

(मि. सं. S-11011/90/2016-CGHS/HEC/AYUSH/Pt-II) (e - 804906) Y1126

भारत सरकार / Government of India
स्वास्थ्य एवं परिवार कल्याण मंत्रालय / Ministry of Health & Family Welfare
केंद्रीय सरकार स्वास्थ्य योजना / Central Government Health Scheme
निदेशक (सीजीएचएस) का कार्यालय / Office of the Director (CGHS)
(आयुष अनुभाग / Ayush Section)

सीजीएचएस भवन, सेक्टर- 13
रा.क.पु, नई दिल्ली-110066
दिनांक- 19 नवंबर, 2025

कार्यालय ज्ञापन / Office Memorandum

विषय: सीजीएचएस के अंतर्गत आयुष आईपीडी अस्पतालों के लिए पैनल का विकेंद्रीकरण (Decentralization)

1. स्वास्थ्य एवं परिवार कल्याण मंत्रालय द्वारा जारी कार्यालय आदेश संख्या F.No.1-84/2025/CGHS/AD (AYUSH) dated 17.09.2025, के अनुसार, अपर निदेशक (आयुष) को विभिन्न प्रशासनिक शक्तियां (Administrative power) सौंपी गई है, जिसमें दिल्ली/एनसीआर के लिए आयुष स्वास्थ्य सेवा संगठनों (HCOs) के पैनल का अधिकार भी शामिल है।
2. पैनलीकरण संबंधी अधिक संख्या में प्राप्त अनुरोधों को देखते हुए और अधिक कुशल और सुव्यवस्थित प्रक्रिया सुनिश्चित करने के उद्देश्य से, आयुष डे केयर पैनलीकरण (Ayush Day Care Center empanelment) के विद्यमान विकेंद्रीकरण के अनुरूप, आयुष आईपीडी अस्पतालों के पैनलीकरण (Ayush IPD hospitals empanelment) को विकेंद्रीकृत करने का निर्णय लिया गया है।
3. विकेंद्रीकरण के पश्चात् संबंधित आयुष आईपीडी अस्पताल को सूचीबद्ध करने संबंधी फाइलें संबंधित अस्पतालों को उचित सूचना देते हुए, संबंधित सीजीएचएस शहर के अपर निदेशक कार्यालय को स्थानांतरित कर दी जाएंगी।
4. वर्तमान में, 65 आयुष आईपीडी अस्पताल (दिल्ली/ एनसीआर में 18 और अन्य सीजीएचएस शहरों में 47) सीजीएचएस के अंतर्गत सूचीबद्ध हैं। यह भी सूचित किया जाता है कि दिल्ली के बाहर आईपीडी सूचीबद्धता के आवेदन/ फाइलें, जो वर्तमान में प्रक्रियाधीन हैं, आयुष अनुभाग, सीजीएचएस (मुख्यालय) द्वारा निपटाई जाएंगी। सूचीबद्धता समिति द्वारा सूचीबद्धता के निर्णयों को अंतिम रूप दिए जाने के पश्चात् अनुमोदित फाइलें संबंधित सीजीएचएस शहर के अपर निदेशक कार्यालय को हस्तांतरित कर दी जाएंगी।
5. शहर (City) के स्तर पर आयुष आईपीडी पैनल की सुविधा के लिए, निम्नलिखित दस्तावेजों को सीजीएचएस शहर (City) अपर निदेशक कार्यालयों के साथ साझा किया जाएगा:-

- समझौता ज्ञापन (MoA) [बैंक गारंटी (PBG) के प्रारूप सहित]
- आवेदन फार्म
- अन्य संबंधित दस्तावेज जिसमें दिनांक 27.10.2009, 09.11.2017, 30.09.2022, 05.07.2023, 05.10.2023 और 28.11.2023 के दिशानिर्देश शामिल हैं।
- आयुष सूचीबद्ध प्रक्रियाएं/ दरें।

6. सीजीएचएस शहर (City) अपर निदेशक कार्यालयों से अनुरोध है कि वे अनुमोदित दिशानिर्देशों (approved guidelines) के अनुसार पैनल प्रक्रियाओं का एक समान रूप में कार्यान्वयन सुनिश्चित करें और अपने अधिकार क्षेत्र के तहत पैनलबद्ध आयुष अस्पतालों का उचित रिकॉर्ड बनाए रखें।

यह पत्र सक्षम प्राधिकारी के अनुमोदन से जारी किया जा रहा है।

(डॉ. अशोक एम. ईटि)
अपर निदेशक (आयुष)

केंद्रीय सरकार स्वास्थ्य योजना

सेवा में,

देशभर में स्थित सभी अपर निदेशक (सीजीएचएस शहर)

प्रतिलिपि सूचनार्थ हेतु:

1. अपर सचिव एवं महानिदेशक (VK) के प्रधान निजी सचिव, सीजीएचएस, कमरा संख्या 252, ए विंग, निर्माण भवन, नई दिल्ली - 110011।
2. संयुक्त सचिव (MK), सीजीएचएस के प्रधान निजी सचिव, कमरा संख्या 152, ए विंग, निर्माण भवन, नई दिल्ली - 110011।
3. निदेशक के निजी सचिव, सीजीएचएस भवन, आरके पुरम, सेक्टर-13, नई दिल्ली - 110066।
4. निजी सचिव, सलाहकार आयुर्वेद/होम्योपैथी/यूनानी/सिद्ध, आयुष मंत्रालय, बी ब्लॉक, जीपीओ कॉम्प्लेक्स, आईएनए, नई दिल्ली-110023।
5. अपर निदेशक के निजी सहायक, सीजीएचएस (मुख्यालय), आर के पुरम, सेक्टर -13, नई दिल्ली - 110066।
6. संयुक्त निदेशक (शिकायत), Empanelment Cell, सीजीएचएस भवन, नई दिल्ली -110066
7. कार्यालय प्रति

(मि. सं. S-11011/90/2016-CGHS/HEC/AYUSH/Pt-II) १८-८०५९०६१/११२६

भारत सरकार / Government of India
 स्वास्थ्य एवं परिवार कल्याण मंत्रालय / Ministry of Health & Family Welfare
 केन्द्रीय सरकार स्वास्थ्य योजना / Central Government Health Scheme
 निदेशक (सीजीएचएस) का कार्यालय / Office of the Director (CGHS)
 (आयुष अनुभाग / Ayush Section)

सीजीएचएस भवन, सेक्टर- 13

रा.कृ.पु, नई दिल्ली-110066

दिनांक- 19 नवंबर, 2025

कार्यालय ज्ञापन / Office Memorandum**Subject: Decentralization of the Empanelment for AYUSH IPD Hospitals under CGHS**

1. In accordance with the Office Order issued by the Ministry of Health & Family Welfare vide letter No. F.No.1-84/2025/CGHS/AD (AYUSH) dated 17.09.2025, whereby various administrative powers have been delegated to AD (AYUSH), including the authority for empanelment of AYUSH Healthcare Organizations (HCOs) for Delhi/NCR.
2. In view of the increasing number of empanelment requests and with the objective of ensuring a more efficient and streamlined process, it has been decided to decentralize the empanelment of AYUSH IPD Hospitals, in line with the existing decentralization of AYUSH Day Care empanelment.
3. Following the decentralization, the respective AYUSH IPD Hospital empanelment files will be transferred to the AD Office of the Concerned CGHS City, with due intimation to the hospitals concerned.
4. Currently, 65 AYUSH IPD Hospitals (18 in Delhi/NCR and 47 in other CGHS cities) are empanelled under CGHS. It is further informed that applications/files of IPD empanelment outside Delhi, which are presently under process, shall continue to be dealt with by Ayush Section, CGHS (HQ). Upon finalization of empanelment decisions by the Empanelment Committee, the approved files shall be transferred to the AD Office of the Concerned CGHS City.
5. To facilitate the Ayush IPD empanelment at the city level, the following documents will be shared with CGHS city AD offices:
 - Memorandum of Agreement (MoA) [including format for Performance Bank Guarantee (PBG)]

- Application Form
- Other relevant documents including guidelines dated: 27.10.2009, 09.11.2017, 30.09.2022, 05.07.2023, 05.10.2023 & 28.11.2023
- Ayush listed procedures/ rates.

6. The CGHS city offices are requested to ensure uniform implementation of the empanelment procedures as per the approved guidelines and to maintain proper records of AYUSH Hospitals empanelled under their jurisdiction.

This issues with the approval of Competent Authority.

Digitally signed by
Ashok Mukundappa Iti
Date: 19-11-2025
15:50:37

(डॉ.अशोक एम. ईटि)

अपर निदेशक (आयुष) / Additional Director (AYUSH)
केंद्रीय सरकार स्वास्थ्य योजना

To

All Additional Directors (CGHS Cities)

Copy for information to:

1. PPS to AS&DG (VK), CGHS, Room No. 252, A Wing, Nirman Bhawan, New Delhi - 110011.
2. PPS to Joint Secretary (MK), CGHS, Room No. 152, A Wing, Nirman Bhawan, New Delhi - 110011.
3. PS to Director, CGHS Bhawan, R.K. Puram, Sector-13, New Delhi - 110066.
4. PS to Advisors- Ayurveda/ Homoeopathy/ Unani/ Siddha, AyushBhawan, GPO Complex, Ministry of AYUSH, New Delhi
5. PA to Additional Director, CGHS (HQ), R.K. Puram, Sector-13, New Delhi - 110066.
6. JD Grievance, Empanelment Cell, CGHS Bhawan, New Delhi -110066
7. Office Copy

Application Form for Empanelment of AYUSH Hospitals (Ayurveda, Yoga & Naturopathy, Unani and Siddha) under CGHS

1. Name of Hospital:

2. Address of the Hospital:

3. Tel/Fax/e-mail/Address:

4. Ownership to be specified:

5. Empanelment applied for: (Please tick the appropriate Column)

- a) Ayurveda b) Yoga & Naturopathy c) Unani
d) Siddha

6. Whether the Hospital is recognized under any one or more of following:

- a) Under CGHS
b) Under State health Authority/Local.Body
c) Under any Medicinal Health Insurance Organization (If yes, specify)

7. Eligibility Criteria:

- a. NABH Accredited AYUSH Hospital.
 - b. Minimum 10 beds for each system.
 - c. Teaching Hospitals attached with colleges and approved by CCIM or NABH.
8. That the Hospital has the capability to submit bills/medical records in electronic format. That all billing will be done electronic format and medical record will be submitted in Electronic format.

Date:

Place:

Signature of Applicant/ Authorized Agent

Note: - Documents to be submitted as per Annexure-II of application form.

CERTIFICATE OF UNDERTAKING

1. It is certified that the particulars regarding physical facilities and experience/expertise of specialty are correct.
2. That Hospital is not charging lesser rates from non-CGHS patients than the rates charged for CGHS/CGHS notified rates.
3. That the rates have been provided against a facility/procedure actually available at the institution.
4. That if any information is found to be untrue, Hospital will be liable for de-recognition by CGHS. The institution will be liable to pay compensation for any physical and or mental injuries caused to its beneficiaries or any financial loss caused to CGHS beneficiaries by its action.
5. That the Hospital has the capability to submit bills/medical records in electronic format. That all billing will be done in electronic format and medical records will be submitted in Electronic format.
6. The Hospital will pay damage to the beneficiaries if any injury, loss of part or death occurs due to gross negligence.
7. That the center has not been de-recognized by CGHS or any state government or other Organizations, after being empanelled.
8. That no investigation by Central Government/any State Government or any statutory investigating agency is pending or contemplated against the Hospital.
9. The Hospital will duly communicate any changes in the infrastructure and manpower at the time and after the empanelment.
10. The Hospital will provide all necessary information about patients of CMS treated to the CGHS authorities as when required.
11. Undertaking for submitting signed MOA on Rs. 100 Non Judicial Stamp Paper.
12. Hospitals will cooperate in every situation if or when CGHS Inspection committee will visit the Hospital.
13. Undertaking in the name of the owner of the Hospital for no on-going dispute with any person / organization in any terms including land, property, etc.

Date:

Place:

Signature of Applicant/ Authorized Agent

LIST OF DOCUMENTS TO BE ENCLOSED

1. Copy of certificate or memo of State Health Authority, if any, recognizing the Hospital
2. Copy of Valid NABH Certificate.
3. Copy of audited balance sheet, profit and loss account for the last 3 years-(Main documents only-Summary sheet).
4. Copy of legal status, place of registration and principal place of business of the Hospital or partnership firm, etc.
5. A copy of partnership deed/memorandum and articles of association, if any.
6. Copies of Certificates of all statutory requirements like BMW disposal management, Air and Water consent, Drug License, Green clearance, Fire clearance, etc.
7. Photo copy of PAN card.
8. Name and Address of their bankers along with crossed blank cheque to facilitate ECS system.
9. Copy of the existing list of rates approved by the Hospital for various services/procedures being provided by it as well as copy of approved rate list issued by CGHS.
10. List of staff working in the Hospital including visiting specialists.
11. Undertaking in the name of the owner of the Hospital for no on-going dispute with any person / organization in any terms including land, property, etc.
12. DD of Rs. 2000/- in favour of PAO, CGHS New Delhi as application fee.
13. Any other documents relevant to empanelment.

Date:

Place:

Signature of Applicant/ Authorized Agent

ACCEPTANCE LETTER

Dated:-

From,

.....
.....
.....
.....

To,

The Director, CGHS
CGHS Bhawan, R.K Puram, Sec-13
New Delhi-66

Sub: - Acceptance of CGHS rates placed on the website of CGHS and willingness to get empanelled under CGHS.

Sir,

I/We..... hereby convey our acceptance for CGHS approved rates for(City) notified on website of CGHS. Kindly consider our Hospital for empanelment under CGHS in(City).

Category:

1. Ayurveda
2. Yoga & Naturopathy
3. Unani
4. Siddha

Yours faithfully,

(Signature & Name with stamp)

AGREEMENT

BETWEEN

.....

AND

....., **NEW DELHI**

This Agreement is made on the day of, 2025 between the President of India acting through the DIRECTOR, CGHS, R.K. Puram, Sector-13, New Delhi, Ministry of Health & Family Welfare, Government of India having its Directorate General at Nirman Bhawan, New Delhi city (hereinafter called CGHS, which expression shall, unless repugnant to the context or meaning thereof, be deemed to mean and include its successors and assigns) of the **First Part**

AND

.....

(Name of the Hospital with Address) of the **Second Part.**

WHEREAS, the Central Government Health Scheme is providing comprehensive medical care facilities to the Central Government Employees / Pensioners and such other categories of beneficiaries as are decided from time to time.

AND WHEREAS, CGHS proposes to provide treatment facilities / Diagnostic facilities to the beneficiaries in the recognized Hospitals.

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NOW, THEREFORE, IT IS HEREBY AGREED BETWEEN THE PARTIES AS FOLLOWS:

1. DEFINITIONS AND INTERPRETATIONS

1.1 The following terms & expressions shall have the following meanings for purposes of the Agreement.

1.1.1 “Agreement” shall mean this Agreement and all schedules, supplements, appendices, appendages and modifications thereof made in accordance with the terms of this Agreement.

- 1.1.2 "Benefit" shall mean the extent or degree of service the beneficiaries are entitled to receive as per the rules on the subject.
- 1.1.3 "Bill Clearing Agency "(BCA) means the agency appointed by CGHS for processing of Data/ Bills of all CGHS beneficiaries (both serving and pensioner) attending the empanelled Hospitals and for making payment.
- 1.1.4 "Card" shall mean the CGHS Card, issued by any competent authority, of any CGHS city.
- 1.1.5 "Card Holder" shall mean a person having a CGHS Card.
- 1.1.6 "CGHS Beneficiary" shall mean a person who is eligible for coverage of CGHS and holds a valid CGHS card.
- 1.1.7 "Coverage" shall means the types of persons to be eligible as the beneficiaries of the Scheme to health services provided under the Scheme, subject to the terms, conditions and limitations.
- 1.1.8 "Emergency" shall mean any condition or symptom resulting from any cause, arising suddenly and if not treated at the earlier opportunity would be detrimental to the health of the patient or will jeopardize the life of the patient.
- 1.1.9 "Empanelment" shall mean the Hospital authorized by the CGHS for treatment purposes for a particular period.
- 1.1.10 "Hospital" shall mean the (Name of the Hospital) while performing under this Agreement providing medical investigation, treatment and the healthcare of human beings.
- 1.1.11 "De-recognition of Hospital" shall mean debarring the hospital on account of adopting unethical practices or fraudulent means in providing medical treatment to or not following the good industry practices of the health care for the CGHS beneficiaries after following certain procedure of inquiry.
- 1.1.12 "Party" shall mean either the CGHS or the Hospital / Diagnostic Centre and "Parties" shall mean the CGHS and the Hospital / Diagnostic Centre.
- 1.1.13 "TPA" shall mean a Third Party Administrator authorized by CGHS to process the medical reimbursement claims or to carry out medical audit.
- 1.1.14 "Rate" - Charges for approved procedures / services as may be notified by CGHS from time to time.

2. APPROVED RATES TO BE CHARGED

The Hospital / Day Care Centre agrees that it shall charge from the CGHS beneficiary as per the rates for a particular procedure / package deal as prescribed by the department and attached as Annexure (rate list), which shall be an integral part of this Agreement.

