

Packages including Procedures , Rates and Minimum Documents Protocols and Other Details for New Phase of AB-MGRSBY

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College& Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for indications)
1	Secondary	Paediatric Medical management - Phase 3	1842000001	AKI / Renal failure-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
2	Secondary	General Medicine - Phase 3	1834000001	AKI / Renal failure-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
3	Secondary	Paediatric Medical management - Phase 3	1842000002	AKI / Renal failure-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
4	Secondary	General Medicine - Phase 3	1834000002	AKI / Renal failure-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
5	Secondary	General Medicine - Phase 3	1834000003	AKI / Renal failure-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
6	Secondary	Paediatric Medical management - Phase 3	18420000003	AKI / Renal failure-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
7	Secondary	General Medicine - Phase 3	18340000004	AKI / Renal failure-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
8	Secondary	Paediatric Medical management - Phase 3	18420000004	AKI / Renal failure-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
9	Secondary	General Surgery - Phase 3	18350000001	AV Fistula without prosthesis	6000	6000	5700	5100	Surgical	Not Reserved	Yes	No	0	Clinical Notes Detailing Need For Av Shunt , Evidence Of Creatinine/ Rft	Detailed Discharge Summary , Detailed Operative Notes , Post Procedure Clinical Photograph	No	No	Yes	No	Yes	1
10	Secondary	Obstetrics & Gynaecology - Phase 3	18380000001	Abdominal Myomectomy	20000	20000	19000	17000	Surgical	Reserved	Yes	No	0	Clinical Notes Confirming The Indication For The Procedure , Pap Smear , Usg (Abdomen & Pelvis)/ Mri (Abdomen)	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Pic Of Gross Specimen Removed	No	No	Yes	No	No	5
11	Secondary	General Surgery - Phase 3	18350000002	Abdominal Procedure for Rectal Prolapse-Lap.	19000	19000	18050	16150	Surgical	Not Reserved	No	No	0	Colonoscopy , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Operative Notes , Intra Procedure Clinical Photograph	No	No	Yes	No	No	4

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College& Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
12	Secondary	General Surgery - Phase 3	18350000003	Abdominal Procedure for Rectal Prolapse-Open	19000	19000	18050	16150	Surgical	Not Reserved	No	No	0	Colonoscopy , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Operative Notes , Intra Procedure Clinical Photograph	No	No	Yes	No	No	4
13	Secondary	Obstetrics & Gynaecology - Phase 3	18380000002	Abdomino Perineal repair for Mullerian Anomaly	20000	20000	19000	17000	Surgical	Not Reserved	No	No	0	Admission Notes Comprising Of History And Examination With Indications For The Procedure , Relevant Investigations (Establishing Diagnosis) , Usg/Ct/Mri	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra-Operative Photograph , Progress Notes	No	No	Yes	No	No	5
14	Secondary	Paediatric Medical management - Phase 3	18420000005	Accelerated hypertension-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
15	Secondary	General Medicine - Phase 3	18340000005	Accelerated hypertension-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
16	Secondary	Paediatric Medical management - Phase 3	18420000006	Accelerated hypertension-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
17	Secondary	General Medicine - Phase 3	18340000006	Accelerated hypertension-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
18	Secondary	Paediatric Medical management - Phase 3	1842000007	Accelerated hypertension-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
19	Secondary	General Medicine - Phase 3	1834000007	Accelerated hypertension-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
20	Secondary	General Medicine - Phase 3	1834000008	Accelerated hypertension-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
21	Secondary	Paediatric Medical management - Phase 3	1842000008	Accelerated hypertension-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
22	Secondary	Paediatric Medical management - Phase 3	1842000009	Acute abdomen-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
23	Secondary	Paediatric Medical management - Phase 3	1842000010	Acute abdomen-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
24	Secondary	Paediatric Medical management - Phase 3	1842000011	Acute abdomen-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
25	Secondary	Paediatric Medical management - Phase 3	1842000012	Acute abdomen-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
26	Secondary	Paediatric Medical management - Phase 3	1842000013	Acute ataxia-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
27	Secondary	Paediatric Medical management - Phase 3	1842000014	Acute ataxia-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
28	Secondary	Paediatric Medical management - Phase 3	1842000015	Acute ataxia-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
29	Secondary	Paediatric Medical management - Phase 3	1842000016	Acute ataxia-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
30	Secondary	Paediatric Medical management - Phase 3	1842000017	Acute bronchitis-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
31	Secondary	General Medicine - Phase 3	1834000009	Acute bronchitis-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
32	Secondary	Paediatric Medical management - Phase 3	1842000018	Acute bronchitis-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
33	Secondary	General Medicine - Phase 3	1834000010	Acute bronchitis-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
34	Secondary	General Medicine - Phase 3	1834000011	Acute bronchitis-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
35	Secondary	Paediatric Medical management - Phase 3	1842000019	Acute bronchitis-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
36	Secondary	General Medicine - Phase 3	18340000012	Acute bronchitis-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
37	Secondary	Paediatric Medical management - Phase 3	18420000020	Acute bronchitis-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
38	Secondary	Paediatric Medical management - Phase 3	18420000021	Acute demyelinating myelopathy-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
39	Secondary	General Medicine - Phase 3	18340000013	Acute demyelinating myelopathy-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
40	Secondary	Paediatric Medical management - Phase 3	18420000022	Acute demyelinating myelopathy-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
41	Secondary	General Medicine - Phase 3	18340000014	Acute demyelinating myelopathy-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
42	Secondary	Paediatric Medical management - Phase 3	18420000023	Acute demyelinating myelopathy-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
43	Secondary	General Medicine - Phase 3	18340000015	Acute demyelinating myelopathy-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
44	Secondary	General Medicine - Phase 3	18340000016	Acute demyelinating myelopathy-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
45	Secondary	Paediatric Medical management - Phase 3	18420000024	Acute demyelinating myelopathy-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
46	Secondary	Paediatric Medical management - Phase 3	18420000025	Acute encephalitis-immune-mediated - uncomplicated-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
47	Secondary	General Medicine - Phase 3	18340000017	Acute encephalitis-immune-mediated - uncomplicated-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
48	Secondary	General Medicine - Phase 3	1834000018	Acute encephalitis-immune-mediated - uncomplicated-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
49	Secondary	Paediatric Medical management - Phase 3	1842000026	Acute encephalitis-immune-mediated - uncomplicated-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
50	Secondary	Paediatric Medical management - Phase 3	1842000027	Acute encephalitis-immune-mediated - uncomplicated-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
51	Secondary	General Medicine - Phase 3	1834000019	Acute encephalitis-immune-mediated - uncomplicated-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
52	Secondary	General Medicine - Phase 3	1834000020	Acute encephalitis-immune-mediated - uncomplicated-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
53	Secondary	Paediatric Medical management - Phase 3	1842000028	Acute encephalitis-immune-mediated - uncomplicated-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
54	Secondary	Paediatric Medical management - Phase 3	1842000029	Acute encephalitis-infectious - uncomplicated-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
55	Secondary	General Medicine - Phase 3	1834000021	Acute encephalitis-infectious - uncomplicated-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
56	Secondary	General Medicine - Phase 3	1834000022	Acute encephalitis-infectious - uncomplicated-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
57	Secondary	Paediatric Medical management - Phase 3	1842000030	Acute encephalitis-infectious - uncomplicated-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
58	Secondary	General Medicine - Phase 3	1834000023	Acute encephalitis-infectious - uncomplicated-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
59	Secondary	Paediatric Medical management - Phase 3	1842000031	Acute encephalitis-infectious - uncomplicated-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
60	Secondary	General Medicine - Phase 3	18340000024	Acute encephalitis-infectious - uncomplicated-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
61	Secondary	Paediatric Medical management - Phase 3	18420000032	Acute encephalitis-infectious - uncomplicated-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
62	Secondary	Paediatric Medical management - Phase 3	18420000033	Acute encephalitis syndrome-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
63	Secondary	General Medicine - Phase 3	18340000025	Acute encephalitis syndrome-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
64	Secondary	Paediatric Medical management - Phase 3	18420000034	Acute encephalitis syndrome-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
65	Secondary	General Medicine - Phase 3	18340000026	Acute encephalitis syndrome-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
66	Secondary	General Medicine - Phase 3	18340000027	Acute encephalitis syndrome-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
67	Secondary	Paediatric Medical management - Phase 3	18420000035	Acute encephalitis syndrome-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
68	Secondary	General Medicine - Phase 3	18340000028	Acute encephalitis syndrome-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
69	Secondary	Paediatric Medical management - Phase 3	18420000036	Acute encephalitis syndrome-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
70	Secondary	General Medicine - Phase 3	18340000029	Acute exacerbation of COPD-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
71	Secondary	General Medicine - Phase 3	18340000030	Acute exacerbation of COPD-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
72	Secondary	General Medicine - Phase 3	18340000031	Acute exacerbation of COPD-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
73	Secondary	General Medicine - Phase 3	18340000032	Acute exacerbation of COPD-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
74	Secondary	General Medicine - Phase 3	18340000033	Acute exacerbation of Interstitial Lung Disease-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
75	Secondary	Paediatric Medical management - Phase 3	18420000037	Acute exacerbation of Interstitial Lung Disease-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
76	Secondary	General Medicine - Phase 3	18340000034	Acute exacerbation of Interstitial Lung Disease-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
77	Secondary	Paediatric Medical management - Phase 3	18420000038	Acute exacerbation of Interstitial Lung Disease-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
78	Secondary	General Medicine - Phase 3	18340000035	Acute exacerbation of Interstitial Lung Disease-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
79	Secondary	Paediatric Medical management - Phase 3	18420000039	Acute exacerbation of Interstitial Lung Disease-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
80	Secondary	General Medicine - Phase 3	18340000036	Acute exacerbation of Interstitial Lung Disease-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
81	Secondary	Paediatric Medical management - Phase 3	18420000040	Acute exacerbation of Interstitial Lung Disease-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
82	Secondary	General Medicine - Phase 3	18340000037	Acute febrile illness-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
83	Secondary	Paediatric Medical management - Phase 3	18420000041	Acute febrile illness-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
84	Secondary	Paediatric Medical management - Phase 3	1842000042	Acute febrile illness-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
85	Secondary	General Medicine - Phase 3	1834000038	Acute febrile illness-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
86	Secondary	Paediatric Medical management - Phase 3	1842000043	Acute febrile illness-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
87	Secondary	General Medicine - Phase 3	1834000039	Acute febrile illness-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
88	Secondary	General Medicine - Phase 3	1834000040	Acute febrile illness-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
89	Secondary	Paediatric Medical management - Phase 3	1842000044	Acute febrile illness-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
90	Secondary	General Medicine - Phase 3	1834000041	Acute gastroenteritis with dehydration-Acute gastroenteritis with moderate dehydration-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
91	Secondary	Paediatric Medical management - Phase 3	1842000045	Acute gastroenteritis with dehydration-Acute gastroenteritis with moderate dehydration-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
92	Secondary	Paediatric Medical management - Phase 3	1842000046	Acute gastroenteritis with dehydration-Acute gastroenteritis with moderate dehydration-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
93	Secondary	General Medicine - Phase 3	1834000042	Acute gastroenteritis with dehydration-Acute gastroenteritis with moderate dehydration-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
94	Secondary	General Medicine - Phase 3	1834000043	Acute gastroenteritis with dehydration-Acute gastroenteritis with moderate dehydration-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
95	Secondary	Paediatric Medical management - Phase 3	1842000047	Acute gastroenteritis with dehydration-Acute gastroenteritis with moderate dehydration-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
96	Secondary	General Medicine - Phase 3	18340000044	Acute gastroenteritis with dehydration-Acute gastroenteritis with moderate dehydration-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
97	Secondary	Paediatric Medical management - Phase 3	18420000048	Acute gastroenteritis with dehydration-Acute gastroenteritis with moderate dehydration-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
98	Secondary	General Medicine - Phase 3	18340000045	Acute gastroenteritis with dehydration-Acute gastroenteritis with severe dehydration-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
99	Secondary	Paediatric Medical management - Phase 3	18420000049	Acute gastroenteritis with dehydration-Acute gastroenteritis with severe dehydration-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
100	Secondary	General Medicine - Phase 3	18340000046	Acute gastroenteritis with dehydration-Acute gastroenteritis with severe dehydration-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
101	Secondary	Paediatric Medical management - Phase 3	18420000050	Acute gastroenteritis with dehydration-Acute gastroenteritis with severe dehydration-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant/High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
102	Secondary	General Medicine - Phase 3	1834000047	Acute gastroenteritis with dehydration-Acute gastroenteritis with severe dehydration-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
103	Secondary	Paediatric Medical management - Phase 3	1842000051	Acute gastroenteritis with dehydration-Acute gastroenteritis with severe dehydration-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
104	Secondary	General Medicine - Phase 3	1834000048	Acute gastroenteritis with dehydration-Acute gastroenteritis with severe dehydration-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
105	Secondary	Paediatric Medical management - Phase 3	1842000052	Acute gastroenteritis with dehydration-Acute gastroenteritis with severe dehydration-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
106	Secondary	General Medicine - Phase 3	1834000049	Acute glomerulonephritis-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
107	Secondary	Paediatric Medical management - Phase 3	1842000053	Acute glomerulonephritis-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant/High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
108	Secondary	Paediatric Medical management - Phase 3	18420000054	Acute glomerulonephritis-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
109	Secondary	General Medicine - Phase 3	18340000050	Acute glomerulonephritis-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
110	Secondary	General Medicine - Phase 3	18340000051	Acute glomerulonephritis-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
111	Secondary	Paediatric Medical management - Phase 3	18420000055	Acute glomerulonephritis-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
112	Secondary	Paediatric Medical management - Phase 3	18420000056	Acute glomerulonephritis-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
113	Secondary	General Medicine - Phase 3	18340000052	Acute glomerulonephritis-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
114	Secondary	General Medicine - Phase 3	1834000053	Acute Ischemic stroke-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
115	Secondary	Paediatric Medical management - Phase 3	1842000057	Acute ischemic stroke-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
116	Secondary	General Medicine - Phase 3	1834000054	Acute Ischemic stroke-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
117	Secondary	Paediatric Medical management - Phase 3	1842000058	Acute ischemic stroke-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
118	Secondary	Paediatric Medical management - Phase 3	1842000059	Acute ischemic stroke-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
119	Secondary	General Medicine - Phase 3	1834000055	Acute ischemic stroke-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
120	Secondary	Paediatric Medical management - Phase 3	1842000060	Acute Ischemic stroke-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
121	Secondary	General Medicine - Phase 3	1834000056	Acute ischemic stroke-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
122	Secondary	General Medicine - Phase 3	1834000057	Acute meningo encephalitis / aseptic meningitis / febrile encephalopathy / hypertensive encephalopathy / metabolic encephalopathy / hepatic encephalopathy / brain abscess -Acute meningo encephalitis HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
123	Secondary	Paediatric Medical management - Phase 3	1842000061	Acute meningo encephalitis / aseptic meningitis / febrile encephalopathy / hypertensive encephalopathy / metabolic encephalopathy / hepatic encephalopathy / brain abscess -Acute meningo encephalitis HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
124	Secondary	Paediatric Medical management - Phase 3	1842000062	Acute meningo encephalitis / aseptic meningitis / febrile encephalopathy / hypertensive encephalopathy / metabolic encephalopathy / hepatic encephalopathy / brain abscess -Acute meningo encephalitis ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
125	Secondary	General Medicine - Phase 3	1834000058	Acute meningo encephalitis / aseptic meningitis / febrile encephalopathy / hypertensive encephalopathy / metabolic encephalopathy / hepatic encephalopathy / brain abscess -Acute meningo encephalitis ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
126	Secondary	Paediatric Medical management - Phase 3	1842000063	Acute meningo encephalitis / aseptic meningitis / febrile encephalopathy / hypertensive encephalopathy / metabolic encephalopathy / hepatic encephalopathy / brain abscess -Acute meningo encephalitis ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
127	Secondary	General Medicine - Phase 3	1834000059	Acute meningo encephalitis / aseptic meningitis / febrile encephalopathy / hypertensive encephalopathy / metabolic encephalopathy / hepatic encephalopathy / brain abscess -Acute meningo encephalitis ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
128	Secondary	Paediatric Medical management - Phase 3	1842000064	Acute meningo encephalitis / aseptic meningitis / febrile encephalopathy / hypertensive encephalopathy / metabolic encephalopathy / hepatic encephalopathy / brain abscess -Acute meningo encephalitis Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
129	Secondary	General Medicine - Phase 3	1834000060	Acute meningo encephalitis / aseptic meningitis / febrile encephalopathy / hypertensive encephalopathy / metabolic encephalopathy / hepatic encephalopathy / brain abscess -Acute meningo encephalitis Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
130	Secondary	Paediatric Medical management - Phase 3	1842000065	Acute meningo encephalitis / aseptic meningitis / febrile encephalopathy / hypertensive encephalopathy / metabolic encephalopathy / hepatic encephalopathy / brain abscess -Aseptic meningitis-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
131	Secondary	Paediatric Medical management - Phase 3	1842000066	Acute meningo encephalitis / aseptic meningitis / febrile encephalopathy / hypertensive encephalopathy / metabolic encephalopathy / hepatic encephalopathy / brain abscess -Aseptic meningitis-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
132	Secondary	Paediatric Medical management - Phase 3	1842000067	Acute meningo encephalitis / aseptic meningitis / febrile encephalopathy / hypertensive encephalopathy / metabolic encephalopathy / hepatic encephalopathy / brain abscess -Aseptic meningitis-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
133	Secondary	Paediatric Medical management - Phase 3	1842000068	Acute meningo encephalitis / aseptic meningitis / febrile encephalopathy / hypertensive encephalopathy / metabolic encephalopathy / hepatic encephalopathy / brain abscess -Aseptic meningitis-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
134	Secondary	Paediatric Medical management - Phase 3	1842000069	Acute meningo encephalitis / aseptic meningitis / febrile encephalopathy / hypertensive encephalopathy / metabolic encephalopathy / hepatic encephalopathy / brain abscess -Brain abscess-HDU	2000	2000	1900	1700	Medical	Not Reserved	No	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
135	Secondary	Paediatric Medical management - Phase 3	1842000070	Acute meningo encephalitis / aseptic meningitis / febrile encephalopathy / hypertensive encephalopathy / metabolic encephalopathy / hepatic encephalopathy / brain abscess -Brain abscess-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	No	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
136	Secondary	Paediatric Medical management - Phase 3	1842000071	Acute meningo encephalitis / aseptic meningitis / febrile encephalopathy / hypertensive encephalopathy / metabolic encephalopathy / hepatic encephalopathy / brain abscess -Brain abscess-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	No	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
137	Secondary	Paediatric Medical management - Phase 3	1842000072	Acute meningo encephalitis / aseptic meningitis / febrile encephalopathy / hypertensive encephalopathy / metabolic encephalopathy / hepatic encephalopathy / brain abscess -Brain abscess-Routine Ward	1000	1000	950	850	Medical	Not Reserved	No	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
138	Secondary	General Medicine - Phase 3	1834000061	Acute meningo encephalitis / aseptic meningitis / febrile encephalopathy / hypertensive encephalopathy / metabolic encephalopathy / hepatic encephalopathy / brain abscess -Febrile encephalopathy-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
139	Secondary	Paediatric Medical management - Phase 3	1842000073	Acute meningo encephalitis / aseptic meningitis / febrile encephalopathy / hypertensive encephalopathy / metabolic encephalopathy / hepatic encephalopathy / brain abscess -Febrile encephalopathy-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
140	Secondary	General Medicine - Phase 3	1834000062	Acute meningo encephalitis / aseptic meningitis / febrile encephalopathy / hypertensive encephalopathy / metabolic encephalopathy / hepatic encephalopathy / brain abscess -Febrile encephalopathy-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
141	Secondary	Paediatric Medical management - Phase 3	1842000074	Acute meningo encephalitis / aseptic meningitis / febrile encephalopathy / hypertensive encephalopathy / metabolic encephalopathy / hepatic encephalopathy / brain abscess -Febrile encephalopathy-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
142	Secondary	Paediatric Medical management - Phase 3	1842000075	Acute meningo encephalitis / aseptic meningitis / febrile encephalopathy / hypertensive encephalopathy / metabolic encephalopathy / hepatic encephalopathy / brain abscess -Febrile encephalopathy-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
143	Secondary	General Medicine - Phase 3	1834000063	Acute meningo encephalitis / aseptic meningitis / febrile encephalopathy / hypertensive encephalopathy / metabolic encephalopathy / hepatic encephalopathy / brain abscess -Febrile encephalopathy-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
144	Secondary	Paediatric Medical management - Phase 3	1842000076	Acute meningo encephalitis / aseptic meningitis / febrile encephalopathy / hypertensive encephalopathy / metabolic encephalopathy / hepatic encephalopathy / brain abscess -Febrile encephalopathy-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
145	Secondary	General Medicine - Phase 3	1834000064	Acute meningo encephalitis / aseptic meningitis / febrile encephalopathy / hypertensive encephalopathy / metabolic encephalopathy / hepatic encephalopathy / brain abscess -Febrile encephalopathy-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
146	Secondary	Paediatric Medical management - Phase 3	1842000077	Acute meningo encephalitis / aseptic meningitis / febrile encephalopathy / hypertensive encephalopathy / metabolic encephalopathy / hepatic encephalopathy / brain abscess -Hepatic encephalopathy-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
147	Secondary	General Medicine - Phase 3	1834000065	Acute meningo encephalitis / aseptic meningitis / febrile encephalopathy / hypertensive encephalopathy / metabolic encephalopathy / hepatic encephalopathy / brain abscess -Hepatic encephalopathy-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
148	Secondary	Paediatric Medical management - Phase 3	1842000078	Acute meningo encephalitis / aseptic meningitis / febrile encephalopathy / hypertensive encephalopathy / metabolic encephalopathy / hepatic encephalopathy / brain abscess -Hepatic encephalopathy-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
149	Secondary	General Medicine - Phase 3	1834000066	Acute meningo encephalitis / aseptic meningitis / febrile encephalopathy / hypertensive encephalopathy / metabolic encephalopathy / hepatic encephalopathy / brain abscess -Hepatic encephalopathy-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
150	Secondary	General Medicine - Phase 3	1834000067	Acute meningo encephalitis / aseptic meningitis / febrile encephalopathy / hypertensive encephalopathy / metabolic encephalopathy / hepatic encephalopathy / brain abscess -Hepatic encephalopathy-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
151	Secondary	Paediatric Medical management - Phase 3	1842000079	Acute meningo encephalitis / aseptic meningitis / febrile encephalopathy / hypertensive encephalopathy / metabolic encephalopathy / hepatic encephalopathy / brain abscess -Hepatic encephalopathy-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
152	Secondary	General Medicine - Phase 3	1834000068	Acute meningo encephalitis / aseptic meningitis / febrile encephalopathy / hypertensive encephalopathy / metabolic encephalopathy / hepatic encephalopathy / brain abscess -Hepatic encephalopathy-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
153	Secondary	Paediatric Medical management - Phase 3	1842000080	Acute meningo encephalitis / aseptic meningitis / febrile encephalopathy / hypertensive encephalopathy / metabolic encephalopathy / hepatic encephalopathy / brain abscess -Hepatic encephalopathy-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
154	Secondary	Paediatric Medical management - Phase 3	1842000081	Acute meningo encephalitis / aseptic meningitis / febrile encephalopathy / hypertensive encephalopathy / metabolic encephalopathy / hepatic encephalopathy / brain abscess -Hypertensive encephalopathy-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
155	Secondary	Paediatric Medical management - Phase 3	1842000082	Acute meningo encephalitis / aseptic meningitis / febrile encephalopathy / hypertensive encephalopathy / metabolic encephalopathy / hepatic encephalopathy / brain abscess -Hypertensive encephalopathy-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
156	Secondary	Paediatric Medical management - Phase 3	1842000083	Acute meningo encephalitis / aseptic meningitis / febrile encephalopathy / hypertensive encephalopathy / metabolic encephalopathy / hepatic encephalopathy / brain abscess -Hypertensive encephalopathy-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
157	Secondary	Paediatric Medical management - Phase 3	1842000084	Acute meningo encephalitis / aseptic meningitis / febrile encephalopathy / hypertensive encephalopathy / metabolic encephalopathy / hepatic encephalopathy / brain abscess -Hypertensive encephalopathy-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
158	Secondary	General Medicine - Phase 3	1834000069	Acute meningo encephalitis / aseptic meningitis / febrile encephalopathy / hypertensive encephalopathy / metabolic encephalopathy / hepatic encephalopathy / brain abscess -Metabolic encephalopathy-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
159	Secondary	Paediatric Medical management - Phase 3	1842000085	Acute meningo encephalitis / aseptic meningitis / febrile encephalopathy / hypertensive encephalopathy / metabolic encephalopathy / hepatic encephalopathy / brain abscess -Metabolic encephalopathy-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
160	Secondary	General Medicine - Phase 3	1834000070	Acute meningo encephalitis / aseptic meningitis / febrile encephalopathy / hypertensive encephalopathy / metabolic encephalopathy / hepatic encephalopathy / brain abscess -Metabolic encephalopathy-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
161	Secondary	Paediatric Medical management - Phase 3	1842000086	Acute meningo encephalitis / aseptic meningitis / febrile encephalopathy / hypertensive encephalopathy / metabolic encephalopathy / hepatic encephalopathy / brain abscess -Metabolic encephalopathy-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
162	Secondary	General Medicine - Phase 3	1834000071	Acute meningo encephalitis / aseptic meningitis / febrile encephalopathy / hypertensive encephalopathy / metabolic encephalopathy / hepatic encephalopathy / brain abscess -Metabolic encephalopathy- ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
163	Secondary	Paediatric Medical management - Phase 3	1842000087	Acute meningo encephalitis / aseptic meningitis / febrile encephalopathy / hypertensive encephalopathy / metabolic encephalopathy / hepatic encephalopathy / brain abscess -Metabolic encephalopathy- ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
164	Secondary	General Medicine - Phase 3	1834000072	Acute meningo encephalitis / aseptic meningitis / febrile encephalopathy / hypertensive encephalopathy / metabolic encephalopathy / hepatic encephalopathy / brain abscess -Metabolic encephalopathy-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
165	Secondary	Paediatric Medical management - Phase 3	1842000088	Acute meningo encephalitis / aseptic meningitis / febrile encephalopathy / hypertensive encephalopathy / metabolic encephalopathy / hepatic encephalopathy / brain abscess -Metabolic encephalopathy-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
166	Secondary	General Medicine - Phase 3	1834000073	Acute neuroregression / Acute worsening in neuro metabolic and neurodegenerative conditions-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Clinical Notes Detailing Birth And Subsequent History , Clinical Notes With Planned Line Of Treatment , Ct-Head , Relevant Investigations (Establishing Diagnosis)	Detailed Discharge Summary , Detailed Icps , Detailed Procedure/Operative Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
167	Secondary	Paediatric Medical management - Phase 3	1842000089	Acute neuroregression / Acute worsening in neuro metabolic and neurodegenerative conditions-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Clinical Notes Detailing Birth And Subsequent History , Clinical Notes With Planned Line Of Treatment , Ct-Head , Relevant Investigations (Establishing Diagnosis)	Detailed Discharge Summary , Detailed Icps , Detailed Procedure/Operative Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
168	Secondary	General Medicine - Phase 3	18340000074	Acute neuroregression / Acute worsening in neuro metabolic and neurodegenerative conditions-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Clinical Notes Detailing Birth And Subsequent History , Clinical Notes With Planned Line Of Treatment , Ct-Head , Relevant Investigations (Establishing Diagnosis)	Detailed Discharge Summary , Detailed Icps , Detailed Procedure/Operative Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
169	Secondary	Paediatric Medical management - Phase 3	18420000090	Acute neuroregression / Acute worsening in neuro metabolic and neurodegenerative conditions-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Clinical Notes Detailing Birth And Subsequent History , Clinical Notes With Planned Line Of Treatment , Ct-Head , Relevant Investigations (Establishing Diagnosis)	Detailed Discharge Summary , Detailed Icps , Detailed Procedure/Operative Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
170	Secondary	Paediatric Medical management - Phase 3	18420000091	Acute neuroregression / Acute worsening in neuro metabolic and neurodegenerative conditions-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Clinical Notes Detailing Birth And Subsequent History , Clinical Notes With Planned Line Of Treatment , Ct-Head , Relevant Investigations (Establishing Diagnosis)	Detailed Discharge Summary , Detailed Icps , Detailed Procedure/Operative Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
171	Secondary	General Medicine - Phase 3	18340000075	Acute neuroregression / Acute worsening in neuro metabolic and neurodegenerative conditions-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Clinical Notes Detailing Birth And Subsequent History , Clinical Notes With Planned Line Of Treatment , Ct-Head , Relevant Investigations (Establishing Diagnosis)	Detailed Discharge Summary , Detailed Icps , Detailed Procedure/Operative Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
172	Secondary	Paediatric Medical management - Phase 3	18420000092	Acute neuroregression / Acute worsening in neuro metabolic and neurodegenerative conditions-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Clinical Notes Detailing Birth And Subsequent History , Clinical Notes With Planned Line Of Treatment , Ct-Head , Relevant Investigations (Establishing Diagnosis)	Detailed Discharge Summary , Detailed Icps , Detailed Procedure/Operative Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
173	Secondary	General Medicine - Phase 3	18340000076	Acute neuroregression / Acute worsening in neuro metabolic and neurodegenerative conditions-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Clinical Notes Detailing Birth And Subsequent History , Clinical Notes With Planned Line Of Treatment , Ct-Head , Relevant Investigations (Establishing Diagnosis)	Detailed Discharge Summary , Detailed Icps , Detailed Procedure/Operative Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
174	Secondary	Paediatric Medical management - Phase 3	1842000093	Acute severe malnutrition-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
175	Secondary	Paediatric Medical management - Phase 3	1842000094	Acute severe malnutrition-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
176	Secondary	Paediatric Medical management - Phase 3	1842000095	Acute severe malnutrition-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
177	Secondary	Paediatric Medical management - Phase 3	1842000096	Acute severe malnutrition-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
178	Secondary	General Medicine - Phase 3	1834000077	Acute transverse myelitis-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
179	Secondary	Paediatric Medical management - Phase 3	1842000097	Acute transverse myelitis-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
180	Secondary	General Medicine - Phase 3	18340000078	Acute transverse myelitis-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
181	Secondary	Paediatric Medical management - Phase 3	18420000098	Acute transverse myelitis-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
182	Secondary	Paediatric Medical management - Phase 3	18420000099	Acute transverse myelitis-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
183	Secondary	General Medicine - Phase 3	18340000079	Acute transverse myelitis-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
184	Secondary	Paediatric Medical management - Phase 3	18420000100	Acute transverse myelitis-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
185	Secondary	General Medicine - Phase 3	18340000080	Acute transverse myelitis-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
186	Secondary	General Medicine - Phase 3	1834000081	Acute urticaria / Anaphylaxis acute asthma Acute urticaria-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Planned Line Of Management , Clinical Notes Detailing History	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
187	Secondary	Paediatric Medical management - Phase 3	18420000101	Acute urticaria / Anaphylaxis acute asthma Acute urticaria-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Planned Line Of Management , Clinical Notes Detailing History	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
188	Secondary	General Medicine - Phase 3	1834000082	Acute urticaria / Anaphylaxis acute asthma Acute urticaria-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Planned Line Of Management , Clinical Notes Detailing History	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
189	Secondary	Paediatric Medical management - Phase 3	18420000102	Acute urticaria / Anaphylaxis acute asthma Acute urticaria-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Planned Line Of Management , Clinical Notes Detailing History	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
190	Secondary	Paediatric Medical management - Phase 3	18420000103	Acute urticaria / Anaphylaxis acute asthma Acute urticaria-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Planned Line Of Management , Clinical Notes Detailing History	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
191	Secondary	General Medicine - Phase 3	1834000083	Acute urticaria / Anaphylaxis acute asthma Acute urticaria-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Planned Line Of Management , Clinical Notes Detailing History	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
192	Secondary	Paediatric Medical management - Phase 3	18420000104	Acute urticaria / Anaphylaxis acute asthma Acute urticaria-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Planned Line Of Management , Clinical Notes Detailing History	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
193	Secondary	General Medicine - Phase 3	18340000084	Acute urticaria / Anaphylaxis acute asthma Acute urticaria-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Planned Line Of Management , Clinical Notes Detailing History	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
194	Secondary	Paediatric Medical management - Phase 3	18420000105	Acute urticaria / Anaphylaxis acute asthma Anaphylaxis acute asthma-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Planned Line Of Management , Clinical Notes Detailing History	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
195	Secondary	General Medicine - Phase 3	18340000085	Acute urticaria / Anaphylaxis acute asthma Anaphylaxis acute asthma-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Planned Line Of Management , Clinical Notes Detailing History	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
196	Secondary	General Medicine - Phase 3	18340000086	Acute urticaria / Anaphylaxis acute asthma Anaphylaxis acute asthma-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Planned Line Of Management , Clinical Notes Detailing History	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
197	Secondary	Paediatric Medical management - Phase 3	18420000106	Acute urticaria / Anaphylaxis acute asthma Anaphylaxis acute asthma-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Planned Line Of Management , Clinical Notes Detailing History	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College& Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
198	Secondary	Paediatric Medical management - Phase 3	18420000107	Acute urticaria / Anaphylaxis acute asthma Anaphylaxis acute asthma-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Planned Line Of Management , Clinical Notes Detailing History	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
199	Secondary	General Medicine - Phase 3	18340000087	Acute urticaria / Anaphylaxis acute asthma Anaphylaxis acute asthma-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Planned Line Of Management , Clinical Notes Detailing History	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
200	Secondary	Paediatric Medical management - Phase 3	18420000108	Acute urticaria / Anaphylaxis acute asthma Anaphylaxis acute asthma-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Planned Line Of Management , Clinical Notes Detailing History	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
201	Secondary	General Medicine - Phase 3	18340000088	Acute urticaria / Anaphylaxis acute asthma Anaphylaxis acute asthma-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Planned Line Of Management , Clinical Notes Detailing History	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
202	Secondary	General Medicine - Phase 3	18340000089	Acute viral hepatitis-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Clinical Notes With Planned Line Of Treatment , Lft , Usg- Whole Abdomen	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
203	Secondary	Paediatric Medical management - Phase 3	18420000109	Acute viral hepatitis-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Clinical Notes With Planned Line Of Treatment , Lft , Usg- Whole Abdomen	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College& Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
204	Secondary	General Medicine - Phase 3	1834000090	Acute viral hepatitis-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Clinical Notes With Planned Line Of Treatment , Lft , Usg- Whole Abdomen	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
205	Secondary	Paediatric Medical management - Phase 3	1842000110	Acute viral hepatitis-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Clinical Notes With Planned Line Of Treatment , Lft , Usg- Whole Abdomen	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
206	Secondary	General Medicine - Phase 3	1834000091	Acute viral hepatitis-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Clinical Notes With Planned Line Of Treatment , Lft , Usg- Whole Abdomen	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
207	Secondary	Paediatric Medical management - Phase 3	1842000111	Acute viral hepatitis-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Clinical Notes With Planned Line Of Treatment , Lft , Usg- Whole Abdomen	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
208	Secondary	Paediatric Medical management - Phase 3	1842000112	Acute viral hepatitis-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Clinical Notes With Planned Line Of Treatment , Lft , Usg- Whole Abdomen	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
209	Secondary	General Medicine - Phase 3	1834000092	Acute viral hepatitis-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Clinical Notes With Planned Line Of Treatment , Lft , Usg- Whole Abdomen	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)	
210	Secondary	Paediatric Medical management - Phase 3	1842000113	Addison's disease -HDU	2000	2000	1900	1700	Medical	Not Reserved	No	No	0	Detailed Clinical Notes , Sr Cortisol , Usg-Abdomen	Detailed Discharge Summary , Post Treatment Cortisol Levels	No	No	Yes	No	No	No	Not Applicable(NA)
211	Secondary	General Medicine - Phase 3	1834000093	Addison's disease -HDU	2000	2000	1900	1700	Medical	Not Reserved	No	No	0	Detailed Clinical Notes , Sr Cortisol , Usg-Abdomen	Detailed Discharge Summary , Post Treatment Cortisol Levels	No	No	Yes	No	No	No	Not Applicable(NA)
212	Secondary	Paediatric Medical management - Phase 3	1842000114	Addison's disease -ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	No	No	0	Detailed Clinical Notes , Sr Cortisol , Usg-Abdomen	Detailed Discharge Summary , Post Treatment Cortisol Levels	No	No	Yes	No	No	No	Not Applicable(NA)
213	Secondary	General Medicine - Phase 3	1834000094	Addison's disease -ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	No	No	0	Detailed Clinical Notes , Sr Cortisol , Usg-Abdomen	Detailed Discharge Summary , Post Treatment Cortisol Levels	No	No	Yes	No	No	No	Not Applicable(NA)
214	Secondary	General Medicine - Phase 3	1834000095	Addison's disease -ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	No	No	0	Detailed Clinical Notes , Sr Cortisol , Usg-Abdomen	Detailed Discharge Summary , Post Treatment Cortisol Levels	No	No	Yes	No	No	No	Not Applicable(NA)
215	Secondary	Paediatric Medical management - Phase 3	1842000115	Addison's disease -ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	No	No	0	Detailed Clinical Notes , Sr Cortisol , Usg-Abdomen	Detailed Discharge Summary , Post Treatment Cortisol Levels	No	No	Yes	No	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College& Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
216	Secondary	General Medicine - Phase 3	1834000096	Addison's disease -Routine Ward	1000	1000	950	850	Medical	Not Reserved	No	No	0	Detailed Clinical Notes , Sr Cortisol , Usg-Abdomen	Detailed Discharge Summary , Post Treatment Cortisol Levels	No	No	Yes	No	No	Not Applicable(NA)
217	Secondary	Paediatric Medical management - Phase 3	1842000116	Addison's disease -Routine Ward	1000	1000	950	850	Medical	Not Reserved	No	No	0	Detailed Clinical Notes , Sr Cortisol , Usg-Abdomen	Detailed Discharge Summary , Post Treatment Cortisol Levels	No	No	Yes	No	No	Not Applicable(NA)
218	Secondary	Otorhinolaryngology (ENT) - Phase 3	1833000001	Adenoidectomy	5000	5000	4750	4250	Surgical	Reserved	Yes	No	0	Clinical Photograph , Detailed Clinical Notes , Supporting Investigations , X-Ray Adenoids	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	No	1
219	Secondary	Obstetrics & Gynaecology - Phase 3	1838000003	Amniocentesis	14500	14500	13775	12325	Surgical	Not Reserved	Yes	No	0	Consulting Notes Giving The Indication For Amniocentesis	Analysis Report Of Amniotic Fluid , Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra-Operative Photograph , Progress Notes	No	No	Yes	No	Yes	1
220	Secondary	Orthopaedics - Phase 3	1840000001	Amputation - Fingers / Toes-Finger(s)	10400	10400	9880	8840	Surgical	Not Reserved	Yes	No	0	Clinical Photograph Of Affected Part , Detailed Clinical Notes , Fir/Mic , X-Ray (Affected Limb)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Clinical Photograph	No	No	Yes	No	No	2
221	Secondary	Orthopaedics - Phase 3	1840000002	Amputation - Fingers / Toes-Toe(s)	10400	10400	9880	8840	Surgical	Not Reserved	Yes	No	0	Clinical Photograph Of Affected Part , Detailed Clinical Notes , Fir/Mic , X-Ray (Affected Limb)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Clinical Photograph	No	No	Yes	No	No	2

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
222	Secondary	Paediatric Medical management - Phase 3	1842000117	Anaphylaxis -HDU	2000	2000	1900	1700	Medical	Not Reserved	No	No	0	Cbc , Clinical Notes With Planned Line Of Treatment	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
223	Secondary	General Medicine - Phase 3	1834000097	Anaphylaxis -HDU	2000	2000	1900	1700	Medical	Not Reserved	No	No	0	Cbc , Clinical Notes With Planned Line Of Treatment	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
224	Secondary	General Medicine - Phase 3	1834000098	Anaphylaxis -ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	No	No	0	Cbc , Clinical Notes With Planned Line Of Treatment	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
225	Secondary	Paediatric Medical management - Phase 3	1842000118	Anaphylaxis -ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	No	No	0	Cbc , Clinical Notes With Planned Line Of Treatment	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
226	Secondary	General Medicine - Phase 3	1834000099	Anaphylaxis -ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	No	No	0	Cbc , Clinical Notes With Planned Line Of Treatment	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
227	Secondary	Paediatric Medical management - Phase 3	1842000119	Anaphylaxis -ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	No	No	0	Cbc , Clinical Notes With Planned Line Of Treatment	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College& Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
228	Secondary	Paediatric Medical management - Phase 3	1842000120	Anaphylaxis -Routine Ward	1000	1000	950	850	Medical	Not Reserved	No	No	0	Cbc , Clinical Notes With Planned Line Of Treatment	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
229	Secondary	General Medicine - Phase 3	1834000100	Anaphylaxis -Routine Ward	1000	1000	950	850	Medical	Not Reserved	No	No	0	Cbc , Clinical Notes With Planned Line Of Treatment	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
230	Secondary	Orthopaedics - Phase 3	1840000003	Ankle Fractures-Open Reduction Internal Fixation	19000	19000	18050	16150	Surgical	Not Reserved	Yes	No	0	Clinical Photograph Of Affected Part , Detailed Clinical Notes , X-Ray (Ankle Joint)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Invoice/Bar-Code Of Implant , Post Procedure Clinical Photograph	No	No	Yes	No	No	5
231	Secondary	Otorhinolaryngology (ENT) - Phase 3	1833000002	Ant. Ethmoidal / sphenopalatine artery ligation-Ant. Ethmoidal artery ligation - Endoscopic	15000	15000	14250	12750	Surgical	Not Reserved	Yes	No	0	Clinical Documents Justifying Surgery , Ct Scan	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra-Operative Photograph , Post Procedure Clinical Photograph Of Affected Part , X-Ray Of Clips Used	No	No	Yes	No	No	2
232	Secondary	Otorhinolaryngology (ENT) - Phase 3	1833000003	Ant. Ethmoidal / sphenopalatine artery ligation-Ant. Ethmoidal artery ligation - Open	15000	15000	14250	12750	Surgical	Not Reserved	Yes	No	0	Clinical Documents Justifying Surgery , Complete blood count (CBC) , Ct Scan , Electrocardiograph (ECG) tests	Complete blood count (CBC) , Detailed Discharge Summary , Detailed Procedure/Operative Notes , Electrocardiograph (ECG) tests , Intra-Operative Photograph , Post Procedure Clinical Photograph Of Affected Part , X-Ray Of Clips Used	No	No	Yes	No	No	2
233	Secondary	Otorhinolaryngology (ENT) - Phase 3	1833000004	Ant. Ethmoidal / sphenopalatine artery ligation-Sphenopalatine artery ligation - Endoscopic	15000	15000	14250	12750	Surgical	Not Reserved	No	No	0	Clinical Documents Justifying Surgery , Ct Scan	Biopsy Report , CT Scan , Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra-Operative Photograph , Post Procedure Clinical Photograph Of Affected Part , X-Ray Of Clips Used	No	No	Yes	No	No	2

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
234	Secondary	Otorhinolaryngology (ENT) - Phase 3	18330000005	Ant. Ethmoidal / sphenopalatine artery ligation-Sphenopalatine artery ligation - Open	15000	15000	14250	12750	Surgical	Not Reserved	No	No	0	Clinical Documents Justifying Surgery , Ct Scan	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra-Operative Photograph , Post Procedure Clinical Photograph Of Affected Part , X-Ray Of Clips Used	No	No	Yes	No	No	2
235	Secondary	Obstetrics & Gynaecology - Phase 3	18380000004	Anterior & Posterior Colpopereorrhaphy	8000	8000	7600	6800	Surgical	Reserved	No	No	0	Admission Notes Comprising Of History And Examination With Indications For The Procedure , Clinical Photograph , Relevant Investigations (Establishing Diagnosis)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra-Operative Photograph , Progress Notes	No	No	Yes	No	No	5
236	Secondary	Orthopaedics - Phase 3	18400000004	Application of P.O.P. Spikas & Jackets-Jackets	3500	3500	3325	2975	Surgical	Not Reserved	Yes	No	0	Clinical Photograph Of Affected Part , Detailed Clinical Notes , X-Ray	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Clinical Photograph With Pop Jacket	No	No	Yes	No	No	0
237	Secondary	Orthopaedics - Phase 3	18400000005	Application of P.O.P. Spikas & Jackets-Spikas	3500	3500	3325	2975	Surgical	Not Reserved	Yes	No	0	Clinical Photograph Of Affected Part , Detailed Clinical Notes , X-Ray	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Clinical Photograph With Pop Spika	No	No	Yes	No	No	0
238	Secondary	Orthopaedics - Phase 3	18400000006	Application of P.O.P. casts-Lower Limbs	3000	3000	2850	2550	Surgical	Not Reserved	Yes	No	0	Clinical Photograph Of Affected Part , Detailed Clinical Notes , X-Ray	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Clinical Photograph With Pop Cast	No	No	Yes	No	No	0
239	Secondary	Orthopaedics - Phase 3	18400000007	Application of P.O.P. casts-Upper Limbs	3000	3000	2850	2550	Surgical	Not Reserved	Yes	No	0	Clinical Photograph Of Affected Part , Detailed Clinical Notes , X-Ray	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Clinical Photograph With Pop Cast	No	No	Yes	No	No	0

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College& Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
240	Secondary	Orthopaedics - Phase 3	18400000008	Application of Traction-Skeletal Traction with pin	2000	2000	1900	1700	Surgical	Not Reserved	Yes	No	0	Clinical Photograph Of Affected Part , Detailed Clinical Notes , X-Ray	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Clinical Photograph With Pins	No	No	Yes	No	Yes	1
241	Secondary	Orthopaedics - Phase 3	18400000009	Application of Traction-Skin Traction	700	700	665	595	Surgical	Not Reserved	Yes	No	0	Clinical Photograph Of Affected Part , Detailed Clinical Notes , X-Ray	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Clinical Photograph	No	No	Yes	No	Yes	1
242	Secondary	Orthopaedics - Phase 3	18400000010	Arthorotomy of any joint	14000	14000	13300	11900	Surgical	Not Reserved	Yes	No	0	Clinical Photograph Of Affected Part , Detailed Clinical Notes , X-Ray	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post-Op Clinical Photograph	No	No	Yes	No	No	7
243	Secondary	Orthopaedics - Phase 3	18400000011	Arthrodesis-Ankle / Triple with implant	20000	20000	19000	17000	Surgical	Not Reserved	No	No	0	Clinical Photograph Of Affected Part , Detailed Clinical Notes , X-Ray (Ankle And Foot)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Invoice/Bar-Code Of Implant , Post Procedure (X-Ray) , Post Procedure Clinical Photograph	No	No	Yes	No	No	5
244	Secondary	Orthopaedics - Phase 3	18400000012	Arthrodesis-Ankle / Triple without implant	15000	15000	14250	12750	Surgical	Not Reserved	No	No	0	Clinical Photograph Of Affected Part , Detailed Clinical Notes , X-Ray (Ankle And Foot)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure (X-Ray) , Post Procedure Clinical Photograph	No	No	Yes	No	No	3
245	Secondary	Orthopaedics - Phase 3	18400000013	Arthrodesis-Knee	25000	25000	23750	21250	Surgical	Not Reserved	No	No	0	Clinical Photograph Of Affected Part , Detailed Clinical Notes , X-Ray (Ankle And Foot)	Detailed Procedure/Operative Notes , Invoice/Bar-Code Of Implant , Post Procedure (X-Ray) , Post Procedure Clinical Photograph	No	No	Yes	No	No	4

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
246	Secondary	Orthopaedics - Phase 3	18400000014	Arthrodesis-Shoulder	20000	20000	19000	17000	Surgical	Not Reserved	No	No	0	Clinical Photograph Of Affected Part , Detailed Clinical Notes , X-Ray (Ankle And Foot)	Detailed Procedure/Operative Notes , Invoice/Bar-Code Of Implant , Post Procedure (X-Ray) , Post Procedure Clinical Photograph	No	No	Yes	No	No	3
247	Secondary	Orthopaedics - Phase 3	18400000015	Arthrodesis-Wrist	20000	20000	19000	17000	Surgical	Not Reserved	No	No	0	Clinical Photograph Of Affected Part , Detailed Clinical Notes , X-Ray (Ankle And Foot)	Detailed Procedure/Operative Notes , Invoice/Bar-Code Of Implant , Post Procedure (X-Ray) , Post Procedure Clinical Photograph	No	No	Yes	No	No	3
248	Secondary	Orthopaedics - Phase 3	18400000016	Arthrolysis of joint-Ankle	15000	15000	14250	12750	Surgical	Not Reserved	Yes	No	0	Clinical Photograph Of Affected Part , Detailed Clinical Notes , X-Ray	Detailed Procedure/Operative Notes , Post Procedure (X-Ray) , Post Procedure Clinical Photograph	No	No	Yes	No	No	4
249	Secondary	Orthopaedics - Phase 3	18400000017	Arthrolysis of joint-Elbow	15000	15000	14250	12750	Surgical	Not Reserved	Yes	No	0	Clinical Photograph Of Affected Part , Detailed Clinical Notes , X-Ray	Detailed Procedure/Operative Notes , Post Procedure (X-Ray) , Post Procedure Clinical Photograph	No	No	Yes	No	No	4
250	Secondary	Orthopaedics - Phase 3	18400000018	Arthrolysis of joint-Knee	15000	15000	14250	12750	Surgical	Not Reserved	Yes	No	0	Clinical Photograph Of Affected Part , Detailed Clinical Notes , X-Ray	Detailed Procedure/Operative Notes , Post Procedure (X-Ray) , Post Procedure Clinical Photograph	No	No	Yes	No	No	4
251	Secondary	Orthopaedics - Phase 3	18400000019	Arthroscopic Meniscus Repair / Meniscectomy	12000	12000	11400	10200	Surgical	Not Reserved	No	No	0	Detailed Clinical Notes , Mri	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra-Op Clinical Photograph , Post Procedure Clinical Photograph	No	No	Yes	No	No	2

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
252	Secondary	General Medicine - Phase 3	18340000101	Ascites-HDU	2000	2000	1900	1700	Medical	Not Reserved	No	No	0	Cbc , Detailed Clinical Notes , Lft , Usg-Abdomen	Ascitic Fluid Analysis And Culture Report , Detailed Discharge Summary	No	No	Yes	No	No	Not Applicable(NA)
253	Secondary	Paediatric Medical management - Phase 3	18420000121	Ascites-HDU	2000	2000	1900	1700	Medical	Not Reserved	No	No	0	Cbc , Detailed Clinical Notes , Lft , Usg-Abdomen	Ascitic Fluid Analysis And Culture Report , Detailed Discharge Summary	No	No	Yes	No	No	Not Applicable(NA)
254	Secondary	Paediatric Medical management - Phase 3	18420000122	Ascites-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	No	No	0	Cbc , Detailed Clinical Notes , Lft , Usg-Abdomen	Ascitic Fluid Analysis And Culture Report , Detailed Discharge Summary	No	No	Yes	No	No	Not Applicable(NA)
255	Secondary	General Medicine - Phase 3	18340000102	Ascites-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	No	No	0	Cbc , Detailed Clinical Notes , Lft , Usg-Abdomen	Ascitic Fluid Analysis And Culture Report , Detailed Discharge Summary	No	No	Yes	No	No	Not Applicable(NA)
256	Secondary	Paediatric Medical management - Phase 3	18420000123	Ascites-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	No	No	0	Cbc , Detailed Clinical Notes , Lft , Usg-Abdomen	Ascitic Fluid Analysis And Culture Report , Detailed Discharge Summary	No	No	Yes	No	No	Not Applicable(NA)
257	Secondary	General Medicine - Phase 3	18340000103	Ascites-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	No	No	0	Cbc , Detailed Clinical Notes , Lft , Usg-Abdomen	Ascitic Fluid Analysis And Culture Report , Detailed Discharge Summary	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
258	Secondary	General Medicine - Phase 3	18340000104	Ascites-Routine Ward	1000	1000	950	850	Medical	Not Reserved	No	No	0	Cbc , Detailed Clinical Notes , Lft , Usg-Abdomen	Ascitic Fluid Analysis And Culture Report , Detailed Discharge Summary	No	No	Yes	No	No	Not Applicable(NA)
259	Secondary	Paediatric Medical management - Phase 3	18420000124	Ascites-Routine Ward	1000	1000	950	850	Medical	Not Reserved	No	No	0	Cbc , Detailed Clinical Notes , Lft , Usg-Abdomen	Ascitic Fluid Analysis And Culture Report , Detailed Discharge Summary	No	No	Yes	No	No	Not Applicable(NA)
260	Secondary	General Medicine - Phase 3	18340000105	Asthma-Acute asthmatic attack-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
261	Secondary	Paediatric Medical management - Phase 3	18420000125	Asthma-Acute asthmatic attack-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
262	Secondary	General Medicine - Phase 3	18340000106	Asthma-Acute asthmatic attack-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
263	Secondary	Paediatric Medical management - Phase 3	18420000126	Asthma-Acute asthmatic attack-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
264	Secondary	Paediatric Medical management - Phase 3	18420000127	Asthma-Acute asthmatic attack-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
265	Secondary	General Medicine - Phase 3	18340000107	Asthma-Acute asthmatic attack-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
266	Secondary	Paediatric Medical management - Phase 3	18420000128	Asthma-Acute asthmatic attack-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
267	Secondary	General Medicine - Phase 3	18340000108	Asthma-Acute asthmatic attack-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
268	Secondary	Paediatric Medical management - Phase 3	18420000129	Asthma-Status asthmaticus-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
269	Secondary	General Medicine - Phase 3	18340000109	Asthma-Status asthmaticus-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
270	Secondary	Paediatric Medical management - Phase 3	18420000130	Asthma-Status asthmaticus-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
271	Secondary	General Medicine - Phase 3	18340000110	Asthma-Status asthmaticus-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
272	Secondary	Paediatric Medical management - Phase 3	18420000131	Asthma-Status asthmaticus-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
273	Secondary	General Medicine - Phase 3	18340000111	Asthma-Status asthmaticus-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
274	Secondary	General Medicine - Phase 3	18340000112	Asthma-Status asthmaticus-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
275	Secondary	Paediatric Medical management - Phase 3	18420000132	Asthma-Status asthmaticus-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
276	Secondary	Paediatric Medical management - Phase 3	18420000133	Atrial Fibrillation -HDU	2000	2000	1900	1700	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Ecg , Serum Electrolytes	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done , Post Treatment Ecg	No	No	Yes	No	No	Not Applicable(NA)
277	Secondary	General Medicine - Phase 3	18340000113	Atrial Fibrillation -HDU	2000	2000	1900	1700	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Ecg , Serum Electrolytes	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done , Post Treatment Ecg	No	No	Yes	No	No	Not Applicable(NA)
278	Secondary	Paediatric Medical management - Phase 3	18420000134	Atrial Fibrillation -ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Ecg , Serum Electrolytes	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done , Post Treatment Ecg	No	No	Yes	No	No	Not Applicable(NA)
279	Secondary	General Medicine - Phase 3	18340000114	Atrial Fibrillation -ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Ecg , Serum Electrolytes	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done , Post Treatment Ecg	No	No	Yes	No	No	Not Applicable(NA)
280	Secondary	General Medicine - Phase 3	18340000115	Atrial Fibrillation -ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Ecg , Serum Electrolytes	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done , Post Treatment Ecg	No	No	Yes	No	No	Not Applicable(NA)
281	Secondary	Paediatric Medical management - Phase 3	18420000135	Atrial Fibrillation -ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Ecg , Serum Electrolytes	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done , Post Treatment Ecg	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
282	Secondary	General Medicine - Phase 3	18340000116	Atrial Fibrillation -Routine Ward	1000	1000	950	850	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Ecg , Serum Electrolytes	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done , Post Treatment Ecg	No	No	Yes	No	No	Not Applicable(NA)
283	Secondary	Paediatric Medical management - Phase 3	18420000136	Atrial Fibrillation -Routine Ward	1000	1000	950	850	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Ecg , Serum Electrolytes	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done , Post Treatment Ecg	No	No	Yes	No	No	Not Applicable(NA)
284	Secondary	Mental Disorders Packages - Phase 3	18500000001	Behavioural syndromes associated with physiological disturbances and physical factors-HDU	2000	2000	1900	1700	Medical	Reserved	No	No	0	Detailed History With Chronicity	Detailed Discharge Summary , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
285	Secondary	Mental Disorders Packages - Phase 3	18500000002	Behavioural syndromes associated with physiological disturbances and physical factors-ICU - With Ventilator	3000	3000	2850	2550	Medical	Reserved	No	No	0	Detailed History With Chronicity	Detailed Discharge Summary , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
286	Secondary	Mental Disorders Packages - Phase 3	18500000003	Behavioural syndromes associated with physiological disturbances and physical factors-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Reserved	No	No	0	Detailed History With Chronicity	Detailed Discharge Summary , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
287	Secondary	Mental Disorders Packages - Phase 3	18500000004	Behavioural syndromes associated with physiological disturbances and physical factors-Routine Ward	1000	1000	950	850	Medical	Reserved	No	No	0	Detailed History With Chronicity	Detailed Discharge Summary , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
288	Secondary	General Medicine - Phase 3	18340000117	Blood transfusion-Blood component including platelet transfusion (RDP, PC, SDP)	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Blood Group , Clinical Notes With Planned Line Of Treatment , Complete Hemogram	Detailed Discharge Summary , Detailed Icps , Post Treatment Complete Hemogram	No	No	Yes	No	Yes	1
289	Secondary	Paediatric Medical management - Phase 3	18420000137	Blood transfusion-Blood component including platelet transfusion (RDP, PC, SDP)	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Blood Group , Clinical Notes With Planned Line Of Treatment , Complete Hemogram	Detailed Discharge Summary , Detailed Icps , Post Treatment Complete Hemogram	No	No	Yes	No	Yes	1
290	Secondary	General Medicine - Phase 3	18340000118	Whole Blood transfusion	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Blood Group , Clinical Notes With Planned Line Of Treatment , Complete Hemogram	Detailed Discharge Summary , Detailed Icps , Post Treatment Complete Hemogram	No	No	Yes	No	Yes	1
291	Secondary	Paediatric Medical management - Phase 3	18420000138	Whole Blood transfusion	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Blood Group , Clinical Notes With Planned Line Of Treatment , Complete Hemogram	Detailed Discharge Summary , Detailed Icps , Post Treatment Complete Hemogram	No	No	Yes	No	Yes	1
292	Secondary	Orthopaedics - Phase 3	18400000020	Bone Tumour (benign) curettage / Excision and bone grafting	20000	20000	19000	17000	Surgical	Not Reserved	No	No	0	Biopsy , Clinical Photograph Of Affected Part , Detailed Clinical Notes , X-Ray/Mri (Affected Part)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Hpe Of Curreted Tissue , Post Procedure (X-Ray) , Post Procedure Clinical Photograph (Donor And Recipient Sites)	No	No	Yes	No	No	4
293	Secondary	Orthopaedics - Phase 3	18400000021	Bone grafting for Non union	10000	10000	9500	8500	Surgical	Not Reserved	Yes	No	0	Clinical Notes Of Earlier Surgery , Clinical Photograph , X-Ray (Affected Joint)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure (X-Ray) , Post Procedure Clinical Photograph (Donor And Recipient Sites)	No	No	Yes	No	No	3

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College& Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
294	Secondary	General Medicine - Phase 3	18340000119	Bronchiectasis-HDU	2000	2000	1900	1700	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , X-Ray (Chest)	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done , Post Treatment X-Ray/Radiological Evidence	No	No	Yes	No	No	Not Applicable(NA)
295	Secondary	General Medicine - Phase 3	18340000120	Bronchiectasis-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , X-Ray (Chest)	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done , Post Treatment X-Ray/Radiological Evidence	No	No	Yes	No	No	Not Applicable(NA)
296	Secondary	General Medicine - Phase 3	18340000121	Bronchiectasis-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , X-Ray (Chest)	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done , Post Treatment X-Ray/Radiological Evidence	No	No	Yes	No	No	Not Applicable(NA)
297	Secondary	General Medicine - Phase 3	18340000122	Bronchiectasis-Routine Ward	1000	1000	950	850	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , X-Ray (Chest)	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done , Post Treatment X-Ray/Radiological Evidence	No	No	Yes	No	No	Not Applicable(NA)
298	Secondary	Obstetrics & Gynaecology - Phase 3	18380000005	Burch-Abdominal	30000	30000	28500	25500	Surgical	Not Reserved	Yes	No	0	Admission Notes Comprising Of History And Examination With Indications For The Procedure , Relevant Investigations (Establishing Diagnosis) , Urodynamic Studies (Optional)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra-Operative Photograph , Progress Notes	No	No	Yes	No	No	5
299	Secondary	Obstetrics & Gynaecology - Phase 3	18380000006	Burch-Laparoscopic	30000	30000	28500	25500	Surgical	Not Reserved	Yes	No	0	Admission Notes Comprising Of History And Examination With Indications For The Procedure , Relevant Investigations (Establishing Diagnosis) , Urodynamic Studies (Optional)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra-Operative Photograph , Progress Notes	No	No	Yes	No	No	5

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
300	Secondary	Paediatric Medical management - Phase 3	18420000139	CRRT	8000	8000	7600	6800	Medical	Not Reserved	No	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	Yes	No	No	No	Yes	1
301	Secondary	Obstetrics & Gynaecology - Phase 3	18380000007	Caesarean Delivery	11500	11500	10925	9775	Surgical	Reserved	No	No	0	Admission Notes Comprising Of History And Detailed Ante Natal Care Records/ Reasons For Non-Availability Of Anc Records , Cardiotocography (Ctg) , Doppler Stills , Labor Charting , Usg-Obstetric	Detailed Delivery Notes , Detailed Discharge Summary , Progress Notes , Status Of The Child At The Time Of Delivery And At The Time Of Discharge	No	No	Yes	No	No	5
302	Secondary	Obstetrics & Gynaecology - Phase 3	18380000008	Caesarean hysterectomy	20000	20000	19000	17000	Surgical	Reserved	No	No	0	Admission Notes Comprising Of History And Detailed Ante Natal Care Records/ Reasons For Non-Availability Of Anc Records , Admission Notes Comprising Of History And Examination (Clearly Indicating Medical Management Tried And Failed Or Not Indicated With Reason If Failed Documents Proving Duration Of Treatment And Failure. The Medical Management Should Have	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopath Of Uterus Removed , Pre-Op Pic Of Specimen Removed , Progress Notes , Status Of The Child At The Time Of Delivery And At The Time Of Discharge	No	No	Yes	No	No	5
303	Secondary	Ophthalmology - Phase 3	18390000001	Capsulotomy (YAG)	1500	1500	1425	1275	Surgical	Not Reserved	No	No	0	Clinical Notes Detailing When Was Cataract Surgery Was Done And Notes Mentioning Indication For This Procedure With Vision And Fundus , Clinical Photograph	Bar-Code Of Iol , Detailed Discharge Summary , Detailed Procedure Notes , Still Image Of The Procedure With Patient Id And Date	No	No	Yes	No	Yes	1
304	Secondary	General Medicine - Phase 3	18340000123	Cardiac Tamponade -HDU	2000	2000	1900	1700	Medical	Not Reserved	No	No	0	2-D Echo , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure Notes , Fluid Aspirated Report , Post Treatment 2-D Echo	No	No	Yes	No	No	Not Applicable(NA)
305	Secondary	General Medicine - Phase 3	18340000124	Cardiac Tamponade -ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	No	No	0	2-D Echo , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure Notes , Fluid Aspirated Report , Post Treatment 2-D Echo	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
306	Secondary	General Medicine - Phase 3	18340000125	Cardiac Tamponade -ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	No	No	0	2-D Echo , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure Notes , Fluid Aspirated Report , Post Treatment 2-D Echo	No	No	Yes	No	No	Not Applicable(NA)
307	Secondary	General Medicine - Phase 3	18340000126	Cardiac Tamponade -Routine Ward	1000	1000	950	850	Medical	Not Reserved	No	No	0	2-D Echo , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure Notes , Fluid Aspirated Report , Post Treatment 2-D Echo	No	No	Yes	No	No	Not Applicable(NA)
308	Secondary	Ophthalmology - Phase 3	18390000002	Cataract surgery-Phaco emulsification with foldable hydrophobic acrylic IOL	7500	7500	7125	6375	Surgical	Reserved	No	No	0	Clinical Notes Detailing Visual Impairment (Best Corrected Visual Acuity- Bcva) Of Cataract , Clinical Photograph Of Affected Part , Ocular Biometry- A Scan , Ocular Biometry- Ketometry	Bar-Code Of Iol , Detailed Discharge Summary , Detailed Operative Notes , Still Image Of The Procedure With Patient Id And Date	No	No	Yes	No	Yes	1
309	Secondary	Ophthalmology - Phase 3	18390000003	Cataract surgery-SICS with non-foldable IOL	5000	5000	4750	4250	Surgical	Reserved	No	No	0	Clinical Notes Detailing Visual Impairment (Best Corrected Visual Acuity- Bcva) Of Cataract , Clinical Photograph Of Affected Part , Ocular Biometry- A Scan , Ocular Biometry- Ketometry	Bar-Code Of Iol , Detailed Discharge Summary , Detailed Operative Notes , Still Image Of The Procedure With Patient Id And Date	No	No	Yes	No	Yes	1
310	Secondary	Paediatric Medical management - Phase 3	18420000140	Celiac disease-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
311	Secondary	General Medicine - Phase 3	18340000127	Celiac disease-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
312	Secondary	General Medicine - Phase 3	18340000128	Celiac disease-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
313	Secondary	Paediatric Medical management - Phase 3	18420000141	Celiac disease-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
314	Secondary	Paediatric Medical management - Phase 3	18420000142	Celiac disease-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
315	Secondary	General Medicine - Phase 3	18340000129	Celiac disease-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
316	Secondary	Paediatric Medical management - Phase 3	18420000143	Celiac disease-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
317	Secondary	General Medicine - Phase 3	18340000130	Celiac disease-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
318	Secondary	Paediatric Medical management - Phase 3	18420000144	Cerebral herniation-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
319	Secondary	General Medicine - Phase 3	18340000131	Cerebral herniation-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
320	Secondary	General Medicine - Phase 3	18340000132	Cerebral herniation-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
321	Secondary	Paediatric Medical management - Phase 3	18420000145	Cerebral herniation-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
322	Secondary	Paediatric Medical management - Phase 3	18420000146	Cerebral herniation-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
323	Secondary	General Medicine - Phase 3	18340000133	Cerebral herniation-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
324	Secondary	Paediatric Medical management - Phase 3	18420000147	Cerebral herniation-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
325	Secondary	General Medicine - Phase 3	18340000134	Cerebral herniation-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Electrocardiograph (ECG) tests , Supporting Investigations , X-Ray	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
326	Secondary	General Medicine - Phase 3	18340000135	Cerebral sino-venous thrombosis / Stroke-Acute heamorrhagic stroke-HDU	2000	2000	1900	1700	Medical	Not Reserved	No	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Angiography , Clinical Notes Detailing History , Complete blood count (CBC) , Supporting Investigations , X-Ray	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
327	Secondary	General Medicine - Phase 3	18340000136	Cerebral sino-venous thrombosis / Stroke-Acute heamorrhagic stroke-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	No	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
328	Secondary	General Medicine - Phase 3	18340000137	Cerebral sino-venous thrombosis / Stroke-Acute heamorrhagic stroke-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	No	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
329	Secondary	General Medicine - Phase 3	18340000138	Cerebral sino-venous thrombosis / Stroke-Acute heamorrhagic stroke-Routine Ward	1000	1000	950	850	Medical	Not Reserved	No	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
330	Secondary	General Medicine - Phase 3	18340000139	Cerebral sino-venous thrombosis / Stroke-Acute Ischemic stroke-HDU	2000	2000	1900	1700	Medical	Not Reserved	No	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
331	Secondary	General Medicine - Phase 3	18340000140	Cerebral sino-venous thrombosis / Stroke-Acute ischemic stroke-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	No	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
332	Secondary	General Medicine - Phase 3	18340000141	Cerebral sino-venous thrombosis / Stroke-Acute ischemic stroke-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	No	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
333	Secondary	General Medicine - Phase 3	18340000142	Cerebral sino-venous thrombosis / Stroke-Acute ischemic stroke-Routine Ward	1000	1000	950	850	Medical	Not Reserved	No	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
334	Secondary	General Medicine - Phase 3	18340000143	Cerebral sino-venous thrombosis / Stroke-Acute stroke-HDU	2000	2000	1900	1700	Medical	Not Reserved	No	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
335	Secondary	General Medicine - Phase 3	18340000144	Cerebral sino-venous thrombosis / Stroke-Acute stroke-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	No	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
336	Secondary	General Medicine - Phase 3	18340000145	Cerebral sino-venous thrombosis / Stroke-Acute stroke-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	No	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
337	Secondary	General Medicine - Phase 3	18340000146	Cerebral sino-venous thrombosis / Stroke-Acute stroke-Routine Ward	1000	1000	950	850	Medical	Not Reserved	No	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
338	Secondary	General Medicine - Phase 3	18340000147	Cerebral sino-venous thrombosis / Stroke-Cerebral sino-venous thrombosis-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
339	Secondary	General Medicine - Phase 3	18340000148	Cerebral sino-venous thrombosis / Stroke-Cerebral sino-venous thrombosis-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
340	Secondary	General Medicine - Phase 3	18340000149	Cerebral sino-venous thrombosis / Stroke-Cerebral sino-venous thrombosis-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
341	Secondary	General Medicine - Phase 3	18340000150	Cerebral sino-venous thrombosis / Stroke-Cerebral sino-venous thrombosis-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
342	Secondary	General Medicine - Phase 3	18340000151	Cerebrovascular accident-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
343	Secondary	General Medicine - Phase 3	18340000152	Cerebrovascular accident-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
344	Secondary	General Medicine - Phase 3	18340000153	Cerebrovascular accident-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
345	Secondary	General Medicine - Phase 3	18340000154	Cerebrovascular accident-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
346	Secondary	Ophthalmology - Phase 3	18390000004	Chalazion Removal	2000	2000	1900	1700	Surgical	Not Reserved	No	No	0	Clinical Photograph , Doctor'S Note	Detailed Discharge Summary , Pathology Report , Still Image Of The Patient Undergoing The Procedure With Date Stamp	No	No	Yes	No	Yes	1
347	Secondary	Paediatric Medical management - Phase 3	18420000148	Chikungunya fever-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
348	Secondary	General Medicine - Phase 3	18340000155	Chikungunya fever-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
349	Secondary	General Medicine - Phase 3	18340000156	Chikungunya fever-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
350	Secondary	Paediatric Medical management - Phase 3	18420000149	Chikungunya fever-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
351	Secondary	General Medicine - Phase 3	18340000157	Chikungunya fever-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
352	Secondary	Paediatric Medical management - Phase 3	18420000150	Chikungunya fever-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
353	Secondary	General Medicine - Phase 3	18340000158	Chikungunya fever-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
354	Secondary	Paediatric Medical management - Phase 3	18420000151	Chikungunya fever-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
355	Secondary	Obstetrics & Gynaecology - Phase 3	18380000009	Chorionic villus sampling	14500	14500	13775	12325	Surgical	Not Reserved	Yes	No	0	Admission Notes Comprising Of History And Examination With Indications For The Procedure , Relevant Investigations (Establishing Diagnosis)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Progress Notes , Report Of Chorionic Villi Sampling	No	No	Yes	No	Yes	1
356	Secondary	Paediatric Medical management - Phase 3	18420000152	Chronic Hepatitis -HDU	2000	2000	1900	1700	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Lft , Usg- Whole Abdomen	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
357	Secondary	General Medicine - Phase 3	18340000159	Chronic Hepatitis -HDU	2000	2000	1900	1700	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Lft , Usg- Whole Abdomen	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
358	Secondary	Paediatric Medical management - Phase 3	18420000153	Chronic Hepatitis -ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Lft , Usg- Whole Abdomen	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
359	Secondary	General Medicine - Phase 3	18340000160	Chronic Hepatitis -ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Lft , Usg- Whole Abdomen	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College& Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
360	Secondary	Paediatric Medical management - Phase 3	18420000154	Chronic Hepatitis -ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Lft , Usg- Whole Abdomen	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
361	Secondary	General Medicine - Phase 3	18340000161	Chronic Hepatitis -ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Lft , Usg- Whole Abdomen	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
362	Secondary	Paediatric Medical management - Phase 3	18420000155	Chronic Hepatitis -Routine Ward	1000	1000	950	850	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Lft , Usg- Whole Abdomen	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
363	Secondary	General Medicine - Phase 3	18340000162	Chronic Hepatitis -Routine Ward	1000	1000	950	850	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Lft , Usg- Whole Abdomen	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
364	Secondary	Paediatric Medical management - Phase 3	18420000156	Chronic cough-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Planned Line Of Management , Clinical Notes Detailing History And Earlier Treatment Done	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
365	Secondary	Paediatric Medical management - Phase 3	18420000157	Chronic cough-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Planned Line Of Management , Clinical Notes Detailing History And Earlier Treatment Done	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
366	Secondary	Paediatric Medical management - Phase 3	18420000158	Chronic cough-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Planned Line Of Management , Clinical Notes Detailing History And Earlier Treatment Done	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
367	Secondary	Paediatric Medical management - Phase 3	18420000159	Chronic cough-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Planned Line Of Management , Clinical Notes Detailing History And Earlier Treatment Done	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
368	Secondary	Otorhinolaryngology (ENT) - Phase 3	18330000006	Clinic based therapeutic interventions of ENT-Biopsy	1200	1200	1140	1020	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Examination Findings , Nasoendoscopy/Nasal Endoscopy	Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	No	Not Applicable(NA)
369	Secondary	Otorhinolaryngology (ENT) - Phase 3	18330000007	Clinic based therapeutic interventions of ENT-Intratympanic injections	1200	1200	1140	1020	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Examination Findings , Nasoendoscopy/Nasal Endoscopy	Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	No	Not Applicable(NA)
370	Secondary	Otorhinolaryngology (ENT) - Phase 3	18330000008	Clinic based therapeutic interventions of ENT-Turbinate reduction	1200	1200	1140	1020	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Examination Findings , Nasoendoscopy/Nasal Endoscopy	Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	No	Not Applicable(NA)
371	Secondary	Otorhinolaryngology (ENT) - Phase 3	18330000009	Clinic based therapeutic interventions of ENT-Wide bore aspiration	1200	1200	1140	1020	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Examination Findings , Nasoendoscopy/Nasal Endoscopy	Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
372	Secondary	Otorhinolaryngology (ENT) - Phase 3	18330000010	Closed reduction / intermaxillary fixation for fracture of maxilla / mandible / zygoma-Closed reduction and intermaxillary fixation for fracture of mandible	9200	9200	8740	7820	Surgical	Not Reserved	No	No	0	Circumstances That Led To Fracture , Fir/Mlc , X-Ray/Ct	Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	Yes	1
373	Secondary	Otorhinolaryngology (ENT) - Phase 3	18330000011	Closed reduction / intermaxillary fixation for fracture of maxilla / mandible / zygoma-Closed reduction for fracture of mandible	9200	9200	8740	7820	Surgical	Not Reserved	No	No	0	Circumstances That Led To Fracture , Fir/Mlc , X-Ray/Ct	Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	Yes	1
374	Secondary	Otorhinolaryngology (ENT) - Phase 3	18330000012	Closed reduction / intermaxillary fixation for fracture of maxilla / mandible / zygoma-Closed reduction for fracture of maxilla	9200	9200	8740	7820	Surgical	Not Reserved	Yes	No	0	Circumstances That Led To Fracture , Fir/Mlc , X-Ray/Ct	Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	Yes	1
375	Secondary	Otorhinolaryngology (ENT) - Phase 3	18330000013	Closed reduction / intermaxillary fixation for fracture of maxilla / mandible / zygoma-Closed reduction for fracture of zygoma	9200	9200	8740	7820	Surgical	Not Reserved	No	No	0	Circumstances That Led To Fracture , Fir/Mlc , X-Ray/Ct	Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	Yes	1
376	Secondary	Orthopaedics - Phase 3	18400000022	Closed reduction of joint dislocation-Elbow	5500	5500	5225	4675	Surgical	Not Reserved	Yes	No	0	Clinical Photograph Of Affected Part , Detailed Clinical Notes , X-Ray (Affected Limb)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure (X-Ray) , Post Procedure Clinical Photograph	No	No	Yes	No	Yes	1
377	Secondary	Orthopaedics - Phase 3	18400000023	Closed reduction of joint dislocation-Hip	7400	7400	7030	6290	Surgical	Not Reserved	Yes	No	0	Clinical Photograph Of Affected Part , Detailed Clinical Notes , X-Ray (Affected Limb)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure (X-Ray) , Post Procedure Clinical Photograph	No	No	Yes	No	Yes	1

