750	35000	40250	Gastroenterology / Endoscopic Procedures
1333	MG031	Pancreatic sphincterotomy by ERCP	17000	20000	23000	Gastroenterology / Endoscopic Procedures
1334	MG032	Pancreatic stricture dilatation by ERCP	17000	20000	23000	Gastroenterology / Endoscopic Procedures
1335	MG033	Pancreatic stone extraction by ERCP	17000	20000	23000	Gastroenterology / Endoscopic Procedures
1336	MG034	Mechanical lithotripsy of pancreatic stones	29750	35000	40250	Gastroenterology / Endoscopic Procedures
1337	MG035	Endoscopic cysto gastrostomy	17000	20000	23000	Gastroenterology / Endoscopic Procedures
1338	MG036	Balloon dilatation of papilla	17000	20000	23000	Gastroenterology / Endoscopic Procedures

CGHS rates for Tier I (X City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1339	MG037	Percutaneous Transhepatic Biliary Drainage (PTBD)	17000	20000	23000	Gastroenterology/Interventional Radiology Procedures
1340	MG038	Vascular Embolization	36550	43000	49450	Gastroenterology/Interventional Radiology Procedures
1341	MG039	Transjugular Intrahepatic Portosystemic Shunt (TIPS)	45050	53000	60950	Gastroenterology/Interventional Radiology Procedures
1342	MG040	Inferior Vena Cava (IVC) Venography and Hepatic Vein (HV Venography)	36550	43000	49450	Gastroenterology/Interventional Radiology Procedures
1343	MG041	Muscular Stenting	45050	53000	60950	Gastroenterology / Endoscopic Procedures
1344	MG042	Balloon-Occluded Retrograde Intravenous Obliteration (BRTO)	45050	53000	60950	Gastroenterology/Interventional Radiology Procedures
1345	MG043	Portal Haemodynamic Studies	7225	8500	8500	Gastroenterology/Interventional Radiology Procedures
1346	MG044	Sengstaken Blakemore (SB) Tube Tamponade	7820	9200	9200	Gastroenterology / Endoscopic Procedures
1347	MG045	Lintas Machles Tube Tempode	5100	6000	6000	Gastroenterology / Endoscopic Procedures
1348	MG046	EUS (Endoscopic Ultrasound) guided FNAC Excluding the cost of the Needle	14025	16500	16500	Gastroenterology / Endoscopic Procedures
1349	AG001	Atresia of Oesophagus and Tracheo Oesophageal Fistula	45050	53000	60950	Abdomen/GI Surgery Procedure
1350	AG002	Operations for Replacement of Oesophagus by Colon / Colon-Inter position or Replacement of Oesophagus	45050	53000	60950	Abdomen/GI Surgery Procedure
1351	AG003	Heller’s Operation	36550	43000	49450	Abdomen/GI Surgery Procedure
1352	AG004	Oesophageal Intubation (Mousseau Barbin Tube)	23375	27500	31625	Abdomen/GI Surgery Procedure

CGHS rates for Tier I (X City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1353	AG005	Achalasia Cardia Transthoracic	36550	43000	49450	Abdomen/GI Surgery Procedure
1354	AG006	Achalasia Cardia Abdominal	36550	43000	49450	Abdomen/GI Surgery Procedure
1355	AG007	Pyloromyotomy	23375	27500	31625	Abdomen/GI Surgery Procedure
1356	AG008	Gastrostomy	23375	27500	31625	Abdomen/GI Surgery Procedure
1357	AG009	Simple Closure of Perforated peptic Ulcer	29750	35000	40250	Abdomen/GI Surgery Procedure
1358	AG010	Vagotomy Pyloroplasty / Gastro Jejunostomy	36550	43000	49450	Abdomen/GI Surgery Procedure
1359	AG011	Duodenojejunostomy	45050	53000	60950	Abdomen/GI Surgery Procedure
1360	AG012	Partial/Subtotal Gastrectomy for Ulcer	45050	53000	60950	Abdomen/GI Surgery Procedure
1361	AG013	Operation for Bleeding Peptic Ulcer	36550	43000	49450	Abdomen/GI Surgery Procedure
1362	AG014	Operation for Gastrojejunal Ulcer	36550	43000	49450	Abdomen/GI Surgery Procedure
1363	AG015	Highly Selective Vagotomy	45050	53000	60950	Abdomen/GI Surgery Procedure
1364	AG016	Selective Vagotomy & Drainage	45050	53000	60950	Abdomen/GI Surgery Procedure
1365	AG017	Exploratory Laparotomy (Open)	23375	27500	31625	Abdomen/GI Surgery Procedure
1366	AG018	Congenital Diaphragmatic Hernia	36550	43000	49450	Abdomen/GI Surgery Procedure

CGHS rates for Tier I (X City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1367	AG019	Hiatus Hernia Repair- Abdominal (excluding cost of mesh and tacker if used)	30855	36300	41745	Abdomen/GI Surgery Procedure
1368	AG020	Hiatus Hernia Repair- Transthoracic (excluding cost of mesh and tacker if used)	30855	36300	41745	Abdomen/GI Surgery Procedure
1369	AG021	Epigastric Hernia Repair - excluding the cost of mesh and tacker	23375	27500	31625	Abdomen/GI Surgery Procedure
1370	AG022	Umbilical Hernia Repair - excluding the cost of mesh and tacker	29750	35000	40250	Abdomen/GI Surgery Procedure
1371	AG023	Ventral /incisional Hernia Repair - excluding the cost of mesh and tacker	29750	35000	40250	Abdomen/GI Surgery Procedure
1372	AG024	Inguinal Hernia Herniorrhaphy	24310	28600	32890	Abdomen/GI Surgery Procedure
1373	AG025	Inguinal Hernia - Hernioplasty excluding the cost of mesh and tacker	29750	35000	40250	Abdomen/GI Surgery Procedure
1374	AG026	Femoral Hernia Repair - excluding the cost of mesh and tacker	29750	35000	40250	Abdomen/GI Surgery Procedure
1375	AG027	Rare Hernias Repair (Spigelian, Obturator, Lumbar, Sciatic) - excluding the cost of mesh and tacker	36550	43000	49450	Abdomen/GI Surgery Procedure
1376	AG028	Splenectomy - For Trauma	45050	53000	60950	Abdomen/GI Surgery Procedure
1377	AG029	Splenectomy - For Hypersplenism	53550	63000	72450	Abdomen/GI Surgery Procedure
1378	AG030	Splenorenal Anastomosis	45050	53000	60950	Abdomen/GI Surgery Procedure
1379	AG031	Portocaval Anastomosis	53550	63000	72450	Abdomen/GI Surgery Procedure
1380	AG032	Direct Operation on Oesophagus for Portal Hypertension	45050	53000	60950	Abdomen/GI Surgery Procedure

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Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1381	AG033	Mesentericocaval Anastomosis	36550	43000	49450	Abdomen/GI Surgery Procedure
1382	AG034	Warren Shunt (Distal Splenorenal Shunt)	45050	53000	60950	Abdomen/GI Surgery Procedure
1383	AG035	Pancreaticoduodenectomy (Whipple's procedure)	45050	53000	60950	Abdomen/GI Surgery Procedure
1384	AG036	Cystojejunostomy or Cystogastrostomy	36550	43000	49450	Abdomen/GI Surgery Procedure
1385	AG037	Cholecystectomy	29750	35000	40250	Abdomen/GI Surgery Procedure
1386	AG038	Cholecystectomy & Exploration of CBD	30855	36300	41745	Abdomen/GI Surgery Procedure
1387	AG039	Repair of Common Bile Duct (CBD)	36550	43000	49450	Abdomen/GI Surgery Procedure
1388	AG040	Cholecystostomy	22440	26400	30360	Abdomen/GI Surgery Procedure
1389	AG041	Operation for Hydatid Cyst of Liver	25245	29700	34155	Abdomen/GI Surgery Procedure
1390	AG042	Hepatic Resections (Lobectomy /Hepatectomy)	30855	36300	41745	Abdomen/GI Surgery Procedure
1391	AG043	Operation on Adrenal Glands - Bilateral	53550	63000	72450	Abdomen/GI Surgery Procedure
1392	AG044	Operation on Adrenal Glands - Unilateral	36550	43000	49450	Abdomen/GI Surgery Procedure
1393	AG045	Appendicectomy	17765	20900	24035	Abdomen/GI Surgery Procedure
1394	AG046	Appendicular Abscess – Drainage	29750	35000	40250	Abdomen/GI Surgery Procedure

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Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1395	AG047	Mesenteric Cyst- Excision	29750	35000	40250	Abdomen/GI Surgery Procedure
1396	AG048	Diagnostic Peritonioscopy/Laparoscopy	17000	20000	23000	Abdomen/GI Surgery Procedure
1397	AG049	Jejunostomy	29750	35000	40250	Abdomen/GI Surgery Procedure
1398	AG050	Ileostomy	29750	35000	40250	Abdomen/GI Surgery Procedure
1399	AG051	Resection & Anastomosis of Small Intestine	44413	52250	60088	Abdomen/GI Surgery Procedure
1400	AG052	Duodenal Diverticulum	45050	53000	60950	Abdomen/GI Surgery Procedure
1401	AG053	Operation for Intestinal Obstruction including resection , anastomosis, Adhesiolysis	45050	53000	60950	Abdomen/GI Surgery Procedure
1402	AG054	Operation for Intestinal perforation including resection, anastomosis , Adhesiolysis	45050	53000	60950	Abdomen/GI Surgery Procedure
1403	AG055	Operations for Benign Tumours of Small Intestine	45050	53000	60950	Abdomen/GI Surgery Procedure
1404	AG056	Excision of Small Intestine Fistula	42075	49500	56925	Abdomen/GI Surgery Procedure
1405	AG057	Operations for GI Bleed	45050	53000	60950	Abdomen/GI Surgery Procedure
1406	AG058	Operations for Haemorrhage of Small Intestines	45050	53000	60950	Abdomen/GI Surgery Procedure
1407	AG059	Operations of the Duplication of the Intestines – including Exploratory Laparotomy	38335	45100	51865	Abdomen/GI Surgery Procedure
1408	AG060	Operations for Recurrent Intestinal Obstruction (Noble Plication & Other Operations for Adhesions)	45050	53000	60950	Abdomen/GI Surgery Procedure

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Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1409	AG061	Ileosigmoidostomy and related resection	45050	53000	60950	Abdomen/GI Surgery Procedure
1410	AG062	Ileotransverse Colostomy and related resection	45050	53000	60950	Abdomen/GI Surgery Procedure
1411	AG063	Caecostomy	29750	35000	40250	Abdomen/GI Surgery Procedure
1412	AG064	Loop Colostomy Transverse Sigmoid	36550	43000	49450	Abdomen/GI Surgery Procedure
1413	AG065	Terminal Colostomy	28050	33000	37950	Abdomen/GI Surgery Procedure
1414	AG066	Closure of Colostomy	28050	33000	37950	Abdomen/GI Surgery Procedure
1415	AG067	Right Hemicolectomy	29920	35200	40480	Abdomen/GI Surgery Procedure
1416	AG068	Left Hemicolectomy	29920	35200	40480	Abdomen/GI Surgery Procedure
1417	AG069	Total Colectomy	37400	44000	50600	Abdomen/GI Surgery Procedure
1418	AG070	Operations for Volvulus of Large Bowel	45050	53000	60950	Abdomen/GI Surgery Procedure
1419	AG071	Operations for Sigmoid Diverticulitis	36550	43000	49450	Abdomen/GI Surgery Procedure
1420	AG072	Fissure in Ano with Internal sphincterotomy with fissurectomy.	29750	35000	40250	Abdomen/GI Surgery Procedure
1421	AG073	Fissure in Ano - Fissurectomy	23375	27500	31625	Abdomen/GI Surgery Procedure
1422	AG074	Rectal Polyp-Excision	12810	15070	17331	Abdomen/GI Surgery Procedure

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Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1423	AG075	Fistula in Ano - High Fistulectomy	29750	35000	40250	Abdomen/GI Surgery Procedure
1424	AG076	Fistula in Ano - Low Fistulectomy	21505	25300	29095	Abdomen/GI Surgery Procedure
1425	AG077	Prolapse Rectum - Thiersch Wiring	23375	27500	31625	Abdomen/GI Surgery Procedure
1426	AG078	Prolapse Rectum - Rectopexy	13090	15400	17710	Abdomen/GI Surgery Procedure
1427	AG079	Excision of Pilonidal Sinus (open)	20570	24200	27830	Abdomen/GI Surgery Procedure
1428	AG080	Excision of Pilonidal Sinus with closure	23375	27500	31625	Abdomen/GI Surgery Procedure
1429	AG081	Abdomino-Perineal Excision of Rectum	45050	53000	60950	Abdomen/GI Surgery Procedure
1430	AG082	Anterior Resection of Rectum	53550	63000	72450	Abdomen/GI Surgery Procedure
1431	AG083	Pull Through Abdominal Resection	45050	53000	60950	Abdomen/GI Surgery Procedure
1432	AG084	Retro Peritoneal Tumour Removal	45050	53000	60950	Abdomen/GI Surgery Procedure
1433	AG085	Laparoscopic Fundoplication	53550	63000	72450	Abdomen/GI Surgery Procedure
1434	AG086	Laparoscopic Splenectomy	53550	63000	72450	Abdomen/GI Surgery Procedure
1435	AG087	Laparoscopic Removal of hydatid cyst	53550	63000	72450	Abdomen/GI Surgery Procedure
1436	AG088	Laparoscopic Treatment of Pseudo Pancreatic cyst	53550	63000	72450	Abdomen/GI Surgery Procedure