- a) It is clarified that the .procedures suffixed with package treatment in Annexure A1, A2, Y1, Y2, N1, N2, U1, U2, S1 & S2 are "Package treatment" and reimbursement shall be limited to the package rates.
- b) The 'package rate' includes all charges pertaining to a particular treatment/procedure including registration charges, admission charges, accommodation charges, diet charges, cost of medicines, Panch Karma charges, charges, room charges, charges for Kshar sutra operation/procedure, charges Doctor/Consultant visit charges, Monitoring charges, operation theatre charges, procedural charges/Surgeon's fee, cost of disposable surgical charges and cost of all sundries used during hospitalizations, routine investigations, physiotherapy charges, etc.

This also is inclusive of all sub-procedures and related procedures to complete the treatment.

- c) No additional charge on account of extended period shall be allowed if that extension is due to any improperly conducted procedure.
- d) Ward entitlement and rates for room charges will be as prescribed for AYUSH treatment under CGHS. Room rent is applicable only for treatment procedures for which there is no prescribed package rate and the accommodation charges shall include charges for occupation of bed, diet charges, charges for water and electricity supply, linen charges, nursing charges and routine-up keeping.
- e) The prescribed rates at Annexures A1, A2, Y1, Y2, N1, N2, U1, U2, S1 & S2 shall become applicable after signing of MoA and acceptance of rates for which a period of 30 days would be given after issuance of notification. The validity of present MoA will be for a period of 3 years.

3. DURATION

The Agreement shall remain in force for a period of 3 years or till it is modified or revoked, whichever is earlier. The Agreement may be extended for another year subject to fulfillment of all the terms and conditions of this Agreement and with mutual consent.

4. SUBMISSION OF BILLS TO BILL CLEARING AGENCY

In case of Pensioners, etc., where credit bills are sent to CGHS, the Hospital shall submit the physical bill as well as electronic bill to the Bill clearing Agency for processing of bills.

In case of serving employees the electronic bill and details shall be submitted to Bill clearing Agency where as physical Bill shall be submitted to concerned department / serving employee for Payment.

On completion of the treatment/ procedure (s) of the CGHS beneficiary, the Hospital shall submit credit bill (in those cases where credit facility extended) along with other documents electronically (a scan copy) for pre-auditing by the BCA team through web access (internet) and sharing of data will be through electronic media.

5. PAYMENT

CGHS shall be appointing a Bill Clearing Agency (BCA), for processing of data / bills of CGHS pensioner beneficiaries attending these Hospitals. CGHS would ensure that payment of hospital claims would be done in a time bound manner at the earliest possible from the date of submission of bills in physical format to the designated Bill Clearing Agency.

CGHS beneficiary attending hospital in emergency in such a situation Hospital will intimate to BCA within 2 hours of admission and BCA will respond in 4 hours (however treatment will not be denied to any CGHS member and this is only an initiation of the e-workflow). Post discharge hospital would upload bills and download documents as per requirements of CGHS within 72 hours.

6. INFORMATION TO BE PROVIDED TO THE BCA BY HOSPITALS

CGHS beneficiary attending hospital with permission letter -- upon admission hospital will verify and submit information of admission online to BCA within 2 hours' BCA will respond in 4 hours. Post discharge hospital would upload bills and download documents as per CGHS requirements within 72 hours. BCA will respond/clear the bill in seven working days.

7. INFRASTRUCTURE FOR INTERACTION WITH BCA

The Hospital should have:

- a. Dedicated Personal computer with at least Dual core / core 2 DUO processor and minimum 2 GB RAM supported by UPS. OS should be Windows. Dedicated Colour scanner with a minimum resolution 200 dpi.
- b. High Speed internet connectivity.
- c. Necessary security systems should be taken care of.
- d. A designated Nodal Person to interact with BCA.

The Hospital would be legally responsible for user authentication.

8. PROCESSING OF CLAIMS/BILLS BY BCA

The actual auditing will start when physical copies of these bills are submitted by concerned Hospital to the BCA on behalf of the CGHS and counting of days will start from such date for the purpose of discount etc.

The Hospital will also submit to BCA the electronic bills and other Data online in case of serving employees and original bills (Hard Copy) shall be provided to the beneficiary where payment has been made by the beneficiary.

The Data and electronic bills in respect of serving employees shall be utilized for statistical purposes.

The BCA during the course of the auditing will restrict the claims as per CGHS rules and regulations. BCA will also examine in terms of:

- Appropriateness of treatment including screening of patients records to identify unnecessary admissions and unwarranted treatments
- Whether the planned treatment is shown as emergency treatment
- Whether the diagnostic medical or surgical procedures that were not required were conducted by hospital including unnecessary investigations
- Maintaining database of such information of CGHS beneficiaries for future use.
- Whether the treatment procedures have been provided as per the approved rates and the packages.
- whether procedures performed were only those for which permission has been granted

The BCA shall record their findings and intimate the same to the Hospital concerned with a copy endorsed to CGHS authority of the city. The payment of the bill/claim to

the hospital concerned will be made directly by the BCA after receipt of the physical bills in respect of CGHS pensioner beneficiaries, etc., who had taken treatment in these Private empanelled Hospital in a time bound manner.

BCA rendering services will charge from the Hospital 2% of the claimed amount per bill subject to a minimum of Rs.12.50 and a maximum of Rs.750/- per claim (and service tax as applicable) or such amount as specified by CGHS. The Government may revise these rates without any notice.

9. CREDIT

On production of a valid permission by the CGHS beneficiary- the Hospital / Day Care Centre shall provide credit facilities to the Members of Parliament, Pensioners, Ex-Members of Parliament, Freedom Fighters, Serving CGHS employees, serving employees of Ministry of Health & Family Welfare, Serving employees of Ministry of AYUSH, serving employees of Directorate General of Health Services etc. and such other categories of CGHS cardholders as notified by the Government.

In case of emergency the hospital will provide credit to all CGHS beneficiaries. The hospital shall verify the CGHS card and the CGHS/ Department is not liable to pay in cases of impersonation or treatment of ineligible persons.

10. MEDICAL AUDIT OF BILLS

There shall be a continuous Medical Audit of the services provided by the empanelled Hospital.

11. TREATMENT IN EMERGENCY

In emergency the hospital will not refuse admission or demand an advance payment from the beneficiary or his family member and will provide credit facilities to it" puti.nt whether the patient is a ierving employee or a pensioner avairing GGHS facilities, on production of a valid CGHS card and the hospitaishall submit the Sill for reimbursement to the _concerned Dept. / Ministry / CGHS. The refusal to provide the treatment to bonafide cGHS beneficiaries in emergency cases without valid ground would attract disqualification for continuation of empanelment.

12. REQUIREMENTS FOR OBTAINING TREATMENT/ PROCEDURE:

- a. Every patient is required to produce a valid CGHS card.
- b. Treatment / Procedure on credit with referral should be performed for following categories:
 - Pensioners of Central Govt., Ex-Members of Parliament, Ex- judges of High Court/ Supreme Court, Sitting Judges of Supreme Court, Sitting Members of Parliament, Freedom Fighters, Serving CGHS/DGHS / Ministry of H&FW employees / Ministry of AYUSH employees, Such other categories of CGHS cardholders as notified by the Government.

- c. For serving employees (other than as mentioned above) the payment will be made by the beneficiary as per CGHS rates / entitlement and he will claim reimbursement from his office subject to the approved ceiling rates.
- d. Ayurveda, Yoga & Naturopathy Hospitals / Day Care Centres shall provide treatment / procedure (s) on the basis of the authorization / referral letter issued by the competent authority as per the procedure given in the Office Memorandum.
- e. CGHS beneficiaries shall be attended to on priority.
- f. Treatment procedure shall be carried out on the production of valid CGHS card and valid permission from the competent authority.
- g. CGHS has the right to monitor the treatment / procedure provided in the Hospital / Day Care Centre at any time

13. GENERAL CONDITIONS

All investigation regarding fitness for the surgery will be done prior to the admission for any elective procedure and are part of package. For any material / additional procedure / investigation other than the condition for which the patient was initially permitted, would require the permission of the competent authority.

The package rate will be calculated as per the duration specified in the tender document under the “treatment requirements”. No additional charge on account of extended period of stay shall be allowed if that extension is due to infection on the consequences of surgical procedure or due to any improper procedure and is not justified.

In case the Hospital is charging less than the CGHS rates from non CGHS patients or institution for the said procedures then the Hospital / Center will also charge the same rate from CGHS. An authenticated list of rates being charged from non-CGHS patients or institutions will also be supplied to CGHS within 10 days of this Agreement.

The Hospital will intimate all instances of patients admitted on the basis of the Authority letter issued by the CGHS authorities in the prescribed format within one working day through fax / email (the number of which shall be notified) followed by post to CGHS /BCA.

The Hospital will intimate all instances of patients admitted as emergencies without prior permission to the CGHS authorities / BCA, in the prescribed format within one working day through fax / email (the number of which shall be notified) followed by post. The nature and appropriateness of the emergency is subject to verification, which may be verified, inspected or medically audited by the nominated authority on random basis at its discretion.

The Hospital shall provide reports on monthly basis by the 10th day of the succeeding calendar month in the prescribed format to the CCHS in respect of the beneficiaries treated / investigated

The Hospital / Center shall submit all the medical records in digital format.

The Hospital agrees that any liability arising due to any default or negligence in providing or performance of the medical services shall be borne exclusively by the Hospital who shall alone be responsible for the defect and / or deficiencies in rendering such services.

The Hospital agrees that during the treatment of the CGHS beneficiary, the Hospital will not ask the beneficiary or his attendant to purchase separately the medicines / sundries / equipment or accessories from outside and will provide the treatment within the package deal rate, fixed by the CGHS which includes the cost of all the items. Appropriate action, including removing from CGHS empanelment and / or termination of this Agreement, may be initiated on the basis of a complaint, medical, audit or inspections carried out by CGHS teams / appointed TPA.

14. CHANGES IN INFRASTRUCTURE / STAFF

The Hospitals shall immediately communicate to Additional Director / Joint Director (AYUSH) of CGHS about any change in the infrastructure / strength of Staff. The empanelment will be temporarily withheld in case of shifting of the facility to any other location without prior permission of CGHS. The new establishment of the same Hospital / Diagnostic Center shall attract fresh inspection, at the prescribed fee, for consideration of continuation of empanelment.

The Hospital will submit an annual report regarding number of referrals, received, admitted, bills submitted to the CGHS and payment received, details of monthly report submitted to the Additional Directors / Joint directors of CGHS of city, changes in the strength of doctors / staff and infrastructure if any. Annual audit report of the hospitals will also be submitted along with the statement.

Authorized signatory / representative of the hospital shall attend the periodic meetings held by the Director / AD / JD / Department / Establishment of CGHS, required in connection with improvement of working conditions.

During the visit by Additional Director Joint Director / CMO In-charge of the dispensary or any other authorized representative of the Ministry of Health / Directorate General of Health Services / concerned Department, including TPA, the Hospital / Day Care Centre authorities will cooperate in carrying out the inspection.

In case of any natural disaster / epidemic, the hospital shall fully cooperate with the Ministry of Health / Directorate General of Health Services, Additional Director / Joint Director of CGHS of the city and will convey / reveal all the required information, apart from providing treatment.

The Hospital will not make any commercial publicity projecting the name of GGHS / Ministry of Health & F.W. or Government of India. However, the fact of empanelment under CGHS shall be displayed at the premises of the empanelled center, indicating that the charges will be as per CGHS approved rates.

The hospital will investigate / treat the CGHS beneficiary patient only for the condition for which they are referred with permission, and in the specialty and / or

purpose for which they are approved by CGHS. In case of unforeseen emergencies of these patients during admission for approved purpose / procedure, 'provisions of emergency' shall be applicable.

The Hospital shall not undertake treatment of referred cases in specialties for which it is not empanelled. But it will provide necessary treatment to stabilize the patient and transport the patient safely to nearest recognized hospital under intimation to CGHS authorities. However in such cases the Hospital will charge as per the CGHS rates only for the treatment provided.

The hospital will not refer the patient to other specialist / other hospital without prior permission of CGHS authorities. Prior intimation shall be given to CGHS whenever patient needs further referral.

15. ENTITLEMENTS FOR VARIOUS TYPES OF WARDS

CGHS beneficiaries are entitled to facilities of private, semi-private or general ward depending on their pay drawn in pay band/ pension. The AYUSH Hospitals provide treatment as per the ward entitlement of CGHS beneficiaries.

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, carpet, etc. as well as a bed for attendant. The room has to be air-conditioned.

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.

General ward is defined as a hall that accommodates four to ten patients with necessary toilet facilities and other furnishings.

Treatment in higher Category of accommodation than the entitled category is not permissible

16. DUTIES AND RESPONSIBILITIES OF HOSPITALS

It shall be the duty and responsibility of the Hospital at all times, to obtain, maintain and sustain the valid NABH Accreditation, recognition and high quality and standard of its services and healthcare and to have all statutory / mandatory licenses, permits or approvals of the concerned authorities or as per the existing laws.

17. NON ASSIGNMENT

The Hospital shall not assign, in whole or in part, its obligations to perform under the agreement, except with the CGHS's prior written consent at its sole discretions and on such terms and conditions as deemed fit by the CGHS. Any such assignment shall not relieve the Hospital from any liability or obligation under this agreement.

18. HOSPITAL'S INTEGRITY AND OBLIGATIONS DURING AGREEMENT PERIOD

The Hospital is responsible for and obliged to conduct all contracted activities in accordance with the Agreement using state-of-the-art methods and economic principles and exercising all means available to achieve the performance specified in the Agreement. The Hospital is obliged to act within its own authority and abide by the directives issued by the CGHS. The Hospital is responsible for managing the activities of its personnel and will hold itself responsible for their misdemeanors, negligence, misconduct or deficiency in services, if any.

19. PERFORMANCE BANK GUARANTEE

Hospitals that are recommended for empanelment after the assessment shall also have to furnish a Performance Bank Guarantee for Rs. 2 Lakh valid for a period of 42 months to ensure efficient service and to safeguard against any default.

In case of Hospital / Day Care Centre already empanelled under CGHS they shall submit a new Performance Bank Guarantee after the validity of the old performance guarantee is over.

20. FORFEITURE OF PERFORMANCE BANK GUARANTEE AND REMOVAL FROM LIST OF EMPANELLED INSTITUTIONS

In case of any violation of the provisions of the MoA by the Hospital such as:

- (a) refusal of service,
- (b) undertaking unnecessary procedures,
- (c) prescribing unnecessary drugs / tests
- (d) over billing,
- (e) Reduction in staff / infrastructure / equipment etc. after the Hospital has been empanelled.
- (f) Non submission of the report, habitual late submission or submission incorrect data in the report.
- (g) Refusal of credit to eligible beneficiaries and direct charging from them.
- (h) Discrimination against CGHS beneficiaries vis-a-vis general patients.

The amount of security money (15% at a time) will be forfeited and the CGHS shall have the right to de-recognize the Hospital as the case may be. Such action could be initiated on the basis of a complaint, medical audit or inspections carried out by CGHS teams at random.

The decision of the CGHS will be final.

21. LIQUIDATED DAMAGES

- a. The Hospital shall provide the services as per the requirements specified by the CGHS in terms of the provisions of this Agreement. In case of initial violation of the provisions of the Agreement by the Hospital such as refusal of service or direct charging from the CGHS Beneficiaries or defective service and negligence, the amount equivalent to 15% of the amount of Performance Bank Guarantee will be

charged as agreed Liquidated Damages by the CGHS, however, the total amount of the Performance Bank Guarantee will be maintained intact being a revolving Guarantee.

b. In case of repeated defaults by the Hospital, the total amount of Performance Bank Guarantee will be forfeited and action will be taken for removing the Hospital from the empanelment of CGHS as well as termination of this Agreement.

c. For over-billing and unnecessary procedures, the extra amount so charged will be deducted from the pending / future bills of the Hospital and the CGHS shall have the right to issue a written warning to the Hospital not to do so in future. The recurrence, if any, will lead to the stoppage of referral to that Hospital.

22. TERMINATION FOR DEFAULT

The department may, without prejudice to any other remedy for breach of Agreement, by written notice of default sent to the Hospital terminate the Agreement in whole or part:

If the Hospital fails to provide any or all of the services for which has been recognized within the period(s) specified in the Agreement, or within any extension thereof if granted by the CGHS pursuant to Condition of Agreement or If the Hospital fails to perform any other obligation(s) under the Agreement.

If the Hospital in the judgment of the department has engaged in corrupt or fraudulent practices in competing for or in executing the Agreement.

23. INDEMNITY

The Hospital shall at all times, indemnify and keep indemnified CGHS / the Government against all actions, suits, claims and demands brought or made against it in respect of anything done or purported to be done by the Hospital in execution of or in connection with the services under this Agreement and against any loss or damage to CGHS / the Government in consequence to any action or suit being brought against the CGHS / the Government, along with (or otherwise), Hospital as a Party for anything done or purported to be done in the course of the execution of this Agreement. The Hospital will at all times abide by the job safety measures and other statutory requirements prevalent in India and will keep free and indemnify the CGHS from all demands or responsibilities arising from accidents or loss of life, the cause or result of which is the Hospital negligence or misconduct.