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
378	Secondary	Orthopaedics - Phase 3	1840000024	Closed reduction of joint dislocation-Knee	5500	5500	5225	4675	Surgical	Not Reserved	Yes	No	0	Clinical Photograph Of Affected Part , Detailed Clinical Notes , X-Ray (Affected Limb)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure (X-Ray) , Post Procedure Clinical Photograph	No	No	Yes	No	Yes	1
379	Secondary	Orthopaedics - Phase 3	1840000025	Closed reduction of joint dislocation-Shoulder	5500	5500	5225	4675	Surgical	Not Reserved	Yes	No	0	Clinical Photograph Of Affected Part , Detailed Clinical Notes , X-Ray (Affected Limb)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure (X-Ray) , Post Procedure Clinical Photograph	No	No	Yes	No	No	7
380	Secondary	Paediatric Medical management - Phase 3	18420000160	Congestive heart failure-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
381	Secondary	General Medicine - Phase 3	18340000163	Congestive heart failure-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
382	Secondary	Paediatric Medical management - Phase 3	18420000161	Congestive heart failure-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
383	Secondary	General Medicine - Phase 3	18340000164	Congestive heart failure-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
384	Secondary	General Medicine - Phase 3	18340000165	Congestive heart failure-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
385	Secondary	Paediatric Medical management - Phase 3	18420000162	Congestive heart failure-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
386	Secondary	General Medicine - Phase 3	18340000166	Congestive heart failure-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
387	Secondary	Paediatric Medical management - Phase 3	18420000163	Congestive heart failure-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
388	Secondary	Ophthalmology - Phase 3	18390000005	Conjunctival tumour excision including Amniotic Membrane Graft	7000	7000	6650	5950	Surgical	Not Reserved	No	No	0	Clinical Photograph Of Affected Part , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Still Image Of The Procedure With Patient Id And Date	No	No	Yes	No	Yes	1
389	Secondary	Obstetrics & Gynaecology - Phase 3	18380000010	Cordocentesis	14500	14500	13775	12325	Surgical	Not Reserved	Yes	No	0	Admission Notes Comprising Of History And Examination With Indications For The Procedure , Relevant Investigations (Establishing Diagnosis)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra-Operative Photograph , Progress Notes , Report Of Cordocentesis	No	No	Yes	No	Yes	1

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
390	Secondary	Ophthalmology - Phase 3	18390000006	Corneal / Scleral Patch Graft	3000	3000	2850	2550	Surgical	Not Reserved	No	No	0	Pre-Op Clinical Photograph	Detailed Operative Notes , Still Image Of The Patient Undergoing The Procedure With Date Stamp	No	No	Yes	No	No	3
391	Secondary	Ophthalmology - Phase 3	18390000007	Corneal Collagen Crosslinking	9000	9000	8550	7650	Surgical	Not Reserved	No	No	0	Pentacam Progression Maps 3 To 6 Months Apart	Still Image Of The Patient Undergoing The Procedure With Date Stamp	No	No	Yes	No	Yes	1
392	Secondary	Ophthalmology - Phase 3	18390000008	Corneal Grafting	8500	8500	8075	7225	Surgical	Not Reserved	No	No	0	Detailed Clinical Notes	Still Image Of The Patient Undergoing The Procedure With Date Stamp	No	No	Yes	No	Yes	1
393	Secondary	Ophthalmology - Phase 3	18390000009	Corneal Grafting-Corneal Graft Follow Up Package	2000	2000	1900	1700	Medical	Not Reserved	No	No	0	Clinical Notes Detailing Indication For Corneal Grafting , Clinical Photograph , Plan For Lab Investigation Of Host Tissue (Hpe/ Microbiology/Other) , Supporting Investigations	Detailed Discharge Summary , Detailed Operative Notes , Still Image Of The Procedure With Patient Id And Date	No	No	No	Yes	Yes	1
394	Secondary	Ophthalmology - Phase 3	18390000010	Corneal Ulcer Management	4000	4000	3800	3400	Surgical	Not Reserved	No	No	0	Clinical Photograph	Still Image Of The Patient Undergoing The Procedure With Date Stamp	No	No	Yes	No	No	5
395	Secondary	Ophthalmology - Phase 3	18390000011	Corneo / Scleral / Corneo scleral tear repair	11500	11500	10925	9775	Surgical	Not Reserved	No	No	0	Clinical Photograph , Detailed Clinical Notes , Fir/Mic , Usg-B Scan	Bar-Code Of Intraocular Lens Used , Detailed Discharge Summary , Detailed Operative Notes , Still Image Of The Procedure With Patient Id And Date	No	No	Yes	No	No	2

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
396	Secondary	Orthopaedics - Phase 3	1840000026	Correction of club foot per cast	3000	3000	2850	2550	Surgical	Not Reserved	Yes	No	0	Clinical Photograph Of Affected Part, Detailed Clinical Notes , X-Ray	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Clinical Photograph With Pop Cast	No	No	Yes	No	Yes	1
397	Secondary	Orthopaedics - Phase 3	1840000027	Corrective Surgery for foot deformities-Other foot deformities	15000	15000	14250	12750	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , X-Ray Film With Report	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure (X-Ray) With Reports	No	No	Yes	No	No	5
398	Secondary	Orthopaedics - Phase 3	1840000028	Corrective Surgery for foot deformities-Vertical Talus	15000	15000	14250	12750	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , X-Ray Film With Report	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure (X-Ray) With Reports	No	No	Yes	No	No	5
399	Secondary	Orthopaedics - Phase 3	1840000029	Corrective Surgery in Club Foot / JESS Fixator	20000	20000	19000	17000	Surgical	Not Reserved	Yes	No	0	Clinical Notes With Planned Line Of Treatment , X-Ray Film With Report	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure (X-Ray) With Reports	No	No	Yes	No	Yes	1
400	Secondary	Paediatric Medical management - Phase 3	18420000164	Cyanotic spells with CHD-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	2-D Echo , Abg , Clinical Notes Detailing Birth And Subsequent History , Clinical Notes With Planned Line Of Treatment , Investigation Reports	Detailed Discharge Summary , Detailed Icps , Evidence Of All Investigations Done (Including 2d Echo)	No	No	Yes	No	No	Not Applicable(NA)
401	Secondary	Paediatric Medical management - Phase 3	18420000165	Cyanotic spells with Chest infection-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Cbc , Clinical Notes Detailing Birth And Subsequent History , Clinical Notes With Planned Line Of Treatment , Investigation Reports , X-Ray (Chest)	Detailed Discharge Summary , Detailed Icps , Post Treatment Cbc , Post Treatment X-Ray (Chest)	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
402	Secondary	Paediatric Medical management - Phase 3	18420000166	Cyanotic spells with Sepsis-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Abg , Cbc , Clinical Notes Detailing Birth And Subsequent History , Clinical Notes With Planned Line Of Treatment , Investigation Reports , Radiological Investigations	Detailed Discharge Summary , Detailed Icps , Post Treatment Cbc And Radiological Investigations	No	No	Yes	No	No	Not Applicable(NA)
403	Secondary	Paediatric Medical management - Phase 3	18420000167	Cyanotic spells with Sepsis-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Abg , Cbc , Clinical Notes Detailing Birth And Subsequent History , Clinical Notes With Planned Line Of Treatment , Investigation Reports , Radiological Investigations	Detailed Discharge Summary , Detailed Icps , Post Treatment Cbc And Radiological Investigations	No	No	Yes	No	No	Not Applicable(NA)
404	Secondary	Paediatric Medical management - Phase 3	18420000168	Cyanotic spells with Sepsis-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Abg , Cbc , Clinical Notes Detailing Birth And Subsequent History , Clinical Notes With Planned Line Of Treatment , Investigation Reports , Radiological Investigations	Detailed Discharge Summary , Detailed Icps , Post Treatment Cbc And Radiological Investigations	No	No	Yes	No	No	Not Applicable(NA)
405	Secondary	Paediatric Medical management - Phase 3	18420000169	Cyanotic spells with Sepsis-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Abg , Cbc , Clinical Notes Detailing Birth And Subsequent History , Clinical Notes With Planned Line Of Treatment , Investigation Reports , Radiological Investigations	Detailed Discharge Summary , Detailed Icps , Post Treatment Cbc And Radiological Investigations	No	No	Yes	No	No	Not Applicable(NA)
406	Secondary	Paediatric Medical management - Phase 3	18420000170	Cyanotic spells-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Abg , Clinical Notes Detailing Birth And Subsequent History , Clinical Notes With Planned Line Of Treatment , Investigation Reports	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
407	Secondary	Obstetrics & Gynaecology - Phase 3	18380000011	Cystocele - Anterior repair	6000	6000	5700	5100	Surgical	Not Reserved	No	No	0	Admission Notes Comprising Of History And Examination With Findings Establishing Cystocele , Clinical Photograph	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra-Operative Photograph , Progress Notes	No	No	Yes	No	No	3

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
408	Secondary	Obstetrics & Gynaecology - Phase 3	1838000012	D&C (Dilatation&curretage)	3000	3000	2850	2550	Surgical	Not Reserved	Yes	No	0	Admission Notes Comprising Of History And Examination With Indications For The Procedure , Relevant Investigations (Establishing Diagnosis) , Usg (Abdomen & Pelvis)- Optional	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Hpe Of Curetted Material , Intra-Operative Photograph , Progress Notes	No	No	Yes	No	Yes	1
409	Secondary	Ophthalmology - Phase 3	1839000012	Canaliculo Dacryocystorhinostomy with Silicon Tube / Stent	10000	10000	9500	8500	Surgical	Not Reserved	No	No	0	Dye Disappearance Test , Probing And Irrigation , Tear Meniscus Height Measurement	Detailed Operative Notes , Still Image Of The Procedure With Patient Id And Date	No	No	Yes	No	No	1
410	Secondary	Ophthalmology - Phase 3	1839000013	Canaliculo Dacryocystorhinostomy without Silicon Tube / Stent	8000	8000	7600	6800	Surgical	Not Reserved	No	No	0	Dye Disappearance Test , Probing And Irrigation , Tear Meniscus Height Measurement	Detailed Operative Notes , Still Image Of The Procedure With Patient Id And Date	No	No	Yes	No	No	1
411	Secondary	Ophthalmology - Phase 3	1839000014	Dacryocystorhinostomy with Silicon Tube / Stent	10000	10000	9500	8500	Surgical	Not Reserved	No	No	0	Biopsy Establishing Lacrimal Cancer , Detailed Clinical Notes , Pre-Op Clinical Photograph	Detailed Discharge Summary , Detailed Operative Notes , Invoice Of Implant/S , Still Image Of The Procedure With Patient Id And Date	No	No	Yes	No	Yes	1
412	Secondary	Ophthalmology - Phase 3	1839000015	Dacryocystorhinostomy without Silicon Tube / Stent	8000	8000	7600	6800	Surgical	Not Reserved	No	No	0	Biopsy Establishing Lacrimal Cancer , Detailed Clinical Notes , Pre-Op Clinical Photograph	Detailed Discharge Summary , Detailed Operative Notes , Invoice Of Implant/S , Still Image Of The Procedure With Patient Id And Date	No	No	Yes	No	Yes	1
413	Secondary	Orthopaedics - Phase 3	1840000030	Debridement & Closure of injuries - contused lacerated wounds-Anti-biotic + dressing - minimum of 2 sessions	3000	3000	2850	2550	Surgical	Not Reserved	Yes	No	0	Clinical Photograph Of Affected Part , Detailed Clinical Notes , X-Ray	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Evidence Of 2 Sessions Dressing , Post Procedure Clinical Photograph	No	No	Yes	No	Yes	1

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
414	Secondary	Orthopaedics - Phase 3	1840000031	Debridement & Closure of injuries - contused lacerated wounds-Anti-biotic + dressing - minimum of 5 sessions	10900	10900	10355	9265	Surgical	Not Reserved	Yes	No	0	Clinical Photograph Of Affected Part, Detailed Clinical Notes, X-Ray	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Evidence Of 5 Sessions Dressing , Post Procedure Clinical Photograph	No	No	Yes	No	No	6
415	Secondary	General Surgery - Phase 3	1835000004	Debridement of Ulcer-General Anesthesia	10000	10000	9500	8500	Surgical	Not Reserved	Yes	No	0	Clinical Photograph Of Affected Part , Detailed Clinical Notes , Evidence Of Confirmed Diagnosis Of Leprosy	Detailed Discharge Summary , Detailed Operative Notes , Post Procedure Clinical Photograph	No	No	Yes	No	Yes	1
416	Secondary	General Surgery - Phase 3	1835000005	Debridement of Ulcer-Local Anesthesia	5000	5000	4750	4250	Surgical	Not Reserved	Yes	No	0	Clinical Photograph Of Affected Part , Detailed Clinical Notes , Evidence Of Confirmed Diagnosis Of Leprosy	Detailed Discharge Summary , Detailed Operative Notes , Post Procedure Clinical Photograph	No	No	Yes	No	Yes	1
417	Secondary	General Medicine - Phase 3	18340000167	Dengue fever-Dengue hemorrhagic fever-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
418	Secondary	Paediatric Medical management - Phase 3	18420000171	Dengue fever-Dengue hemorrhagic fever-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
419	Secondary	Paediatric Medical management - Phase 3	18420000172	Dengue fever-Dengue hemorrhagic fever- ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
420	Secondary	General Medicine - Phase 3	18340000168	Dengue fever-Dengue hemorrhagic fever-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
421	Secondary	Paediatric Medical management - Phase 3	18420000173	Dengue fever-Dengue hemorrhagic fever-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
422	Secondary	General Medicine - Phase 3	18340000169	Dengue fever-Dengue hemorrhagic fever-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
423	Secondary	Paediatric Medical management - Phase 3	18420000174	Dengue fever-Dengue hemorrhagic fever-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
424	Secondary	General Medicine - Phase 3	18340000170	Dengue fever-Dengue hemorrhagic fever-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
425	Secondary	Paediatric Medical management - Phase 3	18420000175	Dengue fever-Dengue shock syndrome-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
426	Secondary	General Medicine - Phase 3	18340000171	Dengue fever-Dengue shock syndrome-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
427	Secondary	General Medicine - Phase 3	18340000172	Dengue fever-Dengue shock syndrome-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
428	Secondary	Paediatric Medical management - Phase 3	18420000176	Dengue fever-Dengue shock syndrome-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
429	Secondary	General Medicine - Phase 3	18340000173	Dengue fever-Dengue shock syndrome-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
430	Secondary	Paediatric Medical management - Phase 3	18420000177	Dengue fever-Dengue shock syndrome-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
431	Secondary	General Medicine - Phase 3	18340000174	Dengue fever-Dengue shock syndrome-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
432	Secondary	Paediatric Medical management - Phase 3	18420000178	Dengue fever-Dengue shock syndrome-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
433	Secondary	Paediatric Medical management - Phase 3	18420000179	Dengue fever-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
434	Secondary	General Medicine - Phase 3	18340000175	Dengue fever-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
435	Secondary	General Medicine - Phase 3	18340000176	Dengue fever-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
436	Secondary	Paediatric Medical management - Phase 3	18420000180	Dengue fever-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
437	Secondary	General Medicine - Phase 3	18340000177	Dengue fever-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
438	Secondary	Paediatric Medical management - Phase 3	18420000181	Dengue fever-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
439	Secondary	Paediatric Medical management - Phase 3	18420000182	Dengue fever-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
440	Secondary	General Medicine - Phase 3	18340000178	Dengue fever-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
441	Secondary	Paediatric Medical management - Phase 3	18420000183	Developmental and behavioral disorders-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
442	Secondary	Paediatric Medical management - Phase 3	18420000184	Developmental and behavioral disorders-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
443	Secondary	Paediatric Medical management - Phase 3	18420000185	Developmental and behavioral disorders-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
444	Secondary	Paediatric Medical management - Phase 3	18420000186	Developmental and behavioral disorders-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
445	Secondary	General Medicine - Phase 3	18340000179	Diabetic Foot -HDU	2000	2000	1900	1700	Medical	Not Reserved	No	No	0	Blood Sugar Level , Cbc , Clinical Photograph , Clinical Profile	Detailed Discharge Summary , Hba1c , Photograph Of The Affected Foot , Post Treatment Blood Sugar Levels	No	No	Yes	No	No	Not Applicable(NA)
446	Secondary	General Medicine - Phase 3	18340000180	Diabetic Foot -ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	No	No	0	Blood Sugar Level , Cbc , Clinical Photograph , Clinical Profile	Detailed Discharge Summary , Hba1c , Photograph Of The Affected Foot , Post Treatment Blood Sugar Levels	No	No	Yes	No	No	Not Applicable(NA)
447	Secondary	General Medicine - Phase 3	18340000181	Diabetic Foot -ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	No	No	0	Blood Sugar Level , Cbc , Clinical Photograph , Clinical Profile	Detailed Discharge Summary , Hba1c , Photograph Of The Affected Foot , Post Treatment Blood Sugar Levels	No	No	Yes	No	No	Not Applicable(NA)
448	Secondary	General Medicine - Phase 3	18340000182	Diabetic Foot -Routine Ward	1000	1000	950	850	Medical	Not Reserved	No	No	0	Blood Sugar Level , Cbc , Clinical Photograph , Clinical Profile	Detailed Discharge Summary , Hba1c , Photograph Of The Affected Foot , Post Treatment Blood Sugar Levels	No	No	Yes	No	No	Not Applicable(NA)
449	Secondary	General Medicine - Phase 3	18340000183	Diabetic ketoacidosis-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
450	Secondary	Paediatric Medical management - Phase 3	18420000187	Diabetic ketoacidosis-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
451	Secondary	General Medicine - Phase 3	18340000184	Diabetic ketoacidosis-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
452	Secondary	Paediatric Medical management - Phase 3	18420000188	Diabetic ketoacidosis-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
453	Secondary	Paediatric Medical management - Phase 3	18420000189	Diabetic ketoacidosis-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
454	Secondary	General Medicine - Phase 3	18340000185	Diabetic ketoacidosis-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
455	Secondary	General Medicine - Phase 3	18340000186	Diabetic ketoacidosis-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
456	Secondary	Paediatric Medical management - Phase 3	18420000190	Diabetic ketoacidosis-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
457	Secondary	Obstetrics & Gynaecology - Phase 3	18380000013	Diagnostic hysteroscopy-With biopsy	6000	6000	5700	5100	Surgical	Not Reserved	Yes	No	0	Admission Notes Comprising Of History And Examination With Indications For The Procedure , Relevant Investigations (Establishing Diagnosis) , Usg-Uterus & Adnexa	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Hpe Pic Of Specimen , Intra-Operative Photograph With Date & Patient Id , Pic Of Gross Specimen Removed , Progress Notes	No	No	Yes	No	No	1
458	Secondary	Obstetrics & Gynaecology - Phase 3	18380000014	Diagnostic hysteroscopy-Without biopsy	6000	6000	5700	5100	Surgical	Not Reserved	Yes	No	0	Admission Notes Comprising Of History And Examination With Indications For The Procedure , Relevant Investigations (Establishing Diagnosis) , Usg-Uterus & Adnexa	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Hpe Pic Of Specimen , Intra-Operative Photograph With Date & Patient Id , Pic Of Gross Specimen Removed , Progress Notes	No	No	Yes	No	No	1
459	Secondary	Paediatric Medical management - Phase 3	18420000191	Diarrhoea-Chronic diarrhoea-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Clinical Notes With Planned Line Of Treatment	Any Other Investigations Done , Detailed Discharge Summary	No	No	Yes	No	No	Not Applicable(NA)
460	Secondary	General Medicine - Phase 3	18340000187	Diarrhoea-Chronic diarrhoea-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Clinical Notes With Planned Line Of Treatment	Any Other Investigations Done , Detailed Discharge Summary	No	No	Yes	No	No	Not Applicable(NA)
461	Secondary	General Medicine - Phase 3	18340000188	Diarrhoea-Chronic diarrhoea-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Clinical Notes With Planned Line Of Treatment	Any Other Investigations Done , Detailed Discharge Summary	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College& Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
462	Secondary	Paediatric Medical management - Phase 3	18420000192	Diarrhoea-Chronic diarrhoea-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Clinical Notes With Planned Line Of Treatment	Any Other Investigations Done , Detailed Discharge Summary	No	No	Yes	No	No	Not Applicable(NA)
463	Secondary	Paediatric Medical management - Phase 3	18420000193	Diarrhoea-Chronic diarrhoea-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Clinical Notes With Planned Line Of Treatment	Any Other Investigations Done , Detailed Discharge Summary	No	No	Yes	No	No	Not Applicable(NA)
464	Secondary	General Medicine - Phase 3	18340000189	Diarrhoea-Chronic diarrhoea-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Clinical Notes With Planned Line Of Treatment	Any Other Investigations Done , Detailed Discharge Summary	No	No	Yes	No	No	Not Applicable(NA)
465	Secondary	General Medicine - Phase 3	18340000190	Diarrhoea-Chronic diarrhoea-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Clinical Notes With Planned Line Of Treatment	Any Other Investigations Done , Detailed Discharge Summary	No	No	Yes	No	No	Not Applicable(NA)
466	Secondary	Paediatric Medical management - Phase 3	18420000194	Diarrhoea-Chronic diarrhoea-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Clinical Notes With Planned Line Of Treatment	Any Other Investigations Done , Detailed Discharge Summary	No	No	Yes	No	No	Not Applicable(NA)
467	Secondary	Paediatric Medical management - Phase 3	18420000195	Diarrhoea-Persistent diarrhoea-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Clinical Notes With Planned Line Of Treatment , Stool Examination Report	Any Other Investigations Done , Detailed Discharge Summary	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College& Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
468	Secondary	General Medicine - Phase 3	18340000191	Diarrohea-Persistent diarrohea-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Clinical Notes With Planned Line Of Treatment , Stool Examination Report	Any Other Investigations Done , Detailed Discharge Summary	No	No	Yes	No	No	Not Applicable(NA)
469	Secondary	General Medicine - Phase 3	18340000192	Diarrohea-Persistent diarrohea-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Clinical Notes With Planned Line Of Treatment , Stool Examination Report	Any Other Investigations Done , Detailed Discharge Summary	No	No	Yes	No	No	Not Applicable(NA)
470	Secondary	Paediatric Medical management - Phase 3	18420000196	Diarrohea-Persistent diarrohea-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Clinical Notes With Planned Line Of Treatment , Stool Examination Report	Any Other Investigations Done , Detailed Discharge Summary	No	No	Yes	No	No	Not Applicable(NA)
471	Secondary	Paediatric Medical management - Phase 3	18420000197	Diarrohea-Persistent diarrohea-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Clinical Notes With Planned Line Of Treatment , Stool Examination Report	Any Other Investigations Done , Detailed Discharge Summary	No	No	Yes	No	No	Not Applicable(NA)
472	Secondary	General Medicine - Phase 3	18340000193	Diarrohea-Persistent diarrohea-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Clinical Notes With Planned Line Of Treatment , Stool Examination Report	Any Other Investigations Done , Detailed Discharge Summary	No	No	Yes	No	No	Not Applicable(NA)
473	Secondary	Paediatric Medical management - Phase 3	18420000198	Diarrohea-Persistent diarrohea-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Clinical Notes With Planned Line Of Treatment , Stool Examination Report	Any Other Investigations Done , Detailed Discharge Summary	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
474	Secondary	General Medicine - Phase 3	18340000194	Diarrhoea-Persistent diarrhoea-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Clinical Notes With Planned Line Of Treatment, Stool Examination Report	Any Other Investigations Done, Detailed Discharge Summary	No	No	Yes	No	No	Not Applicable(NA)
475	Secondary	Obstetrics & Gynaecology - Phase 3	18380000015	Dilation and Evacuation (D&E)	5000	5000	4750	4250	Surgical	Not Reserved	Yes	No	0	Admission Notes Comprising Of History And Examination With Indications For The Procedure, Relevant Investigations (Establishing Diagnosis), Usg-Abdomen & Pelvis	Detailed Discharge Summary, Detailed Procedure/Operative Notes, Hpe Of Evacuated Material, Intra-Operative Photograph, Progress Notes	No	No	Yes	No	Yes	1
476	Secondary	Orthopaedics - Phase 3	18400000032	Disarticulation-Fore quarter	25000	25000	23750	21250	Surgical	Not Reserved	No	No	0	Clinical Photograph Of Affected Part, Detailed Clinical Notes, X-Ray (Affected Limb)	Detailed Discharge Summary, Detailed Procedure/Operative Notes, Post Procedure Clinical Photograph	No	No	Yes	No	No	10
477	Secondary	Orthopaedics - Phase 3	18400000033	Disarticulation-Hind quarter	25000	25000	23750	21250	Surgical	Not Reserved	No	No	0	Clinical Photograph Of Affected Part, Detailed Clinical Notes, X-Ray (Affected Limb)	Detailed Discharge Summary, Detailed Procedure/Operative Notes, Post Procedure Clinical Photograph	No	No	Yes	No	No	10
478	Secondary	Orthopaedics - Phase 3	18400000034	Displaced Clavicle Fracture-Open Reduction Internal Fixation	20000	20000	19000	17000	Surgical	Not Reserved	Yes	No	0	Clinical Notes With Planned Line Of Treatment, X-Ray Film With Report	Detailed Discharge Summary, Detailed Procedure/Operative Notes, Post Procedure (X-Ray) With Reports, Stickers Of Implants Used	No	No	Yes	No	No	4
479	Secondary	General Surgery - Phase 3	18350000006	Diverticulectomy-Excision Duodenal Diverticulum	20000	20000	19000	17000	Surgical	Not Reserved	Yes	No	0	Ct Scan/Endoscopy/Double Balloon Enteroscopy, Detailed Clinical Notes	Detailed Discharge Summary, Detailed Operative Notes, Intra-Op Clinical Photograph, Scar Photograph	No	No	Yes	No	No	5

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
480	Secondary	Orthopaedics - Phase 3	1840000035	Duputryen's Contracture release + rehabilitation	8500	8500	8075	7225	Surgical	Not Reserved	Yes	No	0	Clinical Photograph Of Affected Part, Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Clinical Photograph	No	No	Yes	No	No	4
481	Secondary	Paediatric Medical management - Phase 3	18420000199	Dysentery-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
482	Secondary	General Medicine - Phase 3	18340000195	Dysentery-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
483	Secondary	Paediatric Medical management - Phase 3	18420000200	Dysentery-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
484	Secondary	General Medicine - Phase 3	18340000196	Dysentery-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
485	Secondary	Paediatric Medical management - Phase 3	18420000201	Dysentery-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
486	Secondary	General Medicine - Phase 3	18340000197	Dysentery-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
487	Secondary	Paediatric Medical management - Phase 3	18420000202	Dysentery-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
488	Secondary	General Medicine - Phase 3	18340000198	Dysentery-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
489	Secondary	Paediatric Medical management - Phase 3	18420000203	Dysmorphic children-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
490	Secondary	Paediatric Medical management - Phase 3	18420000204	Dysmorphic children-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
491	Secondary	Paediatric Medical management - Phase 3	18420000205	Dysmorphic children-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
492	Secondary	Paediatric Medical management - Phase 3	18420000206	Dysmorphic children-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
493	Secondary	Obstetrics & Gynaecology - Phase 3	18380000016	EUA for (minor girls / unmarried sexually inactive / victims of sexual abuse)	2000	2000	1900	1700	Medical	Not Reserved	No	No	0	Admission Notes Comprising Of History And Examination With Indications For The Procedure , Patient Consent Form , Relevant Investigations (Establishing Diagnosis)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra-Operative Photograph , Progress Notes	No	No	Yes	No	Yes	1
494	Secondary	Ophthalmology - Phase 3	18390000016	EUA for Confirmation of Pediatric Glaucoma	3000	3000	2850	2550	Surgical	Not Reserved	No	No	0	Detailed Clinical Notes , Other Documentary Evidence	Detailed Discharge Summary With Iop/Fundus/Corneal Diameter , Detailed Operative Notes , Still Image Of The Patient Undergoing The Procedure With Date Stamp	No	No	Yes	No	Yes	1
495	Secondary	Ophthalmology - Phase 3	18390000017	Ectropion correction	5000	5000	4750	4250	Surgical	Not Reserved	No	No	0	Clinical Photograph , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Operative Notes , Still Image Of The Procedure With Patient Id And Date	No	No	Yes	No	Yes	1
496	Secondary	Orthopaedics - Phase 3	18400000036	Elastic nailing for fracture fixation-Femur	16000	16000	15200	13600	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , X-Ray Film With Report	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure (X-Ray) With Reports , Stickers Of Implants Used	No	No	Yes	No	No	4
497	Secondary	Orthopaedics - Phase 3	18400000037	Elastic nailing for fracture fixation-Forearm	16000	16000	15200	13600	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , X-Ray Film With Report	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure (X-Ray) With Reports , Stickers Of Implants Used	No	No	Yes	No	No	4

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
498	Secondary	Orthopaedics - Phase 3	1840000038	Elastic nailing for fracture fixation-Humerus	16000	16000	15200	13600	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , X-Ray Film With Report	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure (X-Ray) With Reports , Stickers Of Implants Used	No	No	Yes	No	No	4
499	Secondary	Obstetrics & Gynaecology - Phase 3	1838000017	Electro Cauterisation / Cryo Surgery	4000	4000	3800	3400	Surgical	Not Reserved	Yes	No	0	Admission Notes Comprising Of History And Examination With Indications For The Procedure , Pap Smear (Optional) , Relevant Investigations (Establishing Diagnosis)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra-Operative Photograph , Progress Notes	No	No	Yes	No	Yes	1
500	Secondary	Mental Disorders Packages - Phase 3	1850000005	Electro Convulsive Therapy (ECT) - per session	3000	3000	2850	2550	Medical	Reserved	No	No	0	Detailed History With Chronicity	Detailed Discharge Summary , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	1
501	Secondary	Paediatric Medical management - Phase 3	18420000207	Electrolyte Imbalance-Hypercalcemia - HDU	2000	2000	1900	1700	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Serum Calcium	Detailed Discharge Summary , Detailed Icps, Detailed Treatment Notes , Evidence Of All Investigations Done , Post Treatment Serum Calcium	No	No	Yes	No	No	Not Applicable(NA)
502	Secondary	General Medicine - Phase 3	18340000199	Electrolyte Imbalance-Hypercalcemia - HDU	2000	2000	1900	1700	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Serum Calcium	Detailed Discharge Summary , Detailed Icps, Detailed Treatment Notes , Evidence Of All Investigations Done , Post Treatment Serum Calcium	No	No	Yes	No	No	Not Applicable(NA)
503	Secondary	General Medicine - Phase 3	18340000200	Electrolyte Imbalance-Hypercalcemia -ICU With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Serum Calcium	Detailed Discharge Summary , Detailed Icps, Detailed Treatment Notes , Evidence Of All Investigations Done , Post Treatment Serum Calcium	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
504	Secondary	Paediatric Medical management - Phase 3	18420000208	Electrolyte Imbalance-Hypercalcemia -ICU With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Serum Calcium	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done , Post Treatment Serum Calcium	No	No	Yes	No	No	Not Applicable(NA)
505	Secondary	Paediatric Medical management - Phase 3	18420000209	Electrolyte Imbalance-Hypercalcemia -ICU Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Serum Calcium	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done , Post Treatment Serum Calcium	No	No	Yes	No	No	Not Applicable(NA)
506	Secondary	General Medicine - Phase 3	18340000201	Electrolyte Imbalance-Hypercalcemia -ICU Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Serum Calcium	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done , Post Treatment Serum Calcium	No	No	Yes	No	No	Not Applicable(NA)
507	Secondary	General Medicine - Phase 3	18340000202	Electrolyte Imbalance-Hypercalcemia - Routine Ward	1000	1000	950	850	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Serum Calcium	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done , Post Treatment Serum Calcium	No	No	Yes	No	No	Not Applicable(NA)
508	Secondary	Paediatric Medical management - Phase 3	18420000210	Electrolyte Imbalance-Hypercalcemia - Routine Ward	1000	1000	950	850	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Serum Calcium	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done , Post Treatment Serum Calcium	No	No	Yes	No	No	Not Applicable(NA)
509	Secondary	General Medicine - Phase 3	18340000203	Electrolyte Imbalance-Hyponatremia - HDU	2000	2000	1900	1700	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Serum Electrolytes	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done , Post Treatment Serum Electrolytes	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
510	Secondary	Paediatric Medical management - Phase 3	18420000211	Electrolyte Imbalance-Hypnatremia - HDU	2000	2000	1900	1700	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Serum Electrolytes	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done , Post Treatment Serum Electrolytes	No	No	Yes	No	No	Not Applicable(NA)
511	Secondary	Paediatric Medical management - Phase 3	18420000212	Electrolyte Imbalance-Hypnatremia -ICU -With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Serum Electrolytes	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done , Post Treatment Serum Electrolytes	No	No	Yes	No	No	Not Applicable(NA)
512	Secondary	General Medicine - Phase 3	18340000204	Electrolyte Imbalance-Hypnatremia -ICU -With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Serum Electrolytes	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done , Post Treatment Serum Electrolytes	No	No	Yes	No	No	Not Applicable(NA)
513	Secondary	General Medicine - Phase 3	18340000205	Electrolyte Imbalance-Hypnatremia -ICU -Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Serum Electrolytes	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done , Post Treatment Serum Electrolytes	No	No	Yes	No	No	Not Applicable(NA)
514	Secondary	Paediatric Medical management - Phase 3	18420000213	Electrolyte Imbalance-Hypnatremia -ICU -Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Serum Electrolytes	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done , Post Treatment Serum Electrolytes	No	No	Yes	No	No	Not Applicable(NA)
515	Secondary	General Medicine - Phase 3	18340000206	Electrolyte Imbalance-Hypnatremia - Routine Ward	1000	1000	950	850	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Serum Electrolytes	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done , Post Treatment Serum Electrolytes	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
516	Secondary	Paediatric Medical management - Phase 3	18420000214	Electrolyte Imbalance-Hyponatremia - Routine Ward	1000	1000	950	850	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Serum Electrolytes	Detailed Discharge Summary , Detailed Icpis , Detailed Treatment Notes , Evidence Of All Investigations Done , Post Treatment Serum Electrolytes	No	No	Yes	No	No	Not Applicable(NA)
517	Secondary	Paediatric Medical management - Phase 3	18420000215	Electrolyte Imbalance-Hypocalcemia -HDU	2000	2000	1900	1700	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Serum Calcium	Detailed Discharge Summary , Detailed Icpis , Detailed Treatment Notes , Evidence Of All Investigations Done , Post Treatment Serum Calcium	No	No	Yes	No	No	Not Applicable(NA)
518	Secondary	General Medicine - Phase 3	18340000207	Electrolyte Imbalance-Hypocalcemia -HDU	2000	2000	1900	1700	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Serum Calcium	Detailed Discharge Summary , Detailed Icpis , Detailed Treatment Notes , Evidence Of All Investigations Done , Post Treatment Serum Calcium	No	No	Yes	No	No	Not Applicable(NA)
519	Secondary	Paediatric Medical management - Phase 3	18420000216	Electrolyte Imbalance-Hypocalcemia -ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Serum Calcium	Detailed Discharge Summary , Detailed Icpis , Detailed Treatment Notes , Evidence Of All Investigations Done , Post Treatment Serum Calcium	No	No	Yes	No	No	Not Applicable(NA)
520	Secondary	General Medicine - Phase 3	18340000208	Electrolyte Imbalance-Hypocalcemia -ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Serum Calcium	Detailed Discharge Summary , Detailed Icpis , Detailed Treatment Notes , Evidence Of All Investigations Done , Post Treatment Serum Calcium	No	No	Yes	No	No	Not Applicable(NA)
521	Secondary	General Medicine - Phase 3	18340000209	Electrolyte Imbalance-Hypocalcemia -ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Serum Calcium	Detailed Discharge Summary , Detailed Icpis , Detailed Treatment Notes , Evidence Of All Investigations Done , Post Treatment Serum Calcium	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
522	Secondary	Paediatric Medical management - Phase 3	18420000217	Electrolyte Imbalance-Hypocalcemia -ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Serum Calcium	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done , Post Treatment Serum Calcium	No	No	Yes	No	No	Not Applicable(NA)
523	Secondary	General Medicine - Phase 3	18340000210	Electrolyte Imbalance-Hypocalcemia - Routine Ward	1000	1000	950	850	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Serum Calcium	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done , Post Treatment Serum Calcium	No	No	Yes	No	No	Not Applicable(NA)
524	Secondary	Paediatric Medical management - Phase 3	18420000218	Electrolyte Imbalance-Hypocalcemia - Routine Ward	1000	1000	950	850	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Serum Calcium	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done , Post Treatment Serum Calcium	No	No	Yes	No	No	Not Applicable(NA)
525	Secondary	Paediatric Medical management - Phase 3	18420000219	Electrolyte Imbalance-Hyponatremia-HDU	2000	2000	1900	1700	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Serum Electrolytes	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done , Post Treatment Serum Electrolytes	No	No	Yes	No	No	Not Applicable(NA)
526	Secondary	General Medicine - Phase 3	18340000211	Electrolyte Imbalance-Hyponatremia-HDU	2000	2000	1900	1700	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Serum Electrolytes	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done , Post Treatment Serum Electrolytes	No	No	Yes	No	No	Not Applicable(NA)
527	Secondary	Paediatric Medical management - Phase 3	18420000220	Electrolyte Imbalance-Hyponatremia-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Serum Electrolytes	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done , Post Treatment Serum Electrolytes	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
528	Secondary	General Medicine - Phase 3	18340000212	Electrolyte Imbalance-Hyponatremia-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Serum Electrolytes	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done , Post Treatment Serum Electrolytes	No	No	Yes	No	No	Not Applicable(NA)
529	Secondary	General Medicine - Phase 3	18340000213	Electrolyte Imbalance-Hyponatremia-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Serum Electrolytes	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done , Post Treatment Serum Electrolytes	No	No	Yes	No	No	Not Applicable(NA)
530	Secondary	Paediatric Medical management - Phase 3	18420000221	Electrolyte Imbalance-Hyponatremia-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Serum Electrolytes	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done , Post Treatment Serum Electrolytes	No	No	Yes	No	No	Not Applicable(NA)
531	Secondary	Paediatric Medical management - Phase 3	18420000222	Electrolyte Imbalance-Hyponatremia-Routine Ward	1000	1000	950	850	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Serum Electrolytes	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done , Post Treatment Serum Electrolytes	No	No	Yes	No	No	Not Applicable(NA)
532	Secondary	General Medicine - Phase 3	18340000214	Electrolyte Imbalance-Hyponatremia-Routine Ward	1000	1000	950	850	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Serum Electrolytes	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done , Post Treatment Serum Electrolytes	No	No	Yes	No	No	Not Applicable(NA)
533	Secondary	Paediatric Medical management - Phase 3	18420000223	Empyema-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Cbc , Clinical Notes With Planned Line Of Treatment , X-Ray (Chest)	Detailed Discharge Summary , Post Treatment X-Ray (Chest)	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
534	Secondary	General Medicine - Phase 3	18340000215	Empyema-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Cbc , Clinical Notes With Planned Line Of Treatment , X-Ray (Chest)	Detailed Discharge Summary , Post Treatment X-Ray (Chest)	No	No	Yes	No	No	Not Applicable(NA)
535	Secondary	Paediatric Medical management - Phase 3	18420000224	Empyema-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Cbc , Clinical Notes With Planned Line Of Treatment , X-Ray (Chest)	Detailed Discharge Summary , Post Treatment X-Ray (Chest)	No	No	Yes	No	No	Not Applicable(NA)
536	Secondary	General Medicine - Phase 3	18340000216	Empyema-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Cbc , Clinical Notes With Planned Line Of Treatment , X-Ray (Chest)	Detailed Discharge Summary , Post Treatment X-Ray (Chest)	No	No	Yes	No	No	Not Applicable(NA)
537	Secondary	General Medicine - Phase 3	18340000217	Empyema-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Cbc , Clinical Notes With Planned Line Of Treatment , X-Ray (Chest)	Detailed Discharge Summary , Post Treatment X-Ray (Chest)	No	No	Yes	No	No	Not Applicable(NA)
538	Secondary	Paediatric Medical management - Phase 3	18420000225	Empyema-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Cbc , Clinical Notes With Planned Line Of Treatment , X-Ray (Chest)	Detailed Discharge Summary , Post Treatment X-Ray (Chest)	No	No	Yes	No	No	Not Applicable(NA)
539	Secondary	General Medicine - Phase 3	18340000218	Empyema-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Cbc , Clinical Notes With Planned Line Of Treatment , X-Ray (Chest)	Detailed Discharge Summary , Post Treatment X-Ray (Chest)	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College& Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
540	Secondary	Paediatric Medical management - Phase 3	1842000226	Empyema-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Cbc , Clinical Notes With Planned Line Of Treatment , X Ray (Chest)	Detailed Discharge Summary , Post Treatment X-Ray (Chest)	No	No	Yes	No	No	Not Applicable(NA)
541	Secondary	General Medicine - Phase 3	1834000219	Bacterial Endocarditis-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	2-D Echo , Cbc , Clinical Notes With Planned Line Of Treatment	Blood Culture Report , Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done , Post Treatment 2-D Echo	No	No	Yes	No	No	Not Applicable(NA)
542	Secondary	Paediatric Medical management - Phase 3	1842000227	Bacterial Endocarditis-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	2-D Echo , Cbc , Clinical Notes With Planned Line Of Treatment	Blood Culture Report , Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done , Post Treatment 2-D Echo	No	No	Yes	No	No	Not Applicable(NA)
543	Secondary	General Medicine - Phase 3	1834000220	Bacterial Endocarditis-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	2-D Echo , Cbc , Clinical Notes With Planned Line Of Treatment	Blood Culture Report , Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done , Post Treatment 2-D Echo	No	No	Yes	No	No	Not Applicable(NA)
544	Secondary	Paediatric Medical management - Phase 3	1842000228	Bacterial Endocarditis-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	2-D Echo , Cbc , Clinical Notes With Planned Line Of Treatment	Blood Culture Report , Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done , Post Treatment 2-D Echo	No	No	Yes	No	No	Not Applicable(NA)
545	Secondary	General Medicine - Phase 3	1834000221	Bacterial Endocarditis-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	2-D Echo , Cbc , Clinical Notes With Planned Line Of Treatment	Blood Culture Report , Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done , Post Treatment 2-D Echo	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College& Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
546	Secondary	Paediatric Medical management - Phase 3	18420000229	Bacterial Endocarditis-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	2-D Echo , Cbc , Clinical Notes With Planned Line Of Treatment	Blood Culture Report , Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done , Post Treatment 2-D Echo	No	No	Yes	No	No	Not Applicable(NA)
547	Secondary	General Medicine - Phase 3	18340000222	Bacterial Endocarditis-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	2-D Echo , Cbc , Clinical Notes With Planned Line Of Treatment	Blood Culture Report , Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done , Post Treatment 2-D Echo	No	No	Yes	No	No	Not Applicable(NA)
548	Secondary	Paediatric Medical management - Phase 3	18420000230	Bacterial Endocarditis-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	2-D Echo , Cbc , Clinical Notes With Planned Line Of Treatment	Blood Culture Report , Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done , Post Treatment 2-D Echo	No	No	Yes	No	No	Not Applicable(NA)
549	Secondary	General Medicine - Phase 3	18340000223	Fungal Endocarditis-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	2-D Echo , Cbc , Clinical Notes With Planned Line Of Treatment	Blood Culture Report , Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done , Post Treatment 2-D Echo	No	No	Yes	No	No	Not Applicable(NA)
550	Secondary	Paediatric Medical management - Phase 3	18420000231	Fungal Endocarditis-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	2-D Echo , Cbc , Clinical Notes With Planned Line Of Treatment	Blood Culture Report , Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done , Post Treatment 2-D Echo	No	No	Yes	No	No	Not Applicable(NA)
551	Secondary	Paediatric Medical management - Phase 3	18420000232	Fungal Endocarditis-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	2-D Echo , Cbc , Clinical Notes With Planned Line Of Treatment	Blood Culture Report , Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done , Post Treatment 2-D Echo	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College& Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
552	Secondary	General Medicine - Phase 3	18340000224	Fungal Endocarditis-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	2-D Echo , Cbc , Clinical Notes With Planned Line Of Treatment	Blood Culture Report , Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done , Post Treatment 2-D Echo	No	No	Yes	No	No	Not Applicable(NA)
553	Secondary	General Medicine - Phase 3	18340000225	Fungal Endocarditis-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	2-D Echo , Cbc , Clinical Notes With Planned Line Of Treatment	Blood Culture Report , Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done , Post Treatment 2-D Echo	No	No	Yes	No	No	Not Applicable(NA)
554	Secondary	Paediatric Medical management - Phase 3	18420000233	Fungal Endocarditis-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	2-D Echo , Cbc , Clinical Notes With Planned Line Of Treatment	Blood Culture Report , Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done , Post Treatment 2-D Echo	No	No	Yes	No	No	Not Applicable(NA)
555	Secondary	Paediatric Medical management - Phase 3	18420000234	Fungal Endocarditis-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	2-D Echo , Cbc , Clinical Notes With Planned Line Of Treatment	Blood Culture Report , Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done , Post Treatment 2-D Echo	No	No	Yes	No	No	Not Applicable(NA)
556	Secondary	General Medicine - Phase 3	18340000226	Fungal Endocarditis-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	2-D Echo , Cbc , Clinical Notes With Planned Line Of Treatment	Blood Culture Report , Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done , Post Treatment 2-D Echo	No	No	Yes	No	No	Not Applicable(NA)
557	Secondary	Ophthalmology - Phase 3	18390000018	Endophthalmitis (excluding Vitrectomy)	8000	8000	7600	6800	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Pre-Op Clinical Photograph	Detailed Discharge Summary , Detailed Operative Notes , Still Image Of The Patient Undergoing The Procedure With Date Stamp	No	No	Yes	No	No	5

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
558	Secondary	Otorhinolaryngology (ENT) - Phase 3	1833000014	Endoscopic DCR	9000	9000	8550	7650	Surgical	Not Reserved	Yes	No	0	Clinical Photograph , Detailed Clinical Notes , Endoscopy	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Endoscopic Photograph , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	Yes	1
559	Secondary	Paediatric Medical management - Phase 3	1842000235	Enteric fever-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
560	Secondary	General Medicine - Phase 3	1834000227	Enteric fever-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
561	Secondary	Paediatric Medical management - Phase 3	1842000236	Enteric fever-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
562	Secondary	General Medicine - Phase 3	1834000228	Enteric fever-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
563	Secondary	Paediatric Medical management - Phase 3	1842000237	Enteric fever-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
564	Secondary	General Medicine - Phase 3	18340000229	Enteric fever-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
565	Secondary	Paediatric Medical management - Phase 3	18420000238	Enteric fever-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
566	Secondary	General Medicine - Phase 3	18340000230	Enteric fever-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
567	Secondary	Ophthalmology - Phase 3	18390000019	Entropion correction	3300	3300	3135	2805	Surgical	Not Reserved	No	No	0	Clinical Photograph , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Operative Notes , Still Image Of The Procedure With Patient Id And Date	No	No	Yes	No	Yes	1
568	Secondary	Ophthalmology - Phase 3	18390000020	Enucleation-With implant	9000	9000	8550	7650	Surgical	Not Reserved	No	No	0	Clinical Notes Establishing Indication And Justifying Enucleation , Clinical Photograph , Investigation Reports , Recommendation/Opinion Of Two Ophthalmologists	Detailed Discharge Summary , Detailed Operative Notes , Evidence Of Specimen Sent For Hpe , Invoice Of Implant/S , Still Image Of The Procedure With Patient Id And Date	No	No	Yes	No	No	2
569	Secondary	Ophthalmology - Phase 3	18390000021	Enucleation-Without implant	8400	8400	7980	7140	Surgical	Not Reserved	No	No	0	Clinical Notes Establishing Indication And Justifying Enucleation , Clinical Photograph , Investigation Reports , Recommendation/Opinion Of Two Ophthalmologists	Detailed Discharge Summary , Detailed Operative Notes , Evidence Of Specimen Sent For Hpe , Intra Procedure Clinical Photograph	No	No	Yes	No	No	2

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant/High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
570	Secondary	Paediatric Medical management - Phase 3	1842000239	Epileptic encephalopathy-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Planned Line Of Management , Clinical Notes Detailing History , Past History Of Epilepsy	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
571	Secondary	General Medicine - Phase 3	1834000231	Epileptic encephalopathy-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Planned Line Of Management , Clinical Notes Detailing History , Past History Of Epilepsy	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
572	Secondary	General Medicine - Phase 3	1834000232	Epileptic encephalopathy-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Planned Line Of Management , Clinical Notes Detailing History , Past History Of Epilepsy	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
573	Secondary	Paediatric Medical management - Phase 3	1842000240	Epileptic encephalopathy-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Planned Line Of Management , Clinical Notes Detailing History , Past History Of Epilepsy	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
574	Secondary	General Medicine - Phase 3	1834000233	Epileptic encephalopathy-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Planned Line Of Management , Clinical Notes Detailing History , Past History Of Epilepsy	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
575	Secondary	Paediatric Medical management - Phase 3	1842000241	Epileptic encephalopathy-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Planned Line Of Management , Clinical Notes Detailing History , Past History Of Epilepsy	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
576	Secondary	Paediatric Medical management - Phase 3	18420000242	Epileptic encephalopathy-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Planned Line Of Management , Clinical Notes Detailing History , Past History Of Epilepsy	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
577	Secondary	General Medicine - Phase 3	18340000234	Epileptic encephalopathy-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Planned Line Of Management , Clinical Notes Detailing History , Past History Of Epilepsy	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
578	Secondary	Otorhinolaryngology (ENT) - Phase 3	18330000015	Epistaxis treatment - packing - Per day	1800	1800	1710	1530	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Clinical Photograph , Detailed Discharge Summary	No	No	Yes	No	No	Not Applicable(NA)
579	Secondary	Ophthalmology - Phase 3	18390000022	Evisceration	4800	4800	4560	4080	Surgical	Not Reserved	No	No	0	Clinical Photograph , Indication For Evisceration , Plan For Lab Investigation Of Host Tissue (Hpe/ Microbiology/Other) , Recommendation/Opinion Of Two Ophthalmologists , Relevant Investigations (Establishing Diagnosis)	Detailed Discharge Summary , Detailed Operative Notes , Evidence Of Specimen Sent For Hpe , Still Image Of The Procedure With Patient Id And Date	No	No	Yes	No	Yes	1
580	Secondary	Orthopaedics - Phase 3	18400000039	Excision Arthroplasty of Femur head	17500	17500	16625	14875	Surgical	Not Reserved	Yes	No	0	Clinical Photograph Of Affected Part , Detailed Clinical Notes , X-Ray	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Clinical Photograph	No	No	Yes	No	No	5
581	Secondary	General Surgery - Phase 3	18350000007	Excision Filarial Scrotum	6500	6500	6175	5525	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Usg	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe)	No	No	Yes	No	No	3

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
582	Secondary	General Surgery - Phase 3	1835000008	Excision Mammary Fistula	14500	14500	13775	12325	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Sono Mammogram	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe)	No	No	Yes	No	No	1
583	Secondary	General Surgery - Phase 3	1835000009	Excision of Bursa	3000	3000	2850	2550	Surgical	Not Reserved	Yes	No	0	Clinical Photograph Of Affected Part , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Clinical Photograph	No	No	Yes	No	No	1
584	Secondary	Orthopaedics - Phase 3	18400000040	Excision of Bursa	3000	3000	2850	2550	Surgical	Not Reserved	Yes	No	0	Clinical Photograph Of Affected Part , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Clinical Photograph	No	No	Yes	No	No	1
585	Secondary	Orthopaedics - Phase 3	18400000041	Excision of Osteochondroma / Exostosis-Exostosis	10000	10000	9500	8500	Surgical	Not Reserved	No	No	0	Clinical Photograph Of Affected Part , Detailed Clinical Notes , X-Ray/Mri (Affected Part)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Hpe Of Removed Tissue , Post Procedure Clinical Photograph	No	No	Yes	No	No	3
586	Secondary	Orthopaedics - Phase 3	18400000042	Excision of Osteochondroma / Exostosis-Osteochondroma	10000	10000	9500	8500	Surgical	Not Reserved	No	No	0	Clinical Notes Detailing Rockwood Type Of Fracture , Justification Of Surgery , X-Ray/Mri	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Hpe Of Removed Tissue , Post Procedure Clinical Photograph	No	No	Yes	No	No	3
587	Secondary	Obstetrics & Gynaecology - Phase 3	18380000018	Excision of Vaginal Septum (vaginal route)	14500	14500	13775	12325	Surgical	Not Reserved	Yes	No	0	Admission Notes Comprising Of History And Examination With Indications For The Procedure , Relevant Investigations (Establishing Diagnosis) , Usg-Abdomen & Pelvis	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra-Operative Photograph , Progress Notes	No	No	Yes	No	No	1

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College& Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
588	Secondary	General Surgery - Phase 3	1835000010	Excision of cyst / Sebaceous Cysts over scrotum-Multiple Cysts	7000	7000	6650	5950	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes	Detailed Discharge Summary , Detailed Operative Notes , Intra-Op Clinical Photograph	No	No	Yes	No	No	1
589	Secondary	General Surgery - Phase 3	1835000011	Excision of cyst / Sebaceous Cysts over scrotum-Single Cyst	2000	2000	1900	1700	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes	Detailed Discharge Summary , Detailed Operative Notes , Intra-Op Clinical Photograph	No	No	Yes	No	No	1
590	Secondary	General Surgery - Phase 3	1835000012	Excision of Sinus and Curettage	5000	5000	4750	4250	Surgical	Not Reserved	Yes	No	0	Clinical Photograph , Detailed Clinical Notes , Imaging Showing Tract Of Sinus	Detailed Discharge Summary , Detailed Operative Notes , Hpe Of Surretted Material , Post Procedure Clinical Photograph	No	No	Yes	No	Yes	1
591	Secondary	Orthopaedics - Phase 3	1840000043	Exploration and Ulnar nerve Repair	9800	9800	9310	8330	Surgical	Not Reserved	Yes	No	0	Clinical Investigations , Ncv (Nerve Conduction Velocity) , Radiological Investigations	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Clinical Photograph	No	No	Yes	No	No	4
592	Secondary	Orthopaedics - Phase 3	1840000044	External fixation of Fracture-Both bones - forearms	20000	20000	19000	17000	Surgical	Not Reserved	Yes	No	0	Clinical Photograph Of Affected Part , Detailed Clinical Notes , X-Ray	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Invoice/Bar-Code Of Implant , Post Procedure Clinical Photograph	No	No	Yes	No	No	4
593	Secondary	Orthopaedics - Phase 3	1840000045	External fixation of Fracture-Long bone	19000	19000	18050	16150	Surgical	Not Reserved	Yes	No	0	Clinical Photograph Of Affected Part , Detailed Clinical Notes , X-Ray	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Invoice/Bar-Code Of Implant , Post Procedure Clinical Photograph	No	No	Yes	No	No	4

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
594	Secondary	Orthopaedics - Phase 3	1840000046	External fixation of Fracture-Pelvis	19000	19000	18050	16150	Surgical	Not Reserved	Yes	No	0	Clinical Photograph Of Affected Part , Detailed Clinical Notes , X-Ray	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Invoice/Bar-Code Of Implant , Post Procedure Clinical Photograph	No	No	Yes	No	No	5
595	Secondary	Orthopaedics - Phase 3	1840000047	External fixation of Fracture-Small bone	14500	14500	13775	12325	Surgical	Not Reserved	Yes	No	0	Clinical Photograph Of Affected Part , Detailed Clinical Notes , X-Ray	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Invoice/Bar-Code Of Implant , Post Procedure Clinical Photograph	No	No	Yes	No	No	3
596	Secondary	Orthopaedics - Phase 3	1840000048	Fasciotomy	10500	10500	9975	8925	Surgical	Not Reserved	Yes	No	0	Clinical Photograph Of Affected Part , Detailed Clinical Notes , Usg	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Clinical Photograph	No	No	Yes	No	No	2
597	Secondary	Paediatric Medical management - Phase 3	18420000243	Febrile seizures / other seizures-Epilepsy-HDU	2000	2000	1900	1700	Medical	Not Reserved	No	No	0	Admission Notes Showing Vitals/ Planned Line Of Management , Clinical Notes Detailing History	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
598	Secondary	Paediatric Medical management - Phase 3	18420000244	Febrile seizures / other seizures-Epilepsy-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	No	No	0	Admission Notes Showing Vitals/ Planned Line Of Management , Clinical Notes Detailing History	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
599	Secondary	Paediatric Medical management - Phase 3	18420000245	Febrile seizures / other seizures-Epilepsy-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	No	No	0	Admission Notes Showing Vitals/ Planned Line Of Management , Clinical Notes Detailing History	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
600	Secondary	Paediatric Medical management - Phase 3	18420000246	Febrile seizures / other seizures-Epilepsy-Routine Ward	1000	1000	950	850	Medical	Not Reserved	No	No	0	Admission Notes Showing Vitals/ Planned Line Of Management , Clinical Notes Detailing History	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
601	Secondary	Paediatric Medical management - Phase 3	18420000247	Febrile seizures / other seizures-Febrile seizures-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Planned Line Of Management , Clinical Notes Detailing History	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
602	Secondary	Paediatric Medical management - Phase 3	18420000248	Febrile seizures / other seizures-Febrile seizures-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Planned Line Of Management , Clinical Notes Detailing History	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
603	Secondary	Paediatric Medical management - Phase 3	18420000249	Febrile seizures / other seizures-Febrile seizures-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Planned Line Of Management , Clinical Notes Detailing History	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
604	Secondary	Paediatric Medical management - Phase 3	18420000250	Febrile seizures / other seizures-Febrile seizures-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Planned Line Of Management , Clinical Notes Detailing History	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
605	Secondary	Paediatric Medical management - Phase 3	18420000251	Febrile seizures / other seizures-Flury of seizures-HDU	2000	2000	1900	1700	Medical	Not Reserved	No	No	0	Admission Notes Showing Vitals/ Planned Line Of Management , Clinical Notes Detailing History	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
606	Secondary	Paediatric Medical management - Phase 3	18420000252	Febrile seizures / other seizures-Flury of seizures-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	No	No	0	Admission Notes Showing Vitals/ Planned Line Of Management , Clinical Notes Detailing History	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
607	Secondary	Paediatric Medical management - Phase 3	18420000253	Febrile seizures / other seizures-Flury of seizures-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	No	No	0	Admission Notes Showing Vitals/ Planned Line Of Management , Clinical Notes Detailing History	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
608	Secondary	Paediatric Medical management - Phase 3	18420000254	Febrile seizures / other seizures-Flury of seizures-Routine Ward	1000	1000	950	850	Medical	Not Reserved	No	No	0	Admission Notes Showing Vitals/ Planned Line Of Management , Clinical Notes Detailing History	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
609	Secondary	General Medicine - Phase 3	18340000235	Febrile seizures / other seizures- Neurocysticercosis-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Planned Line Of Management , Clinical Notes Detailing History	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
610	Secondary	Paediatric Medical management - Phase 3	18420000255	Febrile seizures / other seizures- Neurocysticercosis-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Planned Line Of Management , Clinical Notes Detailing History	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
611	Secondary	General Medicine - Phase 3	18340000236	Febrile seizures / other seizures- Neurocysticercosis-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Planned Line Of Management , Clinical Notes Detailing History	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College& Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
612	Secondary	Paediatric Medical management - Phase 3	18420000256	Febrile seizures / other seizures- Neurocysticercosis-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Planned Line Of Management , Clinical Notes Detailing History	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
613	Secondary	General Medicine - Phase 3	18340000237	Febrile seizures / other seizures- Neurocysticercosis-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Planned Line Of Management , Clinical Notes Detailing History	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
614	Secondary	Paediatric Medical management - Phase 3	18420000257	Febrile seizures / other seizures- Neurocysticercosis-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Planned Line Of Management , Clinical Notes Detailing History	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
615	Secondary	Paediatric Medical management - Phase 3	18420000258	Febrile seizures / other seizures- Neurocysticercosis-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Planned Line Of Management , Clinical Notes Detailing History	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
616	Secondary	General Medicine - Phase 3	18340000238	Febrile seizures / other seizures- Neurocysticercosis-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Planned Line Of Management , Clinical Notes Detailing History	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
617	Secondary	Orthopaedics - Phase 3	18400000049	Fixation of Diaphyseal Fracture - Long Bone-Closed Reduction & Fixation	25000	25000	23750	21250	Surgical	Not Reserved	Yes	No	0	Clinical Photograph Of Affected Part , Detailed Clinical Notes , X-Ray	Detailed Procedure/Operative Notes , Invoice/Bar-Code Of Implant , Post Procedure (X-Ray) , Post Procedure Clinical Photograph	No	No	Yes	No	No	4

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
618	Secondary	Orthopaedics - Phase 3	1840000050	Fixation of Diaphyseal Fracture - Long Bone-Open Reduction Internal Fixation	20900	20900	19855	17765	Surgical	Not Reserved	Yes	No	0	Clinical Photograph Of Affected Part, Detailed Clinical Notes , X-Ray	Detailed Procedure/Operative Notes , Invoice/Bar-Code Of Implant , Post Procedure (X-Ray) , Post Procedure Clinical Photograph	No	No	Yes	No	No	4
619	Secondary	Paediatric Medical management - Phase 3	18420000259	Floppy infant-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
620	Secondary	Paediatric Medical management - Phase 3	18420000260	Floppy infant-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
621	Secondary	Paediatric Medical management - Phase 3	18420000261	Floppy infant-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
622	Secondary	Paediatric Medical management - Phase 3	18420000262	Floppy infant-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
623	Secondary	Orthopaedics - Phase 3	1840000051	Fracture - Both Bones - Forearm - ORIF - Plating / Nailing	19700	19700	18715	16745	Surgical	Not Reserved	Yes	No	0	Clinical Photograph Of Affected Part , Detailed Clinical Notes , X-Ray	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Invoice/Bar-Code Of Implant , Post Procedure Clinical Photograph , Post Procedure X-Ray Showing Implant	No	No	Yes	No	No	4

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
624	Secondary	Orthopaedics - Phase 3	1840000052	Fracture - Neck Femur-Closed Reduction and Percutaneous Screw Fixation	15000	15000	14250	12750	Surgical	Not Reserved	Yes	No	0	Clinical Photograph Of Affected Part , Detailed Clinical Notes , X-Ray	Detailed Procedure/Operative Notes , Invoice/Bar-Code Of Implant , Post Procedure (X-Ray) , Post Procedure Clinical Photograph	No	No	Yes	No	No	2
625	Secondary	Orthopaedics - Phase 3	1840000053	Fracture - Neck Femur-Intertrochanteric Fracture with Dynamic Hip Screw	20800	20800	19760	17680	Surgical	Not Reserved	Yes	No	0	Clinical Photograph Of Affected Part , Detailed Clinical Notes , X-Ray	Detailed Procedure/Operative Notes , Invoice/Bar-Code Of Implant , Post Procedure (X-Ray) , Post Procedure Clinical Photograph	No	No	Yes	No	No	5
626	Secondary	Orthopaedics - Phase 3	1840000054	Fracture - Neck Femur-Intertrochanteric Fracture with Proximal Femoral Nail	24100	24100	22895	20485	Surgical	Not Reserved	Yes	No	0	Clinical Photograph Of Affected Part , Detailed Clinical Notes , X-Ray	Detailed Procedure/Operative Notes , Invoice/Bar-Code Of Implant , Post Procedure (X-Ray) , Post Procedure Clinical Photograph	No	No	Yes	No	No	5
627	Secondary	Orthopaedics - Phase 3	1840000055	Fracture - Single Bone - Forearm - ORIF - Plating / Nailing	12400	12400	11780	10540	Surgical	Not Reserved	Yes	No	0	Clinical Photograph Of Affected Part , Detailed Clinical Notes , X-Ray	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Invoice/Bar-Code Of Implant , Post Procedure Clinical Photograph , Post Procedure X-Ray Showing Implant	No	No	Yes	No	No	4
628	Secondary	Otorhinolaryngology (ENT) - Phase 3	1833000016	Fracture - setting nasal bone-General Anesthesia	12000	12000	11400	10200	Surgical	Not Reserved	Yes	No	0	Circumstances That Led To Fracture , Fir/Mlc , X-Ray/Ct	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure (X-Ray) , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	No	2
629	Secondary	Otorhinolaryngology (ENT) - Phase 3	1833000017	Fracture - setting nasal bone-Local Anesthesia	8000	8000	7600	6800	Surgical	Not Reserved	Yes	No	0	Circumstances That Led To Fracture , Fir/Mlc , X-Ray/Ct	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure (X-Ray) , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	No	2

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
630	Secondary	Orthopaedics - Phase 3	18400000056	Fracture Condyle - Humerus - ORIF-Lateral Condyle	10000	10000	9500	8500	Surgical	Not Reserved	Yes	No	0	Clinical Photograph Of Affected Part , Detailed Clinical Notes , X-Ray	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Invoice/Bar-Code Of Implant , Post Procedure Clinical Photograph , Post Procedure X-Ray Showing Implant	No	No	Yes	No	No	3
631	Secondary	Orthopaedics - Phase 3	18400000057	Fracture Condyle - Humerus - ORIF-Medial Condyle	10000	10000	9500	8500	Surgical	Not Reserved	Yes	No	0	Clinical Photograph Of Affected Part , Detailed Clinical Notes , X-Ray	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Invoice/Bar-Code Of Implant , Post Procedure Clinical Photograph , Post Procedure X-Ray Showing Implant	No	No	Yes	No	No	3
632	Secondary	Orthopaedics - Phase 3	18400000058	Fracture Head radius-Excision	9200	9200	8740	7820	Surgical	Not Reserved	Yes	No	0	Clinical Photograph Of Affected Part , Detailed Clinical Notes , X-Ray	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure (X-Ray) , Post Procedure Clinical Photograph	No	No	Yes	No	No	3
633	Secondary	Orthopaedics - Phase 3	18400000059	Fracture Head radius-Fixation	15000	15000	14250	12750	Surgical	Not Reserved	Yes	No	0	Clinical Photograph Of Affected Part , Detailed Clinical Notes , X-Ray	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Invoice/Bar-Code Of Implant , Post Procedure (X-Ray) , Post Procedure Clinical Photograph	No	No	Yes	No	No	4
634	Secondary	Orthopaedics - Phase 3	18400000060	Fracture intercondylar Humerus + olecranon osteotomy	26100	26100	24795	22185	Surgical	Not Reserved	Yes	No	0	Clinical Photograph Of Affected Part , Detailed Clinical Notes , X-Ray	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Invoice/Bar-Code Of Implant , Post Procedure X-Ray Showing Osteotomy As Well As Frature Managed	No	No	Yes	No	No	5
635	Secondary	Otorhinolaryngology (ENT) - Phase 3	18330000018	Functional Endoscopic Sinus (FESS)	11000	11000	10450	9350	Surgical	Reserved	Yes	No	0	Ct Scan , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Clinical Photograph , Procedure Still Photograph	No	No	Yes	No	No	2