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Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1437	AG089	Laparoscopic Whipple's operation (Laparoscopic Pancreaticoduodenectomy	45050	53000	60950	Abdomen/GI Surgery Procedure
1438	AG090	Laparoscopic GI bypass operation	53550	63000	72450	Abdomen/GI Surgery Procedure
1439	AG091	Laparoscopic Total Colectomy	53550	63000	72450	Abdomen/GI Surgery Procedure
1440	AG092	Laparoscopic Hemicolectomy	45050	53000	60950	Abdomen/GI Surgery Procedure
1441	AG093	Laparoscopic Anterior Resection (of Intestine/ Rectum)	53550	63000	72450	Abdomen/GI Surgery Procedure
1442	AG094	Laparoscopic Cholecystectomy	30855	36300	41745	Abdomen/GI Surgery Procedure
1443	AG095	Laparoscopic Appendectomy	28050	33000	37950	Abdomen/GI Surgery Procedure
1444	AG096	Laparoscopic Hernia – Inguinoplasty (excluding the cost of Tacker and Mesh)	32725	38500	44275	Abdomen/GI Surgery Procedure
1445	AG097	Laparoscopic Ventral Hernia Repair (excluding the cost of Tacker and Mesh)	32725	38500	44275	Abdomen/GI Surgery Procedure
1446	AG098	Laparoscopic Paraumbilical Hernia Repair (excluding the cost of Tacker and Mesh)	32725	38500	44275	Abdomen/GI Surgery Procedure
1447	AG099	Laparoscopic Adrenalectomy	53550	63000	72450	Abdomen/GI Surgery Procedure
1448	PS001	Diaphragmatic Hernia Repair (Thoracic or Abdominal Approach)	45050	53000	60950	Paediatric Surgery Procedure
1449	PS002	Tracheoesophageal Fistula (Correction Surgery)	45050	53000	60950	Paediatric Surgery Procedure
1450	PS003	Colon Replacement of Oesophagus	36550	43000	49450	Paediatric Surgery Procedure

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Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1451	PS004	Omphalomesenteric Cyst Excision	36550	43000	49450	Paediatric Surgery Procedure
1452	PS005	Omphalomesenteric Duct- Excision	36550	43000	49450	Paediatric Surgery Procedure
1453	PS006	Omphalocele 1st Stage (Hernia Repair)	29750	35000	40250	Paediatric Surgery Procedure
1454	PS007	Omphalocele 2nd Stage (Hernia Repair)	29750	35000	40250	Paediatric Surgery Procedure
1455	PS008	Gastroschisis Repair	36550	43000	49450	Paediatric Surgery Procedure
1456	PS009	Inguinal Herniotomy	29750	35000	40250	Paediatric Surgery Procedure
1457	PS010	Congenital Hydrocele	29750	35000	40250	Paediatric Surgery Procedure
1458	PS011	Hydrocele of Cord	23375	27500	31625	Paediatric Surgery Procedure
1459	PS012	Torsion Testis Operation	29750	35000	40250	Paediatric Surgery Procedure
1460	PS013	Congenital Pyloric Stenosis- operation	29750	35000	40250	Paediatric Surgery Procedure
1461	PS014	Duodenal Atresia Operation	36550	43000	49450	Paediatric Surgery Procedure
1462	PS015	Pancreatic Ring Operation	45050	53000	60950	Paediatric Surgery Procedure
1463	PS016	Meconium Ileus Operation	36550	43000	49450	Paediatric Surgery Procedure
1464	PS017	Malrotation of Intestines Operation	36550	43000	49450	Paediatric Surgery Procedure

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Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1465	PS018	Rectal Biopsy (Megacolon)	17000	20000	23000	Paediatric Surgery Procedure
1466	PS019	Colostomy Transverse	36550	43000	49450	Paediatric Surgery Procedure
1467	PS020	Colostomy Left Iliac	36550	43000	49450	Paediatric Surgery Procedure
1468	PS021	Abdominal Perineal Pull Through (Hirschsprung's Disease)	45050	53000	60950	Paediatric Surgery Procedure
1469	PS022	Imperforate Anus Low Anomaly -Cut Back Operation	23375	27500	31625	Paediatric Surgery Procedure
1470	PS023	Imperforate Anus Low Anomaly - Perineal Anoplasty	29750	35000	40250	Paediatric Surgery Procedure
1471	PS024	Imperforate Anus High Anomaly -Sacroabdomino Perineal Pull Through	45050	53000	60950	Paediatric Surgery Procedure
1472	PS025	Imperforate Anus High Anomaly - Closure of Colostomy	29750	35000	40250	Paediatric Surgery Procedure
1473	PS026	Intussusception Operation	36550	43000	49450	Paediatric Surgery Procedure
1474	PS027	Choledochoduodenostomy for Atresia of Extra Hepatic Biliary Duct	45050	53000	60950	Paediatric Surgery Procedure
1475	PS028	Operation of Choledochal Cyst	45050	53000	60950	Paediatric Surgery Procedure
1476	PS029	Nephrectomy for -Pyonephrosis	36550	43000	49450	Paediatric Surgery Procedure
1477	PS030	Nephrectomy for - Hydronephrosis	36550	43000	49450	Paediatric Surgery Procedure
1478	PS031	Sacro-Coccygeal Teratoma Excision	36550	43000	49450	Paediatric Surgery Procedure

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Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1479	PS032	Congenital Atresia & Stenosis of Small Intestine	45050	53000	60950	Paediatric Surgery Procedure
1480	PS033	Malrotation & Volvulus of the Midgut	36550	43000	49450	Paediatric Surgery Procedure
1481	PS034	Excision of Meckel's Diverticulum	36550	43000	49450	Paediatric Surgery Procedure
1482	OG001	Non Stress Test	1275	1500	1500	Obstetrics Investigation
1483	OG002	Normal delivery with or without Episiotomy & P. repair/ forceps delivery /Vacuum delivery/assisted breech delivery including Routine New Born Care	29750	35000	35000	Obstetrics And Gynaecology Procedure
1484	OG003	Normal Delivery of High Risk Pregnancy(Preeclampsia/Eclapsia/GDM/Cardiac/Vascular/Renal/Pulmonary/Twin Pregnancy/RA/SLE/IVF Conception/Severe Anaemia,)	36550	43000	43000	Obstetrics And Gynaecology Procedure
1485	OG004	Caesarean Section(CS) with or without Sterilization including Routine New Born Care	45050	53000	53000	Obstetrics And Gynaecology Procedure
1486	OG005	Caesarian Delivery of High Risk Pregnancy(Preeclampsia/Eclapsia/GDM/Cardiac/Vascular/Renal/Pulmonary/Twin Pregnancy/RA/SLE/IVF Conception/Severe Anaemia)	53550	63000	63000	Obstetrics And Gynaecology Procedure
1487	OG006	Rupture Uterus Closure & Repair with Tubal Ligation	36550	43000	43000	Obstetrics And Gynaecology Procedure
1488	OG007	Perforation of Uterus after D/E Laparotomy & Closure	17000	20000	20000	Obstetrics And Gynaecology Procedure
1489	OG008	Laparotomy for Ectopic Pregnancy	29750	35000	35000	Obstetrics And Gynaecology Procedure
1490	OG009	Laparotomy peritonitis Lavage and Drainage	29750	35000	35000	Obstetrics And Gynaecology Procedure
1491	OG010	Ovarian Cystectomy - Laparoscopic.	36550	43000	43000	Obstetrics And Gynaecology Procedure

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Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1492	OG011	Ovarian Cystectomy - Laparotomy.	29750	35000	35000	Obstetrics And Gynaecology Procedure
1493	OG012	Laparoscopic Broad Ligament Hematoma Drainage with repair	11390	13400	13400	Obstetrics And Gynaecology Procedure
1494	OG013	Exploration of perineal Haematoma & Repair	11390	13400	13400	Obstetrics And Gynaecology Procedure
1495	OG014	Exploration of abdominal Haematoma (after laparotomy/ LSCS)	23375	27500	27500	Obstetrics And Gynaecology Procedure
1496	OG015	Manual Removal of Placenta	7820	9200	9200	Obstetrics And Gynaecology Procedure
1497	OG016	Examination under anaesthesia (EUA)	4250	5000	5000	Obstetrics And Gynaecology Procedure
1498	OG017	Burst-Abdomen Repair	29750	35000	35000	Obstetrics And Gynaecology Procedure
1499	OG018	Gaping Perineal Wound Secondary Suturing	4250	5000	5000	Obstetrics And Gynaecology Procedure
1500	OG019	Gaping Abdominal Wound Secondary Suturing	7225	8500	8500	Obstetrics And Gynaecology Procedure
1501	OG020	Complete Perineal Tear-Repair	7820	9200	9200	Obstetrics And Gynaecology Procedure
1502	OG021	Pelvic Floor Repair(Rectocele +/- Cystocele +/- Enterocele)	29750	35000	35000	Obstetrics And Gynaecology Procedure
1503	OG022	Suction Evacuation Vesicular Mole	23375	27500	27500	Obstetrics And Gynaecology Procedure
1504	OG023	Colpotomy/Post-Coital Tear Repair	7820	9200	9200	Obstetrics And Gynaecology Procedure
1505	OG024	Excision of urethral carbuncle	11390	13400	13400	Obstetrics And Gynaecology Procedure

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			Non-NABH	NABH	Super Speciality	
1506	OG025	Shirodkar/ McDonald stitch//Cervical Stitch(Cerclage)	11390	13400	13400	Obstetrics And Gynaecology Procedure
1507	OG026	Abdominal Hysterectomy with or without salpingo-oophorectomy	36550	43000	43000	Obstetrics And Gynaecology Procedure
1508	OG027	Non-descent Vaginal Hysterectomy (NDVH) with or without BSO	36550	43000	43000	Obstetrics And Gynaecology Procedure
1509	OG028	Vaginal Hysterectomy (including of BSO) with or without repairs	36550	43000	43000	Obstetrics And Gynaecology Procedure
1510	OG029	Myomectomy -laparotomy	29750	35000	35000	Obstetrics And Gynaecology Procedure
1511	OG030	Myomectomy -laparoscopic	36550	43000	43000	Obstetrics And Gynaecology Procedure
1512	OG031	Vaginoplasty	36550	43000	43000	Obstetrics And Gynaecology Procedure
1513	OG032	Vulvectomy -Simple	29750	35000	35000	Obstetrics And Gynaecology Procedure
1514	OG033	Rectovaginal Fistula (RVF) Repair	36550	43000	43000	Obstetrics And Gynaecology Procedure
1515	OG034	Manchester/Fothergill’s operation	29750	35000	35000	Obstetrics And Gynaecology Procedure
1516	OG035	Shirodkar’s sling Operation or other sling operations for prolapse uterus	17000	20000	20000	Obstetrics And Gynaecology Procedure
1517	OG036	Laparoscopic sling operations for prolapse uterus	36550	43000	43000	Obstetrics And Gynaecology Procedure
1518	OG037	Dilatation and Curettage(diagnostic/therapeutic) with or without Polypectomy	11390	13400	13400	Obstetrics And Gynaecology Procedure
1519	OG038	Cervical Biopsy	7820	9200	9200	Obstetrics And Gynaecology Procedure

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Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1520	OG039	Transcervical/Hysteroscopic Polypectomy	11390	13400	13400	Obstetrics And Gynaecology Procedure
1521	OG040	Excision of Vaginal Cyst/Bartholin Cyst/Gartner Cyst	7820	9200	9200	Obstetrics And Gynaecology Procedure
1522	OG041	Excision of Vaginal/Uterus Septum	17000	20000	20000	Obstetrics And Gynaecology Procedure
1523	OG042	Diagnostic hysterolaparoscopy(DHL) with or without chromopertubation/Adhesiolysis/ovarian drilling	17000	20000	20000	Obstetrics And Gynaecology Procedure
1524	OG043	Laparoscopy Sterilization/Laproscopic tubal occlusion(LTO)	23375	27500	27500	Obstetrics And Gynaecology Procedure
1525	OG044	Laparoscopically Assisted Vaginal Hysterectomy (LAVH) with or without BSO	53550	63000	63000	Obstetrics And Gynaecology Procedure
1526	OG045	Balloon Tamponade for Post Partum Haemorrhage/Conservative management of PPH(Atonic/traumatic PPH)	7225	8500	8500	Obstetrics And Gynaecology Procedure
1527	OG046	Total Laparoscopic Hysterectomy with or without BSO	53550	63000	63000	Obstetrics And Gynaecology Procedure
1528	OG047	Laparoscopic Treatment of Ectopic Pregnancy-Milking/Salpingotomy/Salpingectomy	36550	43000	43000	Obstetrics And Gynaecology Procedure
1529	OG048	Conisation of cervix/Chemical Cautery of Cervical Ectopy/Erosion	7820	9200	9200	Obstetrics And Gynaecology Procedure
1530	OG049	Diagnostic hysteroscopy with or without polypectomy/endometrial curettage	17000	20000	20000	Obstetrics And Gynaecology Procedure
1531	OG050	Laparotomy recanalization of Fallopian tubes-(Tuboplasty)	45050	53000	53000	Obstetrics And Gynaecology Procedure
1532	OG051	Laparoscopic recanalization of Fallopian tubes-(Tuboplasty)	45050	53000	53000	Obstetrics And Gynaecology Procedure
1533	OG052	Colposcopy	4250	5000	5000	Obstetrics And Gynaecology Procedure