The Hospital will pay all indemnities arising from such incidents without any extra cost to CGHS and will not hold the CGHS responsible or obligated. CGHS / the Government may at its discretion and shall always be entirely at the cost of the Hospital defend such suit, either jointly with the Hospital or singly in case the latter chooses not to defend the case.

24. ARBITRATION

If any dispute or difference of any kind whatsoever (the decision whereof is not herein otherwise provided for) shall arise between the CGHS and the Hospital / upon or in relation to or in connection with or arising out of the Agreement, shall be referred to for arbitration by the Director, General Health Services, Ministry of Health & FW, Government of India, who will give written award of his decision to the Parties. The decision of the Director General of Health Services will be final and binding. The provisions of the Arbitration and Conciliation Act, 1996 shall apply to the arbitration proceedings. The venue of the arbitration proceedings shall be at Delhi / New Delhi.

25. MISCELLANEOUS

- Nothing under this Agreement shall be construed as establishing or creating between the Parties any relationship of Master and Servant or Principal and Agent between the CGHS and the Hospital.
- The Hospital shall not represent or hold itself out as agent of the CGHS.
- The CGHS will not be responsible in any way for any negligence or misconduct of the Hospital and its employees for any accident, injury or damage sustained or suffered by any CGHS beneficiary or any third party resulting from or by any operation conducted by and on behalf of the Hospital or in the course of doing its work or perform their duties under this Agreement or otherwise.
- The Hospital shall notify the Government of any material change in their status and their shareholdings or that of any Guarantor of the Hospital in particular where such change would have an impact on the performance of obligation under this Agreement.
- This Agreement can be modified or altered only on written agreement signed by both the parties.
- Should the Hospital get wound up or partnership is dissolved, the CGHS shall have the right to terminate the Agreement. The termination of Agreement shall not relieve the hospital or their heirs and legal representatives from the liability in respect of the services provided by the Hospital during the period when the Agreement was in force.
- The Hospital shall bear all expenses incidental to the preparation and stamping of this agreement.

26. OTHER SERVICES TO BE PROVIDED

The empanelled Hospital will, on the request of CGHS, agree to provide training to CGHS medical, Para-medical and nursing staff.

27. NOTICES

- a. Any notice given by one party to the other pursuant to this Agreement shall be sent to other party in writing by registered post or by facsimile and confirmed by original copy by post to the other Party's address as below.

CGHS: - Director, CGHS (HQ), R.K Puram, Sec- 13, New Delhi -66, Ministry of Health & FW, Government of India.

Hospital with address:

(.....
.....)

- b. A notice shall be effective when served or on the notice's effective date, Whichever is later. Registered communication shall be deemed to have been served even if it returned with remarks like refused, left, premises locked, etc.

In WITNESSES WHEREOF, the parties have caused this Agreement to be signed and executed on the(day),(month) and(year) first above mentioned.

Signed by

Ministry of Health & Family Welfare, Government of India
For and on behalf of
The President of India

In the Presence of
(Witnesses)

1.

2.

Signed by

For and on behalf of (Hospital)
Duly authorized vide Resolution No. dated
Of (name of Hospital)

In the presence of
(Witnesses)

1.

2.

PERFORMANCE BANK GUARANTEE

To:
Director, CGHS
Ministry of Health & Family Welfare,
R.K Puram, Sec-13,
New Delhi -110066

WHEREAS (Name of
Hospital has undertaken, Agreement No..... dated,2025 to
..... (Description of Services; hereinafter
called "the Agreement").

AND WHEREAS it has been stipulated by you in the said Agreement that the Hospital selected for empanelment shall furnish you with a bank Guarantee by a nationalized bank for the sum specified therein as security for compliance with the Hospital performance obligations in accordance with the Agreement.

AND WHEREAS we have agreed to give the Hospital a guarantee:

THEREFORE WE hereby affirm that we are Guarantors and responsible to you, on behalf of Hospital herein after referred to "the Second Part", up to a total of (Amount of the Guarantee in words and figures) and we hereby irrevocably, unconditionally and absolutely undertake to immediately pay you, upon your first written demand declaring the Second Part to be in default under the Agreement and without cavil or argument, any sum or sums within the limit of(Amount of the Guarantee in words) as aforesaid, without your needing to prove or to show this grounds or reasons for your demand or the sum specified therein. This guarantee is valid until the Day of Month Year.

Signature and Seal of the Guarantors

.....

.....

Date

Address

Amount of Performance Bank Guarantee to be obtained from the Hospital at the time of signing the Agreement:-

AYUSH HOSPITAL / Day Care Centre	Rs. 2.00 Lakhs
---	-----------------------

No. 15/11-21/2009/CGHS(SZ)/CGHS(P)

Government of India
Ministry of Health & Family Welfare
Department of Health & F.W.

Nirman Bhavan, New Delhi
Dated the 27th October, 2009

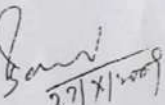
OFFICE MEMORANDUM

Subject: Empanelment of AYUSH hospitals/centers under CGHS and CS(MS) for Ayurveda, Unani and Yoga & Naturopathy treatment/procedures.

The undersigned is directed to invite reference to the Office Memorandum, No.Z-28015/01/2006-HD Cell/CGHS(P) dated 1.1.2008, issued by the Ministry of Health & Family Welfare, vide which order AYUSH Hospitals were empanelled. The present procedure as per para -3 and para -4 of the above order the treatment at the empanelled AYUSH hospitals/Centres may be taken only with the prior authorization/permission in accordance with the CGHS Rules in force at the time of taking treatment and permission for treatment is granted by CMO In Charge/Addl. Director/Jt. Director etc. (as the case may be). Such permission shall be issued on the basis of recommendation from CMO/SMO I/C of the concerned AYUSH dispensary. Representations have been received in the Ministry of Health & Family Welfare stating complaining that AYUSH dealers (Ayurveda/Homeopathy/Unani, Yoga) are refusing to endorse the advice of empanelled AYUSH Hospitals dealing with Naturopathy & Yoga.

2. On examination it has now been decided that CGHS/CS(MA) beneficiaries may directly obtain consultation/treatment from empanelled Hospitals for Naturopathy & Yoga and would be eligible for reimbursement subject to prior intimation to their respective Ministries/Departments in respect of serving CGHS/CS(MA) beneficiaries and to the concerned ADs/JDs of CGHS cities in respect of CGHS pensioner beneficiaries.

3. The other terms and conditions of the said above O.M. dated 1.1.2008 will be remained unchanged.


(Jai Praksh)

Under Secretary to the Government of India
[Tel: 2306 1881]

To,

1. All Ministries/Departments of Govt. of India.
2. Director, CGHS, Nirman Bhawan, New Delhi.
3. All Pay & Accounts Officers under CGHS.
4. Additional Directors/Joint Directors of CGHS.
5. JD(Gr.)/JD(R&H), CGHS, Delhi.



सत्यमेव जयते
Government of India

Ministry of Health & Family Welfare
Department of Health
Directorate General of CGHS
Office of the Director, CGHS

F. No.S-11011/90/2016-CGHS/(HEC)/AYUSH/PT-1.

Nirman Bhayan, New Delhi-11
Dated the 9th November, 2017

OFFICE MEMORANDUM

Subject: Empanelment of AYUSH Hospitals / Centers and revision of rates under CGHS

With reference to the above mentioned subject the undersigned is to state that the matter regarding revision of rates of AYUSH treatment procedures and new empanelment under CGHS has been under consideration of this Ministry for quite some time. In this regard it has now been decided to revise CGHS rates and treatment procedures under AYUSH largely based on the rates and treatment procedures notified by the Ministry of AYUSH for the Insurance sector and initiate new empanelment process of Ayush Hospitals under CGHS as per the details prescribed in the succeeding paragraphs.

1. (a) It is clarified that the procedures suffixed with package treatment in annexure A2, Y2, N2, U2 & S2 are "Package treatment" and reimbursement shall be limited to the package rates.

(b) The 'package rate' includes all charges pertaining to a particular treatment/procedure including registration charges, admission charges, accommodation charges, cost of medicines, Panch Karma charges, Room charges, charges for Kshar sutra operation/procedure charges Doctor/Consultant visit charges, Monitoring charges, operation theatre charges, procedural charges/Surgeon's fee, cost of disposable surgical charges and cost of all sundries used during hospitalization, routine investigations, physiotherapy charges etc. This also is inclusive of all sub-procedures and related procedures to complete the treatment.

(c) No additional charge on account of extended period shall be allowed if that extension is due to any improperly conducted procedure.

(f) Ward entitlement and rates for room charges will be as prescribed for AYUSH treatment under CGHS. Room rent is applicable only for treatment procedures for which there is no prescribed package rate and the accommodation charges shall include charges for occupation of bed, diet for the patient, charges for water and electricity supply, linen charges, nursing charges and routine up-keeping.

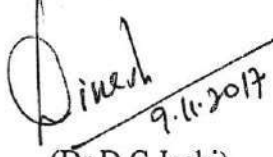
(g) The prescribed rates as indicated in Annexure A2,Y2,N2, U2 & S2 shall become applicable after signing of MoA and acceptance of rates for which a period of 30 days would be given after issuance of notification. The validity of the present MOA will be for a period of 3 years

2. The treatment at these empanelled AYUSH Hospitals/Centers may be taken only with the prior authorization/ permission in accordance with the CGHS Rules in force at the time of taking treatment. However no permission is required for emergency admission/treatment. Hospital must have facilities for emergency management of patients.
3. For taking treatment from the list of empanelled CGHS Hospitals specific treatment procedure has to be advised by a Government Doctor of concerned stream of medicine. Based on such advice, the beneficiaries are required to take prior permission from CMO in-charge in case of Pensioners, ex-MPs , etc. and from Rajya Sabha Secretariat /Lok Sabha Secretariat as the case may be in case of Members of Parliament and from Registrar General of Supreme Court and the Registrar of Delhi High Court in case of Judges/Serving employees of Supreme Court and High Court respectively and from concerned Ministry /department/Office in case of serving employees and from the concerned autonomous body in case of serving employees and pensioners of autonomous bodies covered under CGHS.**For Yoga & Naturopathy Office Memorandum NO. 15/11-21/2009/CGHS (SZ)/CGHS (P) dated 27th October, 2009 will be applicable.**
4. The AYUSH Hospitals/Centers will not refuse admission/treatment to Central Government Employees or their dependent family members who are not CGHS beneficiaries if they produce certified/ attested copies of identity cards issued by the Government of India and shall not charge more than the prescribed package rates/ rates in such cases. Similarly CGHS pensioners without referrals but with CGHS card would be offered CGHS rates.
5. An AYUSH Hospital/centre empanelled as above, whose rates for treatment procedures/tests are lower than the prescribed rates shall charge lower rates.
6. The list of CGHS revised rates for Ayurveda, Yoga & Naturopathy, Siddha and Unani are enclosed. These rates are applicable to NABH accredited AYUSH Hospitals and Non-NABH accredited AYUSH Hospitals shall be entitled for 15% lower Rates.
7. It has also been decided that only NABH accredited AYUSH Hospitals and AYUSH teaching Hospitals shall be empanelled herein after. The existing NABH accredited AYUSH Hospitals shall be allowed to continue on CGHS panel. The empaneled Non-NABH accredited AYUSH Hospitals are required to obtain NABH accreditation within one year of issue of this notification for continuation of their empanelment under CGHS.
8. All Government Hospitals, Autonomous Hospitals funded by Central Government, State Government, Hospitals managed and run by Councils functioning under Ministries, National Institutes funded by Central / State Government are deemed to be CGHS empanelled and the treatments taken in such hospitals shall be reimbursed as per CGHS rates or hospital rates whichever may be less.
9. Hospitals shall provide credit facility to the entitled class of CGHS beneficiaries which includes CGHS Government pensioners, serving employees of Ministry of Health & Family Welfare, Serving employees of DGHS / CGHS and other notified categories:

10. Hospital bills in case of pensioners, former Governors, former Vice-Presidents, ex-MPs, Freedom Fighters, etc., shall be submitted to Additional Director of concerned CGHS city through BCA and to Rajya Sabha Secretariat / Lok Sabha Secretariat in case of sitting Members of Parliament.
11. The unit rates mentioned in the rate list is inclusive of Man power, medicines and infrastructure hence no other add-on charges to be added to the procedures offered by the hospital. Only doctors visiting fee, one visit per day is permissible.
12. Any legal liability arising out of such services, responsibility solely rests on the hospital and shall be dealt with by the concerned empanelled hospital/diagnostic centre. Services will be provided by the Hospitals/Diagnostic centers as per the terms of agreement to be signed by the Hospital and Additional director of concerned city where the hospital is located as per the format of MOA annexed with this O.M
13. Facilities shall be provided to CGHS beneficiaries as per their ward entitlement only.
14. A hospital empanelled under CGHS, whose normal rates for treatment procedure / test are lower than the CGHS prescribed rates shall charge as per its own rates and will furnish a certificate to the effect that the rates charged from CGHS beneficiaries are not more than the rates charged by them from non-CGHS beneficiaries.
15. 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, and carpet, TV, Air conditioner and Intercom facility etc. as well as a bed for attendant.
16. 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 along with Air conditioner.
17. General ward is defined as halls that accommodate four to ten patients with necessary toilet attachments and furnishings
18. Normally treatment in higher category of accommodation than the entitled category is not permissible. However, in case of an emergency when the entitled category accommodation is not available, admission in the immediate higher category may be allowed till the entitled category accommodation becomes available. However, if a particular hospital does not have the ward as per entitlement of beneficiary, then the hospital can only bill as per entitlement of the beneficiary even though the treatment was given in higher type of ward.
19. In case of non-emergencies, the beneficiary shall have the option of availing specific treatment / investigation from any of the empanelled hospitals of his / her choice (provided the hospital is empanelled for that treatment procedure / test), after the same has been advised by CMO/SMO in-charge CGHS AYUSH WC/Hospital within the city.
20. The CMO/SMO In-charges of AYUSH WCs shall examine and decide the course of treatment to be given to the beneficiary along with tentative duration of days of treatment and not more than 2 weeks in general and in rare cases on the advice of the treating doctor of the empanelled hospital, the treatment can be extended capping to 35 days.

21. The empanelled Hospitals shall be a continuous process and the applications in prescribed format shall be examined by a Committee under the chairperson of Addl. Director, CGHS(HQ) , Delhi and the applications received in the quarter shall be examined on the last working day of March, June, September and December of the year.
22. The shortlisted hospitals recommended for empanelment shall have to sign MOA and submit Performance Bank Guarantee before they are notified as empanelled under CGHS. The private AYUSH hospitals already empanelled under CGHS have to enter in to a new MOA and submit PBG within 30 days for continuation of their empanelment. Non-NABH Accredited AYUSH Hospitals, already empanelled under CGHS are required to obtain NABH accreditation within one year for continuation of their empanelment.
23. This issues in suppression of all earlier O.Ms related to CGHS AYUSH empanelment.

A copy of this OFFICE MEMORANDUM along with Application form with annexures and annexures of A1, A2, Y1Y2, N1N2, S1S2 & U1U2 is placed on the website of Ministry. <http://www.cghs.gov.in/>


(Dr.D.C.Joshi)
Director,CGHS

To

1. All Ministries / Departments, Government of India
2. Director, CGHS, Nirman Bhawan, New Delhi
3. Addl. DDDG (HQ)/ Addl. Director (HQ), CGHS
4. All Additional Directors /Joint Directors of CGHS Cities /Zones
5. All Pay & Accounts Officers under CGHS
5. Additional Director (HQ) / Additional Director (SZ), CGHS, New Delhi
6. Advisers AYUSH, Block B, GPO Complex, Pandit Bhagwan Sahay Vats Vitthi, INA Colony, New Delhi, Delhi 110023
7. JD (Gr.)/JD(R&H), CGHS Delhi
8. CGHS Desk-I/Desk-II/CGHS-I/CGHS-II, Dte.GHS, Nirman Bhawan. New Delhi
9. Estt.I/ Estt.II/ Estt.III/ Estt.IV Sections, Ministry of Health & Family Welfare
10. M S Section. Ministry of H&FW
11. Admn.I / Admn.II Sections of Dte.GHS
12. Rajya Sabha / Lok Sabha Secretariat
13. Registrar, Supreme Court of India /Delhi High Court Sher Shah Road New Delhi Punjab & Haryana High Court, Chandigarh
14. U.P.S.C.
15. Finance Division Ministry of H&FW
16. Deputy Secretary (Civil Service News), Department of Personnel & Training, 5th Floor, Sardar Patel Bhawan, New Delhi.
17. PPS to Secretary (H&FW)/ Secretary (AYUSH)/ Secretary (HR)/ Secretary (AIDS Control), Ministry of Health & Family Welfare
18. PPS to DGHS / AS&FA / AS (DG) / AS&DG (NACO) NRHM
19. Swamy Publishers (P) Ltd., P. B. No. 2468, R. A. Puram, Chennai 600028.
20. M/s. of all Hospitals and diagnostic centres being empanelled.
21. Shri Umraomal Purohit, Secretary, Staff Side, 13-C, Ferozshah Road, New Delhi

22. M/s. Bahri Brothers 742- Lajpat Rai Market Delhi-110006
23. M/s. Nabhi Publications Post Box No. 37 New Delhi -110001
24. All Staff Side Members of National Council (JCM) (as per list attached)
25. Office of the Comptroller & Auditor General of India, 10 Bahadur Shah Zafar Marg, New Delhi
26. All Offices / Sections / Desks in the Ministry
27. Nodal Officer, CGHS (MCTC) with the request to upload the O.M. on the website of the CGHS.
28. Guard File

ANNEXURES:

1. Application form for seeking new empanelment along with other required forms
2. Draft for MOA to be signed on Rs 100 Stamp paper between the CGHS and empanelled Hospital
3. List of Ayurvedic treatment procedures and rates
4. List of Yoga and naturopathy treatment procedures and rates
5. List of Siddha Disease treatment procedures and rates
6. List of Unani Disease treatment procedures and rates

Directorate General of CGHS
Ministry of Health & Family Welfare
R.K. Puram, Sec-13, New Delhi-66

Dated: 30.09.2022

To,

All CGHS Empanelled Private AYUSH HCOs

Sub: Clarification for the treatment/procedures, room rent of Empanelled Yoga & Naturopathy HCOs – reg.