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
636	Secondary	Otorhinolaryngology (ENT) - Phase 3	18330000019	Functional septo rhinoplasty	21800	21800	20710	18530	Surgical	Reserved	Yes	No	0	Circumstances That Led To Disfigurement , Clinical Notes Confirming The Indication For The Procedure , Clinical Photograph , Fir/Mlc , Supporting Medical Records , X-Ray	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	No	2
637	Secondary	Ophthalmology - Phase 3	18390000023	GA / EUA separate add on package	3000	3000	2850	2550	Surgical	Not Reserved	No	No	0	Clinical Notes Justifying The Need For Ga	Clinical Notes For The Associated Surgery / Disease Along With Pre-Op Clinical Notes , Operative And Anesthesia Details , Post-Op Clinical Notes	Yes	No	No	No	Yes	1
638	Secondary	General Surgery - Phase 3	18350000013	Bleeding Ulcer - Partial Gastrectomy with Vagotomy	25000	25000	23750	21250	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Ugi Endoscopy (Ugie)	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Intra-Op Clinical Photograph	No	No	Yes	No	No	5
639	Secondary	General Surgery - Phase 3	18350000014	Bleeding Ulcer - Partial Gastrectomy without Vagotomy	25000	25000	23750	21250	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Ugi Endoscopy (Ugie)	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Intra-Op Clinical Photograph	No	No	Yes	No	No	5
640	Secondary	Ophthalmology - Phase 3	18390000024	Glaucoma Surgery (Trabeculectomy only) with or without Mitomycin C, including postoperative medications for 12 weeks (and wherever surgical or laser procedures required for bleb augmentation and anterior chamber maintenance)	11000	11000	10450	9350	Surgical	Reserved	No	No	0	Clinical Notes Establishing Long Standing History Of Glaucoma , Documentation Of Vision And Reports Of Field Of Vision	Detailed Discharge Summary , Detailed Procedure/Operative Notes	No	No	Yes	No	Yes	1
641	Secondary	Ophthalmology - Phase 3	18390000025	Glaucoma Surgery -Cyclocryotherapy / Cyclophotocoagulation	3700	3700	3515	3145	Surgical	Not Reserved	No	No	0	Detailed Clinical Notes , Documentary Evidence Supporting Chronicity , Iop Measurement	Detailed Discharge Summary , Detailed Operative Notes , Still Image Of The Patient Undergoing The Procedure With Date Stamp	No	No	Yes	No	Yes	1

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
642	Secondary	Ophthalmology - Phase 3	1839000026	Glaucoma Surgery -Glaucoma Shunt Surgery	20000	20000	19000	17000	Surgical	Not Reserved	No	No	0	Detailed Clinical Notes , Documentary Evidence Supporting Chronicity , Iop Measurement	Condition- Ensure That Post Op Medicine For 12 Weeks Is Given , Detailed Discharge Summary , Detailed Operative Notes , Still Image Of The Procedure With Patient Id And Date	No	No	Yes	No	No	3
643	Secondary	Ophthalmology - Phase 3	1839000027	Glaucoma Surgery -Pediatric Glaucoma Surgery	15000	15000	14250	12750	Surgical	Not Reserved	No	No	0	Detailed Clinical Notes , Documentary Evidence Of Paediatric Glaucoma Under Ga/Eua , Iop Measurement	Detailed Discharge Summary , Detailed Operative Notes , Still Image Of The Patient Undergoing The Procedure With Date Stamp	No	Yes	No	No	No	4
644	Secondary	Paediatric Medical management - Phase 3	18420000263	Global developmental delay / Intellectual disability of unknown etiology-Global developmental delay-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Planned Line Of Management , Clinical Notes Detailing Birth And Subsequent History	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
645	Secondary	Paediatric Medical management - Phase 3	18420000264	Global developmental delay / Intellectual disability of unknown etiology-Global developmental delay-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Planned Line Of Management , Clinical Notes Detailing Birth And Subsequent History	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
646	Secondary	Paediatric Medical management - Phase 3	18420000265	Global developmental delay / Intellectual disability of unknown etiology-Global developmental delay-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Planned Line Of Management , Clinical Notes Detailing Birth And Subsequent History	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
647	Secondary	Paediatric Medical management - Phase 3	18420000266	Global developmental delay / Intellectual disability of unknown etiology-Global developmental delay-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Planned Line Of Management , Clinical Notes Detailing Birth And Subsequent History	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
648	Secondary	Paediatric Medical management - Phase 3	18420000267	Global developmental delay / Intellectual disability of unknown etiology-Intellectual disability of unknown etiology-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Planned Line Of Management , Clinical Notes Detailing Birth And Subsequent History	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
649	Secondary	Paediatric Medical management - Phase 3	18420000268	Global developmental delay / Intellectual disability of unknown etiology-Intellectual disability of unknown etiology-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Planned Line Of Management , Clinical Notes Detailing Birth And Subsequent History	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
650	Secondary	Paediatric Medical management - Phase 3	18420000269	Global developmental delay / Intellectual disability of unknown etiology-Intellectual disability of unknown etiology-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Planned Line Of Management , Clinical Notes Detailing Birth And Subsequent History	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
651	Secondary	Paediatric Medical management - Phase 3	18420000270	Global developmental delay / Intellectual disability of unknown etiology-Intellectual disability of unknown etiology-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Planned Line Of Management , Clinical Notes Detailing Birth And Subsequent History	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
652	Secondary	General Medicine - Phase 3	18340000239	Gout -HDU	2000	2000	1900	1700	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Sr Uric Acid	Detailed Discharge Summary	No	No	Yes	No	No	Not Applicable(NA)
653	Secondary	General Medicine - Phase 3	18340000240	Gout -ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Sr Uric Acid	Detailed Discharge Summary	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College& Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
654	Secondary	General Medicine - Phase 3	18340000241	Gout -ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Sr Uric Acid	Detailed Discharge Summary	No	No	Yes	No	No	Not Applicable(NA)
655	Secondary	General Medicine - Phase 3	18340000242	Gout -Routine Ward	1000	1000	950	850	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Sr Uric Acid	Detailed Discharge Summary	No	No	Yes	No	No	Not Applicable(NA)
656	Secondary	General Surgery - Phase 3	18350000015	Groin Hernia Repair-Femoral - Lap	16200	16200	15390	13770	Surgical	Not Reserved	Yes	No	0	Clinical Photograph , Detailed Clinical Notes , Usg	Detailed Discharge Summary , Detailed Operative Notes , Invoice Of Mesh , Post Procedure Clinical Photograph	No	No	Yes	No	No	3
657	Secondary	General Surgery - Phase 3	18350000016	Groin Hernia Repair-Femoral - Open	16200	16200	15390	13770	Surgical	Not Reserved	Yes	No	0	Clinical Photograph , Detailed Clinical Notes , Usg	Detailed Discharge Summary , Detailed Operative Notes , Invoice Of Mesh , Post Procedure Clinical Photograph	No	No	Yes	No	No	3
658	Secondary	General Surgery - Phase 3	18350000017	Groin Hernia Repair-Inguinal - Lap.	16200	16200	15390	13770	Surgical	Not Reserved	No	No	0	Clinical Photograph , Detailed Clinical Notes , Usg	Detailed Discharge Summary , Detailed Operative Notes , Invoice Of Mesh , Post Procedure Clinical Photograph	No	No	Yes	No	No	3
659	Secondary	General Surgery - Phase 3	18350000018	Groin Hernia Repair-Inguinal - Open	16200	16200	15390	13770	Surgical	Not Reserved	No	No	0	Clinical Photograph , Detailed Clinical Notes , Usg	Detailed Discharge Summary , Detailed Operative Notes , Invoice Of Mesh , Post Procedure Clinical Photograph	No	No	Yes	No	No	3

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
660	Secondary	Paediatric Medical management - Phase 3	18420000271	Guillian Barre Syndrome-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Detailed The Need For High End Histopathology (Biopsies) And Advanced Serology Investigations , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Test Report	No	No	Yes	No	No	Not Applicable(NA)
661	Secondary	General Medicine - Phase 3	18340000243	Guillian Barre Syndrome-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Detailed The Need For High End Histopathology (Biopsies) And Advanced Serology Investigations , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Test Report	No	No	Yes	No	No	Not Applicable(NA)
662	Secondary	General Medicine - Phase 3	18340000244	Guillian Barre Syndrome-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Detailed The Need For High End Histopathology (Biopsies) And Advanced Serology Investigations , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Test Report	No	No	Yes	No	No	Not Applicable(NA)
663	Secondary	Paediatric Medical management - Phase 3	18420000272	Guillian Barre Syndrome-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Detailed The Need For High End Histopathology (Biopsies) And Advanced Serology Investigations , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Test Report	No	No	Yes	No	No	Not Applicable(NA)
664	Secondary	Paediatric Medical management - Phase 3	18420000273	Guillian Barre Syndrome-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Detailed The Need For High End Histopathology (Biopsies) And Advanced Serology Investigations , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Test Report	No	No	Yes	No	No	Not Applicable(NA)
665	Secondary	General Medicine - Phase 3	18340000245	Guillian Barre Syndrome-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Detailed The Need For High End Histopathology (Biopsies) And Advanced Serology Investigations , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Test Report	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
666	Secondary	General Medicine - Phase 3	18340000246	Gullian Barre Syndrome-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Detailed The Need For High End Histopathology (Biopsies) And Advanced Serology Investigations , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Test Report	No	No	Yes	No	No	Not Applicable(NA)
667	Secondary	Paediatric Medical management - Phase 3	18420000274	Gullian Barre Syndrome-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Detailed The Need For High End Histopathology (Biopsies) And Advanced Serology Investigations , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Test Report	No	No	Yes	No	No	Not Applicable(NA)
668	Secondary	Paediatric Medical management - Phase 3	18420000275	HIV with complications-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
669	Secondary	General Medicine - Phase 3	18340000247	HIV with complications-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
670	Secondary	General Medicine - Phase 3	18340000248	HIV with complications-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
671	Secondary	Paediatric Medical management - Phase 3	18420000276	HIV with complications-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
672	Secondary	General Medicine - Phase 3	18340000249	HIV with complications-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
673	Secondary	Paediatric Medical management - Phase 3	18420000277	HIV with complications-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
674	Secondary	General Medicine - Phase 3	18340000250	HIV with complications-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
675	Secondary	Paediatric Medical management - Phase 3	18420000278	HIV with complications-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
676	Secondary	General Medicine - Phase 3	18340000251	Haemodialysis / Peritoneal Dialysis (only for ARF)-Haemodialysis Dialysis (only for ARF)	1500	1500	1425	1275	Medical	Not Reserved	No	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	Yes	No	No	No	Yes	1
677	Secondary	General Medicine - Phase 3	18340000252	Haemodialysis / Peritoneal Dialysis (only for ARF)-Peritoneal Dialysis (only for ARF)	1500	1500	1425	1275	Medical	Not Reserved	No	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	Yes	No	No	No	Yes	1

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
678	Secondary	Paediatric Medical management - Phase 3	18420000279	Haemolytic uremic syndrome-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
679	Secondary	General Medicine - Phase 3	18340000253	Haemolytic uremic syndrome-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
680	Secondary	General Medicine - Phase 3	18340000254	Haemolytic uremic syndrome-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
681	Secondary	Paediatric Medical management - Phase 3	18420000280	Haemolytic uremic syndrome-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
682	Secondary	General Medicine - Phase 3	18340000255	Haemolytic uremic syndrome-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
683	Secondary	Paediatric Medical management - Phase 3	18420000281	Haemolytic uremic syndrome-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
684	Secondary	Paediatric Medical management - Phase 3	18420000282	Haemolytic uremic syndrome-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
685	Secondary	General Medicine - Phase 3	18340000256	Haemolytic uremic syndrome-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
686	Secondary	General Surgery - Phase 3	18350000019	Haemorrhoidectomy	15000	15000	14250	12750	Surgical	Reserved	Yes	No	0	Detailed Clinical Notes , Proctoscopy	Detailed Discharge Summary , Detailed Operative Notes , Post Procedure Clinical Photograph	No	No	Yes	No	Yes	1
687	Secondary	Paediatric Medical management - Phase 3	18420000283	Heat stroke-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
688	Secondary	General Medicine - Phase 3	18340000257	Heat stroke-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
689	Secondary	Paediatric Medical management - Phase 3	18420000284	Heat stroke-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
690	Secondary	General Medicine - Phase 3	18340000258	Heat stroke-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
691	Secondary	General Medicine - Phase 3	18340000259	Heat stroke-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
692	Secondary	Paediatric Medical management - Phase 3	18420000285	Heat stroke-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
693	Secondary	General Medicine - Phase 3	18340000260	Heat stroke-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
694	Secondary	Paediatric Medical management - Phase 3	18420000286	Heat stroke-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
695	Secondary	Orthopaedics - Phase 3	18400000061	Hemiarthroplasty-Bipolar (Non - Modular)	22000	22000	20900	18700	Surgical	Not Reserved	No	No	0	Detailed Clinical Notes , X-Ray/Ct	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Invoice/Bar-Code Of Implant , Post Procedure Clinical Photograph , Post-Op X-Ray Showing Implant	No	No	Yes	No	No	7

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
696	Secondary	Orthopaedics - Phase 3	1840000062	Hemiarthroplasty-Unipolar	18000	18000	17100	15300	Surgical	Not Reserved	No	No	0	Detailed Clinical Notes , X-Ray/Ct	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Invoice/Bar-Code Of Implant , Post Procedure Clinical Photograph , Post-Op X-Ray Showing Implant	No	No	Yes	No	No	5
697	Secondary	Orthopaedics - Phase 3	1840000063	High Tibial Osteotomy	23000	23000	21850	19550	Surgical	Not Reserved	Yes	No	0	Clinical Photograph Of Affected Part , Detailed Clinical Notes , X-Ray	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Invoice/Bar-Code Of Implant , Post Procedure (X-Ray) , Post Procedure Clinical Photograph	No	No	Yes	No	No	5
698	Secondary	General Medicine - Phase 3	18340000261	High end histopathology (Biopsies) and advanced serology investigations	5000	5000	4750	4250	Medical	Not Reserved	No	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	Yes	No	No	No	No	Not Applicable(NA)
699	Secondary	Paediatric Medical management - Phase 3	18420000287	High end histopathology (Biopsies) and advanced serology investigations	5000	5000	4750	4250	Medical	Not Reserved	No	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	Yes	No	No	No	No	Not Applicable(NA)
700	Secondary	Paediatric Medical management - Phase 3	18420000288	High end radiological diagnostic (CT, MRI, Imaging including nuclear imaging)-High end radiological diagnostic (CT, MRI, Imaging including nuclear imaging)	5000	5000	4750	4250	Medical	Not Reserved	No	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	Yes	No	No	No	No	Not Applicable(NA)
701	Secondary	General Medicine - Phase 3	18340000262	High end radiological diagnostic (CT, MRI, Imaging including nuclear imaging)-High end radiological diagnostic (CT, MRI, Imaging including nuclear imaging)	5000	5000	4750	4250	Medical	Not Reserved	No	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	Yes	No	No	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
702	Secondary	Obstetrics & Gynaecology - Phase 3	1838000019	High risk delivery-Major Fetal malformation requiring intervention immediately after birth	11500	11500	10925	9775	Surgical	Reserved	No	No	0	Admission Notes Comprising Of History And Detailed Ante Natal Care Records/ Reasons For Non-Availability Of Anc Records , Usg-Obstetric	Detailed Delivery Notes , Detailed Discharge Summary , Pnc Notes With Relevant Investigations , Progress Notes , Status Of The Child At The Time Of Delivery And At The Time Of Discharge	No	No	Yes	No	No	3
703	Secondary	Obstetrics & Gynaecology - Phase 3	1838000020	High risk delivery-Mothers with eclampsia / imminent eclampsia / severe pre-eclampsia	11500	11500	10925	9775	Surgical	Reserved	No	No	0	Admission Notes Comprising Of History And Detailed Ante Natal Care Records/ Reasons For Non-Availability Of Anc Records , Usg-Obstetric	Detailed Delivery Notes , Detailed Discharge Summary , Pnc Notes With Relevant Investigations , Progress Notes , Status Of The Child At The Time Of Delivery And At The Time Of Discharge	No	No	Yes	No	No	3
704	Secondary	Obstetrics & Gynaecology - Phase 3	1838000021	High risk delivery-Mothers with severe anaemia (<7 g/dL)	11500	11500	10925	9775	Surgical	Reserved	No	No	0	Admission Notes Comprising Of History And Detailed Ante Natal Care Records/ Reasons For Non-Availability Of Anc Records , Usg-Obstetric	Detailed Delivery Notes , Detailed Discharge Summary , Pnc Notes With Relevant Investigations , Progress Notes , Status Of The Child At The Time Of Delivery And At The Time Of Discharge	No	No	Yes	No	No	3
705	Secondary	Obstetrics & Gynaecology - Phase 3	1838000022	High risk delivery-Other maternal and fetal conditions as per guidelines-eg previous caesarean section, diabetes, severe growth retardation, etc that qualify for high risk delivery.	11500	11500	10925	9775	Surgical	Reserved	No	No	0	Admission Notes Comprising Of History And Detailed Ante Natal Care Records With Special Reference To Investigations Supporting The Diagnosis/ Reasons For Non-Availability Of Anc Records , Usg-Obstetric	Detailed Delivery Notes , Detailed Discharge Summary , Pnc Notes With Relevant Investigations , Progress Notes , Status Of The Child At The Time Of Delivery And At The Time Of Discharge	No	No	Yes	No	No	3
706	Secondary	Obstetrics & Gynaecology - Phase 3	1838000023	High risk delivery-Pre-mature delivery	11500	11500	10925	9775	Surgical	Reserved	No	No	0	Admission Notes Comprising Of History And Detailed Ante Natal Care Records/ Reasons For Non-Availability Of Anc Records , Usg-Obstetric	Detailed Delivery Notes , Detailed Discharge Summary , Pnc Notes With Relevant Investigations , Progress Notes , Status Of The Child At The Time Of Delivery And At The Time Of Discharge	No	No	Yes	No	No	3
707	Secondary	Obstetrics & Gynaecology - Phase 3	1838000024	Hospitalisation for Antenatal Complications-HDU	2000	2000	1900	1700	Medical	Reserved	No	No	0	Admission Notes Comprising Of History And Examination With Indications For The Procedure , Relevant Investigations (Establishing Diagnosis)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra-Operative Photograph , Progress Notes	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
708	Secondary	Obstetrics & Gynaecology - Phase 3	1838000025	Hospitalisation for Antenatal Complications-Routine Ward	1000	1000	950	850	Medical	Reserved	No	No	0	Admission Notes Comprising Of History And Examination With Indications For The Procedure , Relevant Investigations (Establishing Diagnosis)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra-Operative Photograph , Progress Notes	No	No	Yes	No	No	Not Applicable(NA)
709	Secondary	General Medicine - Phase 3	18340000263	Hydrocephalus-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
710	Secondary	Paediatric Medical management - Phase 3	18420000289	Hydrocephalus-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
711	Secondary	General Medicine - Phase 3	18340000264	Hydrocephalus-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
712	Secondary	Paediatric Medical management - Phase 3	18420000290	Hydrocephalus-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
713	Secondary	General Medicine - Phase 3	18340000265	Hydrocephalus-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
714	Secondary	Paediatric Medical management - Phase 3	18420000291	Hydrocephalus-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
715	Secondary	General Medicine - Phase 3	18340000266	Hydrocephalus-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
716	Secondary	Paediatric Medical management - Phase 3	18420000292	Hydrocephalus-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
717	Secondary	General Medicine - Phase 3	18340000267	Hyperosmolar Non-Ketotic coma-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
718	Secondary	Paediatric Medical management - Phase 3	18420000293	Hyperosmolar Non-Ketotic coma-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
719	Secondary	General Medicine - Phase 3	18340000268	Hyperosmolar Non-Ketotic coma-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
720	Secondary	Paediatric Medical management - Phase 3	18420000294	Hyperosmolar Non-Ketotic coma-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
721	Secondary	Paediatric Medical management - Phase 3	18420000295	Hyperosmolar Non-Ketotic coma-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
722	Secondary	General Medicine - Phase 3	18340000269	Hyperosmolar Non-Ketotic coma-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
723	Secondary	General Medicine - Phase 3	18340000270	Hyperosmolar Non-Ketotic coma-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
724	Secondary	Paediatric Medical management - Phase 3	18420000296	Hyperosmolar Non-Ketotic coma-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
725	Secondary	Paediatric Medical management - Phase 3	18420000297	Hypertensive emergencies-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
726	Secondary	General Medicine - Phase 3	18340000271	Hypertensive emergencies-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
727	Secondary	General Medicine - Phase 3	18340000272	Hypertensive emergencies-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
728	Secondary	Paediatric Medical management - Phase 3	18420000298	Hypertensive emergencies-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
729	Secondary	General Medicine - Phase 3	18340000273	Hypertensive emergencies-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
730	Secondary	Paediatric Medical management - Phase 3	18420000299	Hypertensive emergencies-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
731	Secondary	General Medicine - Phase 3	18340000274	Hypertensive emergencies-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
732	Secondary	Paediatric Medical management - Phase 3	1842000300	Hypertensive emergencies-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
733	Secondary	General Medicine - Phase 3	1834000275	Hypoglycemia-HDU	2000	2000	1900	1700	Medical	Not Reserved	No	No	0	Blood Sugar Level , Detailed Clinical Notes	Detailed Discharge Summary , Hba1c , Post Treatment Blood Sugar Levels	No	No	Yes	No	No	Not Applicable(NA)
734	Secondary	Paediatric Medical management - Phase 3	1842000301	Hypoglycemia-HDU	2000	2000	1900	1700	Medical	Not Reserved	No	No	0	Blood Sugar Level , Detailed Clinical Notes	Detailed Discharge Summary , Hba1c , Post Treatment Blood Sugar Levels	No	No	Yes	No	No	Not Applicable(NA)
735	Secondary	Paediatric Medical management - Phase 3	1842000302	Hypoglycemia-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	No	No	0	Blood Sugar Level , Detailed Clinical Notes	Detailed Discharge Summary , Hba1c , Post Treatment Blood Sugar Levels	No	No	Yes	No	No	Not Applicable(NA)
736	Secondary	General Medicine - Phase 3	1834000276	Hypoglycemia-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	No	No	0	Blood Sugar Level , Detailed Clinical Notes	Detailed Discharge Summary , Hba1c , Post Treatment Blood Sugar Levels	No	No	Yes	No	No	Not Applicable(NA)
737	Secondary	Paediatric Medical management - Phase 3	1842000303	Hypoglycemia-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	No	No	0	Blood Sugar Level , Detailed Clinical Notes	Detailed Discharge Summary , Hba1c , Post Treatment Blood Sugar Levels	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
738	Secondary	General Medicine - Phase 3	18340000277	Hypoglycemia-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	No	No	0	Blood Sugar Level , Detailed Clinical Notes	Detailed Discharge Summary , Hba1c , Post Treatment Blood Sugar Levels	No	No	Yes	No	No	Not Applicable(NA)
739	Secondary	Paediatric Medical management - Phase 3	18420000304	Hypoglycemia-Routine Ward	1000	1000	950	850	Medical	Not Reserved	No	No	0	Blood Sugar Level , Detailed Clinical Notes	Detailed Discharge Summary , Hba1c , Post Treatment Blood Sugar Levels	No	No	Yes	No	No	Not Applicable(NA)
740	Secondary	General Medicine - Phase 3	18340000278	Hypoglycemia-Routine Ward	1000	1000	950	850	Medical	Not Reserved	No	No	0	Blood Sugar Level , Detailed Clinical Notes	Detailed Discharge Summary , Hba1c , Post Treatment Blood Sugar Levels	No	No	Yes	No	No	Not Applicable(NA)
741	Secondary	Obstetrics & Gynaecology - Phase 3	18380000026	Hysterectomy-Non descent vaginal hysterectomy	20000	20000	19000	17000	Surgical	Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment (Clearly Indicating Medical Management Tried And Failed Or Not Indicated. If Failed Documents Proving Duration Of Treatment And Failure. The Medical Management Should Have Been Tried For Atleast 4-6 Months Covering 1 Course Of Hormone Cycle) , Eb/Eac , Pap Smear , Usg-Abdomen & Pelvis	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Intra-Operative Photograph With Date & Patient Id , Pic Of Gross Specimen Removed , Progress Notes	No	No	Yes	No	No	4
742	Secondary	Obstetrics & Gynaecology - Phase 3	18380000027	Hysterectomy-Vaginal hysterectomy with anterior and posterior colpoperineorrhaphy	20000	20000	19000	17000	Surgical	Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment (Clearly Indicating Medical Management Tried And Failed Or Not Indicated. If Failed Documents Proving Duration Of Treatment And Failure. The Medical Management Should Have Been Tried For Atleast 4-6 Months Covering 1 Course Of Hormone Cycle) , Eb/Eac (Optional) , Pap Smear , Patient Consent Form	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Intra-Operative Photograph With Date & Patient Id , Pic Of Gross Specimen Removed , Progress Notes	No	No	Yes	No	No	5
743	Secondary	Obstetrics & Gynaecology - Phase 3	18380000028	Hysteroscopic IUCD removal	4700	4700	4465	3995	Surgical	Not Reserved	Yes	No	0	Clinical Notes With Details Of Iucd Insertion , Evidence Of Removing Iucd , Usg Showing Misplaced Iud	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Intra-Operative Photograph With Date & Patient Id , Pic Of Gross Specimen Removed , Progress Notes	No	No	Yes	No	No	1

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
744	Secondary	Obstetrics & Gynaecology - Phase 3	1838000029	Hysteroscopic adhesiolysis	6900	6900	6555	5865	Surgical	Not Reserved	No	No	0	Admission Notes Comprising Of History And Examination With Indications For The Procedure , Relevant Investigations (Establishing Diagnosis) , Usg (Abdomen & Pelvis)/Ct (Abdomen & Pelvis)/Mri (Abdomen & Pelvis)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Intra-Operative Photograph With Date & Patient Id , Pic Of Gross Specimen Removed , Progress Notes	No	No	Yes	No	No	1
745	Secondary	Obstetrics & Gynaecology - Phase 3	1838000030	Hysteroscopic myomectomies	9900	9900	9405	8415	Surgical	Not Reserved	No	No	0	Clinical Notes Confirming The Indication For The Procedure , Physical Examination Findings With Indications , Usg- Pelvis/Mri-Pelvis	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Intra-Operative Photograph With Date & Patient Id	No	No	Yes	No	No	1
746	Secondary	Obstetrics & Gynaecology - Phase 3	1838000031	Hysteroscopic polypectomy	7200	7200	6840	6120	Surgical	Not Reserved	No	No	0	Admission Notes Comprising Of History And Examination With Indications For The Procedure , Relevant Investigations (Establishing Diagnosis) , Usg	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Intra-Operative Photograph With Date & Patient Id , Pic Of Gross Specimen Removed , Progress Notes	No	No	Yes	No	No	2
747	Secondary	Obstetrics & Gynaecology - Phase 3	1838000032	Hysterotomy	5000	5000	4750	4250	Surgical	Reserved	No	No	0	Admission Notes Comprising Of History And Examination With Indications For The Procedure , Relevant Investigations (Establishing Diagnosis) , Usg-Obstetric	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Hpe Pic Of Specimen , Intra-Operative Photograph With Date & Patient Id , Progress Notes	No	No	Yes	No	Yes	1
748	Secondary	Ophthalmology - Phase 3	1839000028	IRIS Prolapse – Repair	4000	4000	3800	3400	Surgical	Not Reserved	No	No	0	Clinical Photograph Of Affected Part , Detailed Clinical Notes , Pre-Op Clinical Photo With Indications Of Intervention	Detailed Discharge Summary , Detailed Operative Notes , Still Image Of The Patient Undergoing The Procedure With Date Stamp	No	No	Yes	No	Yes	1
749	Secondary	General Medicine - Phase 3	18340000279	Idiopathic Thrombocytopenic Purpura-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
750	Secondary	Paediatric Medical management - Phase 3	18420000305	Idiopathic Thrombocytopenic Purpura-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
751	Secondary	General Medicine - Phase 3	18340000280	Idiopathic Thrombocytopenic Purpura-ICU -With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
752	Secondary	Paediatric Medical management - Phase 3	18420000306	Idiopathic Thrombocytopenic Purpura-ICU -With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
753	Secondary	Paediatric Medical management - Phase 3	18420000307	Idiopathic Thrombocytopenic Purpura-ICU -Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
754	Secondary	General Medicine - Phase 3	18340000281	Idiopathic Thrombocytopenic Purpura-ICU -Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
755	Secondary	Paediatric Medical management - Phase 3	18420000308	Idiopathic Thrombocytopenic Purpura-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
756	Secondary	General Medicine - Phase 3	18340000282	Idiopathic Thrombocytopenic Purpura-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
757	Secondary	Orthopaedics - Phase 3	1840000064	Ilizarov Fixation	25000	25000	23750	21250	Surgical	Not Reserved	Yes	No	0	Clinical Investigations , Clinical Photograph Of Affected Part , Radiological Evidence For Indication	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Invoice/Bar-Code Of Implant , Post Procedure Clinical Photograph , Post Procedure X-Ray Showing Implant	No	No	Yes	No	No	6
758	Secondary	Paediatric Medical management - Phase 3	18420000309	Immune haemolytic anemia-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
759	Secondary	Paediatric Medical management - Phase 3	18420000310	Immune haemolytic anemia-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
760	Secondary	Paediatric Medical management - Phase 3	18420000311	Immune haemolytic anemia-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
761	Secondary	Paediatric Medical management - Phase 3	18420000312	Immune haemolytic anemia-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
762	Secondary	Paediatric Medical management - Phase 3	1842000313	Immune mediated CNS disorders-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
763	Secondary	General Medicine - Phase 3	1834000283	Immune mediated CNS disorders-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
764	Secondary	General Medicine - Phase 3	1834000284	Immune mediated CNS disorders-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
765	Secondary	Paediatric Medical management - Phase 3	1842000314	Immune mediated CNS disorders-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
766	Secondary	General Medicine - Phase 3	1834000285	Immune mediated CNS disorders-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
767	Secondary	Paediatric Medical management - Phase 3	1842000315	Immune mediated CNS disorders-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
768	Secondary	General Medicine - Phase 3	18340000286	Immune mediated CNS disorders-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
769	Secondary	Paediatric Medical management - Phase 3	18420000316	Immune mediated CNS disorders-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
770	Secondary	Orthopaedics - Phase 3	18400000065	Implant Removal under LA-K - Wire	5000	5000	4750	4250	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , X-Ray Film With Report	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure (X-Ray) With Reports	No	No	No	Yes	Yes	1
771	Secondary	Orthopaedics - Phase 3	18400000066	Implant Removal under LA-Screw	5000	5000	4750	4250	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , X-Ray Film With Report	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure (X-Ray) With Reports	No	No	No	Yes	Yes	1
772	Secondary	Orthopaedics - Phase 3	18400000067	Implant Removal under RA / GA-Nail	15000	15000	14250	12750	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , X-Ray Film With Report	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure (X-Ray) With Reports	No	No	No	Yes	No	2
773	Secondary	Orthopaedics - Phase 3	18400000068	Implant Removal under RA / GA-Plate	15000	15000	14250	12750	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , X-Ray Film With Report	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure (X-Ray) With Reports	No	No	No	Yes	No	2

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
774	Secondary	Paediatric Medical management - Phase 3	1842000317	Inborn errors of metabolism-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
775	Secondary	Paediatric Medical management - Phase 3	1842000318	Inborn errors of metabolism-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
776	Secondary	Paediatric Medical management - Phase 3	1842000319	Inborn errors of metabolism-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
777	Secondary	Paediatric Medical management - Phase 3	1842000320	Inborn errors of metabolism-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
778	Secondary	Paediatric Medical management - Phase 3	1842000321	Infantile cholestasis-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
779	Secondary	Paediatric Medical management - Phase 3	1842000322	Infantile cholestasis-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
780	Secondary	Paediatric Medical management - Phase 3	1842000323	Infantile cholestasis-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
781	Secondary	Paediatric Medical management - Phase 3	1842000324	Infantile cholestasis-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
782	Secondary	Otorhinolaryngology (ENT) - Phase 3	1833000020	Inferior turbinate reduction under GA	5700	5700	5415	4845	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Examination Findings , Nasoendoscopy/Nasal Endoscopy	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra-Operative Photograph , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	Yes	1
783	Secondary	Orthopaedics - Phase 3	1840000069	Internal Fixation of Small Bones	10000	10000	9500	8500	Surgical	Not Reserved	Yes	No	0	Clinical Photograph Of Affected Part , Detailed Clinical Notes , X-Ray	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure (X-Ray) With Reports , Stickers Of Implants Used	No	No	Yes	No	No	3
784	Secondary	Paediatric Medical management - Phase 3	1842000325	Intracranial hemorrhage-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
785	Secondary	Paediatric Medical management - Phase 3	1842000326	Intracranial hemorrhage-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
786	Secondary	Paediatric Medical management - Phase 3	1842000327	Intracranial hemorrhage-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
787	Secondary	Paediatric Medical management - Phase 3	1842000328	Intracranial hemorrhage-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
788	Secondary	General Medicine - Phase 3	1834000287	Intracranial ring enhancing lesion with complication (tuberculoma)-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
789	Secondary	Paediatric Medical management - Phase 3	1842000329	Intracranial ring enhancing lesion with complication (tuberculoma)-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
790	Secondary	Paediatric Medical management - Phase 3	1842000330	Intracranial ring enhancing lesion with complication (tuberculoma)-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
791	Secondary	General Medicine - Phase 3	1834000288	Intracranial ring enhancing lesion with complication (tuberculoma)-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
792	Secondary	Paediatric Medical management - Phase 3	1842000331	Intracranial ring enhancing lesion with complication (tuberculoma)-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
793	Secondary	General Medicine - Phase 3	1834000289	Intracranial ring enhancing lesion with complication (tuberculoma)-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
794	Secondary	Paediatric Medical management - Phase 3	1842000332	Intracranial ring enhancing lesion with complication (tuberculoma)-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
795	Secondary	General Medicine - Phase 3	1834000290	Intracranial ring enhancing lesion with complication (tuberculoma)-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
796	Secondary	General Medicine - Phase 3	1834000291	Intracranial space occupying lesion-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
797	Secondary	Paediatric Medical management - Phase 3	1842000333	Intracranial space occupying lesion-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
798	Secondary	General Medicine - Phase 3	18340000292	Intracranial space occupying lesion-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
799	Secondary	Paediatric Medical management - Phase 3	18420000334	Intracranial space occupying lesion-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
800	Secondary	General Medicine - Phase 3	18340000293	Intracranial space occupying lesion-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
801	Secondary	Paediatric Medical management - Phase 3	18420000335	Intracranial space occupying lesion-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
802	Secondary	General Medicine - Phase 3	18340000294	Intracranial space occupying lesion-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
803	Secondary	Paediatric Medical management - Phase 3	18420000336	Intracranial space occupying lesion-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College& Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
804	Secondary	Obstetrics & Gynaecology - Phase 3	1838000033	Intrauterine transfusions	11000	11000	10450	9350	Surgical	Not Reserved	Yes	No	0	Admission Notes Comprising Of History And Examination With Indications For The Procedure , Relevant Investigations (Establishing Diagnosis)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra-Operative Photograph , Progress Notes	No	No	Yes	No	Yes	1
805	Secondary	Ophthalmology - Phase 3	1839000029	Iridectomy	2000	2000	1900	1700	Surgical	Not Reserved	No	No	0	Clinical Notes For Iridectomy (Laser) , Clinical Photograph , Gonioscopy , Tonometry	Detailed Discharge Summary , Detailed Procedure Notes , Still Image Of The Procedure With Patient Id And Date	No	No	Yes	No	Yes	1
806	Secondary	Paediatric Medical management - Phase 3	18420000337	Juvenile myasthenia-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
807	Secondary	Paediatric Medical management - Phase 3	18420000338	Juvenile myasthenia-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
808	Secondary	Paediatric Medical management - Phase 3	18420000339	Juvenile myasthenia-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
809	Secondary	Paediatric Medical management - Phase 3	18420000340	Juvenile myasthenia-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
810	Secondary	Paediatric Medical management - Phase 3	1842000341	Kawasaki Disease-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
811	Secondary	Paediatric Medical management - Phase 3	1842000342	Kawasaki Disease-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
812	Secondary	Paediatric Medical management - Phase 3	1842000343	Kawasaki Disease-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
813	Secondary	Paediatric Medical management - Phase 3	1842000344	Kawasaki Disease-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
814	Secondary	General Medicine - Phase 3	1834000295	Ketogenic diet initiation in refractory epilepsy-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
815	Secondary	Paediatric Medical management - Phase 3	1842000345	Ketogenic diet initiation in refractory epilepsy-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
816	Secondary	General Medicine - Phase 3	18340000296	Ketogenic diet initiation in refractory epilepsy-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
817	Secondary	Paediatric Medical management - Phase 3	18420000346	Ketogenic diet initiation in refractory epilepsy-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
818	Secondary	General Medicine - Phase 3	18340000297	Ketogenic diet initiation in refractory epilepsy-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
819	Secondary	Paediatric Medical management - Phase 3	18420000347	Ketogenic diet initiation in refractory epilepsy-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
820	Secondary	Paediatric Medical management - Phase 3	18420000348	Ketogenic diet initiation in refractory epilepsy-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
821	Secondary	General Medicine - Phase 3	18340000298	Ketogenic diet initiation in refractory epilepsy-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
822	Secondary	Obstetrics & Gynaecology - Phase 3	1838000034	LLETZ (including PAP smear and colposcopy)	9900	9900	9405	8415	Surgical	Not Reserved	Yes	No	0	Admission Notes Comprising Of History And Examination With Indications For The Procedure , Cervical Biopsy (Optional) , Colposcopy , Pap Smear , Relevant Investigations (Establishing Diagnosis)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Hpe Pic Of Specimen , Intra-Operative Photograph With Date & Patient Id , Progress Notes	No	No	Yes	No	No	3
823	Secondary	Obstetrics & Gynaecology - Phase 3	1838000035	Lap. Salpingo-oophrectomy	14000	14000	13300	11900	Surgical	Reserved	No	No	0	Detailed Clinical Notes , Usg (Abdomen & Pelvis)/Ct (Abdomen & Pelvis)/Mri (Abdomen & Pelvis)	Detailed Discharge Summary , Detailed Operative Notes , Hpe Pic Of Specimen , Intra-Operative Photograph With Date & Patient Id	No	No	Yes	No	No	3
824	Secondary	Obstetrics & Gynaecology - Phase 3	1838000036	Lap. Surgery for Endometriosis (Other than Hysterectomy)	11200	11200	10640	9520	Surgical	Reserved	No	No	0	Admission Notes Comprising Of History And Examination With Indications For The Procedure , Relevant Investigations (Establishing Diagnosis) , Usg/Ct/Mri/Laparoscopy Findings	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Intra-Operative Photograph With Date & Patient Id , Pic Of Gross Specimen Removed , Progress Notes	No	No	Yes	No	No	2
825	Secondary	Obstetrics & Gynaecology - Phase 3	1838000037	Laparoscopic adhesiolysis	6000	6000	5700	5100	Surgical	Not Reserved	No	No	0	Admission Notes Comprising Of History And Examination With Indications For The Procedure , Relevant Investigations (Establishing Diagnosis) , Usg (Abdomen & Pelvis)/Ct (Abdomen)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Intra-Operative Photograph With Date & Patient Id , Pic Of Gross Specimen Removed , Progress Notes	No	Yes	No	No	No	1
826	Secondary	Obstetrics & Gynaecology - Phase 3	1838000038	Laparoscopic cystectomy	15000	15000	14250	12750	Surgical	Not Reserved	Yes	No	0	Admission Notes Comprising Of History And Examination With Indications For The Procedure , Relevant Investigations (Establishing Diagnosis) , Usg (Abdomen & Pelvis)/Ct (Abdomen)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Intra-Operative Photograph With Date & Patient Id , Pic Of Gross Specimen Removed , Progress Notes	No	No	Yes	No	No	5
827	Secondary	Obstetrics & Gynaecology - Phase 3	1838000039	Laparoscopic tubal surgeries (for any indication including ectopic pregnancy)	13900	13900	13205	11815	Surgical	Not Reserved	Yes	No	0	Beta-Hcg , Clinical Notes Confirming The Indication For The Procedure , Usg-Uterus & Adnexa	Detailed Discharge Summary , Detailed Operative Notes , Hpe-Ectopic Pregnancy Or Salpingectomy	No	No	Yes	No	No	3

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
828	Secondary	Obstetrics & Gynaecology - Phase 3	1838000040	Laparotomy for benign disorders-Ectopic	14000	14000	13300	11900	Surgical	Not Reserved	Yes	No	0	Admission Notes Comprising Of History And Examination With Indications For The Procedure , Beta-Hcg , Clinical Notes Establishing Ruptured Ectopic , Usg	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Intra-Operative Photograph With Date & Patient Id , Pic Of Gross Specimen Removed	No	No	Yes	No	No	5
829	Secondary	Obstetrics & Gynaecology - Phase 3	1838000041	Laparotomy for benign disorders-PID	14000	14000	13300	11900	Surgical	Reserved	No	No	0	Admission Notes Comprising Of History And Examination With Indications For The Procedure , Beta-Hcg , Clinical Notes Establishing Ruptured Ectopic , Usg	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Intra-Operative Photograph With Date & Patient Id , Pic Of Gross Specimen Removed	No	No	Yes	No	No	5
830	Secondary	Obstetrics & Gynaecology - Phase 3	1838000042	Laparotomy for broad ligament haematoma	16000	16000	15200	13600	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Physical Examination Findings , Usg	Detailed Discharge Summary , Detailed Operative Notes , Intra Procedure Clinical Photograph	No	No	Yes	No	No	3
831	Secondary	General Medicine - Phase 3	18340000299	Leptospirosis-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
832	Secondary	Paediatric Medical management - Phase 3	18420000349	Leptospirosis-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
833	Secondary	General Medicine - Phase 3	18340000300	Leptospirosis-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
834	Secondary	Paediatric Medical management - Phase 3	18420000350	Leptospirosis-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
835	Secondary	General Medicine - Phase 3	18340000301	Leptospirosis-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
836	Secondary	Paediatric Medical management - Phase 3	18420000351	Leptospirosis-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
837	Secondary	Paediatric Medical management - Phase 3	18420000352	Leptospirosis-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
838	Secondary	General Medicine - Phase 3	18340000302	Leptospirosis-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
839	Secondary	Ophthalmology - Phase 3	18390000030	Lid Abscess Drainage	3000	3000	2850	2550	Surgical	Not Reserved	No	No	0	Clinical Photograph , Doctor'S Note	Detailed Discharge Summary , Microbiological Report , Still Image Of The Patient Undergoing The Procedure With Date Stamp	No	No	Yes	No	Yes	1

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College& Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
840	Secondary	Ophthalmology - Phase 3	1839000031	Lid Tear Repair	5000	5000	4750	4250	Surgical	Not Reserved	No	No	0	Clinical Photograph , Detailed Clinical Notes , Fir/Mic	Detailed Discharge Summary , Detailed Operative Notes , Still Image Of The Procedure With Patient Id And Date	No	No	Yes	No	Yes	1
841	Secondary	Ophthalmology - Phase 3	1839000032	Lid Tumor excision + Lid Reconstruction	10000	10000	9500	8500	Surgical	Not Reserved	No	No	0	Clinical Photograph Of Affected Part , Detailed Clinical Notes , Plan For Lab Investigation Of Host Tissue (Hpe/ Microbiology/Other)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Still Image Of The Procedure With Patient Id And Date	No	No	Yes	No	Yes	1
842	Secondary	Ophthalmology - Phase 3	1839000033	Limbal Dermoid Removal	4000	4000	3800	3400	Surgical	Reserved	No	No	0	Clinical Photograph , Detailed Clinical Notes , Indication For Limbal Dermoid Removal	Detailed Discharge Summary , Detailed Operative Notes , Still Image Of The Procedure With Patient Id And Date	No	No	Yes	No	Yes	1
843	Secondary	General Surgery - Phase 3	1835000020	Lipoma / Cyst / other cutaneous swellings Excision-Cyst Excision-General Anesthesia	10000	10000	9500	8500	Surgical	Not Reserved	No	No	0	Clinical Photograph , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph	No	No	Yes	No	Yes	1
844	Secondary	General Surgery - Phase 3	1835000021	Lipoma / Cyst / other cutaneous swellings Excision-Cyst Excision-Local Anesthesia	5000	5000	4750	4250	Surgical	Not Reserved	No	No	0	Clinical Photograph , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph	No	No	Yes	No	Yes	1
845	Secondary	General Surgery - Phase 3	1835000022	Lipoma / Cyst / other cutaneous swellings Excision-Lipoma Excision-General Anesthesia	10000	10000	9500	8500	Surgical	Not Reserved	Yes	No	0	Clinical Photograph , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph	No	No	Yes	No	Yes	1

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
846	Secondary	General Surgery - Phase 3	1835000023	Lipoma / Cyst / other cutaneous swellings Excision-Lipoma Excision-Local Anesthesia	5000	5000	4750	4250	Surgical	Not Reserved	Yes	No	0	Clinical Photograph , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph	No	No	Yes	No	Yes	1
847	Secondary	General Surgery - Phase 3	1835000024	Lipoma / Cyst / other cutaneous swellings Excision-Other cutaneous swellings Excision-General Anesthesia	10000	10000	9500	8500	Surgical	Not Reserved	No	No	0	Clinical Photograph , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph	No	No	Yes	No	Yes	1
848	Secondary	General Surgery - Phase 3	1835000025	Lipoma / Cyst / other cutaneous swellings Excision-Other cutaneous swellings Excision-Local Anesthesia	5000	5000	4750	4250	Surgical	Not Reserved	No	No	0	Clinical Photograph , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph	No	No	Yes	No	Yes	1
849	Secondary	General Medicine - Phase 3	18340000303	Liver abscess-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
850	Secondary	Paediatric Medical management - Phase 3	18420000353	Liver abscess-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
851	Secondary	General Medicine - Phase 3	18340000304	Liver abscess-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
852	Secondary	Paediatric Medical management - Phase 3	18420000354	Liver abscess-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
853	Secondary	Paediatric Medical management - Phase 3	18420000355	Liver abscess-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
854	Secondary	General Medicine - Phase 3	18340000305	Liver abscess-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
855	Secondary	Paediatric Medical management - Phase 3	18420000356	Liver abscess-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
856	Secondary	General Medicine - Phase 3	18340000306	Liver abscess-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
857	Secondary	General Medicine - Phase 3	18340000307	Lower GI hemorrhage-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
858	Secondary	Paediatric Medical management - Phase 3	1842000357	Lower GI hemorrhage-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
859	Secondary	Paediatric Medical management - Phase 3	1842000358	Lower GI hemorrhage-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
860	Secondary	General Medicine - Phase 3	1834000308	Lower GI hemorrhage-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
861	Secondary	Paediatric Medical management - Phase 3	1842000359	Lower GI hemorrhage-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
862	Secondary	General Medicine - Phase 3	1834000309	Lower GI hemorrhage-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
863	Secondary	Paediatric Medical management - Phase 3	1842000360	Lower GI hemorrhage-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College& Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
864	Secondary	General Medicine - Phase 3	18340000310	Lower GI hemorrhage-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
865	Secondary	Paediatric Medical management - Phase 3	18420000361	Lung abscess-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Cbc , Clinical Notes With Planned Line Of Treatment , Supporting Investigations , X-Ray (Chest)	Cbc , Detailed Discharge Summary , Post Treatment X-Ray (Chest)	No	No	Yes	No	No	Not Applicable(NA)
866	Secondary	General Medicine - Phase 3	18340000311	Lung abscess-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Cbc , Clinical Notes With Planned Line Of Treatment , Supporting Investigations , X-Ray (Chest)	Cbc , Detailed Discharge Summary , Post Treatment X-Ray (Chest)	No	No	Yes	No	No	Not Applicable(NA)
867	Secondary	Paediatric Medical management - Phase 3	18420000362	Lung abscess-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Cbc , Clinical Notes With Planned Line Of Treatment , Supporting Investigations , X-Ray (Chest)	Cbc , Detailed Discharge Summary , Post Treatment X-Ray (Chest)	No	No	Yes	No	No	Not Applicable(NA)
868	Secondary	General Medicine - Phase 3	18340000312	Lung abscess-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Cbc , Clinical Notes With Planned Line Of Treatment , Supporting Investigations , X-Ray (Chest)	Cbc , Detailed Discharge Summary , Post Treatment X-Ray (Chest)	No	No	Yes	No	No	Not Applicable(NA)
869	Secondary	General Medicine - Phase 3	18340000313	Lung abscess-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Cbc , Clinical Notes With Planned Line Of Treatment , Supporting Investigations , X-Ray (Chest)	Cbc , Detailed Discharge Summary , Post Treatment X-Ray (Chest)	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
870	Secondary	Paediatric Medical management - Phase 3	1842000363	Lung abscess-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Cbc , Clinical Notes With Planned Line Of Treatment , Supporting Investigations , X-Ray (Chest)	Cbc , Detailed Discharge Summary , Post Treatment X-Ray (Chest)	No	No	Yes	No	No	Not Applicable(NA)
871	Secondary	Paediatric Medical management - Phase 3	1842000364	Lung abscess-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Cbc , Clinical Notes With Planned Line Of Treatment , Supporting Investigations , X-Ray (Chest)	Cbc , Detailed Discharge Summary , Post Treatment X-Ray (Chest)	No	No	Yes	No	No	Not Applicable(NA)
872	Secondary	General Medicine - Phase 3	1834000314	Lung abscess-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Cbc , Clinical Notes With Planned Line Of Treatment , Supporting Investigations , X-Ray (Chest)	Cbc , Detailed Discharge Summary , Post Treatment X-Ray (Chest)	No	No	Yes	No	No	Not Applicable(NA)
873	Secondary	General Surgery - Phase 3	1835000026	Lymphatics Excision of Subcutaneous Tissues In Lymphoedema	10000	10000	9500	8500	Surgical	Not Reserved	Yes	No	0	Clinical Notes Detailing History , Clinical Photograph	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph	No	No	Yes	No	No	3
874	Secondary	Paediatric Medical management - Phase 3	1842000365	Malaria-Complicated malaria-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
875	Secondary	General Medicine - Phase 3	1834000315	Malaria-Complicated malaria-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
876	Secondary	General Medicine - Phase 3	18340000316	Malaria-Complicated malaria-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
877	Secondary	Paediatric Medical management - Phase 3	18420000366	Malaria-Complicated malaria-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
878	Secondary	Paediatric Medical management - Phase 3	18420000367	Malaria-Complicated malaria-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
879	Secondary	General Medicine - Phase 3	18340000317	Malaria-Complicated malaria-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
880	Secondary	General Medicine - Phase 3	18340000318	Malaria-Complicated malaria-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
881	Secondary	Paediatric Medical management - Phase 3	18420000368	Malaria-Complicated malaria-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
882	Secondary	Paediatric Medical management - Phase 3	1842000369	Malaria-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
883	Secondary	General Medicine - Phase 3	1834000319	Malaria-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
884	Secondary	Paediatric Medical management - Phase 3	1842000370	Malaria-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
885	Secondary	General Medicine - Phase 3	1834000320	Malaria-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
886	Secondary	General Medicine - Phase 3	1834000321	Malaria-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
887	Secondary	Paediatric Medical management - Phase 3	1842000371	Malaria-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
888	Secondary	General Medicine - Phase 3	18340000322	Malaria-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
889	Secondary	Paediatric Medical management - Phase 3	18420000372	Malaria-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
890	Secondary	General Surgery - Phase 3	18350000027	Management of Pilonidal Sinus-General Anesthesia	13500	13500	12825	11475	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Examination Confirming Pilonidal Sinus	Detailed Operative Notes , Histopathology (Hpe) , Intra-Op Clinical Photograph	No	No	Yes	No	Yes	1
891	Secondary	General Surgery - Phase 3	18350000028	Management of Pilonidal Sinus-Local Anesthesia	5000	5000	4750	4250	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Examination Confirming Pilonidal Sinus	Detailed Operative Notes , Histopathology (Hpe) , Intra-Op Clinical Photograph	No	No	Yes	No	Yes	1
892	Secondary	General Surgery - Phase 3	18350000029	Management of Varicose Veins	7000	7000	6650	5950	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Duplex Ultrasonography/Colour Doppler , Pre-Op Clinical Photograph	Detailed Discharge Summary , Detailed Operative Notes , Post Procedure Clinical Photograph	No	No	Yes	No	No	3
893	Secondary	Obstetrics & Gynaecology - Phase 3	18380000043	Manchester Repair	15000	15000	14250	12750	Surgical	Reserved	No	No	0	Admission Notes Comprising Of History And Examination With Indications For The Procedure , Relevant Investigations (Establishing Diagnosis)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra-Operative Photograph , Progress Notes	No	No	Yes	No	No	5

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
894	Secondary	Obstetrics & Gynaecology - Phase 3	1838000044	Manual removal of placenta	8500	8500	8075	7225	Surgical	Reserved	Yes	No	0	Clinical Notes Documenting Need Of Manual Removal Of Placenta/ Use Of Active Management Of Third Stage Of Labor (Amts)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Natal Course , Progress Notes , Stills Of Placenta	No	No	Yes	No	No	2
895	Secondary	Obstetrics & Gynaecology - Phase 3	1838000045	McDonald's stitch	4000	4000	3800	3400	Surgical	Not Reserved	Yes	No	0	Admission Notes Comprising Of History And Anc Findings Justifying Cervical Incompetence And The Procedure	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra-Operative Photograph , Progress Notes	No	No	Yes	No	Yes	1
896	Secondary	Paediatric Medical management - Phase 3	18420000373	Medical Management for Raised intracranial pressure-After Decompressive craniotomy / After Shunt procedure / After other emergency neuro surgical procedures / For ICP monitoring-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	Yes	No	No	No	No	Not Applicable(NA)
897	Secondary	Paediatric Medical management - Phase 3	18420000374	Medical Management for Raised intracranial pressure-After Decompressive craniotomy / After Shunt procedure / After other emergency neuro surgical procedures / For ICP monitoring-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	Yes	No	No	No	No	Not Applicable(NA)
898	Secondary	Paediatric Medical management - Phase 3	18420000375	Medical Management for Raised intracranial pressure-After Decompressive craniotomy / After other emergency neuro surgical procedures / For ICP monitoring-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	Yes	No	No	No	No	Not Applicable(NA)
899	Secondary	Paediatric Medical management - Phase 3	18420000376	Medical Management for Raised intracranial pressure-After Decompressive craniotomy / After Shunt procedure / After other emergency neuro surgical procedures / For ICP monitoring-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	Yes	No	No	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
900	Secondary	Obstetrics & Gynaecology - Phase 3	1838000046	Medical Termination of Pregnancy-MTP 8 to 12 weeks	5000	5000	4750	4250	Surgical	Not Reserved	Yes	No	0	Admission Notes Comprising Of History And Examination With Indications For The Procedure , Relevant Investigations (Establishing Diagnosis) , Usg-Obstetric	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Hpe Pic Of Specimen , Intra-Operative Photograph , Progress Notes	No	No	Yes	No	No	1
901	Secondary	Obstetrics & Gynaecology - Phase 3	1838000047	Medical Termination of Pregnancy-MTP > 12 weeks	6500	6500	6175	5525	Surgical	Not Reserved	Yes	No	0	Admission Notes Comprising Of History And Examination With Indications For The Procedure , Relevant Investigations (Establishing Diagnosis) , Usg-Obstetric	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Hpe Pic Of Specimen , Intra-Operative Photograph , Progress Notes	No	No	Yes	No	No	1
902	Secondary	Obstetrics & Gynaecology - Phase 3	1838000048	Medical Termination of Pregnancy-MTP upto 8 weeks	3500	3500	3325	2975	Surgical	Not Reserved	Yes	No	0	Admission Notes Comprising Of History And Examination With Indications For The Procedure , Relevant Investigations (Establishing Diagnosis) , Usg-Obstetric	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Hpe Pic Of Specimen , Intra-Operative Photograph , Progress Notes	No	No	Yes	No	No	1
903	Secondary	Obstetrics & Gynaecology - Phase 3	1838000049	Medical management of ectopic pregnancy-HDU	2000	2000	1900	1700	Medical	Not Reserved	No	No	0	Admission Notes Comprising Of History And Examination With Indications For The Procedure , Relevant Investigations (Establishing Diagnosis)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra-Operative Photograph , Progress Notes	No	No	Yes	No	No	5
904	Secondary	Obstetrics & Gynaecology - Phase 3	1838000050	Medical management of ectopic pregnancy-Routine Ward	1000	1000	950	850	Medical	Not Reserved	No	No	0	Admission Notes Comprising Of History And Examination With Indications For The Procedure , Relevant Investigations (Establishing Diagnosis)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra-Operative Photograph , Progress Notes	No	No	Yes	No	No	5
905	Secondary	General Medicine - Phase 3	18340000323	Meningitis-Acute meningitis-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
906	Secondary	Paediatric Medical management - Phase 3	1842000377	Meningitis-Acute meningitis-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
907	Secondary	General Medicine - Phase 3	1834000324	Meningitis-Acute meningitis-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
908	Secondary	Paediatric Medical management - Phase 3	1842000378	Meningitis-Acute meningitis-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
909	Secondary	Paediatric Medical management - Phase 3	1842000379	Meningitis-Acute meningitis-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
910	Secondary	General Medicine - Phase 3	1834000325	Meningitis-Acute meningitis-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
911	Secondary	General Medicine - Phase 3	1834000326	Meningitis-Acute meningitis-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
912	Secondary	Paediatric Medical management - Phase 3	1842000380	Meningitis-Acute meningitis-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
913	Secondary	Paediatric Medical management - Phase 3	1842000381	Meningitis-Chronic meningitis-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
914	Secondary	General Medicine - Phase 3	1834000327	Meningitis-Chronic meningitis-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
915	Secondary	General Medicine - Phase 3	1834000328	Meningitis-Chronic meningitis-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
916	Secondary	Paediatric Medical management - Phase 3	1842000382	Meningitis-Chronic meningitis-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
917	Secondary	Paediatric Medical management - Phase 3	1842000383	Meningitis-Chronic meningitis-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
918	Secondary	General Medicine - Phase 3	18340000329	Meningitis-Chronic meningitis-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
919	Secondary	Paediatric Medical management - Phase 3	18420000384	Meningitis-Chronic meningitis-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
920	Secondary	General Medicine - Phase 3	18340000330	Meningitis-Chronic meningitis-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
921	Secondary	Paediatric Medical management - Phase 3	18420000385	Meningitis-Complicated bacterial meningitis-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
922	Secondary	General Medicine - Phase 3	18340000331	Meningitis-Complicated bacterial meningitis-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
923	Secondary	Paediatric Medical management - Phase 3	18420000386	Meningitis-Complicated bacterial meningitis-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
924	Secondary	General Medicine - Phase 3	1834000332	Meningitis-Complicated bacterial meningitis-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
925	Secondary	General Medicine - Phase 3	1834000333	Meningitis-Complicated bacterial meningitis-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
926	Secondary	Paediatric Medical management - Phase 3	1842000387	Meningitis-Complicated bacterial meningitis-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
927	Secondary	Paediatric Medical management - Phase 3	1842000388	Meningitis-Complicated bacterial meningitis-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
928	Secondary	General Medicine - Phase 3	1834000334	Meningitis-Complicated bacterial meningitis-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
929	Secondary	Paediatric Medical management - Phase 3	1842000389	Meningitis-Neuro tuberculosis-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
930	Secondary	General Medicine - Phase 3	18340000335	Meningitis-Neuro tuberculosis-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
931	Secondary	Paediatric Medical management - Phase 3	18420000390	Meningitis-Neuro tuberculosis-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
932	Secondary	General Medicine - Phase 3	18340000336	Meningitis-Neuro tuberculosis-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
933	Secondary	General Medicine - Phase 3	18340000337	Meningitis-Neuro tuberculosis-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
934	Secondary	Paediatric Medical management - Phase 3	18420000391	Meningitis-Neuro tuberculosis-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
935	Secondary	General Medicine - Phase 3	18340000338	Meningitis-Neuro tuberculosis-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
936	Secondary	Paediatric Medical management - Phase 3	18420000392	Meningitis-Neuro tuberculosis-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
937	Secondary	General Medicine - Phase 3	18340000339	Meningitis-Partially treated pyogenic meningitis-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
938	Secondary	Paediatric Medical management - Phase 3	18420000393	Meningitis-Partially treated pyogenic meningitis-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
939	Secondary	General Medicine - Phase 3	18340000340	Meningitis-Partially treated pyogenic meningitis-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
940	Secondary	Paediatric Medical management - Phase 3	18420000394	Meningitis-Partially treated pyogenic meningitis-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
941	Secondary	General Medicine - Phase 3	18340000341	Meningitis-Partially treated pyogenic meningitis-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
942	Secondary	Paediatric Medical management - Phase 3	1842000395	Meningitis-Partially treated pyogenic meningitis-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
943	Secondary	Paediatric Medical management - Phase 3	1842000396	Meningitis-Partially treated pyogenic meningitis-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
944	Secondary	General Medicine - Phase 3	1834000342	Meningitis-Partially treated pyogenic meningitis-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
945	Secondary	Mental Disorders Packages - Phase 3	1850000006	Mental Retardation-HDU	2000	2000	1900	1700	Medical	Reserved	No	No	0	Detailed History With Chronicity	Detailed Discharge Summary , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
946	Secondary	Mental Disorders Packages - Phase 3	1850000007	Mental Retardation-ICU - With Ventilator	3000	3000	2850	2550	Medical	Reserved	No	No	0	Detailed History With Chronicity	Detailed Discharge Summary , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
947	Secondary	Mental Disorders Packages - Phase 3	1850000008	Mental Retardation-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Reserved	No	No	0	Detailed History With Chronicity	Detailed Discharge Summary , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
948	Secondary	Mental Disorders Packages - Phase 3	1850000009	Mental Retardation-Routine Ward	1000	1000	950	850	Medical	Reserved	No	No	0	Detailed History With Chronicity	Detailed Discharge Summary , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
949	Secondary	Mental Disorders Packages - Phase 3	18500000010	Mental and Behavioural disorders due to psychoactive substance use-HDU	2000	2000	1900	1700	Medical	Reserved	No	No	0	Detailed History Of Psychoactive Substanc With Chronicity	Detailed Discharge Summary , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
950	Secondary	Mental Disorders Packages - Phase 3	18500000011	Mental and Behavioural disorders due to psychoactive substance use-ICU - With Ventilator	3000	3000	2850	2550	Medical	Reserved	No	No	0	Detailed History Of Psychoactive Substanc With Chronicity	Detailed Discharge Summary , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
951	Secondary	Mental Disorders Packages - Phase 3	18500000012	Mental and Behavioural disorders due to psychoactive substance use-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Reserved	No	No	0	Detailed History Of Psychoactive Substanc With Chronicity	Detailed Discharge Summary , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
952	Secondary	Mental Disorders Packages - Phase 3	18500000013	Mental and Behavioural disorders due to psychoactive substance use-Routine Ward	1000	1000	950	850	Medical	Reserved	No	No	0	Detailed History Of Psychoactive Substanc With Chronicity	Detailed Discharge Summary , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
953	Secondary	Mental Disorders Packages - Phase 3	18500000014	Mental disorders - Organic, including symptomatic-HDU	2000	2000	1900	1700	Medical	Reserved	No	No	0	Detailed History With Chronicity	Detailed Discharge Summary , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
954	Secondary	Mental Disorders Packages - Phase 3	1850000015	Mental disorders - Organic, including symptomatic-ICU - With Ventilator	3000	3000	2850	2550	Medical	Reserved	No	No	0	Detailed History With Chronicity	Detailed Discharge Summary , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
955	Secondary	Mental Disorders Packages - Phase 3	1850000016	Mental disorders - Organic, including symptomatic-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Reserved	No	No	0	Detailed History With Chronicity	Detailed Discharge Summary , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
956	Secondary	Mental Disorders Packages - Phase 3	1850000017	Mental disorders - Organic, including symptomatic-Routine Ward	1000	1000	950	850	Medical	Reserved	No	No	0	Detailed History With Chronicity	Detailed Discharge Summary , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
957	Secondary	General Surgery - Phase 3	18350000030	Mesenteric Caval Anastomosis	28500	28500	27075	24225	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Usg/Ct/Mri/Endoscopy Report	Detailed Discharge Summary , Detailed Operative Notes , Intra Procedure Clinical Photograph	No	No	Yes	No	No	6
958	Secondary	Otorhinolaryngology (ENT) - Phase 3	18330000021	Microalaryngeal surgery with or without laser	17000	17000	16150	14450	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Laryngoscopy Findings/Laryngeal Electromyography, Supporting Investigations	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph/Intra Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	No	2
959	Secondary	General Surgery - Phase 3	18350000031	Microalaryngoscopic Surgery	18500	18500	17575	15725	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Nasoendoscopy/Nasal Endoscopy	Detailed Discharge Summary , Detailed Operative Notes , Post Procedure Clinical Photograph/Intra Procedure Clinical Photograph , Post Procedure Nasal Endoscopy	No	No	Yes	No	No	3

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
960	Secondary	Mental Disorders Packages - Phase 3	1850000018	Mood (affective) disorders-HDU	2000	2000	1900	1700	Medical	Reserved	No	No	0	Detailed History With Chronicity	Detailed Discharge Summary , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
961	Secondary	Mental Disorders Packages - Phase 3	1850000019	Mood (affective) disorders-ICU - With Ventilator	3000	3000	2850	2550	Medical	Reserved	No	No	0	Detailed History With Chronicity	Detailed Discharge Summary , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
962	Secondary	Mental Disorders Packages - Phase 3	1850000020	Mood (affective) disorders-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Reserved	No	No	0	Detailed History With Chronicity	Detailed Discharge Summary , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
963	Secondary	Mental Disorders Packages - Phase 3	1850000021	Mood (affective) disorders-Routine Ward	1000	1000	950	850	Medical	Reserved	No	No	0	Detailed History With Chronicity	Detailed Discharge Summary , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
964	Secondary	General Medicine - Phase 3	18340000343	Myxedema coma -HDU	2000	2000	1900	1700	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Thyroid Profile , Usg-Thyroid Gland	Detailed Discharge Summary , Post Treatment Thyroid Profile	No	No	Yes	No	No	Not Applicable(NA)
965	Secondary	Paediatric Medical management - Phase 3	18420000397	Myxedema coma -HDU	2000	2000	1900	1700	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Thyroid Profile , Usg-Thyroid Gland	Detailed Discharge Summary , Post Treatment Thyroid Profile	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
966	Secondary	General Medicine - Phase 3	1834000344	Myxedema coma -ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Thyroid Profile , Usg-Thyroid Gland	Detailed Discharge Summary , Post Treatment Thyroid Profile	No	No	Yes	No	No	Not Applicable(NA)
967	Secondary	Paediatric Medical management - Phase 3	1842000398	Myxedema coma -ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Thyroid Profile , Usg-Thyroid Gland	Detailed Discharge Summary , Post Treatment Thyroid Profile	No	No	Yes	No	No	Not Applicable(NA)
968	Secondary	Paediatric Medical management - Phase 3	1842000399	Myxedema coma -ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Thyroid Profile , Usg-Thyroid Gland	Detailed Discharge Summary , Post Treatment Thyroid Profile	No	No	Yes	No	No	Not Applicable(NA)
969	Secondary	General Medicine - Phase 3	1834000345	Myxedema coma -ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Thyroid Profile , Usg-Thyroid Gland	Detailed Discharge Summary , Post Treatment Thyroid Profile	No	No	Yes	No	No	Not Applicable(NA)
970	Secondary	General Medicine - Phase 3	1834000346	Myxedema coma -Routine Ward	1000	1000	950	850	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Thyroid Profile , Usg-Thyroid Gland	Detailed Discharge Summary , Post Treatment Thyroid Profile	No	No	Yes	No	No	Not Applicable(NA)
971	Secondary	Paediatric Medical management - Phase 3	1842000400	Myxedema coma -Routine Ward	1000	1000	950	850	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Thyroid Profile , Usg-Thyroid Gland	Detailed Discharge Summary , Post Treatment Thyroid Profile	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
972	Secondary	General Medicine - Phase 3	18340000347	Nephrotic syndrome with peritonitis-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
973	Secondary	Paediatric Medical management - Phase 3	18420000401	Nephrotic syndrome with peritonitis-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
974	Secondary	General Medicine - Phase 3	18340000348	Nephrotic syndrome with peritonitis-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
975	Secondary	Paediatric Medical management - Phase 3	18420000402	Nephrotic syndrome with peritonitis-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
976	Secondary	General Medicine - Phase 3	18340000349	Nephrotic syndrome with peritonitis-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
977	Secondary	Paediatric Medical management - Phase 3	18420000403	Nephrotic syndrome with peritonitis-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
978	Secondary	General Medicine - Phase 3	18340000350	Nephrotic syndrome with peritonitis-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
979	Secondary	Paediatric Medical management - Phase 3	18420000404	Nephrotic syndrome with peritonitis-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
980	Secondary	Orthopaedics - Phase 3	18400000070	Nerve Repair Surgery	13800	13800	13110	11730	Surgical	Not Reserved	No	No	0	Detailed Clinical Notes , Mri/Emg/Ncv	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra Procedure Photograph , Post Procedure Clinical Photograph	No	No	Yes	No	No	4
981	Secondary	Orthopaedics - Phase 3	18400000071	Nerve Transposition / Release / Neurolysis-Nerve Neurolysis	13000	13000	12350	11050	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Mri/Emg/Ncv	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra Procedure Photograph	No	No	Yes	No	No	3
982	Secondary	Orthopaedics - Phase 3	18400000072	Nerve Transposition / Release / Neurolysis-Nerve Release	13000	13000	12350	11050	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Mri/Emg/Ncv	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra Procedure Photograph	No	No	Yes	No	No	3
983	Secondary	Orthopaedics - Phase 3	18400000073	Nerve Transposition / Release / Neurolysis-Nerve Transposition	13000	13000	12350	11050	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Mri/Emg/Ncv	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra Procedure Photograph	No	No	Yes	No	No	3

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
984	Secondary	Paediatric Medical management - Phase 3	18420000405	Neuromuscular disorders-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
985	Secondary	General Medicine - Phase 3	18340000351	Neuromuscular disorders-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
986	Secondary	Paediatric Medical management - Phase 3	18420000406	Neuromuscular disorders-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
987	Secondary	General Medicine - Phase 3	18340000352	Neuromuscular disorders-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
988	Secondary	General Medicine - Phase 3	18340000353	Neuromuscular disorders-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
989	Secondary	Paediatric Medical management - Phase 3	18420000407	Neuromuscular disorders-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
990	Secondary	Paediatric Medical management - Phase 3	18420000408	Neuromuscular disorders-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
991	Secondary	General Medicine - Phase 3	18340000354	Neuromuscular disorders-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
992	Secondary	Mental Disorders Packages - Phase 3	18500000022	Neurotic, stress-related and somatoform disorders-HDU	2000	2000	1900	1700	Medical	Reserved	No	No	0	Detailed History With Chronicity	Detailed Discharge Summary , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
993	Secondary	Mental Disorders Packages - Phase 3	18500000023	Neurotic, stress-related and somatoform disorders-ICU - With Ventilator	3000	3000	2850	2550	Medical	Reserved	No	No	0	Detailed History With Chronicity	Detailed Discharge Summary , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
994	Secondary	Mental Disorders Packages - Phase 3	18500000024	Neurotic, stress-related and somatoform disorders-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Reserved	No	No	0	Detailed History With Chronicity	Detailed Discharge Summary , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
995	Secondary	Mental Disorders Packages - Phase 3	18500000025	Neurotic, stress-related and somatoform disorders-Routine Ward	1000	1000	950	850	Medical	Reserved	No	No	0	Detailed History With Chronicity	Detailed Discharge Summary , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
996	Secondary	Orthopaedics - Phase 3	1840000074	Open Reduction of CDH	20000	20000	19000	17000	Surgical	Not Reserved	Yes	No	0	Clinical And Radiological Investigations (X-Ray Of Both Hips) , Clinical Photograph	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure (X-Ray) , Post Procedure Clinical Photograph	No	No	Yes	No	No	5
997	Secondary	Orthopaedics - Phase 3	1840000075	Open Reduction of Small Joint	10000	10000	9500	8500	Surgical	Not Reserved	Yes	No	0	Clinical Investigations , Clinical Photograph , Radiological Investigations , X-Ray (Affected Joint)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Invoice/Bar-Code Of Implant , Post Procedure (X-Ray) , Post Procedure Clinical Photograph	No	No	Yes	No	No	2
998	Secondary	Otorhinolaryngology (ENT) - Phase 3	1833000022	Open sinus surgery	15000	15000	14250	12750	Surgical	Not Reserved	Yes	No	0	Clinical Notes Detailing Chronicity Of Sinusitis , Ct Scan , Pre-Op Clinical Photograph	Detailed Procedure/Operative Notes , Histopathology (Hpe) , Intra Procedure Clinical Photograph , Post Procedure Clinical Photograph Of Affected Part , Post Procedure Imaging	No	No	Yes	No	No	2
999	Secondary	General Surgery - Phase 3	1835000032	Operation for Bleeding Peptic Ulcer	22500	22500	21375	19125	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Endoscopy	Detailed Discharge Summary , Detailed Operative Notes , Intra Procedure Clinical Photograph	No	No	Yes	No	No	5
1000	Secondary	General Surgery - Phase 3	1835000033	Operation for Gastric / Duodenal Perforation-Duodenal Perforation	18500	18500	17575	15725	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Fir/Mic (In Case Of Traumatic Aetiology) , X-Ray Abdomen (Erect)/Usg/ Ct-Abdomen	Detailed Discharge Summary , Detailed Operative Notes , Intra Procedure Clinical Photograph	No	No	Yes	No	No	6
1001	Secondary	General Surgery - Phase 3	1835000034	Operation for Gastric / Duodenal Perforation-Gastric Perforation	18500	18500	17575	15725	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Fir/Mic (In Case Of Traumatic Aetiology) , X-Ray Abdomen (Erect)/Usg/ Ct-Abdomen	Detailed Discharge Summary , Detailed Operative Notes , Intra Procedure Clinical Photograph	No	No	Yes	No	No	6