CGHS rates for Tier I (X City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1534	OG053	Inversion of Uterus – Vaginal Reposition	5100	6000	6000	Obstetrics And Gynaecology Procedure
1535	OG054	Inversion of Uterus – Abdominal Reposition	5100	6000	6000	Obstetrics And Gynaecology Procedure
1536	OG055	Vaginal Vesicovaginal Fistula (VVF) Repair	53550	63000	63000	Obstetrics And Gynaecology Procedure
1537	OG056	Interventional Ultrasonography- Chorionic villus sampling (CVS)	4250	5000	5000	Obstetrics And Gynaecology Procedure
1538	OG057	Amniocentesis	11390	13400	13400	Obstetrics And Gynaecology Procedure
1539	OG058	Thermal balloon ablation.	29750	35000	35000	Obstetrics And Gynaecology Procedure
1540	OG059	Ultrasonographic myolysis	23375	27500	27500	Obstetrics And Gynaecology Procedure
1541	OG060	Vaginal/Cervical Myomectomy	36550	43000	43000	Obstetrics And Gynaecology Procedure
1542	OG061	Intra Uterine Insemination	4250	5000	5000	Obstetrics And Gynaecology Procedure
1543	OG062	Intracytoplasmic sperm injection (ICSI)	17000	20000	20000	Obstetrics And Gynaecology Procedure
1544	OG063	Laparotomy abdominal sacro-colpopexy	45050	53000	53000	Obstetrics And Gynaecology Procedure
1545	OG064	Vaginal Colpopexy/colpopexy-abdominal	36550	43000	43000	Obstetrics And Gynaecology Procedure
1546	OG065	Laparoscopic abdominal colpopexy/sacro-colpopexy	45050	53000	53000	Obstetrics And Gynaecology Procedure
1547	OG066	Endometrial aspiration cytology/biopsy (including Pipelle Charges)	2550	3000	3000	Obstetrics And Gynaecology Procedure

CGHS rates for Tier I (X City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1548	OG067	Laparoscopic treatment for stress incontinence	36550	43000	43000	Obstetrics And Gynaecology Procedure
1549	OG068	Transvaginal tapes for Stress incontinence	29750	35000	35000	Obstetrics And Gynaecology Procedure
1550	OG069	Trans-obturator tapes for Stress incontinence	36550	43000	43000	Obstetrics And Gynaecology Procedure
1551	OG070	Interventional radiographic arterial embolization/Uterine artery embolization(UAE)	29750	35000	35000	Obstetrics And Gynaecology Procedure
1552	OG071	Internal Iliac Artery ligation	7225	8500	8500	Obstetrics And Gynaecology Procedure
1553	OG072	Surgical management of PPH (Uterine compression stitches/stepwise devascularisation)/peripartum hysterectomy	17000	20000	20000	Obstetrics And Gynaecology Procedure
1554	OG073	Intra-uterine fetal blood transfusion	45050	53000	53000	Obstetrics And Gynaecology Procedure
1555	OG074	Hysteroscopy Transcervical Resection of Endometrium (TCRE)	29750	35000	35000	Obstetrics And Gynaecology Procedure
1556	OG075	Hysteroscopy Removal of Intra-Uterine Contraceptive Device (IUCD)	17000	20000	20000	Obstetrics And Gynaecology Procedure
1557	OG076	hysteroscopic resection of uterine septum	29750	35000	35000	Obstetrics And Gynaecology Procedure
1558	OG077	Diagnostic Hysteroscopy with or without endometrial Biopsy	17000	20000	20000	Obstetrics And Gynaecology Procedure
1559	OG078	Sterilization (minilap)-post partum/post abortion	7820	9200	9200	Obstetrics And Gynaecology Procedure
1560	OG079	Interval Sterilization(minilap)-BAT / Male Sterilization(Vasectomy)	17000	20000	20000	Obstetrics And Gynaecology Procedure
1561	OG080	Medical Termination of Pregnancy (MTP)- 1st Trimester with Medicine /Manual Vacuum Aspiration /Check Curettage	11390	13400	13400	Obstetrics And Gynaecology Procedure

CGHS rates for Tier I (X City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1562	OG081	Medical Termination of Pregnancy (MTP) - 2nd Trimester /Suction and Evacuation/Dilatation and Curettage/Dilatation and expulsion	17000	20000	20000	Obstetrics And Gynaecology Procedure
1563	OG082	Insertion of IUD/IUCD/Pessary	3400	4000	4000	Obstetrics And Gynaecology Procedure
1564	OG083	Removal of IUD/IUCD/Pessary	850	1000	1000	Obstetrics And Gynaecology Procedure
1565	NU001	Ultrasound guided kidney Biopsy	7820	9200	9200	Nephrology And Urology - Biopsy
1566	NU002	Testicular Biopsy	11390	13400	13400	Nephrology And Urology - Biopsy
1567	NU003	Transrectal Ultrasound (TRUS) guided prostate biopsy	7820	9200	9200	Nephrology And Urology - Biopsy
1568	NU004	Uroflow Study (Uroflowmetry)	850	1000	1000	Nephrology And Urology Investigation
1569	NU005	Urodynamic Study (Cystometry)	2550	3000	3000	Nephrology And Urology Investigation
1570	NU006	Voiding-cysto-urethrogram and retrograde urethrogram (Nephrostogram)	7225	8500	8500	Nephrology And Urology Investigation
1571	NU007	Fistulogram for Arteriovenous Fistula	7820	9200	9200	Nephrology And Urology Investigation
1572	NU008	Partial Nephrectomy -open	36550	43000	49450	Nephrology And Urology Procedure
1573	NU009	Partial Nephrectomy-Laparoscopic/Endoscopic	45050	53000	60950	Nephrology And Urology Procedure
1574	NU010	Nephrectomy Simple -Open	53550	63000	72450	Nephrology And Urology Procedure
1575	NU011	Laparoscopic Nephrectomy	53550	63000	72450	Nephrology And Urology Procedure

CGHS rates for Tier I (X City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1576	NU012	Nephrolithotomy -open	36550	43000	49450	Nephrology And Urology Procedure
1577	NU013	Nephrolithotomy -Laparoscopic/endoscopic	45050	53000	60950	Nephrology And Urology Procedure
1578	NU014	Pyelolithotomy-open	53550	63000	72450	Nephrology And Urology Procedure
1579	NU015	Pyelolithotomy -Laparoscopic/endoscopic	45050	53000	60950	Nephrology And Urology Procedure
1580	NU016	Operations for Hydronephrosis -pyeloplasty open	45050	53000	60950	Nephrology And Urology Procedure
1581	NU017	Operations for Hydronephrosis -pyeloplasty Lap/endoscopic	53550	63000	72450	Nephrology And Urology Procedure
1582	NU018	Operations for Hydronephrosis Endopyelotomy antegrade	36550	43000	49450	Nephrology And Urology Procedure
1583	NU019	Operations for Hydronephrosis Endopyelotomy retrograde	36550	43000	49450	Nephrology And Urology Procedure
1584	NU020	Operations for Hydronephrosis ureterocalicostomy	36550	43000	49450	Nephrology And Urology Procedure
1585	NU021	Operations for Hydronephrosis-Ileal ureter	45050	53000	60950	Nephrology And Urology Procedure
1586	NU022	Open Drainage of Perinephric Abscess	29750	35000	40250	Nephrology And Urology Procedure
1587	NU023	Percutaneous Drainage of Perinephric Abscess -Ultrasound guided	11390	13400	13400	Nephrology And Urology Procedure
1588	NU024	Cavernostomy	23375	27500	31625	Nephrology And Urology Procedure
1589	NU025	Operations for Cyst of the Kidney -open	36550	43000	49450	Nephrology And Urology Procedure

CGHS rates for Tier I (X City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1590	NU026	Operations for Cyst of the Kidney Lap/endoscopic	45050	53000	60950	Nephrology And Urology Procedure
1591	NU027	Ureterolithotomy -open	36550	43000	49450	Nephrology And Urology Procedure
1592	NU028	Ureterolithotomy-Lap/Endoscopic	45050	53000	60950	Nephrology And Urology Procedure
1593	NU029	Nephroureterectomy open	45050	53000	60950	Nephrology And Urology Procedure
1594	NU030	Operations for Ureter for -Double Ureters	45050	53000	60950	Nephrology And Urology Procedure
1595	NU031	Operations for Ureter -for Ectopia of Single Ureter	36550	43000	49450	Nephrology And Urology Procedure
1596	NU032	Operations for Vesicoureteral Reflux (VUR) -Open	36550	43000	49450	Nephrology And Urology Procedure
1597	NU033	Operations for Vesicoureteral Reflux (VUR)-Lap/Endoscopic	45050	53000	60950	Nephrology And Urology Procedure
1598	NU034	Operations for Vesicoureteral Reflux (VUR)/ Urinary incontinence with bulking agents	36550	43000	49450	Nephrology And Urology Procedure
1599	NU035	Ureterostomy - Cutaneous	29750	35000	40250	Nephrology And Urology Procedure
1600	NU036	Uretero-Colic anastomosis	36550	43000	49450	Nephrology And Urology Procedure
1601	NU037	Formation of an Ileal Conduit	45050	53000	60950	Nephrology And Urology Procedure
1602	NU038	Ureteric Catheterisation/DJ Stenting	17000	20000	23000	Nephrology And Urology Procedure
1603	NU039	DJ stent removal	8135	9570	9570	Nephrology And Urology Procedure

CGHS rates for Tier I (X City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1604	NU040	Biopsy of Bladder (Cystoscopic) including (Cold Cup Biopsy)	11390	13400	13400	Nephrology And Urology Procedure
1605	NU041	Cysto-Litholapaxy	29750	35000	40250	Nephrology And Urology Procedure
1606	NU042	Operations for Injuries of the Bladder	36550	43000	49450	Nephrology And Urology Procedure
1607	NU043	Suprapubic Drainage (Cystostomy/vesicostomy)	17000	20000	23000	Nephrology And Urology Procedure
1608	NU044	Simple Cystectomy	36550	43000	49450	Nephrology And Urology Procedure
1609	NU045	Diverticulectomy -open	36550	43000	49450	Nephrology And Urology Procedure
1610	NU046	Diverticulectomy- Lap/Endoscopic	45050	53000	60950	Nephrology And Urology Procedure
1611	NU047	Diverticulectomy -Endoscopic incision of neck	29750	35000	40250	Nephrology And Urology Procedure
1612	NU048	Augmentation Cystoplasty	45050	53000	60950	Nephrology And Urology Procedure
1613	NU049	Operations for Exstrophy of the Bladder- Single stage repair	36550	43000	49450	Nephrology And Urology Procedure
1614	NU050	Operations for Exstrophy of the Bladder- Multistage repair	36550	43000	49450	Nephrology And Urology Procedure
1615	NU051	Operations for Exstrophy of the Bladder- simple cystectomy with urinary diversion	53550	63000	72450	Nephrology And Urology Procedure
1616	NU052	Repair of Ureterocele -Open	36550	43000	49450	Nephrology And Urology Procedure
1617	NU053	Repair of Ureterocele -Lap/Endoscopic	36550	43000	49450	Nephrology And Urology Procedure

CGHS rates for Tier I (X City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1618	NU054	Repair of Ureterocele -Endoscopic incision	29750	35000	40250	Nephrology And Urology Procedure
1619	NU055	Vesicovaginal Fistula (VVF) Repair (Open)	36550	43000	49450	Nephrology And Urology Procedure
1620	NU056	Vesicovaginal Fistula (VVF) Repair (Laparoscopic)	45050	53000	60950	Nephrology And Urology Procedure
1621	NU057	Open Suprapubic Prostatectomy	36550	43000	49450	Nephrology And Urology Procedure
1622	NU058	Open Retropubic Prostatectomy	36550	43000	49450	Nephrology And Urology Procedure
1623	NU059	Transurethral Resection of Prostate (TURP)	53550	63000	72450	Nephrology And Urology Procedure
1624	NU060	Urethroscopy/ Cystopanendoscopy	11390	13400	13400	Nephrology And Urology Procedure
1625	NU061	Internal urethrotomy -optical	23375	27500	31625	Nephrology And Urology Procedure
1626	NU062	Internal urethrotomy -Core through urethroplasty	36550	43000	49450	Nephrology And Urology Procedure
1627	NU063	Urethral Reconstruction -End to end anastomosis	36550	43000	49450	Nephrology And Urology Procedure
1628	NU064	Urethral Reconstruction - substitution urethroplasty (Transpubic urethroplasty)	45050	53000	60950	Nephrology And Urology Procedure
1629	NU065	Abdomino Perineal urethroplasty	45050	53000	60950	Nephrology And Urology Procedure
1630	NU066	Posterior Urethral Valve fulguration.	29750	35000	40250	Nephrology And Urology Procedure
1631	NU067	Operations for Incontinence of Urine - Male -Open	36550	43000	49450	Nephrology And Urology Procedure