With reference to the request received from CGHS AYUSH Private Empanelled Hospital “Vivekanand Hospital Yogashram, Khureji Khass, New Delhi” through email dated 25.08.2022 and request received from CGHS AYUSH Sanctioning Authorities through email dated 12.09.2022 regarding the subject cited above, it is conveyed that the following may be considered while performing the calculations of medical reimbursement claims.

I. Yoga treatment / procedures:-

Empanelled AYUSH HCOs must have to do the treatments/procedures/therapy according to the number of days/weekly packages strictly as mentioned in the Annexure - Y2 of CGHS O.M dated 09.11.2017

II. Naturopathy treatment/procedures:-

S.No.	Type of Treatment	Rate/Unit
1	In case of Weekly treatment (OPD/IPD) like 7 days or 14 days, etc.	As per package rates mentioned in OM, dated 09.11.2017 and Annexure - N2.
2.	If the days of treatment exceed or less than the package days like 5 days, 8 days, 13 days, 15 days, etc. with minimum 3 procedures as per the annexure - N2 of O.M, dated 09.11.2017	
	a) If number of days of treatment is 1 to 6 days.	i. For 1 day to 4 days reimbursement will be done as per the One day package treatment @ Rs.750/- or item-wise, whichever is less, either for OPD or IPD (as the case may be) ii. For 5 days or 6 days, treatment/ procedure will be considered under One Week Package either for OPD or IPD (as the case may be)
	b) If the number of days of treatment is 8 to 13 days.	i. First 7 days will come under One Week package treatment for either OPD or IPD (as the case may be) For 8 th to 10 th day reimbursement will be done as per the One day package treatment @ Rs.750/- or item-wise, whichever is less, either for OPD or IPD (as the case may be) ii. For 11, 12 days or 13 days, treatment/ procedure will be considered under Two Week Package either for OPD or IPD (as the case may be)

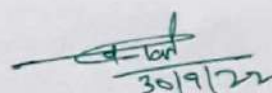
c) If the number of days of treatment is 15 to 20 days.	i. First 14 days will come under Two Weeks package treatment for either OPD or IPD (as the case may be). For 15 th to 18 th day reimbursement will be done as per the One day package treatment @ Rs. 750/- or item-wise, whichever is less, either for OPD or IPD (as the case may be) ii. For 19 days or 20 days, treatment/ procedure will be considered under Three Weeks Package either for OPD or IPD (as the case may be)
d) If the number of days of treatment is 22 to 27 days.	i. First 21 days will come under Three Weeks package treatment for either OPD or IPD (as the case may be). For 22 nd to 25 th day reimbursement will be done as per the One day package treatment @ Rs. 750/- or item-wise, whichever is less, either for OPD or IPD (as the case may be) ii. For 26 days or 27 days, treatment/procedure will be considered under Three Weeks Package plus One Week Package either for OPD or IPD (as the case may be)

Note:

1. Room rent is inclusive in package treatment as per CGHS OM dated 09.11.2017. However, it will be applicable for less or more number of package days counted as one day package treatment (as mentioned above) only in case of IPD as per the entitlement (Rs. 500/- for General Ward, Rs.1000/- for Semi-Private Ward, Rs.1500/- for Private Ward)
2. For rest of the procedures/treatment/therapy other than as mentioned in S.No.2 of II (Naturopathy treatment/procedures, mentioned in above table), reimbursement of MRC bill will be done item-wise subject to conditions as applicable in O.M, dated 09.11.2017

The clarification as given above is valid till new empanelment of AYUSH hospitals and fixation of rates is finalized under CGHS or till 31.07.2023, whichever is earlier.

This issues with the approval of competent authority.


30/9/22

(Dr. G. D. Paliya)

Additional Director, CGHS (HQ)
New Delhi

Copy to:

1. CGHS AYUSH Sanctioning Authority, CGHS HQ, R.K Puram, New Delhi
2. CGHS AYUSH Sanctioning Authority, Ayurvedic W.C, North Avenue, New Delhi



F. No.S-11011/90/2016-CGHS/(HEC)/AYUSH/PT-II. /255-281
Ministry of Health & Family Welfare
Directorate General of CGHS
Office of the Director, CGHS
R.K Puram, Sec-13, New Delhi

Dated: 05th July, 2023

OFFICE MEMORANDUM

Subject: Revision of room rent for CGHS empanelled AYUSH Health Care Organizations and Empanelment of IPD AYUSH (Ayurveda, Yoga & Naturopathy, Unani and Siddha) Hospitals – reg.

The matter regarding revision of room rent of CGHS empanelled AYUSH Health Care Organizations has been under consideration of MoHFW for some time. In this regard the undersigned is directed to convey, the approval of the Competent Authority for revision of the room rent and modified terms & conditions for the empanelment of AYUSH Hospitals under CGHS as per the details given below:

1. The revised room rent for private AYUSH Hospitals empanelled under CGHS shall be as under:

Category	Existing Room Rent	Revised Room Rent
General Ward	Rs. 500	Rs. 1000
Semi-Private Ward	Rs. 1000	Rs. 2000
Private Ward	Rs. 1500	Rs. 3000

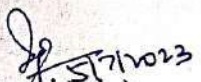
2. It has been decided to empanel hospitals under Unani and Siddha systems also in addition to the Hospitals under Ayurveda, Yoga & Naturopathy. The existing NABH accredited AYUSH Hospitals shall be allowed to continue on CGHS panel by signing the new MoA and acceptance letter for CGHS rates and terms & conditions and submission of revalidated PBG.
3. Hospitals which are shortlisted for empanelment under CGHS, have to onboard on the NHA Platform, within 30 days, failing which their empanelment would be rejected.
4. The ceiling of Rs. 1000/- as one day combined package for both Yoga & Naturopathy procedures (Rs. 250/- per day as one day yoga therapy package for Yoga & Rs. 750/- per day as one day package treatment for Naturopathy), shall be allowed as per the Annexures - N2 & Y2 of O.M dated 09.11.2017. However, rates, room rent and number of treating days will be counted as per the clarification issued by CGHS on 30.09.2022.
5. CGHS/CS (MA) **beneficiaries** may directly obtain consultation/treatment from the empanelled Hospitals / Centres for Yoga & Naturopathy for a period upto two-weeks (ceiling) and shall be eligible for reimbursement, subject to **prior intimation** to their respective Ministries/Department, in respect of serving CGHS / CS (MA) beneficiaries and to the concerned ADs of CGHS cities in respect of CGHS pensioner beneficiaries. There should be a gap of at least **3 months** for the treatment if the patient undergoes upto two-weeks treatment and a gap of at least **45 days** for the treatment if the patient undergoes upto one-week treatment.
6. The empanelled AYUSH Hospitals shall also be permitted to provide OPD consultation after referral by CMO/SMO/MO. However, medicines shall be prescribed only from **CGHS formulary** and shall be obtained from CGHS AYUSH Wellness Centres.

7. The CGHS inspection squad will make surprise visits for the empanelled Hospitals/Centres, atleast once in a month or as per the complaints received to ensure and address the quality and safety treatment to the beneficiaries including performance of the Hospital as per MoA.
8. The Application for empanelment under CGHS is available on CGHS website and shall be submitted enclosing the requisite documents.
9. These orders are valid from the date of issue.
10. This issues with approval of Competent Authority and the concurrence of IFD, MOHFW vide CD No. 971 dated 26.06.2023.


Dr. Manoj Jain
(Director, CGHS)

To

1. All Ministries / Departments Government of India
2. Director, CGHS, Nirman Bhawan, New Delhi
3. Addl. DDG (HQ)/ Addl. Director (HQ), CGHS
4. JD (Gr.)/AD(R&H), CGHS (HQ), New Delhi
5. All Additional Directors /Joint Directors of CGHS Cities /Zones
6. M.S Ayurvedic Hospital, Ali Ganj, Lodhi Road, New Delhi.
7. All Pay & Accounts Officers under CGHS
8. Advisers, AYUSH, Block B, GPO Complex, INA Colony, New Delhi,
9. CGHS Desk-I/Desk-II/CGHS-I/CGHS-II, Dte.GHS, Nirman Bhawan, New Delhi
10. Estt.I/ Estt.II/ Estt.III/ Estt.IV Sections, Ministry of Health & Family Welfare
11. M S Section. Ministry of H&FW
12. Admn.I / Admn.II Sections of Dte.GHS
13. Rajya Sabha / Lok Sabha Secretariat
14. Registrar, Supreme Court of India/Delhi High Court, Sher Shah Road, New Delhi.
15. U.P.S.C.
16. Finance Division, Ministry of H&FW
17. Deputy Secretary (Civil Service News), Department of Personnel & Training, 5th Floor, Sardar Patel Bhawan, New Delhi.
18. PPS to Secretary (H&FW)/ Secretary (AYUSH)/ Secretary (HR)/ Secretary (AIDS Control), Ministry of Health & Family Welfare
19. PPS to DGHS / AS&FA / AS (DG) / AS&DG (NACO) NRHM
20. M/s. of all Hospitals /Day Care Centres being empanelled.
21. Secretary, Staff Side, 13-C, Ferozshah Road, New Delhi.
22. All Staff Side Members of National Council (JCM) (as per list attached)
23. Office of the Comptroller & Auditor General of India, 10 Bahadur Shah Zafar Marg, New Delhi
24. All Offices / Sections / Desks in the Ministry
25. Addl. CEO, NHA, Tower-L, Jeevan Bharati Building, Connaught Place, New Delhi-01.
26. Nodal Officer, CGHS (MCTC) with the request to upload the O.M. on the website of the CGHS.
27. Guard File


(Dr. Manoj Jain)
Director, CGHS



F. No.S-11011/90/2016-CGHS/(HEC)/AYUSH/Pt-II.
Ministry of Health & Family Welfare
Directorate General of CGHS
Office of the Director, CGHS

CGHS Bhawan, R.K Puram
Sec-13, New Delhi-66
Dated: /09/2023

OFFICE MEMORANDUM

Subject: Clarification on the referral for CGHS beneficiaries aged 75 years & above and consultation through Video Conferencing for AYUSH system-reg.

With reference to the above mentioned subject the undersigned is directed to draw the attention to Office Memorandum vide F.No. Z.15025/35/2019/DIR/CGHS/CGHS(P) dated 29.05.2019 & 27.06.2019 and clarified that the referral for 75 years and above and consultation through Video Conferencing for AYUSH system is not appropriate since as per Ayurvedic literature, many procedures are contra-indicated after 75 years of age and in certain disease conditions also.

Moreover, to examine the physical condition of the patient whether he is eligible for the therapy is to be assessed by the treating Ayurvedic physician for which consultation is necessary, which is not possible through Video Conferencing and therefore, referral by the treating Ayurvedic physician, for once, is required for taking the treatment from the AYUSH Day Care Centre for a period of approximately 7 days / 15 days.

This issues in consultation with the experts in the field.

Signed by
Manoj Jain
(Dr. Manoj Jain)
Date: 05-10-2023 17:11:45
Director, CGHS

To,

1. All Ministries / Departments Government of India
2. Director, CGHS, Nirman Bhawan, New Delhi
3. Addl. DDG (HQ)/ Addl. Director (HQ), CGHS
4. JD (Gr.)/AD(R&H), CGHS (HQ), New Delhi
5. All Additional Directors /Joint Directors of CGHS Cities /Zones
6. M.S Ayurvedic Hospital, Ali ganj, Lodhi Road, New Delhi.
7. All Pay & Accounts Officers under CGHS
8. Advisers AYUSH, Block B, GPO Complex, Pandit Bhagwan Sahay Vats Vitthi, INA Colony, New Delhi, Delhi 110023
9. CGHS Desk-I/Desk-II/CGHS-I/CGHS-II, Dte.GHS, Nirman Bhawan, New Delhi
10. Estt.I/ Estt.II/ Estt.III/ Estt.IV Sections, Ministry of Health & Family Welfare

I/3620026/2023

11. M S Section. Ministry of H&FW
12. Admn.I / Admn.II Sections of Dte.GHS
13. Rajya Sabha / Lok Sabha Secretariat
14. Registrar, Supreme Court of India /Delhi High Court Sher Shah Road New Delhi.
15. U.P.S.C.
16. Finance Division, Ministry of H&FW
17. Deputy Secretary (Civil Service News), Department of Personnel & Training, 5" Floor, Sardar Patel Bhawan, New Delhi.
18. PPS to Secretary (H&FW)/ Secretary (AYUSH)/ Secretary (HR)/ Secretary (AIDS Control), Ministry of Health & Family Welfare
19. PPS to DGHS / AS&FA / AS (DG) / AS&DG (NACO) NRHM
20. M/s. of all Hospitals /Day Care Centres being empanelled.
21. Secretary, Staff Side, 13-C, Ferozshah Road, New Delhi.
22. All Staff Side Members of National Council (JCM) (as per list attached)
23. Office of the Comptroller & Auditor General of India, 10 Bahadur Shah Zafar Marg, New Delhi
24. All Offices / Sections / Desks in the Ministry
25. Addl. CEO, NHA, Tower-L, Jeevan Bharati Building, Connaught Place, New Delhi-01
26. Nodal Officer, CGHS (MCTC) with the request to upload the O.M. on the website of the CGHS.
27. Guard File



F. No.S-11011/90/2016-CGHS/(HEC)/AYUSH/Pt-II.

Ministry of Health & Family Welfare
Directorate General of CGHS
Office of the Director, CGHS

CGHS Bhawan, R.K Puram,
Sec -13, New Delhi-66
Dated: 28/11/2023

OFFICE ORDER

Subject: Clarification on the issues related to CGHS AYUSH Package rates - Reg.

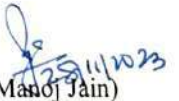
The subject matter has been discussed and deliberated with the experts in the field and clarified as under.

1. All the unit rates and package rates for IPD mentioned in the O.M dated 09.11.2017 are exclusive of room rent charges. If the hospital charges room rent for indoor treatment, the same is reimbursable in addition to package rates as per the entitlement of the beneficiary till further orders.

2. Repetition of the same treatment under Yoga & Naturopathy: The time interval prescribed for repetition of same treatment under Yoga & Naturopathy as prescribed in O.M vide file no S-11011/90/2016-CGHS/(HEC)/AYUSH/Pt-I is applicable from 05.07.2023 only. Such time intervals however are not applicable treatments under Ayurveda

The gap rules mentioned for the treatment intervals in N2 & Y2 of the O.M. 2017 shall be strictly followed till 04.07.2023 for clearing the pending bills of HCOs.
From 05.07.2023 onwards Point No.5 of the recent O.M. dated 05.07.2023 for treatment intervals shall be followed.

3. Regarding intimation and undertaking: CGHS latest O.M dated 05.07.2023 is not superseding the O.M dated 27.10.2009 which is clearly mentioning about prior intimation to their respective department in respect of serving beneficiaries and to the concerned ADs of CGHS Cities in respect of CGHS pensioner beneficiaries. Therefore the above directives may strictly be followed by the CGHS beneficiaries by intimating the concerned and the copy of the same may be forwarded to the concerned HCOs while taking the treatment. It is appropriate to submit the undertaking by the patient for not undergoing any Yoga/ Naturopathy treatment for the last 45 days/ 03 months.


(Dr. Manoj Jain)
Director, CGHS

To:

1. All Ministries / Departments Government of India
2. Director, CGHS, Nirman Bhawan, New Delhi
3. Addl. DDG (HQ)/ Addl. Director (HQ), CGHS
4. JD (Gr.)/AD(R&H), CGHS (HQ), New Delhi

5. All Additional Directors /Joint Directors of CGHS Cities /Zones
6. M.S Ayurvedic Hospital, Ali ganj, Lodhi Road, New Delhi.
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9. CGHS Desk-I/Desk-II/CGHS-I/CGHS-II, Dte.GHS, Nirman Bhawan, New Delhi
10. Estt.I/ Estt.II/ Estt.III/ Estt.IV Sections, Ministry of Health & Family Welfare
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16. Finance Division, Ministry of H&FW
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26. Nodal Officer, CGHS (MCTC) with the request to upload the O.M. on the website of the CGHS.
27. Guard File

Revised CGHS Rates and Guidelines for reimbursement/ settlement of Ayurvedic treatment expenditure claims under CGHS.