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1002	Secondary	Paediatric Medical management - Phase 3	18420000409	Optic neuritis-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals , Clinical Notes Detailing History , Clinical Photograph , Fundus Findings	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1003	Secondary	General Medicine - Phase 3	18340000355	Optic neuritis-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals , Clinical Notes Detailing History , Clinical Photograph , Fundus Findings	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1004	Secondary	General Medicine - Phase 3	18340000356	Optic neuritis-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals , Clinical Notes Detailing History , Clinical Photograph , Fundus Findings	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1005	Secondary	Paediatric Medical management - Phase 3	18420000410	Optic neuritis-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals , Clinical Notes Detailing History , Clinical Photograph , Fundus Findings	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1006	Secondary	General Medicine - Phase 3	18340000357	Optic neuritis-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals , Clinical Notes Detailing History , Clinical Photograph , Fundus Findings	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1007	Secondary	Paediatric Medical management - Phase 3	18420000411	Optic neuritis-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals , Clinical Notes Detailing History , Clinical Photograph , Fundus Findings	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College& Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1008	Secondary	General Medicine - Phase 3	18340000358	Optic neuritis-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals , Clinical Notes Detailing History , Clinical Photograph , Fundus Findings	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1009	Secondary	Paediatric Medical management - Phase 3	18420000412	Optic neuritis-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals , Clinical Notes Detailing History , Clinical Photograph , Fundus Findings	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1010	Secondary	Ophthalmology - Phase 3	18390000034	Orbitotomy	14000	14000	13300	11900	Surgical	Not Reserved	No	No	0	Clinical Notes Confirming The Indication For The Procedure , Ct Scan , Plan For Lab Investigation Of Host Tissue (Hpe/ Microbiology/Other)	Detailed Operative Notes , Histopathology (Hpe) , Hpe-Actual Surgery , Still Image Of The Procedure With Patient Id And Date	No	No	Yes	No	Yes	1
1011	Secondary	Orthopaedics - Phase 3	18400000076	Osteotomy-Long Bone	23000	23000	21850	19550	Surgical	Not Reserved	Yes	No	0	Clinical Photograph Of Affected Part , Detailed Clinical Notes , X-Ray (Affected Bone)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Invoice/Bar-Code Of Implant , Post Procedure (X-Ray) , Post Procedure Clinical Photograph	No	No	Yes	No	No	5
1012	Secondary	Orthopaedics - Phase 3	18400000077	Osteotomy-Small Bone	10000	10000	9500	8500	Surgical	Not Reserved	Yes	No	0	Clinical Photograph Of Affected Part , Detailed Clinical Notes , X-Ray (Affected Bone)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure (X-Ray) , Post Procedure Clinical Photograph	No	No	Yes	No	No	4
1013	Secondary	Paediatric Medical management - Phase 3	18420000413	Pancreatitis-Acute pancreatitis-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Cbc , Detailed Clinical Notes , Lft , Lipase , Sr Amylase , Usg-Abdomen	Detailed Discharge Summary , Lft , Lipase , Post Treatment Sr Amylase , Usg-Abdomen	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1014	Secondary	General Medicine - Phase 3	18340000359	Pancreatitis-Acute pancreatitis-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Cbc , Detailed Clinical Notes , Lft , Lipase , Sr Amylase , Usg-Abdomen	Detailed Discharge Summary , Lft , Lipase , Post Treatment Sr Amylase , Usg-Abdomen	No	No	Yes	No	No	Not Applicable(NA)
1015	Secondary	Paediatric Medical management - Phase 3	18420000414	Pancreatitis-Acute pancreatitis-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Cbc , Detailed Clinical Notes , Lft , Lipase , Sr Amylase , Usg-Abdomen	Detailed Discharge Summary , Lft , Lipase , Post Treatment Sr Amylase , Usg-Abdomen	No	No	Yes	No	No	Not Applicable(NA)
1016	Secondary	General Medicine - Phase 3	18340000360	Pancreatitis-Acute pancreatitis-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Cbc , Detailed Clinical Notes , Lft , Lipase , Sr Amylase , Usg-Abdomen	Detailed Discharge Summary , Lft , Lipase , Post Treatment Sr Amylase , Usg-Abdomen	No	No	Yes	No	No	Not Applicable(NA)
1017	Secondary	General Medicine - Phase 3	18340000361	Pancreatitis-Acute pancreatitis-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Cbc , Detailed Clinical Notes , Lft , Lipase , Sr Amylase , Usg-Abdomen	Detailed Discharge Summary , Lft , Lipase , Post Treatment Sr Amylase , Usg-Abdomen	No	No	Yes	No	No	Not Applicable(NA)
1018	Secondary	Paediatric Medical management - Phase 3	18420000415	Pancreatitis-Acute pancreatitis-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Cbc , Detailed Clinical Notes , Lft , Lipase , Sr Amylase , Usg-Abdomen	Detailed Discharge Summary , Lft , Lipase , Post Treatment Sr Amylase , Usg-Abdomen	No	No	Yes	No	No	Not Applicable(NA)
1019	Secondary	Paediatric Medical management - Phase 3	18420000416	Pancreatitis-Acute pancreatitis-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Cbc , Detailed Clinical Notes , Lft , Lipase , Sr Amylase , Usg-Abdomen	Detailed Discharge Summary , Lft , Lipase , Post Treatment Sr Amylase , Usg-Abdomen	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College& Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1020	Secondary	General Medicine - Phase 3	18340000362	Pancreatitis-Acute pancreatitis-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Cbc , Detailed Clinical Notes , Lft , Lipase , Sr Amylase , Usg-Abdomen	Detailed Discharge Summary , Lft , Lipase , Post Treatment Sr Amylase , Usg-Abdomen	No	No	Yes	No	No	Not Applicable(NA)
1021	Secondary	Paediatric Medical management - Phase 3	18420000417	Pancreatitis-Chronic pancreatitis-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Cbc , Detailed Clinical Notes , Lft , Lipase , Sr Amylase , Usg-Abdomen	Detailed Discharge Summary , Lft , Lipase , Post Treatment Sr Amylase , Usg-Abdomen	No	No	Yes	No	No	Not Applicable(NA)
1022	Secondary	General Medicine - Phase 3	18340000363	Pancreatitis-Chronic pancreatitis-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Cbc , Detailed Clinical Notes , Lft , Lipase , Sr Amylase , Usg-Abdomen	Detailed Discharge Summary , Lft , Lipase , Post Treatment Sr Amylase , Usg-Abdomen	No	No	Yes	No	No	Not Applicable(NA)
1023	Secondary	General Medicine - Phase 3	18340000364	Pancreatitis-Chronic pancreatitis-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Cbc , Detailed Clinical Notes , Lft , Lipase , Sr Amylase , Usg-Abdomen	Detailed Discharge Summary , Lft , Lipase , Post Treatment Sr Amylase , Usg-Abdomen	No	No	Yes	No	No	Not Applicable(NA)
1024	Secondary	Paediatric Medical management - Phase 3	18420000418	Pancreatitis-Chronic pancreatitis-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Cbc , Detailed Clinical Notes , Lft , Lipase , Sr Amylase , Usg-Abdomen	Detailed Discharge Summary , Lft , Lipase , Post Treatment Sr Amylase , Usg-Abdomen	No	No	Yes	No	No	Not Applicable(NA)
1025	Secondary	Paediatric Medical management - Phase 3	18420000419	Pancreatitis-Chronic pancreatitis-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Cbc , Detailed Clinical Notes , Lft , Lipase , Sr Amylase , Usg-Abdomen	Detailed Discharge Summary , Lft , Lipase , Post Treatment Sr Amylase , Usg-Abdomen	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1026	Secondary	General Medicine - Phase 3	18340000365	Pancreatitis-Chronic pancreatitis-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Cbc , Detailed Clinical Notes , Lft , Lipase , Sr Amylase , Usg-Abdomen	Detailed Discharge Summary , Lft , Lipase , Post Treatment Sr Amylase , Usg-Abdomen	No	No	Yes	No	No	Not Applicable(NA)
1027	Secondary	Paediatric Medical management - Phase 3	18420000420	Pancreatitis-Chronic pancreatitis-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Cbc , Detailed Clinical Notes , Lft , Lipase , Sr Amylase , Usg-Abdomen	Detailed Discharge Summary , Lft , Lipase , Post Treatment Sr Amylase , Usg-Abdomen	No	No	Yes	No	No	Not Applicable(NA)
1028	Secondary	General Medicine - Phase 3	18340000366	Pancreatitis-Chronic pancreatitis-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Cbc , Detailed Clinical Notes , Lft , Lipase , Sr Amylase , Usg-Abdomen	Detailed Discharge Summary , Lft , Lipase , Post Treatment Sr Amylase , Usg-Abdomen	No	No	Yes	No	No	Not Applicable(NA)
1029	Secondary	Orthopaedics - Phase 3	18400000078	Patellectomy	11000	11000	10450	9350	Surgical	Not Reserved	Yes	No	0	Clinical Photograph Of Affected Part , Detailed Clinical Notes , X-Ray (Patella)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure (X-Ray) , Post Procedure Clinical Photograph	No	No	Yes	No	No	5
1030	Secondary	Obstetrics & Gynaecology - Phase 3	18380000051	Pelvic Abscess Management including Colpotomy	1200	1200	1140	1020	Surgical	Not Reserved	Yes	No	0	Admission Notes Comprising Of History And Examination With Indications For The Procedure , Relevant Investigations (Establishing Diagnosis) , Usg-Abdomen & Pelvis	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra Procedure Clinical Photograph , Progress Notes	No	No	Yes	No	Yes	1
1031	Secondary	Orthopaedics - Phase 3	18400000079	Pelvic Osteotomy and fixation	20000	20000	19000	17000	Surgical	Not Reserved	Yes	No	0	Clinical Photograph Of Affected Part , Detailed Clinical Notes , X-Ray (Patella)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Invoice/Bar-Code Of Implant , Post Procedure Clinical Photograph , Post Procedure X-Ray Showing Implant	No	No	Yes	No	No	7

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College& Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1032	Secondary	Orthopaedics - Phase 3	1840000080	Percutaneous - Fixation of Fracture-General Anesthesia	10000	10000	9500	8500	Surgical	Not Reserved	Yes	No	0	Clinical Notes With Planned Line Of Treatment , X-Ray Film With Report	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure (X-Ray) With Reports , Stickers Of Implants Used	No	No	Yes	No	No	4
1033	Secondary	Orthopaedics - Phase 3	1840000081	Percutaneous - Fixation of Fracture-Local Anesthesia	5000	5000	4750	4250	Surgical	Not Reserved	Yes	No	0	Clinical Notes With Planned Line Of Treatment , X-Ray Film With Report	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure (X-Ray) With Reports , Stickers Of Implants Used	No	No	Yes	No	No	4
1034	Secondary	General Medicine - Phase 3	18340000367	Pericardial / Pleural tuberculosis-Pericardial tuberculosis-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1035	Secondary	Paediatric Medical management - Phase 3	18420000421	Pericardial / Pleural tuberculosis-Pericardial tuberculosis-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1036	Secondary	General Medicine - Phase 3	18340000368	Pericardial / Pleural tuberculosis-Pericardial tuberculosis-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1037	Secondary	Paediatric Medical management - Phase 3	18420000422	Pericardial / Pleural tuberculosis-Pericardial tuberculosis-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1038	Secondary	General Medicine - Phase 3	18340000369	Pericardial / Pleural tuberculosis- Pericardial tuberculosis-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1039	Secondary	Paediatric Medical management - Phase 3	18420000423	Pericardial / Pleural tuberculosis- Pericardial tuberculosis-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1040	Secondary	Paediatric Medical management - Phase 3	18420000424	Pericardial / Pleural tuberculosis- Pericardial tuberculosis-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1041	Secondary	General Medicine - Phase 3	18340000370	Pericardial / Pleural tuberculosis- Pericardial tuberculosis-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1042	Secondary	General Medicine - Phase 3	18340000371	Pericardial / Pleural tuberculosis-Pleural tuberculosis-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1043	Secondary	Paediatric Medical management - Phase 3	18420000425	Pericardial / Pleural tuberculosis-Pleural tuberculosis-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1044	Secondary	Paediatric Medical management - Phase 3	18420000426	Pericardial / Pleural tuberculosis-Pleural tuberculosis-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1045	Secondary	General Medicine - Phase 3	18340000372	Pericardial / Pleural tuberculosis-Pleural tuberculosis-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1046	Secondary	General Medicine - Phase 3	18340000373	Pericardial / Pleural tuberculosis-Pleural tuberculosis-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1047	Secondary	Paediatric Medical management - Phase 3	18420000427	Pericardial / Pleural tuberculosis-Pleural tuberculosis-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1048	Secondary	General Medicine - Phase 3	18340000374	Pericardial / Pleural tuberculosis-Pleural tuberculosis-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1049	Secondary	Paediatric Medical management - Phase 3	18420000428	Pericardial / Pleural tuberculosis-Pleural tuberculosis-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College& Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1050	Secondary	General Surgery - Phase 3	18350000035	Perineal Procedure for Rectal Prolapse	14000	14000	13300	11900	Surgical	Not Reserved	Yes	No	0	Colonoscopy/Ct Scan , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Intra Procedure Clinical Photograph	No	No	Yes	No	No	2
1051	Secondary	Otorhinolaryngology (ENT) - Phase 3	18330000023	Pinna surgery for tumour / trauma-Pinna surgery for trauma	8600	8600	8170	7310	Surgical	Not Reserved	Yes	No	0	Clinical History , Pre-Op Clinical Photograph	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	Yes	1
1052	Secondary	Paediatric Medical management - Phase 3	18420000429	Plasmapheresis	2000	2000	1900	1700	Medical	Not Reserved	No	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	Yes	No	No	No	Yes	1
1053	Secondary	General Medicine - Phase 3	18340000375	Plasmapheresis	2000	2000	1900	1700	Medical	Not Reserved	No	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	Yes	No	No	No	Yes	1
1054	Secondary	Paediatric Medical management - Phase 3	18420000430	Pneumonia-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1055	Secondary	General Medicine - Phase 3	18340000376	Pneumonia-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1056	Secondary	Paediatric Medical management - Phase 3	1842000431	Pneumonia-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1057	Secondary	General Medicine - Phase 3	1834000377	Pneumonia-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1058	Secondary	Paediatric Medical management - Phase 3	1842000432	Pneumonia-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1059	Secondary	General Medicine - Phase 3	1834000378	Pneumonia-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1060	Secondary	General Medicine - Phase 3	1834000379	Pneumonia-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1061	Secondary	Paediatric Medical management - Phase 3	1842000433	Pneumonia-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1062	Secondary	General Medicine - Phase 3	18340000380	Pneumothroax-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1063	Secondary	Paediatric Medical management - Phase 3	18420000434	Pneumothroax-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1064	Secondary	General Medicine - Phase 3	18340000381	Pneumothroax-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1065	Secondary	Paediatric Medical management - Phase 3	18420000435	Pneumothroax-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1066	Secondary	Paediatric Medical management - Phase 3	18420000436	Pneumothroax-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1067	Secondary	General Medicine - Phase 3	18340000382	Pneumothroax-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1068	Secondary	General Medicine - Phase 3	18340000383	Pneumothroax-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1069	Secondary	Paediatric Medical management - Phase 3	18420000437	Pneumothroax-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1070	Secondary	General Medicine - Phase 3	18340000384	Poisoning-Acute organophosphorus poisoning-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Fir/Mic , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1071	Secondary	Paediatric Medical management - Phase 3	18420000438	Poisoning-Acute organophosphorus poisoning-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Fir/Mic , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1072	Secondary	Paediatric Medical management - Phase 3	18420000439	Poisoning-Acute organophosphorus poisoning-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Fir/Mic , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1073	Secondary	General Medicine - Phase 3	18340000385	Poisoning-Acute organophosphorus poisoning-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Fir/Mic , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1074	Secondary	General Medicine - Phase 3	18340000386	Poisoning-Acute organophosphorus poisoning-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Fir/Mic , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1075	Secondary	Paediatric Medical management - Phase 3	18420000440	Poisoning-Acute organophosphorus poisoning-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Fir/Mic , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1076	Secondary	Paediatric Medical management - Phase 3	18420000441	Poisoning-Acute organophosphorus poisoning-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Fir/Mic , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1077	Secondary	General Medicine - Phase 3	18340000387	Poisoning-Acute organophosphorus poisoning-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Fir/Mic , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1078	Secondary	General Medicine - Phase 3	18340000388	Poisoning-Other poisonings-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Fir/Mic , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1079	Secondary	Paediatric Medical management - Phase 3	18420000442	Poisoning-Other poisonings-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Fir/Mic , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1080	Secondary	General Medicine - Phase 3	18340000389	Poisoning-Other poisonings-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Fir/Mic , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1081	Secondary	Paediatric Medical management - Phase 3	18420000443	Poisoning-Other poisonings-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Fir/Mic , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1082	Secondary	General Medicine - Phase 3	18340000390	Poisoning-Other poisonings-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Fir/Mic , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1083	Secondary	Paediatric Medical management - Phase 3	18420000444	Poisoning-Other poisonings-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Fir/Mic , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1084	Secondary	Paediatric Medical management - Phase 3	18420000445	Poisoning-Other poisonings-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Fir/Mic , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1085	Secondary	General Medicine - Phase 3	18340000391	Poisoning-Other poisonings-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Fir/Mic , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1086	Secondary	Obstetrics & Gynaecology - Phase 3	18380000052	Polypectomy	1500	1500	1425	1275	Surgical	Not Reserved	Yes	No	0	Clinical Notes With Planned Line Of Treatment , Usg (Abdomen & Pelvis)/Ct (Abdomen & Pelvis)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Intra-Operative Photograph , Pic Of Specimen	No	No	Yes	No	No	1
1087	Secondary	Mental Disorders Packages - Phase 3	18500000026	Pre - Electro Convulsive Therapy (ECT) and Pre - Transcranial Magnetic Stimulation (TMS) Package (Cognitive Tests, Complete Haemogram, Liver Function Test, Renal Function Test, Serum Electrolytes, Electro Cardiogram (ECG), CT / MRI Brain, Electroencephalogram, Thyroid Function Test, VDRL, HIV Test, Vitamin B12 levels, Folate levels, Lipid Profile, Homocysteine levels)	10000	10000	9500	8500	Medical	Reserved	No	No	0	Detailed History With Chronicity	Detailed Discharge Summary , Detailed Treatment Notes , Evidence Of All Investigations Done	Yes	No	No	No	No	0
1088	Secondary	General Surgery - Phase 3	18350000036	Procedure for Fissure in Ano	8000	8000	7600	6800	Surgical	Reserved	Yes	No	0	Detailed Clinical Notes , Proctoscopy	Detailed Discharge Summary , Detailed Operative Notes	No	No	Yes	No	Yes	1
1089	Secondary	Obstetrics & Gynaecology - Phase 3	18380000053	Procedure on Fallopian Tube for establishing Tubal Patency	11600	11600	11020	9860	Surgical	Not Reserved	No	No	0	Clinical Notes Confirming The Indication For The Procedure	Detailed Discharge Summary , Detailed Operative Notes , Intra Procedure Clinical Photograph	No	No	Yes	No	No	5
1090	Secondary	Ophthalmology - Phase 3	18390000035	Pterygium + Conjunctival Autograft	5000	5000	4750	4250	Surgical	Reserved	No	No	0	Clinical Photograph , Corneal Topography , Detailed Clinical Notes , Keratometry , Retinoscopy	Detailed Discharge Summary , Detailed Operative Notes , Still Image Of The Procedure With Patient Id And Date	No	No	Yes	No	No	1
1091	Secondary	Ophthalmology - Phase 3	18390000036	Ptosis Surgery	8000	8000	7600	6800	Surgical	Not Reserved	No	No	0	Clinical Photograph Of Affected Eye	Detailed Discharge Summary , Detailed Operative Notes , Still Image Of The Procedure With Patient Id And Date	No	No	Yes	No	Yes	1

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1092	Secondary	Obstetrics & Gynaecology - Phase 3	1838000054	Pyometra drainage	5000	5000	4750	4250	Surgical	Not Reserved	No	No	0	Admission Notes Comprising Of History And Examination With Indications For The Procedure , Relevant Investigations (Establishing Diagnosis)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra-Operative Photograph , Progress Notes	No	No	Yes	No	No	3
1093	Secondary	Paediatric Medical management - Phase 3	1842000046	Pyrexia of unknown origin-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1094	Secondary	General Medicine - Phase 3	18340000392	Pyrexia of unknown origin-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1095	Secondary	Paediatric Medical management - Phase 3	18420000447	Pyrexia of unknown origin-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1096	Secondary	General Medicine - Phase 3	18340000393	Pyrexia of unknown origin-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1097	Secondary	General Medicine - Phase 3	18340000394	Pyrexia of unknown origin-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1098	Secondary	Paediatric Medical management - Phase 3	18420000448	Pyrexia of unknown origin-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1099	Secondary	General Medicine - Phase 3	18340000395	Pyrexia of unknown origin-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1100	Secondary	Paediatric Medical management - Phase 3	18420000449	Pyrexia of unknown origin-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1101	Secondary	Ophthalmology - Phase 3	18390000037	ROP Laser - Per Eye	5000	5000	4750	4250	Surgical	Not Reserved	No	No	0	Detailed Clinical Notes	Detailed Discharge Summary , Still Image Of The Patient Undergoing The Procedure With Date Stamp	No	No	Yes	No	Yes	1
1102	Secondary	Obstetrics & Gynaecology - Phase 3	18380000055	Re exploration after laparotomy / Caesarean Section-Re exploration after Caesarean Section	14000	14000	13300	11900	Surgical	Not Reserved	No	No	0	Admission Notes Comprising Of History And Examination With Indications For The Procedure , Relevant Investigations (Establishing Diagnosis) , Usg	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra Procedure Clinical Photograph , Progress Notes	No	No	Yes	No	No	5
1103	Secondary	Obstetrics & Gynaecology - Phase 3	18380000056	Re exploration after laparotomy / Caesarean Section-Re exploration after laparotomy	14000	14000	13300	11900	Surgical	Not Reserved	No	No	0	Admission Notes Comprising Of History And Examination With Indications For The Procedure , Relevant Investigations (Establishing Diagnosis) , Usg	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra Procedure Clinical Photograph , Progress Notes	No	No	Yes	No	No	5

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1104	Secondary	Paediatric Medical management - Phase 3	18420000450	Recurrent vomiting with dehydration-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1105	Secondary	General Medicine - Phase 3	18340000396	Recurrent vomiting with dehydration-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1106	Secondary	Paediatric Medical management - Phase 3	18420000451	Recurrent vomiting with dehydration-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1107	Secondary	General Medicine - Phase 3	18340000397	Recurrent vomiting with dehydration-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1108	Secondary	Paediatric Medical management - Phase 3	18420000452	Recurrent vomiting with dehydration-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1109	Secondary	General Medicine - Phase 3	18340000398	Recurrent vomiting with dehydration-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1110	Secondary	Paediatric Medical management - Phase 3	18420000453	Recurrent vomiting with dehydration-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1111	Secondary	General Medicine - Phase 3	18340000399	Recurrent vomiting with dehydration-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1112	Secondary	Otorhinolaryngology (ENT) - Phase 3	18330000024	Removal of Submandibular Salivary gland-General Anesthesia	15000	15000	14250	12750	Surgical	Not Reserved	Yes	No	0	Circumstances That Led To Rupture Of Salivary Duct , Clinical Photograph , Detailed Clinical Notes , Fir/Mlc	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	No	2
1113	Secondary	Otorhinolaryngology (ENT) - Phase 3	18330000025	Removal of Submandibular Salivary gland-Local Anesthesia	9000	9000	8550	7650	Surgical	Not Reserved	Yes	No	0	Circumstances That Led To Rupture Of Salivary Duct , Clinical Photograph , Detailed Clinical Notes , Fir/Mlc	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	No	2
1114	Secondary	Otorhinolaryngology (ENT) - Phase 3	18330000026	Removal of Submandibular Salivary gland-Removal of Ranula-General Anesthesia	15000	15000	14250	12750	Surgical	Not Reserved	Yes	No	0	Biopsy , Clinical Notes Confirming The Indication For The Procedure , Clinical Photograph Of Affected Part	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	No	2
1115	Secondary	Otorhinolaryngology (ENT) - Phase 3	18330000027	Removal of Submandibular Salivary gland-Removal of Ranula-Local Anesthesia	9000	9000	8550	7650	Surgical	Not Reserved	Yes	No	0	Biopsy , Clinical Notes Confirming The Indication For The Procedure , Clinical Photograph Of Affected Part	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	No	2

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College& Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1116	Secondary	Otorhinolaryngology (ENT) - Phase 3	18330000028	Removal of Submandibular Salivary gland-Removal of Submandibular Lymph node-General Anesthesia	15000	15000	14250	12750	Surgical	Not Reserved	Yes	No	0	Biopsy , Clinical Notes Confirming The Indication For The Procedure , Clinical Photograph Of Affected Part	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	No	2
1117	Secondary	Otorhinolaryngology (ENT) - Phase 3	18330000029	Removal of Submandibular Salivary gland-Removal of Submandibular Lymph node-Local Anesthesia	9000	9000	8550	7650	Surgical	Not Reserved	Yes	No	0	Biopsy , Clinical Notes Confirming The Indication For The Procedure , Clinical Photograph Of Affected Part	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	No	2
1118	Secondary	General Medicine - Phase 3	18340000400	Renal colic-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1119	Secondary	General Medicine - Phase 3	18340000401	Renal colic-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1120	Secondary	General Medicine - Phase 3	18340000402	Renal colic-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1121	Secondary	General Medicine - Phase 3	18340000403	Renal colic-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1122	Secondary	Paediatric Medical management - Phase 3	18420000454	Respiratory failure-Due to any cause (pneumonia, asthma, COPD, ARDS, foreign body, poisoning, head injury etc.)-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Fir/Mic , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1123	Secondary	General Medicine - Phase 3	18340000404	Respiratory failure-Due to any cause (pneumonia, asthma, COPD, ARDS, foreign body, poisoning, head injury etc.)-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Fir/Mic , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1124	Secondary	Paediatric Medical management - Phase 3	18420000455	Respiratory failure-Due to any cause (pneumonia, asthma, COPD, ARDS, foreign body, poisoning, head injury etc.)-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Fir/Mic , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1125	Secondary	General Medicine - Phase 3	18340000405	Respiratory failure-Due to any cause (pneumonia, asthma, COPD, ARDS, foreign body, poisoning, head injury etc.)-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Fir/Mic , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1126	Secondary	Paediatric Medical management - Phase 3	18420000456	Respiratory failure-Due to any cause (pneumonia, asthma, COPD, ARDS, foreign body, poisoning, head injury etc.)-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Fir/Mic , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1127	Secondary	General Medicine - Phase 3	18340000406	Respiratory failure-Due to any cause (pneumonia, asthma, COPD, ARDS, foreign body, poisoning, head injury etc.)-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Fir/Mic , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1128	Secondary	General Medicine - Phase 3	18340000407	Respiratory failure-Due to any cause (pneumonia, asthma, COPD, ARDS, foreign body, poisoning, head injury etc.)-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Fir/Mic , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1129	Secondary	Paediatric Medical management - Phase 3	18420000457	Respiratory failure-Due to any cause (pneumonia, asthma, COPD, ARDS, foreign body, poisoning, head injury etc.)-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Fir/Mic , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1130	Secondary	Paediatric Medical management - Phase 3	18420000458	Respiratory failure-Type 1 respiratory failure-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1131	Secondary	General Medicine - Phase 3	18340000408	Respiratory failure-Type 1 respiratory failure-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1132	Secondary	General Medicine - Phase 3	18340000409	Respiratory failure-Type 1 respiratory failure-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1133	Secondary	Paediatric Medical management - Phase 3	18420000459	Respiratory failure-Type 1 respiratory failure-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1134	Secondary	General Medicine - Phase 3	18340000410	Respiratory failure-Type 1 respiratory failure-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1135	Secondary	Paediatric Medical management - Phase 3	18420000460	Respiratory failure-Type 1 respiratory failure-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1136	Secondary	Paediatric Medical management - Phase 3	18420000461	Respiratory failure-Type 1 respiratory failure-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1137	Secondary	General Medicine - Phase 3	18340000411	Respiratory failure-Type 1 respiratory failure-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1138	Secondary	General Medicine - Phase 3	18340000412	Respiratory failure-Type 2 respiratory failure-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1139	Secondary	Paediatric Medical management - Phase 3	18420000462	Respiratory failure-Type 2 respiratory failure-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1140	Secondary	General Medicine - Phase 3	18340000413	Respiratory failure-Type 2 respiratory failure-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1141	Secondary	Paediatric Medical management - Phase 3	18420000463	Respiratory failure-Type 2 respiratory failure-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1142	Secondary	General Medicine - Phase 3	18340000414	Respiratory failure-Type 2 respiratory failure-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1143	Secondary	Paediatric Medical management - Phase 3	18420000464	Respiratory failure-Type 2 respiratory failure-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1144	Secondary	General Medicine - Phase 3	18340000415	Respiratory failure-Type 2 respiratory failure-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1145	Secondary	Paediatric Medical management - Phase 3	18420000465	Respiratory failure-Type 2 respiratory failure-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College& Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1146	Secondary	Ophthalmology - Phase 3	18390000038	Retinal Cryopexy	3800	3800	3610	3230	Surgical	Not Reserved	No	No	0	Clinical Notes Confirming The Indication For The Procedure	Detailed Discharge Summary , Detailed Procedure Notes , Still Image Of The Procedure With Patient Id And Date	No	No	Yes	No	Yes	1
1147	Secondary	Ophthalmology - Phase 3	18390000039	Retinal Laser Photocoagulation -For retinal tear repair Per Eye Per Sitting	1500	1500	1425	1275	Surgical	Not Reserved	No	No	0	Detailed Clinical Notes , Supporting Documents	Detailed Clinical Notes , Detailed Discharge Summary , Still Image Of The Procedure With Patient Id And Date	No	No	Yes	No	Yes	1
1148	Secondary	Ophthalmology - Phase 3	18390000040	Retinal Laser Photocoagulation -Pan Retinal Photocoagulation (PRP) - Retinal Laser including 3 sittings / package of retino laser photocoagulation (3 sittings per eye for both eyes)	8500	8500	8075	7225	Surgical	Not Reserved	No	No	0	Detailed Clinical Notes , Supporting Documents	Detailed Clinical Notes , Detailed Discharge Summary , Still Image Of The Procedure With Patient Id And Date	No	No	Yes	No	Yes	1
1149	Secondary	General Medicine - Phase 3	18340000416	Rheumatic fever-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1150	Secondary	Paediatric Medical management - Phase 3	18420000466	Rheumatic fever-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1151	Secondary	General Medicine - Phase 3	18340000417	Rheumatoid arthritis-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1152	Secondary	Paediatric Medical management - Phase 3	18420000467	Rheumatoid arthritis-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1153	Secondary	Paediatric Medical management - Phase 3	18420000468	Rheumatoid arthritis-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1154	Secondary	General Medicine - Phase 3	18340000418	Rheumatoid arthritis-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1155	Secondary	Paediatric Medical management - Phase 3	18420000469	Rheumatoid arthritis-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1156	Secondary	General Medicine - Phase 3	18340000419	Rheumatoid arthritis-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1157	Secondary	General Medicine - Phase 3	18340000420	Rheumatoid arthritis-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1158	Secondary	Paediatric Medical management - Phase 3	18420000470	Rheumatoid arthritis-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1159	Secondary	Paediatric Medical management - Phase 3	18420000471	Rickets - requiring admission for Work Up-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1160	Secondary	Paediatric Medical management - Phase 3	18420000472	Rickets - requiring admission for Work Up-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1161	Secondary	Paediatric Medical management - Phase 3	18420000473	Rickets - requiring admission for Work Up-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1162	Secondary	Paediatric Medical management - Phase 3	18420000474	Rickets - requiring admission for Work Up-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1163	Secondary	Ophthalmology - Phase 3	18390000041	SOR (Silicon Oil Removal)	9300	9300	8835	7905	Surgical	Not Reserved	No	No	0	Bone Scan , Clinical Documents , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Operative Notes , Iol Sticker , Still Image Of The Procedure With Patient Id And Date	Yes	No	No	No	Yes	1

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College& Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1164	Secondary	Mental Disorders Packages - Phase 3	1850000027	Schizophrenia, schizotypal and delusional disorders-HDU	2000	2000	1900	1700	Medical	Reserved	No	No	0	Detailed History With Chronicity	Detailed Discharge Summary , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1165	Secondary	Mental Disorders Packages - Phase 3	1850000028	Schizophrenia, schizotypal and delusional disorders-ICU - With Ventilator	3000	3000	2850	2550	Medical	Reserved	No	No	0	Detailed History With Chronicity	Detailed Discharge Summary , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1166	Secondary	Mental Disorders Packages - Phase 3	1850000029	Schizophrenia, schizotypal and delusional disorders-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Reserved	No	No	0	Detailed History With Chronicity	Detailed Discharge Summary , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1167	Secondary	Mental Disorders Packages - Phase 3	1850000030	Schizophrenia, schizotypal and delusional disorders-Routine Ward	1000	1000	950	850	Medical	Reserved	No	No	0	Detailed History With Chronicity	Detailed Discharge Summary , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1168	Secondary	Ophthalmology - Phase 3	1839000042	Scleral Buckle Removal	5500	5500	5225	4675	Surgical	Not Reserved	No	No	0	Detailed Clinical Notes , Plan For Lab Investigation Of Host Tissue (Microbiology)	Detailed Discharge Summary , Detailed Operative Notes , Microbiological Report , Still Image Of The Procedure With Patient Id And Date	No	No	Yes	No	Yes	1
1169	Secondary	Ophthalmology - Phase 3	1839000043	Scleral buckling surgery	15000	15000	14250	12750	Surgical	Not Reserved	No	No	0	Detailed Clinical Notes	Detailed Discharge Summary , Detailed Operative Notes , Still Image Of The Procedure With Patient Id And Date	No	No	Yes	No	No	1

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1170	Secondary	Ophthalmology - Phase 3	1839000044	Secondary IOL / IOL Exchange / Explant	5000	5000	4750	4250	Surgical	Not Reserved	No	No	0	Clinical Photograph Of Affected Part , Detailed Clinical Notes , Pre-Op Clinical Photo With Indications Of Intervention	Bar-Code Of Iol , Detailed Discharge Summary , Detailed Operative Notes , Still Image Of The Patient Undergoing The Procedure With Date Stamp	No	No	Yes	No	Yes	1
1171	Secondary	Obstetrics & Gynaecology - Phase 3	1838000057	Secondary suturing of episiotomy	2500	2500	2375	2125	Surgical	Reserved	Yes	No	0	Admission Notes Comprising Details Of First Surgery , Physical Examination Findings With Indications	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra-Operative Photograph , Progress Notes	No	No	Yes	No	No	2
1172	Secondary	Paediatric Medical management - Phase 3	18420000475	Seizures-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1173	Secondary	General Medicine - Phase 3	18340000421	Seizures-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1174	Secondary	Paediatric Medical management - Phase 3	18420000476	Seizures-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1175	Secondary	General Medicine - Phase 3	18340000422	Seizures-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1176	Secondary	Paediatric Medical management - Phase 3	18420000477	Seizures-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1177	Secondary	General Medicine - Phase 3	18340000423	Seizures-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1178	Secondary	Paediatric Medical management - Phase 3	18420000478	Seizures-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1179	Secondary	General Medicine - Phase 3	18340000424	Seizures-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1180	Secondary	General Medicine - Phase 3	18340000425	Septic Arthritis -HDU	2000	2000	1900	1700	Medical	Not Reserved	No	No	0	Cbc , Clinical Notes With Planned Line Of Treatment , X-Ray (Affected Joint)	Cbc , Detailed Discharge Summary , Post Treatment X-Ray/Radiological Evidence	No	No	Yes	No	No	Not Applicable(NA)
1181	Secondary	Paediatric Medical management - Phase 3	18420000479	Septic Arthritis -HDU	2000	2000	1900	1700	Medical	Not Reserved	No	No	0	Cbc , Clinical Notes With Planned Line Of Treatment , X-Ray (Affected Joint)	Cbc , Detailed Discharge Summary , Post Treatment X-Ray/Radiological Evidence	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College& Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1182	Secondary	Paediatric Medical management - Phase 3	18420000480	Septic Arthritis -ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	No	No	0	Cbc , Clinical Notes With Planned Line Of Treatment , X-Ray (Affected Joint)	Cbc , Detailed Discharge Summary , Post Treatment X-Ray/Radiological Evidence	No	No	Yes	No	No	Not Applicable(NA)
1183	Secondary	General Medicine - Phase 3	18340000426	Septic Arthritis -ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	No	No	0	Cbc , Clinical Notes With Planned Line Of Treatment , X-Ray (Affected Joint)	Cbc , Detailed Discharge Summary , Post Treatment X-Ray/Radiological Evidence	No	No	Yes	No	No	Not Applicable(NA)
1184	Secondary	General Medicine - Phase 3	18340000427	Septic Arthritis -ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	No	No	0	Cbc , Clinical Notes With Planned Line Of Treatment , X-Ray (Affected Joint)	Cbc , Detailed Discharge Summary , Post Treatment X-Ray/Radiological Evidence	No	No	Yes	No	No	Not Applicable(NA)
1185	Secondary	Paediatric Medical management - Phase 3	18420000481	Septic Arthritis -ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	No	No	0	Cbc , Clinical Notes With Planned Line Of Treatment , X-Ray (Affected Joint)	Cbc , Detailed Discharge Summary , Post Treatment X-Ray/Radiological Evidence	No	No	Yes	No	No	Not Applicable(NA)
1186	Secondary	General Medicine - Phase 3	18340000428	Septic Arthritis -Routine Ward	1000	1000	950	850	Medical	Not Reserved	No	No	0	Cbc , Clinical Notes With Planned Line Of Treatment , X-Ray (Affected Joint)	Cbc , Detailed Discharge Summary , Post Treatment X-Ray/Radiological Evidence	No	No	Yes	No	No	Not Applicable(NA)
1187	Secondary	Paediatric Medical management - Phase 3	18420000482	Septic Arthritis -Routine Ward	1000	1000	950	850	Medical	Not Reserved	No	No	0	Cbc , Clinical Notes With Planned Line Of Treatment , X-Ray (Affected Joint)	Cbc , Detailed Discharge Summary , Post Treatment X-Ray/Radiological Evidence	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College& Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1188	Secondary	Otorhinolaryngology (ENT) - Phase 3	18330000030	Septoplasty-General Anesthesia	18000	18000	17100	15300	Surgical	Reserved	Yes	No	0	Clinical Notes Confirming The Indication For The Procedure , Endoscopic Picture/Clinical Picture , Fir/Mic , Supporting Medical Records , X-Ray	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	No	1
1189	Secondary	Otorhinolaryngology (ENT) - Phase 3	18330000031	Septoplasty-Local Anesthesia	12000	12000	11400	10200	Surgical	Reserved	Yes	No	0	Clinical Notes Confirming The Indication For The Procedure , Endoscopic Picture/Clinical Picture , Fir/Mic , Supporting Medical Records , X-Ray	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	No	1
1190	Secondary	Orthopaedics - Phase 3	18400000082	Sequestectomy / Curettage	10000	10000	9500	8500	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , X-Ray Film With Report	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure (X-Ray) With Reports	No	No	Yes	No	No	4
1191	Secondary	Paediatric Medical management - Phase 3	18420000483	Severe anemia-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1192	Secondary	General Medicine - Phase 3	18340000429	Severe anemia-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1193	Secondary	General Medicine - Phase 3	18340000430	Severe anemia-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1194	Secondary	Paediatric Medical management - Phase 3	18420000484	Severe anemia-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1195	Secondary	General Medicine - Phase 3	18340000431	Severe anemia-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1196	Secondary	Paediatric Medical management - Phase 3	18420000485	Severe anemia-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1197	Secondary	Paediatric Medical management - Phase 3	18420000486	Severe anemia-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1198	Secondary	General Medicine - Phase 3	18340000432	Severe anemia-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1199	Secondary	Paediatric Medical management - Phase 3	18420000487	Severe pneumonia-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1200	Secondary	General Medicine - Phase 3	18340000433	Severe pneumonia-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1201	Secondary	General Medicine - Phase 3	18340000434	Severe pneumonia-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1202	Secondary	Paediatric Medical management - Phase 3	18420000488	Severe pneumonia-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1203	Secondary	General Medicine - Phase 3	18340000435	Severe pneumonia-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1204	Secondary	Paediatric Medical management - Phase 3	18420000489	Severe pneumonia-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1205	Secondary	Paediatric Medical management - Phase 3	18420000490	Severe pneumonia-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1206	Secondary	General Medicine - Phase 3	18340000436	Severe pneumonia-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1207	Secondary	Paediatric Medical management - Phase 3	18420000491	Severe sepsis-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1208	Secondary	General Medicine - Phase 3	18340000437	Severe sepsis-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1209	Secondary	Paediatric Medical management - Phase 3	18420000492	Severe sepsis-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1210	Secondary	General Medicine - Phase 3	18340000438	Severe sepsis-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1211	Secondary	General Medicine - Phase 3	18340000439	Severe sepsis-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1212	Secondary	Paediatric Medical management - Phase 3	18420000493	Severe sepsis-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1213	Secondary	General Medicine - Phase 3	18340000440	Severe sepsis-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1214	Secondary	Paediatric Medical management - Phase 3	18420000494	Severe sepsis-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1215	Secondary	Paediatric Medical management - Phase 3	18420000495	Severe sepsis-Septic shock-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1216	Secondary	General Medicine - Phase 3	18340000441	Severe sepsis-Septic shock-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1217	Secondary	Paediatric Medical management - Phase 3	18420000496	Severe sepsis-Septic shock-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1218	Secondary	General Medicine - Phase 3	18340000442	Severe sepsis-Septic shock-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1219	Secondary	General Medicine - Phase 3	18340000443	Severe sepsis-Septic shock-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1220	Secondary	Paediatric Medical management - Phase 3	18420000497	Severe sepsis-Septic shock-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1221	Secondary	General Medicine - Phase 3	18340000444	Severe sepsis-Septic shock-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1222	Secondary	Paediatric Medical management - Phase 3	18420000498	Severe sepsis-Septic shock-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1223	Secondary	Obstetrics & Gynaecology - Phase 3	18380000058	Shirodkar's stitch	4000	4000	3800	3400	Surgical	Not Reserved	Yes	No	0	Admission Notes Comprising Of History And Anc Findings Justifying Cervical Incompetence And The Procedure	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra-Operative Photograph , Progress Notes	No	No	Yes	No	Yes	1

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College& Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1224	Secondary	Paediatric Medical management - Phase 3	18420000499	Short stature-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Planned Line Of Management , Clinical Notes Detailing History	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1225	Secondary	Paediatric Medical management - Phase 3	18420000500	Short stature-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Planned Line Of Management , Clinical Notes Detailing History	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1226	Secondary	Paediatric Medical management - Phase 3	18420000501	Short stature-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Planned Line Of Management , Clinical Notes Detailing History	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1227	Secondary	Paediatric Medical management - Phase 3	18420000502	Short stature-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Planned Line Of Management , Clinical Notes Detailing History	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1228	Secondary	Paediatric Medical management - Phase 3	18420000503	Sickle cell Anemia-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1229	Secondary	General Medicine - Phase 3	18340000445	Sickle cell Anemia-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1230	Secondary	General Medicine - Phase 3	18340000446	Sickle cell Anemia-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1231	Secondary	Paediatric Medical management - Phase 3	18420000504	Sickle cell Anemia-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1232	Secondary	Paediatric Medical management - Phase 3	18420000505	Sickle cell Anemia-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1233	Secondary	General Medicine - Phase 3	18340000447	Sickle cell Anemia-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1234	Secondary	Paediatric Medical management - Phase 3	18420000506	Sickle cell Anemia-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1235	Secondary	General Medicine - Phase 3	18340000448	Sickle cell Anemia-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1236	Secondary	General Surgery - Phase 3	18350000037	Sigmoid Resection	21500	21500	20425	18275	Surgical	Not Reserved	Yes	No	0	Barium X-Rays/Ct Scan/Sigmoidoscopy , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Intra Procedure Clinical Photograph	No	No	Yes	No	No	4
1237	Secondary	Orthopaedics - Phase 3	18400000083	Single Stage Amputation-Above Elbow	15000	15000	14250	12750	Surgical	Not Reserved	Yes	No	0	Clinical Photograph Of Affected Part , Detailed Clinical Notes , Fir/Mic , X-Ray (Affected Limb)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Clinical Photograph	No	No	Yes	No	No	5
1238	Secondary	Orthopaedics - Phase 3	18400000084	Single Stage Amputation-Above Knee	15000	15000	14250	12750	Surgical	Not Reserved	Yes	No	0	Clinical Photograph Of Affected Part , Detailed Clinical Notes , Fir/Mic , X-Ray (Affected Limb)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Clinical Photograph	No	No	Yes	No	No	5
1239	Secondary	Orthopaedics - Phase 3	18400000085	Single Stage Amputation-Below Elbow	15000	15000	14250	12750	Surgical	Not Reserved	Yes	No	0	Clinical Photograph Of Affected Part , Detailed Clinical Notes , Fir/Mic , X-Ray (Affected Limb)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Clinical Photograph	No	No	Yes	No	No	5
1240	Secondary	Orthopaedics - Phase 3	18400000086	Single Stage Amputation-Below Knee	15000	15000	14250	12750	Surgical	Not Reserved	Yes	No	0	Clinical Photograph Of Affected Part , Detailed Clinical Notes , Fir/Mic , X-Ray (Affected Limb)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Clinical Photograph	No	No	Yes	No	No	5
1241	Secondary	Orthopaedics - Phase 3	18400000087	Single Stage Amputation-Foot	15000	15000	14250	12750	Surgical	Not Reserved	Yes	No	0	Clinical Photograph Of Affected Part , Detailed Clinical Notes , Fir/Mic , X-Ray (Affected Limb)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Clinical Photograph	No	No	Yes	No	No	5

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1242	Secondary	Orthopaedics - Phase 3	1840000088	Single Stage Amputation-Hand	15000	15000	14250	12750	Surgical	Not Reserved	Yes	No	0	Clinical Photograph Of Affected Part , Detailed Clinical Notes , Fir/Mic , X-Ray (Affected Limb)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Clinical Photograph	No	No	Yes	No	No	5
1243	Secondary	Orthopaedics - Phase 3	1840000089	Single Stage Amputation-Wrist	15000	15000	14250	12750	Surgical	Not Reserved	Yes	No	0	Clinical Photograph Of Affected Part , Detailed Clinical Notes , Fir/Mic , X-Ray (Affected Limb)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Clinical Photograph	No	No	Yes	No	No	5
1244	Secondary	General Medicine - Phase 3	18340000449	Skin and soft tissue infections -HDU	2000	2000	1900	1700	Medical	Not Reserved	No	No	0	Cbc , Clinical Notes With Planned Line Of Treatment	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1245	Secondary	Paediatric Medical management - Phase 3	18420000507	Skin and soft tissue infections -HDU	2000	2000	1900	1700	Medical	Not Reserved	No	No	0	Cbc , Clinical Notes With Planned Line Of Treatment	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1246	Secondary	Paediatric Medical management - Phase 3	18420000508	Skin and soft tissue infections -ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	No	No	0	Cbc , Clinical Notes With Planned Line Of Treatment	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1247	Secondary	General Medicine - Phase 3	18340000450	Skin and soft tissue infections -ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	No	No	0	Cbc , Clinical Notes With Planned Line Of Treatment	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College& Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1248	Secondary	General Medicine - Phase 3	18340000451	Skin and soft tissue infections -ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	No	No	0	Cbc , Clinical Notes With Planned Line Of Treatment	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1249	Secondary	Paediatric Medical management - Phase 3	18420000509	Skin and soft tissue infections -ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	No	No	0	Cbc , Clinical Notes With Planned Line Of Treatment	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1250	Secondary	Paediatric Medical management - Phase 3	18420000510	Skin and soft tissue infections -Routine Ward	1000	1000	950	850	Medical	Not Reserved	No	No	0	Cbc , Clinical Notes With Planned Line Of Treatment	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1251	Secondary	General Medicine - Phase 3	18340000452	Skin and soft tissue infections -Routine Ward	1000	1000	950	850	Medical	Not Reserved	No	No	0	Cbc , Clinical Notes With Planned Line Of Treatment	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1252	Secondary	Paediatric Medical management - Phase 3	18420000511	Snake bite-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1253	Secondary	General Medicine - Phase 3	18340000453	Snake bite-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1254	Secondary	Paediatric Medical management - Phase 3	18420000512	Snake bite-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1255	Secondary	General Medicine - Phase 3	18340000454	Snake bite-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1256	Secondary	General Medicine - Phase 3	18340000455	Snake bite-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1257	Secondary	Paediatric Medical management - Phase 3	18420000513	Snake bite-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1258	Secondary	General Medicine - Phase 3	18340000456	Snake bite-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1259	Secondary	Paediatric Medical management - Phase 3	18420000514	Snake bite-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College& Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1260	Secondary	Ophthalmology - Phase 3	1839000045	Socket Reconstruction including Amniotic Membrane Graft	11200	11200	10640	9520	Surgical	Not Reserved	No	No	0	Clinical Photograph Of Affected Part , Detailed Clinical Notes , Indication For Socket Reconstruction	Detailed Discharge Summary , Detailed Operative Notes , Still Image Of The Procedure With Patient Id And Date	No	No	Yes	No	No	1
1261	Secondary	Ophthalmology - Phase 3	1839000046	Squint correction-Major - 3 or more muscles (complex surgery involving four muscles or oblique muscles)	14000	14000	13300	11900	Surgical	Not Reserved	No	No	0	Clinical Notes Detailing Which Muscles Affected , Clinical Notes Justifying The Need For Ga , Clinical Photograph	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Still Image Of The Procedure With Patient Id And Date	No	No	Yes	No	Yes	1
1262	Secondary	Ophthalmology - Phase 3	1839000047	Squint correction-Minor - upto 2 muscles	4000	4000	3800	3400	Surgical	Not Reserved	No	No	0	Clinical Notes Detailing Which Muscles Affected , Clinical Notes Justifying The Need For Ga , Clinical Photograph	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Still Image Of The Procedure With Patient Id And Date	No	No	Yes	No	Yes	1
1263	Secondary	Otorhinolaryngology (ENT) - Phase 3	1833000032	Stapedectomy / tympanotomy- Stapedectomy	9000	9000	8550	7650	Surgical	Not Reserved	Yes	No	0	Audiometry , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra Procedure Microscopic Clinical Photograph	No	No	Yes	No	No	2
1264	Secondary	Otorhinolaryngology (ENT) - Phase 3	1833000033	Stapedectomy / tympanotomy- Tympanotomy	19500	19500	18525	16575	Surgical	Reserved	Yes	No	0	Audiometry , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra Procedure Microscopic Clinical Photograph	No	No	Yes	No	No	2
1265	Secondary	Paediatric Medical management - Phase 3	18420000515	Status epilepticus-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1266	Secondary	General Medicine - Phase 3	18340000457	Status epilepticus-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1267	Secondary	Paediatric Medical management - Phase 3	18420000516	Status epilepticus-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1268	Secondary	General Medicine - Phase 3	18340000458	Status epilepticus-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1269	Secondary	Paediatric Medical management - Phase 3	18420000517	Status epilepticus-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1270	Secondary	General Medicine - Phase 3	18340000459	Status epilepticus-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1271	Secondary	General Medicine - Phase 3	18340000460	Status epilepticus-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1272	Secondary	Paediatric Medical management - Phase 3	18420000518	Status epilepticus-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1273	Secondary	General Medicine - Phase 3	18340000461	Steven Johnson syndrome-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History (Incl Drug Intake History) , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1274	Secondary	Paediatric Medical management - Phase 3	18420000519	Steven Johnson syndrome-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History (Incl Drug Intake History) , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1275	Secondary	Paediatric Medical management - Phase 3	18420000520	Steven Johnson syndrome-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History (Incl Drug Intake History) , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1276	Secondary	General Medicine - Phase 3	18340000462	Steven Johnson syndrome-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History (Incl Drug Intake History) , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1277	Secondary	Paediatric Medical management - Phase 3	18420000521	Steven Johnson syndrome-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History (Incl Drug Intake History) , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1278	Secondary	General Medicine - Phase 3	18340000463	Steven Johnson syndrome-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History (Incl Drug Intake History) , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1279	Secondary	Paediatric Medical management - Phase 3	18420000522	Steven Johnson syndrome-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History (Incl Drug Intake History) , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1280	Secondary	General Medicine - Phase 3	18340000464	Steven Johnson syndrome-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History (Incl Drug Intake History) , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1281	Secondary	General Surgery - Phase 3	18350000038	Stoma Management follow up of Colostomy	4500	4500	4275	3825	Medical	Not Reserved	No	No	0	Detailed Clinical Notes , Discharge Summary	Invoice/Receipt Of Drugs And Consumables	No	No	No	Yes	No	Not Applicable(NA)
1282	Secondary	General Surgery - Phase 3	18350000039	Stoma Management follow up of Ileostomy	4500	4500	4275	3825	Medical	Not Reserved	No	No	0	Detailed Clinical Notes , Discharge Summary	Invoice/Receipt Of Drugs And Consumables	No	No	No	Yes	No	Not Applicable(NA)
1283	Secondary	Orthopaedics - Phase 3	18400000090	Surgery for Comminuted Fracture - Olecranon of Ulna-Plating	19800	19800	18810	16830	Surgical	Not Reserved	Yes	No	0	Clinical Photograph Of Affected Part , Detailed Clinical Notes , X-Ray	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Invoice/Bar-Code Of Implant , Post Procedure (X-Ray) , Post Procedure Clinical Photograph	No	No	Yes	No	No	3

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1284	Secondary	Ophthalmology - Phase 3	1839000048	Surgery for Pediatric Cataract-Paediatric Membranectomy & anterior vitrectomy	12200	12200	11590	10370	Surgical	Not Reserved	No	No	0	Clinical Notes Detailing Indication For Lensectomy /Pediatric Lens Aspiration/ Membranectomy , Clinical Photograph , Supporting Investigations	Bar-Code Of Iol , Detailed Discharge Summary , Detailed Operative Notes , Still Image Of The Procedure With Patient Id And Date	No	Yes	No	No	Yes	1
1285	Secondary	Ophthalmology - Phase 3	1839000049	Surgery for Pediatric Cataract-Paediatric lensectomy	12200	12200	11590	10370	Surgical	Not Reserved	No	No	0	Clinical Notes Detailing Indication For Lensectomy /Pediatric Lens Aspiration/ Membranectomy , Clinical Photograph , Supporting Investigations	Bar-Code Of Iol , Detailed Discharge Summary , Detailed Operative Notes , Still Image Of The Procedure With Patient Id And Date	No	Yes	No	No	Yes	1
1286	Secondary	Ophthalmology - Phase 3	1839000050	Surgery for Pediatric Cataract-Paediatric lens aspiration with posterior capsulotomy & anterior vitrectomy	12200	12200	11590	10370	Surgical	Not Reserved	No	No	0	Clinical Notes Detailing Indication For Lensectomy /Pediatric Lens Aspiration/ Membranectomy , Clinical Photograph , Supporting Investigations	Bar-Code Of Iol , Detailed Discharge Summary , Detailed Operative Notes , Still Image Of The Procedure With Patient Id And Date	No	Yes	No	No	Yes	1
1287	Secondary	General Surgery - Phase 3	1835000040	Surgical removal of Branchial Cyst	15000	15000	14250	12750	Surgical	Not Reserved	Yes	No	0	Ct/Usg , Detailed Clinical Notes , Pre-Op Clinical Photograph	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph	No	No	Yes	No	No	2
1288	Secondary	Otorhinolaryngology (ENT) - Phase 3	1833000034	Surgical removal of Branchial Cyst	15000	15000	14250	12750	Surgical	Not Reserved	Yes	No	0	Ct/Usg , Detailed Clinical Notes , Pre-Op Clinical Photograph	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph	No	No	Yes	No	No	2
1289	Secondary	Paediatric Medical management - Phase 3	18420000523	Systematic lupus erythematosus-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1290	Secondary	General Medicine - Phase 3	18340000465	Systematic lupus erythematosus-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1291	Secondary	Paediatric Medical management - Phase 3	18420000524	Systematic lupus erythematosus-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1292	Secondary	General Medicine - Phase 3	18340000466	Systematic lupus erythematosus-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1293	Secondary	Paediatric Medical management - Phase 3	18420000525	Systematic lupus erythematosus-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1294	Secondary	General Medicine - Phase 3	18340000467	Systematic lupus erythematosus-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1295	Secondary	General Medicine - Phase 3	18340000468	Systematic lupus erythematosus-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1296	Secondary	Paediatric Medical management - Phase 3	18420000526	Systematic lupus erythematosus-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1297	Secondary	Orthopaedics - Phase 3	18400000091	Tendon Grafting / Repair-Tendon Grafting	15000	15000	14250	12750	Surgical	Not Reserved	Yes	No	0	Clinical Photograph Of Affected Part , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Clinical Photograph (Donor And Recipient Sites)	No	No	Yes	No	No	3
1298	Secondary	Orthopaedics - Phase 3	18400000092	Tendon Grafting / Repair-Tendon Repair	15000	15000	14250	12750	Surgical	Not Reserved	No	No	0	Clinical Photograph Of Affected Part , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Clinical Photograph	No	No	Yes	No	No	3
1299	Secondary	Orthopaedics - Phase 3	18400000093	Tendon Release / Tenotomy	5000	5000	4750	4250	Surgical	Not Reserved	Yes	No	0	Clinical Photograph Of Affected Part , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Clinical Photograph	No	No	Yes	No	Yes	1
1300	Secondary	Orthopaedics - Phase 3	18400000094	Tendon Transfer	15000	15000	14250	12750	Surgical	Not Reserved	Yes	No	0	Clinical Photograph Of Affected Part , Detailed Clinical Notes , Evidence Of Confirmed Diagnosis Of Leprosy	Detailed Discharge Summary , Detailed Operative Notes , Intra Procedure Clinical Photograph , Post Procedure Clinical Photograph	No	No	Yes	No	No	3
1301	Secondary	General Surgery - Phase 3	18350000041	Tendon Transfer	15000	15000	14250	12750	Surgical	Not Reserved	Yes	No	0	Clinical Photograph Of Affected Part , Detailed Clinical Notes , Evidence Of Confirmed Diagnosis Of Leprosy	Detailed Discharge Summary , Detailed Operative Notes , Intra Procedure Clinical Photograph , Post Procedure Clinical Photograph	No	No	Yes	No	No	3

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1302	Secondary	Orthopaedics - Phase 3	1840000095	Tenolysis	5000	5000	4750	4250	Surgical	Not Reserved	Yes	No	0	Clinical Photograph Of Affected Part , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes Including Agent Used For Lysis Of Tendon , Post Procedure Clinical Photograph	No	No	Yes	No	Yes	1
1303	Secondary	Orthopaedics - Phase 3	1840000096	Tension Band Wiring	15000	15000	14250	12750	Surgical	Not Reserved	Yes	No	0	Clinical Notes With Planned Line Of Treatment , X-Ray Film With Report	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Invoice/Bar-Code Of Implant , Post Procedure (X-Ray) With Reports	No	Yes	No	No	No	3
1304	Secondary	Otorhinolaryngology (ENT) - Phase 3	1833000035	Thyroglossal / Branchial cyst / sinus / fistula excision-Branchial fistula excision	15300	15300	14535	13005	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Pre-Op Clinical Photograph	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	No	2
1305	Secondary	Otorhinolaryngology (ENT) - Phase 3	1833000036	Thyroglossal / Branchial cyst / sinus / fistula excision-Branchial sinus excision	15300	15300	14535	13005	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Pre-Op Clinical Photograph	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	No	2
1306	Secondary	Otorhinolaryngology (ENT) - Phase 3	1833000037	Thyroglossal / Branchial cyst / sinus / fistula excision-Thyroglossal cyst excision	15300	15300	14535	13005	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Pre-Op Clinical Photograph	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	No	2
1307	Secondary	Otorhinolaryngology (ENT) - Phase 3	1833000038	Thyroglossal / Branchial cyst / sinus / fistula excision-Thyroglossal fistula excision	15300	15300	14535	13005	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Pre-Op Clinical Photograph	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	No	2

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1308	Secondary	Otorhinolaryngology (ENT) - Phase 3	1833000039	Thyroglossal / Branchial cyst / sinus / fistula excision-Thyroglossal sinus excision	15300	15300	14535	13005	Surgical	Not Reserved	No	No	0	Detailed Clinical Notes , Pre-Op Clinical Photograph	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	No	2
1309	Secondary	Paediatric Medical management - Phase 3	18420000527	Thyrotoxic crisis -HDU	2000	2000	1900	1700	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Thyroid Profile , Usg-Thyroid Gland	Detailed Discharge Summary , Post Treatment Thyroid Profile , Radionuclide Iodine Uptake Study- Investigation	No	No	Yes	No	No	Not Applicable(NA)
1310	Secondary	General Medicine - Phase 3	18340000469	Thyrotoxic crisis -HDU	2000	2000	1900	1700	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Thyroid Profile , Usg-Thyroid Gland	Detailed Discharge Summary , Post Treatment Thyroid Profile , Radionuclide Iodine Uptake Study- Investigation	No	No	Yes	No	No	Not Applicable(NA)
1311	Secondary	General Medicine - Phase 3	18340000470	Thyrotoxic crisis -ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Thyroid Profile , Usg-Thyroid Gland	Detailed Discharge Summary , Post Treatment Thyroid Profile , Radionuclide Iodine Uptake Study- Investigation	No	No	Yes	No	No	Not Applicable(NA)
1312	Secondary	Paediatric Medical management - Phase 3	18420000528	Thyrotoxic crisis -ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Thyroid Profile , Usg-Thyroid Gland	Detailed Discharge Summary , Post Treatment Thyroid Profile , Radionuclide Iodine Uptake Study- Investigation	No	No	Yes	No	No	Not Applicable(NA)
1313	Secondary	General Medicine - Phase 3	18340000471	Thyrotoxic crisis -ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Thyroid Profile , Usg-Thyroid Gland	Detailed Discharge Summary , Post Treatment Thyroid Profile , Radionuclide Iodine Uptake Study- Investigation	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College& Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1314	Secondary	Paediatric Medical management - Phase 3	18420000529	Thyrotoxic crisis -ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Thyroid Profile , Usg-Thyroid Gland	Detailed Discharge Summary , Post Treatment Thyroid Profile , Radionuclide Iodine Uptake Study- Investigation	No	No	Yes	No	No	Not Applicable(NA)
1315	Secondary	General Medicine - Phase 3	18340000472	Thyrotoxic crisis -Routine Ward	1000	1000	950	850	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Thyroid Profile , Usg-Thyroid Gland	Detailed Discharge Summary , Post Treatment Thyroid Profile , Radionuclide Iodine Uptake Study- Investigation	No	No	Yes	No	No	Not Applicable(NA)
1316	Secondary	Paediatric Medical management - Phase 3	18420000530	Thyrotoxic crisis -Routine Ward	1000	1000	950	850	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Thyroid Profile , Usg-Thyroid Gland	Detailed Discharge Summary , Post Treatment Thyroid Profile , Radionuclide Iodine Uptake Study- Investigation	No	No	Yes	No	No	Not Applicable(NA)
1317	Secondary	General Surgery - Phase 3	18350000042	Tissue Reconstruction Flap	25000	25000	23750	21250	Surgical	Not Reserved	Yes	No	0	Clinical Photograph Of Affected Part , Detailed Clinical Notes , Evidence Of Confirmed Diagnosis Of Leprosy	Detailed Discharge Summary , Detailed Operative Notes , Intra Procedure Clinical Photograph , Post Procedure Clinical Photograph	No	No	Yes	No	No	5
1318	Secondary	Otorhinolaryngology (ENT) - Phase 3	18330000040	Tonsillectomy - B/L	7500	7500	7125	6375	Surgical	Reserved	Yes	No	0	Clinical Notes Detailing The Case History , Clinical Photograph , Physical Examination Findings With Indications , Supporting Investigations	Detailed Procedure/Operative Notes, Histopathology (Hpe) , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	No	2
1319	Secondary	Otorhinolaryngology (ENT) - Phase 3	18330000041	Tonsillectomy - U/L	7500	7500	7125	6375	Surgical	Reserved	Yes	No	0	Clinical Notes Detailing The Case History , Clinical Photograph , Physical Examination Findings With Indications , Supporting Investigations	Detailed Procedure/Operative Notes, Histopathology (Hpe) , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	No	2