CGHS rates for Tier I (X City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1632	NU068	Operations for Incontinence of Urine - Male -Sling	45050	53000	60950	Nephrology And Urology Procedure
1633	NU069	Operations for Incontinence of Urine - Male-Bulking agent	36550	43000	49450	Nephrology And Urology Procedure
1634	NU070	Operations for Incontinence of Urine - Female -Open	36550	43000	49450	Nephrology And Urology Procedure
1635	NU071	Operations for Incontinence of Urine - Female-Sling	45050	53000	60950	Nephrology And Urology Procedure
1636	NU072	Operations for Incontinence of Urine - Female-Bulking agent	36550	43000	49450	Nephrology And Urology Procedure
1637	NU073	Reduction of Paraphimosis	5100	6000	6000	Nephrology And Urology Procedure
1638	NU074	Circumcision	11390	13400	13400	Nephrology And Urology Procedure
1639	NU075	Meatotomy	7225	8500	8500	Nephrology And Urology Procedure
1640	NU076	Meatoplasty	11390	13400	13400	Nephrology And Urology Procedure
1641	NU077	Operations for Hypospadias + Chordee Correction	29750	35000	40250	Nephrology And Urology Procedure
1642	NU078	Operations for Hypospadias - Second Stage	36550	43000	49450	Nephrology And Urology Procedure
1643	NU079	Operations for Hypospadias - One Stage Repair	36550	43000	49450	Nephrology And Urology Procedure
1644	NU080	Operations for Crippled Hypospadias	36550	43000	49450	Nephrology And Urology Procedure
1645	NU081	Operations for Epispadias -primary repair	36550	43000	49450	Nephrology And Urology Procedure

CGHS rates for Tier I (X City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1646	NU082	Operations for Epispadias-crippled epispadias	45050	53000	60950	Nephrology And Urology Procedure
1647	NU083	Partial Amputation of the Penis	29750	35000	40250	Nephrology And Urology Procedure
1648	NU084	Total amputation of the Penis	36550	43000	49450	Nephrology And Urology Procedure
1649	NU085	Orchidectomy-Simple	23375	27500	31625	Nephrology And Urology Procedure
1650	NU086	Epididymectomy	17000	20000	23000	Nephrology And Urology Procedure
1651	NU087	Operations for Hydrocele - Unilateral	23375	27500	31625	Nephrology And Urology Procedure
1652	NU088	Operations for Hydrocele - Bilateral	29750	35000	40250	Nephrology And Urology Procedure
1653	NU089	Operation for Torsion of Testis	23375	27500	31625	Nephrology And Urology Procedure
1654	NU090	Micro-surgical Vasovasostomy /Vaso epididymal anastomosis .	23375	27500	31625	Nephrology And Urology Procedure
1655	NU091	Operations for Varicocele Unilateral Microsurgical	29750	35000	40250	Nephrology And Urology Procedure
1656	NU092	Operations for Varicocele Palomo’s Unilateral -Laparoscopic	29750	35000	40250	Nephrology And Urology Procedure
1657	NU093	Operations for Varicocele Bilateral --Microsurgical	36550	43000	49450	Nephrology And Urology Procedure
1658	NU094	Operations for Varicocele Palomo’s Bilateral - Laparoscopic	36550	43000	49450	Nephrology And Urology Procedure
1659	NU095	Excision of Filarial Scrotum	23375	27500	31625	Nephrology And Urology Procedure

CGHS rates for Tier I (X City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1660	NU096	Kidney Transplantation (related)	317900	374000	430100	Nephrology And Urology Procedure
1661	NU097	Kidney Transplantation (Spousal/ unrelated) Including immunosuppressant therapy	361250	425000	488750	Nephrology And Urology Procedure
1662	NU098	Kidney Transplantation (Cadaver)	297500	350000	402500	Nephrology And Urology Procedure
1663	NU099	ABO incompatible Transplantation	510000	600000	690000	Nephrology And Urology Procedure
1664	NU100	Kidney Transplant Graft Nephrectomy	69700	82000	94300	Nephrology And Urology Procedure
1665	NU101	Donor Nephrectomy (Open)	53550	63000	72450	Nephrology And Urology Procedure
1666	NU102	Donor Nephrectomy (Laparoscopic)	93500	110000	126500	Nephrology And Urology Procedure
1667	NU103	Post-Transplant Collection drainage for Lymphocele (open)	7820	9200	10580	Nephrology And Urology Procedure
1668	NU104	Post-Transplant Collection drainage for Lymphocele (percutaneous)	11390	13400	15410	Nephrology And Urology Procedure
1669	NU105	Post-Transplant Collection drainage for Lymphocele (Laparoscopic)	17000	20000	23000	Nephrology And Urology Procedure
1670	NU106	Arteriovenous Fistula for Haemodialysis	17000	20000	20000	Nephrology And Urology Procedure
1671	NU107	Arteriovenous Shunt for Haemodialysis	17000	20000	20000	Nephrology And Urology Procedure
1672	NU108	Jugular Catheterization for Haemodialysis	5100	6000	6000	Nephrology And Urology Procedure
1673	NU109	Subclavian Catheterization for Haemodialysis	5100	6000	6000	Nephrology And Urology Procedure

CGHS rates for Tier I (X City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1674	NU110	One Sided (single Lumen) Femoral Catheterization for Haemodialysis	3400	4000	4000	Nephrology And Urology Procedure
1675	NU111	Bilateral (single Lumen) Femoral Catheterization for Haemodialysis	5100	6000	6000	Nephrology And Urology Procedure
1676	NU112	Double Lumen Femoral Catheterization for Haemodialysis	11390	13400	13400	Nephrology And Urology Procedure
1677	NU113	Permcath Insertion excluding the cost of the catheter	7225	8500	8500	Nephrology And Urology Procedure
1678	NU114	Arterio Venous Prosthetic Graft	36550	43000	49450	Nephrology And Urology Procedure
1679	NU115	Single lumen Jugular Catheterization	4250	5000	5000	Nephrology And Urology Procedure
1680	NU116	Single lumen Subclavian Catheterization	4250	5000	5000	Nephrology And Urology Procedure
1681	NU117	Plasma Exchange/ Plasmapheresis	17000	20000	20000	Nephrology And Urology Procedure
1682	NU118	Continuous Ambulatory Peritoneal Dialysis (CAPD) catheter insertion- Open method	17000	20000	20000	Nephrology And Urology Procedure
1683	NU119	Continuous Ambulatory Peritoneal Dialysis (CAPD) catheter insertion- Schlendinger/ Seldinger method	17000	20000	20000	Nephrology And Urology Procedure
1684	NU120	Sustained low efficiency haemodialysis /haemodialysis	7820	9200	9200	Nephrology And Urology Procedure
1685	NU121	Continuous Veno venous/Arteriovenous Haemofiltration /Haemofiltration/CRRT per day	14450	17000	17000	Nephrology And Urology Procedure
1686	NU122	Haemodialysis / Haemodialysis for Sero negative cases including Dialyser and all other Consumables	2125	2500	2500	Nephrology And Urology Procedure
1687	NU123	Haemodialysis / Haemodialysis for Sero Positive cases including Dialyser and all other Consumables	2550	3000	3000	Nephrology And Urology Procedure

CGHS rates for Tier I (X City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1688	NU124	Acute Peritoneal Dialysis	4505	5300	5300	Nephrology And Urology Procedure
1689	NU125	Peritoneal Dialysis	3060	3600	3600	Nephrology And Urology Procedure
1690	NU126	Fistula stenosis dilation	11390	13400	13400	Nephrology And Urology Procedure
1691	NU127	Slow continuous Ultrafiltration	7225	8500	8500	Nephrology And Urology Procedure
1692	NU128	Percutaneous Nephrolithotomy (PCNL) - Unilateral	45050	53000	60950	Nephrology And Urology Procedure
1693	NU129	Percutaneous Nephrolithotomy (PCNL) - Bilateral	53550	63000	72450	Nephrology And Urology Procedure
1694	NU130	Endoscopic Bulking agent Inject (including cost of bulking agent)	29750	35000	40250	Nephrology And Urology Procedure
1695	NU131	Nephrostomy -Open	29750	35000	40250	Nephrology And Urology Procedure
1696	NU132	Nephrostomy -Lap/Endoscopic	29750	35000	40250	Nephrology And Urology Procedure
1697	NU133	Ureteric Reimplant for Megaureter/ Vesicoureteric reflux/ureterocele (Open)	36550	43000	49450	Nephrology And Urology Procedure
1698	NU134	Ureteric Reimplant for Megaureter / Vesicoureteric reflux/ ureterocele (Laparoscopic)	36550	43000	49450	Nephrology And Urology Procedure
1699	NU135	Partial Cystectomy	45050	53000	60950	Nephrology And Urology Procedure
1700	NU136	Transurethral Resection of Prostate (TURP) with Cystolithotripsy	53550	63000	72450	Nephrology And Urology Procedure
1701	NU137	Closure of Urethral Fistula	29750	35000	40250	Nephrology And Urology Procedure

CGHS rates for Tier I (X City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1702	NU138	Orchidopexy - Unilateral -Open	29750	35000	40250	Nephrology And Urology Procedure
1703	NU139	Orchidopexy - Unilateral- Lap/Endoscopic	36550	43000	49450	Nephrology And Urology Procedure
1704	NU140	Orchidopexy - Bilateral -Open	36550	43000	49450	Nephrology And Urology Procedure
1705	NU141	Orchidopexy - Bilateral -Lap/Endoscopic	45050	53000	60950	Nephrology And Urology Procedure
1706	NU142	Cystolithotomy -Suprapubic	23375	27500	31625	Nephrology And Urology Procedure
1707	NU143	Endoscopic Removal of Stone in Bladder	29750	35000	40250	Nephrology And Urology Procedure
1708	NU144	Resection Bladder Neck Endoscopic / Bladder neck incision / transurethral incision on prostrate	36550	43000	49450	Nephrology And Urology Procedure
1709	NU145	Ureteroscopic Surgery	29750	35000	40250	Nephrology And Urology Procedure
1710	NU146	Urethroplasty 1st Stage	36550	43000	49450	Nephrology And Urology Procedure
1711	NU147	Scrotal Exploration	23375	27500	31625	Nephrology And Urology Procedure
1712	NU148	Perineal Urethrostomy	29750	35000	40250	Nephrology And Urology Procedure
1713	NU149	Dilatation of Stricture Urethra under G.A.	4250	5000	5000	Nephrology And Urology Procedure
1714	NU150	Laparoscopic pyelolithotomy	53550	63000	72450	Nephrology And Urology Procedure
1715	NU151	Laparoscopic Pyeloplasty	53550	63000	72450	Nephrology And Urology Procedure

CGHS rates for Tier I (X City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1716	NU152	Laparoscopic surgery for Renal cyst	53550	63000	72450	Nephrology And Urology Procedure
1717	NU153	Laparoscopic ureterolithotomy	53550	63000	72450	Nephrology And Urology Procedure
1718	NU154	Laparoscopic Nephroureterectomy	45050	53000	60950	Nephrology And Urology Procedure
1719	NU155	Extracorporeal Shock Wave Lithotripsy (ESWL)	36550	43000	49450	Nephrology And Urology Procedure
1720	NU156	Diagnostic Cystoscopy	7225	8500	8500	Nephrology And Urology Procedure
1721	NU157	Cystoscopy with Retrograde Catheter -Unilateral/RGP	17000	20000	23000	Nephrology And Urology Procedure
1722	NU158	Cystoscopy with Retrograde Catheter - Bilateral/RGP	23375	27500	31625	Nephrology And Urology Procedure
1723	NU159	Retrograde Intrarenal Surgery (RIRS)/ Flexible Ureteroscopy	53550	63000	72450	Nephrology And Urology Procedure
1724	NU160	Holmium YAG Prostate Surgery	64600	76000	87400	Nephrology And Urology Procedure
1725	NU161	Holmium YAG Optical Internal Urethrotomy (OIU)	36550	43000	49450	Nephrology And Urology Procedure
1726	NU162	Holmium YAG Core through internal Urethrotomy	45050	53000	60950	Nephrology And Urology Procedure
1727	NU163	Holmium YAG Stone Lithotripsy	64600	76000	87400	Nephrology And Urology Procedure
1728	NU164	Green Light Laser for Prostate	64600	76000	87400	Nephrology And Urology Procedure
1729	NU165	Cystoscopic Botulinum Toxin Injection (Over active bladder/ Neurogenic bladder) -excluding cost of drug	11390	13400	13400	Nephrology And Urology Procedure