List of diseases/disease conditions needing hospitalization of the patients, indicative therapies and likely duration of hospitalization-

Sl. No	Disease	Condition needing hospitalization	Indicated therapies required as per the condition of patient	Likely duration of hospitalization
1.	SwasaRoga, KasaRoga (Restrictive /Obstructive Pulmonary Diseases, Bronchial Asthma, Emphysema, COPD..etc)	- Breathing difficulty - Cough - Fever	Snehapana, Abhyanga, Nadeesweda, Vamana, Virechana, Kavala, Dhoomapana, Nasya, Pizhichil, Thakra Dhara, Urovasthi, Taila Vasthi, Kashaya Vasthi, Pichu, Thailam, Kashay Dhara, Dhanyamla Dhara, Lepam	7- 28 DAYS
2	Greevastambha, Greevashundana (Cervical spondylosis, Cervical spondylitis, Ankylosing spondylitis of cervical spine, Cervical disc prolapse.etc)	- Persisting or radiating pain in cervical region - Restricted neck movements - Tenderness - Numbness - Vertigo	Abhyanga, Lepa, Upanaha, Jambeerapindasweda,, Kukkutandapindasweda, Shashtikapindasweda, Churnapindasweda, Pizhichil, Pathrapindasweda, Dhanyamlapindasweda, Dhanyamladhara, Pichu, Valukasweda, Aanchanam, Sthanika Sekam, Nadeesweda, Greevavasthi, Nasya, Kavala, Dhoomapana, Sirovasthi, Snehapana, Vamana,	7- 28 DAYS

			Virechana, Kashaya Vasthi, Thailavasthi, Thalam, Veshtanam, Dhanya Pindasweda, Valuka Sweda	
3	Kateegraha, gridhrasi, kateesoolatrikap ristakateegraha, (Sciatica, Low Back Pain/Ache, I.V.D.P, Spondylolysthesi s...etc)	• Persistent or radiating back pain • Restricted movements of low back/ hip region • Tenderness • Burning sensation	KatiVasthi, PrishtaVasthi, Agnikarma, Kati-pichu, SiraVyadha/Siravedha, Virechana Abhyanga, Lepa, Upanaha, Jambeerapindasweda, Kukkutandapindasweda, Shashtikapindasweda, Churnapindasweda, Pizhichil, Pathrapindasweda, Dhanyamla Pindasweda, Dhanyamla Dhara, Pichu, Valukasweda, Aanchanam, Sthanika sekam, Nadeesweda, Kati Vasthi, Avagaha, Snehapana, Virechana, Thailavasthi, Kashayavasthi, Ksheeradhara, PrIshtasandhi-marma abhyanga (Lumbar manipulation), Veshtana, Dhanya pindasweda, Valuka sweda	7- 28 DAYS
4	Apabahuka, Viswachi (Frozen shoulder, Periarthritis, Tendinitis,	• Radiating or local pain in shoulder region • Restricted shoulder movements • Tenderness • Numbness	Agnikarma, Abhyanga, Lepa, Upanaha, Veshtanam, Jambeerapindasweda, Kukkutandapindasweda, Shashtikapindasweda, Churnapindasweda, Pizhichil,	7-28 DAYS

	Brachial neuralgia.....etc)	• Muscle wasting	Pathrapindasweda, Dhanyamlapindasweda, Dhanyamladhara, Pichu, Valukasweda, Aanchanam, Sthanika sekam, Nadeesweda, Greevavasthi, Nasya, KaVala, Dhoomapana, Sirovasthi, Snehapana, Vamana, Thailavasthi, Kashayavasthi, Dhanya pindasweda, Valuka sweda, Mamsa pindasweda	
5	Pakshaghata (Paralysis, Hemiplegia, Hemiparesis...etc) c)	• Weakness of one side of the body • Stiffness of muscles • Muscle weakness • Numbness • Pain • Tremor • Difficulty in speech	virechana, kashaya vasthi, taila vasthi, shashtikapindasweda, pathra pindasweda, choorna pindasweda, jambeera pindasweda, dhanyamla pindasweda, sirovasthi, thalapothichil, pichu,seka, nasya, kabala, dhoomapana, abhyanga, thalam, moordhathailam, pizhichil, thailadhara, kashayadahara, ksheeradhara, ksheera dhoomam, jihwalepam, nadeeswedam, valuka sweda, mamsa pindasweda	14 – 35 DAYS
6	Kampavata(Neuro-spastic conditions, Parkinson's	• Tremor • Stiffness of muscles • Muscle weakness • Walking	pizhichil, nasya, kabala, gandoosha, dhoomapana, sirovasthi, ushmasweda, pichu, choornapindasweda,	14- 28 DAYS

	disease..etc)	- difficulty - Sluttering movements - Difficulty in speech	pathrapindasweda, jambeerapindasweda, shashtikapindasweda,lepa,ab hyanga, nadeesweda,ksheeradhooma , thailavasthi, kashayavasthi, ksheeradhara-full body (different varieties), dhanyamlapindasweda, dhanyapindasweda, mamsapindasweda	
7	Ardita (Facial Paralysis..etc)	- Weakness of facial muscles - Drooping of eye lids - Numbness of facial muscles - Salivation	murdhataila, nasya, kabala, dhoomapana, mukhabhyanga, nadeesweda, gandushaksheeradhooma, karnapoorana, akshitharpana, thalam, thailadhara,thakradhara, sirovasthi, pichu, thalapothichil/sirolepa, virechana, tailavasthi, kashayavasthi, choornapindasweda, pathrapindasweda, annalepa/ navaratheppu- sthanika	7- 21 DAYS
8	Vatarakta (gouti arthritis ischaemic limb, sle, rheumatoid arthritis..etc), kroshtukasheers ha	- Joint pain - Swelling - Tenderness - Deformity - Burning sensation - Discolouration	kashaya vasthi, thaila vasthi, virechana, parisheka, rakthamoksham- jaloukavacharana, siravedha, patra pinda sweda, nadee sweda, veshtana, valuka sweda, choorna pinda	14-28 DAYS

			sweda, shashtika pinda sweda, dhanyamla dhara, dhanyamla pinda sweda, ksheera dhara, kashaya dhara, lepana, upanaha, avagaha, snehapana, pizhichil	
9	Amavata (Connective tissue disorder, Rheumatic fever..etc)	• Heaviness of body • Body ache • Immobility • Fever • Swelling • Pain in low back	virechana, kashaya vasthi, thaila vasthi, valuka sweda, choorna pinda sweda, dhanyamla pinda sweda, dhanyamla dhara, rakthamokshana, upanaha, lepana, dhanya pindasweda, nadee swedam	14-28 DAYS
10	Sarvanga Vata (Cerebral atrophy, Cerebral Diplegia, Motor- Neuron diseases, M.N.D, M.S, C.P..etc), SUPTHI (Neurological disorders, Fibromyalgia..et c)	• Generalized pain • Stiffness • Numbness • Weakness • Feeling of coldness	Shastikapidna sweda, Kaya Seka/Pizhichil, Annalepana/Navaratheppu, Abhyanga, Kashayavasthi, thailavasthi, Shiropichu, Snehapana, ChoornaPindasweda, DhanyamlaDhara, DhanyamlaPindaSweda, PathraPindaSweda, Thailadhara, ThakraDhara, Sirolepam, Nasyam, Ksheeradharma, MamsaPindasweda	14-28 DAYS
11	Sandhigatavata (DEGENERATIVE JOINT)	• Joint pain • Restricted joint movements • Stiffness	Januvasti, Kashaya vasthi, Thaila Vasthi, Prushta Vasthi, Katee Vasthi, Greeva	14-28 Days

	DISORDERS, TENNIS ELBOW), VATHAKANDAKAM (CALCANEAL SPUR)	• Crepitus	Vasthi, Jaloukavacharana, Choorna Pindsweda, Pathra Pinda Sweda, Shashtika Pinda Sweda, Sthanika Annalepa, Sthanika Vasthi, Upanaha, Lepa, Pichu, Snehapana, Parisheka, Veshtana, Mamsakkizhi, Ksheeradhara, Pizhichil	
12	Twak Vikara (Skin Diseases), Kitibha, Ekakushta, Vicharchika, Gajacharma (Lichen Planus, Psoriasis, Eczema..etc)	• Discolouration • Itching • Scaling • Oozing • Peeling • Burning sensation • Numbness	Vamana, Virechana, Nehapana, Rakthamokshana- (Jaloukavacharana, prachana, siravedha/ siravyadha) , Parisheka, Takradhara, Lepa, KashayaDhara, KashayaVasthi, TailaVasthi, Kshalana, Abhyanga, NadeeSweda	8-28 Days
13	Visarpa (Cellulitis, Erisipelus, Necrotising Cellulitis, Impetigo, Pemphigus vulgaris...etc), Grandhi, Arbuda(Benign & Malignant growths, Hodgkins	• Rashes • Blisters • Itching • Oozing • Burning sensation • Pain • Growths	Rakthamokshana, Jalukavacharana, Vamana, virechana, Kashaya Vasthi, Thaila Vasthi, Kashaya Dhara, Thakra Dhara, Abhyanga, lepa,	14- 28 Days

	disease..etc)),			
14	Arsha, Bhagandara, Parikarthika (Haemorrhoid, Fistula in ano, Fissure in ano..etc), NADEE VRANA (Pilonoidal sinus..etc)	• Constipation • Pain in anal region • Itching around anus • Burning sensation • Prolapse of mass from anus • Bleeding from anus • Pus from anus	Virechana, Avagaha, Upanaha, Lepa, Taila Vasthi- Mathravasthi, Kshalana, Thakrapana, Varthi, Ksharakarma,Ksharasoothra, Agnikarma Varieties Like Classical/ Infra Red Coagulation/ High Frequency Coagulation/ Radio Frequency coagulation ..etc, suction aided ring ligation procedure, Kshara Pathana, Taila Daha, Dhoopana, Goshbanabandha,	1-7 DAYS
15	Moothraghata, Moothrakruchra, Asmari (Renal dysfunction, Renal/Urinary Calculi, Urinary Dysfunction/ Obstruction...etc)	• Painful micturition or Pain in scrotum and penis with decreased urine output • Presence of blood with urine may be present	Snehapana, Nadee Sweda, Virechana, Avagaha, Kashaya vasthi, Taila Vasthi, Abhyanga,Uthara Vasthi, Lepa, Dhara-Sthanika	14-28 DAYS
16	Kashtarthava, Kruchrarthava, Artava Dushti, Yonee Roga , Rakthapradara (Amenorrhoea, Dysmenorrhoea,	• Severe pain with menstruation • Very less menstrual flow or no Menstruation • Irregular menstruation • Abnormal menstruation	Vamana, virechana, Kashaya vasthi, Thaila Vasthi, Nasya, snehapana, Uthara vasthi, Yoni Prakshalana, Udwarthana, Dhanyamla Dhara, Dhanyamla Pinda	14- 28 DAYS

	PCOD/ PCOS, D.U.B..etc)		Sweda, Avagaha , Yonidhavana, Yoni Pichu, Yoni Poorana, Yoni Dhoopana, Abhyanga, Ksharakarma, Nadeesweda	
17	Mamsagata Vikara, Mamsakshaya (Muscular Dystrophy...etc)	- Weakness of muscles - Wastage of muscles	Choorna Pindasweda, Pathra Pinda Sweda, Swedana, Shashtika Pinda Sweda, mamsa Pinda Sweda, Annalepa, Vesthanam, Pizhichil, Udwarthana, Upanaha, Matra Vasthi, Kashaya Vasthi	14-28 DAYS
18	Dristidosha- Asama Drishti, Nethraja Rakthapitham, Jeerna Nethrabhishyand am, Sushkakshipaka m, Adhimandam,Na kulandhyam, Puyalasa, Chathurtha Patalagatha Vikara (Refractive errors, Chronic Allergic & Inflammatory diseases, Chronic	- Diminished vision - Photophobia - Dyplopia - Watering of eyes - Pus formation in eyes - Itching of eyes - Strain & pain in eyes - Restricted field of vision - Headache	Tharpana, aschothana, Nasya, Eye exercises, Anjana, Putapaka, Shashtika Pindasweda- Sthanika, Kashaya Vasthi, Thaila Vasthi, Jaloukavacharana, Nethra Dhara/ Akshi Seka, Sirovasthi, Taila Dhara, Thakra Dhara, Pichu, Dhoomapana, Snehapana, Virechana,Pindi, Vitalaka, Kshalana, Sirolepa,Sirolepam, Thalam,Eshana, Bhedana	7- 28 DAYS

	Conjunctivitis, Dry Eye Syndrom, Retinitis Pigmentosa, Night Blindness, Dacrocystitis, A.R.M.D, Retinopathy, Blepharospasm.. etc)			
19	Sirasoola, Sooryavartham, Ardhavabhedaka m(Migraine, Headache...etc)	• Severe headache • Heaviness of head • Nausea • Photophobia	Snehapana, Nadee Sweda, Nasya, Vamana, Virechana, Dhoomapana, Kabala, Gandoosha, Thalam, Moordha Taila, Pichu- Siropichu, Sirovasthi, Tailadhara, Thakradhara	7- 21 DAYS
20	Khanja ,Pangu- Abhigathaja, AbhighatajaVikar a(Restricted movements due to fracture/ dislocation..etc)	• Dislocation of bone/ cartilage/ vertebrae • Pain • Swelling • Restricted or painful movements of associated area/ nearby muscles	Veshtanam, Lepam, Dhara- Sthanika, Kukkutanda Pinda Sweda, Jambeera Pindasweda, Shashtika Pinda Sweda, Annalepa, Choorna Pindasweda, Pathra Pindasweda, Pizhichil, Dhanyamla Dhara, Pichu, Abhyanga	14-21 DAYS

2. Unit Cost of Ayurvedic therapies/interventions in OPD/IPD -

Unit cost per therapy/intervention means cost of procedure including cost of medicines used in the procedure as under.

Therapy/Intervention		
No	Treatment Name	Unit Cost in Rupees
1	Abhyanga	1145
2	Abhyanga- Sthanika	570
3	Abhyanga + Sweda	1280

4	Avagaha	765
5	Anjana	340
6	Aanchana (Traction)	480
7	Annalepa/Njavaratheppu- Full body	1290
8	Annalepa/Njavaratheppu - Sthanikam	755
9	Aschothana	335
10	Agnikarma-Infra Red Coagulation (Package rate for full Course of treatment)	10,000
11	Agnikarma- High frequency Coagulation (Package rate for full course of treatment)	10,000
12	Agnikarma- Radio frequency Coagulation (Package rate for full course of treatment)	10,000
13	Achasnehapana/day	440
14	Bhedana (of eye)	565
15	BhagnaBandhana (Fracture Bandage with Reduction &Immobilisation)	885
16	ChoornaPindaSweda/Podikkizhi-Full Body	1210
17	ChoornaPindaSweda/Podikkizhi- Sthanika/Ekangam	715
18	DhanyaPindaswedam/Dhanyakkizhi/ Navadhanyakkizhi- Full body	1245
19	Dhara/Sirodhara-Thaila	1420
20	Dhanyamladhara-Sthanika/Local -KateeDharaetc	705
21	Dhoopana	480
22	Dhoomapana	460
23	DhanyamlaPindaSweda/ Dhanyamlakkizhi/Kaatikkizhi-Full Body	1240
24	Eshana	565
25	Greevavasthi	845
26	Gandoosha	390
27	Goshbanabandha	300
28	Jaloukavacharana	745
29	Jambeerapindasweda/ Narangakkizhi-Full Body	1190
30	Januvasthi	845
31	Kabala	390
32	Kateevasthi	845
33	Kashayavasthi (Niroohavasthi)-Different varieties	1030
34	KashayaDhara- Full Body	1045
35	KashayaDhara -Ekangam/ Local	635
36	KsheeraDhara(Medicated-different varieties) -full body	1155
37	KsheeraDhooma	735
38	Kshara karma (Package rate for full course of treatment)	10,000
39	Ksharasoothra-Low level fistula (Package rate for full course of treatment)	10,000
40	Ksharasoothra-Middle level fistula (Package rate for full course of treatment)	10,000
41	Ksharasoothra- High level fistula (Package rate for full course of treatment)	10,000
42	Kshalana	355
43	KsharaPathana(Package rate for full course of treatment)	10,000
44	Karnapoorana	350

45	Kuttanam	540
46	Lekhana	540
47	Lepa/Lepana-Local	390
48	Mathravasthi	350
49	MamsaPindaSweda/Mamsakkizhi-Full Body	1420
50	MamsaPindaSweda/Mamsakkizhi-Sthanikam/Ekangam	820
51	Mukhalepa	490
52	Moordhataila	315
53	Nadeesweda/Snigdhasweda - Full	580
54	Nadeesweda/Snigdhasweda - Ekangam/Local	450
55	Nethradhara/Akshiseka	595
56	Nasya	600
57	PathraPindaSweda/Ilakkizhi-Full	1220
58	PathraPindaSweda/Ilakkizhi-sthanika/Ekangam	720
59	Pizhichil/Kayaseka - Full Body	1995
60	Pizhichil - Sthanikam/Ekangam/Local	1105
61	Pichu	410
62	Prushtavasthi	845
63	Putapaka	850
64	Prachanna	590
65	Pindi	450
66	ShashtikapindaSweda/Navarakkizhi-full body	1320
67	ShashtikapindaSweda/ Navarakkizhi-Ekangam/Sthanikam	770
68	Sirovasthi	970
69	Snehapana/day	440
70	Sirolepa/Thalapothichil	1120
71	Siravyadha/Siravedha/Rakthamoksha	640
72	TailaVasthi	710
73	Thakradhara	1145
74	Thalam	410
75	Tharpana	735
76	Tailadaha (Package rate for full course of treatment)	10,000
77	Thakrapana	250
78	Utharavasthi	1100
79	Udwarthana	1095
80	Urovasthi	845
81	Upanaha/Upanahasweda	590
82	Vamana	745
83	Virechana	355
84	Valukasweda/Manalkkizhi- Full Body	1080
85	Vitalaka/Bitalaka	450
86	Yoniprakshalana	500
87	Yonidhavana	500
88	Yoni Pichu	460
89	Yoni Poorana	460
90	Yoni Dhoopana	335
91	Valukasweda/Manalkkizhi- Sthanikam	655
92	Ksheeradhara-Head	1095
93	Jambeerapindasweda/ Narangakkizhi-sthanika/Local	735
94	Dhanyapindasweda-Sthanika/Local	730

95	Dhanyamlapindasweda/ Katikkizhi-Sthanika	705
96	Veshtanam	330
97	Agnikarma (Classical with PanchalohaSalaka)	995

3. Determination of treatment expenditure for payment/reimbursement

For the purpose of settlement of Ayurvedic treatment expenditure under CGHS , following criteria shall be applied-

- a) Above-mentioned rates of therapies/interventions shall be benchmarks for calculating treatment expenditure.
- b) The above unit rates are inclusive of the cost implication of materials, medicines, accessories, equipment maintenance , manpower (medical, paramedical and nursing) and diet used in imparting therapies except room rent of the hospitalization.
- c) Pre and post procedure cost will be chargeable @ Rs 75 per day.
- d) Room rent , wherever applicable shall be chargeable as per the rates prescribed in the OM.