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1320	Secondary	Paediatric surgery - Phase 3	18410000001	Tracheostomy / Tracheotomy- Tracheostomy-General Anesthesia	10000	10000	9500	8500	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1321	Secondary	Paediatric Medical management - Phase 3	18420000531	Tracheostomy / Tracheotomy- Tracheostomy-General Anesthesia	10000	10000	9500	8500	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1322	Secondary	Plastic & reconstructive Surgery - Phase 3	18430000001	Tracheostomy / Tracheotomy- Tracheostomy-General Anesthesia	10000	10000	9500	8500	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1323	Secondary	Radiation Oncology - Phase 3	18440000001	Tracheostomy / Tracheotomy- Tracheostomy-General Anesthesia	10000	10000	9500	8500	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1324	Secondary	Surgical Oncology - Phase 3	18450000001	Tracheostomy / Tracheotomy- Tracheostomy-General Anesthesia	10000	10000	9500	8500	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1325	Secondary	Urology - Phase 3	18460000001	Tracheostomy / Tracheotomy- Tracheostomy-General Anesthesia	10000	10000	9500	8500	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1326	Secondary	Burns Management - Phase 3	18470000001	Tracheostomy / Tracheotomy- Tracheostomy-General Anesthesia	10000	10000	9500	8500	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1327	Secondary	Emergency Room Packages (Care requiring less than 12 hrs stay) - Phase 3	18480000001	Tracheostomy / Tracheotomy- Tracheostomy-General Anesthesia	10000	10000	9500	8500	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1328	Secondary	Interventional Neuroradiology - Phase 3	18490000001	Tracheostomy / Tracheotomy- Tracheostomy-General Anesthesia	10000	10000	9500	8500	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1329	Secondary	Mental Disorders Packages - Phase 3	18500000001	Tracheostomy / Tracheotomy- Tracheostomy-General Anesthesia	10000	10000	9500	8500	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1330	Secondary	Neo-natal care Packages - Phase 3	18510000001	Tracheostomy / Tracheotomy- Tracheostomy-General Anesthesia	10000	10000	9500	8500	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1331	Secondary	Oral and Maxillofacial Surgery - Phase 3	18520000001	Tracheostomy / Tracheotomy- Tracheostomy-General Anesthesia	10000	10000	9500	8500	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1332	Secondary	Polytrauma - Phase 3	18530000001	Tracheostomy / Tracheotomy- Tracheostomy-General Anesthesia	10000	10000	9500	8500	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1333	Secondary	Cardiology - Phase 3	18310000001	Tracheostomy / Tracheotomy- Tracheostomy-General Anesthesia	10000	10000	9500	8500	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1334	Secondary	Cardio-thoracic & Vascular surgery - Phase 3	18320000001	Tracheostomy / Tracheotomy- Tracheostomy-General Anesthesia	10000	10000	9500	8500	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1335	Secondary	Otorhinolaryngology (ENT) - Phase 3	18330000042	Tracheostomy / Tracheotomy- Tracheostomy-General Anesthesia	10000	10000	9500	8500	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1336	Secondary	General Medicine - Phase 3	18340000473	Tracheostomy / Tracheotomy- Tracheostomy-General Anesthesia	10000	10000	9500	8500	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1337	Secondary	General Surgery - Phase 3	18350000043	Tracheostomy / Tracheotomy- Tracheostomy-General Anesthesia	10000	10000	9500	8500	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1338	Secondary	Medical Oncology - Phase 3	18360000001	Tracheostomy / Tracheotomy- Tracheostomy-General Anesthesia	10000	10000	9500	8500	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1339	Secondary	Neurosurgery - Phase 3	18370000001	Tracheostomy / Tracheotomy- Tracheostomy-General Anesthesia	10000	10000	9500	8500	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1340	Secondary	Obstetrics & Gynaecology - Phase 3	18380000059	Tracheostomy / Tracheotomy- Tracheostomy-General Anesthesia	10000	10000	9500	8500	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1341	Secondary	Ophthalmology - Phase 3	18390000051	Tracheostomy / Tracheotomy- Tracheostomy-General Anesthesia	10000	10000	9500	8500	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1342	Secondary	Orthopaedics - Phase 3	18400000097	Tracheostomy / Tracheotomy- Tracheostomy-General Anesthesia	10000	10000	9500	8500	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1343	Secondary	Medical Oncology - Phase 3	18360000002	Tracheostomy / Tracheotomy- Tracheostomy-Local Anesthesia	6000	6000	5700	5100	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1344	Secondary	Neurosurgery - Phase 3	1837000002	Tracheostomy / Tracheotomy- Tracheostomy-Local Anesthesia	6000	6000	5700	5100	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1345	Secondary	Obstetrics & Gynaecology - Phase 3	18380000060	Tracheostomy / Tracheotomy- Tracheostomy-Local Anesthesia	6000	6000	5700	5100	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1346	Secondary	Ophthalmology - Phase 3	18390000052	Tracheostomy / Tracheotomy- Tracheostomy-Local Anesthesia	6000	6000	5700	5100	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1347	Secondary	Orthopaedics - Phase 3	18400000098	Tracheostomy / Tracheotomy- Tracheostomy-Local Anesthesia	6000	6000	5700	5100	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1348	Secondary	Paediatric surgery - Phase 3	18410000002	Tracheostomy / Tracheotomy- Tracheostomy-Local Anesthesia	6000	6000	5700	5100	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1349	Secondary	Paediatric Medical management - Phase 3	18420000532	Tracheostomy / Tracheotomy- Tracheostomy-Local Anesthesia	6000	6000	5700	5100	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College& Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1350	Secondary	Plastic & reconstructive Surgery - Phase 3	18430000002	Tracheostomy / Tracheotomy- Tracheostomy-Local Anesthesia	6000	6000	5700	5100	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1351	Secondary	Radiation Oncology - Phase 3	18440000002	Tracheostomy / Tracheotomy- Tracheostomy-Local Anesthesia	6000	6000	5700	5100	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1352	Secondary	Surgical Oncology - Phase 3	18450000002	Tracheostomy / Tracheotomy- Tracheostomy-Local Anesthesia	6000	6000	5700	5100	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1353	Secondary	Urology - Phase 3	18460000002	Tracheostomy / Tracheotomy- Tracheostomy-Local Anesthesia	6000	6000	5700	5100	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1354	Secondary	Burns Management - Phase 3	18470000002	Tracheostomy / Tracheotomy- Tracheostomy-Local Anesthesia	6000	6000	5700	5100	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1355	Secondary	Emergency Room Packages (Care requiring less than 12 hrs stay) - Phase 3	18480000002	Tracheostomy / Tracheotomy- Tracheostomy-Local Anesthesia	6000	6000	5700	5100	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College& Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1356	Secondary	Interventional Neuroradiology - Phase 3	1849000002	Tracheostomy / Tracheotomy- Tracheostomy-Local Anesthesia	6000	6000	5700	5100	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1357	Secondary	Mental Disorders Packages - Phase 3	1850000032	Tracheostomy / Tracheotomy- Tracheostomy-Local Anesthesia	6000	6000	5700	5100	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1358	Secondary	Neo-natal care Packages - Phase 3	1851000002	Tracheostomy / Tracheotomy- Tracheostomy-Local Anesthesia	6000	6000	5700	5100	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1359	Secondary	Oral and Maxillofacial Surgery - Phase 3	1852000002	Tracheostomy / Tracheotomy- Tracheostomy-Local Anesthesia	6000	6000	5700	5100	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1360	Secondary	Polytrauma - Phase 3	1853000002	Tracheostomy / Tracheotomy- Tracheostomy-Local Anesthesia	6000	6000	5700	5100	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1361	Secondary	Cardiology - Phase 3	1831000002	Tracheostomy / Tracheotomy- Tracheostomy-Local Anesthesia	6000	6000	5700	5100	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College& Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1362	Secondary	Cardio-thoracic & Vascular surgery - Phase 3	1832000002	Tracheostomy / Tracheotomy- Tracheostomy-Local Anesthesia	6000	6000	5700	5100	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1363	Secondary	Otorhinolaryngology (ENT) - Phase 3	18330000043	Tracheostomy / Tracheotomy- Tracheostomy-Local Anesthesia	6000	6000	5700	5100	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1364	Secondary	General Medicine - Phase 3	18340000474	Tracheostomy / Tracheotomy- Tracheostomy-Local Anesthesia	6000	6000	5700	5100	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1365	Secondary	General Surgery - Phase 3	18350000044	Tracheostomy / Tracheotomy- Tracheostomy-Local Anesthesia	6000	6000	5700	5100	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1366	Secondary	Obstetrics & Gynaecology - Phase 3	18380000061	Tracheostomy / Tracheotomy- Tracheotomy-General Anesthesia	10000	10000	9500	8500	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1367	Secondary	General Medicine - Phase 3	18340000475	Tracheostomy / Tracheotomy- Tracheotomy-General Anesthesia	10000	10000	9500	8500	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College& Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1368	Secondary	Orthopaedics - Phase 3	1840000099	Tracheostomy / Tracheotomy- Tracheotomy-General Anesthesia	10000	10000	9500	8500	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1369	Secondary	Surgical Oncology - Phase 3	1845000003	Tracheostomy / Tracheotomy- Tracheotomy-General Anesthesia	10000	10000	9500	8500	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1370	Secondary	Medical Oncology - Phase 3	1836000003	Tracheostomy / Tracheotomy- Tracheotomy-General Anesthesia	10000	10000	9500	8500	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1371	Secondary	Radiation Oncology - Phase 3	1844000003	Tracheostomy / Tracheotomy- Tracheotomy-General Anesthesia	10000	10000	9500	8500	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1372	Secondary	Ophthalmology - Phase 3	1839000053	Tracheostomy / Tracheotomy- Tracheotomy-General Anesthesia	10000	10000	9500	8500	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1373	Secondary	Plastic & reconstructive Surgery - Phase 3	1843000003	Tracheostomy / Tracheotomy- Tracheotomy-General Anesthesia	10000	10000	9500	8500	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1374	Secondary	Burns Management - Phase 3	1847000003	Tracheostomy / Tracheotomy- Tracheotomy-General Anesthesia	10000	10000	9500	8500	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1375	Secondary	Emergency Room Packages (Care requiring less than 12 hrs stay) - Phase 3	1848000003	Tracheostomy / Tracheotomy- Tracheotomy-General Anesthesia	10000	10000	9500	8500	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1376	Secondary	Interventional Neuroradiology - Phase 3	1849000003	Tracheostomy / Tracheotomy- Tracheotomy-General Anesthesia	10000	10000	9500	8500	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1377	Secondary	Mental Disorders Packages - Phase 3	1850000003	Tracheostomy / Tracheotomy- Tracheotomy-General Anesthesia	10000	10000	9500	8500	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1378	Secondary	Polytrauma - Phase 3	1853000003	Tracheostomy / Tracheotomy- Tracheotomy-General Anesthesia	10000	10000	9500	8500	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1379	Secondary	Neurosurgery - Phase 3	1837000003	Tracheostomy / Tracheotomy- Tracheotomy-General Anesthesia	10000	10000	9500	8500	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1380	Secondary	Otorhinolaryngology (ENT) - Phase 3	1833000044	Tracheostomy / Tracheotomy- Tracheotomy-General Anesthesia	10000	10000	9500	8500	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1381	Secondary	Cardio-thoracic & Vascular surgery - Phase 3	1832000003	Tracheostomy / Tracheotomy- Tracheotomy-General Anesthesia	10000	10000	9500	8500	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1382	Secondary	Cardiology - Phase 3	1831000003	Tracheostomy / Tracheotomy- Tracheotomy-General Anesthesia	10000	10000	9500	8500	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1383	Secondary	Oral and Maxillofacial Surgery - Phase 3	1852000003	Tracheostomy / Tracheotomy- Tracheotomy-General Anesthesia	10000	10000	9500	8500	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1384	Secondary	Neo-natal care Packages - Phase 3	1851000003	Tracheostomy / Tracheotomy- Tracheotomy-General Anesthesia	10000	10000	9500	8500	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1385	Secondary	Paediatric surgery - Phase 3	1841000003	Tracheostomy / Tracheotomy- Tracheotomy-General Anesthesia	10000	10000	9500	8500	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College& Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1386	Secondary	General Surgery - Phase 3	1835000045	Tracheostomy / Tracheotomy- Tracheotomy-General Anesthesia	10000	10000	9500	8500	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1387	Secondary	Paediatric Medical management - Phase 3	18420000533	Tracheostomy / Tracheotomy- Tracheotomy-General Anesthesia	10000	10000	9500	8500	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1388	Secondary	Urology - Phase 3	18460000003	Tracheostomy / Tracheotomy- Tracheotomy-General Anesthesia	10000	10000	9500	8500	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1389	Secondary	Urology - Phase 3	18460000004	Tracheostomy / Tracheotomy- Tracheotomy-Local Anesthesia	6000	6000	5700	5100	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1390	Secondary	Surgical Oncology - Phase 3	18450000004	Tracheostomy / Tracheotomy- Tracheotomy-Local Anesthesia	6000	6000	5700	5100	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1391	Secondary	Radiation Oncology - Phase 3	18440000004	Tracheostomy / Tracheotomy- Tracheotomy-Local Anesthesia	6000	6000	5700	5100	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College& Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1392	Secondary	Plastic & reconstructive Surgery - Phase 3	18430000004	Tracheostomy / Tracheotomy- Tracheotomy-Local Anesthesia	6000	6000	5700	5100	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1393	Secondary	Paediatric Medical management - Phase 3	18420000534	Tracheostomy / Tracheotomy- Tracheotomy-Local Anesthesia	6000	6000	5700	5100	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1394	Secondary	Paediatric surgery - Phase 3	18410000004	Tracheostomy / Tracheotomy- Tracheotomy-Local Anesthesia	6000	6000	5700	5100	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1395	Secondary	Polytrauma - Phase 3	18530000004	Tracheostomy / Tracheotomy- Tracheotomy-Local Anesthesia	6000	6000	5700	5100	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1396	Secondary	Orthopaedics - Phase 3	18400000100	Tracheostomy / Tracheotomy- Tracheotomy-Local Anesthesia	6000	6000	5700	5100	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1397	Secondary	Ophthalmology - Phase 3	18390000054	Tracheostomy / Tracheotomy- Tracheotomy-Local Anesthesia	6000	6000	5700	5100	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College& Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1398	Secondary	Obstetrics & Gynaecology - Phase 3	1838000062	Tracheostomy / Tracheotomy- Tracheotomy-Local Anesthesia	6000	6000	5700	5100	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1399	Secondary	Neurosurgery - Phase 3	1837000004	Tracheostomy / Tracheotomy- Tracheotomy-Local Anesthesia	6000	6000	5700	5100	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1400	Secondary	General Surgery - Phase 3	1835000046	Tracheostomy / Tracheotomy- Tracheotomy-Local Anesthesia	6000	6000	5700	5100	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1401	Secondary	Medical Oncology - Phase 3	1836000004	Tracheostomy / Tracheotomy- Tracheotomy-Local Anesthesia	6000	6000	5700	5100	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1402	Secondary	General Medicine - Phase 3	1834000046	Tracheostomy / Tracheotomy- Tracheotomy-Local Anesthesia	6000	6000	5700	5100	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1403	Secondary	Otorhinolaryngology (ENT) - Phase 3	1833000045	Tracheostomy / Tracheotomy- Tracheotomy-Local Anesthesia	6000	6000	5700	5100	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1404	Secondary	Cardio-thoracic & Vascular surgery - Phase 3	18320000004	Tracheostomy / Tracheotomy- Tracheotomy-Local Anesthesia	6000	6000	5700	5100	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1405	Secondary	Cardiology - Phase 3	18310000004	Tracheostomy / Tracheotomy- Tracheotomy-Local Anesthesia	6000	6000	5700	5100	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1406	Secondary	Oral and Maxillofacial Surgery - Phase 3	18520000004	Tracheostomy / Tracheotomy- Tracheotomy-Local Anesthesia	6000	6000	5700	5100	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1407	Secondary	Neo-natal care Packages - Phase 3	18510000004	Tracheostomy / Tracheotomy- Tracheotomy-Local Anesthesia	6000	6000	5700	5100	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1408	Secondary	Mental Disorders Packages - Phase 3	18500000034	Tracheostomy / Tracheotomy- Tracheotomy-Local Anesthesia	6000	6000	5700	5100	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1409	Secondary	Interventional Neuroradiology - Phase 3	18490000004	Tracheostomy / Tracheotomy- Tracheotomy-Local Anesthesia	6000	6000	5700	5100	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1410	Secondary	Emergency Room Packages (Care requiring less than 12 hrs stay) - Phase 3	1848000004	Tracheostomy / Tracheotomy- Tracheotomy-Local Anesthesia	6000	6000	5700	5100	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1411	Secondary	Burns Management - Phase 3	1847000004	Tracheostomy / Tracheotomy- Tracheotomy-Local Anesthesia	6000	6000	5700	5100	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1412	Secondary	Obstetrics & Gynaecology - Phase 3	18380000063	Trans - vaginal tape / Trans-obturator tape- Trans-obturator tape	15200	15200	14440	12920	Surgical	Not Reserved	Yes	No	0	Admission Notes Comprising Of History And Examination With Indications For The Procedure , Relevant Investigations (Establishing Diagnosis)	Bar-Code Of Tvt/Tot Tape Used , Detailed Discharge Summary , Detailed Procedure/Operative Notes , Progress Notes	No	No	Yes	No	Yes	1
1413	Secondary	Obstetrics & Gynaecology - Phase 3	18380000064	Trans - vaginal tape / Trans-obturator tape- Trans-vaginal tape	15200	15200	14440	12920	Surgical	Not Reserved	Yes	No	0	Admission Notes Comprising Of History And Examination With Indications For The Procedure , Relevant Investigations (Establishing Diagnosis)	Bar-Code Of Tvt/Tot Tape Used , Detailed Discharge Summary , Detailed Procedure/Operative Notes , Progress Notes	No	No	Yes	No	Yes	1
1414	Secondary	Mental Disorders Packages - Phase 3	18500000035	Transcranial Magnetic Stimulation (TMS) - per session	1000	1000	950	850	Medical	Reserved	No	No	0	Detailed History With Chronicity	Detailed Discharge Summary , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	1
1415	Secondary	Paediatric Medical management - Phase 3	18420000535	Trauma -HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Planned Line Of Management , Clinical Notes Detailing History / Examination Findings Describing Trauma , Fir/Mlc	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1416	Secondary	Paediatric Medical management - Phase 3	18420000536	Trauma -ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Planned Line Of Management , Clinical Notes Detailing History / Examination Findings Describing Trauma , Fir/Mlc	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1417	Secondary	Paediatric Medical management - Phase 3	18420000537	Trauma -ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Planned Line Of Management , Clinical Notes Detailing History / Examination Findings Describing Trauma , Fir/Mlc	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1418	Secondary	Paediatric Medical management - Phase 3	18420000538	Trauma -Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Planned Line Of Management , Clinical Notes Detailing History / Examination Findings Describing Trauma , Fir/Mlc	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1419	Secondary	Orthopaedics - Phase 3	18400000101	Two Stage Amputation-Above Elbow	23200	23200	22040	19720	Surgical	Not Reserved	Yes	No	0	Clinical Photograph Of Affected Part , Detailed Clinical Notes , Fir/Mlc , X-Ray (Affected Limb)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Clinical Photograph	No	No	Yes	No	No	5
1420	Secondary	Orthopaedics - Phase 3	18400000102	Two Stage Amputation-Above Knee	23200	23200	22040	19720	Surgical	Not Reserved	Yes	No	0	Clinical Photograph Of Affected Part , Detailed Clinical Notes , Fir/Mlc , X-Ray (Affected Limb)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Clinical Photograph	No	No	Yes	No	No	5
1421	Secondary	Orthopaedics - Phase 3	18400000103	Two Stage Amputation-Below Elbow	23200	23200	22040	19720	Surgical	Not Reserved	Yes	No	0	Clinical Photograph Of Affected Part , Detailed Clinical Notes , Fir/Mlc , X-Ray (Affected Limb)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Clinical Photograph	No	No	Yes	No	No	5

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1422	Secondary	Orthopaedics - Phase 3	18400000104	Two Stage Amputation-Below Knee	23200	23200	22040	19720	Surgical	Not Reserved	Yes	No	0	Clinical Photograph Of Affected Part , Detailed Clinical Notes , Fir/Mic , X-Ray (Affected Limb)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Clinical Photograph	No	No	Yes	No	No	5
1423	Secondary	Orthopaedics - Phase 3	18400000105	Two Stage Amputation-Foot	23200	23200	22040	19720	Surgical	Not Reserved	Yes	No	0	Clinical Photograph Of Affected Part , Detailed Clinical Notes , Fir/Mic , X-Ray (Affected Limb)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Clinical Photograph	No	No	Yes	No	No	5
1424	Secondary	Orthopaedics - Phase 3	18400000106	Two Stage Amputation-Hand	23200	23200	22040	19720	Surgical	Not Reserved	Yes	No	0	Clinical Photograph Of Affected Part , Detailed Clinical Notes , Fir/Mic , X-Ray (Affected Limb)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Clinical Photograph	No	No	Yes	No	No	5
1425	Secondary	Orthopaedics - Phase 3	18400000107	Two Stage Amputation-Wrist	23200	23200	22040	19720	Surgical	Not Reserved	Yes	No	0	Clinical Photograph Of Affected Part , Detailed Clinical Notes , Fir/Mic , X-Ray (Affected Limb)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Clinical Photograph	No	No	Yes	No	No	5
1426	Secondary	Otorhinolaryngology (ENT) - Phase 3	18330000046	Tympanoplasty	8000	8000	7600	6800	Surgical	Not Reserved	Yes	No	0	Audiogram/Tympanometry(Or Impedence Audiometry) , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra Procedure Clinical Photograph , Invoice Of Graft Used , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	No	2
1427	Secondary	General Medicine - Phase 3	18340000477	Unexplained hepatosplenomegaly-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1428	Secondary	Paediatric Medical management - Phase 3	18420000539	Unexplained hepatosplenomegaly-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1429	Secondary	Paediatric Medical management - Phase 3	18420000540	Unexplained hepatosplenomegaly-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1430	Secondary	General Medicine - Phase 3	18340000478	Unexplained hepatosplenomegaly-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1431	Secondary	General Medicine - Phase 3	18340000479	Unexplained hepatosplenomegaly-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1432	Secondary	Paediatric Medical management - Phase 3	18420000541	Unexplained hepatosplenomegaly-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1433	Secondary	Paediatric Medical management - Phase 3	18420000542	Unexplained hepatosplenomegaly-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1434	Secondary	General Medicine - Phase 3	18340000480	Unexplained hepatosplenomegaly-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1435	Secondary	General Medicine - Phase 3	18340000481	Upper Gi bleeding (conservative)-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1436	Secondary	Paediatric Medical management - Phase 3	18420000543	Upper Gi bleeding (conservative)-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1437	Secondary	General Medicine - Phase 3	18340000482	Upper Gi bleeding (conservative)-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1438	Secondary	Paediatric Medical management - Phase 3	18420000544	Upper Gi bleeding (conservative)-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1439	Secondary	General Medicine - Phase 3	18340000483	Upper Gi bleeding (conservative)-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1440	Secondary	Paediatric Medical management - Phase 3	18420000545	Upper GI bleeding (conservative)-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1441	Secondary	General Medicine - Phase 3	18340000484	Upper GI bleeding (conservative)-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1442	Secondary	Paediatric Medical management - Phase 3	18420000546	Upper GI bleeding (conservative)-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1443	Secondary	Paediatric Medical management - Phase 3	18420000547	Upper GI bleeding (endoscopic)-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1444	Secondary	General Medicine - Phase 3	18340000485	Upper GI bleeding (endoscopic)-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1445	Secondary	General Medicine - Phase 3	18340000486	Upper GI bleeding (endoscopic)-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1446	Secondary	Paediatric Medical management - Phase 3	18420000548	Upper GI bleeding (endoscopic)-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1447	Secondary	Paediatric Medical management - Phase 3	18420000549	Upper GI bleeding (endoscopic)-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1448	Secondary	General Medicine - Phase 3	18340000487	Upper GI bleeding (endoscopic)-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1449	Secondary	General Medicine - Phase 3	18340000488	Upper GI bleeding (endoscopic)-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1450	Secondary	Paediatric Medical management - Phase 3	18420000550	Upper GI bleeding (endoscopic)-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1451	Secondary	General Medicine - Phase 3	18340000489	Urinary Tract Infection-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1452	Secondary	Paediatric Medical management - Phase 3	18420000551	Urinary Tract Infection-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1453	Secondary	Paediatric Medical management - Phase 3	18420000552	Urinary Tract Infection-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1454	Secondary	General Medicine - Phase 3	18340000490	Urinary Tract Infection-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1455	Secondary	Paediatric Medical management - Phase 3	18420000553	Urinary Tract Infection-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1456	Secondary	General Medicine - Phase 3	18340000491	Urinary Tract Infection-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1457	Secondary	Paediatric Medical management - Phase 3	18420000554	Urinary Tract Infection-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1458	Secondary	General Medicine - Phase 3	18340000492	Urinary Tract Infection-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1459	Secondary	Obstetrics & Gynaecology - Phase 3	18380000065	Vaginal Sacrospinus fixation with repair	15000	15000	14250	12750	Surgical	Not Reserved	No	No	0	Admission Notes Comprising Of History And Examination With Indications For The Procedure , Relevant Investigations (Establishing Diagnosis)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra-Operative Photograph , Progress Notes	No	No	Yes	No	No	5
1460	Secondary	Obstetrics & Gynaecology - Phase 3	18380000066	Vaginoplasty (McIndoe procedure)	11000	11000	10450	9350	Surgical	Not Reserved	Yes	No	0	Admission Notes Comprising Of History And Examination With Indications For The Procedure , Relevant Investigations (Establishing Diagnosis) , Usg-Abdomen & Pelvis	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra-Operative Photograph , Progress Notes	No	No	Yes	No	No	3
1461	Secondary	General Surgery - Phase 3	18350000047	G J Vagotomy	23500	23500	22325	19975	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Endoscopy	Detailed Discharge Summary , Detailed Operative Notes , Endoscopic Intra Operative Photograph , Histopathology (Hpe)	No	No	Yes	No	No	5
1462	Secondary	General Surgery - Phase 3	18350000048	Vagotomy + Pyloroplasty	23500	23500	22325	19975	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Endoscopy	Detailed Discharge Summary , Detailed Operative Notes , Endoscopic Intra Operative Photograph , Histopathology (Hpe)	No	No	Yes	No	No	5
1463	Secondary	General Medicine - Phase 3	18340000493	Vasculitis-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1464	Secondary	Paediatric Medical management - Phase 3	18420000555	Vasculitis-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1465	Secondary	Paediatric Medical management - Phase 3	18420000556	Vasculitis-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1466	Secondary	General Medicine - Phase 3	18340000494	Vasculitis-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1467	Secondary	Paediatric Medical management - Phase 3	18420000557	Vasculitis-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1468	Secondary	General Medicine - Phase 3	18340000495	Vasculitis-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1469	Secondary	Paediatric Medical management - Phase 3	18420000558	Vasculitis-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1470	Secondary	General Medicine - Phase 3	18340000496	Vasculitis-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1471	Secondary	General Medicine - Phase 3	18340000497	Viral encephalitis-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1472	Secondary	Paediatric Medical management - Phase 3	18420000559	Viral encephalitis-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1473	Secondary	General Medicine - Phase 3	18340000498	Viral encephalitis-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1474	Secondary	Paediatric Medical management - Phase 3	18420000560	Viral encephalitis-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1475	Secondary	Paediatric Medical management - Phase 3	18420000561	Viral encephalitis-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1476	Secondary	General Medicine - Phase 3	18340000499	Viral encephalitis-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1477	Secondary	Paediatric Medical management - Phase 3	18420000562	Viral encephalitis-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1478	Secondary	General Medicine - Phase 3	18340000500	Viral encephalitis-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1479	Secondary	Paediatric Medical management - Phase 3	18420000563	Visceral leishmaniasis-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1480	Secondary	General Medicine - Phase 3	18340000501	Visceral leishmaniasis-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1481	Secondary	Paediatric Medical management - Phase 3	18420000564	Visceral leishmaniasis-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1482	Secondary	General Medicine - Phase 3	18340000502	Visceral leishmaniasis-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1483	Secondary	General Medicine - Phase 3	18340000503	Visceral leishmaniasis-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1484	Secondary	Paediatric Medical management - Phase 3	18420000565	Visceral leishmaniasis-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1485	Secondary	General Medicine - Phase 3	18340000504	Visceral leishmaniasis-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1486	Secondary	Paediatric Medical management - Phase 3	18420000566	Visceral leishmaniasis-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1487	Secondary	Ophthalmology - Phase 3	18390000055	Vitreoretinal Surgery (with Silicon Oil Insertion)	23900	23900	22705	20315	Surgical	Not Reserved	No	No	0	Bone Scan (Optional) , Clinical Documents , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Operative Notes , Iol Sticker , Still Image Of The Procedure With Patient Id And Date	No	No	Yes	No	Yes	1

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1488	Secondary	Obstetrics & Gynaecology - Phase 3	1838000067	Vulval Hamatoma drainage	3000	3000	2850	2550	Surgical	Not Reserved	No	No	0	Admission Notes Comprising Of History And Examination With Indications For The Procedure , Relevant Investigations (Establishing Diagnosis)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra-Operative Photograph , Progress Notes	No	No	Yes	No	Yes	1
1489	Secondary	Obstetrics & Gynaecology - Phase 3	1838000068	Vulvo vaginal cyst enucleation / drainage- Vulvo vaginal cyst drainage	4700	4700	4465	3995	Surgical	Not Reserved	No	No	0	Admission Notes Comprising Of History And Examination With Indications For The Procedure , Relevant Investigations (Establishing Diagnosis)	Detailed Discharge Summary , Detailed Operative Notes	No	No	Yes	No	Yes	1
1490	Secondary	Obstetrics & Gynaecology - Phase 3	1838000069	Vulvo vaginal cyst enucleation / drainage- Vulvo vaginal cyst enucleation	4700	4700	4465	3995	Surgical	Not Reserved	Yes	No	0	Admission Notes Comprising Of History And Examination With Indications For The Procedure , Relevant Investigations (Establishing Diagnosis)	Detailed Discharge Summary , Detailed Operative Notes , Hpe Of Removed Tissue	No	No	Yes	No	Yes	1
1491	Secondary	Paediatric Medical management - Phase 3	18420000567	Wheezing-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Planned Line Of Management , Clinical Notes Detailing History	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1492	Secondary	Paediatric Medical management - Phase 3	18420000568	Wheezing-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Planned Line Of Management , Clinical Notes Detailing History	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1493	Secondary	Paediatric Medical management - Phase 3	18420000569	Wheezing-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Planned Line Of Management , Clinical Notes Detailing History	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1494	Secondary	Paediatric Medical management - Phase 3	18420000570	Wheezing-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Planned Line Of Management , Clinical Notes Detailing History	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1495	Secondary	Paediatric Medical management - Phase 3	18420000571	Wilson's disease-HDU	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1496	Secondary	Paediatric Medical management - Phase 3	18420000572	Wilson's disease-ICU - With Ventilator	3000	3000	2850	2550	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1497	Secondary	Paediatric Medical management - Phase 3	18420000573	Wilson's disease-ICU - Without Ventilator	2400	2400	2280	2040	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1498	Secondary	Paediatric Medical management - Phase 3	18420000574	Wilson's disease-Routine Ward	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
1499	Secondary	Paediatric Medical management - Phase 3	18420000575	CRRT	8000	8000	7600	6800	Surgical	Not Reserved	No	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	Yes	No	No	No	Yes	1

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1500	Secondary	Ophthalmology - Phase 3	1839000056	GA / EUA separate add on package	3000	3000	2850	2550	Medical	Not Reserved	No	No	0	Clinical Notes Justifying The Need For Ga	Clinical Notes For The Associated Surgery / Disease Along With Pre-Op Clinical Notes , Operative And Anesthesia Details , Post-Op Clinical Notes	Yes	No	No	No	Yes	1
1501	Secondary	General Medicine - Phase 3	18340000511	Haemodialysis / Peritoneal Dialysis (only for ARF)-Haemodialysis Dialysis (only for ARF)	1500	1500	1425	1275	Surgical	Not Reserved	No	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	Yes	No	No	No	Yes	1
1502	Secondary	General Medicine - Phase 3	18340000512	Haemodialysis / Peritoneal Dialysis (only for ARF)-Peritoneal Dialysis (only for ARF)	1500	1500	1425	1275	Surgical	Not Reserved	No	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	Yes	No	No	No	Yes	1
1503	Secondary	General Medicine - Phase 3	18340000513	High end histopathology (Biopsies) and advanced serology investigations	5000	5000	4750	4250	Surgical	Not Reserved	No	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	Yes	No	No	No	No	Not Applicable(NA)
1504	Secondary	Paediatric Medical management - Phase 3	18420000576	High end histopathology (Biopsies) and advanced serology investigations	5000	5000	4750	4250	Surgical	Not Reserved	No	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	Yes	No	No	No	No	Not Applicable(NA)
1505	Secondary	Paediatric Medical management - Phase 3	18420000577	High end radiological diagnostic (CT, MRI, Imaging including nuclear imaging)-High end radiological diagnostic (CT, MRI, Imaging including nuclear imaging)	5000	5000	4750	4250	Surgical	Not Reserved	No	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	Yes	No	No	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College& Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1506	Secondary	General Medicine - Phase 3	18340000514	High end radiological diagnostic (CT, MRI, Imaging including nuclear imaging)-High end radiological diagnostic (CT, MRI, Imaging including nuclear imaging)	5000	5000	4750	4250	Surgical	Not Reserved	No	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	Yes	No	No	No	No	Not Applicable(NA)
1507	Secondary	Paediatric Medical management - Phase 3	18420000578	Medical Management for Raised intracranial pressure-After Decompressive craniotomy / After Shunt procedure / After other emergency neuro surgical procedures / For ICP monitoring-HDU	2000	2000	1900	1700	Surgical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	Yes	No	No	No	No	Not Applicable(NA)
1508	Secondary	Paediatric Medical management - Phase 3	18420000579	Medical Management for Raised intracranial pressure-After Decompressive craniotomy / After Shunt procedure / After other emergency neuro surgical procedures / For ICP monitoring-ICU - With Ventilator	3000	3000	2850	2550	Surgical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	Yes	No	No	No	No	Not Applicable(NA)
1509	Secondary	Paediatric Medical management - Phase 3	18420000580	Medical Management for Raised intracranial pressure-After Decompressive craniotomy / After Shunt procedure / After other emergency neuro surgical procedures / For ICP monitoring-ICU - Without Ventilator	2400	2400	2280	2040	Surgical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	Yes	No	No	No	No	Not Applicable(NA)
1510	Secondary	Paediatric Medical management - Phase 3	18420000581	Medical Management for Raised intracranial pressure-After Decompressive craniotomy / After other emergency neuro surgical procedures / For ICP monitoring-Routine Ward	1000	1000	950	850	Surgical	Not Reserved	Yes	No	0	Admission Notes Showing Vitals/ Examination Findings (Incl Neurological Examination)/ Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	Yes	No	No	No	No	Not Applicable(NA)
1511	Secondary	Paediatric Medical management - Phase 3	18420000582	Plasmapheresis	2000	2000	1900	1700	Surgical	Not Reserved	No	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	Yes	No	No	No	Yes	1

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1512	Secondary	General Medicine - Phase 3	18340000515	Plasmapheresis	2000	2000	1900	1700	Surgical	Not Reserved	No	No	0	Admission Notes Showing Vitals/ Examination Findings/Planned Line Of Management , Clinical Notes Detailing History , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Detailed Treatment Notes , Evidence Of All Investigations Done	Yes	No	No	No	Yes	1
1513	Secondary	Mental Disorders Packages - Phase 3	18500000040	Pre - Electro Convulsive Therapy (ECT) and Pre - Transcranial Magnetic Stimulation (TMS) Package (Cognitive Tests, Complete Haemogram, Liver Function Test, Renal Function Test, Serum Electrolytes, Electro Cardiogram (ECG), CT / MRI Brain, Electroencephalogram, Thyroid Function Test, VDRL, HIV Test, Vitamin B12 levels, Folate levels, Lipid Profile, Homocysteine levels)	10000	10000	9500	8500	Surgical	Reserved	No	No	0	Detailed History With Chronicity	Detailed Discharge Summary , Detailed Treatment Notes , Evidence Of All Investigations Done	Yes	No	No	No	No	0
1514	Secondary	Ophthalmology - Phase 3	18390000057	SOR (Silicon Oil Removal)	9300	9300	8835	7905	Medical	Not Reserved	No	No	0	Bone Scan , Clinical Documents , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Operative Notes , Iol Sticker , Still Image Of The Procedure With Patient Id And Date	Yes	No	No	No	Yes	1
1515	Secondary	Paediatric surgery - Phase 3	18410000005	Tracheostomy / Tracheotomy- Tracheostomy-General Anesthesia	10000	10000	9500	8500	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1516	Secondary	Paediatric Medical management - Phase 3	18420000583	Tracheostomy / Tracheotomy- Tracheostomy-General Anesthesia	10000	10000	9500	8500	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe) , Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1517	Secondary	Plastic & reconstructive Surgery - Phase 3	18430000005	Tracheostomy / Tracheotomy- Tracheostomy-General Anesthesia	10000	10000	9500	8500	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1518	Secondary	Radiation Oncology - Phase 3	18440000005	Tracheostomy / Tracheotomy- Tracheostomy-General Anesthesia	10000	10000	9500	8500	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1519	Secondary	Surgical Oncology - Phase 3	18450000005	Tracheostomy / Tracheotomy- Tracheostomy-General Anesthesia	10000	10000	9500	8500	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1520	Secondary	Urology - Phase 3	18460000005	Tracheostomy / Tracheotomy- Tracheostomy-General Anesthesia	10000	10000	9500	8500	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1521	Secondary	Burns Management - Phase 3	18470000005	Tracheostomy / Tracheotomy- Tracheostomy-General Anesthesia	10000	10000	9500	8500	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1522	Secondary	Emergency Room Packages (Care requiring less than 12 hrs stay) - Phase 3	18480000005	Tracheostomy / Tracheotomy- Tracheostomy-General Anesthesia	10000	10000	9500	8500	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1523	Secondary	Interventional Neuroradiology - Phase 3	18490000005	Tracheostomy / Tracheotomy- Tracheostomy-General Anesthesia	10000	10000	9500	8500	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1524	Secondary	Mental Disorders Packages - Phase 3	1850000036	Tracheostomy / Tracheotomy- Tracheostomy-General Anesthesia	10000	10000	9500	8500	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1525	Secondary	Neo-natal care Packages - Phase 3	1851000005	Tracheostomy / Tracheotomy- Tracheostomy-General Anesthesia	10000	10000	9500	8500	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1526	Secondary	Oral and Maxillofacial Surgery - Phase 3	1852000005	Tracheostomy / Tracheotomy- Tracheostomy-General Anesthesia	10000	10000	9500	8500	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1527	Secondary	Polytrauma - Phase 3	1853000005	Tracheostomy / Tracheotomy- Tracheostomy-General Anesthesia	10000	10000	9500	8500	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1528	Secondary	Cardiology - Phase 3	1831000005	Tracheostomy / Tracheotomy- Tracheostomy-General Anesthesia	10000	10000	9500	8500	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1529	Secondary	Cardio-thoracic & Vascular surgery - Phase 3	1832000005	Tracheostomy / Tracheotomy- Tracheostomy-General Anesthesia	10000	10000	9500	8500	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College& Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1530	Secondary	Otorhinolaryngology (ENT) - Phase 3	1833000047	Tracheostomy / Tracheotomy- Tracheostomy-General Anesthesia	10000	10000	9500	8500	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1531	Secondary	General Medicine - Phase 3	18340000507	Tracheostomy / Tracheotomy- Tracheostomy-General Anesthesia	10000	10000	9500	8500	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1532	Secondary	General Surgery - Phase 3	18350000049	Tracheostomy / Tracheotomy- Tracheostomy-General Anesthesia	10000	10000	9500	8500	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1533	Secondary	Medical Oncology - Phase 3	18360000005	Tracheostomy / Tracheotomy- Tracheostomy-General Anesthesia	10000	10000	9500	8500	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1534	Secondary	Neurosurgery - Phase 3	18370000005	Tracheostomy / Tracheotomy- Tracheostomy-General Anesthesia	10000	10000	9500	8500	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1535	Secondary	Obstetrics & Gynaecology - Phase 3	18380000070	Tracheostomy / Tracheotomy- Tracheostomy-General Anesthesia	10000	10000	9500	8500	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1536	Secondary	Ophthalmology - Phase 3	1839000058	Tracheostomy / Tracheotomy- Tracheostomy-General Anesthesia	10000	10000	9500	8500	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1537	Secondary	Orthopaedics - Phase 3	1840000108	Tracheostomy / Tracheotomy- Tracheostomy-General Anesthesia	10000	10000	9500	8500	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1538	Secondary	Medical Oncology - Phase 3	1836000006	Tracheostomy / Tracheotomy- Tracheostomy-Local Anesthesia	6000	6000	5700	5100	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1539	Secondary	Neurosurgery - Phase 3	1837000006	Tracheostomy / Tracheotomy- Tracheostomy-Local Anesthesia	6000	6000	5700	5100	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1540	Secondary	Obstetrics & Gynaecology - Phase 3	18380000071	Tracheostomy / Tracheotomy- Tracheostomy-Local Anesthesia	6000	6000	5700	5100	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1541	Secondary	Ophthalmology - Phase 3	18390000059	Tracheostomy / Tracheotomy- Tracheostomy-Local Anesthesia	6000	6000	5700	5100	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1542	Secondary	Orthopaedics - Phase 3	18400000109	Tracheostomy / Tracheotomy- Tracheostomy-Local Anesthesia	6000	6000	5700	5100	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1543	Secondary	Paediatric surgery - Phase 3	18410000006	Tracheostomy / Tracheotomy- Tracheostomy-Local Anesthesia	6000	6000	5700	5100	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1544	Secondary	Paediatric Medical management - Phase 3	18420000584	Tracheostomy / Tracheotomy- Tracheostomy-Local Anesthesia	6000	6000	5700	5100	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1545	Secondary	Plastic & reconstructive Surgery - Phase 3	18430000006	Tracheostomy / Tracheotomy- Tracheostomy-Local Anesthesia	6000	6000	5700	5100	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1546	Secondary	Radiation Oncology - Phase 3	18440000006	Tracheostomy / Tracheotomy- Tracheostomy-Local Anesthesia	6000	6000	5700	5100	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1547	Secondary	Surgical Oncology - Phase 3	18450000006	Tracheostomy / Tracheotomy- Tracheostomy-Local Anesthesia	6000	6000	5700	5100	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1548	Secondary	Urology - Phase 3	1846000006	Tracheostomy / Tracheotomy- Tracheostomy-Local Anesthesia	6000	6000	5700	5100	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1549	Secondary	Burns Management - Phase 3	1847000006	Tracheostomy / Tracheotomy- Tracheostomy-Local Anesthesia	6000	6000	5700	5100	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1550	Secondary	Emergency Room Packages (Care requiring less than 12 hrs stay) - Phase 3	1848000006	Tracheostomy / Tracheotomy- Tracheostomy-Local Anesthesia	6000	6000	5700	5100	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1551	Secondary	Interventional Neuroradiology - Phase 3	1849000006	Tracheostomy / Tracheotomy- Tracheostomy-Local Anesthesia	6000	6000	5700	5100	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1552	Secondary	Mental Disorders Packages - Phase 3	1850000037	Tracheostomy / Tracheotomy- Tracheostomy-Local Anesthesia	6000	6000	5700	5100	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1553	Secondary	Neo-natal care Packages - Phase 3	1851000006	Tracheostomy / Tracheotomy- Tracheostomy-Local Anesthesia	6000	6000	5700	5100	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1554	Secondary	Oral and Maxillofacial Surgery - Phase 3	18520000006	Tracheostomy / Tracheotomy- Tracheostomy-Local Anesthesia	6000	6000	5700	5100	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1555	Secondary	Polytrauma - Phase 3	18530000006	Tracheostomy / Tracheotomy- Tracheostomy-Local Anesthesia	6000	6000	5700	5100	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1556	Secondary	Cardiology - Phase 3	18310000006	Tracheostomy / Tracheotomy- Tracheostomy-Local Anesthesia	6000	6000	5700	5100	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1557	Secondary	Cardio-thoracic & Vascular surgery - Phase 3	18320000006	Tracheostomy / Tracheotomy- Tracheostomy-Local Anesthesia	6000	6000	5700	5100	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1558	Secondary	Otorhinolaryngology (ENT) - Phase 3	18330000048	Tracheostomy / Tracheotomy- Tracheostomy-Local Anesthesia	6000	6000	5700	5100	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1559	Secondary	General Medicine - Phase 3	18340000508	Tracheostomy / Tracheotomy- Tracheostomy-Local Anesthesia	6000	6000	5700	5100	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1560	Secondary	General Surgery - Phase 3	1835000050	Tracheostomy / Tracheotomy- Tracheostomy-Local Anesthesia	6000	6000	5700	5100	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1561	Secondary	Obstetrics & Gynaecology - Phase 3	1838000072	Tracheostomy / Tracheotomy- Tracheotomy-General Anesthesia	10000	10000	9500	8500	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1562	Secondary	General Medicine - Phase 3	1834000059	Tracheostomy / Tracheotomy- Tracheotomy-General Anesthesia	10000	10000	9500	8500	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1563	Secondary	Orthopaedics - Phase 3	1840000110	Tracheostomy / Tracheotomy- Tracheotomy-General Anesthesia	10000	10000	9500	8500	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1564	Secondary	Surgical Oncology - Phase 3	1845000007	Tracheostomy / Tracheotomy- Tracheotomy-General Anesthesia	10000	10000	9500	8500	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1565	Secondary	Medical Oncology - Phase 3	1836000007	Tracheostomy / Tracheotomy- Tracheotomy-General Anesthesia	10000	10000	9500	8500	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1566	Secondary	Radiation Oncology - Phase 3	18440000007	Tracheostomy / Tracheotomy- Tracheotomy-General Anesthesia	10000	10000	9500	8500	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1567	Secondary	Ophthalmology - Phase 3	18390000060	Tracheostomy / Tracheotomy- Tracheotomy-General Anesthesia	10000	10000	9500	8500	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1568	Secondary	Plastic & reconstructive Surgery - Phase 3	18430000007	Tracheostomy / Tracheotomy- Tracheotomy-General Anesthesia	10000	10000	9500	8500	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1569	Secondary	Burns Management - Phase 3	18470000007	Tracheostomy / Tracheotomy- Tracheotomy-General Anesthesia	10000	10000	9500	8500	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1570	Secondary	Emergency Room Packages (Care requiring less than 12 hrs stay) - Phase 3	18480000007	Tracheostomy / Tracheotomy- Tracheotomy-General Anesthesia	10000	10000	9500	8500	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1571	Secondary	Interventional Neuroradiology - Phase 3	18490000007	Tracheostomy / Tracheotomy- Tracheotomy-General Anesthesia	10000	10000	9500	8500	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College& Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1572	Secondary	Mental Disorders Packages - Phase 3	1850000038	Tracheostomy / Tracheotomy- Tracheotomy-General Anesthesia	10000	10000	9500	8500	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1573	Secondary	Polytrauma - Phase 3	1853000007	Tracheostomy / Tracheotomy- Tracheotomy-General Anesthesia	10000	10000	9500	8500	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1574	Secondary	Neurosurgery - Phase 3	1837000007	Tracheostomy / Tracheotomy- Tracheotomy-General Anesthesia	10000	10000	9500	8500	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1575	Secondary	Otorhinolaryngology (ENT) - Phase 3	18330000049	Tracheostomy / Tracheotomy- Tracheotomy-General Anesthesia	10000	10000	9500	8500	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1576	Secondary	Cardio-thoracic & Vascular surgery - Phase 3	18320000007	Tracheostomy / Tracheotomy- Tracheotomy-General Anesthesia	10000	10000	9500	8500	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1577	Secondary	Cardiology - Phase 3	18310000007	Tracheostomy / Tracheotomy- Tracheotomy-General Anesthesia	10000	10000	9500	8500	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1578	Secondary	Oral and Maxillofacial Surgery - Phase 3	1852000007	Tracheostomy / Tracheotomy- Tracheotomy-General Anesthesia	10000	10000	9500	8500	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1579	Secondary	Neo-natal care Packages - Phase 3	1851000007	Tracheostomy / Tracheotomy- Tracheotomy-General Anesthesia	10000	10000	9500	8500	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1580	Secondary	Paediatric surgery - Phase 3	1841000007	Tracheostomy / Tracheotomy- Tracheotomy-General Anesthesia	10000	10000	9500	8500	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1581	Secondary	General Surgery - Phase 3	1835000051	Tracheostomy / Tracheotomy- Tracheotomy-General Anesthesia	10000	10000	9500	8500	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1582	Secondary	Paediatric Medical management - Phase 3	18420000585	Tracheostomy / Tracheotomy- Tracheotomy-General Anesthesia	10000	10000	9500	8500	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1583	Secondary	Urology - Phase 3	1846000007	Tracheostomy / Tracheotomy- Tracheotomy-General Anesthesia	10000	10000	9500	8500	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1584	Secondary	Urology - Phase 3	18460000008	Tracheostomy / Tracheotomy- Tracheotomy-Local Anesthesia	6000	6000	5700	5100	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe) , Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1585	Secondary	Surgical Oncology - Phase 3	18450000008	Tracheostomy / Tracheotomy- Tracheotomy-Local Anesthesia	6000	6000	5700	5100	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe) , Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1586	Secondary	Radiation Oncology - Phase 3	18440000008	Tracheostomy / Tracheotomy- Tracheotomy-Local Anesthesia	6000	6000	5700	5100	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe) , Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1587	Secondary	Plastic & reconstructive Surgery - Phase 3	18430000008	Tracheostomy / Tracheotomy- Tracheotomy-Local Anesthesia	6000	6000	5700	5100	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe) , Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1588	Secondary	Paediatric Medical management - Phase 3	18420000586	Tracheostomy / Tracheotomy- Tracheotomy-Local Anesthesia	6000	6000	5700	5100	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe) , Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1589	Secondary	Paediatric surgery - Phase 3	18410000008	Tracheostomy / Tracheotomy- Tracheotomy-Local Anesthesia	6000	6000	5700	5100	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe) , Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College& Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1590	Secondary	Polytrauma - Phase 3	18530000008	Tracheostomy / Tracheotomy- Tracheotomy-Local Anesthesia	6000	6000	5700	5100	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1591	Secondary	Orthopaedics - Phase 3	18400000111	Tracheostomy / Tracheotomy- Tracheotomy-Local Anesthesia	6000	6000	5700	5100	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1592	Secondary	Ophthalmology - Phase 3	18390000061	Tracheostomy / Tracheotomy- Tracheotomy-Local Anesthesia	6000	6000	5700	5100	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1593	Secondary	Obstetrics & Gynaecology - Phase 3	18380000073	Tracheostomy / Tracheotomy- Tracheotomy-Local Anesthesia	6000	6000	5700	5100	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1594	Secondary	Neurosurgery - Phase 3	18370000008	Tracheostomy / Tracheotomy- Tracheotomy-Local Anesthesia	6000	6000	5700	5100	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1595	Secondary	General Surgery - Phase 3	18350000052	Tracheostomy / Tracheotomy- Tracheotomy-Local Anesthesia	6000	6000	5700	5100	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1596	Secondary	Medical Oncology - Phase 3	1836000008	Tracheostomy / Tracheotomy- Tracheotomy-Local Anesthesia	6000	6000	5700	5100	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1597	Secondary	General Medicine - Phase 3	18340000510	Tracheostomy / Tracheotomy- Tracheotomy-Local Anesthesia	6000	6000	5700	5100	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1598	Secondary	Otorhinolaryngology (ENT) - Phase 3	18330000050	Tracheostomy / Tracheotomy- Tracheotomy-Local Anesthesia	6000	6000	5700	5100	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1599	Secondary	Cardio-thoracic & Vascular surgery - Phase 3	18320000008	Tracheostomy / Tracheotomy- Tracheotomy-Local Anesthesia	6000	6000	5700	5100	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1600	Secondary	Cardiology - Phase 3	18310000008	Tracheostomy / Tracheotomy- Tracheotomy-Local Anesthesia	6000	6000	5700	5100	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1601	Secondary	Oral and Maxillofacial Surgery - Phase 3	18520000008	Tracheostomy / Tracheotomy- Tracheotomy-Local Anesthesia	6000	6000	5700	5100	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1602	Secondary	Neo-natal care Packages - Phase 3	18510000008	Tracheostomy / Tracheotomy- Tracheotomy-Local Anesthesia	6000	6000	5700	5100	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe) , Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1603	Secondary	Mental Disorders Packages - Phase 3	18500000039	Tracheostomy / Tracheotomy- Tracheotomy-Local Anesthesia	6000	6000	5700	5100	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe) , Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1604	Secondary	Interventional Neuroradiology - Phase 3	18490000008	Tracheostomy / Tracheotomy- Tracheotomy-Local Anesthesia	6000	6000	5700	5100	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe) , Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1605	Secondary	Emergency Room Packages (Care requiring less than 12 hrs stay) - Phase 3	18480000008	Tracheostomy / Tracheotomy- Tracheotomy-Local Anesthesia	6000	6000	5700	5100	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe) , Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1606	Secondary	Burns Management - Phase 3	18470000008	Tracheostomy / Tracheotomy- Tracheotomy-Local Anesthesia	6000	6000	5700	5100	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe) , Post Procedure Clinical Photograph Of Affected Part	Yes	No	No	No	No	0
1607	Tertiary	Radiation Oncology - Phase 3	28440000001	2D External Beam Radiotherapy - Palliative (Upto 10 Fractions) (Inclusive of Simulation & Planning Cost)- Palliative-Duration	10000	10000	9500	8500	Medical	Not Reserved	No	No	0	Clinical Note With Details Of Rt Treatment Plan , Histopathology (Hpe)	Detailed Discharge Summary (With Rt Treatment And Doses Given)	No	No	Yes	No	Yes	1

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1608	Tertiary	Orthopaedics - Phase 3	28400000001	AC Joint reconstruction / Stabilization-Rockwood Type - I	30500	30500	28975	25925	Surgical	Not Reserved	No	No	0	Clinical Notes Detailing Rockwood Type Of Fracture , Justification Of Surgery , X-Ray/Mri	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Invoice/Bar-Code Of Implant , Post Procedure Clinical Photograph , Post-Op X-Ray (Operative Limb)	No	No	Yes	No	No	4
1609	Tertiary	Orthopaedics - Phase 3	28400000002	AC Joint reconstruction / Stabilization-Rockwood Type - II	30500	30500	28975	25925	Surgical	Not Reserved	No	No	0	Clinical Notes Detailing Rockwood Type Of Fracture , Justification Of Surgery , X-Ray/Mri	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Invoice/Bar-Code Of Implant , Post Procedure Clinical Photograph , Post-Op X-Ray (Operative Limb)	No	No	Yes	No	No	4
1610	Tertiary	Orthopaedics - Phase 3	28400000003	AC Joint reconstruction / Stabilization-Rockwood Type - III	30500	30500	28975	25925	Surgical	Not Reserved	No	No	0	Clinical Notes Detailing Rockwood Type Of Fracture , Justification Of Surgery , X-Ray/Mri	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Invoice/Bar-Code Of Implant , Post Procedure Clinical Photograph , Post-Op X-Ray (Operative Limb)	No	No	Yes	No	No	4
1611	Tertiary	Orthopaedics - Phase 3	28400000004	AC Joint reconstruction / Stabilization-Rockwood Type - IV	30500	30500	28975	25925	Surgical	Not Reserved	No	No	0	Clinical Notes Detailing Rockwood Type Of Fracture , Justification Of Surgery , X-Ray/Mri	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Invoice/Bar-Code Of Implant , Post Procedure Clinical Photograph , Post-Op X-Ray (Operative Limb)	No	No	Yes	No	No	4
1612	Tertiary	Orthopaedics - Phase 3	28400000005	AC Joint reconstruction / Stabilization-Rockwood Type - V	30500	30500	28975	25925	Surgical	Not Reserved	No	No	0	Clinical Notes Detailing Rockwood Type Of Fracture , Justification Of Surgery , X-Ray/Mri	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Invoice/Bar-Code Of Implant , Post Procedure Clinical Photograph , Post-Op X-Ray (Operative Limb)	No	No	Yes	No	No	4
1613	Tertiary	Orthopaedics - Phase 3	28400000006	AC Joint reconstruction / Stabilization-Rockwood Type - VI	30500	30500	28975	25925	Surgical	Not Reserved	No	No	0	Clinical Notes Detailing Rockwood Type Of Fracture , Justification Of Surgery , X-Ray/Mri	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Invoice/Bar-Code Of Implant , Post Procedure Clinical Photograph , Post-Op X-Ray (Operative Limb)	No	No	Yes	No	No	4

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College& Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1614	Tertiary	Cardiology - Phase 3	28310000001	ASD Device Closure	98900	98900	93955	84065	Medical	Not Reserved	No	No	0	Detailed Clinical Notes , Echo Report Showing Asd	Detailed Discharge Summary , Invoice Of Blade/Device Used , Post Procedure 2-D Echo With Report , Procedure/Operative Notes With Images	No	No	Yes	No	No	2
1615	Tertiary	Paediatric surgery - Phase 3	28410000001	Abdominal Hydatid Cyst (Single Organ)	15800	15800	15010	13430	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Usg/Ct/Mri	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Intra Procedure Clinical Photograph	No	No	Yes	No	No	3
1616	Tertiary	General Surgery - Phase 3	28350000001	Abdominal Hydatid Cyst (Single Organ)	15800	15800	15010	13430	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Usg/Ct/Mri	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Intra Procedure Clinical Photograph	No	No	Yes	No	No	3
1617	Tertiary	Surgical Oncology - Phase 3	28450000001	Abdominoperineal resection-Lap.	39600	39600	37620	33660	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Histopathology (Hpe)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe)	No	No	Yes	No	No	6
1618	Tertiary	Surgical Oncology - Phase 3	28450000002	Abdominoperineal resection-Open	39600	39600	37620	33660	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Histopathology (Hpe)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe)	No	No	Yes	No	No	6
1619	Tertiary	Neurosurgery - Phase 3	28370000001	Abscess Tapping-Multiple	30000	30000	28500	25500	Surgical	Not Reserved	Yes	No	0	Ct Scan , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure (CT) , Post Procedure Scar Photo , Pus Culture	No	No	Yes	No	No	7

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1620	Tertiary	Neurosurgery - Phase 3	2837000002	Abscess Tapping-Single	20000	20000	19000	17000	Surgical	Not Reserved	Yes	No	0	Ct Scan , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure (Ct) , Post Procedure Scar Photo , Pus Culture	No	No	Yes	No	No	7
1621	Tertiary	Urology - Phase 3	2846000004	Acute management of upper urinary tract trauma – conservative - Per day	2000	2000	1900	1700	Medical	Not Reserved	No	No	0	Circumstances That Led To Trauma , Clinical Notes Detailing The Case History , Doctor'S Note With Complaint , Examination Findings , Usg/Ct Abdomen	All Investigation Done And Consultant Prescription With Diagnose And Line Of Treatment , Detailed Discharge Summary	No	No	Yes	No	No	5
1622	Tertiary	Paediatric surgery - Phase 3	2841000002	Acute management of upper urinary tract trauma – conservative - Per day	2000	2000	1900	1700	Medical	Not Reserved	No	No	0	Circumstances That Led To Trauma , Clinical Notes Detailing The Case History , Doctor'S Note With Complaint , Examination Findings , Usg/Ct Abdomen	All Investigation Done And Consultant Prescription With Diagnose And Line Of Treatment , Detailed Discharge Summary	No	No	Yes	No	No	5
1623	Tertiary	Urology - Phase 3	2846000005	Adrenalectomy-Lap-Bilateral	32500	32500	30875	27625	Surgical	Not Reserved	Yes	No	0	24 Hr Urinary Catecholamine Level/Serum Or Urinary Metanephrine Normetanephrine , Ct/Mri/Fnac/Biopsy , Detailed Clinical Notes , Mibg Scan/Dotonoc Scan , Serum Electrolytes , Sr Cortisol	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe)	No	No	Yes	No	No	4
1624	Tertiary	Paediatric surgery - Phase 3	2841000003	Adrenalectomy-Lap-Bilateral	32500	32500	30875	27625	Surgical	Not Reserved	Yes	No	0	24 Hr Urinary Catecholamine Level/Serum Or Urinary Metanephrine Normetanephrine , Ct/Mri/Fnac/Biopsy , Detailed Clinical Notes , Mibg Scan/Dotonoc Scan , Serum Electrolytes , Sr Cortisol	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe)	No	No	Yes	No	No	4
1625	Tertiary	Urology - Phase 3	2846000006	Adrenalectomy-Lap-Unilateral	27500	27500	26125	23375	Surgical	Not Reserved	Yes	No	0	24 Hr Urinary Catecholamine Level/Serum Or Urinary Metanephrine Normetanephrine , Ct/Mri/Fnac/Biopsy , Detailed Clinical Notes , Mibg Scan/Dotonoc Scan , Serum Electrolytes , Sr Cortisol	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe)	No	No	Yes	No	No	4

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts) 95% of the package amount	Package Rate (Remaining Hospitals) 85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1626	Tertiary	Paediatric surgery - Phase 3	28410000004	Adrenalectomy-Lap.-Unilateral	27500	27500	26125	23375	Surgical	Not Reserved	Yes	No	0	24 Hr Urinary Catecholamine Level/Serum Or Urinary Metanephrine Normetanephrine , Ct/Mri/Fnac/Biopsy , Detailed Clinical Notes , Mibg Scan/Dotonoc Scan , Serum Electrolytes , Sr Cortisol	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe)	No	No	Yes	No	No	4
1627	Tertiary	Urology - Phase 3	28460000007	Adrenalectomy-Open-Bilateral	32500	32500	30875	27625	Surgical	Not Reserved	Yes	No	0	24 Hr Urinary Catecholamine Level/Serum Or Urinary Metanephrine Normetanephrine , Ct/Mri/Fnac/Biopsy , Detailed Clinical Notes , Mibg Scan/Dotonoc Scan , Serum Electrolytes , Sr Cortisol	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe)	No	No	Yes	No	No	5
1628	Tertiary	Paediatric surgery - Phase 3	28410000005	Adrenalectomy-Open-Bilateral	32500	32500	30875	27625	Surgical	Not Reserved	Yes	No	0	24 Hr Urinary Catecholamine Level/Serum Or Urinary Metanephrine Normetanephrine , Ct/Mri/Fnac/Biopsy , Detailed Clinical Notes , Mibg Scan/Dotonoc Scan , Serum Electrolytes , Sr Cortisol	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe)	No	No	Yes	No	No	5
1629	Tertiary	Urology - Phase 3	28460000008	Adrenalectomy-Open-Unilateral	27500	27500	26125	23375	Surgical	Not Reserved	Yes	No	0	24 Hr Urinary Catecholamine Level/Serum Or Urinary Metanephrine Normetanephrine , Ct/Mri/Fnac/Biopsy , Detailed Clinical Notes , Mibg Scan/Dotonoc Scan , Serum Electrolytes , Sr Cortisol	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe)	No	No	Yes	No	No	5
1630	Tertiary	Paediatric surgery - Phase 3	28410000006	Adrenalectomy-Open-Unilateral	27500	27500	26125	23375	Surgical	Not Reserved	Yes	No	0	24 Hr Urinary Catecholamine Level/Serum Or Urinary Metanephrine Normetanephrine , Ct/Mri/Fnac/Biopsy , Detailed Clinical Notes , Mibg Scan/Dotonoc Scan , Serum Electrolytes , Sr Cortisol	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe)	No	No	Yes	No	No	5
1631	Tertiary	Neo-natal care Packages - Phase 3	28510000001	Advanced Surgery for Retinopathy of Prematurity	15000	15000	14250	12750	Surgical	Not Reserved	No	No	0	Detailed Clinical Notes , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Evidence Of All Investigations Done	No	No	Yes	No	No	5

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1632	Tertiary	Otorhinolaryngology (ENT) - Phase 3	28330000001	Advanced anterior skull base surgery-Clival tumour excision	48800	48800	46360	41480	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Coronal Ct/Mri	Detailed Procedure/Operative Notes, Histopathology (Hpe) , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	No	7
1633	Tertiary	Surgical Oncology - Phase 3	28450000003	Advanced anterior skull base surgery-Clival tumour excision	48800	48800	46360	41480	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Coronal Ct/Mri	Detailed Procedure/Operative Notes, Histopathology (Hpe) , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	No	7
1634	Tertiary	Otorhinolaryngology (ENT) - Phase 3	28330000002	Advanced anterior skull base surgery-Endoscopic Hypophysectomy	48800	48800	46360	41480	Surgical	Not Reserved	Yes	No	0	Clinical Notes With Planned Line Of Treatment , Coronal Ct/Mri	Detailed Procedure/Operative Notes, Histopathology (Hpe) , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	No	7
1635	Tertiary	Surgical Oncology - Phase 3	28450000004	Advanced anterior skull base surgery-Endoscopic Hypophysectomy	48800	48800	46360	41480	Surgical	Not Reserved	Yes	No	0	Clinical Notes With Planned Line Of Treatment , Coronal Ct/Mri	Detailed Procedure/Operative Notes, Histopathology (Hpe) , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	No	7
1636	Tertiary	Surgical Oncology - Phase 3	28450000005	Advanced lateral skull base surgery-Fisch approach	48900	48900	46455	41565	Surgical	Not Reserved	No	No	0	Audiogram/Ct-Temporal Bone Of Affected Side/X-Ray Both Mastoids , Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe) , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	No	7
1637	Tertiary	Otorhinolaryngology (ENT) - Phase 3	28330000003	Advanced lateral skull base surgery-Fisch approach	48900	48900	46455	41565	Surgical	Not Reserved	No	No	0	Audiogram/Ct-Temporal Bone Of Affected Side/X-Ray Both Mastoids , Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe) , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	No	7

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1638	Tertiary	Otorhinolaryngology (ENT) - Phase 3	28330000004	Advanced lateral skull base surgery- Temporal Bone resection	48900	48900	46455	41565	Surgical	Not Reserved	Yes	No	0	Audiogram/Ct-Temporal Bone Of Affected Side/X-Ray Both Mastoids , Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe) , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	No	7
1639	Tertiary	Surgical Oncology - Phase 3	28450000006	Advanced lateral skull base surgery- Temporal Bone resection	48900	48900	46455	41565	Surgical	Not Reserved	Yes	No	0	Audiogram/Ct-Temporal Bone Of Affected Side/X-Ray Both Mastoids , Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe) , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	No	7
1640	Tertiary	Otorhinolaryngology (ENT) - Phase 3	28330000005	Advanced lateral skull base surgery- Transcochlear approach	48900	48900	46455	41565	Surgical	Not Reserved	No	No	0	Audiogram/Ct-Temporal Bone Of Affected Side/X-Ray Both Mastoids , Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe) , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	No	7
1641	Tertiary	Surgical Oncology - Phase 3	28450000007	Advanced lateral skull base surgery- Transcochlear approach	48900	48900	46455	41565	Surgical	Not Reserved	No	No	0	Audiogram/Ct-Temporal Bone Of Affected Side/X-Ray Both Mastoids , Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe) , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	No	7
1642	Tertiary	Surgical Oncology - Phase 3	28450000008	Advanced lateral skull base surgery- Translabrynthine approach	48900	48900	46455	41565	Surgical	Not Reserved	No	No	0	Audiogram/Ct-Temporal Bone Of Affected Side/X-Ray Both Mastoids , Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe) , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	No	7
1643	Tertiary	Otorhinolaryngology (ENT) - Phase 3	28330000006	Advanced lateral skull base surgery- Translabrynthine approach	48900	48900	46455	41565	Surgical	Not Reserved	No	No	0	Audiogram/Ct-Temporal Bone Of Affected Side/X-Ray Both Mastoids , Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe) , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	No	7

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1644	Tertiary	Emergency Room Packages (Care requiring less than 12 hrs stay) - Phase 3	2848000001	Animal bites (Excluding Snake Bite)	1700	1700	1615	1445	Medical	Not Reserved	Yes	No	0	Classification Of Bites With Pre Clinical Photograph	Clinical Notes With Treatment Details , Invoice/Bar-Code Sticker Of The Vaccine	No	No	Yes	No	No	Not Applicable(NA)
1645	Tertiary	Paediatric surgery - Phase 3	2841000007	Ankyloglossia Major	15000	15000	14250	12750	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Pre-Op Clinical Photograph	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Clinical Photograph	No	No	Yes	No	No	3
1646	Tertiary	Paediatric surgery - Phase 3	2841000008	Ankyloglossia Minor	5000	5000	4750	4250	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Pre-Op Clinical Photograph	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Clinical Photograph	No	No	Yes	No	Yes	1
1647	Tertiary	Paediatric surgery - Phase 3	2841000009	Ano Rectal Malformation-Abd - Perineal PSARP	20000	20000	19000	17000	Surgical	Not Reserved	Yes	No	0	Clinical Photograph , Detailed Clinical Notes , Distal Cologram/ Ct , Usg-Abdomen , X-Ray (Lumbosacral Spine)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Clinical Photograph	No	No	Yes	No	No	5
1648	Tertiary	Paediatric surgery - Phase 3	2841000010	Ano Rectal Malformation-Anoplasty	20000	20000	19000	17000	Surgical	Not Reserved	Yes	No	0	Clinical Photograph , Detailed Clinical Notes , Distal Cologram/ Ct , Usg-Abdomen , X-Ray (Lumbosacral Spine)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Clinical Photograph	No	No	Yes	No	No	5
1649	Tertiary	Paediatric surgery - Phase 3	2841000011	Ano Rectal Malformation-Cutback	20000	20000	19000	17000	Surgical	Not Reserved	Yes	No	0	Clinical Photograph , Detailed Clinical Notes , Distal Cologram/ Ct , Usg-Abdomen , X-Ray (Lumbosacral Spine)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Clinical Photograph	No	No	Yes	No	No	5

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1650	Tertiary	Paediatric surgery - Phase 3	28410000012	Ano Rectal Malformation-PSARP	20000	20000	19000	17000	Surgical	Not Reserved	Yes	No	0	Clinical Photograph , Detailed Clinical Notes , Distal Cologram/ Ct , Usg-Abdomen , X-Ray (Lumbosacral Spine)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Clinical Photograph	No	No	Yes	No	No	5
1651	Tertiary	Paediatric surgery - Phase 3	28410000013	Ano Rectal Malformation-Redo - Pullthrough	15000	15000	14250	12750	Surgical	Not Reserved	Yes	No	0	Clinical Photograph , Detailed Clinical Notes , Distal Cologram/ Ct , Usg-Abdomen , X-Ray (Lumbosacral Spine)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Clinical Photograph	No	No	Yes	No	No	5
1652	Tertiary	Paediatric surgery - Phase 3	28410000014	Ano Rectal Malformation-Transposition	15000	15000	14250	12750	Surgical	Not Reserved	Yes	No	0	Clinical Photograph , Detailed Clinical Notes , Distal Cologram/ Ct , Usg-Abdomen , X-Ray (Lumbosacral Spine)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Clinical Photograph	No	No	Yes	No	No	5
1653	Tertiary	Neurosurgery - Phase 3	28370000003	Anterior Encephalocele	50000	50000	47500	42500	Surgical	Not Reserved	Yes	No	0	Ct/Mri , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure (CT) , Post Procedure Scar Photo	No	No	Yes	No	No	8
1654	Tertiary	Surgical Oncology - Phase 3	28450000009	Anterior Resection of rectum-Lap.	28500	28500	27075	24225	Surgical	Not Reserved	Yes	No	0	Biopsy , Colonoscopy , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph	No	No	Yes	No	No	10
1655	Tertiary	General Surgery - Phase 3	28350000002	Anterior Resection of rectum-Lap.	28500	28500	27075	24225	Surgical	Not Reserved	Yes	No	0	Biopsy , Colonoscopy , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph	No	No	Yes	No	No	10

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1656	Tertiary	General Surgery - Phase 3	2835000003	Anterior Resection of rectum-Open	28500	28500	27075	24225	Surgical	Not Reserved	Yes	No	0	Biopsy , Colonoscopy , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph	No	No	Yes	No	No	10
1657	Tertiary	Surgical Oncology - Phase 3	2845000010	Anterior Resection of rectum-Open	28500	28500	27075	24225	Surgical	Not Reserved	Yes	No	0	Biopsy , Colonoscopy , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph	No	No	Yes	No	No	10
1658	Tertiary	Otorhinolaryngology (ENT) - Phase 3	2833000007	Anterior skull base surgery-Craniofacial resection	34500	34500	32775	29325	Surgical	Not Reserved	Yes	No	0	Clinical Notes With Planned Line Of Treatment Detailing Aetiology , Ct Scan , Fir/Mic (In Case Of Traumatic Aetiology)	Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	No	6
1659	Tertiary	Surgical Oncology - Phase 3	2845000011	Anterior skull base surgery-Craniofacial resection	34500	34500	32775	29325	Surgical	Not Reserved	Yes	No	0	Clinical Notes With Planned Line Of Treatment Detailing Aetiology , Ct Scan , Fir/Mic (In Case Of Traumatic Aetiology)	Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	No	6
1660	Tertiary	Surgical Oncology - Phase 3	2845000012	Anterior skull base surgery-Endoscopic CSF Rhinorrhea Repair	35000	35000	33250	29750	Surgical	Not Reserved	Yes	No	0	Clinical Notes With Planned Line Of Treatment Detailing Aetiology , Ct Scan , Fir/Mic (In Case Of Traumatic Aetiology)	Detailed Procedure/Operative Notes , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	No	6
1661	Tertiary	Otorhinolaryngology (ENT) - Phase 3	2833000008	Anterior skull base surgery-Endoscopic CSF Rhinorrhea Repair	35000	35000	33250	29750	Surgical	Not Reserved	Yes	No	0	Clinical Notes With Planned Line Of Treatment Detailing Aetiology , Ct Scan , Fir/Mic (In Case Of Traumatic Aetiology)	Detailed Procedure/Operative Notes , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	No	6

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1662	Tertiary	Neurosurgery - Phase 3	2837000004	Anterior skull base surgery-Endoscopic CSF Rhinorrhea Repair	35000	35000	33250	29750	Surgical	Not Reserved	Yes	No	0	Clinical Notes With Planned Line Of Treatment Detailing Aetiology , Ct Scan , Fir/Mlc (In Case Of Traumatic Aetiology)	Detailed Procedure/Operative Notes , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	No	6
1663	Tertiary	Otorhinolaryngology (ENT) - Phase 3	2833000009	Anterior skull base surgery-Maxillary swing	34500	34500	32775	29325	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment Detailing Aetiology , Ct Scan , Fir/Mlc (In Case Of Traumatic Aetiology)	Detailed Procedure/Operative Notes , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	No	6
1664	Tertiary	Surgical Oncology - Phase 3	2845000013	Anterior skull base surgery-Maxillary swing	34500	34500	32775	29325	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment Detailing Aetiology , Ct Scan , Fir/Mlc (In Case Of Traumatic Aetiology)	Detailed Procedure/Operative Notes , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	No	6
1665	Tertiary	Otorhinolaryngology (ENT) - Phase 3	2833000010	Anterior skull base surgery-Optic nerve decompression	34500	34500	32775	29325	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment Detailing Aetiology , Ct Scan , Fir/Mlc (In Case Of Traumatic Aetiology)	Detailed Procedure/Operative Notes , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	No	6
1666	Tertiary	Surgical Oncology - Phase 3	2845000014	Anterior skull base surgery-Optic nerve decompression	34500	34500	32775	29325	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment Detailing Aetiology , Ct Scan , Fir/Mlc (In Case Of Traumatic Aetiology)	Detailed Procedure/Operative Notes , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	No	6
1667	Tertiary	Surgical Oncology - Phase 3	2845000015	Anterior skull base surgery-Orbital decompression	34500	34500	32775	29325	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment Detailing Aetiology , Ct Scan , Fir/Mlc (In Case Of Traumatic Aetiology)	Detailed Procedure/Operative Notes , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	No	6

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1668	Tertiary	Otorhinolaryngology (ENT) - Phase 3	2833000011	Anterior skull base surgery-Orbital decompression	34500	34500	32775	29325	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment Detailing Aetiology , Ct Scan , Fir/Mlc (In Case Of Traumatic Aetiology)	Detailed Procedure/Operative Notes , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	No	6
1669	Tertiary	Paediatric surgery - Phase 3	2841000015	Anti GERD Surgery	10000	10000	9500	8500	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Ugi Endoscopy (Ugie)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra Procedure Clinical Photograph	No	No	Yes	No	No	2
1670	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	2832000001	Aortic Arch Replacement / Thoracoabdominal aneurysm Repair using bypass-Aortic Arch Replacement using bypass	235000	235000	223250	199750	Surgical	Not Reserved	No	No	0	Angio/Ct-Angio/Mri Reports , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure Notes	No	No	Yes	No	No	12
1671	Tertiary	General Surgery - Phase 3	2835000004	Aortic Arch Replacement / Thoracoabdominal aneurysm Repair using bypass-Aortic Arch Replacement using bypass	235000	235000	223250	199750	Surgical	Not Reserved	No	No	0	Angio/Ct-Angio/Mri Reports , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure Notes	No	No	Yes	No	No	12
1672	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	2832000002	Aortic Arch Replacement / Thoracoabdominal aneurysm Repair using bypass-Thoracoabdominal aneurysm Repair using bypass	235000	235000	223250	199750	Surgical	Not Reserved	No	No	0	Angio/Ct-Angio/Mri Reports , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure Notes	No	No	Yes	No	No	12
1673	Tertiary	General Surgery - Phase 3	2835000005	Aortic Arch Replacement / Thoracoabdominal aneurysm Repair using bypass-Thoracoabdominal aneurysm Repair using bypass	235000	235000	223250	199750	Surgical	Not Reserved	No	No	0	Angio/Ct-Angio/Mri Reports , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure Notes	No	No	Yes	No	No	12