CGHS rates for Tier I (X City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1730	NU166	Peyronie's Disease – Plaque excision with grafting	29750	35000	40250	Nephrology And Urology Procedure
1731	NU167	Prosthetic Surgery for urinary incontinence	36550	43000	49450	Nephrology And Urology Procedure
1732	NU168	Ultrasound Guided Percutaneous Nephrostomy (PCN)	17000	20000	20000	Nephrology And Urology Procedure
1733	NI001	Electroencephalogram (EEG)/ Video EEG	850	1000	1000	Neurology Investigation
1734	NI002	Electromyography (EMG)	1275	1500	1500	Neurology Investigation
1735	NI003	Nerve conduction velocity (NCV), -two or more limbs	1275	1500	1500	Neurology Investigation
1736	NI004	Repetitive nerve stimulation (RNS)-Decremental response (before and after neostigmine)	1275	1500	1500	Neurology Investigation
1737	NI005	Repetitive nerve stimulation (RNS)-Incremental response	1275	1500	1500	Neurology Investigation
1738	NI006	Somatosensory evoked potentials (SSEP)	1275	1500	1500	Neurology Investigation
1739	NI007	Polysomnography (PSG) / Level I Sleep study including Room Rent and Titration	7650	9000	9000	Neurology Investigation
1740	NI008	Brachial plexus study	1275	1500	1500	Neurology Investigation
1741	NI009	RNS(Repetitive Nerve stimulation)	1360	1600	1600	Neurology Investigation
1742	NS001	Lumbar Pressure Monitoring	7820	9200	9200	Neuro-Surgery Investigation
1743	NS002	Brain Mapping	23375	27500	27500	Neuro-Surgery Investigation
1744	NS003	Nerve Biopsy	17000	20000	20000	Neuro-Surgery Biopsy
1745	NS004	Brain Biopsy	36550	43000	43000	Neuro-Surgery Biopsy
1746	NS005	Craniotomy and Evacuation of Haematoma -Subdural	69700	82000	94300	Neuro-Surgery Procedure
1747	NS006	Craniotomy and Evacuation of Haematoma - Extradural	69700	82000	94300	Neuro-Surgery Procedure
1748	NS007	Evacuation /Excision of Brain Abscess by craniotomy	69700	82000	94300	Neuro-Surgery Procedure
1749	NS008	Excision of Lobe (Frontal Temporal Cerebellum etc.)	69700	82000	94300	Neuro-Surgery Procedure
1750	NS009	Twist Drill Craniostomy	36550	43000	49450	Neuro-Surgery Procedure
1751	NS010	Subdural Tapping	11390	13400	15410	Neuro-Surgery Procedure

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Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1752	NS011	Ventricular Tapping	29750	35000	40250	Neuro-Surgery Procedure
1753	NS012	Brain Abscess Tapping	23375	27500	31625	Neuro-Surgery Procedure
1754	NS013	Placement of Intracranial pressure (ICP) Monitor	23375	27500	31625	Neuro-Surgery Procedure
1755	NS014	Skull Traction Application	7820	9200	10580	Neuro-Surgery Procedure
1756	NS015	Vascular Malformations	82450	97000	111550	Neuro-Surgery Procedure
1757	NS016	Meningoencephalocele excision and repair	64600	76000	87400	Neuro-Surgery Procedure
1758	NS017	Meningomyelocele Repair	53550	63000	72450	Neuro-Surgery Procedure
1759	NS018	CSF Rhinorrhoea Repair	53550	63000	72450	Neuro-Surgery Procedure
1760	NS019	Cranioplasty	53550	63000	72450	Neuro-Surgery Procedure
1761	NS020	Anterior Cervical Discectomy	53550	63000	72450	Neuro-Surgery Procedure
1762	NS021	Brachial Plexus Exploration and neurotization	53550	63000	72450	Neuro-Surgery Procedure
1763	NS022	Median Nerve Decompression	36550	43000	49450	Neuro-Surgery Procedure
1764	NS023	Peripheral Nerve Surgery – Major	53550	63000	72450	Neuro-Surgery Procedure
1765	NS024	Peripheral Nerve Surgery Minor	45050	53000	60950	Neuro-Surgery Procedure
1766	NS025	Ventriculoatrial /Ventriculoperitoneal Shunt	45050	53000	60950	Neuro-Surgery Procedure
1767	NS026	Anterior Cervical Spine Surgery with fusion	64600	76000	87400	Neuro-Surgery Procedure
1768	NS027	Anterio Lateral Decompression of spine	69700	82000	94300	Neuro-Surgery Procedure
1769	NS028	Cervical or Dorsal or Lumbar Laminectomy	45050	53000	60950	Neuro-Surgery Procedure
1770	NS029	Combined Trans-Oral Surgery & Craniovertebral (CV) Junction Fusion	53550	63000	72450	Neuro-Surgery Procedure
1771	NS030	Craniovertebral Junction (CVJ) Fusion procedures	64600	76000	87400	Neuro-Surgery Procedure
1772	NS031	Depressed Fracture Elevation	45050	53000	60950	Neuro-Surgery Procedure
1773	NS032	Lumbar Discectomy	53550	63000	72450	Neuro-Surgery Procedure
1774	NS033	Endarterectomy (Carotid)	53550	63000	72450	Neuro-Surgery Procedure
1775	NS034	Radiofrequency (RF) Lesion for Trigeminal Neuralgia	45050	53000	60950	Neuro-Surgery Procedure
1776	NS035	Spasticity Surgery	45050	53000	60950	Neuro-Surgery Procedure
1777	NS036	Spinal Fusion Procedure	64600	76000	87400	Neuro-Surgery Procedure
1778	NS037	Spinal Bifida Surgery Major	53550	63000	72450	Neuro-Surgery Procedure

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Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1779	NS038	Spinal Bifida Surgery Minor	45050	53000	60950	Neuro-Surgery Procedure
1780	NS039	Stereotaxic Procedures- biopsy/aspiration of cyst	36550	43000	49450	Neuro-Surgery Procedure
1781	NS040	Trans Sphenoidal Surgery	45050	53000	60950	Neuro-Surgery Procedure
1782	NS041	Trans Oral Surgery	45050	53000	60950	Neuro-Surgery Procedure
1783	NS042	Implantation of Deep Brain Stimulation (DBS) -One electrode (as per guidelines mentioned in OM.No.Z15025/44/2023/DIR/CGHS/EHS Dated 09.09.2024)	53550	63000	72450	Neuro-Surgery Procedure
1784	NS043	Implantation of Deep Brain Stimulation (DBS) -two electrodes (as per guidelines mentioned in OM.No.Z15025/44/2023/DIR/CGHS/EHS Dated 09.09.2024)	64600	76000	87400	Neuro-Surgery Procedure
1785	NS044	Endoscopic aqueductoplasty	45050	53000	60950	Neuro-Surgery Procedure
1786	NS045	Facial nerve reconstruction	64600	76000	87400	Neuro-Surgery Procedure
1787	NS046	Carotid Stenting excluding the cost of Stent	53550	63000	72450	Neuro-Surgery Procedure
1788	NS047	Cervical disc arthroplasty	53550	63000	72450	Neuro-Surgery Procedure
1789	NS048	Lumbar disc arthroplasty	45050	53000	60950	Neuro-Surgery Procedure
1790	NS049	Corpus callostomy for Epilepsy	69700	82000	94300	Neuro-Surgery Procedure
1791	NS050	Hemispherotomy for Epilepsy	69700	82000	94300	Neuro-Surgery Procedure
1792	NS051	Endoscopic CSF rhinorrhoea repair	45050	53000	60950	Neuro-Surgery Procedure
1793	NS052	Burr hole evacuation of chronic subdural haematoma	53550	63000	72450	Neuro-Surgery Procedure
1794	NS053	Epilepsy surgery other than at Code No. NS049 and NS050	82450	97000	111550	Neuro-Surgery Procedure
1795	NS054	Radiofrequency (RF) lesion for facet joint pain syndrome	53550	63000	72450	Neuro-Surgery Procedure
1796	NS055	Cervical Laminoplasty	64600	76000	87400	Neuro-Surgery Procedure
1797	NS056	Lateral mass C1-C2 screw fixation	64600	76000	87400	Neuro-Surgery Procedure
1798	NS057	Microsurgical decompression for Trigeminal nerve	53550	63000	72450	Neuro-Surgery Procedure
1799	NS058	Microsurgical decompression for hemifacial spasm	53550	63000	72450	Neuro-Surgery Procedure
1800	NS059		53550	63000	72450	Neuro-Surgery Procedure

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Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
		Extracranial-Intracranial Bypass Procedures (EC-IC) bypass procedures				
1801	NS060	Image Guided Craniotomy	69700	82000	94300	Neuro-Surgery Procedure
1802	NS061	Baclofen pump implantation lesioning for movement disorder including Parkinsonism/Spinal Cord Stimulator Implantation	64600	76000	87400	Neuro-Surgery Procedure
1803	NS062	Programmable Ventriculo-Peritoneal (VP) shunt excluding the cost of the Device	53550	63000	72450	Neuro-Surgery Procedure
1804	NS063	Endoscopic Sympathectomy	53550	63000	72450	Neuro-Surgery Procedure
1805	NS064	Lumbar Puncture	2550	3000	3000	Neuro-Surgery Procedure
1806	NS065	External Ventricular Drainage (EVD)	23375	27500	31625	Neuro-Surgery Procedure
1807	NS066	Endoscopic 3rd ventriculostomy	45050	53000	60950	Neuro-Surgery Procedure
1808	NS067	Endoscopic cranial surgery/Biopsy/aspiration	53550	63000	72450	Neuro-Surgery Procedure
1809	NS068	Endoscopic discectomy (Lumbar, Cervical)	53550	63000	72450	Neuro-Surgery Procedure
1810	NS069	Aneurysm coiling (Endovascular)	53550	63000	72450	Neuro-Surgery Procedure
1811	NS070	Surgery for Skull Fractures	64600	76000	87400	Neuro-Surgery Procedure
1812	NS071	Carpel Tunnel decompression	36550	43000	49450	Neuro-Surgery Procedure
1813	NS072	Clipping of intracranial aneurysm	69700	82000	94300	Neuro-Surgery Procedure
1814	NS073	Surgery for intracranial Arteriovenous malformations (AVM)	82450	97000	111550	Neuro-Surgery Procedure
1815	NS074	Foramen magnum decompression for Chiari Malformation	109650	129000	148350	Neuro-Surgery Procedure
1816	NS075	Dorsal column stimulation for backache in failed back syndrome	53550	63000	72450	Neuro-Surgery Procedure
1817	NS076	Surgery for recurrent disc prolapse/epidural fibrosis	53550	63000	72450	Neuro-Surgery Procedure
1818	NS077	Decompressive craniotomy for hemispherical acute subdural haematoma/ brain swelling/large infarct	69700	82000	94300	Neuro-Surgery Procedure
1819	NS078	Intra-arterial thrombolysis with Tissue Plasminogen Activator (TPA) (for ischemic stroke)	29750	35000	40250	Neuro-Surgery Procedure
1820	NS079	Stereotactic aspiration of intracerebral haematoma	64600	76000	87400	Neuro-Surgery Procedure
1821	NS080	Endoscopic aspiration of intracerebellar haematoma	64600	76000	87400	Neuro-Surgery Procedure
1822	NS081	Stereotactic Radiosurgery for brain pathology (X knife/Gamma) - ONE session	45050	53000	60950	Neuro-Surgery Procedure

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Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1823	NS082	Stereotactic Radiosurgery for brain pathology (X knife / Gamma knife -Two or more sessions)	64600	76000	87400	Neuro-Surgery Procedure
1824	NS083	Battery Placement for Deep Brain Stimulation (DBS)	29750	35000	40250	Neuro-Surgery Procedure
1825	NS084	Baclofen pump implantation for spasticity/Intra-thecal Pump Implantation	29750	35000	40250	Neuro-Surgery Procedure
1826	NS085	Surgery for Scalp Arteriovenous Malformations (AVMs)	53550	63000	72450	Neuro-Surgery Procedure
1827	NS086	Kyphoplasty excluding the cost of implants	45050	53000	60950	Neuro-Surgery Procedure
1828	NS087	Balloon Kyphoplasty	53550	63000	72450	Neuro-Surgery Procedure
1829	NS088	Lesioning procedures for Parkinson’s disease,Dystonia etc.	45050	53000	60950	Neuro-Surgery Procedure
1830	OR001	Joints Aspiration	1360	1600	1600	Orthopaedics Procedure
1831	OR002	Plaster Work	4250	5000	5000	Orthopaedics Procedure
1832	OR003	Fingers (post slab)	850	1000	1000	Orthopaedics Procedure
1833	OR004	Fingers full plaster	1275	1500	1500	Orthopaedics Procedure
1834	OR005	Colles Fracture - Below elbow	5100	6000	6000	Orthopaedics Procedure
1835	OR006	Colles Fracture - Full plaster	3825	4500	4500	Orthopaedics Procedure
1836	OR007	Colles fracture Ant. Or post. slab	2550	3000	3000	Orthopaedics Procedure
1837	OR008	Above elbow full plaster	3400	4000	4000	Orthopaedics Procedure
1838	OR009	Above Knee post-slab	2550	3000	3000	Orthopaedics Procedure
1839	OR010	Below Knee full plaster	3400	4000	4000	Orthopaedics Procedure
1840	OR011	Below Knee post-slab	4250	5000	5000	Orthopaedics Procedure
1841	OR012	Tube Plaster (or plaster cylinder)	4250	5000	5000	Orthopaedics Procedure
1842	OR013	Above knee full plaster	4250	5000	5000	Orthopaedics Procedure
1843	OR014	Above knee full slab	2975	3500	3500	Orthopaedics Procedure
1844	OR015	Minerva Jacket	7820	9200	9200	Orthopaedics Procedure
1845	OR016	Plaster Jacket	5100	6000	6000	Orthopaedics Procedure
1846	OR017	Shoulder spica	7225	8500	8500	Orthopaedics Procedure
1847	OR018	Single Hip spica	5950	7000	7000	Orthopaedics Procedure