Revised CGHS Rates and Guidelines for reimbursement/ settlement of Unani treatment under CGHS.

1. List of diseases/disease conditions needing hospitalization of the patients, indicative therapies and likely duration of hospitalization-

S. No	Disease	Conditions requiring hospitalization	Indicated Therapies required as per the condition of patients	Likely duration of hospitalization
1	Shaqīqa (Migraine)	Recurrent episodic throbbing pain in one half of head	Therapy related Medication, Fasd, Ishāl , Natūl, Lakhlakhah and Zimad	7-28 days
2	Sar' (Epilepsy)	Recurrent spells of convulsions	Therapy related Medication, Qay', Fasd, Ishāl, Huqna, Hammām, Hijāma, Ghargharah, Nafookh and Nashooq	7-28 days
3	Fālij (Paralysis)	flaccidity/atony of organs	Therapy related Medication, Huqna, Dalk, Hijāma, Natūl, Ghargharah, Nafookh and Nashooq	7-28 days
4	Laqwa (Bell's palsy)	flaccidity of angle of mouth and/or dropping of lower eyelid	Therapy related Medication, Tadhīn, Facial exercise, Mazoogh, Ghargharah and Zimad	7-28 days
5	Ri'sha (Tremor)	involuntary movement of affected body part	Therapy related Medication, Hammām Hār, Takmīd Hār, Tamrīkh, Fasd, Dalk and Is'hal	7-28 days
6	Waram-i Asl al-Uzun (Mumps/ Parotitis)	Pain and swelling below the ears	Therapy related Medication, Fasd, Ishāl, Hijāma, Inkibāb, Takmīd	7-28 days
7	Waram-i Halaq (Pharyngitis)	Sore throat, dry cough, difficulty in swallowing	Therapy related Medication, Fasd, Irsal-I Alaq, Hijāma and Ghargharah	7-28 days
8	Waram-i Lawzatayn (Tonsillitis)	Sore throat, difficulty in swallowing, fever	Therapy related Medication, Fasd, Huqna, Ishāl, Hijāma,	7-28 days

			Gharghara	
9	Itihāb-i Tajāwīf-i Anf (Sinusitis)	Headache, post nasal drip	Therapy related Medication, Fasd, Takmīd, Tar'riq, Inkibāb,	7-28 days
10	Nazla Wabā'ī (Influenza)	Headache, bodyache, fever	Therapy related Medication, Dalk, Pashoya, Ishāl	7-28 days
11	Shahīqa (Pertussis/ Whooping Cough)	Severe episodes of cough	Therapy related Medication, Inkibāb	7-28 days
12	Itihāb al-Shu'ab (Bronchitis)	Productive cough, pain in chest, fever	Therapy related Medication, Inkibāb, Gharghara, Qai, Dalk and Zimad	7-28 days
13	Zīq al-Nafas (Bronchial Asthma)	Recurrent attacks of cough, dyspnoea, pain	Therapy related Medication, Fasd, Hijāma, Bukhoor and Qai	7-28 days
14	Zāt al-Riy'a (Pneumonia)	Continuous fever, cough, dyspnoea, pain in chest	Therapy related Medication, Fasd, Ishāl, Hijāma, Zimad and Takmeed	7-28 days
15	Ru'af (Epistaxis)	Recurrent episodes of bleeding from nose	Therapy related Medication, Hijāma, Fasd,	7-28 days
16	Salābat-i Kabid (Cirrhotic Liver)	Heaviness in abdomen and loss of appetite	Therapy related Medication, Fasd and Zimad	7-28 days
17	Zaght al-Dam Qawī Lāzimī (Essential Hypertension)	Headache, heaviness in head, clouding of conscious, epistaxis	Therapy related Medication, Fasd, Dalk, Hijāma, Hammām, Riyāzat	7-28 days
18	Zayābītus Sukkari Qism Sānī (Diabetes Mellitus Type II)	Excessive thirst, urination	Therapy related Medication, Takmīd, Ābzan, Dalk, Qay', Tar'riq, Riyāzat	7-28 days
19	Waram-i Mi'da (Gastritis)	Burning pain in chest, decreased appetite, distended stomach,	Therapy related Medication, Fasd, Riyāzat, Dalk, Inkibāb, Hammām and Zimad	7-28 days
20	Qarḥa-i Huzūmī (Peptic Ulcer)	Severe pain in stomach, nausea, vomiting	Therapy related Medication, Huqna, Zimad	7-28 days
21	Zahīr (Dysentery)	repeated urge for defecation, heaviness in abdomen, pain, abdominal distention, tenesmus	Therapy related Medication, Takmīd, Huqna, Ābzan	7-28 days

22	Ishāl (Diarrhoea)	repeated defecation, indigestion, flatulence and gurgling	Therapy related Medication, Hammām, Dalk and Huqna	7-28 days
23	Bawāsīr (Piles/ Hemorrhoids)	Mass, pain and itching in the anus	Therapy related Medication, Fasd, Ābzan and Irsal-e- Alaq	7-28 days
24	Sū' al-Qinya (Anaemia)	Pallor, swelling	Therapy related Medication, Dalk, Hammām, Riyāzat	7-28 days
25	Tashaḥḥum al- Kabid (Fatty Liver)	Anorexia, dyspepsia, pain in abdomen	Therapy related Medication, Takmīd, Zimad	7-28 days
26	Waram-i Kabid (Hepatitis)	Loss of appetite, pain abdomen, nausea, vomiting	Therapy related Medication, Fasd, Riyāzat, Hammām and Zimad	7-28 days
27	Istisqa'Ziqqi (Ascites)	Abdominal distention, dyspepsia,	Therapy related Medication, Idrār, Ishāl, Tar'riq	7-28 days
28	Istisqa'Lehmi (Anasarca)	Generalized pitting edema	Therapy related Medication, Tar'riq, Idrār, Hammām, Riyāzat, Hijāma,	7-28 days
29	Yaraqān (Jaundice)	Yellow discolouration of skin, eyes and urine	Therapy related Medication, rest, Is'hal, Qai, Fasd and Huqna	7-28 days
30	Waram-i Kulya (Glomeruloneph- ritis / Pyelonephritis)	Fever, difficulty in urination	Therapy related Medication, Fasd, Takmīd, Qay', Huqna, Ābzan, Natūl	7-28 days
31	Hasāt-i Bawl (Urolithiasis)	heaviness in lower back, excruciating pain	Therapy related Medication, Riyāzat, Hammām, Ābzan, Qay', Fasd, Takmīd	7-28 days
32	Zu'f-i Masāna (Overactive bladder)	Dribbling of urine	Therapy related Medication, Takmīd	7-28 days
33	Waram-i Rahim (Metritis)	fever, nausea, shooting pain in lower back and pubic region	Therapy related Medication, Fasd, Qay', Ishāl, Takmīd, Ābzan	7-28 days
34	Kasrat-I Isqat (Habitual Abortion)	Recurrent abortions	Therapy related Medication, Riyāzat, Qai, Huqna, Hammām, Ābzan, Zimad and Hijamah	7-28 days
35	Sayalān-i Rahim	excessive discharge from the uterus	Therapy related Medication, Fasd,	7-28 days

	(Leucorrhoea)		Ishāl, Dalk , Ābzan and Huqna	
36	Ihtibās-i Tams (Amenorrhoea)	cessation of menses	Therapy related Medication, Fasd, Hammām, Hijāma, Idrar and Aabzan	7-28 days
37	Kasrat-i Tams (Polymenorrhoea)	Excessive loss of blood, pallor, weakness,	Therapy related Medication, Hijāma, Tar'riq, Idrār, Ishāl, Fasd, and Aabzan	7-28 days
38	Zu'f-i Bah (Sexual Debility)	Decrease in sexual competency	Therapy related Medication, Dalk	7-28 days
39	Waja' al-Mafāsīl (Arthritis)	pain, swelling, stiffness and restricted movement of affected joint	Therapy related Medication, Fasd, Qay', Idrār, Hijāma, Huqna, Natūl, Ābzan, Takmīd, Dalk, Riyazat, Irsale-e-Alaq, Hammam and Ta'areeq	7-28 days
40	Irq al-Nasā' (Sciatica)	Pain in hips and leg	Therapy related Medication, Qay', Kayy, Fasd, Hammām, Huqna, Ābzan and Hijamah	7-28 days
41	Niqris (Gout)	severe pain in great toe or ankle joint	Therapy related Medication, Fasd, Riyāzat , Zimad, Tila, Qai, Dalk and Nutool	7-28 days
42	Sharā (Urticaria)	abrupt appearance of reddish itchy rashes	Therapy related Medication, Fasd, Hammām and Hijamah	7-28 days
43	Jarab (Scabies)	rashes between the fingers, wrist, elbow, groin, etc	Therapy related Medication, Hammām, Fasd, Ishāl	7-28 days
44	Nār Fārsī (Eczema)	Red coloured lines and eruptions	Therapy related Medication, Fasd, Ishāl, Hijāma, Zimad and Irsal-e-Alaq	7-28 days
45	Dā' al-Ṣadaf (Psoriasis)	Thick rough patches on skin with silvery scales	Therapy related Medication, Hammām,	7-28 days
46	Baraṣ (Vitiligo)	glossy white patches on skin	Therapy related Medication, Dalk-i Khashin, Qai, Tila, and Hammam	7-28 days
47	Dā' al-Fīl (Lymphatic)	Increase in the circumference of leg	Therapy related Medication, Fasd,	7-28 days

	Filariasis)	and feet	Ishāl, Hijāma, Qay' and Zimad	
48	Humḡā Ajāmiyya (Malaria)	High fever with chills and rigors	Therapy related Medication, Huqna, Qay', Fasd, Hammām	7-28 days
49	Humḡā Mewi (Enteric fever)	Continuous fever, loss of appetite, headache	Therapy related Medication, Takmīd,	7-28 days
50	'Izm-i Ghudda-i Mazī Sāda	Urinary hesitance, dribbling	Therapy related Medication, Fasd	7-28 days

2. Unit Cost of Unani therapies/interventions in OPD/IPD :-

Unit cost per therapy/ intervention means cost of procedure including cost of medicines used in the procedure as under:

Therapy/Intervention		
S. No.	Treatment Name	Unit cost in Rupees
1.	Therapy related Medication, Fasd, Ishāl , Natūl, Lakhlakhah and Zimad	1,000
2.	Therapy related Medication Qay', Fasd, Ishāl, Huqna, Hammām, Hijāma, Ghargharah, Nafookh and Nashooq	2,850
3.	Therapy related Medication Huqna, Dalk, Hijāma, Natūl, Ghargharah, Nafookh and Nashooq	2,450
4.	Therapy related Medication, Tadhīn, Facial exercise, Mazoogh, Ghargharah and Zimad	150
5.	Therapy related Medication, Hammām Hār, Takmīd Hār, Tamrīkh, Fasd, Dalk and Is'hal	1,750
6.	Therapy related Medication, Fasd, Ishāl, Hijāma, Inkibāb, Takmīd	2,400
7.	Therapy related Medication, Fasd, Irsal-I Alaq, Hijāma and Ghargharah	2,750
8.	Therapy related Medication, Fasd, Huqna, Ishāl, Hijāma, Gharghara	2,200
9.	Therapy related Medication, Fasd, Takmīd, Tar'riq, Inkibāb,	1,650
10.	Therapy related Medication, Dalk, Pashoya, Ishāl	850
11.	Therapy related Medication, Inkibāb	150
12.	Therapy related Medication, Inkibāb, Gharghara, Qai, Dalk and Zimad	150
13.	Therapy related Medication, Fasd, Hijāma, Bukhoor and Qai	2,000
14.	Therapy related Medication, Fasd, Ishāl, Hijāma, Zimad and Takmeed	2,000
15.	Therapy related Medication, Hijāma, Fasd,	2,000
16.	Therapy related Medication, Fasd and Zimad	750
17.	Therapy related Medication, Fasd, Dalk, Hijāma,	3,750

	Hammām, Riyāzat	
18.	Therapy related Medication, Takmīd, Ābzan, Dalk, Qay', Tar'riq, Riyāzat	2,300
19.	Therapy related Medication, Fasd, Riyāzat, Dalk, Inkibāb, Hammām and Zimad	2,150
20.	Therapy related Medication, Huqna, Zimad	450
21.	Therapy related Medication, Takmīd, Huqna, Ābzan	650
22.	Therapy related Medication, Hammām, Dalk and Huqna	1,250
23.	Therapy related Medication, Fasd, Ābzan and Irsal-e-Alaq	900
24.	Therapy related Medication, Dalk, Hammām, Riyāzat	1,750
25.	Therapy related Medication, Takmīd, Zimad	500
26.	Therapy related Medication, Fasd, Riyāzat, Hammām and Zimad	1,750
27.	Therapy related Medication, Idrār, Ishāl, Tar'riq	50
28.	Therapy related Medication, Tar'riq, Idrār, Hammām, Riyāzat, Hijāma,	2,250
29.	Therapy related Medication, rest, Is'hal, Qai, Fasd and Huqna	
30.	Therapy related Medication, Fasd, Takmīd, Qay', Huqna, Ābzan, Natūl	1,750
31.	Therapy related Medication, Riyāzat, Hammām, Ābzan, Qay', Fasd, Takmīd	1,800
32.	Therapy related Medication, Takmīd	250
33.	Therapy related Medication, Fasd, Qay', Ishāl, Takmīd, Ābzan	1,300
34.	Therapy related Medication, Riyāzat, Qai, Huqna, Hammam, Aabzan, Zimad and Hijamah	500
35.	Therapy related Medication, Fasd, Ishāl, Dalk , Ābzan and Huqna	1,650
36.	Therapy related Medication, Fasd, Hammām, Hijāma, Idrar and Aabzan	2,500
37.	Therapy related Medication, Hijāma, Tar'riq, Idrār, Ishāl, Fasd, and Aabzan	2,500
38.	Therapy related Medication, Dalk	750
39.	Therapy related Medication, Fasd, Qay', Idrār, Hijāma, Huqna, Natūl, Ābzan, Takmīd, Dalk, Riyazat, Irsale-e-Alaq, Hammam and Ta'areeq	3,000
40.	Therapy related Medication, Qay', Kayy, Fasd, Hammām, Huqna, Ābzan and Hijamah	3,000
41.	Therapy related Medication, Fasd, Riyāzat , Zimad, Tila, Qai, Dalk and Nutool	1,250
42.	Therapy related Medication, Fasd, Hammām and Hijamah	1,250
43.	Therapy related Medication, Hammām, Fasd, Ishāl	1,250
44.	Therapy related Medication, Fasd, Ishāl, Hijāma, Zimad and Irsal-e-Alaq	2000

45.	Therapy related Medication, Hammām,	500
46.	Therapy related Medication, Dalk-i Khashin, Qai, Tila, and Hammam	400
47.	Therapy related Medication, Fasd, Ishāl, Hijāma, Qay' and Zimad	2,150
48.	Therapy related Medication, Huqna, Qay', Fasd, Hammām	1,600
49.	Therapy related Medication, Takmīd,	250
50.	Therapy related Medication, Fasd	1500
51.	Dalk (Massage) – Whole Body	750
52.	Dalk (Massage) – Half Body	400
53.	Dalk (Massage) – Single Limb	150
54.	Dalk (Massage) – Single Joint	100
55.	Dalk-i Khashin (Dry massage)	400
56.	Hammām (Turkish Bath)	500
57.	Inkibāb (Steam Bath)	150
58.	Hammām Mu'arriq (Sauna Bath)	500
59.	Hip Bath	200
60.	Spinal Bath	250
61.	Ābzan (Sitz Bath)	150
62.	Dastshoya (Hand Bath)	100
63.	Pāshoya (Foot bath)	100
64.	Qay' (Emesis)	150
65.	Huqna (Enema)	200
66.	Natūl (Irrigation)	250
67.	Irsal-i Alaq (Leeching)	750
68.	Hijāma bila shart (Dry Cupping)	500
69.	Hijāma bi'l Shart (Wet Cupping)	1250
70.	Faṣd (Venesection)	750
71.	Takmīd (Fomentation)	250
72.	Zimād/ Tamrīkh (Applying Paste)	250
73.	Riyāzat (Exercise)	500
74.	Kayy (Cauterization)	1250
75.	Ultrasound Therapy	250
76.	Interferential Therapy	250
77.	Nerve Stimulation	200
78.	Short Wave Diathermy	200
79.	Long Wave Diathermy	250
80.	Intermittent Traction	250
81.	Paraffin Wax Bath	250
82.	Chest Physiotherapy	250
83.	Exercise Therapy	200
84.	Specialized Gait Therapy	150
85.	Transcutaneous Electrical Nerve Stimulation (TENS)	250
86.	Hydrocollator Moist Heat Therapy	150

Note: Any minor / local Unani procedure/ therapy not included in the above list may be charged upto Rs. 100/- per sitting for upto 28 days.