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1674	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	2832000003	Aorto Iliac / Aorto femoral bypass (Uni and Bi)-Aorto iliac bypass - B/L	99500	99500	94525	84575	Surgical	Not Reserved	No	No	0	Detailed Clinical Notes , Mra/Ct-Angio/Angio Reports	Bar-Code Of Synthetic Graft , Detailed Discharge Summary , Detailed Operative Notes	No	No	Yes	No	No	7
1675	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	2832000004	Aorto Iliac / Aorto femoral bypass (Uni and Bi)-Aorto iliac bypass - U/L	99500	99500	94525	84575	Surgical	Not Reserved	No	No	0	Detailed Clinical Notes , Mra/Ct-Angio/Angio Reports	Bar-Code Of Synthetic Graft , Detailed Discharge Summary , Detailed Operative Notes	No	No	Yes	No	No	7
1676	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	2832000005	Aorto Iliac / Aorto femoral bypass (Uni and Bi)-Aorto femoral bypass - B/L	99500	99500	94525	84575	Surgical	Not Reserved	No	No	0	Detailed Clinical Notes , Mra/Ct-Angio/Angio Reports	Bar-Code Of Synthetic Graft , Detailed Discharge Summary , Detailed Operative Notes	No	No	Yes	No	No	7
1677	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	2832000006	Aorto Iliac / Aorto femoral bypass (Uni and Bi)-Aorto femoral bypass - U/L	99500	99500	94525	84575	Surgical	Not Reserved	No	No	0	Detailed Clinical Notes , Mra/Ct-Angio/Angio Reports	Bar-Code Of Synthetic Graft , Detailed Discharge Summary , Detailed Operative Notes	No	No	Yes	No	No	7
1678	Tertiary	Paediatric surgery - Phase 3	28410000016	Appendectomy-Lap.	11000	11000	10450	9350	Surgical	Not Reserved	No	No	0	Detailed Clinical Notes , Usg	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Intra Procedure Clinical Photograph Of Removed Appendix , Post Procedure Clinical Photograph	No	No	Yes	No	No	3
1679	Tertiary	General Surgery - Phase 3	28350000006	Appendectomy-Lap.	11000	11000	10450	9350	Surgical	Not Reserved	No	No	0	Detailed Clinical Notes , Usg	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Intra Procedure Clinical Photograph Of Removed Appendix , Post Procedure Clinical Photograph	No	No	Yes	No	No	3

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1680	Tertiary	General Surgery - Phase 3	2835000007	Appendectomy-Open	11000	11000	10450	9350	Surgical	Not Reserved	No	No	0	Detailed Clinical Notes , Usg	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Intra Procedure Clinical Photograph , Intra Procedure Clinical Photograph Of Removed Appendix	No	No	Yes	No	No	3
1681	Tertiary	Paediatric surgery - Phase 3	2841000017	Appendectomy-Open	11000	11000	10450	9350	Surgical	Not Reserved	No	No	0	Detailed Clinical Notes , Usg	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Intra Procedure Clinical Photograph , Intra Procedure Clinical Photograph Of Removed Appendix	No	No	Yes	No	No	3
1682	Tertiary	Paediatric surgery - Phase 3	2841000018	Appendicular Perforation	17500	17500	16625	14875	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , X-Ray Abdomen (Erect)/Usg	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Intra Procedure Clinical Photograph	No	No	Yes	No	No	5
1683	Tertiary	General Surgery - Phase 3	2835000008	Appendicular Perforation	17500	17500	16625	14875	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , X-Ray Abdomen (Erect)/Usg	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Intra Procedure Clinical Photograph	No	No	Yes	No	No	5
1684	Tertiary	Neurosurgery - Phase 3	2837000005	Arterio venous malformation (AVM) excision-Intracranial	50000	50000	47500	42500	Surgical	Not Reserved	No	No	0	Detailed Clinical Notes , Mra/Dsa	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure (CT) , Post Procedure Scar Photo	No	No	Yes	No	No	10
1685	Tertiary	Neurosurgery - Phase 3	2837000006	Arterio venous malformation (AVM) excision-Intraspinal	50000	50000	47500	42500	Surgical	Not Reserved	No	No	0	Detailed Clinical Notes , Mra/Dsa	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure (CT) , Post Procedure Scar Photo	No	No	Yes	No	No	10

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1686	Tertiary	Neurosurgery - Phase 3	28370000007	Arterio venous malformation (AVM) excision-Scalp	25000	25000	23750	21250	Surgical	Not Reserved	No	No	0	Detailed Clinical Notes , Mra/Dsa	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure (CT) , Post Procedure Scar Photo	No	No	Yes	No	No	5
1687	Tertiary	Surgical Oncology - Phase 3	28450000016	Arthrodesis-Foot	27000	27000	25650	22950	Surgical	Not Reserved	No	No	0	Clinical Photograph Of Affected Part , Detailed Clinical Notes , X-Ray (Ankle And Foot)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure (X-Ray) , Post Procedure Clinical Photograph	No	No	Yes	No	No	3
1688	Tertiary	Orthopaedics - Phase 3	28400000007	Arthrodesis-Foot	27000	27000	25650	22950	Surgical	Not Reserved	No	No	0	Clinical Photograph Of Affected Part , Detailed Clinical Notes , X-Ray (Ankle And Foot)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure (X-Ray) , Post Procedure Clinical Photograph	No	No	Yes	No	No	3
1689	Tertiary	Surgical Oncology - Phase 3	28450000017	Arthrodesis-Hand	27000	27000	25650	22950	Surgical	Not Reserved	Yes	No	0	Clinical Photograph Of Affected Part , Detailed Clinical Notes , X-Ray (Ankle And Foot)	Detailed Procedure/Operative Notes , Post Procedure (X-Ray) , Post Procedure Clinical Photograph	No	No	Yes	No	No	3
1690	Tertiary	Orthopaedics - Phase 3	28400000008	Arthrodesis-Hand	27000	27000	25650	22950	Surgical	Not Reserved	Yes	No	0	Clinical Photograph Of Affected Part , Detailed Clinical Notes , X-Ray (Ankle And Foot)	Detailed Procedure/Operative Notes , Post Procedure (X-Ray) , Post Procedure Clinical Photograph	No	No	Yes	No	No	3
1691	Tertiary	Urology - Phase 3	28460000009	Augmentation cystoplasty-Lap.	30000	30000	28500	25500	Surgical	Not Reserved	Yes	No	0	Clinical Notes Confirming The Indication For The Procedure , Cystogram/Cystoscopy , Ivp/Ct-Ivp/Mri	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra-Operative Photograph , Post Procedure Imaging	No	No	Yes	No	No	4

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1692	Tertiary	Paediatric surgery - Phase 3	28410000019	Augmentation cystoplasty-Lap.	30000	30000	28500	25500	Surgical	Not Reserved	Yes	No	0	Clinical Notes Confirming The Indication For The Procedure , Cystogram/Cystoscopy , Ivp/Ct-Ivp/Mri	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra-Operative Photograph , Post Procedure Imaging	No	No	Yes	No	No	4
1693	Tertiary	Urology - Phase 3	28460000010	Augmentation cystoplasty-Open	30000	30000	28500	25500	Surgical	Not Reserved	Yes	No	0	Clinical Notes Confirming The Indication For The Procedure , Cystogram/Cystoscopy , Ivp/Ct-Ivp/Mri	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra-Operative Photograph , Post Procedure Imaging	No	No	Yes	No	No	4
1694	Tertiary	Paediatric surgery - Phase 3	28410000020	Augmentation cystoplasty-Open	30000	30000	28500	25500	Surgical	Not Reserved	Yes	No	0	Clinical Notes Confirming The Indication For The Procedure , Cystogram/Cystoscopy , Ivp/Ct-Ivp/Mri	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra-Operative Photograph , Post Procedure Imaging	No	No	Yes	No	No	4
1695	Tertiary	Surgical Oncology - Phase 3	28450000018	Axillary Sampling / Sentinel Node Biopsy	16200	16200	15390	13770	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Fnac	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Photographs Of Surgical Site	No	No	Yes	No	No	3
1696	Tertiary	Surgical Oncology - Phase 3	28450000019	Axillary dissection	19800	19800	18810	16830	Surgical	Not Reserved	No	No	0	Cect/X-Ray (Chest) , Detailed Clinical Notes , Fnac/Biopsy	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Scar Photograph	No	No	Yes	No	No	3
1697	Tertiary	Cardiology - Phase 3	28310000002	Balloon Atrial Septostomy	24400	24400	23180	20740	Medical	Not Reserved	No	No	0	2-D Echo , Detailed Clinical Notes , Doppler Stills , Reports Showing The Transposition Of The Great Arteries (Tga) & Need Of Septostomy	Detailed Discharge Summary , Invoice Of Blade/Balloon Used , Post Procedure 2-D Echo With Report , Procedure/Operative Notes With Images	No	No	Yes	No	No	2

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1698	Tertiary	Cardiology - Phase 3	28310000003	Balloon Mitral Valvotomy	90700	90700	86165	77095	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Echo Reports & Stills	Detailed Discharge Summary , Invoice Of Blade/Balloon Used , Post Procedure 2-D Echo With Report , Procedure/Operative Notes With Images	No	No	Yes	No	No	2
1699	Tertiary	Interventional Neuroradiology - Phase 3	28490000001	Balloon test occlusion	70000	70000	66500	59500	Medical	Not Reserved	No	No	0	Ct/Mri/Dsa , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra Procedure Clinical Photograph	No	No	Yes	No	No	3
1700	Tertiary	Neo-natal care Packages - Phase 3	28510000003	Basic neonatal care package: Babies that can be managed by side of mother in postnatal ward without requiring admission in SNCU/NICU: • Any newborn needing feeding support • Babies requiring closer monitoring or short-term care for conditions like: o Birth asphyxia (need for positive pressure ventilation; no HIE) o Moderate jaundice requiring phototherapy o Large for dates (>97 percentile) Babies o Small for gestational age (less than 3rd centile) - Per day	500	500	475	425	Medical	Not Reserved	No	No	0	Detailed Clinical Notes , Fundoscope Reports/Stills Showing Extent Of Rop	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra Procedure Clinical Photograph	No	No	Yes	No	No	4
1701	Tertiary	Surgical Oncology - Phase 3	28450000020	Benign Soft Tissue Tumour - Excision	12000	12000	11400	10200	Surgical	Not Reserved	Yes	No	0	Clinical Notes With Planned Line Of Treatment , Histopathology (Hpe)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Photographs Of Surgical Site	No	No	Yes	No	No	3
1702	Tertiary	Surgical Oncology - Phase 3	28450000021	Bilateral Orchiectomy for hormone ablation	10000	10000	9500	8500	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Usg/Ct/Biopsy	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe)	No	No	Yes	No	Yes	1
1703	Tertiary	Urology - Phase 3	28460000012	Bilateral Orchiectomy for hormone ablation	10000	10000	9500	8500	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Usg/Ct/Biopsy	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe)	No	No	Yes	No	Yes	1

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1704	Tertiary	Surgical Oncology - Phase 3	2845000022	Bilateral salpingoophorectomy-Lap.	21000	21000	19950	17850	Surgical	Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Histopathology (Hpe)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Photographs Of Surgical Site	No	No	Yes	No	No	5
1705	Tertiary	Obstetrics & Gynaecology - Phase 3	2838000001	Bilateral salpingoophorectomy-Lap.	21000	21000	19950	17850	Surgical	Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Histopathology (Hpe)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Photographs Of Surgical Site	No	No	Yes	No	No	5
1706	Tertiary	Surgical Oncology - Phase 3	2845000023	Bilateral salpingoophorectomy-Open	21000	21000	19950	17850	Surgical	Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Histopathology (Hpe)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Photographs Of Surgical Site	No	No	Yes	No	No	5
1707	Tertiary	Obstetrics & Gynaecology - Phase 3	2838000002	Bilateral salpingoophorectomy-Open	21000	21000	19950	17850	Surgical	Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Histopathology (Hpe)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Photographs Of Surgical Site	No	No	Yes	No	No	5
1708	Tertiary	General Surgery - Phase 3	2835000009	Biopsy-Cervical (Neck)	1500	1500	1425	1275	Surgical	Not Reserved	No	No	0	Detailed Clinical Notes , Supporting Investigations	Detailed Discharge Summary , Histopathology (Hpe) , Pic Of Specimen	No	No	Yes	No	Yes	1
1709	Tertiary	Obstetrics & Gynaecology - Phase 3	2838000003	Biopsy-Cervical (Neck)	1500	1500	1425	1275	Surgical	Not Reserved	No	No	0	Detailed Clinical Notes , Supporting Investigations	Detailed Discharge Summary , Histopathology (Hpe) , Pic Of Specimen	No	No	Yes	No	Yes	1

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1710	Tertiary	Paediatric surgery - Phase 3	28410000021	Biopsy-Cervical (Neck)	1500	1500	1425	1275	Surgical	Not Reserved	No	No	0	Detailed Clinical Notes , Supporting Investigations	Detailed Discharge Summary , Histopathology (Hpe) , Pic Of Specimen	No	No	Yes	No	Yes	1
1711	Tertiary	Paediatric surgery - Phase 3	28410000022	Biopsy-Cervix Cancer screening (PAP + Colposcopy)	1000	1000	950	850	Surgical	Not Reserved	No	No	0	Detailed Clinical Notes , Supporting Investigations	Detailed Discharge Summary , Histopathology (Hpe) , Pic Of Specimen	No	No	Yes	No	Yes	1
1712	Tertiary	General Surgery - Phase 3	28350000010	Biopsy-Cervix Cancer screening (PAP + Colposcopy)	1000	1000	950	850	Surgical	Not Reserved	No	No	0	Detailed Clinical Notes , Supporting Investigations	Detailed Discharge Summary , Histopathology (Hpe) , Pic Of Specimen	No	No	Yes	No	Yes	1
1713	Tertiary	Obstetrics & Gynaecology - Phase 3	28380000004	Biopsy-Cervix Cancer screening (PAP + Colposcopy)	1000	1000	950	850	Surgical	Not Reserved	No	No	0	Detailed Clinical Notes , Supporting Investigations	Detailed Discharge Summary , Histopathology (Hpe) , Pic Of Specimen	No	No	Yes	No	Yes	1
1714	Tertiary	General Surgery - Phase 3	28350000011	Biopsy-Endometrial Aspiration	2000	2000	1900	1700	Surgical	Not Reserved	No	No	0	Detailed Clinical Notes , Supporting Investigations	Detailed Discharge Summary , Histopathology (Hpe) , Pic Of Specimen	No	No	Yes	No	Yes	1
1715	Tertiary	Paediatric surgery - Phase 3	28410000023	Biopsy-Endometrial Aspiration	2000	2000	1900	1700	Surgical	Not Reserved	No	No	0	Detailed Clinical Notes , Supporting Investigations	Detailed Discharge Summary , Histopathology (Hpe) , Pic Of Specimen	No	No	Yes	No	Yes	1

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1716	Tertiary	Obstetrics & Gynaecology - Phase 3	2838000005	Biopsy-Endometrial Aspiration	2000	2000	1900	1700	Surgical	Not Reserved	No	No	0	Detailed Clinical Notes , Supporting Investigations	Detailed Discharge Summary , Histopathology (Hpe) , Pic Of Specimen	No	No	Yes	No	Yes	1
1717	Tertiary	Paediatric surgery - Phase 3	2841000024	Biopsy-Lymph Node	5000	5000	4750	4250	Surgical	Not Reserved	No	No	0	Clinical Photograph (Enlarged Lymph Nodes)/Fnac Report , Detailed Clinical Notes	Detailed Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph	No	No	Yes	No	Yes	1
1718	Tertiary	General Surgery - Phase 3	2835000012	Biopsy-Lymph Node	5000	5000	4750	4250	Surgical	Not Reserved	No	No	0	Clinical Photograph (Enlarged Lymph Nodes)/Fnac Report , Detailed Clinical Notes	Detailed Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph	No	No	Yes	No	Yes	1
1719	Tertiary	Obstetrics & Gynaecology - Phase 3	2838000006	Biopsy-Lymph Node	5000	5000	4750	4250	Surgical	Not Reserved	No	No	0	Clinical Photograph (Enlarged Lymph Nodes)/Fnac Report , Detailed Clinical Notes	Detailed Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph	No	No	Yes	No	Yes	1
1720	Tertiary	Obstetrics & Gynaecology - Phase 3	2838000007	Biopsy-Vulval	1500	1500	1425	1275	Surgical	Not Reserved	No	No	0	Detailed Clinical Notes , Supporting Investigations	Detailed Discharge Summary , Histopathology (Hpe) , Pic Of Specimen	No	No	Yes	No	Yes	1
1721	Tertiary	Paediatric surgery - Phase 3	2841000025	Biopsy-Vulval	1500	1500	1425	1275	Surgical	Not Reserved	No	No	0	Detailed Clinical Notes , Supporting Investigations	Detailed Discharge Summary , Histopathology (Hpe) , Pic Of Specimen	No	No	Yes	No	Yes	1

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1722	Tertiary	General Surgery - Phase 3	2835000013	Biopsy-Vulval	1500	1500	1425	1275	Surgical	Not Reserved	No	No	0	Detailed Clinical Notes , Supporting Investigations	Detailed Discharge Summary , Histopathology (Hpe) , Pic Of Specimen	No	No	Yes	No	Yes	1
1723	Tertiary	Urology - Phase 3	2846000013	Bladder Diverticulectomy - Follow Up	1000	1000	950	850	Medical	Not Reserved	No	No	0	Discharge Summary	Usg	No	No	No	Yes	No	Not Applicable(NA)
1724	Tertiary	Urology - Phase 3	2846000014	Bladder Neck incision - Endoscopic	15000	15000	14250	12750	Surgical	Not Reserved	Yes	No	0	Uroflowmetry , Usg,Kub/Pvr	Endoscopic Photograph	No	No	Yes	No	Yes	1
1725	Tertiary	Urology - Phase 3	2846000015	Bladder injury repair (with or without urethral injury)	23000	23000	21850	19550	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Fir/Mic , Usg/Ct/Mri/Cystogram	Detailed Discharge Summary , Detailed Procedure/Operative Notes	No	No	Yes	No	No	3
1726	Tertiary	Paediatric surgery - Phase 3	2841000026	Bladder injury repair (with or without urethral injury)	23000	23000	21850	19550	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Fir/Mic , Usg/Ct/Mri/Cystogram	Detailed Discharge Summary , Detailed Procedure/Operative Notes	No	No	Yes	No	No	3
1727	Tertiary	Urology - Phase 3	2846000016	Bladder injury repair with colostomy (with or without urethral injury)	27500	27500	26125	23375	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Fir/Mic , Usg/Ct/Mri/Cystogram	Detailed Discharge Summary Of Both Surgeries , Detailed Procedure/Operative Notes , Post Procedure Pic Of Colostomy	No	No	Yes	No	No	4

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1728	Tertiary	Paediatric surgery - Phase 3	28410000027	Bladder injury repair with colostomy (with or without urethral injury)	27500	27500	26125	23375	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Fir/Mc , Usg/Ct/Mri/Cystogram	Detailed Discharge Summary Of Both Surgeries , Detailed Procedure/Operative Notes , Post Procedure Pic Of Colostomy	No	No	Yes	No	No	4
1729	Tertiary	Urology - Phase 3	28460000017	Boari flap for ureteric stricture-Lap.	30000	30000	28500	25500	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Ivp/Ct Ivp/Mcu Confirming The Stricture Longer Than 5 Cms	Detailed Discharge Summary , Detailed Procedure/Operative Notes Including Details Of Omental Wrapping , Intra Procedure Photograph	No	No	Yes	No	No	2
1730	Tertiary	Urology - Phase 3	28460000018	Boari flap for ureteric stricture-Open	30000	30000	28500	25500	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Ivp/Ct Ivp/Mcu Confirming The Stricture Longer Than 5 Cms	Detailed Discharge Summary , Detailed Procedure/Operative Notes Including Details Of Omental Wrapping , Intra Procedure Photograph	No	No	Yes	No	No	3
1731	Tertiary	Orthopaedics - Phase 3	28400000009	Bone Tumour Excision (malignant) including GCT + Joint replacement (depending upon type of joint and implant)	177000	177000	168150	150450	Surgical	Not Reserved	No	No	0	Biopsy , Clinical Photograph Of Affected Part , Detailed Clinical Notes , X-Ray/Mri (Affected Part)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Hpe Of Excised Tissue , Invoice/Bar-Code Of Implant , Post Procedure (X-Ray) , Post Procedure X-Ray Showing Implant	No	No	Yes	No	No	7
1732	Tertiary	Surgical Oncology - Phase 3	28450000024	Bone Tumour Excision + reconstruction	40000	40000	38000	34000	Surgical	Not Reserved	No	No	0	Biopsy , Clinical Photograph Of Affected Part , Detailed Clinical Notes , X-Ray/Mri (Affected Part)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Invoice/Bar-Code Of Implant , Post Procedure (X-Ray) , Post Procedure Clinical Photograph	No	No	Yes	No	No	6
1733	Tertiary	Orthopaedics - Phase 3	28400000010	Bone Tumour Excision + reconstruction	40000	40000	38000	34000	Surgical	Not Reserved	No	No	0	Biopsy , Clinical Photograph Of Affected Part , Detailed Clinical Notes , X-Ray/Mri (Affected Part)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Invoice/Bar-Code Of Implant , Post Procedure (X-Ray) , Post Procedure Clinical Photograph	No	No	Yes	No	No	6

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1734	Tertiary	Surgical Oncology - Phase 3	28450000025	Bone tumors / soft tissue sarcomas: surgery	30000	30000	28500	25500	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Histopathology (Hpe)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Photographs Of Surgical Site	No	No	Yes	No	No	6
1735	Tertiary	Orthopaedics - Phase 3	28400000011	Bone tumors / soft tissue sarcomas: surgery	30000	30000	28500	25500	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Histopathology (Hpe)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Photographs Of Surgical Site	No	No	Yes	No	No	6
1736	Tertiary	Neurosurgery - Phase 3	28370000008	Brachial Plexus – Repair	27000	27000	25650	22950	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Mri	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Scar Photo	No	No	Yes	No	No	7
1737	Tertiary	Radiation Oncology - Phase 3	28440000041	Brachytherapy High Dose Radiation-CVS	3500	3500	3325	2975	Medical	Not Reserved	No	No	0	Clinical Note With Details Of Rt Treatment Plan , Histopathology (Hpe)	Detailed Discharge Summary (With Rt Treatment And Doses Given)	No	No	Yes	No	Yes	1
1738	Tertiary	Radiation Oncology - Phase 3	28440000042	Brachytherapy High Dose Radiation-Endobiliary	3500	3500	3325	2975	Medical	Not Reserved	No	No	0	Clinical Note With Details Of Rt Treatment Plan , Histopathology (Hpe)	Detailed Discharge Summary (With Rt Treatment And Doses Given)	No	No	Yes	No	Yes	1
1739	Tertiary	Radiation Oncology - Phase 3	28440000043	Brachytherapy High Dose Radiation-Endobronchial	3500	3500	3325	2975	Medical	Not Reserved	No	No	0	Clinical Note With Details Of Rt Treatment Plan , Histopathology (Hpe)	Detailed Discharge Summary (With Rt Treatment And Doses Given)	No	No	Yes	No	Yes	1

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1740	Tertiary	Radiation Oncology - Phase 3	2844000044	Brachytherapy High Dose Radiation-Intracavitary	3500	3500	3325	2975	Medical	Not Reserved	No	No	0	Clinical Note With Details Of Rt Treatment Plan , Histopathology (Hpe)	Detailed Discharge Summary (With Rt Treatment And Doses Given)	No	No	Yes	No	Yes	1
1741	Tertiary	Radiation Oncology - Phase 3	2844000045	Brachytherapy High Dose Radiation-Intraluminal	3500	3500	3325	2975	Medical	Not Reserved	No	No	0	Clinical Note With Details Of Rt Treatment Plan , Histopathology (Hpe)	Detailed Discharge Summary (With Rt Treatment And Doses Given)	No	No	Yes	No	Yes	1
1742	Tertiary	Neurosurgery - Phase 3	2837000009	Brain Biopsy	15000	15000	14250	12750	Surgical	Not Reserved	No	No	0	Ct/Mri , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Scar Photo	No	No	Yes	No	No	3
1743	Tertiary	General Surgery - Phase 3	2835000014	Breast Lump Excision (Benign)-General Anesthesia	12000	12000	11400	10200	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Sono Mammogram/Mamography Showing Breast Lump/Fnac	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Intra-Op Clinical Photograph	No	No	Yes	No	No	1
1744	Tertiary	Surgical Oncology - Phase 3	2845000026	Breast Lump Excision (Benign)-General Anesthesia	12000	12000	11400	10200	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Sono Mammogram/Mamography Showing Breast Lump/Fnac	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Intra-Op Clinical Photograph	No	No	Yes	No	No	1
1745	Tertiary	Surgical Oncology - Phase 3	2845000027	Breast Lump Excision (Benign)-Local Anesthesia	6000	6000	5700	5100	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Sono Mammogram/Mamography Showing Breast Lump/Fnac	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Intra-Op Clinical Photograph	No	No	Yes	No	No	1

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College& Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1746	Tertiary	General Surgery - Phase 3	2835000015	Breast Lump Excision (Benign)-Local Anesthesia	6000	6000	5700	5100	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Sono Mammogram/Mamography Showing Breast Lump/Fnac	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Intra-Op Clinical Photograph	No	No	Yes	No	No	1
1747	Tertiary	Surgical Oncology - Phase 3	2845000028	Breast conserving surgery (lumpectomy + axillary surgery)	22800	22800	21660	19380	Surgical	Not Reserved	No	No	0	Ct/Mri , Detailed Clinical Notes , Fnac/Biopsy , Mammography	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe)	No	No	Yes	No	No	3
1748	Tertiary	Surgical Oncology - Phase 3	2845000029	Breast conserving surgery with Oncoplasty	24600	24600	23370	20910	Surgical	Not Reserved	No	No	0	Ct/Mri , Detailed Clinical Notes , Fnac/Biopsy , Mammography	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe)	No	No	Yes	No	No	4
1749	Tertiary	Cardiology - Phase 3	28310000004	Bronchial artery Embolisation (for Haemoptysis)-Bronchial artery Embolisation (for Haemoptysis)	32800	32800	31160	27880	Medical	Not Reserved	No	No	0	Ct-Pulmonary Angiogram , Detailed Clinical Notes , Supporting Investigations , X-Ray (Chest)/Hrct (Chest)	Angiography Bronchial Artery After Procedure , Detailed Discharge Summary , Detailed Procedure/Operative Notes , Hb Investigation , Serum Creatinine	No	No	Yes	No	No	3
1750	Tertiary	Neurosurgery - Phase 3	28370000010	Burr hole surgery with chronic Sub Dural Haematoma (including pre and post Op. CT)	20000	20000	19000	17000	Surgical	Not Reserved	Yes	No	0	Ct/Mri , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure (CT) , Post Procedure Scar Photo	No	No	Yes	No	No	2
1751	Tertiary	Neurosurgery - Phase 3	28370000011	Burr hole surgery-Burr hole (including pre and post Op. CT)	7000	7000	6650	5950	Surgical	Not Reserved	Yes	No	0	Ct/Mri , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure (CT) , Post Procedure Scar Photo	No	No	Yes	No	No	2

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1752	Tertiary	General Surgery - Phase 3	28350000016	Bypass - Inoperable Pancreas	23500	23500	22325	19975	Surgical	Not Reserved	Yes	No	0	Biopsy , Clinical Documents , Ercp , Mrcp	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Intra-Op Clinical Photograph	No	No	Yes	No	No	7
1753	Tertiary	Surgical Oncology - Phase 3	28450000030	Bypass - Inoperable Pancreas	23500	23500	22325	19975	Surgical	Not Reserved	Yes	No	0	Biopsy , Clinical Documents , Ercp , Mrcp	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Intra-Op Clinical Photograph	No	No	Yes	No	No	7
1754	Tertiary	Medical Oncology - Phase 3	28360000001	CHEMOTHERAPY COMPLICATIONS - TLS- Chemotherapy Complications - TLS-Cycle	24000	24000	22800	20400	Medical	Not Reserved	No	No	0	Blood Phosphate Levels , Bun , Cbc , Lt , Serum Electrolytes , Sr Uric Acid	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Tranfusion Slips	No	No	Yes	No	Yes	1
1755	Tertiary	Medical Oncology - Phase 3	28360000002	CT for Anal Cancer-S FU + Mitomycin C	10500	10500	9975	8925	Medical	Not Reserved	No	No	0	Cbc , Cea , Cect-Thorax/Abdomen , Histopathology (Hpe) , Lt , Mri-Pelvis , Rbs , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Tranfusion Slips	No	No	Yes	No	Yes	1
1756	Tertiary	Medical Oncology - Phase 3	28360000003	CT for Anal Cancer-Capecitabine + Mitomycin C-Duration + Cycle	13800	13800	13110	11730	Medical	Not Reserved	No	No	0	Cbc , Cea , Cect-Thorax/Abdomen , Histopathology (Hpe) , Lt , Mri-Pelvis , Rbs , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Tranfusion Slips	No	No	Yes	No	Yes	1
1757	Tertiary	Medical Oncology - Phase 3	28360000004	CT for Anal Cancer-Carboplatin + Paclitaxel Cycle	14900	14900	14155	12665	Medical	Not Reserved	No	No	0	Cbc , Cea , Cect-Thorax/Abdomen And Pelvis , Histopathology (Hpe) , Lt , Rbs , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Tranfusion Slips	No	No	Yes	No	Yes	1

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1758	Tertiary	Medical Oncology - Phase 3	28360000005	CT for Anal Cancer-Cisplatin + 5 FU-Cycle	7600	7600	7220	6460	Medical	Not Reserved	No	No	0	Cbc , Cea , Cect-Thorax/ Abdomen And Pelvis , Histopathology (Hpe) , Lft , Rbs , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1759	Tertiary	Medical Oncology - Phase 3	28360000006	CT for Anal Cancer-Cisplatin + Paclitaxel-Cycle	13300	13300	12635	11305	Medical	Not Reserved	No	No	0	Cbc , Cea , Cect-Thorax/ Abdomen And Pelvis , Histopathology (Hpe) , Lft , Rbs , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1760	Tertiary	Medical Oncology - Phase 3	28360000007	CT for Burkitt's NHL-Codox - M - IVAC / GMALL / BFM / Hyper CVAD-Cycle	34500	34500	32775	29325	Medical	Not Reserved	No	No	0	2-D Echo , Biochemistry , Biopsy/Fluid Flow Cytometry , Bone Marrow Studies , Cbc , Ecg , Pet-Ct Or Cect-Chest Abdomen And Pelvis	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1761	Tertiary	Medical Oncology - Phase 3	28360000008	CT for CA Brain-Temozolamide-Cycle	13000	13000	12350	11050	Medical	Not Reserved	No	No	0	Cbc , Histopathology (Hpe) , Lft , Mri-Brain , Rbs , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1762	Tertiary	Medical Oncology - Phase 3	28360000009	CT for CA Brain-Temozolamide-Cycle	67600	67600	64220	57460	Medical	Not Reserved	No	No	0	Cbc , Histopathology (Hpe) , Lft , Mri-Brain , Rbs , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1763	Tertiary	Medical Oncology - Phase 3	28360000010	CT for CA Breast-Capecitabine-Cycle	7400	7400	7030	6290	Medical	Not Reserved	No	No	0	Biopsy Report Or Surgical Pathology Report (Modified Radical Mastectomy Or Breast Conservation Surgery) , Cbc , Cxr Pa View/Cect-Chest/ Abdomen And Pelvis For Metastatic Disease , Lft , Mammography , Rft , Usg- Abdomen & Pelvis	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1764	Tertiary	Medical Oncology - Phase 3	2836000011	CT for CA Breast-Carbolatin + Gemcitabine-Cycle	13900	13900	13205	11815	Medical	Not Reserved	No	No	0	Biopsy Report Or Surgical Pathology Report (Modified Radical Mastectomy Or Breast Conservation Surgery) , Cbc , Cxr Pa View/Cect-Chest/ Abdomen And Pelvis For Metastatic Disease , Lft , Mammography , Rft , Usg- Abdomen & Pelvis	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Tranfusion Slips	No	No	Yes	No	Yes	1
1765	Tertiary	Medical Oncology - Phase 3	2836000012	CT for CA Breast-Carbolatin + Paclitaxel-Cycle	14900	14900	14155	12665	Medical	Not Reserved	No	No	0	Biopsy Report Or Surgical Pathology Report (Modified Radical Mastectomy Or Breast Conservation Surgery) , Cbc , Cxr Pa View/Cect-Chest/ Abdomen And Pelvis For Metastatic Disease , Lft , Mammography , Rft , Usg- Abdomen & Pelvis	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Tranfusion Slips	No	No	Yes	No	Yes	1
1766	Tertiary	Medical Oncology - Phase 3	2836000013	CT for CA Breast-Cyclophosphamide + Adriamycin-Cycle	4500	4500	4275	3825	Medical	Not Reserved	No	No	0	2-D Echo , Biopsy Report Or Surgical Pathology Report (Modified Radical Mastectomy Or Breast Conservation Surgery) , Cbc , Cxr Pa View/Cect-Chest/ Abdomen And Pelvis For Metastatic Disease , Ecg , Fish , Her-2 Neu/ Ihc Report , Lft , Rft , Usg-Abdomen & Pelvis	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Tranfusion Slips	No	No	Yes	No	Yes	1
1767	Tertiary	Medical Oncology - Phase 3	2836000014	CT for CA Breast-Cyclophosphamide + Epirubicin-Cycle	7200	7200	6840	6120	Medical	Not Reserved	No	No	0	2-D Echo , Biopsy Report Or Surgical Pathology Report (Modified Radical Mastectomy Or Breast Conservation Surgery) , Cbc , Cxr Pa View/Cect-Chest/ Abdomen And Pelvis For Metastatic Disease , Ecg , Lft , Rft , Usg-Abdomen & Pelvis	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Tranfusion Slips	No	No	Yes	No	Yes	1
1768	Tertiary	Medical Oncology - Phase 3	2836000015	CT for CA Breast-Cyclophosphamide + Methotrexate + 5 - FU-Cycle	3200	3200	3040	2720	Medical	Not Reserved	No	No	0	2-D Echo , Biopsy Report Or Surgical Pathology Report (Modified Radical Mastectomy Or Breast Conservation Surgery) , Cbc , Cxr Pa View/Cect-Chest/ Abdomen And Pelvis For Metastatic Disease , Ecg , Lft , Rft , Usg-Abdomen & Pelvis	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Tranfusion Slips	No	No	Yes	No	Yes	1
1769	Tertiary	Medical Oncology - Phase 3	2836000016	CT for CA Breast-Docetaxel + Cyclophosphamide-Cycle	19800	19800	18810	16830	Medical	Not Reserved	No	No	0	2-D Echo , Biopsy Report Or Surgical Pathology Report (Modified Radical Mastectomy Or Breast Conservation Surgery) , Cbc , Cxr Pa View/Cect-Chest/ Abdomen And Pelvis For Metastatic Disease , Ecg , Lft , Rft , Usg-Abdomen & Pelvis	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Tranfusion Slips	No	No	Yes	No	Yes	1

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1770	Tertiary	Medical Oncology - Phase 3	2836000017	CT for CA Breast-Exemestane-Duration	10400	10400	9880	8840	Medical	Not Reserved	No	No	0	Biopsy Report Or Surgical Pathology Report (Modified Radical Mastectomy Or Breast Conservation Surgery) , Cbc , Cect-Abdomen And Pelvis , Cxr Pa View/Cect Chest , Er/Pr-Positive , Lft , Mammography , Rft , Usg-Abdomen & Pelvis	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1771	Tertiary	Medical Oncology - Phase 3	2836000018	CT for CA Breast-Fulvestrant-Duration	11000	11000	10450	9350	Medical	Not Reserved	No	No	0	Biopsy Report Or Surgical Pathology Report (Modified Radical Mastectomy Or Breast Conservation Surgery) , Cbc , Cxr Pa View/Cect Chest/Abdomen And Pelvis , Er-Positive , Lft , Mammography , Pr-Positive , Rft , Usg-Abdomen & Pelvis	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1772	Tertiary	Medical Oncology - Phase 3	2836000019	CT for CA Breast-Letrozole-Duration + Cycle	3900	3900	3705	3315	Medical	Not Reserved	No	No	0	Biopsy Report Or Surgical Pathology Report (Modified Radical Mastectomy Or Breast Conservation Surgery) , Cbc , Cxr Pa View/Cect-Chest/Abdomen And Pelvis For Metastatic Disease , Er-Positive , Lft , Mammography , Pr-Positive , Rft , Usg-Abdomen & Pelvis	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1773	Tertiary	Medical Oncology - Phase 3	2836000020	CT for CA Breast-Paclitaxel-Duration + Cycle	11800	11800	11210	10030	Medical	Not Reserved	No	No	0	Biopsy Report Or Surgical Pathology Report (Modified Radical Mastectomy Or Breast Conservation Surgery) , Cbc , Cxr Pa View/Cect-Chest/Abdomen And Pelvis , Lft , Mammography , Rft , Usg-Abdomen & Pelvis	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1774	Tertiary	Medical Oncology - Phase 3	2836000021	CT for CA Breast-Tamoxifen-Duration + Cycle	1200	1200	1140	1020	Medical	Not Reserved	No	No	0	Biopsy Report Or Surgical Pathology Report (Modified Radical Mastectomy Or Breast Conservation Surgery) , Cbc , Cxr Pa View/Cect-Chest/Abdomen And Pelvis For Metastatic Disease , Er-Positive , Lft , Mammography , Pr-Positive , Rft , Usg-Abdomen & Pelvis	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1775	Tertiary	Medical Oncology - Phase 3	2836000022	CT for CA Breast-Trastuzumab-Duration + Cycle	21200	21200	20140	18020	Medical	Not Reserved	No	No	0	2-D Echo , Biopsy Report Or Surgical Pathology Report (Modified Radical Mastectomy Or Breast Conservation Surgery) , Cbc , Cxr Pa View/Cect-Chest/Abdomen And Pelvis For Metastatic Disease , Ecg , Fish , Her-2 Neu/ Ihc Report , Lft , Rft , Usg-Abdomen & Pelvis	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1776	Tertiary	Medical Oncology - Phase 3	28360000023	CT for CA Breast-Weekly Paclitaxel for Adjuvant Therapy-Duration + Cycle	5800	5800	5510	4930	Medical	Not Reserved	No	No	0	2-D Echo , Biopsy Report Or Surgical Pathology Report (Modified Radical Mastectomy Or Breast Conservation Surgery) , Cbc , Cxr Pa View/Cect-Chest/ Abdomen And Pelvis For Metastatic Disease , Ecg , Lft , Rft , Usg-Abdomen & Pelvis	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1777	Tertiary	Medical Oncology - Phase 3	28360000024	CT for CA Breast-Weekly Paclitaxel in metastatic setting-Duration + Cycle	5800	5800	5510	4930	Medical	Not Reserved	No	No	0	2-D Echo , Biopsy Report Or Surgical Pathology Report (Modified Radical Mastectomy Or Breast Conservation Surgery) , Cbc , Cxr Pa View/Cect-Chest/ Abdomen And Pelvis For Metastatic Disease , Ecg , Lft , Rft , Usg-Abdomen & Pelvis	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1778	Tertiary	Medical Oncology - Phase 3	28360000025	CT for CA Head & Neck-Carboplatin + Gemcitabine-Duration + Cycle	14300	14300	13585	12155	Medical	Not Reserved	No	No	0	Cbc , Histopathology- (Squamous Carcinoma/Nasopharyngeal Carcinoma/Salivary Gland) , Lft , Rbs , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1779	Tertiary	Medical Oncology - Phase 3	28360000026	CT for CA Head & Neck-Carboplatin-Duration + Cycle	2400	2400	2280	2040	Medical	Not Reserved	No	No	0	Cbc , Cect/Mri-Face & Neck , Histopathology (Hpe) , Lft , Rbs , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1780	Tertiary	Medical Oncology - Phase 3	28360000027	CT for CA Head & Neck-Cisplatin + Docetaxel-Cycle	12400	12400	11780	10540	Medical	Not Reserved	No	No	0	Cbc , Cect/Mri-Face & Neck , Histopathology (Hpe) , Lft , Pure Tone Audiometry , Rbs , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1781	Tertiary	Medical Oncology - Phase 3	28360000029	CT for CA Head & Neck-Cisplatin-Duration + Cycle	9800	9800	9310	8330	Medical	Not Reserved	No	No	0	Cbc , Cect/Mri-Face & Neck , Histopathology (Hpe) , Lft , Rbs , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1782	Tertiary	Medical Oncology - Phase 3	28360000028	CT for CA Head & Neck-Cisplatin-Duration + Cycle	2200	2200	2090	1870	Medical	Not Reserved	No	No	0	Cbc , Cect/Mri-Face & Neck , Histopathology (Hpe) , Lft , Pure Tone Audiometry , Rbs , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1783	Tertiary	Medical Oncology - Phase 3	28360000030	CT for CA Head & Neck-Docetaxel + Cisplatin + 5 FU-Cycle	16500	16500	15675	14025	Medical	Not Reserved	No	No	0	Cbc , Histopathology-(Squamous Carcinoma/Nasopharyngeal Carcinoma/Salivary Gland) , Lft , Rbs , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1784	Tertiary	Medical Oncology - Phase 3	28360000032	CT for CA Head & Neck-Docetaxel-Duration + Cycle	15000	15000	14250	12750	Medical	Not Reserved	No	No	0	Cbc , Cect/Mri-Face & Neck , Histopathology (Hpe) , Lft , Rbs , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1785	Tertiary	Medical Oncology - Phase 3	28360000031	CT for CA Head & Neck-Docetaxel-Duration + Cycle	14400	14400	13680	12240	Medical	Not Reserved	No	No	0	Cbc , Histopathology-(Squamous Carcinoma/Nasopharyngeal Carcinoma/Salivary Gland) , Lft , Rbs , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1786	Tertiary	Medical Oncology - Phase 3	28360000033	CT for CA Head & Neck-Etoposide + Carboplatin-Duration + Cycle	7100	7100	6745	6035	Medical	Not Reserved	No	No	0	Cbc , Cect/Mri-Face & Neck , Histopathology (Hpe) , Lft , Rbs , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1787	Tertiary	Medical Oncology - Phase 3	28360000034	CT for CA Head & Neck-Etoposide + Cisplatin-Duration + Cycle	9200	9200	8740	7820	Medical	Not Reserved	No	No	0	Cbc , Cect/Mri-Face & Neck , Histopathology (Hpe) , Lft , Rbs , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1788	Tertiary	Medical Oncology - Phase 3	28360000035	CT for CA Head & Neck-Gemcitabine + Cisplatin-Duration + Cycle	11100	11100	10545	9435	Medical	Not Reserved	No	No	0	Cbc , Histopathology-(Squamous Carcinoma/Nasopharyngeal Carcinoma/Salivary Gland) , Lft , Rbs , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1789	Tertiary	Medical Oncology - Phase 3	28360000036	CT for CA Head & Neck-Gemcitabine-Duration + Cycle	9200	9200	8740	7820	Medical	Not Reserved	No	No	0	Cbc , Histopathology-(Squamous Carcinoma/Nasopharyngeal Carcinoma/Salivary Gland) , Lft , Rbs , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1790	Tertiary	Medical Oncology - Phase 3	28360000038	CT for CA Head & Neck-Paclitaxel + Carboplatin-Duration + Cycle	7700	7700	7315	6545	Medical	Not Reserved	No	No	0	Cbc , Histopathology-(Squamous Carcinoma/Nasopharyngeal Carcinoma/Salivary Gland) , Lft , Rbs , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1791	Tertiary	Medical Oncology - Phase 3	28360000037	CT for CA Head & Neck-Paclitaxel + Carboplatin-Duration + Cycle	15100	15100	14345	12835	Medical	Not Reserved	No	No	0	Cbc , Histopathology-(Squamous Carcinoma/Nasopharyngeal Carcinoma/Salivary Gland) , Lft , Rbs , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1792	Tertiary	Medical Oncology - Phase 3	28360000040	CT for CA Head & Neck-Paclitaxel-Duration + Cycle	5700	5700	5415	4845	Medical	Not Reserved	No	No	0	Cbc , Histopathology-(Squamous Carcinoma/Nasopharyngeal Carcinoma/Salivary Gland) , Lft , Rbs , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1793	Tertiary	Medical Oncology - Phase 3	28360000039	CT for CA Head & Neck-Paclitaxel-Duration + Cycle	12200	12200	11590	10370	Medical	Not Reserved	No	No	0	Cbc , Histopathology-(Squamous Carcinoma/Nasopharyngeal Carcinoma/Salivary Gland) , Lft , Rbs , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1794	Tertiary	Medical Oncology - Phase 3	2836000042	CT for CA Lung-Docetaxel-Duration + Cycle	14600	14600	13870	12410	Medical	Not Reserved	No	No	0	Cbc , Cect -Thorax/ Abdomen/Pelvis , Histopathology (Hpe) , Lft , Rbs , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1795	Tertiary	Medical Oncology - Phase 3	2836000041	CT for CA Lung-Docetaxel-Duration + Cycle	16200	16200	15390	13770	Medical	Not Reserved	No	No	0	Cbc , Cect -Thorax/ Abdomen/Pelvis , Lft , Rbs , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1796	Tertiary	Medical Oncology - Phase 3	2836000043	CT for CA Lung-Erlotinib-Duration	13000	13000	12350	11050	Medical	Not Reserved	No	No	0	Cbc , Cect -Thorax/ Abdomen/Pelvis , Egfr Mutation Positive , Lft , Rbs , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1797	Tertiary	Medical Oncology - Phase 3	2836000044	CT for CA Lung-Etoposide + Carboplatin-Duration + Cycle	7100	7100	6745	6035	Medical	Not Reserved	No	No	0	Cbc , Cect -Thorax/ Abdomen/Pelvis , Histopathology (Hpe) , Lft , Rbs , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1798	Tertiary	Medical Oncology - Phase 3	2836000045	CT for CA Lung-Etoposide + Cisplatin-Duration + Cycle	5500	5500	5225	4675	Medical	Not Reserved	No	No	0	Cbc , Cect -Thorax/ Abdomen/Pelvis , Histopathology (Hpe) , Lft , Rbs , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1799	Tertiary	Medical Oncology - Phase 3	2836000046	CT for CA Lung-Gefitinib-Duration	11000	11000	10450	9350	Medical	Not Reserved	No	No	0	Cbc , Cect -Thorax/ Abdomen/Pelvis , Egfr Mutation Positive , Lft , Rbs , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1800	Tertiary	Medical Oncology - Phase 3	28360000047	CT for CA Lung-Gemcitabine + Carboplatin-Duration + Cycle	14300	14300	13585	12155	Medical	Not Reserved	No	No	0	Cbc , Cect -Thorax/ Abdomen/Pelvis , Histopathology (Hpe) , Lft , Rbs , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1801	Tertiary	Medical Oncology - Phase 3	28360000048	CT for CA Lung-Gemcitabine + Cisplatin-Duration + Cycle	11100	11100	10545	9435	Medical	Not Reserved	No	No	0	Cbc , Cect -Thorax/ Abdomen/Pelvis , Histopathology (Hpe) , Lft , Rbs , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1802	Tertiary	Medical Oncology - Phase 3	28360000049	CT for CA Lung-Gemcitabine-Duration + Cycle	8900	8900	8455	7565	Medical	Not Reserved	No	No	0	Cbc , Cect -Thorax/ Abdomen/Pelvis , Histopathology (Hpe) , Lft , Rbs , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1803	Tertiary	Medical Oncology - Phase 3	28360000051	CT for CA Lung-Paclitaxel + Carboplatin-Duration + Cycle	7900	7900	7505	6715	Medical	Not Reserved	No	No	0	Cbc , Cect -Thorax/ Abdomen/Pelvis , Histopathology (Hpe) , Lft , Rbs , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1804	Tertiary	Medical Oncology - Phase 3	28360000050	CT for CA Lung-Paclitaxel + Carboplatin-Duration + Cycle	15100	15100	14345	12835	Medical	Not Reserved	No	No	0	Cbc , Cect -Thorax/ Abdomen/Pelvis , Histopathology (Hpe) , Lft , Rbs , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1805	Tertiary	Medical Oncology - Phase 3	28360000052	CT for CA Lung-Paclitaxel + Cisplatin-Duration + Cycle	13500	13500	12825	11475	Medical	Not Reserved	No	No	0	Cbc , Cect -Thorax/ Abdomen/Pelvis , Histopathology (Hpe) , Lft , Rbs , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1806	Tertiary	Medical Oncology - Phase 3	28360000054	CT for CA Lung-Paclitaxel-Duration + Cycle	5800	5800	5510	4930	Medical	Not Reserved	No	No	0	Cbc , Cect -Thorax/ Abdomen/Pelvis , Histopathology (Hpe) , Lft , Rbs , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1807	Tertiary	Medical Oncology - Phase 3	28360000053	CT for CA Lung-Paclitaxel-Duration + Cycle	12000	12000	11400	10200	Medical	Not Reserved	No	No	0	Cbc , Cect -Thorax/ Abdomen/Pelvis , Histopathology (Hpe) , Lft , Rbs , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1808	Tertiary	Medical Oncology - Phase 3	28360000055	CT for CA Lung-Pemetrexed + Carboplatin-Cycle	10000	10000	9500	8500	Medical	Not Reserved	No	No	0	Cbc , Cect -Thorax/ Abdomen/Pelvis , Histopathology (Hpe) , Lft , Rbs , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1809	Tertiary	Medical Oncology - Phase 3	28360000056	CT for CA Lung-Pemetrexed + Cisplatin-Duration + Cycle	9200	9200	8740	7820	Medical	Not Reserved	No	No	0	Cbc , Cect -Thorax/ Abdomen/Pelvis , Histopathology (Hpe) , Lft , Rbs , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1810	Tertiary	Medical Oncology - Phase 3	28360000057	CT for CA Lung-Pemetrexed-Duration + Cycle	7600	7600	7220	6460	Medical	Not Reserved	No	No	0	Cbc , Cect -Thorax/ Abdomen/Pelvis , Histopathology (Hpe) , Lft , Rbs , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1811	Tertiary	Medical Oncology - Phase 3	28360000058	CT for CA Lung-Topotecan-Duration + Cycle	24600	24600	23370	20910	Medical	Not Reserved	No	No	0	Cbc , Cect -Thorax/ Abdomen/Pelvis , Histopathology (Hpe) , Lft , Rbs , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1812	Tertiary	Medical Oncology - Phase 3	28360000059	CT for CA Lung-Vinorelbine + Carboplatin-Duration + Cycle	22800	22800	21660	19380	Medical	Not Reserved	No	No	0	Cbc , Cect -Thorax/Abdomen/Pelvis , Histopathology (Hpe) , Lft , Rbs , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1813	Tertiary	Medical Oncology - Phase 3	28360000060	CT for CA Lung-Vinorelbine + Cisplatin-Duration + Cycle	20600	20600	19570	17510	Medical	Not Reserved	No	No	0	Cbc , Cect -Thorax/Abdomen/Pelvis , Histopathology (Hpe) , Lft , Rbs , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1814	Tertiary	Medical Oncology - Phase 3	28360000061	CT for CA Ovary-Carboplatin + Gemcitabine-Cycle	13900	13900	13205	11815	Medical	Not Reserved	No	No	0	Ca-125 , Cbc , Cect -Thorax/Abdomen/Pelvis , Hpe/Cytology-Ovarian Adenocarcinoma , Lft , Rbs , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1815	Tertiary	Medical Oncology - Phase 3	28360000062	CT for CA Ovary-Carboplatin + Paclitaxel-Cycle	14700	14700	13965	12495	Medical	Not Reserved	No	No	0	Ca-125 , Cbc , Cect -Thorax/Abdomen/Pelvis , Hpe/Cytology-Ovarian Adenocarcinoma , Lft , Rbs , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1816	Tertiary	Medical Oncology - Phase 3	28360000063	CT for CA Ovary-Cisplatin + Irinotecan-Cycle	10200	10200	9690	8670	Medical	Not Reserved	No	No	0	Ca-125 , Cbc , Cect -Thorax/Abdomen/Pelvis , Hpe/Cytology-Ovarian Adenocarcinoma , Lft , Rbs , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1817	Tertiary	Medical Oncology - Phase 3	28360000064	CT for CA Ovary-Etoposide-Duration + Cycle	3400	3400	3230	2890	Medical	Not Reserved	No	No	0	Ca-125 , Cbc , Cect -Thorax/Abdomen/Pelvis , Hpe/Cytology-Ovarian Adenocarcinoma , Lft , Rbs , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1818	Tertiary	Medical Oncology - Phase 3	28360000065	CT for CA Ovary-Irinotecan-Cycle	8400	8400	7980	7140	Medical	Not Reserved	No	No	0	Ca-125 , Cbc , Cect -Thorax/ Abdomen/Pelvis , Hpe/Cytology-Ovarian Adenocarcinoma , Lft , Rbs , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1819	Tertiary	Medical Oncology - Phase 3	28360000066	CT for CA Ovary-Lipodox + Carboplatin-Cycle	17200	17200	16340	14620	Medical	Not Reserved	No	No	0	Ca-125 , Cbc , Cect -Thorax/ Abdomen/Pelvis , Hpe/Cytology-Ovarian Adenocarcinoma , Lft , Rbs , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1820	Tertiary	Medical Oncology - Phase 3	28360000067	CT for CA Ovary-Lipodox-Cycle	14800	14800	14060	12580	Medical	Not Reserved	No	No	0	Ca-125 , Cbc , Cect -Thorax/ Abdomen/Pelvis , Hpe/Cytology-Ovarian Adenocarcinoma , Lft , Rbs , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1821	Tertiary	Medical Oncology - Phase 3	28360000068	CT for CA Penis-S FU + Cisplatin-Cycle	7800	7800	7410	6630	Medical	Not Reserved	No	No	0	Cbc , Cect -Thorax/ Abdomen/Pelvis , Histopathology (Hpe) , Lft , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1822	Tertiary	Medical Oncology - Phase 3	28360000069	CT for CA Penis-Capecitabine-Cycle	7400	7400	7030	6290	Medical	Not Reserved	No	No	0	Cbc , Cect -Thorax/ Abdomen/Pelvis , Histopathology (Hpe) , Lft , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1823	Tertiary	Medical Oncology - Phase 3	28360000070	CT for CA Penis-Cisplatin + Paclitaxel-Cycle	13500	13500	12825	11475	Medical	Not Reserved	No	No	0	Cbc , Cect -Thorax/ Abdomen/Pelvis , Histopathology (Hpe) , Lft , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1824	Tertiary	Medical Oncology - Phase 3	28360000071	CT for CA Penis-Paclitaxel + Carboplatin-Cycle	15100	15100	14345	12835	Medical	Not Reserved	No	No	0	Cbc , Cect -Thorax/ Abdomen/Pelvis , Histopathology (Hpe) , Lft , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1825	Tertiary	Medical Oncology - Phase 3	28360000072	CT for CA Penis-Paclitaxel + Carboplatin-Duration + Cycle	7900	7900	7505	6715	Medical	Not Reserved	No	No	0	Cbc , Cect -Thorax/ Abdomen/Pelvis , Histopathology (Hpe) , Lft , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1826	Tertiary	Medical Oncology - Phase 3	28360000074	CT for CA Penis-Paclitaxel-Duration + Cycle	5700	5700	5415	4845	Medical	Not Reserved	No	No	0	Cbc , Cect -Thorax/ Abdomen/Pelvis , Histopathology (Hpe) , Lft , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1827	Tertiary	Medical Oncology - Phase 3	28360000073	CT for CA Penis-Paclitaxel-Duration + Cycle	12200	12200	11590	10370	Medical	Not Reserved	No	No	0	Cbc , Cect -Thorax/ Abdomen/Pelvis , Histopathology (Hpe) , Lft , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1828	Tertiary	Medical Oncology - Phase 3	28360000075	CT for CA Prostate-Docetaxel-Duration + Cycle	14700	14700	13965	12495	Medical	Not Reserved	No	No	0	Bone Scan , Cbc , Cect - Thorax/ Abdomen/Pelvis , Ecg , Histopathology (Hpe) , Lft , Psa , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1829	Tertiary	Medical Oncology - Phase 3	28360000076	CT for CA Prostate-Docetaxel-Duration + Cycle	14100	14100	13395	11985	Medical	Not Reserved	No	No	0	Bone Scan , Cbc , Cect - Thorax/ Abdomen/Pelvis , Ecg , Histopathology (Hpe) , Lft , Psa , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1830	Tertiary	Medical Oncology - Phase 3	2836000077	CT for CA Prostate-Docetaxel-Duration + Cycle	11700	11700	11115	9945	Medical	Not Reserved	No	No	0	Bone Scan , Cbc , Cect - Thorax/ Abdomen/Pelvis , Ecg , Histopathology (Hpe) , Lft , Psa , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1831	Tertiary	Medical Oncology - Phase 3	2836000078	CT for CA Prostate-Etoposide + Carboplatin-Cycle	7100	7100	6745	6035	Medical	Not Reserved	No	No	0	Bone Scan , Cbc , Cect - Thorax/ Abdomen/Pelvis , Ecg , Histopathology (Hpe) , Lft , Psa , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1832	Tertiary	Medical Oncology - Phase 3	2836000079	CT for CA Prostate-LHRH Agonist-Duration + Cycle	15300	15300	14535	13005	Medical	Not Reserved	No	No	0	Bone Scan , Cbc , Cect - Thorax/ Abdomen/Pelvis , Ecg , Histopathology (Hpe) , Lft , Psa , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1833	Tertiary	Medical Oncology - Phase 3	2836000080	CT for CA Prostate-Mitoxantrone + Prednisolone-Duration + Cycle	4200	4200	3990	3570	Medical	Not Reserved	No	No	0	Bone Scan , Cbc , Cect - Thorax/ Abdomen/Pelvis , Ecg , Histopathology (Hpe) , Lft , Psa , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1834	Tertiary	Medical Oncology - Phase 3	2836000082	CT for CA Prostate-Paclitaxel + Carboplatin-Duration + Cycle	7700	7700	7315	6545	Medical	Not Reserved	No	No	0	Bone Scan , Cbc , Cect - Thorax/ Abdomen/Pelvis , Ecg , Histopathology (Hpe) , Lft , Psa , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1835	Tertiary	Medical Oncology - Phase 3	2836000081	CT for CA Prostate-Paclitaxel + Carboplatin-Duration + Cycle	15100	15100	14345	12835	Medical	Not Reserved	No	No	0	Bone Scan , Cbc , Cect - Thorax/ Abdomen/Pelvis , Ecg , Histopathology (Hpe) , Lft , Psa , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1836	Tertiary	Medical Oncology - Phase 3	28360000083	CT for Cervical Cancer-Carboplatin + Paclitaxel-Cycle	14900	14900	14155	12665	Medical	Not Reserved	No	No	0	Cbc , Cect-Thorax/ Abdomen And Pelvis , Histopathology (Hpe) , Lft , Rbs , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1837	Tertiary	Medical Oncology - Phase 3	28360000084	CT for Cervical Cancer-Cisplatin-Duration + Cycle	2200	2200	2090	1870	Medical	Not Reserved	No	No	0	Cbc , Cect-Thorax/ Abdomen And Pelvis , Histopathology (Hpe) , Lft , Rbs , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1838	Tertiary	Medical Oncology - Phase 3	28360000085	CT for Chronic Lymphocytic Leukemia-Fludarabine + Cyclophosphamide-Cycle	18100	18100	17195	15385	Medical	Not Reserved	No	No	0	Biochemistry , Biopsy/Fluid Flow Cytometry , Bone Marrow Studies , Cbc , Cect- Chest/ Abdomen And Pelvis , Usg-Abdomen/Usg-Pelvis , X-Ray (Chest)	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1839	Tertiary	Medical Oncology - Phase 3	28360000086	CT for Chronic Lymphocytic Leukemia-Lenalidomide-Duration + Cycle	4800	4800	4560	4080	Medical	Not Reserved	No	No	0	Biochemistry , Biopsy/Fluid Flow Cytometry , Bone Marrow Studies , Cbc , Cect- Chest/ Abdomen And Pelvis , Usg-Abdomen/Usg-Pelvis , X-Ray (Chest)	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1840	Tertiary	Medical Oncology - Phase 3	28360000087	CT for Chronic Lymphocytic Leukemia-Rituximab + Fludarabine + Cyclophosphamide-Cycle	40700	40700	38665	34595	Medical	Not Reserved	No	No	0	Biochemistry , Biopsy/Fluid Flow Cytometry , Bone Marrow Studies , Cbc , Cect- Chest/ Abdomen And Pelvis , Usg-Abdomen/Usg-Pelvis , X-Ray (Chest)	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1841	Tertiary	Medical Oncology - Phase 3	28360000088	CT for Chronic Lymphocytic Leukemia-Rituximab + Chlorambucil-Cycle	24900	24900	23655	21165	Medical	Not Reserved	No	No	0	Biochemistry , Biopsy/Fluid Flow Cytometry , Bone Marrow Studies , Cbc , Cect- Chest/ Abdomen And Pelvis , Usg-Abdomen/Usg-Pelvis , X-Ray (Chest)	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1842	Tertiary	Medical Oncology - Phase 3	2836000089	CT for Chronic Myeloid Leukemia-Imatinib-Duration	19400	19400	18430	16490	Medical	Not Reserved	No	No	0	Biopsy , Bone Marrow Studies ,Cbc , Cytogenetics , Lft , Mdc , Rft , Rq Pcr	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1843	Tertiary	Medical Oncology - Phase 3	2836000090	CT for Colorectal Cancer-5 FU + Leucovorin-Cycle	4700	4700	4465	3995	Medical	Not Reserved	No	No	0	Cbc , Cea , Cect-Thorax/ Abdomen And Pelvis , Colonoscopy , Histopathology (Hpe) , Lft , Rbs , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1844	Tertiary	Medical Oncology - Phase 3	2836000091	CT for Colorectal Cancer-Capecitabine	7200	7200	6840	6120	Medical	Not Reserved	No	No	0	Cbc , Cea , Cect-Thorax/ Abdomen And Pelvis , Colonoscopy , Histopathology (Hpe) , Lft , Rbs , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1845	Tertiary	Medical Oncology - Phase 3	2836000092	CT for Colorectal Cancer-Capecitabine + Irinotecan-Cycle	12500	12500	11875	10625	Medical	Not Reserved	No	No	0	Cbc , Cea , Cect-Thorax/ Abdomen And Pelvis , Histopathology (Hpe) , Lft , Rbs , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1846	Tertiary	Medical Oncology - Phase 3	2836000093	CT for Colorectal Cancer-Capecitabine + Oxaliplatin-Cycle	16500	16500	15675	14025	Medical	Not Reserved	No	No	0	Cbc , Cea , Cect-Thorax/ Abdomen And Pelvis , Colonoscopy , Histopathology (Hpe) , Lft , Rbs , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1847	Tertiary	Medical Oncology - Phase 3	2836000094	CT for Colorectal Cancer-Capecitabine-Cycle	7300	7300	6935	6205	Medical	Not Reserved	No	No	0	Cbc , Cea , Cect-Thorax/ Abdomen And Pelvis , Colonoscopy , Histopathology (Hpe) , Lft , Rbs , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1848	Tertiary	Medical Oncology - Phase 3	2836000095	CT for Colorectal Cancer-Folfrir-Cycle	8700	8700	8265	7395	Medical	Not Reserved	No	No	0	Cbc , Cea , Cect-Thorax/ Abdomen And Pelvis , Histopathology (Hpe) , Lft , Rbs , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1849	Tertiary	Medical Oncology - Phase 3	2836000096	CT for Colorectal Cancer-Folfrin-Cycle	15100	15100	14345	12835	Medical	Not Reserved	No	No	0	Cbc , Cea , Cect-Thorax/ Abdomen And Pelvis , Colonoscopy , Histopathology (Hpe) , Lft , Rbs , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1850	Tertiary	Medical Oncology - Phase 3	2836000097	CT for Colorectal Cancer-Folfox-Cycle	11100	11100	10545	9435	Medical	Not Reserved	No	No	0	Cbc , Cea , Cect-Thorax/ Abdomen And Pelvis , Colonoscopy , Histopathology (Hpe) , Lft , Rbs , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1851	Tertiary	Medical Oncology - Phase 3	2836000098	CT for Endometrial Cancer-Carboplatin + Paclitaxel-Cycle	14900	14900	14155	12665	Medical	Not Reserved	No	No	0	Cbc , Cect-Thorax/ Abdomen And Pelvis , Histopathology (Hpe) , Lft , Rbs , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1852	Tertiary	Medical Oncology - Phase 3	2836000099	CT for Endometrial Cancer-Cisplatin + Doxorubicin-Cycle	4200	4200	3990	3570	Medical	Not Reserved	No	No	0	2-D Echo , Cbc , Cect-Thorax/ Abdomen And Pelvis , Ecg , Histopathology (Hpe) , Lft , Rbs , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1853	Tertiary	Medical Oncology - Phase 3	2836000100	CT for Esophageal / Stomach Cancer-5 FU-Cycle	8000	8000	7600	6800	Medical	Not Reserved	No	No	0	Cbc , Cect-Thorax/ Abdomen And Pelvis , Histopathology (Hpe) , Lft , Rbs , Rft , Ugi Endoscopy (Ugie)	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1854	Tertiary	Medical Oncology - Phase 3	28360000101	CT for Esophageal / Stomach Cancer-CAPOX-Cycle	16500	16500	15675	14025	Medical	Not Reserved	No	No	0	Cbc , Cect-Thorax/ Abdomen And Pelvis , Histopathology (Hpe) , Lft , Rbs , Rft , Ugi Endoscopy (Ugie)	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1855	Tertiary	Medical Oncology - Phase 3	28360000102	CT for Esophageal / Stomach Cancer-Capecitabine-Cycle	7200	7200	6840	6120	Medical	Not Reserved	No	No	0	Cbc , Cect-Thorax/ Abdomen And Pelvis , Histopathology (Hpe) , Lft , Rbs , Rft , Ugi Endoscopy (Ugie)	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1856	Tertiary	Medical Oncology - Phase 3	28360000103	CT for Esophageal / Stomach Cancer-Cisplatin + Docetaxel-Duration + Cycle	12100	12100	11495	10285	Medical	Not Reserved	No	No	0	Cbc , Cect-Thorax/ Abdomen And Pelvis , Histopathology (Hpe) , Lft , Rbs , Rft , Ugi Endoscopy (Ugie)	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1857	Tertiary	Medical Oncology - Phase 3	28360000104	CT for Esophageal / Stomach Cancer-Docetaxel + Cisplatin + 5 FU-Cycle	16400	16400	15580	13940	Medical	Not Reserved	No	No	0	Cbc , Cect-Thorax/ Abdomen And Pelvis , Histopathology (Hpe) , Lft , Rbs , Rft , Ugi Endoscopy (Ugie)	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1858	Tertiary	Medical Oncology - Phase 3	28360000105	CT for Esophageal / Stomach Cancer-Docetaxel + Cisplatin + Xeloda-Cycle	19700	19700	18715	16745	Medical	Not Reserved	No	No	0	Cbc , Cect-Thorax/ Abdomen And Pelvis , Histopathology (Hpe) , Lft , Rbs , Rft , Ugi Endoscopy (Ugie)	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1859	Tertiary	Medical Oncology - Phase 3	28360000106	CT for Esophageal / Stomach Cancer-Docetaxel + Oxaliplatin + 5 FU-Cycle	20400	20400	19380	17340	Medical	Not Reserved	No	No	0	Cbc , Cect-Thorax/ Abdomen And Pelvis , Histopathology (Hpe) , Lft , Rbs , Rft , Ugi Endoscopy (Ugie)	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1860	Tertiary	Medical Oncology - Phase 3	28360000107	CT for Esophageal / Stomach Cancer-Docetaxel + Oxaliplatin + Xeloda-Cycle	24900	24900	23655	21165	Medical	Not Reserved	No	No	0	Cbc , Cect-Thorax/ Abdomen And Pelvis , Histopathology (Hpe) , Lft , Rbs , Rft , Ugi Endoscopy (Ugie)	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1861	Tertiary	Medical Oncology - Phase 3	28360000108	CT for Esophageal / Stomach Cancer-Folfox-Cycle	8700	8700	8265	7395	Medical	Not Reserved	No	No	0	Cbc , Cect-Thorax/ Abdomen And Pelvis , Histopathology (Hpe) , Lft , Rbs , Rft , Ugi Endoscopy (Ugie)	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1862	Tertiary	Medical Oncology - Phase 3	28360000109	CT for Esophageal / Stomach Cancer-Folfox-Cycle	11100	11100	10545	9435	Medical	Not Reserved	No	No	0	Cbc , Cect-Thorax/ Abdomen And Pelvis , Histopathology (Hpe) , Lft , Rbs , Rft , Ugi Endoscopy (Ugie)	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1863	Tertiary	Medical Oncology - Phase 3	28360000110	CT for Esophageal / Stomach Cancer-Irinotecan-Cycle	8300	8300	7885	7055	Medical	Not Reserved	No	No	0	Cbc , Cect-Thorax/ Abdomen And Pelvis , Histopathology (Hpe) , Lft , Rbs , Rft , Ugi Endoscopy (Ugie)	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1864	Tertiary	Medical Oncology - Phase 3	28360000111	CT for Esophageal / Stomach Cancer-Paclitaxel-Duration + Cycle	5800	5800	5510	4930	Medical	Not Reserved	No	No	0	Cbc , Cect-Thorax/ Abdomen And Pelvis , Histopathology (Hpe) , Lft , Rbs , Rft , Ugi Endoscopy (Ugie)	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1865	Tertiary	Medical Oncology - Phase 3	28360000112	CT for Esophageal Cancer-Carboplatin + Paclitaxel-Duration + Cycle	14900	14900	14155	12665	Medical	Not Reserved	No	No	0	Cbc , Cect-Thorax/ Abdomen And Pelvis , Histopathology (Hpe) , Lft , Rbs , Rft , Ugi Endoscopy (Ugie)	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1866	Tertiary	Medical Oncology - Phase 3	28360000113	CT for Esophageal Cancer-Cisplatin + 5 FU	9600	9600	9120	8160	Medical	Not Reserved	No	No	0	Cbc , Cect-Thorax/ Abdomen And Pelvis , Histopathology (Hpe) , Lft , Rbs , Rft , Ugi Endoscopy (Ugie)	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1867	Tertiary	Medical Oncology - Phase 3	28360000114	CT for Esophageal Cancer-Cisplatin + 5 FU-Cycle	9600	9600	9120	8160	Medical	Not Reserved	No	No	0	Cbc , Cect-Thorax/ Abdomen And Pelvis , Histopathology (Hpe) , Lft , Rbs , Rft , Ugi Endoscopy (Ugie)	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1868	Tertiary	Medical Oncology - Phase 3	28360000115	CT for Esophageal Cancer-Paclitaxel + Carboplatin for definitive Non - metastatic (With RT)-Cycle	25100	25100	23845	21335	Medical	Not Reserved	No	No	0	Cbc , Cea , Cect-Thorax/ Abdomen And Pelvis , Histopathology (Hpe) , Lft , Rbs , Rft , Ugi Endoscopy (Ugie)	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1869	Tertiary	Medical Oncology - Phase 3	28360000116	CT for Esophageal Cancer-Paclitaxel + Carboplatin for metastatic (Without RT)-Cycle	25100	25100	23845	21335	Medical	Not Reserved	No	No	0	Cbc , Cect-Thorax/ Abdomen And Pelvis , Histopathology (Hpe) , Lft , Rbs , Rft , Ugi Endoscopy (Ugie)	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1870	Tertiary	Medical Oncology - Phase 3	28360000117	CT for Ewing Sarcoma-VAC + IE-Duration + Cycle	12500	12500	11875	10625	Medical	Not Reserved	No	No	0	2-D Echo , Biochemistry , Biopsy , Bone Marrow Studies , Cbc , Ecg , Pet-Ct Or Ct-Chest/Bone Scan	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1871	Tertiary	Medical Oncology - Phase 3	28360000118	CT for Ewing Sarcoma-VTC + ITMZ for Relapsed Ewing Sarcoma-Cycle	22400	22400	21280	19040	Medical	Not Reserved	No	No	0	2-D Echo , Biochemistry , Biopsy , Bone Marrow Studies , Cbc , Ecg , Pet-Ct Or Ct-Chest/Bone Scan	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1872	Tertiary	Medical Oncology - Phase 3	28360000119	CT for Gall Bladder Cancer / Cholangiocarcinoma-CAPIRI-Cycle	12600	12600	11970	10710	Medical	Not Reserved	No	No	0	Ca-19.9 , Cbc , Cect -Thorax/ Abdomen/Pelvis , Histopathology (Hpe)/Fnac , Lft , Rbs , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1873	Tertiary	Medical Oncology - Phase 3	28360000120	CT for Gall Bladder Cancer / Cholangiocarcinoma-Capectabine-Cycle	7300	7300	6935	6205	Medical	Not Reserved	No	No	0	Ca-19.9 , Cbc , Cect -Thorax/ Abdomen And Pelvis , Histopathology (Hpe)/Fnac , Lft , Rbs , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1874	Tertiary	Medical Oncology - Phase 3	28360000121	CT for Gall Bladder Cancer / Cholangiocarcinoma-Cisplatin + Gemcitabine-Cycle	10900	10900	10355	9265	Medical	Not Reserved	No	No	0	Ca-19.9 , Cbc , Cect -Thorax/ Abdomen/Pelvis , Histopathology (Hpe)/Fnac , Lft , Rbs , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1875	Tertiary	Medical Oncology - Phase 3	28360000122	CT for Gall Bladder Cancer / Cholangiocarcinoma-Folfirf-Cycle	8900	8900	8455	7565	Medical	Not Reserved	No	No	0	Ca-19.9 , Cbc , Cect -Thorax/ Abdomen/Pelvis , Histopathology (Hpe)/Fnac , Lft , Rbs , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1876	Tertiary	Medical Oncology - Phase 3	28360000123	CT for Gall Bladder Cancer / Cholangiocarcinoma-Folfox-Cycle	11300	11300	10735	9605	Medical	Not Reserved	No	No	0	Ca-19.9 , Cbc , Cect -Thorax/ Abdomen/Pelvis , Histopathology (Hpe)/Fnac , Lft , Rbs , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1877	Tertiary	Medical Oncology - Phase 3	28360000124	CT for Gall Bladder Cancer / Cholangiocarcinoma-Gemcitabine-Cycle	8900	8900	8455	7565	Medical	Not Reserved	No	No	0	Ca-19.9 , Cbc , Cect -Thorax/ Abdomen/Pelvis , Histopathology (Hpe)/Fnac , Lft , Rbs , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1878	Tertiary	Medical Oncology - Phase 3	28360000125	CT for Gall Bladder Cancer / Cholangiocarcinoma-Gemcitabine-Duration + Cycle	9000	9000	8550	7650	Medical	Not Reserved	No	No	0	Ca-19.9 , Cbc , Cect -Thorax/ Abdomen/Pelvis , Histopathology (Hpe)/Fnac , Lft , Rbs , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1879	Tertiary	Medical Oncology - Phase 3	28360000126	CT for Gall Bladder Cancer / Cholangiocarcinoma-Oxaliplatin + Gemcitabine-Cycle	17100	17100	16245	14535	Medical	Not Reserved	No	No	0	Ca-19.9 , Cbc , Cect -Thorax/ Abdomen/Pelvis , Histopathology (Hpe)/Fnac , Lft , Rbs , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1880	Tertiary	Medical Oncology - Phase 3	28360000127	CT for Gastrointestinal stromal tumor - Imatinib-Duration	19400	19400	18430	16490	Medical	Not Reserved	No	No	0	C-Kit Mutation , Cbc , Cect -Thorax/ Abdomen/Pelvis , Histopathology (Hpe)/Fnac , Lft , Rbs , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1881	Tertiary	Medical Oncology - Phase 3	28360000128	CT for Gastrointestinal stromal tumor - Sunitinib-Duration + Cycle	24400	24400	23180	20740	Medical	Not Reserved	No	No	0	C-Kit Mutation , Cbc , Cect -Thorax/ Abdomen/Pelvis , Histopathology (Hpe)/Fnac , Lft , Rbs , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1882	Tertiary	Medical Oncology - Phase 3	28360000129	CT for Germ Cell Tumor-Bleomycin + Etoposide + Cisplatin-Cycle	11600	11600	11020	9860	Medical	Not Reserved	No	No	0	Afp , Beta-Hcg , Cbc , Cect -Thorax/ Abdomen/Pelvis , Dlc , Ecg , Histopathology (Hpe) , Ldh , Lft , Pft , Rbs , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1883	Tertiary	Medical Oncology - Phase 3	28360000130	CT for Germ Cell Tumor-Carboplatin (AUC 7)-Cycle	5800	5800	5510	4930	Medical	Not Reserved	No	No	0	Afp , Beta-Hcg , Cbc , Cect -Thorax/ Abdomen/Pelvis , Ecg , Histopathology-Testicular , Ldh , Lft , Rbs , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1884	Tertiary	Medical Oncology - Phase 3	28360000131	CT for Germ Cell Tumor-Etoposide + Cisplatin-Cycle	10000	10000	9500	8500	Medical	Not Reserved	No	No	0	Afp, Beta-Hcg, Cbc, Cect - Thorax/ Abdomen/Pelvis, Ecg, Histopathology (Hpe), Ldh, Lft, Rbs, Rft	Bar Code Of Drugs, Charts Of Chemotherapy Regimen, Detailed Discharge Summary- Day Care Dept., Detailed Discharge Summary- Inpatient Dept., Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc), Transfusion Slips	No	No	Yes	No	Yes	1
1885	Tertiary	Medical Oncology - Phase 3	28360000132	CT for Germ Cell Tumor-Gemcitabine + Oxaliplatin-Cycle	17500	17500	16625	14875	Medical	Not Reserved	No	No	0	Afp, Beta-Hcg, Cbc, Cect - Thorax/ Abdomen/Pelvis, Ecg, Histopathology (Hpe), Ldh, Lft, Rbs, Rft	Bar Code Of Drugs, Charts Of Chemotherapy Regimen, Detailed Discharge Summary- Day Care Dept., Detailed Discharge Summary- Inpatient Dept., Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc), Transfusion Slips	No	No	Yes	No	Yes	1
1886	Tertiary	Medical Oncology - Phase 3	28360000133	CT for Germ Cell Tumor-Gemcitabine + Paclitaxel-Cycle	17500	17500	16625	14875	Medical	Not Reserved	No	No	0	Afp, Beta-Hcg, Cbc, Cect - Thorax/ Abdomen/Pelvis, Ecg, Histopathology (Hpe), Ldh, Lft, Rbs, Rft	Bar Code Of Drugs, Charts Of Chemotherapy Regimen, Detailed Discharge Summary- Day Care Dept., Detailed Discharge Summary- Inpatient Dept., Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc), Transfusion Slips	No	No	Yes	No	Yes	1
1887	Tertiary	Medical Oncology - Phase 3	28360000134	CT for Germ Cell Tumor-Paclitaxel + Ifosfamide + Cisplatin-Cycle	24400	24400	23180	20740	Medical	Not Reserved	No	No	0	Afp, Beta-Hcg, Cbc, Cect - Thorax/ Abdomen/Pelvis, Ecg, Histopathology (Hpe), Ldh, Lft, Rbs, Rft	Bar Code Of Drugs, Charts Of Chemotherapy Regimen, Detailed Discharge Summary- Day Care Dept., Detailed Discharge Summary- Inpatient Dept., Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc), Transfusion Slips	No	No	Yes	No	Yes	1
1888	Tertiary	Medical Oncology - Phase 3	28360000135	CT for Germ Cell Tumor-Vinblastin + Ifosfamide + Cisplatin-Cycle	12600	12600	11970	10710	Medical	Not Reserved	No	No	0	Afp, Beta-Hcg, Cbc, Cect- Thorax/ Abdomen And Pelvis, Ecg, Histopathology (Hpe), Ldh, Lft, Rbs, Rft	Bar Code Of Drugs, Charts Of Chemotherapy Regimen, Detailed Discharge Summary- Day Care Dept., Detailed Discharge Summary- Inpatient Dept., Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc), Transfusion Slips	No	No	Yes	No	Yes	1
1889	Tertiary	Medical Oncology - Phase 3	28360000136	CT for Gestational Trophoblastic Neoplasia-EMA - CO-Cycle	11400	11400	10830	9690	Medical	Not Reserved	No	No	0	Beta-Hcg, Cbc, Cect-Thorax/ Abdomen And Pelvis, Lft, Rbs, Rft	Bar Code Of Drugs, Charts Of Chemotherapy Regimen, Detailed Discharge Summary- Day Care Dept., Detailed Discharge Summary- Inpatient Dept., Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc), Transfusion Slips	No	No	Yes	No	Yes	1