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Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1848	OR019	Double Hip spica	7225	8500	8500	Orthopaedics Procedure
1849	OR020	Strapping of Finger	425	500	500	Orthopaedics Procedure
1850	OR021	Strapping of Toes	510	600	600	Orthopaedics Procedure
1851	OR022	Strapping of Wrist	638	750	750	Orthopaedics Procedure
1852	OR023	Strapping of Elbow	1275	1500	1500	Orthopaedics Procedure
1853	OR024	Strapping of Knee	850	1000	1000	Orthopaedics Procedure
1854	OR025	Strapping of Ankle	680	800	800	Orthopaedics Procedure
1855	OR026	Strapping of Chest	1275	1500	1500	Orthopaedics Procedure
1856	OR027	Strapping of Shoulder	1275	1500	1500	Orthopaedics Procedure
1857	OR028	Figure of 8 bandage	850	1000	1000	Orthopaedics Procedure
1858	OR029	Collar and cuff sling	425	500	500	Orthopaedics Procedure
1859	OR030	Ball bandage	680	800	800	Orthopaedics Procedure
1860	OR031	Application of POP Casts for Upper & Lower Limbs	5100	6000	6000	Orthopaedics Procedure
1861	OR032	Application of Functional Cast Brace	3400	4000	4000	Orthopaedics Procedure
1862	OR033	Application of Skin Traction	2125	2500	2500	Orthopaedics Procedure
1863	OR034	Application of Skeletal Tractions	5100	6000	6000	Orthopaedics Procedure
1864	OR035	Bandage & Strappings for Fractures	1700	2000	2000	Orthopaedics Procedure
1865	OR036	Aspiration & Intra Articular Injections	4250	5000	5000	Orthopaedics Procedure
1866	OR037	Application of POP Spices & Jackets	5100	6000	6000	Orthopaedics Procedure
1867	OR038	Close Reduction of Fractures of Limb & POP	11390	13400	13400	Orthopaedics Procedure
1868	OR039	Open Reduction & Internal Fixation (ORIF) of Fingers & Toes	17000	20000	20000	Orthopaedics Procedure
1869	OR040	Open Reduction of fracture of Long Bones of Upper / Lower Limb -Nailing & External Fixation	36550	43000	43000	Orthopaedics Procedure
1870	OR041	Open Reduction of fracture of Long Bones of Upper /Lower Limb -AO Procedures	36550	43000	43000	Orthopaedics Procedure
1871	OR042	Tension Band Wirings	23375	27500	27500	Orthopaedics Procedure
1872	OR043	Bone Grafting	23375	27500	27500	Orthopaedics Procedure
1873	OR044	Excision or other Operations for Scaphoid Fractures	29750	35000	35000	Orthopaedics Procedure

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Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1874	OR045	Sequestrectomy & Saucerisation	29750	35000	35000	Orthopaedics Procedure
1875	OR046	Sequestrectomy & Saucerizations -Arthrotomy	29750	35000	35000	Orthopaedics Procedure
1876	OR047	Multiple Pinning Fracture Neck Femur	45050	53000	53000	Orthopaedics Procedure
1877	OR048	Plate Fixations for Fracture Neck Femur	45050	53000	53000	Orthopaedics Procedure
1878	OR049	AO Compression Procedures for Fracture Neck Femur	45050	53000	53000	Orthopaedics Procedure
1879	OR050	Open Reduction of Fracture Neck Femur Muscle Pedicle Graft and Internal Fixations	45050	53000	53000	Orthopaedics Procedure
1880	OR051	Close Reduction of Dislocations	17000	20000	20000	Orthopaedics Procedure
1881	OR052	Open Reduction of Dislocations	29750	35000	35000	Orthopaedics Procedure
1882	OR053	Open Reduction & Internal Fixation (ORIF) of Fracture Dislocation	36550	43000	43000	Orthopaedics Procedure
1883	OR054	Neurolysis/Nerve repair	36550	43000	43000	Orthopaedics Procedure
1884	OR055	Nerve Repair with Grafting	53550	63000	63000	Orthopaedics Procedure
1885	OR056	Tendon with Transplant or Graft	36550	43000	43000	Orthopaedics Procedure
1886	OR057	Tendon Lengthening/Tendon repair	23375	27500	27500	Orthopaedics Procedure
1887	OR058	Tendon Transfer	29750	35000	35000	Orthopaedics Procedure
1888	OR059	Split Osteotomy and Internal Fixations	45050	53000	53000	Orthopaedics Procedure
1889	OR060	Anterolateral decompression for tuberculosis/ Costo-Transversectomy	36550	43000	43000	Orthopaedics Procedure
1890	OR061	Anterolateral Decompression and Spine Fusion	53550	63000	63000	Orthopaedics Procedure
1891	OR062	Corrective Osteotomy & Internal Fixation- short bones	29750	35000	35000	Orthopaedics Procedure
1892	OR063	Corrective Osteotomy & Internal Fixation- long bones	36550	43000	43000	Orthopaedics Procedure
1893	OR064	Arthrodesis of - Minor Joints	29750	35000	35000	Orthopaedics Procedure
1894	OR065	Arthrodesis of - Major Joints	36550	43000	43000	Orthopaedics Procedure
1895	OR066	Soft Tissue Operations for Congenital Talipes Equinovarus (CTEV)	29750	35000	35000	Orthopaedics Procedure
1896	OR067	Hemiarthroplasty- Hip	53550	63000	63000	Orthopaedics Procedure
1897	OR068	Hemiarthroplasty- Shoulder	45050	53000	53000	Orthopaedics Procedure
1898	OR069	Operations for Brachial Plexus & Cervical Rib	64600	76000	76000	Orthopaedics Procedure

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Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1899	OR070	Amputations - Below Knee	36550	43000	43000	Orthopaedics Procedure
1900	OR071	Amputations - Below Elbow	29750	35000	35000	Orthopaedics Procedure
1901	OR072	Amputations - Above Knee	45050	53000	53000	Orthopaedics Procedure
1902	OR073	Amputations - Above Elbow	36550	43000	43000	Orthopaedics Procedure
1903	OR074	Amputations - Forequarter	53550	63000	63000	Orthopaedics Procedure
1904	OR075	Amputations -Hind Quarter and Hemipelvectomy	64600	76000	76000	Orthopaedics Procedure
1905	OR076	Disarticulations - Major joint	36550	43000	43000	Orthopaedics Procedure
1906	OR077	Disarticulations - Minor joint	29750	35000	35000	Orthopaedics Procedure
1907	OR078	Arthrography	17000	20000	20000	Orthopaedics Investigation
1908	OR079	Arthroscopy - Diagnostic	29750	35000	35000	Orthopaedics Procedure
1909	OR080	Arthroscopy-therapeutic: without implant	36550	43000	43000	Orthopaedics Procedure
1910	OR081	Arthroscopy-therapeutic: with implant	45050	53000	53000	Orthopaedics Procedure
1911	OR082	Soft Tissue Operation on Joints -Small	23375	27500	27500	Orthopaedics Procedure
1912	OR083	Soft Tissue Operation on Joints -Large	36550	43000	43000	Orthopaedics Procedure
1913	OR084	Myocutaneous and Fasciocutaneous Flap Procedures for Limbs	45050	53000	53000	Orthopaedics Procedure
1914	OR085	Removal of Wires & Screw	11390	13400	13400	Orthopaedics Procedure
1915	OR086	Removal of Plates	23375	27500	27500	Orthopaedics Procedure
1916	OR087	Total Hip Replacement (THR)	109650	129000	148350	Orthopaedics Procedure
1917	OR088	Total Ankle Joint Replacement (TAR) - Unilateral	109650	129000	148350	Orthopaedics Procedure
1918	OR089	Total Knee Joint Replacement (TKR) - Unilateral	129200	152000	174800	Orthopaedics Procedure
1919	OR090	Total Shoulder Joint Replacement - Unilateral	109650	129000	148350	Orthopaedics Procedure
1920	OR091	Total Elbow Joint Replacement - Unilateral	93500	110000	126500	Orthopaedics Procedure
1921	OR092	Total Wrist Joint Replacement - Unilateral	109650	129000	148350	Orthopaedics Procedure
1922	OR093	Total Finger Joint Replacement	53550	63000	72450	Orthopaedics Procedure
1923	OR094	Tubular external fixator	29750	35000	35000	Orthopaedics Procedure
1924	OR095	Ilizarov's External Fixator	45050	53000	53000	Orthopaedics Procedure
1925	OR096	Pelvi-acetabular fracture -Internal fixation	53550	63000	63000	Orthopaedics Procedure

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Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1926	OR097	Meniscectomy	45050	53000	53000	Orthopaedics Procedure
1927	OR098	Meniscus Repair	53550	63000	63000	Orthopaedics Procedure
1928	OR099	Anterior Cruciate Ligament (ACL) Reconstruction	53550	63000	63000	Orthopaedics Procedure
1929	OR100	Posterior Cruciate Ligament (PCL) Reconstruction	64600	76000	76000	Orthopaedics Procedure
1930	OR101	Knee Collateral Ligament Reconstruction	64600	76000	76000	Orthopaedics Procedure
1931	OR102	Bankart Repair Shoulder	53550	63000	63000	Orthopaedics Procedure
1932	OR103	Rotator cuff repair / RC repair	53550	63000	63000	Orthopaedics Procedure
1933	OR104	Biceps Tenodesis	45050	53000	53000	Orthopaedics Procedure
1934	OR105	Distal biceps tendon repair	45050	53000	53000	Orthopaedics Procedure
1935	OR106	Arthrolysis of knee	45050	53000	53000	Orthopaedics Procedure
1936	OR107	Capsulotomy of Shoulder	45050	53000	53000	Orthopaedics Procedure
1937	OR108	Conservative Plaster of Paris (POP)	3400	4000	4000	Orthopaedics Procedure
1938	OR109	Application for CTEV per sitting	7225	8500	8500	Orthopaedics Procedure
1939	OR110	Total Hip Replacement (THR) Revision Stage-I	82450	97000	111550	Orthopaedics Procedure
1940	OR111	Total Hip Replacement (THR) Revision Stage-II	109650	129000	148350	Orthopaedics Procedure
1941	OR112	Total Knee Replacement (TKR) Revision Stage-I	82450	97000	111550	Orthopaedics Procedure
1942	OR113	Total Knee Replacement (TKR) Revision Stage-II	109650	129000	148350	Orthopaedics Procedure
1943	OR114	Illizarov/ external fixation for limb lengthening/deformity correction	53550	63000	63000	Orthopaedics Procedure
1944	OR115	Discectomy/ Micro Discectomy	69700	82000	82000	Orthopaedics Procedure
1945	OR116	Spinal Fixation Cervical/dorsolumbar/ lumbosacral	129200	152000	152000	Orthopaedics Procedure
1946	OR117	Fusion Surgery Cervical/ Lumbar Spine up to 2 Level	53550	63000	63000	Orthopaedics Procedure
1947	OR118	Spinal Fusion Surgery Cervical/ Lumbar Spine -More than 2 Level	69700	82000	82000	Orthopaedics Procedure
1948	OR119	Scoliosis Surgery/ Deformity Correction of Spine	82450	97000	97000	Orthopaedics Procedure
1949	OR120	Vertebroplasty	64600	76000	76000	Orthopaedics Procedure
1950	OR121	Spinal Injections	4250	5000	5000	Orthopaedics Procedure
1951	OR122	Dynamic Hip Screw (DHS) for Fracture Neck Femur	45050	53000	53000	Orthopaedics Procedure
1952	OR123	Proximal Femur Nail (PFN) for IT fracture (Intertrochanteric Fractures)	45050	53000	53000	Orthopaedics Procedure

CGHS rates for Tier I (X City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1953	OR124	Spinal Osteotomy	45050	53000	53000	Orthopaedics Procedure
1954	OR125	Illizarov's / External Fixation for Trauma	45050	53000	53000	Orthopaedics Procedure
1955	OR126	Soft Tissue Operations for Polio/ Cerebral Palsy	29750	35000	35000	Orthopaedics Procedure
1956	OR127	Mini Fixator for Hand/Foot	29750	35000	35000	Orthopaedics Procedure
1957	BP001	Injection of Keloids - Ganglion	3400	4000	4000	Burns And Plastic Surgery Procedure
1958	BP002	Injection of Keloids - Haemangioma	3400	4000	4000	Burns And Plastic Surgery Procedure
1959	BP003	Free Grafts - Wolfe Grafts	17000	20000	23000	Burns And Plastic Surgery Procedure
1960	BP004	Free Grafts - Thiersch- Small Area 5%	17000	20000	23000	Burns And Plastic Surgery Procedure
1961	BP005	Free Grafts - Large Area 10%	29750	35000	40250	Burns And Plastic Surgery Procedure
1962	BP006	Free Grafts - Very Large Area 20% and above.	36550	43000	49450	Burns And Plastic Surgery Procedure
1963	BP007	Skin Flaps - Rotation Flaps	23375	27500	31625	Burns And Plastic Surgery Procedure
1964	BP008	Skin Flaps - Advancement Flaps	29750	35000	40250	Burns And Plastic Surgery Procedure
1965	BP009	Skin Flaps - Direct- cross Leg Flaps- Cross Arm Flap	36550	43000	49450	Burns And Plastic Surgery Procedure
1966	BP010	Skin Flaps - Cross Finger	29750	35000	40250	Burns And Plastic Surgery Procedure
1967	BP011	Skin Flaps - Abdominal	29750	35000	40250	Burns And Plastic Surgery Procedure