3. Determination of treatment expenditure for payment/reimbursement

For the purpose of settlement of Unani treatment expenditure under CGHS , following criteria shall be applied-

- e) Above-mentioned rates of therapies/interventions shall be benchmarks for calculating treatment expenditure.
- f) The above unit rates are inclusive of the cost implication of materials, medicines, accessories, equipment maintenance ,manpower (medical, paramedical and nursing) and diet used in imparting therapies except room rent of the hospitalization.
- g) Pre and post procedure cost will be chargeable @ Rs 75 per day.
- h) Room rent , wherever applicable shall be chargeable as per the rates prescribed in the OM.

Revised CGHS Rates and Guidelines for reimbursement/ settlement of Siddha treatment expenditure claims under CGHS.

1. List of diseases/disease conditions needing hospitalization of the patients, indicative therapies and likely duration of hospitalization-

Sl. No	Disease	Condition needing hospitalization	Indicated therapies required as per the condition of patient	Likely duration of hospitalization
1	2	3	4	5
1.	Iraippu, Swasa Kasam, Kaba noigal etc., (Restrictive Obstructive Pulmonary Diseases, Bronchial Asthma and other respiratory disorders)	• Difficulty in Breathing • Cough • Fever • Head ache	Ennai Kuzhiyal Kalichal / Vaanthi / Kutram thannilai paduthal Thokkanam Nasiyam Nasigaparanam Ottradam Pasai Pugai Poochu Ennai Poochu Ennai Kattu Patru Pottanam Varthi – Thiri Vedhu Peechu Suttigai Asanam Pranayamam Varmam application	3- 28 Days
2	Sagana Vaatham (Cervical Spondylosis, Cervical Spondylitis,	• Persisting or radiating pain in cervical region • Restricted neck	Ennai Kuzhiyal Kalichal / Vaanthi / Kutram thannilai	7- 28 Days

	Ankylosing Spondylitis of Cervical Spine, Cervical Disc Prolapse)	movements • Tenderness • Numbness • Vertigo	paduthal Thokkanam Ennai Kizhi Ennai Kattu Ennai Poochu Nasiyam Podi Kizhi Illai Kizhi Manar Kizhi Dhaniya Kizhi Poochu Patru Pottanam Pasai Peechu Kattu Kali Suttigai Attai Vidal Ottradam Varthi / Thiri Vedhu Thuvalai Pranayamam Varmam application Asanam	
3	Thandaga Vaatham, Peraasana Narambu Thaabitham (Lumbar Spondylosis, Sciatica, Low Back Pain, I.V.D.P, Spondylolsthesis)	• Persistent or radiating back pain • Restricted movements of low back/ hip region • Tenderness • Burning sensation	Ennai Kuzhiyal Kalichal / Vaanthi / Kutram thannilai paduthal Thokkanam Ennai Kizhi Ennai Kattu Ennai Poochu Nasiyam	7- 28 Days

			Podi Kizhi Illai Kizhi Manar Kizhi Dhaniya Kizhi Poochu Patru Pottanam Pasai Peechu Kattu Kali Suttigai Attai Vidal Ottradam Varthi / Thiri Vedhu Thuvalai Pranayamam Varmam application Asanam	
4	Keel Vaayu Kumba Vaatham (Arthritis, Frozen Shoulder, Periarthritis, Tendinitis, Brachial Neuralgia)	• Radiating or local pain in shoulder region • Restricted shoulder movements • Tenderness • Numbness • Muscle wasting	Ennai Kuzhiyal Kalichal / Vaanthi / Kutram thannilai paduthal Thokkanam Ennai Kizhi Ennai Kattu Ennai Poochu Nasiyam Podi Kizhi Illai Kizhi Manar Kizhi Dhaniya Kizhi Poochu	7-28 Days

			Patru Pottanam Pasai Peechu Kattu Kali Suttigai Attai Vidal Ottradam Varthi / Thiri Vedhu Thuvalai Pranayamam Varmam application Asanam	
5	Pakka Vatham, Patcha Vaatham (Paralysis, Monoplegia Hemiplegia, hemiparesis)	• Weakness of one side of the body • Stiffness of muscles • Muscle weakness • Numbness • Pain • Tremor • Difficulty in speech	Ennai Kuzhiyal Kalichal / Vaanthi / Kutram thannilai paduthal Thokkanam Ennai Kizhi Ennai Kattu Ennai Poochu Nasiyam Podi Kizhi Illai Kizhi Manar Kizhi Dhaniya Kizhi Poochu Patru Pottanam Pasai Peechu Kattu	14 – 35 Days

			Kali Suttigai Attai Vidal Ottradam Varthi / Thiri Vedhu Thuvalai Pranayamam Varmam application Asanam	
6	Paanikkamba vaatham, Sirakamba vaatham	• Tremor • Stiffness of muscles • Muscle weakness • Difficulty in walking • Sluttering movements • Difficulty in speech	Ennai Kuzhiyal Kalichal / Vaanthi / Kutram thannilai paduthal Thokkanam Ennai Kizhi Ennai Kattu Ennai Poochu Nasiyam Podi Kizhi Illai Kizhi Manar Kizhi Dhaniya Kizhi Poochu Patru Pottanam Pasai Peechu Kattu Kali Suttigai Attai Vidal Ottradam	14- 28 Days

			Varthi / Thiri Vedhu Thuvalai Pranayamam Varmam application Asanam	
7	Arpudtha Vaatham, Muga Vaatham (Facial Paralysis)	• Weakness of facial muscles • Drooping of eye lids • Numbness of facial muscles • Salivation	Ennai Kuzhiyal Kalichal / Vaanthi / Kutram thannilai paduthal Thokkanam Ennai Kizhi Ennai Kattu Ennai Poochu Nasiyam Podi Kizhi Illai Kizhi Manar Kizhi Dhaniya Kizhi Poochu Patru Pottanam Pasai Peechu Kattu Kali Suttigai Attai Vidal Ottradam Varthi / Thiri Vedhu Thuvalai Pranayamam Varmam application	7- 21 Days

			Asanam	
8	Uthira Vaatha Suronitham, Paithaya Vatha Suronitham Vali Azhal Keelvayu (Gout Arthritis SLE, Rheumatoid Arthritis),	• Joint pain • Swelling • Tenderness • Deformity • Burning sensation • Discolouration of skin • Palpable cutaneous nodules • Migrating arthritis	Ennai Kuzhiyal Kalichal / Vaanthi / Kutram thannilai paduthal Thokkanam Ennai Kizhi Ennai Kattu Ennai Poochu Nasiyam Podi Kizhi Illai Kizhi Manar Kizhi Dhaniya Kizhi Poochu Patru Pottanam Pasai Peechu Kattu Kali Suttigai Attai Vidal Ottradam Varthi / Thiri Vedhu Thuvalai Pranayamam Varmam application Asanam	14-28 Days
9	Vali Keelvayu (Rheumatic Fever & Arthritis)	• Pain and swelling in the joint • Immobility • Fever	Ennai Kuzhiyal Kalichal / Vaanthi / Kutram thannilai	14-28 Days

		• low back Pain • Fleeting arthritis	paduthal Thokkanam Ennai Kizhi Ennai Kattu Ennai Poochu Nasiyam Podi Kizhi Illai Kizhi Manar Kizhi Dhaniya Kizhi Poochu Patru Pottanam Pasai Peechu Kattu Kali Suttigai Attai Vidal Ottradam Varthi / Thiri Vedhu Thuvalai Pranayamam Varmam application Asanam	
10	Sarvanga Vatham, Mutrudal vatham (Cerebral and Cerebellar atrophy, Neurological Disorders, Fibromyalgia)	• Generalized body pain • Stiffness • Numbness • Weakness • Feeling of coldness	Ennai Kuzhiyal Kalichal Vaanthi / Kutram thannilai paduthal Thokkanam Ennai Kizhi Ennai Kattu Ennai Poochu	14-28 Days

			Nasiyam Podi Kizhi Illai Kizhi Manar Kizhi Dhaniya Kizhi Poochu Patru Pottanam Pasai Peechu Kattu Kali Suttigai Attai Vidal Ottradam Varthi / Thiri Vedhu Thuvalai Pranayamam Varmam application Asanam	
11	Azhal Keelvayu (Degenerative Joint disorders Tennis Elbow, Kuthi Kaal Vaatham (Calcaneal Spur))	• Joint pain • Restricted joint movements • Stiffness • Crepitus • Difficulty in walking • Difficulty in squatting	Ennai Kuzhiyal Kalichal / Vaanthi / Kutram thannilai paduthal Thokkanam Ennai Kizhi Ennai Kattu Ennai Poochu Nasiyam Podi Kizhi Illai Kizhi Manar Kizhi Dhaniya Kizhi	14-28 Days

			Poochu Patru Pottanam Pasai Peechu Kattu Kali Suttigai Attai Vidal Ottradam Varthi / Thiri Vedhu Thuvalai Pranayamam Varmam application Asanam	
12	Thol Noikal, Kalanjaga Padai, Karappan, Pathinen Vagai Kuttam (18 Types Kuttam - Skin Diseases), (Lichen Planus, Psoriasis, Eczema)	• Discolouration of skin • Patches • Itching • Scaling • Oozing • Peeling • Burning sensation • Numbness • Rashes	Ennai Kuzhiyal Kalichal / Vaanthi / Kutram thannilai paduthal Dhaniya Kizhi Ennai Poochu Kaaram Kalimbu Kali Kattu Kuruthi Vaangal Kalikkam Neer Pugai Poochu Patru Pasai Patti Kattal	8-28 Days

			Seelai Podi Attai vidal Peechu Nasiyam Suttigai Varthi Vedhu Aruvai Asanam Pranayamam Varmam application	
13	Pun, Katti, Koppulam, Kiranthi, Pilavai (Cellulitis, Necrotising Cellulitis, Erysipelas, Impetigo, Pemphiguoos Vulgaris, Carbungle etc.,)	• Ulcer • Rashes • Blisters • Itching • Oozing • Burning sensation • Pain • Suppuration	Ennai Kuzhiyal Kalichal / Vaanthi / Kutram thannilai paduthal Dhaniya Kizhi Ennai Poochu Kaaram Kalimbu Kali Kattu Kuruthi Vaangal Kalikkam Neer Pugai Poochu Patru Pasai Patti Kattal Seelai Podi Attai vidal Peechu Nasiyam	7- 28 Days

			Suttigai Varthi Vedhu Aruvai Asanam Pranayamam Varmam application	
14	Moolam, Pouthiram, Asana Vaai Vedippu, Katti, Adithallal (Haemorrhoids, Fistula In Ano, Fissure In Ano, Perianal abscess, Rectal prolapse etc.,)	• Constipation • Pain in anal region • Itching around anus • Burning sensation • Prolapse of mass from anus • Bleeding from anus • Pus from anus	Ennai Kuzhiyal Kalichal Vaanthi / Kutram thannilai paduthal Kuruthi Vaangal Keeral Kaaram Kalikkam Kalimbu Kaara Nool Sikitchai Podi Patru Peechu Pasai Pugai Salaagai Attai Vidal Vedhu Varthi/Thiri Suttigai Seelai Aruvai Kali Asanam Pranayamam Varmam application	7- 14 Days
15	Vindhanu	• Fertility disorders (Male)	Ennai Kuzhiyal	14-48

	Kuraipaadu, Malattu Thanmai (Male Reproductive Disorders)	• Oligospermia • Asthinospermia • Teratozoospermia • Azoospermia • Erectile dysfunction • Spermatorrhoea	Kalichal / Vaanthi / Kutram thannilai paduthal Kalikkam Kali Kattu Pattru Pottanam Ottradam Attai vidal Dhaniya Kizhi Poochu Asanam Pranayamam Varmam application	Days
16	Karuppai Noikal, Soothaga Kattu, Soothaga Vali, Sinaippai Neer Katty, Athi Uthirapokku (Amenorrhoea, Dysmenorrhoea, Anovulatory, PCOD / PCOS, D.U.B, Menopausal Disorders)	• Irregular menstruation • Painful menstruation • Excessive menstruation • Excessive Vaginal discharge. • Uterine prolapse	Ennai Kuzhiyal Kalichal / Vaanthi / Kutram thannilai paduthal Kalikkam Kali Kattu Pattru Pottanam Ottradam Attai vidal Dhaniya Kizhi Poochu Asanam Pranayamam Varmam application	14- 48 Days
17	Thasai Vaatham (Muscular Dystrophy)	• Weakness of muscles • Muscle wasting • Muscular hypertrophy • Difficulty in	Ennai Kuzhiyal Kalichal / Vamanam / Aamum Neekal Ennai Poochu	14-48 Days

		movements	Ennai Kattu Pattru Poochu Pasai Kali Ottradam Pottanam Podithimirthal Varmam application	
18	Kan Noigal (Refractive Errors, Amblyopia, Chronic Allergic & Inflammatory Diseases, Chronic Conjunctivitis, Dry Eye Syndrom, Retinitis Pigmentosa, Night Blindness, Dacrocystitis, A.R.M.D, Retinopathy-Diabetic/ Hypertensive)	• Diminished vision • Photophobia • Dyplopia • Watering of eyes • Pus formation in eyes • Itching of eyes • Strain & pain in eyes • Restricted field of vision • Headache • Conjunctivitis • Style	Ennai Kuzhiyal Kalichal / Vaanthi / Kutram thannilai paduthal Kattu Mai Kalikkam Poochu Neer Salaagai Peechu Ottradam Thokkanam Pranayamam Asanam Varma Thadaval Vedhu	7- 28 Days
19	Soorya vartham, Chandra vartham, Thalaivali (Migraine, idiopathic Headache)	• Severe headache • Heaviness of head • Nausea • Photophobia	Ennai Kuzhiyal Kalichal / Vaanthi / Kutram thannilai paduthal Kalikkam Nasiyam Kattu Ottradam Pottanam	7- 21 Days

			Nasigaparanam Pasai Kali Vedhu Poochu Ennai Poochu Pattru Thiri Pugai Sira Thokkanam Suttigai Attaividal Varma Thadavul Pranyamam Asanam Varmam application	
20	Enbu Murivu / Mootu nazhuval / (Fracture/ Dislocation / Ligament injuries)	• Difficulty in movements / walking • Fracture • Dislocation of bone/ cartilage/ vertebrae • Pain • Swelling • Restricted or painful movements of associated area/ nearby muscles	Ennai Kuzhiyal Kalichal / Vaanthi / Kutram thannilai paduthal Kattu Kombu Kattal Kalimbu Poochu Poochu Ottradam Pottanam Pasai Murichal Thokkanam Asanam Pranayamam Varmam application	7-21 Days
21	Vayiru / Kudal Noigal / Gunmam,	• Abdominal pain and discomfort • Flatulence	Ennai Kuzhiyal Kalichal / Vaanthi /	14- 28 Days

	Soolai, Peruvayiru, Vikkal, Kazhichal (Gastro intestinal disorders)	• Constipation / Diarrhoea • Nausea / Vomiting • Digestive disorders • Fever	Kutram thannilai paduthal Poochu Ottradam Pottanam Patru Peechu Attai vidal Thokkanam Asanam Pranayamam Varmam application	
22	Kalleral / Manneeral / Kanaya Noigal (Liver, Spleen & Pancreatic diseases)	• Nausea / Vomiting • Flatulence • Constipation / Diarrhoea • Indigestion • Abdominal pain and discomfort • Dyspnea • Anaemia • Jaundice • Liver and Speen enlargement. • Madhumegam	Ennai Kuzhiyal Kalichal / Vamanam / Kutram thannilai paduthal Poochu Ottradam Pottanam Pasai Thokkanam Kali Patru Peechu Attail vidal Suttigai Asanam Pranayamam Varmam application	14- 28 Days
23	Siruneeraga Noigal (Kidney disorders, Chronic renal failure, Renal calculi, UTI etc)	• Dysruia • Anuria • Oliguria • Urinary obstruction • Renal colic • Haematuria • Pyuria	Ennai Kuzhiyal Kalichal / Vamanam / Kutram thannilai paduthal Poochu	14- 28 Days