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1890	Tertiary	Medical Oncology - Phase 3	28360000137	CT for Gestational Trophoblastic Neoplasia-EMA - EP-Cycle	12200	12200	11590	10370	Medical	Not Reserved	No	No	0	Beta-Hcg , Cbc , Cect-Thorax/ Abdomen And Pelvis , Lft , Rbs ,Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1891	Tertiary	Medical Oncology - Phase 3	28360000138	CT for Gestational Trophoblastic Neoplasia-Methotrexate-Duration + Cycle	1100	1100	1045	935	Medical	Not Reserved	No	No	0	Beta-Hcg , Cbc , Cect-Thorax/ Abdomen And Pelvis , Lft , Rbs ,Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1892	Tertiary	Medical Oncology - Phase 3	28360000139	CT for Hepatocellular Carcinoma-Doxorubicin-Cycle	10000	10000	9500	8500	Medical	Not Reserved	No	No	0	Afp , Cbc , Histopathology (Hpe) , Lft , Mri , Rbs , Rft , Triphasic Cect -Thorax/ Abdomen And Pelvis	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1893	Tertiary	Medical Oncology - Phase 3	28360000140	CT for Hepatocellular Carcinoma-Sorafenib-Duration + Cycle	7400	7400	7030	6290	Medical	Not Reserved	No	No	0	2-D Echo ,Afp , Cbc , Histopathology (Hpe) , Lft , Lipid Profile , Rbs , Rft , Triphasic Cect -Thorax/ Abdomen And Pelvis , Urine R/M	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1894	Tertiary	Medical Oncology - Phase 3	28360000141	CT for High - Grade NHL - B Cell-Rituxmab + Dexamethasone + High Dose Cytarabine + Cisplatin-Cycle	34900	34900	33155	29665	Medical	Not Reserved	No	No	0	Biochemistry , Biopsy/Fluid Flow Cytometry , Bone Marrow Studies , Cbc , Pet-Ct Or Cect-Chest Abdomen And Pelvis	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1895	Tertiary	Medical Oncology - Phase 3	28360000142	CT for Hodgkin's Lymphoma-ABVD-Cycle	10200	10200	9690	8670	Medical	Not Reserved	No	No	0	Biochemistry , Bone Marrow Studies , Cbc , Node Biopsy , Pet-Ct Or Cect-Chest Abdomen And Pelvis	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1896	Tertiary	Medical Oncology - Phase 3	28360000143	CT for Hodgkin's Lymphoma-AEVD-Cycle	10200	10200	9690	8670	Medical	Not Reserved	No	No	0	Biochemistry , Bone Marrow Studies , Cbc , Node Biopsy , Pet-Ct Or Cect-Chest Abdomen And Pelvis	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1897	Tertiary	Medical Oncology - Phase 3	28360000144	CT for Hodgkin's Lymphoma-COPP-Cycle	3600	3600	3420	3060	Medical	Not Reserved	No	No	0	Biochemistry , Bone Marrow Studies , Cbc , Node Biopsy , Pet-Ct Or Cect-Chest Abdomen And Pelvis	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1898	Tertiary	Medical Oncology - Phase 3	28360000145	CT for Low Grade B - Cell NHL- Bendamustine + Rituximab-Cycle	30700	30700	29165	26095	Medical	Not Reserved	No	No	0	Biochemistry , Biopsy/Fluid Flow Cytometry , Bone Marrow Studies , Cbc , Pet-Ct Or Cect-Chest Abdomen And Pelvis	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1899	Tertiary	Medical Oncology - Phase 3	28360000146	CT for Low Grade B - Cell NHL- Lenalidomide + Rituximab-Cycle	27500	27500	26125	23375	Medical	Not Reserved	No	No	0	Biochemistry , Biopsy/Fluid Flow Cytometry , Bone Marrow Studies , Cbc , Pet-Ct Or Cect-Chest Abdomen And Pelvis	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1900	Tertiary	Medical Oncology - Phase 3	28360000147	CT for Low Grade Glioma-Vinblastin-Duration + Cycle	1900	1900	1805	1615	Medical	Not Reserved	No	No	0	Biochemistry , Biopsy , Cbc , Mri	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1901	Tertiary	Medical Oncology - Phase 3	28360000148	CT for Low Grade Glioma-Vincristine + Carboplatin-Duration + Cycle	5600	5600	5320	4760	Medical	Not Reserved	No	No	0	Biochemistry , Biopsy , Cbc , Mri	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1902	Tertiary	Medical Oncology - Phase 3	28360000149	CT for Low Grade NHL - Rituximab + Cyclophosphamide + Vincristine + Prednisolone-Cycle	25800	25800	24510	21930	Medical	Not Reserved	No	No	0	Biochemistry , Biopsy/Fluid Flow Cytometry , Bone Marrow Studies , Cbc , Cect- Chest/ Abdomen And Pelvis , Usg-Abdomen & Pelvis	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1903	Tertiary	Medical Oncology - Phase 3	28360000150	CT for Low Grade NHL -Rituximab-Cycle	24800	24800	23560	21080	Medical	Not Reserved	No	No	0	Biochemistry , Biopsy/Fluid Flow Cytometry , Bone Marrow Studies , Cbc , Cect- Chest/ Abdomen And Pelvis	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1904	Tertiary	Medical Oncology - Phase 3	28360000151	CT for MM / Amyloidosis-CTD-Duration + Cycle	4000	4000	3800	3400	Medical	Not Reserved	No	No	0	Biochemistry , Bone Marrow Studies , Cbc , Immunofixation , Serum Free Light Chain Assay , Serum Protein Electrophoresis , Skeletal Survey , Urine Bjp	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1905	Tertiary	Medical Oncology - Phase 3	28360000152	CT for MM / Amyloidosis-MPT-Duration + Cycle	4100	4100	3895	3485	Medical	Not Reserved	No	No	0	Biochemistry , Bone Marrow Studies , Cbc , Immunofixation , Serum Free Light Chain Assay , Serum Protein Electrophoresis , Skeletal Survey , Urine Bjp	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1906	Tertiary	Medical Oncology - Phase 3	28360000153	CT for MM / Amyloidosis-VCD-Duration + Cycle	14600	14600	13870	12410	Medical	Not Reserved	No	No	0	Biochemistry , Bone Marrow Studies , Cbc , Serum Protein Electrophoresis , Skeletal Survey , Urine Bjp	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1907	Tertiary	Medical Oncology - Phase 3	28360000154	CT for MM / Amyloidosis-VD-Duration + Cycle	13300	13300	12635	11305	Medical	Not Reserved	No	No	0	Biochemistry , Bone Marrow Studies , Cbc , Immunofixation , Serum Free Light Chain Assay , Serum Protein Electrophoresis , Skeletal Survey , Urine Bjp	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1908	Tertiary	Medical Oncology - Phase 3	28360000155	CT for MM / Amyloidosis-VMP-Duration + Cycle	12600	12600	11970	10710	Medical	Not Reserved	No	No	0	Biochemistry , Bone Marrow Studies , Cbc , Immunofixation , Serum Free Light Chain Assay , Serum Protein Electrophoresis , Skeletal Survey , Urine Bjp	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1909	Tertiary	Medical Oncology - Phase 3	28360000156	CT for MM / Amyloidosis-VRD-Duration + Cycle	17800	17800	16910	15130	Medical	Not Reserved	No	No	0	Biochemistry , Bone Marrow Studies , Cbc , Immunofixation , Serum Free Light Chain Assay , Serum Protein Electrophoresis , Skeletal Survey , Urine Bjp	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1910	Tertiary	Medical Oncology - Phase 3	28360000157	CT for MM / Amyloidosis-VTD-Duration + Cycle	15000	15000	14250	12750	Medical	Not Reserved	No	No	0	Biochemistry , Bone Marrow Studies , Cbc , Immunofixation , Serum Free Light Chain Assay , Serum Protein Electrophoresis , Skeletal Survey , Urine Bjp	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1911	Tertiary	Medical Oncology - Phase 3	28360000158	CT for MM / Amyloidosis / POEMS-LD-Duration + Cycle	6000	6000	5700	5100	Medical	Not Reserved	No	No	0	Biochemistry , Bone Marrow Studies , Cbc , Immunofixation , Serum Free Light Chain Assay , Serum Protein Electrophoresis , Skeletal Survey , Urine Bjp	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1912	Tertiary	Medical Oncology - Phase 3	28360000159	CT for MM / Amyloidosis / POEMS-POM DEX-Duration + Cycle	6800	6800	6460	5780	Medical	Not Reserved	No	No	0	Biochemistry , Bone Marrow Studies , Cbc , Immunofixation , Serum Free Light Chain Assay , Serum Protein Electrophoresis , Skeletal Survey , Urine Bjp	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1913	Tertiary	Medical Oncology - Phase 3	28360000160	CT for Medulloblastoma / Brain PNET- PACKER-Cycle	4900	4900	4655	4165	Medical	Not Reserved	No	No	0	Biochemistry , Biopsy , Cbc , Csf Cytology , MRI- Brain & Spine	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1914	Tertiary	Medical Oncology - Phase 3	28360000161	CT for Mesothelioma-Gemcitabine + Cisplatin-Duration + Cycle	11100	11100	10545	9435	Medical	Not Reserved	No	No	0	Cbc , Cect -Thorax/ Abdomen/Pelvis , Histopathology (Hpe) , Lft , Rbs , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1915	Tertiary	Medical Oncology - Phase 3	28360000162	CT for Mesothelioma-Pemetrexed + Carboplatin-Cycle	10000	10000	9500	8500	Medical	Not Reserved	No	No	0	Cbc , Cect -Thorax/ Abdomen/Pelvis , Histopathology (Hpe) , Lft , Rbs , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1916	Tertiary	Medical Oncology - Phase 3	28360000163	CT for Mesothelioma-Pemetrexed + Cisplatin-Duration + Cycle	9200	9200	8740	7820	Medical	Not Reserved	No	No	0	Cbc , Cect -Thorax/ Abdomen/Pelvis , Histopathology (Hpe) , Lft , Rbs , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1917	Tertiary	Medical Oncology - Phase 3	28360000164	CT for Metastatic Melanoma-Dacarbazine + Cisplatin-Cycle	7100	7100	6745	6035	Medical	Not Reserved	No	No	0	Cbc , Cect-Thorax/ Abdomen And Pelvis , Histopathology (Hpe) , Lft , Rbs , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1918	Tertiary	Medical Oncology - Phase 3	28360000165	CT for Metastatic Melanoma-Temozolamide-Cycle	23100	23100	21945	19635	Medical	Not Reserved	No	No	0	Cbc , Cect-Thorax/ Abdomen And Pelvis , Lft , Rbs , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1919	Tertiary	Medical Oncology - Phase 3	28360000166	CT for Metastatic bone malignancy and multiple myeloma-Zoledronic Acid-Duration + Cycle	4500	4500	4275	3825	Medical	Not Reserved	No	No	0	Histopathology (Hpe) , Rft , Skeletal Survey/Bone Scan/Pet-Ct Showing Bone Metastasis	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1920	Tertiary	Medical Oncology - Phase 3	28360000167	CT for Myeloproliferative Neoplasm-Hydroxurea-Duration + Cycle	2200	2200	2090	1870	Medical	Not Reserved	No	No	0	Biopsy , Bone Marrow Studies , Cbc , Cytogenetics , Lft , Mdc , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1921	Tertiary	Medical Oncology - Phase 3	28360000168	CT for NK - T Cell Lymphoma-GELOX-Cycle	18900	18900	17955	16065	Medical	Not Reserved	No	No	0	Biochemistry , Biopsy , Bone Marrow Studies , Cbc , Ldh , Pet-Cect Or Cect-Chest Abdomen And Pelvis	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1922	Tertiary	Medical Oncology - Phase 3	28360000169	CT for NK - T Cell Lymphoma-LVP-Cycle	7600	7600	7220	6460	Medical	Not Reserved	No	No	0	Biochemistry , Biopsy , Bone Marrow Studies , Cbc , Ldh , Pet-Cect Or Cect-Chest Abdomen And Pelvis	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1923	Tertiary	Medical Oncology - Phase 3	28360000170	CT for Neuroblastoma-Cabroplatin + Etoposide + Cyclophosphamide + Doxorubicin-Cycle	7900	7900	7505	6715	Medical	Not Reserved	No	No	0	Biochemistry , Biopsy , Bone Marrow Studies , Cbc , Cect/Mri , Fish , Mibg/Bone/Pet-Ct	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1924	Tertiary	Medical Oncology - Phase 3	28360000171	CT for Neuroblastoma-RAPID COJEC-Cycle	6800	6800	6460	5780	Medical	Not Reserved	No	No	0	Biochemistry , Biopsy , Bone Marrow Studies , Cbc , Cect/Mri , Fish , Mibg/Bone/Pet-Ct	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1925	Tertiary	Medical Oncology - Phase 3	28360000172	CT for Neuroblastoma-RETINOID-Cycle	2000	2000	1900	1700	Medical	Not Reserved	No	No	0	Biochemistry , Cbc	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College& Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1926	Tertiary	Medical Oncology - Phase 3	28360000173	CT for Osteogenic Sarcoma-Methotrexate + Doxorubicin + Cisplatin for Relapsed Osteogenic Sarcoma-Duration + Cycle	27000	27000	25650	22950	Medical	Not Reserved	No	No	0	2-D Echo , Audiometry , Biochemistry , Biopsy , Bone Scan , Cbc , Ct-Chest , Ecg , Gfr	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1927	Tertiary	Medical Oncology - Phase 3	28360000175	CT for Osteogenic Sarcoma-OGS - 12-Cycle	29600	29600	28120	25160	Medical	Not Reserved	No	No	0	2-D Echo , Cbc , Dtpa-Gfr , Histopathology (Hpel) , Lft , Pure Tone Audiometry , Rbs , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1928	Tertiary	Medical Oncology - Phase 3	28360000174	CT for Osteogenic Sarcoma-OGS - 12-Cycle	36200	36200	34390	30770	Medical	Not Reserved	No	No	0	2-D Echo , Cbc , Dtpa-Gfr , Histopathology (Hpel) , Lft , Mri , Ncct-Chest , Pure Tone Audiometry , Rbs , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1929	Tertiary	Medical Oncology - Phase 3	28360000176	CT for PMBCL / Burkitt's Lymphoma / Seropositive B- Cell NHLR-EPOCH-Cycle	31700	31700	30115	26945	Medical	Not Reserved	No	No	0	2-D Echo , Biochemistry , Biopsy/Fluid Flow Cytometry , Bone Marrow Studies , Cbc , Ecg , Pet-Ct Or Cect-Chest Abdomen And Pelvis	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1930	Tertiary	Medical Oncology - Phase 3	28360000177	CT for Pancreatic Cancer-Capecitabine + Gemcitabine-Cycle	31500	31500	29925	26775	Medical	Not Reserved	No	No	0	Ca-19.9 , Cbc , Cect-Thorax/ Abdomen And Pelvis , Histopathology (Hpel)/Fnac , Lft , Rbs , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1931	Tertiary	Medical Oncology - Phase 3	28360000178	CT for Pancreatic Cancer-Capecitabine-Cycle	7400	7400	7030	6290	Medical	Not Reserved	No	No	0	Ca-19.9 , Cbc , Cect-Thorax/ Abdomen And Pelvis , Histopathology (Hpel)/Fnac , Lft , Rbs , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1932	Tertiary	Medical Oncology - Phase 3	28360000179	CT for Panceratic Cancer-Folfinox-Cycle	15500	15500	14725	13175	Medical	Not Reserved	No	No	0	Ca-19.9 , Cbc , Cect-Thorax/ Abdomen And Pelvis , Histopathology (Hpe)/Fnac , Lft , Rbs , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1933	Tertiary	Medical Oncology - Phase 3	28360000180	CT for Panceratic Cancer-Gemcitabine + Nanopacitaxel-Cycle	23500	23500	22325	19975	Medical	Not Reserved	No	No	0	Ca-19.9 , Cbc , Cect-Thorax/ Abdomen And Pelvis , Histopathology (Hpe)/Fnac , Lft , Rbs , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1934	Tertiary	Medical Oncology - Phase 3	28360000181	CT for Panceratic Cancer-Gemcitabine-Cycle	9000	9000	8550	7650	Medical	Not Reserved	No	No	0	Ca-19.9 , Cbc , Cect-Thorax/ Abdomen And Pelvis , Histopathology (Hpe)/Fnac , Lft , Rbs , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1935	Tertiary	Medical Oncology - Phase 3	28360000182	CT for Panceratic Cancer-Gemcitabine-Duration + Cycle	9000	9000	8550	7650	Medical	Not Reserved	No	No	0	Ca-19.9 , Cbc , Cect-Thorax/ Abdomen And Pelvis , Histopathology (Hpe)/Fnac , Lft , Rbs , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1936	Tertiary	Medical Oncology - Phase 3	28360000183	CT for Pediatric Hepatoblastoma-Carboplatin + Cisplatin + Doxorubicin-Duration + Cycle	4900	4900	4655	4165	Medical	Not Reserved	No	No	0	2-D Echo , Audiometry , Biochemistry , Biopsy , Cbc , Cect-Chest/ Abdomen , Ecg , Gfr	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1937	Tertiary	Medical Oncology - Phase 3	28360000184	CT for Pediatric Hepatoblastoma-Cisplatin-Cycle	5600	5600	5320	4760	Medical	Not Reserved	No	No	0	Audiometry , Biochemistry , Biopsy , Cbc , Cect-Chest/ Abdomen , Gfr , Serum Afp	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1938	Tertiary	Medical Oncology - Phase 3	28360000185	CT for Pediatric Hodgkins Lymphoma-COPDAC-Cycle	7800	7800	7410	6630	Medical	Not Reserved	No	No	0	Biochemistry , Bone Marrow Studies , Cbc , Node Biopsy , Pet-Ct Or Cect-Chest Abdomen And Pelvis	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1939	Tertiary	Medical Oncology - Phase 3	28360000186	CT for Pediatric Hodgkins Lymphoma-OPEA-Cycle	13000	13000	12350	11050	Medical	Not Reserved	No	No	0	Biochemistry , Bone Marrow Studies , Cbc , Node Biopsy , Pet-Ct Or Cect-Chest Abdomen And Pelvis	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1940	Tertiary	Medical Oncology - Phase 3	28360000187	CT for Pediatric Hodgkins Lymphoma Relapse-DECA-Cycle	17800	17800	16910	15130	Medical	Not Reserved	No	No	0	Biochemistry , Bone Marrow Studies , Cbc , Node Biopsy , Pet-Ct Or Cect-Chest Abdomen And Pelvis	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1941	Tertiary	Medical Oncology - Phase 3	28360000188	CT for Pediatric Hodgkins Lymphoma Relapse-ICE-Cycle	21500	21500	20425	18275	Medical	Not Reserved	No	No	0	Biochemistry , Bone Marrow Studies , Cbc , Node Biopsy , Pet-Ct Or Cect-Chest Abdomen And Pelvis	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1942	Tertiary	Medical Oncology - Phase 3	28360000189	CT for Pediatric Hodgkins Lymphoma Relapse-IGVD-Cycle	34000	34000	32300	28900	Medical	Not Reserved	No	No	0	Biochemistry , Bone Marrow Studies , Cbc , Node Biopsy , Pet-Ct Or Cect-Chest Abdomen And Pelvis	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1943	Tertiary	Medical Oncology - Phase 3	28360000190	CT for Peripheral T - Cell Lymphoma-CHOEP-Cycle	5000	5000	4750	4250	Medical	Not Reserved	No	No	0	Biochemistry , Biopsy , Bone Marrow Studies , Cbc , Ldh , Pet-Cect Or Cect-Chest Abdomen And Pelvis	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1944	Tertiary	Medical Oncology - Phase 3	28360000191	CT for Peripheral T - Cell Lymphoma-CHOP-Cycle	4000	4000	3800	3400	Medical	Not Reserved	No	No	0	Biochemistry , Biopsy , Bone Marrow Studies , Cbc , Ldh , Pet-Cect Or Cect-Chest Abdomen And Pelvis	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1945	Tertiary	Medical Oncology - Phase 3	28360000192	CT for Peripheral T - Cell Lymphoma-SMILE-Cycle	19300	19300	18335	16405	Medical	Not Reserved	No	No	0	Biochemistry , Biopsy , Bone Marrow Studies , Cbc , Ldh , Pet-Cect Or Cect-Chest Abdomen And Pelvis	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1946	Tertiary	Medical Oncology - Phase 3	28360000193	CT for Relapse Rhabdomyosarcoma-VTC + VAC-Cycle	12200	12200	11590	10370	Medical	Not Reserved	No	No	0	2-D Echo , Biochemistry , Biopsy , Bone Marrow Studies , Cbc , Cect/Mri , Pet-Ct/Bone Scan	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1947	Tertiary	Medical Oncology - Phase 3	28360000194	CT for Relapsed B - Cell NHL - High Grade (Except Burkitt's & PCNSL)-GDP - R-Cycle	35300	35300	33535	30005	Medical	Not Reserved	No	No	0	Biochemistry , Biopsy/Fluid Flow Cytometry , Bone Marrow Studies , Cbc , Pet-Ct Or Cect-Chest Abdomen And Pelvis	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1948	Tertiary	Medical Oncology - Phase 3	28360000195	CT for Relapsed B - Cell NHL - High Grade (Except Burkitt's & PCNSL)-ICE - R-Cycle	31900	31900	30305	27115	Medical	Not Reserved	No	No	0	Biochemistry , Biopsy/Fluid Flow Cytometry , Bone Marrow Studies , Cbc , Pet-Ct Or Cect-Chest Abdomen And Pelvis	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1949	Tertiary	Medical Oncology - Phase 3	28360000196	CT for Relapsed Hodgkin Lymphoma-ICE-Cycle	9700	9700	9215	8245	Medical	Not Reserved	No	No	0	Biochemistry , Cbc	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1950	Tertiary	Medical Oncology - Phase 3	28360000197	CT for Relapsed Hodgkin Lymphoma-MINE Cycle	9700	9700	9215	8245	Medical	Not Reserved	No	No	0	Biochemistry , Biopsy , Bone Marrow Studies , Cbc , Ldh , Pet-Ct Or Cect-Chest Abdomen And Pelvis	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1951	Tertiary	Medical Oncology - Phase 3	28360000198	CT for Relapsed Hodgkin Lymphoma-PTCL-GDP-Cycle	12500	12500	11875	10625	Medical	Not Reserved	No	No	0	Biochemistry , Bone Marrow Studies , Cbc , Node Biopsy , Pet-Ct Or Cect-Chest Abdomen And Pelvis	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1952	Tertiary	Medical Oncology - Phase 3	28360000199	CT for Relapsed NHL & HL-DHAP-Cycle	11500	11500	10925	9775	Medical	Not Reserved	No	No	0	Biochemistry , Bone Marrow Studies , Cbc , Node Biopsy , Pet-Ct Or Cect-Chest Abdomen And Pelvis	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1953	Tertiary	Medical Oncology - Phase 3	28360000200	CT for Renal Cell Cancer-Sunitinib-Duration	26400	26400	25080	22440	Medical	Not Reserved	No	No	0	2-D Echo , 24 Hour Urine Protein , Cbc , Cect -Thorax/ Abdomen/Pelvis , Lipid Profile , Rbs , Rft , TR (Thyroid Function Test)	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1954	Tertiary	Medical Oncology - Phase 3	28360000201	CT for Retinoblastoma-JOE / COPE-Duration + Cycle	7100	7100	6745	6035	Medical	Not Reserved	No	No	0	Biochemistry , Bone Marrow Studies , Cbc , Csf Studies , Mri/Ct (Brain And Orbits) , Usg	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1955	Tertiary	Medical Oncology - Phase 3	28360000202	CT for Rhabdomyosarcoma-VCD-Cycle	4800	4800	4560	4080	Medical	Not Reserved	No	No	0	Biochemistry , Biopsy , Bone Marrow Studies , Cbc , Cect/Mri , Pet-Ct/Bone Scan	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1956	Tertiary	Medical Oncology - Phase 3	28360000203	CT for Rhabdomyosarcoma-VIE-Cycle	16200	16200	15390	13770	Medical	Not Reserved	No	No	0	Biochemistry , Biopsy, Bone Marrow Studies, Cbc, Cect/Mri, Pet-CT/Bone Scan	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1957	Tertiary	Medical Oncology - Phase 3	28360000204	CT for Soft Tissue Sarcoma-Gemcitabine + Docetaxel-Cycle	30900	30900	29355	26265	Medical	Not Reserved	No	No	0	2-D Echo , Cbc , Cect-Thorax/ Abdomen And Pelvis , Histopathology (Hpe) , Lft , Mri	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1958	Tertiary	Medical Oncology - Phase 3	28360000205	CT for Soft Tissue Sarcoma-Ifosfamide+ Adriamycin-Cycle	13700	13700	13015	11645	Medical	Not Reserved	No	No	0	2-D Echo , Cbc , Cect-Thorax/ Abdomen And Pelvis , Histopathology (Hpe) , Lft , Mri	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1959	Tertiary	Medical Oncology - Phase 3	28360000206	CT for Thymic Carcinoma-Cisplatin + Adriamycin-Cycle	5000	5000	4750	4250	Medical	Not Reserved	No	No	0	2-D Echo , Cbc , Cect -Thorax/ Abdomen/Pelvis , Histopathology (Hpe) , Lft , Rbs , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1960	Tertiary	Medical Oncology - Phase 3	28360000207	CT for Thymic Carcinoma-Cisplatin + Etoposide-Cycle	5300	5300	5035	4505	Medical	Not Reserved	No	No	0	2-D Echo , Cbc , Cect -Thorax/ Abdomen/Pelvis , Histopathology (Hpe) , Lft , Rbs , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1961	Tertiary	Medical Oncology - Phase 3	28360000208	CT for Ureter / Bladder / Urethra- Carboplatin + Gemcitabine-Duration + Cycle	14300	14300	13585	12155	Medical	Not Reserved	No	No	0	Cbc , Cect -Thorax/ Abdomen/Pelvis , Histopathology (Hpe) , Lft , Mri , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1962	Tertiary	Medical Oncology - Phase 3	28360000209	CT for Ureter / Bladder / Urethra-Cisplatin + 5 FU-Cycle	7800	7800	7410	6630	Medical	Not Reserved	No	No	0	Cbc , Cect -Thorax/ Abdomen/Pelvis , Histopathology (Hpe) , Lft , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1963	Tertiary	Medical Oncology - Phase 3	28360000210	CT for Ureter / Bladder / Urethra-Cisplatin + Gemcitabine-Cycle	11100	11100	10545	9435	Medical	Not Reserved	No	No	0	2-D Echo , Cbc , Cect -Thorax/ Abdomen/Pelvis , Ecg , Histopathology (Hpe) , Lft , Mri , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1964	Tertiary	Medical Oncology - Phase 3	28360000211	CT for Ureter / Bladder / Urethra-Cisplatin + Methotrexate + Vinblastin-Cycle	6000	6000	5700	5100	Medical	Not Reserved	No	No	0	Cbc , Cect -Thorax/ Abdomen/Pelvis , Histopathology (Hpe) , Lft , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1965	Tertiary	Medical Oncology - Phase 3	28360000212	CT for Ureter / Bladder / Urethra-Cisplatin + Paclitaxel-Cycle	13500	13500	12825	11475	Medical	Not Reserved	No	No	0	Cbc , Cect -Thorax/ Abdomen/Pelvis , Histopathology (Hpe) , Lft , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1966	Tertiary	Medical Oncology - Phase 3	28360000213	CT for Ureter / Bladder / Urethra-Docetaxel-Cycle	14400	14400	13680	12240	Medical	Not Reserved	No	No	0	Cbc , Cect -Thorax/ Abdomen/Pelvis , Histopathology (Hpe) , Lft , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1967	Tertiary	Medical Oncology - Phase 3	28360000214	CT for Ureter / Bladder / Urethra-Gemcitabine + Paclitaxel-Cycle	17500	17500	16625	14875	Medical	Not Reserved	No	No	0	Cbc , Cect -Thorax/ Abdomen/Pelvis , Histopathology (Hpe) , Lft , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1968	Tertiary	Medical Oncology - Phase 3	28360000215	CT for Ureter / Bladder / Urethra-Gemcitabine-Cycle	9200	9200	8740	7820	Medical	Not Reserved	No	No	0	Cbc , Cect -Thorax/ Abdomen/Pelvis , Histopathology (Hpe) , Lft , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1969	Tertiary	Medical Oncology - Phase 3	28360000216	CT for Ureter / Bladder / Urethra-Methotrexate + Vinblastin + Doxorubicin + Cisplatin-Cycle	6600	6600	6270	5610	Medical	Not Reserved	No	No	0	2-D Echo , Cbc , Cect -Thorax/ Abdomen/Pelvis , Ecg , Histopathology (Hpe) , Lft , Mri , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1970	Tertiary	Medical Oncology - Phase 3	28360000217	CT for Ureter / Bladder / Urethra-Paclitaxel + Carboplatin-Duration + Cycle	15100	15100	14345	12835	Medical	Not Reserved	No	No	0	Cbc , Cect -Thorax/ Abdomen/Pelvis , Histopathology (Hpe) , Lft , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1971	Tertiary	Medical Oncology - Phase 3	28360000218	CT for Ureter / Bladder / Urethra-Paclitaxel-Duration + Cycle	5700	5700	5415	4845	Medical	Not Reserved	No	No	0	Cbc , Cect -Thorax/ Abdomen/Pelvis , Histopathology (Hpe) , Lft , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1972	Tertiary	Medical Oncology - Phase 3	28360000219	CT for Vulvar Cancer-Cisplatin + 5 FU-Cycle	7600	7600	7220	6460	Medical	Not Reserved	No	No	0	Cbc , Histopathology (Hpe) , Lft , Mri-Pelvis , Rbs , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
1973	Tertiary	Medical Oncology - Phase 3	28360000220	CT for Vulvar Cancer-Cisplatin-Duration + Cycle	2200	2200	2090	1870	Medical	Not Reserved	No	No	0	Cbc , Histopathology (Hpe) , Lft , Mri-Pelvis , Rbs , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College& Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1974	Tertiary	Medical Oncology - Phase 3	28360000221	CT for Wilms Tumor-Cyclo + Dox + Etop + Vinc + Actino . D-Duration + Cycle	12300	12300	11685	10455	Medical	Not Reserved	No	No	0	2-D Echo , Biochemistry , Biopsy , Cbc , Ct-Chest Abdomen , Usg	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Tranfusion Slips	No	No	Yes	No	Yes	1
1975	Tertiary	Medical Oncology - Phase 3	28360000222	CT for Wilms Tumor-VINC + ACTIN. D + DOX-Duration + Cycle	4200	4200	3990	3570	Medical	Not Reserved	No	No	0	2-D Echo , Biochemistry , Biopsy , Cbc , Ct-Chest Abdomen , Usg	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Tranfusion Slips	No	No	Yes	No	Yes	1
1976	Tertiary	Medical Oncology - Phase 3	28360000223	CT for Wilms Tumor-VINC + ACTIN. D- Duration + Cycle	3000	3000	2850	2550	Medical	Not Reserved	No	No	0	Biochemistry , Biopsy , Cbc , Ct-Chest Abdomen , Usg	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Tranfusion Slips	No	No	Yes	No	Yes	1
1977	Tertiary	Emergency Room Packages (Care requiring less than 12 hrs stay) - Phase 3	28480000002	Cardiopulmonary emergency-Emergency with stable cardiopulmonary status	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Clinical Notes With Planned Line Of Treatment , Ecg	Clinical Notes/Discharge Summary With Planned Line Of Treatment	No	No	Yes	No	No	Not Applicable(NA)
1978	Tertiary	Emergency Room Packages (Care requiring less than 12 hrs stay) - Phase 3	28480000003	Cardiopulmonary emergency-Emergency with unstable cardiopulmonary status with resuscitation	10000	10000	9500	8500	Medical	Not Reserved	Yes	No	0	Clinical Notes With Planned Line Of Treatment , Ecg	Clinical Notes/Discharge Summary With Planned Line Of Treatment	No	No	Yes	No	No	Not Applicable(NA)
1979	Tertiary	Surgical Oncology - Phase 3	28450000031	Carotid Body tumour - Excision	20000	20000	19000	17000	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Usg- Neck/Colour Doppler	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Intra Procedure Clinical Photograph	No	No	Yes	No	No	7

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1980	Tertiary	General Surgery - Phase 3	2835000017	Carotid Body tumour - Excision	20000	20000	19000	17000	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Usg- Neck/Colour Doppler	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Intra Procedure Clinical Photograph	No	No	Yes	No	No	7
1981	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	2832000007	Carotid Body tumour - Excision	20000	20000	19000	17000	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Usg- Neck/Colour Doppler	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Intra Procedure Clinical Photograph	No	No	Yes	No	No	7
1982	Tertiary	Neurosurgery - Phase 3	2837000012	Carpal Tunnel Release (including pre and post Op. MRI)	10000	10000	9500	8500	Surgical	Not Reserved	Yes	No	0	Clinical History , Mri , Ncv (Nerve Conduction Velocity)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Mri , Post Procedure Scar Photo	No	No	Yes	No	No	3
1983	Tertiary	Orthopaedics - Phase 3	2840000012	Carpal Tunnel Release (including pre and post Op. MRI)	10000	10000	9500	8500	Surgical	Not Reserved	Yes	No	0	Clinical History , Mri , Ncv (Nerve Conduction Velocity)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Mri , Post Procedure Scar Photo	No	No	Yes	No	No	3
1984	Tertiary	Cardiology - Phase 3	2831000007	Catheter directed Thrombolysis-For Deep vein thrombosis (DVT)	30800	30800	29260	26180	Medical	Not Reserved	No	No	0	Detailed Clinical Notes , Doppler Report	Detailed Discharge Summary , Invoice Of Catheter Used , Invoice Of Thrombolytic Drug (Tpa) Used , Post Procedure Colour Doppler (Affected Limb/Part)	No	No	Yes	No	No	2
1985	Tertiary	Interventional Neuroradiology - Phase 3	2849000002	Catheter directed Thrombolysis-For Deep vein thrombosis (DVT)	30800	30800	29260	26180	Medical	Not Reserved	No	No	0	Detailed Clinical Notes , Doppler Report	Detailed Discharge Summary , Invoice Of Catheter Used , Invoice Of Thrombolytic Drug (Tpa) Used , Post Procedure Colour Doppler (Affected Limb/Part)	No	No	Yes	No	No	2

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1986	Tertiary	Cardiology - Phase 3	28310000008	Catheter directed Thrombolysis-For Mesenteric Thrombosis	30800	30800	29260	26180	Medical	Not Reserved	No	No	0	Detailed Clinical Notes , Doppler Report	Detailed Discharge Summary , Invoice Of Catheter Used , Invoice Of Thrombolytic Drug (Tpa) Used , Post Procedure Colour Doppler (Affected Limb/Part)	No	No	Yes	No	No	2
1987	Tertiary	Interventional Neuroradiology - Phase 3	28490000003	Catheter directed Thrombolysis-For Mesenteric Thrombosis	30800	30800	29260	26180	Medical	Not Reserved	No	No	0	Detailed Clinical Notes , Doppler Report	Detailed Discharge Summary , Invoice Of Catheter Used , Invoice Of Thrombolytic Drug (Tpa) Used , Post Procedure Colour Doppler (Affected Limb/Part)	No	No	Yes	No	No	2
1988	Tertiary	Interventional Neuroradiology - Phase 3	28490000004	Catheter directed Thrombolysis-For Peripheral vessels	30800	30800	29260	26180	Medical	Not Reserved	No	No	0	Detailed Clinical Notes , Doppler Report	Detailed Discharge Summary , Invoice Of Catheter Used , Invoice Of Thrombolytic Drug (Tpa) Used , Post Procedure Colour Doppler (Affected Limb/Part)	No	No	Yes	No	No	2
1989	Tertiary	Cardiology - Phase 3	28310000009	Catheter directed Thrombolysis-For Peripheral vessels	30800	30800	29260	26180	Medical	Not Reserved	No	No	0	Detailed Clinical Notes , Doppler Report	Detailed Discharge Summary , Invoice Of Catheter Used , Invoice Of Thrombolytic Drug (Tpa) Used , Post Procedure Colour Doppler (Affected Limb/Part)	No	No	Yes	No	No	2
1990	Tertiary	Surgical Oncology - Phase 3	28450000032	Central airway tumour debulking	22800	22800	21660	19380	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment, Ct/Mri, Histopathology (Hpe)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Photographs Of Surgical Site	No	No	Yes	No	No	5
1991	Tertiary	Interventional Neuroradiology - Phase 3	28490000005	Cerebral & Spinal AVM embolization - Using Histoacryl (per sitting)-Cerebral AVM embolization - Using Histoacryl (per sitting)	100000	100000	95000	85000	Medical	Not Reserved	No	No	0	Ct/Mri/Dsa , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Invoice/Bar-Code Of Histoacryl Used , Radiographic Photograph / Ct / Mri / Angio	No	No	Yes	No	No	5

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1992	Tertiary	Interventional Neuroradiology - Phase 3	2849000006	Cerebral & Spinal AVM embolization - Using Histoacryl (per sitting)-Spinal AVM embolization - Using Histoacryl (per sitting)	100000	100000	95000	85000	Medical	Not Reserved	No	No	0	Ct/Mri/Dsa , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Invoice/Bar-Code Of Histoacryl Used , Radiographic Photograph / Ct / Mri / Angio	No	No	Yes	No	No	5
1993	Tertiary	Neurosurgery - Phase 3	2837000013	Cervical Disc Multiple level without Fusion	40000	40000	38000	34000	Surgical	Not Reserved	No	No	0	Detailed Clinical Notes , Mri	Cervical Spine X-Ray , Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Scar Photo	No	No	Yes	No	No	7
1994	Tertiary	Surgical Oncology - Phase 3	2845000033	Chamberlain procedure	22200	22200	21090	18870	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Ct-Thorax	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Photographs Of Surgical Site	No	No	Yes	No	No	2
1995	Tertiary	Surgical Oncology - Phase 3	2845000034	Channel TURP	22800	22800	21660	19380	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Psa , Usg- Prostate	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe)	No	No	Yes	No	No	4
1996	Tertiary	Burns Management - Phase 3	2847000001	Chemical burns: With significant facial scarring and/or loss of function; Includes % TBSA skin grafted, flap cover, follow-up dressings etc. as deemed necessary; Surgical procedures are required for deep burns that are not amenable to heal with dressings alone.	60000	60000	57000	51000	Surgical	Not Reserved	No	No	0	Circumstances That Led To Chemical Burns , Clinical Photograph (With Rule Of Chart 9) , Mic	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Lab Investigations , Post Treatment Clinical Photograph Showing Treated Burns , X-Rays Or Other Diagnostic Procedures Done	No	No	Yes	No	No	19
1997	Tertiary	Burns Management - Phase 3	2847000002	Chemical burns: Without significant facial scarring and/or loss of function; Includes % TBSA skin grafted, flap cover, follow-up dressings etc. as deemed necessary; Surgical procedures are required for deep burns that are not amenable to heal with dressings alone.	40000	40000	38000	34000	Surgical	Not Reserved	No	No	0	Circumstances That Led To Chemical Burns , Clinical Photograph (With Rule Of Chart 9) , Mic	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Lab Investigations , Post Treatment Clinical Photograph Showing Treated Burns , X-Rays Or Other Diagnostic Procedures Done	No	No	Yes	No	No	19

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
1998	Tertiary	Paediatric surgery - Phase 3	28410000028	Cholecystectomy-With Exploration of CBD Lap.	22800	22800	21660	19380	Surgical	Not Reserved	No	No	0	Detailed Clinical Notes , Usg	Detailed Discharge Summary , Detailed Operative Notes , Intra Procedure Clinical Photograph	No	No	Yes	No	No	6
1999	Tertiary	General Surgery - Phase 3	28350000018	Cholecystectomy-With Exploration of CBD Lap.	22800	22800	21660	19380	Surgical	Not Reserved	No	No	0	Detailed Clinical Notes , Usg	Detailed Discharge Summary , Detailed Operative Notes , Intra Procedure Clinical Photograph	No	No	Yes	No	No	6
2000	Tertiary	General Surgery - Phase 3	28350000019	Cholecystectomy-With Exploration of CBD Open	22800	22800	21660	19380	Surgical	Not Reserved	No	No	0	Detailed Clinical Notes , Usg	Detailed Discharge Summary , Detailed Operative Notes , Intra Procedure Clinical Photograph	No	No	Yes	No	No	6
2001	Tertiary	Paediatric surgery - Phase 3	28410000029	Cholecystectomy-With Exploration of CBD Open	22800	22800	21660	19380	Surgical	Not Reserved	No	No	0	Detailed Clinical Notes , Usg	Detailed Discharge Summary , Detailed Operative Notes , Intra Procedure Clinical Photograph	No	No	Yes	No	No	6
2002	Tertiary	Paediatric surgery - Phase 3	28410000030	Cholecystectomy-Without Exploration of CBD - Lap.	22800	22800	21660	19380	Surgical	Not Reserved	No	No	0	Detailed Clinical Notes , Usg	Detailed Discharge Summary , Detailed Operative Notes , Intra Procedure Clinical Photograph	No	No	Yes	No	No	6
2003	Tertiary	General Surgery - Phase 3	28350000020	Cholecystectomy-Without Exploration of CBD - Lap.	22800	22800	21660	19380	Surgical	Not Reserved	No	No	0	Detailed Clinical Notes , Usg	Detailed Discharge Summary , Detailed Operative Notes , Intra Procedure Clinical Photograph	No	No	Yes	No	No	6

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2004	Tertiary	Paediatric surgery - Phase 3	28410000031	Cholecystectomy-Without Exploration of CBD - Open	22800	22800	21660	19380	Surgical	Not Reserved	No	No	0	Detailed Clinical Notes , Usg	Detailed Discharge Summary , Detailed Operative Notes , Intra Procedure Clinical Photograph	No	No	Yes	No	No	6
2005	Tertiary	General Surgery - Phase 3	28350000021	Cholecystectomy-Without Exploration of CBD - Open	22800	22800	21660	19380	Surgical	Not Reserved	No	No	0	Detailed Clinical Notes , Usg	Detailed Discharge Summary , Detailed Operative Notes , Intra Procedure Clinical Photograph	No	No	Yes	No	No	6
2006	Tertiary	Neo-natal care Packages - Phase 3	28510000004	Chronic Care Package: If the baby requires stay beyond the upper limit of usual stay in Package no 0004 or 0005 for conditions like severe BPD requiring respiratory support, severe NEC requiring prolonged TPN support - Per day	3000	3000	2850	2550	Medical	Not Reserved	No	No	0	Detailed Clinical Notes , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
2007	Tertiary	Plastic & reconstructive Surgery - Phase 3	28430000001	Cleft Lip and Palate Surgery (per stage)	15000	15000	14250	12750	Surgical	Not Reserved	No	No	0	Clinical Photograph , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Clinical Photograph	No	No	Yes	No	No	3
2008	Tertiary	Oral and Maxillofacial Surgery - Phase 3	28520000001	Cleft Lip and Palate Surgery (per stage)	15000	15000	14250	12750	Surgical	Not Reserved	No	No	0	Clinical Photograph , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Clinical Photograph	No	No	Yes	No	No	3
2009	Tertiary	Paediatric surgery - Phase 3	28410000032	Cleft Lip and Palate Surgery (per stage)	15000	15000	14250	12750	Surgical	Not Reserved	No	No	0	Clinical Photograph , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Clinical Photograph	No	No	Yes	No	No	3

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College& Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2010	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	2832000008	Closed Mitral Valvotomy including thoracotomy	57000	57000	54150	48450	Surgical	Not Reserved	No	No	0	Detailed Clinical Notes , Echo/Doppler Report	Detailed Discharge Summary , Detailed Operative Notes	No	No	Yes	No	No	7
2011	Tertiary	General Surgery - Phase 3	2835000022	Closure of Burst Abdomen	15000	15000	14250	12750	Surgical	Not Reserved	Yes	No	0	Clinical Notes Describing The Original Surgery That Led To Burst Abdomen , X-Ray/Usq/Ct Scan Abdomen	Detailed Discharge Summary , Detailed Operative Notes , Intra Procedure Clinical Photograph	No	No	Yes	No	No	6
2012	Tertiary	Paediatric surgery - Phase 3	2841000033	Closure of Burst Abdomen	15000	15000	14250	12750	Surgical	Not Reserved	Yes	No	0	Clinical Notes Describing The Original Surgery That Led To Burst Abdomen , X-Ray/Usq/Ct Scan Abdomen	Detailed Discharge Summary , Detailed Operative Notes , Intra Procedure Clinical Photograph	No	No	Yes	No	No	6
2013	Tertiary	Obstetrics & Gynaecology - Phase 3	2838000008	Closure of Burst Abdomen	15000	15000	14250	12750	Surgical	Not Reserved	Yes	No	0	Clinical Notes Describing The Original Surgery That Led To Burst Abdomen , X-Ray/Usq/Ct Scan Abdomen	Detailed Discharge Summary , Detailed Operative Notes , Intra Procedure Clinical Photograph	No	No	Yes	No	No	6
2014	Tertiary	Paediatric surgery - Phase 3	2841000034	Closure of stoma	14500	14500	13775	12325	Surgical	Not Reserved	Yes	No	0	Clinical Notes Detailing Why Colostomy Was Done? , Clinical Photograph	Detailed Discharge Summary , Detailed Operative Notes , Post Procedure Clinical Photograph	No	No	Yes	No	No	4
2015	Tertiary	Surgical Oncology - Phase 3	2845000037	Closure of stoma	14500	14500	13775	12325	Surgical	Not Reserved	Yes	No	0	Clinical Notes Detailing Why Colostomy Was Done? , Clinical Photograph	Detailed Discharge Summary , Detailed Operative Notes , Post Procedure Clinical Photograph	No	No	Yes	No	No	4

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2016	Tertiary	General Surgery - Phase 3	2835000023	Closure of stoma	14500	14500	13775	12325	Surgical	Not Reserved	Yes	No	0	Clinical Notes Detailing Why Colostomy Was Done? , Clinical Photograph	Detailed Discharge Summary , Detailed Operative Notes , Post Procedure Clinical Photograph	No	No	Yes	No	No	4
2017	Tertiary	Surgical Oncology - Phase 3	2845000038	Colostomy	14000	14000	13300	11900	Surgical	Not Reserved	Yes	No	0	Ct/Mri/Colonoscopy , Detailed Clinical Notes	Detailed Operative Notes , Detailed Surgery Notes , Post Procedure Clinical Photograph	No	No	Yes	No	No	7
2018	Tertiary	General Surgery - Phase 3	2835000024	Colostomy	14000	14000	13300	11900	Surgical	Not Reserved	Yes	No	0	Ct/Mri/Colonoscopy , Detailed Clinical Notes	Detailed Operative Notes , Detailed Surgery Notes , Post Procedure Clinical Photograph	No	No	Yes	No	No	7
2019	Tertiary	Paediatric surgery - Phase 3	2841000035	Colostomy	14000	14000	13300	11900	Surgical	Not Reserved	Yes	No	0	Ct/Mri/Colonoscopy , Detailed Clinical Notes	Detailed Operative Notes , Detailed Surgery Notes , Post Procedure Clinical Photograph	No	No	Yes	No	No	7
2020	Tertiary	Surgical Oncology - Phase 3	2845000039	Complete Excision of Growth from Tongue only (Inclusive of Histopathology)	9400	9400	8930	7990	Surgical	Not Reserved	Yes	No	0	Biopsy , Clinical Photograph , Detailed Clinical Notes , Fnac	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph	No	No	Yes	No	Yes	1
2021	Tertiary	General Surgery - Phase 3	2835000025	Complete Excision of Growth from Tongue only (Inclusive of Histopathology)	9400	9400	8930	7990	Surgical	Not Reserved	Yes	No	0	Biopsy , Clinical Photograph , Detailed Clinical Notes , Fnac	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph	No	No	Yes	No	Yes	1

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2022	Tertiary	Paediatric surgery - Phase 3	28410000036	Complete Excision of Growth from Tongue only (Inclusive of Histopathology)	9400	9400	8930	7990	Surgical	Not Reserved	Yes	No	0	Biopsy , Clinical Photograph , Detailed Clinical Notes , Fnac	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph	No	No	Yes	No	Yes	1
2023	Tertiary	Surgical Oncology - Phase 3	28450000040	Composite resection (Oral Cavity)	40000	40000	38000	34000	Surgical	Not Reserved	No	No	0	Biopsy , Clinical Photograph , Ct Report , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Scar Photograph	No	No	Yes	No	No	8
2024	Tertiary	Paediatric surgery - Phase 3	28410000037	Congenital Atresia & Stenosis of Small Intestine	23000	23000	21850	19550	Surgical	Not Reserved	Yes	No	0	Ct/Mri Abdomen , Detailed Clinical Notes , X-Ray	Detailed Discharge Summary , Detailed Operative Notes , Intra Procedure Clinical Photograph	No	No	Yes	No	No	6
2025	Tertiary	General Surgery - Phase 3	28350000026	Congenital Atresia & Stenosis of Small Intestine	23000	23000	21850	19550	Surgical	Not Reserved	Yes	No	0	Ct/Mri Abdomen , Detailed Clinical Notes , X-Ray	Detailed Discharge Summary , Detailed Operative Notes , Intra Procedure Clinical Photograph	No	No	Yes	No	No	6
2026	Tertiary	Paediatric surgery - Phase 3	28410000038	Congenital Diaphragmatic Hernia	25000	25000	23750	21250	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Us/CT Scan Stills , X-Ray(Chest) Ap/Lat	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Foetal Cardiogram , X-Ray(Chest) Ap/Lat	No	No	Yes	No	No	5
2027	Tertiary	Polytrauma - Phase 3	28530000001	Conservative Management of Head Injury-Depressed Fracture	5000	5000	4750	4250	Medical	Not Reserved	Yes	No	0	Clinical Notes With Planned Line Of Treatment , X-Ray Film With Report	Detailed Discharge Summary	No	No	Yes	No	No	10

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2028	Tertiary	Polytrauma - Phase 3	2853000002	Conservative Management of Head Injury- Severe	1000	1000	950	850	Medical	Not Reserved	Yes	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Discharge Summary	No	No	Yes	No	No	10
2029	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	2832000010	Coronary artery bypass grafting (CABG)	75000	75000	71250	63750	Surgical	Not Reserved	No	No	0	2-D Echo , Coronary Angiography (Cag) , Lvef	Detailed Discharge Summary , Detailed Operative Notes	No	No	Yes	No	No	10
2030	Tertiary	Neurosurgery - Phase 3	2837000015	Cranial Nerve Anastomosis	32000	32000	30400	27200	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Mri	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure (Ct) , Post Procedure Scar Photo	No	No	Yes	No	No	5
2031	Tertiary	Neurosurgery - Phase 3	2837000016	CranioPlasty with Endogenous graft	20000	20000	19000	17000	Surgical	Not Reserved	No	No	0	Ct/Mri	Detailed Procedure/Operative Notes , Post Procedure (Ct/X-Ray) , Post Procedure Clinical Photograph	No	No	Yes	No	No	7
2032	Tertiary	Neurosurgery - Phase 3	2837000017	Craniostenosis	28000	28000	26600	23800	Surgical	Not Reserved	Yes	No	0	Ct/Mri , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure (Ct) , Post Procedure Scar Photo	No	No	Yes	No	No	7
2033	Tertiary	Polytrauma - Phase 3	2853000003	Craniotomy and evacuation of Haematoma with fixation of fracture of long bone-Extradural hematoma along with fixation of fracture of 2 or more long bone.	75000	75000	71250	63750	Surgical	Not Reserved	Yes	No	0	Clinical Notes Detailing The Injury And Need Of Surgery , Fir/Mic , X-Ray/Ct/Mri (Of Both Head & Affected Long Bone)	Detailed Discharge Summary , Detailed Operative Notes , Post-Op Clinical Photograph , Post-Op X-Ray Showing Craniotomy Evidence And Implant For Fixation	No	No	Yes	No	No	10

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2034	Tertiary	Polytrauma - Phase 3	28530000004	Craniotomy and evacuation of Haematoma with fixation of fracture of long bone-Extradural hematoma along with fixation of fracture of single long bone	60000	60000	57000	51000	Surgical	Not Reserved	Yes	No	0	Clinical Notes Detailing The Injury And Need Of Surgery , Fir/Mlc , X-Ray/Ct/Mri (Of Both Head & Affected Long Bone)	Detailed Discharge Summary , Detailed Operative Notes , Post-Op Clinical Photograph , Post-Op X-Ray Showing Craniotomy Evidence And Implant For Fixation	No	No	Yes	No	No	10
2035	Tertiary	Polytrauma - Phase 3	28530000005	Craniotomy and evacuation of Haematoma with fixation of fracture of long bone-Subdural hematoma along with fixation of fracture of 2 or more long bone.	75000	75000	71250	63750	Surgical	Not Reserved	Yes	No	0	Clinical Notes Detailing The Injury And Need Of Surgery , Fir/Mlc , X-Ray/Ct/Mri (Of Both Head & Affected Long Bone)	Detailed Discharge Summary , Detailed Operative Notes , Post-Op Clinical Photograph , Post-Op X-Ray Showing Craniotomy Evidence And Implant For Fixation	No	No	Yes	No	No	10
2036	Tertiary	Polytrauma - Phase 3	28530000006	Craniotomy and evacuation of Haematoma with fixation of fracture of long bone-Subdural hematoma along with fixation of fracture of single long bone	60000	60000	57000	51000	Surgical	Not Reserved	Yes	No	0	Clinical Notes Detailing The Injury And Need Of Surgery , Fir/Mlc , X-Ray/Ct/Mri (Of Both Head & Affected Long Bone)	Detailed Discharge Summary , Detailed Operative Notes , Post-Op Clinical Photograph , Post-Op X-Ray Showing Craniotomy Evidence And Implant For Fixation	No	No	Yes	No	No	10
2037	Tertiary	Neo-natal care Packages - Phase 3	28510000005	Critical Care Neonatal Package (Rs. 7000 per day, maximum of Rs. 1,20,000 – pre-auth after 10 days): Babies with birthweight of <1200 g or Babies of any birthweight with at least one of the following conditions: • Severe Respiratory Failure requiring High Frequency Ventilation or inhaled Nitric Oxide (INO) • Multisystem failure requiring multiple organ support including mechanical	7000	7000	6650	5950	Medical	Not Reserved	No	No	0	Claim Number Of Having Utilized Package No Mn004a Or Mn005a And Notes Mentioning Need For Stay Beyond Prescribed Upper Limit	Detailed Discharge Summary , Detailed Icps , Evidence Of All Investigations Done	No	No	Yes	No	No	21
2038	Tertiary	Surgical Oncology - Phase 3	28450000041	Curopsy / Sclerotherapy	19200	19200	18240	16320	Surgical	Not Reserved	No	No	0	Detailed Clinical Notes	Detailed Discharge Summary	No	No	Yes	No	No	3
2039	Tertiary	Paediatric surgery - Phase 3	28410000039	Cystojejunostomy / Cystogastrostomy- Cystojejunostomy - Lap.	20000	20000	19000	17000	Surgical	Not Reserved	Yes	No	0	Ct/Usg , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Operative Notes , Post Procedure Clinical Photograph , Scar Photograph	No	No	Yes	No	No	6

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2040	Tertiary	General Surgery - Phase 3	2835000027	Cystojejunostomy / Cystogastrostomy- Cystojejunostomy - Lap.	20000	20000	19000	17000	Surgical	Not Reserved	Yes	No	0	Ct/Usg , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Operative Notes , Post Procedure Clinical Photograph , Scar Photograph	No	No	Yes	No	No	6
2041	Tertiary	Paediatric surgery - Phase 3	2841000040	Cystojejunostomy / Cystogastrostomy- Cystojejunostomy - Open	20000	20000	19000	17000	Surgical	Not Reserved	Yes	No	0	Ct/Usg , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Operative Notes , Post Procedure Clinical Photograph , Scar Photograph	No	No	Yes	No	No	6
2042	Tertiary	General Surgery - Phase 3	2835000028	Cystojejunostomy / Cystogastrostomy- Cystojejunostomy - Open	20000	20000	19000	17000	Surgical	Not Reserved	Yes	No	0	Ct/Usg , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Operative Notes , Post Procedure Clinical Photograph , Scar Photograph	No	No	Yes	No	No	6
2043	Tertiary	Paediatric surgery - Phase 3	2841000041	Cystojejunostomy / Cystogastrostomy- Cystogastrostomy - Lap.	20000	20000	19000	17000	Surgical	Not Reserved	Yes	No	0	Ct/Usg , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Operative Notes , Post Procedure Clinical Photograph , Scar Photograph	No	No	Yes	No	No	6
2044	Tertiary	General Surgery - Phase 3	2835000029	Cystojejunostomy / Cystogastrostomy- Cystogastrostomy - Lap.	20000	20000	19000	17000	Surgical	Not Reserved	Yes	No	0	Ct/Usg , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Operative Notes , Post Procedure Clinical Photograph , Scar Photograph	No	No	Yes	No	No	6
2045	Tertiary	General Surgery - Phase 3	2835000030	Cystojejunostomy / Cystogastrostomy- Cystogastrostomy - Open	20000	20000	19000	17000	Surgical	Not Reserved	Yes	No	0	Ct/Usg , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Operative Notes , Post Procedure Clinical Photograph , Scar Photograph	No	No	Yes	No	No	6

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2046	Tertiary	Paediatric surgery - Phase 3	28410000042	Cystojejunostomy / Cystogastrostomy- Cystogastrostomy - Open	20000	20000	19000	17000	Surgical	Not Reserved	Yes	No	0	Ct/Usg , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Operative Notes , Post Procedure Clinical Photograph , Scar Photograph	No	No	Yes	No	No	6
2047	Tertiary	Urology - Phase 3	28460000019	Cystolithotomy - Open, including cystoscopy-Open - including cystoscopy	18500	18500	17575	15725	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , X Ray- Kub/Usg/lvp/Ncct	Detailed Discharge Summary , Detailed Procedure/Operative Notes	No	No	Yes	No	No	2
2048	Tertiary	Paediatric surgery - Phase 3	28410000043	Cystolithotomy - Open, including cystoscopy-Open - including cystoscopy	18500	18500	17575	15725	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , X Ray- Kub/Usg/lvp/Ncct	Detailed Discharge Summary , Detailed Procedure/Operative Notes	No	No	Yes	No	No	2
2049	Tertiary	Paediatric surgery - Phase 3	28410000044	Cystolithotripsy / Urethral Stone endoscopic, including cystoscopy- Cystolithotripsy endoscopic, including cystoscopy	18500	18500	17575	15725	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , X Ray- Kub/Usg/lvp/Ncct	Detailed Discharge Summary , Detailed Procedure/Operative Notes	No	No	Yes	No	Yes	1
2050	Tertiary	Urology - Phase 3	28460000020	Cystolithotripsy / Urethral Stone endoscopic, including cystoscopy- Cystolithotripsy endoscopic, including cystoscopy	18500	18500	17575	15725	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , X Ray- Kub/Usg/lvp/Ncct	Detailed Discharge Summary , Detailed Procedure/Operative Notes	No	No	Yes	No	Yes	1
2051	Tertiary	Paediatric surgery - Phase 3	28410000045	Cystolithotripsy / Urethral Stone endoscopic, including cystoscopy-Urethral Stone removal endoscopic, including cystoscopy	18500	18500	17575	15725	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , X Ray- Kub/Usg/lvp/Ncct	Detailed Discharge Summary , Detailed Procedure/Operative Notes	No	No	Yes	No	Yes	1

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College& Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2052	Tertiary	Urology - Phase 3	2846000021	Cystolithotripsy / Urethral Stone endoscopic, including cystoscopy-Urethral Stone removal endoscopic, including cystoscopy	18500	18500	17575	15725	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , X Ray- Kub/Usq/lvp/Ncct	Detailed Discharge Summary , Detailed Procedure/Operative Notes	No	No	Yes	No	Yes	1
2053	Tertiary	Urology - Phase 3	2846000022	DJ Stent Removal	3000	3000	2850	2550	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Discharge Summary , X-Ray Film With Report	Detailed Discharge Summary	No	No	Yes	No	Yes	1
2054	Tertiary	Urology - Phase 3	2846000023	DJ stenting including cystoscopy, ureteric catheterization, retrograde pyelogram	10000	10000	9500	8500	Surgical	Not Reserved	No	No	0	Ct-lvp/lvp , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes Detailing Findings Of Cystoscopy/ Retrogradepyelogram And Ureteric Catheterization , Post Procedure X-Ray Showing Stent	No	No	Yes	No	Yes	1
2055	Tertiary	Paediatric surgery - Phase 3	2841000046	DJ stenting including cystoscopy, ureteric catheterization, retrograde pyelogram	10000	10000	9500	8500	Surgical	Not Reserved	No	No	0	Ct-lvp/lvp , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes Detailing Findings Of Cystoscopy/ Retrogradepyelogram And Ureteric Catheterization , Post Procedure X-Ray Showing Stent	No	No	Yes	No	Yes	1
2056	Tertiary	Paediatric surgery - Phase 3	2841000047	Decortication (Pleurectomy)	28000	28000	26600	23800	Surgical	Not Reserved	Yes	No	0	Biopsy , Ct/Usq , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe)	No	No	Yes	No	No	3
2057	Tertiary	General Surgery - Phase 3	2835000031	Decortication (Pleurectomy)	28000	28000	26600	23800	Surgical	Not Reserved	Yes	No	0	Biopsy , Ct/Usq , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe)	No	No	Yes	No	No	3

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2058	Tertiary	Paediatric surgery - Phase 3	28410000048	Deep neck abscess drainage/ Post trauma neck exploration-Deep neck abscess drainage	16800	16800	15960	14280	Surgical	Not Reserved	Yes	No	0	Clinical Photograph , Ct Scan , Detailed Clinical Notes , Relevant Investigations (Establishing Diagnosis)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Clinical Photograph Of Affected Part , Pus Culture	No	No	Yes	No	No	2
2059	Tertiary	General Surgery - Phase 3	28350000032	Deep neck abscess drainage/ Post trauma neck exploration-Deep neck abscess drainage	16800	16800	15960	14280	Surgical	Not Reserved	Yes	No	0	Clinical Photograph , Ct Scan , Detailed Clinical Notes , Relevant Investigations (Establishing Diagnosis)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Clinical Photograph Of Affected Part , Pus Culture	No	No	Yes	No	No	2
2060	Tertiary	Otorhinolaryngology (ENT) - Phase 3	28330000012	Deep neck abscess drainage/ Post trauma neck exploration-Deep neck abscess drainage	16800	16800	15960	14280	Surgical	Not Reserved	Yes	No	0	Clinical Photograph , Ct Scan , Detailed Clinical Notes , Relevant Investigations (Establishing Diagnosis)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Clinical Photograph Of Affected Part , Pus Culture	No	No	Yes	No	No	2
2061	Tertiary	General Surgery - Phase 3	28350000033	Deep neck abscess drainage/ Post trauma neck exploration-Post trauma neck exploration	16800	16800	15960	14280	Surgical	Not Reserved	No	No	0	Clinical Photograph , Ct Scan , Detailed Clinical Notes , Relevant Investigations (Establishing Diagnosis)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Clinical Photograph Of Affected Part , Pus Culture	No	No	Yes	No	No	2
2062	Tertiary	Paediatric surgery - Phase 3	28410000049	Deep neck abscess drainage/ Post trauma neck exploration-Post trauma neck exploration	16800	16800	15960	14280	Surgical	Not Reserved	No	No	0	Clinical Photograph , Ct Scan , Detailed Clinical Notes , Relevant Investigations (Establishing Diagnosis)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Clinical Photograph Of Affected Part , Pus Culture	No	No	Yes	No	No	2
2063	Tertiary	Otorhinolaryngology (ENT) - Phase 3	28330000013	Deep neck abscess drainage/ Post trauma neck exploration-Post trauma neck exploration	16800	16800	15960	14280	Surgical	Not Reserved	No	No	0	Clinical Photograph , Ct Scan , Detailed Clinical Notes , Relevant Investigations (Establishing Diagnosis)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Clinical Photograph Of Affected Part , Pus Culture	No	No	Yes	No	No	2