CGHS rates for Tier I (X City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1968	BP012	Skin Flaps - Thoracic	23375	27500	31625	Burns And Plastic Surgery Procedure
1969	BP013	Skin Flaps - Arm Etc.	23375	27500	31625	Burns And Plastic Surgery Procedure
1970	BP014	Subcutaneous Pedicle Flaps Raising	23375	27500	31625	Burns And Plastic Surgery Procedure
1971	BP015	Subcutaneous Pedicle Flaps Delay	23375	27500	31625	Burns And Plastic Surgery Procedure
1972	BP016	Subcutaneous Pedicle Flaps Transfer	23375	27500	31625	Burns And Plastic Surgery Procedure
1973	BP017	Cartilage Grafting	36550	43000	49450	Burns And Plastic Surgery Procedure
1974	BP018	Cleft Lip - Repair.	29750	35000	40250	Burns And Plastic Surgery Procedure
1975	BP019	Cleft Palate Repair	36550	43000	49450	Burns And Plastic Surgery Procedure
1976	BP020	Primary Bone Grafting for Alveolar Cleft in Cleft Lip	36550	43000	49450	Burns And Plastic Surgery Procedure
1977	BP021	Secondary Surgery for Cleft Lip Deformity	36550	43000	49450	Burns And Plastic Surgery Procedure
1978	BP022	Secondary Surgery for Cleft Palate	36550	43000	49450	Burns And Plastic Surgery Procedure
1979	BP023	Reconstruction of Eyelid Defects - Minor	23375	27500	31625	Burns And Plastic Surgery Procedure
1980	BP024	Reconstruction of Eyelid Defects - Major	29750	35000	40250	Burns And Plastic Surgery Procedure
1981	BP025	Plastic Surgery of Different Regions of the Ear -Minor	29750	35000	40250	Burns And Plastic Surgery Procedure

CGHS rates for Tier I (X City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1982	BP026	Plastic Surgery of Different Regions of the Ear -Major	36550	43000	49450	Burns And Plastic Surgery Procedure
1983	BP027	Plastic Surgery of the Nose - Minor	23375	27500	31625	Burns And Plastic Surgery Procedure
1984	BP028	Plastic Surgery of the Nose - Major	36550	43000	49450	Burns And Plastic Surgery Procedure
1985	BP029	Plastic Surgery for Facial Paralysis (Support with Reanimation)	36550	43000	49450	Burns And Plastic Surgery Procedure
1986	BP030	After Mastectomy (Reconstruction) Mammoplasty	36550	43000	49450	Burns And Plastic Surgery Procedure
1987	BP031	Syndactyly Repair	29750	35000	40250	Burns And Plastic Surgery Procedure
1988	BP032	Dermabrasion Face	36550	43000	49450	Burns And Plastic Surgery Procedure
1989	BP033	Flap Reconstructive Surgery - Head and Neck	53550	63000	72450	Burns and Plastic Surgery
1990	BP034	up to 30% Burns 1st Dressing	2550	3000	3000	Burns And Plastic Surgery Procedure
1991	BP035	up to 30% Burns Subsequent Dressing	2125	2500	2500	Burns And Plastic Surgery Procedure
1992	BP036	30% to 50% Burns 1st Dressing	4250	5000	5000	Burns And Plastic Surgery Procedure
1993	BP037	30% to 50% Burns Subsequent Dressing	2975	3500	3500	Burns And Plastic Surgery Procedure
1994	BP038	Extensive Burn -above 50% Frist Dressing	5100	6000	6000	Burns And Plastic Surgery Procedure
1995	BP039	Extensive Burn -above 50% Subsequent dressing	2975	3500	3500	Burns And Plastic Surgery Procedure

CGHS rates for Tier I (X City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1996	BP040	VAC Therapy/Dressing including all Consumables	8500	10000	10000	Burns And Plastic Surgery Procedure
1997	HC001	Annual Health Check-up - CCS Group A Officer of above 40 years of age / Pensioner primary card holder 75 years of age and above–Male,	2000	2000	2000	Annual Health Check-up
1998	HC002	Annual Health Check-up - CCS Group A Officer of above 40 years of age / Pensioner primary card holder 75 years of age and above - Female	2200	2200	2200	Annual Health Check-up

Annexure-II

Definition of Package Rates and inclusions

1. Definition of CGHS Package Rate

The **CGHS Package Rate** shall be construed as an all-inclusive lump sum cost, applicable from the time of admission to the time of discharge, encompassing the entire treatment cycle of an inpatient/day care/diagnostic procedure for which the CGHS beneficiary has been permitted treatment—either through prior approval or in emergency cases. The package rate includes but is not limited to the following:

II. Accommodation charges including patient's diet
III. Admission charges
IV. Anaesthesia charges
V. Cost of medicines and consumables/disposables
VI. Cost of surgical disposables and all sundries used during hospitalization
VII. Doctor/consultant visit charges
VIII. Dressing charges
IX. ICU/ICCU charges
X. Injection charges
XI. Monitoring charges
XII. Nursing care charges
XIII. O2 charges, Ventilator charges as routinely required, if any etc.
XIV. Operation charges
XV. Operation theatre charges
XVI. Physiotherapy charges etc.
XVII. Procedural charges/surgeon's fee
XVIII. Registration charges
XIX. Related routine and essential investigations during the admission of patient
XX. Transfusion charges and Blood processing charges
XXI. Equipment Charges including flowtron, Infusion pump, syringe pump etc.

- Uniformity of Rates for In-House and Outsourced Services - The CGHS package rates shall apply uniformly, irrespective of whether the services (diagnostic, laboratory, imaging, physiotherapy, or any clinical service) are provided in-house by the hospital or outsourced to an external service provider. Hospitals shall not charge or seek reimbursement beyond the prescribed CGHS package rate under the pretext of outsourced service provision. No differential pricing shall be applied for outsourced services.
- Package rates envisage up to a maximum duration of indoor treatment as follows:
    - Up to 12 days for Specialized (Super Specialties) treatment
    - Up to 7 days for other Major Surgeries
    - Up to 3 days for/ Laparoscopic surgeries / elective Angioplasty / normal deliveries and
    - 1 day for day care / Minor (OPD) surgeries.

2. Ward Entitlement Adjustment

- The prescribed package rates are based on semi-private ward entitlement.
- A 5% decrease shall apply for beneficiaries entitled to general ward.
- A 5% increase shall apply for beneficiaries entitled to private ward.
- Investigations and radiotherapy rates shall remain uniform regardless of ward entitlement or admission status, unless the test necessitates hospital admission.

3. Chemotherapy Charges

- The package rate for chemotherapy includes procedural charges only.
- Room rent, investigations, and anti-cancer medicines are reimbursable in addition to the procedural charges.
- CGHS will provide anti-cancer medicines wherever feasible. If not provided, the HCO shall provide the medicine and submit the GST purchase invoice from external vendor, similar to implant protocols

4. Implants and Consumables

- Implants such as lenses, stents, meshes, and valves are reimbursable in addition to the package rates as per CGHS ceiling rates.
- Unlisted implants will be reimbursed based on the actual invoice or as per NPPA (National Pharmaceutical Pricing Authority) rates whichever is less.
- All consumables and medicines, including guidewires and catheters, are deemed inclusive in the package rate.
- Drug-eluting balloon used in lieu of a stent is payable as per NPPA rates or actual invoice whichever is less.

5. Unlisted Procedures and Investigations

- The current guidelines for Unlisted Procedures and Investigations shall continue. These procedures shall be reviewed periodically.

6. Multiple Surgical Procedures in One OT Session

- When multiple surgeries are performed in a single operative session:
    - The primary procedure (with the highest package rate) shall be reimbursed at 100%.
    - The second procedure shall be reimbursed at 50% of its package rate.
    - The third and subsequent procedures shall be reimbursed at 25% of their respective package rates.

- If identical surgeries are performed at different anatomical sites (e.g., bilateral cataract or bilateral knee replacement), the second procedure will be reimbursed at 50%.
- Any procedure within the package period of an earlier procedure shall be reimbursed at 75% of the applicable package rate.
- Individual steps of a procedure must not be itemized or charged separately. All integral steps are deemed included within the package.The package must fully cover the scope of the procedure as per standard clinical protocols.

7. Consultation

S. No.	Type of Consultation	Payable Fee (₹)	Key Conditions / Notes
1	OPD – Specialist	₹350	Includes emergency/casualty consultations
2	OPD – Super Specialist (DM/MCh)	₹700	Applies uniformly to all empanelled hospitals (multi/super specialty); in-house or visiting
3	OPD – Psychiatry (All hospitals)	₹700	Enhanced fixed rate for all psychiatric consultations
4	Indoor (IPD) Consultation – Specialist / Super Specialist	₹350	Flat rate for all indoor consultations regardless of specialty level
7	Eye Consultations	₹350	Fee **includes**: Refraction, Tonometry and Fundus examination

- The consultation fee is inclusive of the cost of examination consumables such as paper gloves, unsterile gloves, or examination gloves, if used during the examination of the patient.
- **Each consultation will be considered valid for a period of 7 days, provided it pertains to the same specialty.**

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Annexure-III

Description of Ward categories, Nursing care charges, ICU and Critical Care Unit Charges, Equipment Charges

1.Ward categories

Room rent or ward charges are consolidated charges and shall comprehensively include the following components (but not limited to):

- Accommodation charges and medical record charges
- Duty Medical officer charges.
- Nursing care charges (inclusive as detailed below)
- Registration and admission charges
- Welcome kit
- Air bed, water bed, alpha bed etc
- Luxury tax, surcharge
- Air conditioning/HVAC charges
- Electricity and water charges
- Housekeeping services
- Infection control services
- Biomedical waste management
- Portable/bedside/emergency services
- Laundry services
- Patient identification bands, bed sheets, patient gown
- Visitor passes
- Duty doctor/Resident doctor charges
- Diet and dietician services
- Issue of discharge summary, investigation reports, warranty cards outer pouches of implants, stickers.

The above elements are considered integral to the room rent and must not be charged separately under any circumstances.

2. Nursing care Charges

Nursing care forms an essential part of the ward package and shall include, but is not limited to, the following services:

- Medication administration (oral, IV, IM)
- IV cannulation and infusion management
- Ambulation/mobilization of patient
- Ryle's tube feeding and enteral nutrition support
- Care of catheters (urinary, ICD, central lines, etc.)
- Wound and bedsore care
- Tracheostomy care and oral hygiene
- Personal hygiene and sponge bathing
- Patient monitoring and recording

- Health education to patient and/or caregiver
  Nursing care charges are bundled in the ward charges and therefore not payable separately or billable to the patient.

3. ICU and Critical Care Unit Charges

Critical care services (ICU/CCU/ICCU/PICU/MICU/NICU, etc.) shall be considered standardized units with an inclusive package that covers:

- All medical and nursing care as described above in point 1 & 2 in the critical care setting
- Monitoring, equipment, oxygen support, infection control, Nursing care assistance, and other ICU-specific consumables and services
  Standard ICU charges per day:

Hospital Category	ICU Rate (INR/day)
NABH-accredited/Non-NABH	₹5,400

These ICU rates apply uniformly across all ward entitlements, city category, type of hospitals and no additional charges are permissible for items included in ICU care.

4. Equipment Charges

Charges related to the use of medical equipment during inpatient or surgical procedures shall be considered inclusive within room rent or procedural package rates. These include:

- C-arm, surgical OT equipment
- DVT pump, infusion pump
- Portable X-ray or bedside diagnostics
- Attendant bed (in case of private and higher ward entitlement)
- Any other machine or device used during the patient's stay or surgery
  Separate billing for equipment usage is not permitted.

Table.1 Summary of Ward categories.

Ward charges will include charges for occupation of bed, diet for the patient, charges for water and electricity supply, linen charges, Nursing care charges and routine up keeping and RMO/ Duty Medical Officer charges.				
S. No	**Categories**	**As per basic**	**Description**	**Room Charges**
1	**General Ward**	0 - Rs.36,500	General ward is defined as hall that accommodates four to ten patients.	1500

2	**Semi-Private Ward**	Rs. 36,501 to Rs 50,500	Semi Private ward is defined as a hospital room where two to three patients are accommodated and which has attached toilet facilities and necessary furnishings. 2-way IP based nurse call system and Room has to be Air conditioned	3000
3	**Private Ward**	Rs. 50,501 and above	Private ward is defined as a hospital room where single patient is accommodated and which has an attached toilet (lavatory and bath). The room should have furnishings like wardrobe, dressing table, bed-side table, sofa set, ete. as well as a bed for attendant. The room has to be air-conditioned. 2-way IP based nurse call system. Room rent will include charges for occupation of bed, diet for the patient, charges for water and electricity supply, linen charges, Nursing care charges and routine up keeping and RMO/ Duty Medical Officer Charges	4500
5	**ICU/ICCU/NICU/PICU/HDU/ISOLATION ward-**	same for all categories of ward entitlement	Monitoring charges and O2 charges are included. Ventilator charges are excluded	5400
6	**Day care**	same for all categories of ward entitlement	Any procedure which doesn't requires admission in entitled ward /patient is admitted for monitoring in case emergency in EMR or casualty. (6 Hrs to 8 Hrs)	1500

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Annexure-IV

Admissible and Non-Admissible Items (Billing Guidelines)

This annexure provides clarification on items and charges that are includable or excludable in bills as per CGHS. The HCO must adhere to these when billing CGHS or CGHS beneficiaries.