			Ottradam Pottanam Pasai Thokkanam Kali Patru Peechu Attail Vidal Suttigai Seelai Asanam Pranayamam Varmam application	
24	Thottra noigal (Non communicable disorders such as Diabetes, Hypertension, Cardivascular disorders, Obesity, Cancer etc.,)	• Hyperglycaemic • Hypercholesterolemia • Diabetic ulcer • Giddiness • Neruopathy • Weakness • Nephropathy • Weight gain / loss • Depression • Pain	Ennai Kuzhiyal Kalichal / Vaanthi / Kutram thannilai paduthal Kalikkam Nasiyam Kattu Ottradam Pottanam Nasigaparanam Pasai Kali Vedhu Poochu Ennai Poochu Pattru Thiri Pugai Sira Thokkanam Suttigai Attaividal	14- 48 Days

			Varma Thadavul Pranyamam Asanam Varmam application	
25	Mudhiyor noigal (Geriatrics / Nadukku vatham, Marathi noigal , Alzemier's disease, Sleep disorders, Depression)	• Generalised debility • Degenerative disorders • Osteopenia & Osteoporosis • Generalised body pain • Neuropathy • Tremour • Memory loss • Sleep disorders	Ennai Kuzhiyal Kalichal / Vaanthi / Kutram thannilai paduthal Kalikkam Nasiyam Kattu Ottradam Pottanam Nasigaparanam Pasai Kali Vedhu Poochu Ennai Poochu Pattru Thiri Pugai Sira Thokkanam Suttigai Attaividal Varma Thadavul Pranyamam Asanam Varmam application	14- 48 Days
26	Kuzhanthai Noigal (Paediatric diseases such as Sirakamba vatham, Thasai vatham, Valippu,	• Cerebral palsy • Infantile paralysis • Myopathy • Mental retardation • Nutritional disorders • Seizures	Ennai Kuzhiyal Kalichal / Vamanam / Aamum Neekal Ennai Poochu Ennai Kattu	14- 48 Days

	Autism)		Pattru Poochu Pasai Kali Ottradam Pottanam Podithimirthal Varmam application	
27	Mana noigal / Narambu Noigal) (Psychiatric disorders / Depression / Valippu, Sleep disorders, Nadukku vatham etc)	• Mood disorders • Sleep disorders • Tremour • Difficulty in movements • Psychiatric symptoms	Ennai Kuzhiyal Kalichal / Vaanthi / Kutram thannilai paduthal Kalikkam Nasiyam Kattu Ottradam Pottanam Nasigaparanam Pasai Kali Vedhu Poochu Ennai Poochu Pattru Thiri Pugai Sira Thokkanam Suttigai Attaival Varma Thadavul Pranyamam Asanam Varmam application	14- 48 Days

3. 2. Unit Cost of Siddha therapies/interventions in OPD/IPD -

Unit cost per therapy/intervention means cost of procedure including cost of medicines used in the procedure as under

Therapy / Intervention		
No.	Treatment Name	Unit Cost in Rs
1	Aruvai	Rs.500/-
2	Asanam	Rs.500/-
3	Attai Vidal - (Leech Therapy)	Rs.350/-
4	Dhaniya Kizhi (Complete)	Rs.700/-
5	Dhaniya Kizhi (local)	Rs.350/-
6	Ennai Kattu (Medicated oil bandage for bone and joint Disorder, Muscle weakness)	Rs.200/-
7	Ennai Kizhi.(Complete)	Rs.700/-
8	Ennai Kizhi.(Local)	Rs.350/-
9	Ennai KuliyaI	Rs.500/-
10	Kaara Uppu (Local)	Rs.100/-
11	Kali	Rs.350/-
12	Kalikkam	Rs.150/-
13	Kalimbu,	Rs.350/-
14	Karanool application in Fistula (Initial) under L. A	Rs.1100/-
15	Karanool application in Fistula (Follow-up)	Rs.450/-
16	Karanool application in Piles / other conditions	Rs.450/-
17	Keeral	Rs.500/-
18	Kuruthi vaangal - Blood Letting (Cupping)	Rs.350/-
19	Kuruthi vaangal - Blood Letting (I&D and Dressing)	Rs.450/-
20	Mai	Rs.150/-
21	Manal Kizhi	Rs.350/-
22	Murichal & Kombu Kattal	Rs.500/-

23	Nasigaparanam	Rs..200/-
24	Nasiyam	Rs.200/-
25	Neer	Rs.200/-
26	Ottradam (fomentation)	Rs.550/-
27	Pattikattal	Rs.200/-
28	Pasai	Rs.350/-
29	Peetchu (Rectal oil Douche) (Enema)	Rs.200/-
30	Peetchu (Vaginal Douche)	Rs.200/-
31	Podi Kizhi.(Complete)	Rs.700/-
32	Podi Kizhi.(Local)	Rs.350/-
33	Podi Thimirthal	Rs.700/-
34	Poochu (Ennai application)	Rs.700/-
35	Poochu (Ennai application – local)	Rs.300/-
36	Pottanam (Bundle) /	Rs.550/-
37	Pranayamam	Rs.350/-
38	Pugai application in Piles and Fistula	Rs.200/-
39	Salaagai	Rs.350/-
40	Seelai	Rs.350/-
41	Sira Thokkanam with Medicated Ennai	Rs.550/-
42	Suttigai - Cauterization	Rs.150/-
43	Thokkanam (Complete) (Massage)	Rs.1000/-
44	Thokkanam (Local) (Massage)	Rs.500/-
45	Thuvalai	Rs.500/-
46	Vamanam (Herbal Kudinner or Tablets)	Rs.400/-
47	Varma Application	Rs.350/-
48	Varthi	Rs.150/-
49	Vedhu	Rs..200/-

Note: Any minor / local Siddha procedure/ therapy not included in the above list may be charged upto Rs. 100/- per sitting for upto 28 days.

3. Determination of treatment expenditure for payment/reimbursement

For the purpose of settlement of Siddha treatment expenditure under CGHS , following criteria shall be applied-

- i) Above-mentioned rates of therapies/interventions shall be benchmarks for calculating treatment expenditure.
- j) The above unit rates are inclusive of the cost implication of materials, medicines, accessories, equipment maintenance , manpower (medical, paramedical and nursing) and diet used in imparting therapies except room rent of the hospitalization.
- k) Pre and post procedure cost will be chargeable @ Rs 75 per day.
- l) Room rent , wherever applicable shall be chargeable as per the rates prescribed in the OM.

Revised CGHS Rates and Guidelines for reimbursement/ settlement of Siddha treatment expenditure claims under CGHS.

1. List of diseases/disease conditions needing hospitalization of the patients, indicative therapies and likely duration of hospitalization-

YOGA

S. No.	Disease	Therapies	Charges per day	Minimum duration of treatment	Repetition
1.	Musculo-skeletal disorders like Arthritis, Cervical or Lumbar Spondylitis, Backache etc.	Yogic SukshmaVyayaam, Yogasana, Pranayama, Bandha&Mula, Dhyana/Yoganidra.	Rs. 500/- to 1000/-	4 weeks	At least 2 weeks after the first course of treatment, if needed
2.	Cardiovascular disorders	Ahara, Yogic SukshmaVyayaam, Yogasana, Pranayama, Mantra Japa, Yoganidra	Rs. 500/- to 1000/-	2 weeks	At least one week after the first course of treatment, if needed
3.	Cancer rehabilitation	Ahara, Shat Karma, Yogasana, Pranayama, Mantra Japa, Dhyana, Yoganidra	Rs. 500/- to 1000/-	3-4 weeks	At least 10 days to 2 weeks after the first course of treatment, if needed
4.	Psychiatric conditions, Depression, Anxiety, Insomnia etc.	Shat Karma, Yogic SukshmaVyayaam, Suryanamaskar, Yogasana, Pranayama, Bandha & Mula, Mantra Japa, Dhyana.	Rs. 500/- to 1000/-	3-4 weeks	At least 10 days to 2 weeks after the first course of treatment, if needed
5.	Metabolic disorder, Diabetes, Obesity, etc.	Ahara, Shat Karma, Suryanamaskar, Yogasana, Pranayama, Mantra Japa, Dhyana.	Rs. 500/- to 1000/-	6 weeks	At least 3 weeks after the first course of treatment, if needed
6.	Psychosomatic Disorders, Irritable Bowel Syndrome (IBS), Constipation,	Ahara, Shat Karma, Yogasana, Pranayama, Mantra Japa, Yoganidra	Rs. 500/- to 1000/-	3 weeks	At least 2 weeks after the first course of treatment, if

	Acidity, etc.				needed
7.	Asthma, Chronic respiratory disorder	Ahara, Shat Karma, Yogic Sukshma Vyayaam, Yogasana, Pranayama, Bandha & Mula, Mantra Japa, Dhayana	Rs. 500/- to 1000/-	4 weeks	At least 2 weeks after the first course of treatment, if needed
8.	Sinusitis, Migraine, etc.	Ahara, Shat Karma, Yogasana, Pranayama, Mantra Japa, Yoganidra	Rs. 500/- to 1000/-	3 weeks	At least 2 weeks after the first course of treatment, if needed

NATUROPATHY

S. No.	Disease	Therapies	Rate per day	Minimum duration of treatment	Repetition
01	Diabetes mellitus	Full body / local massage, steam bath, Hip bath, Alternate Hip bath, Mud bath/ mud pack, Underwater massage, Packs, Naturopathy diet	Rs. 500/- to 1000/-	15 days	After 6 months
02	Obesity	Fasting, Full body/local Dry massage, steam bath, Hip bath, Alternate Hip bath, Mud bath/ mud pack, Full wet sheet pack, Underwater massage, Naturopathy diet	Rs. 500/- to 1000/-	21 days	After 6 months
03	Metabolic disorders	Fasting, Full body/local Dry massage, steam bath, Hip bath, Alternate Hip bath, Mud bath/ mud pack, Full wet sheet pack, Full Immersion bath, Underwater massage, Naturopathy diet	Rs. 500/- to 1000/-	15 days	After 6 months
04	Hypertension and Cardio-vascular diseases	Full body / local massage, steam bath, Spinal bath, Arm & Foot bath, Mud bath/ mud pack, Full wet sheet pack, local packs, Naturopathy diet	Rs. 500/- to 1000/-	15 days	After 6 months
05	Bronchial asthma/ Chronic bronchitis	Full body / local massage, steam bath, Spinal bath, Arm & Foot bath, Mud bath/ mud pack, chest pack, Facial steam, Naturopathy diet	Rs. 500/- to 1000/-	15 days	After 6 months

06	Arthritis (Osteo, Rheumatoid, Gout)	Full body / local massage, steam bath, Local steam, Spinal bath, Arm & Foot bath, Full Immersion bath, Mud bath/ mud pack, packs, Naturopathy diet	Rs. 500/- to 1000/-	15 days	After 6 months
07	Musculo-skeletal disorders (Low back pain, sciatica, cervical spondylosis)	Full body/ local massage, steam bath, Spinal bath, Arm & Foot bath, Local steam, Full Immersion bath, Mud bath/ mud pack, packs, Naturopathy diet	Rs. 500/- to 1000/-	15 days	After 6 months
08	Skin disorders (Psoriasis, Eczema)	Full body/ local massage, steam bath, Spinal bath, Local steam, Full Immersion bath, Mud bath/ mud pack, packs, Full wet sheet Pack, Naturopathy diet	Rs. 500/- to 1000/-	21 days	After 6 months

2. Unit Cost of YOGA/ NATUROPATHY therapies/interventions in OPD/IPD :-

Unit cost per therapy/ intervention means cost of procedure including cost of medicines used in the procedure as under:

YOGA

S.No.	Procedures/ Treatment	Rate per unit.
01	Jalaneti(OPD)	Rs. 050/-
02	Sutra neti(OPD)	Rs. 050/-
03	Dugdhaneti(OPD)	Rs. 100/-
04	Ghritaneti(OPD)	Rs. 100/-
05	Kunjala / Vamanadhouti(OPD)	Rs. 100/-
06	Vastradhouti(OPD)	Rs. 100/-
07	Jalabasti(OPD)	Rs. 150/-
08	Sthalabasti(OPD)	Rs. 050/-
09	Moolashodhana/ Chakri karma (OPD)	Rs. 050/-
10	Shankhaprakshalana (with therapeutic diet) (OPD)	Rs. 500/-
11	Kapalabhati (OPD)	Rs. 025/-
12	Nauli (OPD)	Rs. 050/-

13	Trataka (Jyoti) (OPD)	Rs. 050/-
14	Shat karma package - I (Jalaneti, Sutra neti andKapalabhati) (OPD)	Rs. 150/-
15	Shat karma package - II (Jalaneti, Sutra neti, Kunjala/VastraDhouti and Kapalabhati) (OPD)	Rs. 200/-
16	Trataka package (Jatruatrataka, JyotiTrataka, Eye wash and relaxation technique) (OPD)	Rs. 100/-
17	Individual Yoga Therapy Session (Yogic Sukshnavyayama, Surya namaskar, Yogasana, Relaxation) (Minimum one hour duration) (OPD)	Rs. 100/-
18	Individual Pranayama/ Dhyana (Meditation) session (Minimum one hour duration) (OPD)	Rs. 100/-
19	One day individual Yoga therapy package (Shatkarma, Yogasana, Pranayama, Dhyana) (around 3 hours) (OPD)	Rs. 250/-
20	One week individual Yoga therapy package (Shatkarma, Yogasana, Pranayama, Dhyana etc.) (Minimum 1 hour daily) (OPD)	Rs. 500/-
21	One month individual Yoga therapy package (Shatkarma, Yogasana, Pranayama, Dhyana etc.) (Minimum 1 hour daily) (OPD)	Rs. 1,500/-
22	One week Yoga therapy package (3-4 hours per day) (OPD)	Rs. 1,500/-
23	Two weeks Yoga therapy package (3-4 hours per day) (OPD)	Rs. 2,500/-
24	One month Yoga therapy package (3-4 hours per day) (OPD)	Rs. 5,000/-
25	One week Yoga therapy package (Indoor) / (IPD)	Rs. 10,000/-
26	Two weeks Yoga therapy package (Indoor) / (IPD)	Rs. 18,000/-
27	Three weeks Yoga therapy package (Indoor) / (IPD)	Rs. 25,000/-

NATUROPATHY

S.No.	Procedures/ Treatment	Rate per unit
	<i>JalChikitsa (Hydrotherapy)</i>	
01	Hip bath	Rs. 150/-
02	Spinal bath	Rs. 100/-
03	Spinal spray	Rs. 200/-
04	Arm/ Foot bath	Rs. 150/-
05	Full Immersion bath	Rs. 200/-
06	Local jet spray	Rs. 200/-
07	Under Water Massage	Rs. 350/-
08	Deluxe Hydro Massage	Rs. 400/-

09	Whirl pool bath	Rs. 400/-
10	Circular jet bath	Rs. 350/-
11	Enema	Rs. 100/-
12	Colon Hydrotherapy	Rs. 500/-
13	Local steam	Rs. 100/-
14	Full body steam	Rs. 200/-
15	Sauna bath	Rs. 250/-
	MardanaChikitsa.	
16	Full body Mardana	Rs. 300/-
17	Local Mardana	Rs. 150/-
18	Dry Mardana	Rs. 200/-
	Packs / Fomentation	
19	Full wet sheet pack or Fomentation	Rs. 150/-
20	Local pack / Fomentation(chest, abdomen, leg etc.)	Rs. 100/-
	Mud Therapy	
21	Full Body Mud Bath	Rs. 250/-
22	Local Mud pack / Application	Rs. 100/ -
	Chromo Therapy	
23	Thermoleum Sun bath	Rs. 200/-
	Naturopathy Therapeutic Diet	
24	Naturopathy diet (Single Serve)	Rs. 100/-
	Package Treatments with minimum 3 procedures.	
25	One day package treatment (OPD)	Rs. 750/-
26	One week package treatment (OPD)	Rs. 3,500/-
27	Two weeks package treatment (OPD)	Rs. 6,000/-
28	Three weeks package treatment (OPD)	Rs. 9,000/-
29	One week package treatment (IPD)	Rs. 10,000/-
30	Two weeks package treatment (IPD)	Rs. 18,000/-
31	Three weeks package treatment (IPD)	Rs. 25,000/-

Note: Any minor / local Naturopathy procedure/ therapy not included in the above list may be charged upto Rs. 100/- per sitting for upto 28 days.

3. Determination of treatment expenditure for payment/reimbursement

For the purpose of settlement of Unani treatment expenditure under CGHS , following criteria shall be applied-

- Above-mentioned rates of therapies/interventions shall be benchmarks for calculating treatment expenditure.
- The above unit rates are inclusive of the cost implication of materials, medicines, accessories, equipment maintenance and manpower (medical, paramedical and nursing) and diet used in imparting therapies except room rent of the hospitalization.

- c) Pre and post procedure cost will be chargeable @ Rs 75 per day.
- d) Room rent , wherever applicable shall be chargeable as per the rates prescribed in the OM.