1. Consumables and Materials: Common medical consumables (cotton, gauze, gloves, syringes, needles, catheters, IV sets, tubing, dressing materials, etc.)

- These items are considered part of the treatment package for surgical procedures and included in respective package rates. No separate charge for such items is admissible in bills of surgical packages.
- In non-surgical (medical management) cases where no package rate exists, reasonable use of consumables is allowed and can be billed under consumables head. The HCO must ensure rational use of all consumables. Billing for extraordinarily high quantities without clinical need will be viewed seriously as potential inflation and penalised.
- Vague billing entries like “consumables kit” or “procedure kit” without specifics (e.g., “lumbar puncture kit”, “dressing kit”, “nebulization kit”) are not acceptable. Such items shall be disallowed.

2. Non-Admissible Items: The following categories of items shall not be reimbursed by CGHS and the amount may be collected from beneficiary:

- Toiletries and Personal Use Items: e.g. soap, shampoo, toothbrush, toothpaste, comb, sanitary pads, diapers, hand sanitizers for personal use, mouthwash, tissue papers, etc. (These are considered personal hygienic items and not part of treatment costs.)
- Cosmetics and Other Miscellaneous Personal Items: e.g. razors/shaving blades, beauty creams, powders, deodorants, oils (like coconut oil), talcum powder, makeup items, etc.
- Non-Medical Services/Overheads: e.g. telephone charges for patient calls, bedside television charges, internet fees, patient’s attendant food, hospital gown for attendant, carry bags for medicines or belongings, etc. (Basic cost of a patient's own gown/drapes is included in ward charge, but if a hospital bills a kit, it is not reimbursable).
- Attendant Charges: Any charge for providing an attendant (ayah / ward boy) specifically to the patient or charges for extra bedding for the attendant (except one attendant bed included in a private ward) are not reimbursable. Professional nursing care is separate and included in the ward charges.
- Mortuary or Cremation charges: If a patient expires, any charge like mortuary fee or transportation for last rites are not covered CGHS expense.
- Extra Bedding/Blankets beyond norm: already included in ward charges; cannot charge separately.

- Implant Upgrades: If the patient opts for an implant or prosthesis of higher value than what CGHS covers the difference in cost would not be reimbursable. The beneficiary may decide to bear that difference, with prior consent. Such differences should not be billed to CGHS/claimed.

(In summary, anything that is not directly related to treatment and is primarily for patient convenience or personal preference is non-admissible.)

3. Inadmissible Additional Charges: The HCO shall not separately bill for the following components, as they are considered part of standard charges for related services. Hence these are neither to be billed to CGHS nor amount to be collected from Beneficiaries :

- Glucometer strips – Cost of blood glucose test strips is included as part of performing a Random Blood Sugar (RBS) test at bedside. No separate charge per strip is admissible if bedside glucose monitoring is done; it's covered under investigation or ward service.
- ECG leads/electrodes – included in the cost of an ECG. The hospital cannot charge for ECG electrodes or leads separately when billing for an ECG test.
- Ventilator circuits or consumables – when a patient is on a ventilator, the disposables (tubing, filters, circuits) are considered included in the ventilator/ICU charge. No separate line item for "ventilator consumables" should be billed.
- Ward facilities included in room charge: Items such as an air-bed, water bed, alpha bed or ripple mattress for bed sore prevention, routine air conditioning or heating charges, infusion pumps, DVT pump usage in ward, pulse oximeter or basic monitors, medical record photocopy charges, etc., are all included in the room/ward daily charge. They must not appear as separate charges.
- Issuance of Medical Records/Films: Providing the patient with discharge summary, lab reports, X-ray/CT/MRI films or CD copies of scans is part of the treatment rates. No fee should be charged for giving these to patient (aside from very exceptional cases like multiple copies of a large file, but even then CGHS doesn't pay for it).
- Vacutainers, syringes for investigations: Blood collection tubes, needles, lancets used for drawing samples are part of the lab test cost and not billable as separate "consumable" to CGHS.

(Essentially, any item that is by-nature a part of performing a test or procedure or running a ward facility cannot be carved out to charge extra.)

4. List of common Non admissible items

This list includes commonly non-admissible items and services that cannot be billed to CGHS.

Table 2 List of non-admissible items

Sl. No.	Item Description	Admissibility	Category (if applicable)
1	Home visit/home consultation charges	Non-Admissible	General Instruction (Not covered by CGHS)
2	Bed pan (utensils for patient use)	Non-Admissible	Consumables (basic patient care item)
3	Urine container, Urine can/pot, Urobag	Non-Admissible	Consumables (part of nursing care)
4	Moisturizer (for skin care)	Non-Admissible	Personal Care item
5	Underpad/Chux, Sanitary pad, Bath wipes	Non-Admissible	Consumables (personal hygiene)
6	Room fresheners (air freshener sprays, etc.)	Non-Admissible	Hygiene (ambience item)
7	Hand Sanitizer solutions (Microshield, Sterillium), Mouthwash (Listerine), Depilatory creams (hair removal), hand wash liquids	Non-Admissible	Hygiene/Personal use
8	Spectacles or Contact lenses (if given post eye surgery)	Non-Admissible	Personal Item (corrective device, not covered)
9	Food charges for attendant / extra meals, Mineral water bottles	Non-Admissible	Dietary (only patient diet included in room charge)
10	Telephone, Email or Internet charges (patient communication)	Non-Admissible	Communication convenience
11	Mortuary sheet or shroud	Non-Admissible	Equipment/Supplies (post-mortem)
12	Protein supplements, Sugar-free tablets, Artificial sweeteners	Non-Admissible	Nutrition (not medication)
13	Baby feeding bottles, infant formula, baby food	Non-Admissible	Infant Care (routine baby supplies)
14	Toiletries kit: Toothpaste, Toothbrush, Coconut oil, Talcum	Non-Admissible	Personal Hygiene kit

Sl. No.	Item Description	Admissibility	Category (if applicable)
	powder, Comb, Ear buds, Soap, Shower gel, etc.		
15	"Baby set" (general term for newborn care items like baby soap, oil, etc.)	Non-Admissible	Infant Care (not treatment)
16	Barber charges or Beauty parlor services (shaving, haircut for patient)	Non-Admissible	Personal Services
17	Welcome kit, Carry bags (for medicines or reports)	Non-Admissible	Miscellaneous (overhead)
18	Vaccinations (Baby/Adult) – when not part of treatment	Non-Admissible	Medical (Preventive vaccines not covered unless part of treatment protocol; All essential vaccines a provided free of cost by GOI under immunization programme. Hence no separate reimbursement
19	Cosmetic procedures (e.g., LASIK eye surgery purely for refractive error removal, cosmetic dental implants for aesthetics)	Non-Admissible	Cosmetic (not medically necessary as per CGHS)
20	Tests or medications not relevant to the diagnosis on record (e.g., an unrelated screening test without indication)	Non-Admissible	Unwarranted diagnosis – will be disallowed in audit
21	Equipment repair or maintenance charges (if hospital equipment fails during treatment, etc.)	Non-Admissible	Equipment (hospital overhead, not patient's cost)

Note: The aforementioned categories are illustrative in nature and shall be deemed to include all other analogous items.

5. List of items already included under packages.

The following items are deemed to be integral components of the package rates and shall, under no circumstances, be billed separately to CGHS or recovered from the beneficiaries

Table 3 . List of included items

Sl. No.	Item/Service Description	Inclusion Status	Included Under
1	Registration/Admission charges (hospital admin fees)	Included	Ward/Procedure Package (no separate charge)
2	Administrative discharge processing or TPA handling charges	Included	Ward/Package (any administrative overhead is within rates)
3	Special beds: Alpha bed, Air bed, Water/Nimbus mattress for bed sore prevention	Included	Ward/Package (ward charges covers basic bed needs)
4	Charges for portable X-ray/ECG/ultrasound or bedside services in ward	Included	Ward/Package (when done as part of IP care)
5	Routine housekeeping charges (cleaning of room, etc.)	Included	Ward/Package (hospital overhead)
6	Biomedical waste management fee	Included	Ward/Package (hospital overhead)
7	Infection control surcharges (e.g., fumigation, PPE for staff)	Included	Ward/Package (hospital overhead)
8	Water and electricity charges for hospital stay	Included	Ward/Package (hospital overhead)
9	Laundry charges for bed linen, gown, etc.	Included	Ward/Package (basic linen service)
10	Air conditioning, room heating, HVAC usage	Included	Ward/Package (if applicable to ward)
11	Surcharges or Luxury tax (some states had luxury tax on ward charges)	Included	Ward (CGHS won't pay tax separately; the rate is all-inclusive)
12	Bedside consumables: bed sheet, blanket, patient gown, foot covers, caps, etc.	Included	Ward/Package (part of ward charges)
13	CSSD/sterilization charges, razor for site prep, alcohol swabs for IV line, etc.	Included	Ward/Package (part of procedure/ward)

Sl. No.	Item/Service Description	Inclusion Status	Included Under
14	Patient's diet and dietician consultation	Included	Ward (patient meals included, dietician's routine advice part of care)
15	Duty Doctor charges (the cost of RMO/CMO rounds)	Included	Ward (the hospital's doctors on duty cost is in overhead)
16	Documentation: preparation of discharge summary, billing file, medical record copying for claim	Included	Ward/Package (administrative)
17	Booking services: e.g., blood reservation charges, OT booking charges	Included	Ward/Procedure (no extra booking fee)
18	Temperature charting, blood sugar monitoring chart, intake-output chart maintenance	Included	Ward/Nursing care (nursing duties)
19	Routine maintenance charges for equipment used in care (infusion pumps, monitors)	Included	Ward/Package (overhead)
20	Charges towards Infusion pump, DVT pump, syringe pump, Flowtron	Included	Ward / package(overhead)
21	Rental charges for equipment used in ward (e.g., oxygen cylinder, BiPAP machine)	Included	Ward (except for ventilator in ICU which is separately charged, other minor equipment is part of care)
22	Handling/procurement of implants or medicines (the service of getting an implant – aside from implant cost)	Included	Ward/Package (no handling fee allowed)
23	Attendant bed charges in private ward (one attendant couch/bed is expected in private wards)	Included	Ward (private ward definition includes attendant bed)
24	Medication administration by nurses (IV infusions, injections)	Included	Nursing care (part of ward service)
25	Tracheostomy care, suctioning, nursing of catheters/tubes	Included	Nursing care (no separate "ICU

Sl. No.	Item/Service Description	Inclusion Status	Included Under
			nursing" charge; it's in ICU charge)
26	Ryle's (NG) tube feeding, enema administration, etc.	Included	Nursing care duties
27	IV cannulation, IM/IV injections, IV line setup (labour of it)	Included	Nursing care (nurse service)

Note: The aforementioned categories are illustrative in nature and shall be deemed to include all other analogous items.

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Annexure V

Super Speciality Hospitals

Super-speciality hospitals under this category shall be defined as:

(a) Hospitals with 200 or more beds.

(b) Should be mandatorily accredited by NABH or its equivalent such as Joint Commission International (JCI) of USA, ACHS of Australia or by any other accreditation body approved by International Society for Quality in Health Care (ISQUA).

(c) Should mandatorily have CGHS empanelled treatment facilities for all the following Super Specialties

a. Nephrology and Urology (including Renal Transplantation).
b. Neurosurgery,
c. Cardiothoracic Surgery,
d. Medical Oncology,
e. Surgical Oncology
f. Radiation Oncology
g. Transplant facilities.
h. Endocrinology.
i. Specialized Orthopaedic Treatment facilities that include Joint Replacement Surgery
j. Gastroenterology and GI-Surgery/Transplantation.

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Annexure VI

List of Office Memorandum (suppressed)

S.No.	Office Memorandum (O.M.) Reference Number	Date
1	Clause 2, 5 & 6 of O.M. No. F. No.S-11045/36/2012-CGHS (HEC)	26.11.2014
2	O.M. No. F. No. S-11045/36/2012 - CGHS (HEC)	07.09.2015
3	O.M. No. S-11011/09/2019/Addg. HQ/CGHS	14.01.2020
4	O.M. No. S-11011/09/2019/Addl. DDG(HQ)/CGHS	03.06.2020
5	O.M. No. S-11011/09/2019/Addl. DDG(HQ)/CGHS	11.02.2021
6	O.M. No. F.No. Z15025/28/2022/DIR/CGHS	12.04.2023
7	O.M. No. F.No. Z15025/8/2023/DIR/CGHS	19.06.2023
8	O.M. No. F No Z15025/32/2023/DIR/CGHS	19.12.2023
9	O.M. No. F No Z15025/8/2023/DIR/CGHS	01.02.2024
10	O.M. No. File No: S.11030/86/2022-EHS	01.05.2023

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