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2064	Tertiary	Urology - Phase 3	2846000024	Deflux for VUR	1200	1200	1140	1020	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Ivu	No	No	Yes	No	No	Not Applicable(NA)
2065	Tertiary	Neurosurgery - Phase 3	2837000018	Depressed Fracture	40000	40000	38000	34000	Surgical	Not Reserved	Yes	No	0	Ct Scan , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure (CT) , Post Procedure Scar Photo	No	No	Yes	No	No	7
2066	Tertiary	Plastic & reconstructive Surgery - Phase 3	2843000002	Diabetic Foot – Surgery	30000	30000	28500	25500	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment Detailing Diabetic Foot Extent Of Damage , Clinical Photograph	Detailed Discharge Summary , Detailed Operative Notes , Post Procedure Clinical Photograph	No	No	Yes	No	No	3
2067	Tertiary	Surgical Oncology - Phase 3	28450000042	Diagnostic / Staging laparoscopy	9700	9700	9215	8245	Surgical	Not Reserved	Yes	No	0	Admission Notes Comprising Of History And Examination With Indications For The Procedure , Relevant Investigations (Establishing Diagnosis)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Intra-Operative Photograph With Date & Patient Id , Pic Of Gross Specimen Removed , Progress Notes	No	No	Yes	No	No	3
2068	Tertiary	Paediatric surgery - Phase 3	28410000050	Diagnostic / Staging laparoscopy	9700	9700	9215	8245	Surgical	Not Reserved	Yes	No	0	Admission Notes Comprising Of History And Examination With Indications For The Procedure , Relevant Investigations (Establishing Diagnosis)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Intra-Operative Photograph With Date & Patient Id , Pic Of Gross Specimen Removed , Progress Notes	No	No	Yes	No	No	3
2069	Tertiary	Obstetrics & Gynaecology - Phase 3	28380000009	Diagnostic / Staging laparoscopy	9700	9700	9215	8245	Surgical	Not Reserved	Yes	No	0	Admission Notes Comprising Of History And Examination With Indications For The Procedure , Relevant Investigations (Establishing Diagnosis)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Intra-Operative Photograph With Date & Patient Id , Pic Of Gross Specimen Removed , Progress Notes	No	No	Yes	No	No	3

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2070	Tertiary	Paediatric surgery - Phase 3	28410000051	Diagnostic Cystoscopy	5000	5000	4750	4250	Surgical	Not Reserved	No	No	0	Detailed Clinical Notes , X-Ray/Usg/Ct Scan/Mri	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra Procedure Photograph	No	No	Yes	No	Yes	1
2071	Tertiary	Urology - Phase 3	28460000025	Diagnostic Cystoscopy	5000	5000	4750	4250	Surgical	Not Reserved	No	No	0	Detailed Clinical Notes , X-Ray/Usg/Ct Scan/Mri	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra Procedure Photograph	No	No	Yes	No	Yes	1
2072	Tertiary	Surgical Oncology - Phase 3	28450000043	Diagnostic thoracoscopy	15000	15000	14250	12750	Surgical	Not Reserved	No	No	0	Detailed Clinical Notes , Radiological Evidence For Indication	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Photographs Of Surgical Site	No	No	Yes	No	No	3
2073	Tertiary	Paediatric surgery - Phase 3	28410000052	Diaphragmatic Repair	32000	32000	30400	27200	Surgical	Not Reserved	No	No	0	Ct-Chest , Detailed Clinical Notes , X-Ray (Chest)	Detailed Discharge Summary , Detailed Procedure Notes	No	No	Yes	No	No	10
2074	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	28320000012	Diaphragmatic Repair	32000	32000	30400	27200	Surgical	Not Reserved	No	No	0	Ct-Chest , Detailed Clinical Notes , X-Ray (Chest)	Detailed Discharge Summary , Detailed Procedure Notes	No	No	Yes	No	No	10
2075	Tertiary	Surgical Oncology - Phase 3	28450000044	Distal Pancreatectomy with Pancreatico Jejunostomy	25000	25000	23750	21250	Surgical	Not Reserved	Yes	No	0	Ct/Usg , Detailed Clinical Notes , Ercp , Sr Amylase	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Intra Procedure Clinical Photograph	No	No	Yes	No	No	7

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2076	Tertiary	Paediatric surgery - Phase 3	28410000053	Distal Pancreatectomy with Pancreatico Jejunostomy	25000	25000	23750	21250	Surgical	Not Reserved	Yes	No	0	Ct/Usg , Detailed Clinical Notes , Ercep , Sr Amylase	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Intra Procedure Clinical Photograph	No	No	Yes	No	No	7
2077	Tertiary	General Surgery - Phase 3	28350000034	Distal Pancreatectomy with Pancreatico Jejunostomy	25000	25000	23750	21250	Surgical	Not Reserved	Yes	No	0	Ct/Usg , Detailed Clinical Notes , Ercep , Sr Amylase	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Intra Procedure Clinical Photograph	No	No	Yes	No	No	7
2078	Tertiary	Urology - Phase 3	28460000026	Distal ureterectomy with reimplantation	30000	30000	28500	25500	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Ct-Kub	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Photographs Of Surgical Site	No	No	Yes	No	No	6
2079	Tertiary	Surgical Oncology - Phase 3	28450000045	Distal ureterectomy with reimplantation	30000	30000	28500	25500	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Ct-Kub	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Photographs Of Surgical Site	No	No	Yes	No	No	6
2080	Tertiary	General Surgery - Phase 3	28350000035	Diverticulectomy-Excision Meckel's Diverticulum	15000	15000	14250	12750	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Usg/Ct/Mri	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Intra-Op Clinical Photograph	No	No	Yes	No	No	3
2081	Tertiary	Paediatric surgery - Phase 3	28410000054	Diverticulectomy-Excision Meckel's Diverticulum	15000	15000	14250	12750	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Usg/Ct/Mri	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Intra-Op Clinical Photograph	No	No	Yes	No	No	3

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2082	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	2832000013	Double Chamber Permanent Pacemaker Implantation -Permanent Pacemaker Implantation - Double Chamber	108000	108000	102600	91800	Medical	Not Reserved	No	No	0	Angiogram , Detailed Clinical Notes , Ecg , Report By Cardiologist Necessitating Procedure	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Invoice/Bar-Code Of Designated Pacemaker , X Ray Showing The Pacemaker	No	No	Yes	No	No	2
2083	Tertiary	Cardiology - Phase 3	2831000014	Double Chamber Permanent Pacemaker Implantation -Permanent Pacemaker Implantation -Double Chamber	108000	108000	102600	91800	Medical	Not Reserved	No	No	0	Angiogram , Detailed Clinical Notes , Ecg , Report By Cardiologist Necessitating Procedure	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Invoice/Bar-Code Of Designated Pacemaker , X Ray Showing The Pacemaker	No	No	Yes	No	No	2
2084	Tertiary	Paediatric surgery - Phase 3	28410000055	Duplication Cyst Excision	20000	20000	19000	17000	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Usg- Endoscopic , Usg/Ct Abdomen	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Intra Procedure Clinical Photograph	No	No	Yes	No	No	5
2085	Tertiary	Interventional Neuroradiology - Phase 3	28490000008	Dural AVMs / AVFs-Dural AVFs (per sitting) with glue	70000	70000	66500	59500	Medical	Not Reserved	No	No	0	Ct/Mri/Dsa , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Invoice/Bar-Code Of Glue Used , Radiographic Photograph / Ct / Mri / Angio	No	No	Yes	No	No	5
2086	Tertiary	Interventional Neuroradiology - Phase 3	28490000009	Dural AVMs / AVFs-Dural AVFs (per sitting) with onyx	150000	150000	142500	127500	Medical	Not Reserved	No	No	0	Ct/Mri/Dsa , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Invoice/Bar-Code Of Onyx Used , Radiographic Photograph / Ct / Mri / Angio	No	No	Yes	No	No	5
2087	Tertiary	Interventional Neuroradiology - Phase 3	28490000010	Dural AVMs / AVFs-Dural AVMs (per sitting) with glue	70000	70000	66500	59500	Medical	Not Reserved	No	No	0	Ct/Mri/Dsa , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Invoice/Bar-Code Of Glue Used , Radiographic Photograph / Ct / Mri / Angio	No	No	Yes	No	No	5

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2088	Tertiary	Interventional Neuroradiology - Phase 3	2849000011	Dural AVMs / AVFs-Dural AVMs (per sitting) with onyx	150000	150000	142500	127500	Medical	Not Reserved	No	No	0	Ct/Mri/Dsa , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Invoice/Bar-Code Of Onyx Used , Radiographic Photograph / Ct / Mri / Angio	No	No	Yes	No	No	5
2089	Tertiary	Neurosurgery - Phase 3	2837000019	Duroplasty with Endogenous graft	12500	12500	11875	10625	Surgical	Not Reserved	Yes	No	0	Ct/Mri , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure (CT) , Post Procedure Scar Photo	No	No	Yes	No	No	5
2090	Tertiary	Urology - Phase 3	2846000027	ESWL - Follow Up	1000	1000	950	850	Medical	Not Reserved	No	No	0	Discharge Summary	Usg/X-Ray-Kub	No	No	No	Yes	No	Not Applicable(NA)
2091	Tertiary	Plastic & reconstructive Surgery - Phase 3	2843000003	Ear Pinna Reconstruction with costal cartilage / Prosthesis (including the cost of prosthesis / implants)	30000	30000	28500	25500	Surgical	Not Reserved	No	No	0	Clinical Photograph , Detailed Clinical Notes , Doppler Stills , Fir/Mic , Supporting Documents	Clinical Photograph (Donor And Recipient Sites) , Detailed Discharge Summary , Intra-Op Clinical Photograph , Invoice Of Prosthesis/Implant Used	No	No	Yes	No	No	5
2092	Tertiary	Orthopaedics - Phase 3	2840000013	Elbow replacement	45100	45100	42845	38335	Surgical	Not Reserved	No	No	0	Detailed Clinical Notes , X-Ray/Ct	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Invoice/Bar-Code Of Implant , Post Procedure Clinical Photograph , Post-Op X-Ray Showing Implant	No	No	Yes	No	No	5
2093	Tertiary	Burns Management - Phase 3	2847000003	Electrical contact burns: High voltage - with part of limb / limb loss; Includes % TBSA skin grafted, flap cover, follow-up dressings etc. as deemed necessary; Surgical procedures are required for deep burns that are not amenable to heal with dressings alone.	60000	60000	57000	51000	Surgical	Not Reserved	No	No	0	Circumstances That Led To High Voltage Electrical Contact Burns , Clinical Photograph (With Rule Of Chart 9) , Mic	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Lab Investigations , Post Treatment Clinical Photograph , X-Rays Or Other Diagnostic Procedures Done	No	No	Yes	No	No	19

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2094	Tertiary	Burns Management - Phase 3	2847000004	Electrical contact burns: High voltage - without part of limb / limb loss; Includes % TBSA skin grafted, flap cover, follow-up dressings etc. as deemed necessary; Surgical procedures are required for deep burns that are not amenable to heal with dressings alone.	50000	50000	47500	42500	Surgical	Not Reserved	No	No	0	Circumstances That Led To High Voltage Electrical Contact Burns , Clinical Photograph (With Rule Of Chart 9) , Mic	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Lab Investigations , Post Treatment Clinical Photograph , X-Rays Or Other Diagnostic Procedures Done	No	No	Yes	No	No	19
2095	Tertiary	Burns Management - Phase 3	2847000005	Electrical contact burns: Low voltage - with part of limb / limb loss; Includes % TBSA skin grafted, flap cover, follow-up dressings etc. as deemed necessary; Surgical procedures are required for deep burns that are not amenable to heal with dressings alone.	40000	40000	38000	34000	Surgical	Not Reserved	No	No	0	Circumstances That Led To Low Voltage Electrical Contact Burns , Clinical Photograph (With Rule Of Chart 9) , Mic	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Lab Investigations , Post Treatment Clinical Photograph , X-Rays Or Other Diagnostic Procedures Done	No	No	Yes	No	No	19
2096	Tertiary	Burns Management - Phase 3	2847000006	Electrical contact burns: Low voltage - without part of limb / limb loss; Includes % TBSA skin grafted, flap cover, follow-up dressings etc. as deemed necessary; Surgical procedures are required for deep burns that are not amenable to heal with dressings alone.	30000	30000	28500	25500	Surgical	Not Reserved	No	No	0	Circumstances That Led To Low Voltage Electrical Contact Burns , Clinical Photograph (With Rule Of Chart 9) , Mic	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Lab Investigations , Post Treatment Clinical Photograph , X-Rays Or Other Diagnostic Procedures Done	No	No	Yes	No	No	19
2097	Tertiary	Cardiology - Phase 3	28310000015	Electrophysiological Study	66000	66000	62700	56100	Medical	Not Reserved	No	No	0	2-D Echo , Clinical Notes With Planned Line Of Treatment , Ecg , Serum Electrolytes	Detailed Discharge Summary , Ep Study Report	No	No	Yes	No	No	1
2098	Tertiary	Cardiology - Phase 3	28310000016	Electrophysiological Study with Radio Frequency Ablation	96000	96000	91200	81600	Medical	Not Reserved	No	No	0	2-D Echo , Clinical Notes With Planned Line Of Treatment , Ecg , Serum Electrolytes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Ep Study Report	No	No	Yes	No	No	1
2099	Tertiary	Paediatric surgery - Phase 3	28410000056	Emergency management of Acute retention of Urine - Per day	2000	2000	1900	1700	Medical	Not Reserved	No	No	0	Clinical Notes Detailing Chronicity , Usq	Detailed Discharge Summary Giving Aetiology Of Retention , Evidence Of Simple Catheterization And Details Of How Much Urine Drained	No	No	Yes	No	No	2

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2100	Tertiary	Urology - Phase 3	28460000028	Emergency management of Acute retention of Urine - Per day	2000	2000	1900	1700	Medical	Not Reserved	No	No	0	Clinical Notes Detailing Chronicity , Usg	Detailed Discharge Summary Giving Aetiology Of Retention , Evidence Of Simple Catheterization And Details Of How Much Urine Drained	No	No	Yes	No	No	2
2101	Tertiary	Emergency Room Packages (Care requiring less than 12 hrs stay) - Phase 3	28480000004	Emergency management of Hematuria - Per day	2000	2000	1900	1700	Medical	Not Reserved	No	No	0	Clinical Notes Detailing Hematuria , Urine Report	Detailed Discharge Summary , Evidence Of Investigations Done And Treatment Given	No	No	Yes	No	No	2
2102	Tertiary	Urology - Phase 3	28460000029	Emergency management of Hematuria - Per day	2000	2000	1900	1700	Medical	Not Reserved	No	No	0	Clinical Notes Detailing Hematuria , Urine Report	Detailed Discharge Summary , Evidence Of Investigations Done And Treatment Given	No	No	Yes	No	No	2
2103	Tertiary	Paediatric surgery - Phase 3	28410000057	Emergency management of Hematuria - Per day	2000	2000	1900	1700	Medical	Not Reserved	No	No	0	Clinical Notes Detailing Hematuria , Urine Report	Detailed Discharge Summary , Evidence Of Investigations Done And Treatment Given	No	No	Yes	No	No	2
2104	Tertiary	Paediatric surgery - Phase 3	28410000058	Emergency management of Ureteric stone - Package for evaluation / investigation (ultrasound + culture) for 3 weeks (medicines).	5700	5700	5415	4845	Medical	Not Reserved	No	No	0	Clinical Notes Detailing History And Earlier Treatment Done , Stills Of Ureteric Stone	Culture & Abs Report , Evidence Of 3 Weeks Medicines , Evidence Of All Investigation Done And Consultant Prescription	No	No	Yes	No	Yes	1
2105	Tertiary	Urology - Phase 3	28460000030	Emergency management of Ureteric stone - Package for evaluation / investigation (ultrasound + culture) for 3 weeks (medicines).	5700	5700	5415	4845	Medical	Not Reserved	No	No	0	Clinical Notes Detailing History And Earlier Treatment Done , Stills Of Ureteric Stone	Culture & Abs Report , Evidence Of 3 Weeks Medicines , Evidence Of All Investigation Done And Consultant Prescription	No	No	Yes	No	Yes	1

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2106	Tertiary	Polytrauma - Phase 3	2853000007	Emergency tendons repair ± Peripheral Nerve repair/ reconstructive surgery	30000	30000	28500	25500	Surgical	Not Reserved	Yes	No	0	Clinical Notes Detailing The Injury And Need Of Surgery , Fir/Mtc , X-Ray/Ct/Mri (Of Both Chest & Affected Long Bone)	Detailed Discharge Summary , Detailed Operative Notes , Intra- Op Clinical Photograph Showing Tendon/ Nerve Injury Repair And Reconstruction	No	No	Yes	No	No	10
2107	Tertiary	Surgical Oncology - Phase 3	2845000046	Endoprosthesis Revision-Complete	39000	39000	37050	33150	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Radiological Evidence For Indication	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Photographs Of Surgical Site	No	No	Yes	No	No	7
2108	Tertiary	Surgical Oncology - Phase 3	2845000047	Endoprosthesis Revision-Partial	24000	24000	22800	20400	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Radiological Evidence For Indication	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Photographs Of Surgical Site	No	No	Yes	No	No	4
2109	Tertiary	Urology - Phase 3	2846000031	Endopyelotomy-Antegrade with laser / bugbee	25000	25000	23750	21250	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Dtpa Renal Scan , lvp/Ct/Ct-lvp	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra-Operative Photograph , Invoice/Bar-Code Of Bugbee Electrode	No	No	Yes	No	No	2
2110	Tertiary	Urology - Phase 3	2846000032	Endopyelotomy-Retrograde with laser / bugbee	25000	25000	23750	21250	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Dtpa Renal Scan , lvp/Ct/Ct-lvp	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra-Operative Photograph , Invoice/Bar-Code Of Bugbee Electrode	No	No	Yes	No	Yes	1
2111	Tertiary	Surgical Oncology - Phase 3	2845000048	Enucleation of pancreatic neoplasm	39600	39600	37620	33660	Surgical	Not Reserved	No	No	0	Biopsy , Cect/Mri , Detailed Clinical Notes , Her-2 Neu/ Ihc Report	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Scar Photograph	No	No	Yes	No	No	6

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College& Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2112	Tertiary	Paediatric surgery - Phase 3	28410000059	Epididymal Cyst / Nodule Excision-Epididymal Cyst exision	4600	4600	4370	3910	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Usg	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Intra-Op Clinical Photograph	No	No	Yes	No	Yes	1
2113	Tertiary	General Surgery - Phase 3	28350000036	Epididymal Cyst / Nodule Excision-Epididymal Cyst exision	4600	4600	4370	3910	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Usg	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Intra-Op Clinical Photograph	No	No	Yes	No	Yes	1
2114	Tertiary	General Surgery - Phase 3	28350000037	Epididymal Cyst / Nodule Excision-Epididymal Nodule excision	4600	4600	4370	3910	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Usg	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Intra-Op Clinical Photograph	No	No	Yes	No	Yes	1
2115	Tertiary	Paediatric surgery - Phase 3	28410000060	Epididymal Cyst / Nodule Excision-Epididymal Nodule excision	4600	4600	4370	3910	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Usg	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Intra-Op Clinical Photograph	No	No	Yes	No	Yes	1
2116	Tertiary	Neurosurgery - Phase 3	28370000020	Epilepsy Surgery	50000	50000	47500	42500	Surgical	Not Reserved	No	No	0	Ct/Mri , Detailed Clinical Notes , Eeg , Neurologist Report	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure (Ct) , Post Procedure Scar Photo	No	No	Yes	No	No	10
2117	Tertiary	General Surgery - Phase 3	28350000038	Estlander Operation (lip)	9300	9300	8835	7905	Surgical	Not Reserved	Yes	No	0	Clinical Notes Detailing Original Pathology , Clinical Photograph , Fir/Mic (In Case Of Traumatic Aetiology) , Supporting Investigations	Detailed Discharge Summary , Detailed Operative Notes , Post Procedure Clinical Photograph	No	No	Yes	No	No	4

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2118	Tertiary	Surgical Oncology - Phase 3	2845000049	Estlander Operation (lip)	9300	9300	8835	7905	Surgical	Not Reserved	Yes	No	0	Clinical Notes Detailing Original Pathology, Clinical Photograph, Fir/Mic (In Case Of Traumatic Aetiology), Supporting Investigations	Detailed Discharge Summary, Detailed Operative Notes, Post Procedure Clinical Photograph	No	No	Yes	No	No	4
2119	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	2832000014	Excessive bleeding requiring re-exploration	10000	10000	9500	8500	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Discharge Summary, Detailed Procedure/Operative Notes	Yes	No	No	No	No	0
2120	Tertiary	Neurosurgery - Phase 3	2837000021	Excision of Brain Abscess	36000	36000	34200	30600	Surgical	Not Reserved	No	No	0	Ct Scan, Detailed Clinical Notes	Detailed Discharge Summary, Detailed Procedure/Operative Notes, Post Procedure (Ct), Post Procedure Scar Photo, Pus Culture	No	No	Yes	No	No	7
2121	Tertiary	Neurosurgery - Phase 3	2837000022	Excision of Brain Tumor Supratentorial-Basal	50000	50000	47500	42500	Surgical	Not Reserved	No	No	0	Ct/Mri, Detailed Clinical Notes	Detailed Discharge Summary, Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure (Ct), Post Procedure Scar Photo	No	No	Yes	No	No	10
2122	Tertiary	Neurosurgery - Phase 3	2837000023	Excision of Brain Tumor Supratentorial-Brainstem	50000	50000	47500	42500	Surgical	Not Reserved	No	No	0	Ct/Mri, Detailed Clinical Notes	Detailed Discharge Summary, Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure (Ct), Post Procedure Scar Photo	No	No	Yes	No	No	10
2123	Tertiary	Neurosurgery - Phase 3	2837000024	Excision of Brain Tumor Supratentorial-C P Angle	50000	50000	47500	42500	Surgical	Not Reserved	No	No	0	Ct/Mri, Detailed Clinical Notes	Detailed Discharge Summary, Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure (Ct), Post Procedure Scar Photo	No	No	Yes	No	No	10

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2124	Tertiary	Neurosurgery - Phase 3	28370000025	Excision of Brain Tumor Supratentorial-Parasagittal	50000	50000	47500	42500	Surgical	Not Reserved	No	No	0	Ct/Mri , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure (Ct) , Post Procedure Scar Photo	No	No	Yes	No	No	10
2125	Tertiary	Neurosurgery - Phase 3	28370000026	Excision of Brain Tumor Supratentorial-Supratentorial & others	55000	55000	52250	46750	Surgical	Not Reserved	No	No	0	Ct/Mri , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure (Ct) , Post Procedure Scar Photo	No	No	Yes	No	No	10
2126	Tertiary	Neurosurgery - Phase 3	28370000027	Excision of Cervical Ribs -Bilateral	35000	35000	33250	29750	Surgical	Not Reserved	Yes	No	0	X-Ray (Chest)/Ct/Mri	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure (X-Ray) , Post Procedure Scar Photo	No	No	Yes	No	No	7
2127	Tertiary	Neurosurgery - Phase 3	28370000028	Excision of Cervical Ribs -Unilateral	20000	20000	19000	17000	Surgical	Not Reserved	Yes	No	0	X-Ray (Chest)/Ct/Mri	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure (X-Ray) , Post Procedure Scar Photo	No	No	Yes	No	No	7
2128	Tertiary	General Surgery - Phase 3	28350000039	Excision of Growth from Tongue with neck node dissection	23500	23500	22325	19975	Surgical	Not Reserved	Yes	No	0	Clinical Photograph , Detailed Clinical Notes , Usg/Ct/Mri	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph	No	No	Yes	No	No	3
2129	Tertiary	Surgical Oncology - Phase 3	28450000050	Excision of Growth from Tongue with neck node dissection	23500	23500	22325	19975	Surgical	Not Reserved	Yes	No	0	Clinical Photograph , Detailed Clinical Notes , Usg/Ct/Mri	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph	No	No	Yes	No	No	3

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2130	Tertiary	Neurosurgery - Phase 3	2837000029	Excision of Orbital Tumour	40000	40000	38000	34000	Surgical	Not Reserved	No	No	0	Ct/Mri , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure (Ct) , Post Procedure Scar Photo	No	No	Yes	No	No	7
2131	Tertiary	Paediatric surgery - Phase 3	2841000061	Excision of Parathyroid Adenoma / Carcinoma-Excision of Parathyroid Adenoma	20400	20400	19380	17340	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Usg/Ct Scan/Nuclear Imaging	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Intra Procedure Clinical Photograph	No	No	Yes	No	No	4
2132	Tertiary	Surgical Oncology - Phase 3	2845000051	Excision of Parathyroid Adenoma / Carcinoma-Excision of Parathyroid Adenoma	20400	20400	19380	17340	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Usg/Ct Scan/Nuclear Imaging	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Intra Procedure Clinical Photograph	No	No	Yes	No	No	4
2133	Tertiary	General Surgery - Phase 3	2835000040	Excision of Parathyroid Adenoma / Carcinoma-Excision of Parathyroid Adenoma	20400	20400	19380	17340	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Usg/Ct Scan/Nuclear Imaging	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Intra Procedure Clinical Photograph	No	No	Yes	No	No	4
2134	Tertiary	Paediatric surgery - Phase 3	2841000062	Excision of Parathyroid Adenoma / Carcinoma-Excision of Parathyroid Carcinoma	20400	20400	19380	17340	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Usg/Ct Scan/Nuclear Imaging	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Intra Procedure Clinical Photograph	No	No	Yes	No	No	4
2135	Tertiary	Surgical Oncology - Phase 3	2845000052	Excision of Parathyroid Adenoma / Carcinoma-Excision of Parathyroid Carcinoma	20400	20400	19380	17340	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Usg/Ct Scan/Nuclear Imaging	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Intra Procedure Clinical Photograph	No	No	Yes	No	No	4

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2136	Tertiary	General Surgery - Phase 3	2835000041	Excision of Parathyroid Adenoma / Carcinoma-Excision of Parathyroid Carcinoma	20400	20400	19380	17340	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Usg/Ct Scan/Nuclear Imaging	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Intra Procedure Clinical Photograph	No	No	Yes	No	No	4
2137	Tertiary	Otorhinolaryngology (ENT) - Phase 3	2833000014	Excision of Pinna for Growths / Injuries - Total Amputation & Excision of External Auditory Meatus-Growth - Basal	21600	21600	20520	18360	Surgical	Not Reserved	Yes	No	0	Clinical Notes With Planned Line Of Treatment , Histopathology (Hpe)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Photographs Of Surgical Site	No	No	Yes	No	No	2
2138	Tertiary	Surgical Oncology - Phase 3	2845000053	Excision of Pinna for Growths / Injuries - Total Amputation & Excision of External Auditory Meatus-Growth - Basal	21600	21600	20520	18360	Surgical	Not Reserved	Yes	No	0	Clinical Notes With Planned Line Of Treatment , Histopathology (Hpe)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Photographs Of Surgical Site	No	No	Yes	No	No	2
2139	Tertiary	Surgical Oncology - Phase 3	2845000054	Excision of Pinna for Growths / Injuries - Total Amputation & Excision of External Auditory Meatus-Growth - Squamous	21600	21600	20520	18360	Surgical	Not Reserved	Yes	No	0	Clinical Notes With Planned Line Of Treatment , Histopathology (Hpe)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Photographs Of Surgical Site	No	No	Yes	No	No	2
2140	Tertiary	Otorhinolaryngology (ENT) - Phase 3	2833000015	Excision of Pinna for Growths / Injuries - Total Amputation & Excision of External Auditory Meatus-Growth - Squamous	21600	21600	20520	18360	Surgical	Not Reserved	Yes	No	0	Clinical Notes With Planned Line Of Treatment , Histopathology (Hpe)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Photographs Of Surgical Site	No	No	Yes	No	No	2
2141	Tertiary	Surgical Oncology - Phase 3	2845000055	Excision of Pinna for Growths / Injuries - Total Amputation & Excision of External Auditory Meatus-Injury	21600	21600	20520	18360	Surgical	Not Reserved	Yes	No	0	Clinical Notes With Planned Line Of Treatment , Clinical Photograph	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Photographs Of Surgical Site	No	No	Yes	No	No	2

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2142	Tertiary	Otorhinolaryngology (ENT) - Phase 3	2833000016	Excision of Pinna for Growths / Injuries - Total Amputation & Excision of External Auditory Meatus-Injury	21600	21600	20520	18360	Surgical	Not Reserved	Yes	No	0	Clinical Notes With Planned Line Of Treatment , Clinical Photograph	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Photographs Of Surgical Site	No	No	Yes	No	No	2
2143	Tertiary	Urology - Phase 3	2846000033	Excision of Urethral Caruncle	5000	5000	4750	4250	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Evidence Of Confirmed Diagnosis Of Urethral Caruncle	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe)	No	No	Yes	No	Yes	1
2144	Tertiary	Otorhinolaryngology (ENT) - Phase 3	2833000017	Excision of tumour of oral cavity / paranasal sinus / laryngopharynx with or without reconstruction-Excision of tumour of oral cavity / paranasal sinus / laryngopharynx with free flap reconstruction	45000	45000	42750	38250	Surgical	Not Reserved	No	No	0	Biopsy , Clinical Photograph Of Affected Part , Ct Scan	Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	No	7
2145	Tertiary	Surgical Oncology - Phase 3	2845000056	Excision of tumour of oral cavity / paranasal sinus / laryngopharynx with or without reconstruction-Excision of tumour of oral cavity / paranasal sinus / laryngopharynx with free flap reconstruction	45000	45000	42750	38250	Surgical	Not Reserved	No	No	0	Biopsy , Clinical Photograph Of Affected Part , Ct Scan	Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	No	7
2146	Tertiary	Surgical Oncology - Phase 3	2845000057	Excision of tumour of oral cavity / paranasal sinus / laryngopharynx with or without reconstruction-Excision of tumour of oral cavity / paranasal sinus / laryngopharynx with pedicled flap reconstruction	36500	36500	34675	31025	Surgical	Not Reserved	No	No	0	Biopsy , Clinical Photograph Of Affected Part , Ct Scan	Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	No	6
2147	Tertiary	Otorhinolaryngology (ENT) - Phase 3	2833000018	Excision of tumour of oral cavity / paranasal sinus / laryngopharynx with or without reconstruction-Excision of tumour of oral cavity / paranasal sinus / laryngopharynx with pedicled flap reconstruction	36500	36500	34675	31025	Surgical	Not Reserved	No	No	0	Biopsy , Clinical Photograph Of Affected Part , Ct Scan	Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	No	6

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2148	Tertiary	Otorhinolaryngology (ENT) - Phase 3	2833000019	Excision of tumour of oral cavity / paranasal sinus / laryngopharynx with or without reconstruction-Excision of tumour of oral cavity / paranasal sinus / laryngopharynx without reconstruction	30000	30000	28500	25500	Surgical	Not Reserved	No	No	0	Biopsy , Clinical Notes With Planned Line Of Treatment , Ct Scan , Pre-Op Clinical Photograph	Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	No	5
2149	Tertiary	Surgical Oncology - Phase 3	2845000058	Excision of tumour of oral cavity / paranasal sinus / laryngopharynx with or without reconstruction-Excision of tumour of oral cavity / paranasal sinus / laryngopharynx without reconstruction	30000	30000	28500	25500	Surgical	Not Reserved	No	No	0	Biopsy , Clinical Notes With Planned Line Of Treatment , Ct Scan , Pre-Op Clinical Photograph	Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	No	5
2150	Tertiary	Surgical Oncology - Phase 3	2845000059	Excision of undescended testicular mass	24000	24000	22800	20400	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Ct Scan	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe)	No	No	Yes	No	No	5
2151	Tertiary	Surgical Oncology - Phase 3	2845000060	Exenteration	15000	15000	14250	12750	Surgical	Not Reserved	No	No	0	Biopsy/Ct/Mri , Clinical Photograph , Indication For Exenteration , Recommendation/Opinion Of Two Ophthalmologists	Detailed Discharge Summary , Detailed Operative Notes , Evidence Of Specimen Sent For Hpe , Histopathology (Hpe) , Still Image Of The Procedure With Patient Id And Date	No	No	Yes	No	No	1
2152	Tertiary	Ophthalmology - Phase 3	2839000001	Exenteration	15000	15000	14250	12750	Surgical	Not Reserved	No	No	0	Biopsy/Ct/Mri , Clinical Photograph , Indication For Exenteration , Recommendation/Opinion Of Two Ophthalmologists	Detailed Discharge Summary , Detailed Operative Notes , Evidence Of Specimen Sent For Hpe , Histopathology (Hpe) , Still Image Of The Procedure With Patient Id And Date	No	No	Yes	No	Yes	1
2153	Tertiary	Paediatric surgery - Phase 3	2841000063	Exomphalos / Gastrochisis-Exomphalos	25000	25000	23750	21250	Surgical	Not Reserved	Yes	No	0	Clinical Photograph , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Clinical Photograph	No	No	Yes	No	No	5

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2154	Tertiary	Paediatric surgery - Phase 3	28410000064	Exomphalos / Gastroschisis-Gastroschisis	25000	25000	23750	21250	Surgical	Not Reserved	Yes	No	0	Clinical Photograph , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Clinical Photograph	No	No	Yes	No	No	5
2155	Tertiary	Paediatric surgery - Phase 3	28410000065	Exploratory Laparotomy	10000	10000	9500	8500	Surgical	Not Reserved	Yes	No	0	Clinical Notes Detailing Original Pathology , X-Ray/Usq/Ct Scan Abdomen	Analysis Report Of Fluid Removed , Detailed Discharge Summary , Detailed Operative Notes Describing Peritonitis , Intra Procedure Clinical Photograph , Ot Time Details	No	Yes	No	No	No	5
2156	Tertiary	General Surgery - Phase 3	28350000042	Exploratory Laparotomy	10000	10000	9500	8500	Surgical	Not Reserved	Yes	No	0	Clinical Notes Detailing Original Pathology , X-Ray/Usq/Ct Scan Abdomen	Analysis Report Of Fluid Removed , Detailed Discharge Summary , Detailed Operative Notes Describing Peritonitis , Intra Procedure Clinical Photograph , Ot Time Details	No	Yes	No	No	No	5
2157	Tertiary	Surgical Oncology - Phase 3	28450000061	Exploratory laparotomy f / b diversion stoma / bypass-Exploratory laparotomy f / b diversion bypass	30000	30000	28500	25500	Surgical	Not Reserved	No	No	0	Cect , Clinical Notes With Planned Line Of Treatment	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Photographs Of Surgical Site	No	No	Yes	No	No	8
2158	Tertiary	Surgical Oncology - Phase 3	28450000062	Exploratory laparotomy f / b diversion stoma / bypass-Exploratory laparotomy f / b diversion stoma	30000	30000	28500	25500	Surgical	Not Reserved	No	No	0	Cect , Clinical Notes With Planned Line Of Treatment	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Photographs Of Surgical Site	No	No	Yes	No	No	8
2159	Tertiary	Neurosurgery - Phase 3	28370000030	External Ventricular Drainage (EVD) including antibiotics	30000	30000	28500	25500	Surgical	Not Reserved	No	No	0	Ct Scan , Detailed Clinical Notes	Analysis/Culture Of Pus/Fluid Removed , Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure (CT) , Post Procedure Scar Photo	No	No	Yes	No	No	6

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College& Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2160	Tertiary	Urology - Phase 3	2846000034	Extracorporeal shock - wave Lithotripsy (ESWL) stone, with or without stent (one side)	18700	18700	17765	15895	Surgical	Not Reserved	Yes	No	0	Ct-Ivp , Detailed Clinical Notes , Ivp/Ncct	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra-Operative Photograph	No	No	Yes	No	Yes	1
2161	Tertiary	Oral and Maxillofacial Surgery - Phase 3	2852000002	Extraction of impacted tooth under LA	500	500	475	425	Surgical	Not Reserved	No	No	0	Clinical Photograph , Dental X-Ray/Opg (Orthopantomogram)	Detailed Procedure/Operative Notes , Post Procedure (X-Ray)	No	No	Yes	No	No	Not Applicable(NA)
2162	Tertiary	Surgical Oncology - Phase 3	2845000063	Extrapleural pneumonectomy	66000	66000	62700	56100	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Ct Scan , Histopathology (Hpe)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Photographs Of Surgical Site	No	No	Yes	No	No	7
2163	Tertiary	Urology - Phase 3	2846000035	Extrophy Bladder repair including osteotomy if needed + epispadias repair + ureteric reimplant	65000	65000	61750	55250	Surgical	Not Reserved	Yes	No	0	Clinical Photograph Of Affected Part , Detailed Clinical Notes , Usg/Ct/Mri	Detailed Procedure/Operative Notes , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	No	4
2164	Tertiary	Paediatric surgery - Phase 3	2841000066	Extrophy Bladder repair including osteotomy if needed + epispadias repair + ureteric reimplant	65000	65000	61750	55250	Surgical	Not Reserved	Yes	No	0	Clinical Photograph Of Affected Part , Detailed Clinical Notes , Usg/Ct/Mri	Detailed Procedure/Operative Notes , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	No	4
2165	Tertiary	Medical Oncology - Phase 3	2836000024	FEBRILE NEUTROPENIA - FIRST LINE ANTIBIOTICS (PER EPISODE)-First Line Antibiotics	28000	28000	26600	23800	Medical	Not Reserved	No	No	0	Biochemistry , Bone Marrow Studies , Cbc , Ecg , Pmi-Rara , Rq Pcr	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2166	Tertiary	Medical Oncology - Phase 3	28360000225	FEBRILE NEUTROPENIA - SECOND LINE ANTIBIOTICS AND ANTIFUNGALS(PER EPISODE)-Second Line Antibiotics and Antifungals	60000	60000	57000	51000	Medical	Not Reserved	No	No	0	Cbc , Lft , Pmi-Rara , Rq Pcr	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
2167	Tertiary	Paediatric surgery - Phase 3	28410000067	Fecal Fistula Closure	25000	25000	23750	21250	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Usg (Abdomen & Pelvis)/Ct (Abdomen & Pelvis)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra Procedure Clinical Photograph	No	No	Yes	No	No	3
2168	Tertiary	Paediatric surgery - Phase 3	28410000068	Feeding Jejunostomy	10000	10000	9500	8500	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Endoscopy Report/Video/Biopsy/Ct Scan	Detailed Discharge Summary , Detailed Operative Notes , Intra Procedure Clinical Photograph	No	No	Yes	No	No	6
2169	Tertiary	Surgical Oncology - Phase 3	28450000064	Feeding Jejunostomy	10000	10000	9500	8500	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Endoscopy Report/Video/Biopsy/Ct Scan	Detailed Discharge Summary , Detailed Operative Notes , Intra Procedure Clinical Photograph	No	No	Yes	No	No	6
2170	Tertiary	General Surgery - Phase 3	28350000043	Feeding Jejunostomy	10000	10000	9500	8500	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Endoscopy Report/Video/Biopsy/Ct Scan	Detailed Discharge Summary , Detailed Operative Notes , Intra Procedure Clinical Photograph	No	No	Yes	No	No	6
2171	Tertiary	Oral and Maxillofacial Surgery - Phase 3	28520000003	Fixation of fracture of jaw-Closed reduction (1 jaw) using wires - under LA	5000	5000	4750	4250	Surgical	Not Reserved	No	No	0	Circumstances That Led To Fracture , Clinical Photograph , Mic , X-Ray (Mandible)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure X-Ray Mandible Showing Wires	No	No	Yes	No	Yes	1

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2172	Tertiary	Oral and Maxillofacial Surgery - Phase 3	2852000004	Fixation of fracture of jaw-Open reduction (1 jaw) and fixing of plates / wire – under GA	12000	12000	11400	10200	Surgical	Not Reserved	No	No	0	Circumstances That Led To Fracture , Clinical Photograph , Mic , X-Ray (Mandible)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure X-Ray Mandible Showing Wires	No	No	Yes	No	No	2
2173	Tertiary	Burns Management - Phase 3	2847000007	Flame burns-% Total Body Surface Area Burns (TBSA) - any % (not requiring admission). Needs at least 5-6 dressing	7000	7000	6650	5950	Surgical	Not Reserved	No	No	0	Clinical Photograph (With Rule Of Chart 9) , Detailed Clinical Notes , Mic	Detailed Discharge Summary , Lab Investigations , Post Treatment Clinical Photograph , X-Rays Or Other Diagnostic Procedures Done	No	No	Yes	No	No	Not Applicable(NA)
2174	Tertiary	Burns Management - Phase 3	2847000008	Flame burns-% Total Body Surface Area Burns (TBSA): 40 % - 60 %; Includes % TBSA skin grafted, flap cover, follow-up dressings etc. as deemed necessary; Surgical procedures are required for deep burns that are not amenable to heal with dressings alone.	50000	50000	47500	42500	Surgical	Not Reserved	No	No	0	Clinical Photograph Upto 40-60% Burn (With Rule Of Chart 9) , Detailed Clinical Notes , Mic	Detailed Discharge Summary , Lab Investigations , Post Treatment Clinical Photograph , X-Rays Or Other Diagnostic Procedures Done	No	No	Yes	No	No	19
2175	Tertiary	Burns Management - Phase 3	2847000009	Flame burns-% Total Body Surface Area Burns (TBSA): > 60 %; Includes % TBSA skin grafted, flap cover, follow-up dressings etc. as deemed necessary; Surgical procedures are required for deep burns that are not amenable to heal with dressings alone.	80000	80000	76000	68000	Surgical	Not Reserved	No	No	0	Clinical Photograph >60% Burn (With Rule Of Chart 9) , Detailed Clinical Notes , Mic	Detailed Discharge Summary , Lab Investigations , Post Treatment Clinical Photograph , X-Rays Or Other Diagnostic Procedures Done	No	No	Yes	No	No	19
2176	Tertiary	Burns Management - Phase 3	2847000010	Flame burns-% Total Body Surface Area Burns (TBSA): Upto 40 %; Includes % TBSA skin grafted, flap cover, follow-up dressings etc. as deemed necessary; Surgical procedures are required for deep burns that are not amenable to heal with dressings alone.	40000	40000	38000	34000	Surgical	Not Reserved	No	No	0	Clinical Photograph Upto 40% Burn (With Rule Of Chart 9) , Detailed Clinical Notes , Mic	Detailed Discharge Summary , Lab Investigations , Post Treatment Clinical Photograph , X-Rays Or Other Diagnostic Procedures Done	No	No	Yes	No	No	19
2177	Tertiary	General Surgery - Phase 3	2835000044	Flap Reconstructive Surgery	20000	20000	19000	17000	Surgical	Not Reserved	Yes	No	0	Clinical Notes Detailing Original Pathology , Clinical Photograph , Supporting Investigations	Detailed Discharge Summary , Detailed Operative Notes , Post Procedure Clinical Photograph	No	No	Yes	No	No	4

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College& Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2178	Tertiary	Surgical Oncology - Phase 3	2845000065	Flap Reconstructive Surgery	20000	20000	19000	17000	Surgical	Not Reserved	Yes	No	0	Clinical Notes Detailing Original Pathology , Clinical Photograph , Supporting Investigations	Detailed Discharge Summary , Detailed Operative Notes , Post Procedure Clinical Photograph	No	No	Yes	No	No	4
2179	Tertiary	Neurosurgery - Phase 3	2837000031	Foramen Magnum Decompression	45000	45000	42750	38250	Surgical	Not Reserved	Yes	No	0	Ct/Mri , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Scar Photo	No	No	Yes	No	No	10
2180	Tertiary	General Surgery - Phase 3	2835000045	Foreign Body Removal-General Anesthesia	8000	8000	7600	6800	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Still Photograph Of Imaging , X-Ray/Usg	Detailed Discharge Summary , Detailed Operative Notes , Post Procedure Clinical Photograph , Relevant Investigations	No	No	Yes	No	Yes	1
2181	Tertiary	Paediatric surgery - Phase 3	2841000069	Foreign Body Removal-General Anesthesia	8000	8000	7600	6800	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Still Photograph Of Imaging , X-Ray/Usg	Detailed Discharge Summary , Detailed Operative Notes , Post Procedure Clinical Photograph , Relevant Investigations	No	No	Yes	No	Yes	1
2182	Tertiary	Otorhinolaryngology (ENT) - Phase 3	2833000020	Foreign Body Removal-General Anesthesia	8000	8000	7600	6800	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Still Photograph Of Imaging , X-Ray/Usg	Detailed Discharge Summary , Detailed Operative Notes , Post Procedure Clinical Photograph , Relevant Investigations	No	No	Yes	No	Yes	1
2183	Tertiary	Otorhinolaryngology (ENT) - Phase 3	2833000021	Foreign Body Removal-Local Anesthesia	5000	5000	4750	4250	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Still Photograph Of Imaging , X-Ray/Usg	Detailed Discharge Summary , Detailed Operative Notes , Post Procedure Clinical Photograph , Relevant Investigations	No	No	Yes	No	Yes	1

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2184	Tertiary	General Surgery - Phase 3	2835000046	Foreign Body Removal-Local Anesthesia	5000	5000	4750	4250	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Still Photograph Of Imaging , X-Ray/Usg	Detailed Discharge Summary , Detailed Operative Notes , Post Procedure Clinical Photograph , Relevant Investigations	No	No	Yes	No	Yes	1
2185	Tertiary	Paediatric surgery - Phase 3	2841000070	Foreign Body Removal-Local Anesthesia	5000	5000	4750	4250	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Still Photograph Of Imaging , X-Ray/Usg	Detailed Discharge Summary , Detailed Operative Notes , Post Procedure Clinical Photograph , Relevant Investigations	No	No	Yes	No	Yes	1
2186	Tertiary	Paediatric surgery - Phase 3	2841000071	Foreign Body Removal with scope	20000	20000	19000	17000	Surgical	Not Reserved	No	No	0	Detailed Clinical Notes , Radiological Evidence Of Foreign Body	Detailed Discharge Summary , Detailed Operative Notes , Photograph Of Removed Foreign Body	No	No	Yes	No	No	2
2187	Tertiary	General Surgery - Phase 3	2835000047	Foreign Body Removal with scope	20000	20000	19000	17000	Surgical	Not Reserved	No	No	0	Detailed Clinical Notes , Radiological Evidence Of Foreign Body	Detailed Discharge Summary , Detailed Operative Notes , Photograph Of Removed Foreign Body	No	No	Yes	No	No	2
2188	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	2832000015	Foreign Body Removal with scope	20000	20000	19000	17000	Surgical	Not Reserved	No	No	0	Detailed Clinical Notes , Radiological Evidence Of Foreign Body	Detailed Discharge Summary , Detailed Operative Notes , Photograph Of Removed Foreign Body	No	No	Yes	No	No	2
2189	Tertiary	Orthopaedics - Phase 3	2840000014	Fracture - Acetabulum-Combined Approach	48500	48500	46075	41225	Surgical	Not Reserved	Yes	No	0	Clinical Notes With Planned Line Of Treatment , X-Ray Film With Report	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Invoice/Bar-Code Of Implant , Post Procedure (X-Ray) With Reports	No	No	Yes	No	No	7

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2190	Tertiary	Orthopaedics - Phase 3	2840000015	Fracture - Acetabulum-Single Approach	38000	38000	36100	32300	Surgical	Not Reserved	Yes	No	0	Clinical Notes With Planned Line Of Treatment , X-Ray Film With Report	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Invoice/Bar-Code Of Implant , Post Procedure (X-Ray) With Reports	No	No	Yes	No	No	7
2191	Tertiary	Orthopaedics - Phase 3	2840000016	Fracture - Conservative Management - Without plaster	2000	2000	1900	1700	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , X-Ray Film With Report	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure (X-Ray) With Reports	No	No	Yes	No	Yes	1
2192	Tertiary	Emergency Room Packages (Care requiring less than 12 hrs stay) - Phase 3	2848000005	Fracture - Conservative Management - Without plaster	2000	2000	1900	1700	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , X-Ray Film With Report	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure (X-Ray) With Reports	No	No	Yes	No	Yes	1
2193	Tertiary	Plastic & reconstructive Surgery - Phase 3	2843000004	Free Grafts - Wolfe Grafts	14000	14000	13300	11900	Surgical	Not Reserved	Yes	No	0	Clinical Notes Detailing Original Pathology , Clinical Photograph , Supporting Investigations	Detailed Discharge Summary , Detailed Operative Notes , Post Procedure Clinical Photograph	No	No	Yes	No	Yes	1
2194	Tertiary	General Surgery - Phase 3	2835000048	Free Grafts - Wolfe Grafts	14000	14000	13300	11900	Surgical	Not Reserved	Yes	No	0	Clinical Notes Detailing Original Pathology , Clinical Photograph , Supporting Investigations	Detailed Discharge Summary , Detailed Operative Notes , Post Procedure Clinical Photograph	No	No	Yes	No	Yes	1
2195	Tertiary	Paediatric surgery - Phase 3	2841000072	GI Tumor Excision	30000	30000	28500	25500	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Usg/Ct/Biopsy	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Intra Procedure Clinical Photograph	No	No	Yes	No	No	7

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2196	Tertiary	Neurosurgery - Phase 3	2837000032	Gamma Knife radiosurgery (GKRS) / SRS for tumours / Arteriovenous malformation (AVM)	75000	75000	71250	63750	Surgical	Not Reserved	No	No	0	Ct/Mri , Detailed Clinical Notes	Consultant Prescription With Plan Of Rt Treatment And Rt Chart , Detailed Discharge Summary , Intra Procedure Clinical Photograph	No	No	Yes	No	No	10
2197	Tertiary	General Surgery - Phase 3	2835000049	Partial Gastrectomy for Carcinoma	27800	27800	26410	23630	Surgical	Not Reserved	Yes	No	0	Biopsy , Clinical Photograph , Detailed Clinical Notes , Endoscopy/Ct Scan	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Intra Procedure Clinical Photograph , Post Procedure Clinical Photograph	No	No	Yes	No	No	6
2198	Tertiary	Surgical Oncology - Phase 3	2845000066	Partial Gastrectomy for Carcinoma	27800	27800	26410	23630	Surgical	Not Reserved	Yes	No	0	Biopsy , Clinical Photograph , Detailed Clinical Notes , Endoscopy/Ct Scan	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Intra Procedure Clinical Photograph , Post Procedure Clinical Photograph	No	No	Yes	No	No	6
2199	Tertiary	Surgical Oncology - Phase 3	2845000067	Subtotal Gastrectomy for Carcinoma	27800	27800	26410	23630	Surgical	Not Reserved	Yes	No	0	Biopsy , Clinical Photograph , Detailed Clinical Notes , Endoscopy/Ct Scan	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Intra Procedure Clinical Photograph , Post Procedure Clinical Photograph	No	No	Yes	No	No	6
2200	Tertiary	General Surgery - Phase 3	2835000050	Subtotal Gastrectomy for Carcinoma	27800	27800	26410	23630	Surgical	Not Reserved	Yes	No	0	Biopsy , Clinical Photograph , Detailed Clinical Notes , Endoscopy/Ct Scan	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Intra Procedure Clinical Photograph , Post Procedure Clinical Photograph	No	No	Yes	No	No	6
2201	Tertiary	Surgical Oncology - Phase 3	2845000068	Total Gastrectomy - Lap.	51600	51600	49020	43860	Surgical	Not Reserved	No	No	0	Detailed Clinical Notes , Endoscopy/Video/Biopsy/Ct Scan	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Intra Procedure Clinical Photograph , Post Procedure Clinical Photograph	No	No	Yes	No	No	5

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts) 95% of the package amount	Package Rate (Remaining Hospitals) 85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2202	Tertiary	General Surgery - Phase 3	28350000051	Total Gastrectomy - Lap.	51600	51600	49020	43860	Surgical	Not Reserved	No	No	0	Detailed Clinical Notes , Endoscopy Report/Video/Biopsy/Ct Scan	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Intra Procedure Clinical Photograph , Post Procedure Clinical Photograph	No	No	Yes	No	No	5
2203	Tertiary	Surgical Oncology - Phase 3	28450000069	Total Gastrectomy - Open	51600	51600	49020	43860	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Endoscopy Report/Video/Biopsy/Ct Scan	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Intra Procedure Clinical Photograph , Post Procedure Clinical Photograph	No	No	Yes	No	No	5
2204	Tertiary	General Surgery - Phase 3	28350000052	Total Gastrectomy - Open	51600	51600	49020	43860	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Endoscopy Report/Video/Biopsy/Ct Scan	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Intra Procedure Clinical Photograph , Post Procedure Clinical Photograph	No	No	Yes	No	No	5
2205	Tertiary	Surgical Oncology - Phase 3	28450000070	Gastric pull-up / Jejunal Graft	36000	36000	34200	30600	Surgical	Not Reserved	No	No	0	Cect , Clinical Notes With Planned Line Of Treatment , Fnac/Biopsy	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Photographs Of Surgical Site	No	No	Yes	No	No	11
2206	Tertiary	General Surgery - Phase 3	28350000053	Gastrojejunostomy	18500	18500	17575	15725	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Endoscopy/Biopsy/Ct Scan	Detailed Discharge Summary , Detailed Operative Notes , Intra-Op Clinical Photograph	No	No	Yes	No	No	5
2207	Tertiary	Surgical Oncology - Phase 3	28450000071	Gastrojejunostomy	18500	18500	17575	15725	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Endoscopy/Biopsy/Ct Scan	Detailed Discharge Summary , Detailed Operative Notes , Intra-Op Clinical Photograph	No	No	Yes	No	No	5

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College& Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2208	Tertiary	Paediatric surgery - Phase 3	28410000073	Gastrostomy + Esophagoscopy + Threading	20000	20000	19000	17000	Surgical	Not Reserved	Yes	No	0	Biopsy , Endoscopy , Usg/Ct Abdomen	Detailed Procedure/Operative Notes , Post Procedure Clinical Photograph	No	No	Yes	No	No	5
2209	Tertiary	Surgical Oncology - Phase 3	28450000072	Germ Cell Tumour Excision	30000	30000	28500	25500	Surgical	Not Reserved	No	No	0	Afp , Beta-Hcg , Clinical Notes With Planned Line Of Treatment , Ct Scan , Usg	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe)	No	No	Yes	No	No	6
2210	Tertiary	Surgical Oncology - Phase 3	28450000073	Glossectomy-Hemiglossectomy	24000	24000	22800	20400	Surgical	Not Reserved	Yes	No	0	Cect , Clinical Notes With Planned Line Of Treatment , Fnac/Biopsy	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Photographs Of Surgical Site	No	No	Yes	No	No	6
2211	Tertiary	Surgical Oncology - Phase 3	28450000074	Total Glossectomy	30000	30000	28500	25500	Surgical	Not Reserved	Yes	No	0	Cect , Clinical Notes With Planned Line Of Treatment , Fnac/Biopsy	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Photographs Of Surgical Site	No	No	Yes	No	No	11
2212	Tertiary	Medical Oncology - Phase 3	28360000026	Granulocyte Colony Stimulating Factor Use-Cycle	12800	12800	12160	10880	Medical	Not Reserved	No	No	0	Bone Marrow Studies , Cbc , Lft , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Tranfusion Slips	No	No	Yes	No	Yes	1
2213	Tertiary	Polytrauma - Phase 3	28530000008	Head injury with repair of Facio-Maxillary injury & fixations (including implants)	35000	35000	33250	29750	Surgical	Not Reserved	Yes	No	0	Clinical Notes Detailing The Injury And Need Of Surgery , Fir/Mic , Pre-Op Clinical Photograph , X-Ray/Ct	Detailed Discharge Summary , Detailed Operative Notes , Post-Op Clinical Photograph Showing Implant For Fixation And Repairs	No	No	Yes	No	No	10

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2214	Tertiary	Plastic & reconstructive Surgery - Phase 3	28430000005	Hemangioma-Debulking	35000	35000	33250	29750	Surgical	Not Reserved	No	No	0	Clinical Photograph , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Invoice Of Sclerosing Agent Used , Post Procedure Clinical Photograph	No	No	Yes	No	No	4
2215	Tertiary	Plastic & reconstructive Surgery - Phase 3	28430000006	Hemangioma-Excision	35000	35000	33250	29750	Surgical	Not Reserved	No	No	0	Clinical Photograph , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Invoice Of Sclerosing Agent Used , Post Procedure Clinical Photograph	No	No	Yes	No	No	4
2216	Tertiary	Plastic & reconstructive Surgery - Phase 3	28430000007	Hemangioma-Sclerotherapy under GA	35000	35000	33250	29750	Surgical	Not Reserved	No	No	0	Clinical Photograph , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Invoice Of Sclerosing Agent Used , Post Procedure Clinical Photograph	No	No	Yes	No	No	3
2217	Tertiary	Surgical Oncology - Phase 3	28450000075	Hemi colectomy-Left - Lap.	25000	25000	23750	21250	Surgical	Not Reserved	Yes	No	0	Biopsy , Colonoscopy/Ct Scan , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Intra Procedure Photograph Of Removed Colon	No	No	Yes	No	No	6
2218	Tertiary	General Surgery - Phase 3	28350000054	Hemi colectomy-Left - Lap.	25000	25000	23750	21250	Surgical	Not Reserved	Yes	No	0	Biopsy , Colonoscopy/Ct Scan , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Intra Procedure Photograph Of Removed Colon	No	No	Yes	No	No	6
2219	Tertiary	Surgical Oncology - Phase 3	28450000076	Hemi colectomy-Left - Open	25000	25000	23750	21250	Surgical	Not Reserved	No	No	0	Biopsy , Colonoscopy/Ct Scan , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Intra Procedure Photograph Of Removed Colon	No	No	Yes	No	No	6

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2220	Tertiary	General Surgery - Phase 3	2835000055	Hemi colectomy-Left - Open	25000	25000	23750	21250	Surgical	Not Reserved	No	No	0	Biopsy , Colonoscopy/Ct Scan , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Intra Procedure Photograph Of Removed Colon	No	No	Yes	No	No	6
2221	Tertiary	General Surgery - Phase 3	2835000056	Hemi colectomy-Right - Lap.	25000	25000	23750	21250	Surgical	Not Reserved	Yes	No	0	Biopsy , Colonoscopy/Ct Scan , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Intra Procedure Photograph Of Removed Colon	No	No	Yes	No	No	6
2222	Tertiary	Surgical Oncology - Phase 3	2845000077	Hemi colectomy-Right - Lap.	25000	25000	23750	21250	Surgical	Not Reserved	Yes	No	0	Biopsy , Colonoscopy/Ct Scan , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Intra Procedure Photograph Of Removed Colon	No	No	Yes	No	No	6
2223	Tertiary	General Surgery - Phase 3	2835000057	Hemi colectomy-Right - Open	25000	25000	23750	21250	Surgical	Not Reserved	No	No	0	Biopsy , Colonoscopy/Ct Scan , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Intra Procedure Photograph Of Removed Colon	No	No	Yes	No	No	6
2224	Tertiary	Surgical Oncology - Phase 3	2845000078	Hemi colectomy-Right - Open	25000	25000	23750	21250	Surgical	Not Reserved	No	No	0	Biopsy , Colonoscopy/Ct Scan , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Intra Procedure Photograph Of Removed Colon	No	No	Yes	No	No	6
2225	Tertiary	Orthopaedics - Phase 3	2840000017	Hemiarthroplasty-Bipolar (Modular)	35000	35000	33250	29750	Surgical	Not Reserved	No	No	0	Detailed Clinical Notes , X-Ray/Ct	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Invoice/Bar-Code Of Implant , Post Procedure Clinical Photograph , Post-Op X-Ray Showing Implant	No	No	Yes	No	No	7

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2226	Tertiary	Surgical Oncology - Phase 3	2845000079	Hemipelvectomy - Internal	54000	54000	51300	45900	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Ct Report , Histopathology (Hpe)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Photographs Of Surgical Site	No	No	Yes	No	No	11
2227	Tertiary	Surgical Oncology - Phase 3	2845000080	Hepatic Resection-Lap.	20000	20000	19000	17000	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Usg/Ct/Biopsy/Mri	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Intra Procedure Clinical Photograph	No	No	Yes	No	No	7
2228	Tertiary	Paediatric surgery - Phase 3	2841000074	Hepatic Resection-Lap.	20000	20000	19000	17000	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Usg/Ct/Biopsy/Mri	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Intra Procedure Clinical Photograph	No	No	Yes	No	No	7
2229	Tertiary	General Surgery - Phase 3	2835000058	Hepatic Resection-Lap.	20000	20000	19000	17000	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Usg/Ct/Biopsy/Mri	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Intra Procedure Clinical Photograph	No	No	Yes	No	No	7
2230	Tertiary	Surgical Oncology - Phase 3	2845000081	Hepatic Resection-Open	20000	20000	19000	17000	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Usg/Ct/Biopsy/Mri	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Intra Procedure Clinical Photograph	No	No	Yes	No	No	7
2231	Tertiary	General Surgery - Phase 3	2835000059	Hepatic Resection-Open	20000	20000	19000	17000	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Usg/Ct/Biopsy/Mri	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Intra Procedure Clinical Photograph	No	No	Yes	No	No	7

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2232	Tertiary	Paediatric surgery - Phase 3	28410000075	Hepatic Resection-Open	20000	20000	19000	17000	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Usg/Ct/Biopsy/Mri	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Intra Procedure Clinical Photograph	No	No	Yes	No	No	7
2233	Tertiary	Surgical Oncology - Phase 3	28450000082	Hepatoblastoma Excision	52200	52200	49590	44370	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Ct Report, Histopathology (Hpe)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Photographs Of Surgical Site	No	No	Yes	No	No	8
2234	Tertiary	Paediatric surgery - Phase 3	28410000076	Hepatoblastoma Excision	52200	52200	49590	44370	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Ct Report, Histopathology (Hpe)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Photographs Of Surgical Site	No	No	Yes	No	No	8
2235	Tertiary	Paediatric surgery - Phase 3	28410000077	Hernia & Hydrocele	20000	20000	19000	17000	Surgical	Not Reserved	Yes	No	0	Clinical Photograph , Detailed Clinical Notes , Usg	Detailed Procedure/Operative Notes , Post Procedure Scar Photo	No	No	Yes	No	No	5
2236	Tertiary	General Surgery - Phase 3	28350000060	Hiatus Hernia Repair / Fundoplication-Fundoplication - Lap.	23500	23500	22325	19975	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Ugi Endoscopy (Ugie) , X-Ray/Usg	Detailed Discharge Summary , Detailed Operative Notes , Intra Procedure Clinical Photograph	No	No	Yes	No	No	5
2237	Tertiary	Paediatric surgery - Phase 3	28410000078	Hiatus Hernia Repair / Fundoplication-Fundoplication - Lap.	23500	23500	22325	19975	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Ugi Endoscopy (Ugie) , X-Ray/Usg	Detailed Discharge Summary , Detailed Operative Notes , Intra Procedure Clinical Photograph	No	No	Yes	No	No	5

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2238	Tertiary	Paediatric surgery - Phase 3	28410000079	Hiatus Hernia Repair / Fundoplication-Fundoplication - Open	23500	23500	22325	19975	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Ugi Endoscopy (Ugie) , X-Ray/Usg	Detailed Discharge Summary , Detailed Operative Notes , Intra Procedure Clinical Photograph	No	No	Yes	No	No	5
2239	Tertiary	General Surgery - Phase 3	28350000061	Hiatus Hernia Repair / Fundoplication-Fundoplication - Open	23500	23500	22325	19975	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Ugi Endoscopy (Ugie) , X-Ray/Usg	Detailed Discharge Summary , Detailed Operative Notes , Intra Procedure Clinical Photograph	No	No	Yes	No	No	5
2240	Tertiary	General Surgery - Phase 3	28350000062	Hiatus Hernia Repair / Fundoplication-Hiatus Hernia Repair - Lap.	23500	23500	22325	19975	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Ugi Endoscopy (Ugie) , X-Ray/Usg	Detailed Discharge Summary , Detailed Operative Notes , Intra Procedure Clinical Photograph	No	No	Yes	No	No	5
2241	Tertiary	Paediatric surgery - Phase 3	28410000080	Hiatus Hernia Repair / Fundoplication-Hiatus Hernia Repair - Lap.	23500	23500	22325	19975	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Ugi Endoscopy (Ugie) , X-Ray/Usg	Detailed Discharge Summary , Detailed Operative Notes , Intra Procedure Clinical Photograph	No	No	Yes	No	No	5
2242	Tertiary	General Surgery - Phase 3	28350000063	Hiatus Hernia Repair / Fundoplication-Hiatus Hernia Repair - Open	23500	23500	22325	19975	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Ugi Endoscopy (Ugie) , X-Ray/Usg	Detailed Discharge Summary , Detailed Operative Notes , Intra Procedure Clinical Photograph	No	No	Yes	No	No	5
2243	Tertiary	Paediatric surgery - Phase 3	28410000081	Hiatus Hernia Repair / Fundoplication-Hiatus Hernia Repair - Open	23500	23500	22325	19975	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Ugi Endoscopy (Ugie) , X-Ray/Usg	Detailed Discharge Summary , Detailed Operative Notes , Intra Procedure Clinical Photograph	No	No	Yes	No	No	5

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2244	Tertiary	Neo-natal care Packages - Phase 3	28510000006	High Risk Newborn Post Discharge Care Package (Protocol Driven)	2400	2400	2280	2040	Medical	Not Reserved	No	No	0	Detailed Clinical Notes , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Evidence Of All Investigations Done	No	No	Yes	No	No	Not Applicable(NA)
2245	Tertiary	Urology - Phase 3	28460000036	Holmium Laser Prostatectomy	40000	40000	38000	34000	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Post Void Volume/Psa , Uroflowmetry , Usg-Prostate	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe)	No	No	Yes	No	No	2
2246	Tertiary	Obstetrics & Gynaecology - Phase 3	28380000010	Hymenectomy for imperforate hymen	3000	3000	2850	2550	Surgical	Not Reserved	Yes	No	0	Admission Notes Comprising Of History And Examination With Indications For The Procedure	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra-Operative Photograph , Progress Notes	No	No	Yes	No	No	1
2247	Tertiary	Paediatric surgery - Phase 3	28410000082	Hymenectomy for imperforate hymen	3000	3000	2850	2550	Surgical	Not Reserved	Yes	No	0	Admission Notes Comprising Of History And Examination With Indications For The Procedure	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra-Operative Photograph , Progress Notes	No	No	Yes	No	No	1
2248	Tertiary	Urology - Phase 3	28460000037	Hypospadias Repair - Follow Up	1000	1000	950	850	Medical	Not Reserved	No	No	0	Discharge Summary	Usg/Ufm/Urine Routine	No	No	No	Yes	No	Not Applicable(NA)
2249	Tertiary	Urology - Phase 3	28460000038	Hypospadias repair - Single stage	28000	28000	26600	23800	Surgical	Not Reserved	Yes	No	0	Clinical Photograph , Detailed Clinical Notes	Detailed Procedure/Operative Notes , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	No	3

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2250	Tertiary	Paediatric surgery - Phase 3	28410000083	Hypospadias repair - Single stage	28000	28000	26600	23800	Surgical	Not Reserved	Yes	No	0	Clinical Photograph , Detailed Clinical Notes	Detailed Procedure/Operative Notes , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	No	3
2251	Tertiary	Plastic & reconstructive Surgery - Phase 3	28430000008	Hypospadias repair - Single stage	28000	28000	26600	23800	Surgical	Not Reserved	Yes	No	0	Clinical Photograph , Detailed Clinical Notes	Detailed Procedure/Operative Notes , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	No	3
2252	Tertiary	Plastic & reconstructive Surgery - Phase 3	28430000009	Hypospadias repair - Two or more stage (Final Stage)	30000	30000	28500	25500	Surgical	Not Reserved	Yes	No	0	Clinical Photograph , Detailed Clinical Notes , Evidence Of Stage 1/2 (Discharge Summary)	Detailed Procedure/Operative Notes , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	No	3
2253	Tertiary	Urology - Phase 3	28460000039	Hypospadias repair - Two or more stage (Final Stage)	30000	30000	28500	25500	Surgical	Not Reserved	Yes	No	0	Clinical Photograph , Detailed Clinical Notes , Evidence Of Stage 1/2 (Discharge Summary)	Detailed Procedure/Operative Notes , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	No	3
2254	Tertiary	Paediatric surgery - Phase 3	28410000084	Hypospadias repair - Two or more stage (Final Stage)	30000	30000	28500	25500	Surgical	Not Reserved	Yes	No	0	Clinical Photograph , Detailed Clinical Notes , Evidence Of Stage 1/2 (Discharge Summary)	Detailed Procedure/Operative Notes , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	No	3
2255	Tertiary	Paediatric surgery - Phase 3	28410000085	Hypospadias repair - Two or more stage (First Stage)	12000	12000	11400	10200	Surgical	Not Reserved	Yes	No	0	Clinical Photograph , Detailed Clinical Notes	Detailed Procedure/Operative Notes , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	No	3

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2256	Tertiary	Plastic & reconstructive Surgery - Phase 3	2843000010	Hypospadias repair - Two or more stage (First Stage)	12000	12000	11400	10200	Surgical	Not Reserved	Yes	No	0	Clinical Photograph , Detailed Clinical Notes	Detailed Procedure/Operative Notes , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	No	3
2257	Tertiary	Urology - Phase 3	2846000040	Hypospadias repair - Two or more stage (First Stage)	12000	12000	11400	10200	Surgical	Not Reserved	Yes	No	0	Clinical Photograph , Detailed Clinical Notes	Detailed Procedure/Operative Notes , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	No	3
2258	Tertiary	Plastic & reconstructive Surgery - Phase 3	2843000011	Hypospadias repair - Two or more stage (Intermediate Stage)	Its cost included in 1st stage	Its cost included in 1st stage	Its cost included in 1st stage	Its cost included in 1st stage	Surgical	Not Reserved	Yes	No	0	Clinical Photograph , Detailed Clinical Notes , Evidence Of Stage 1 (Discharge Summary)	Detailed Procedure/Operative Notes , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	No	3
2259	Tertiary	Urology - Phase 3	2846000041	Hypospadias repair - Two or more stage (Intermediate Stage)	Its cost included in 1st stage	Its cost included in 1st stage	Its cost included in 1st stage	Its cost included in 1st stage	Surgical	Not Reserved	Yes	No	0	Clinical Photograph , Detailed Clinical Notes , Evidence Of Stage 1 (Discharge Summary)	Detailed Procedure/Operative Notes , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	No	3
2260	Tertiary	Paediatric surgery - Phase 3	2841000086	Hypospadias repair - Two or more stage (Intermediate Stage)	Its cost included in 1st stage	Its cost included in 1st stage	Its cost included in 1st stage	Its cost included in 1st stage	Surgical	Not Reserved	Yes	No	0	Clinical Photograph , Detailed Clinical Notes , Evidence Of Stage 1 (Discharge Summary)	Detailed Procedure/Operative Notes , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	No	3
2261	Tertiary	Obstetrics & Gynaecology - Phase 3	2838000011	Abdominal Hysterectomy	20000	20000	19000	17000	Surgical	Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Usg (Abdomen & Pelvis)/Ct (Abdomen & Pelvis)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe)	No	No	Yes	No	No	5

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2262	Tertiary	Surgical Oncology - Phase 3	2845000083	Abdominal Hysterectomy	20000	20000	19000	17000	Surgical	Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Usg (Abdomen & Pelvis)/Ct (Abdomen & Pelvis)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe)	No	No	Yes	No	No	5
2263	Tertiary	Obstetrics & Gynaecology - Phase 3	2838000012	Abdominal Hysterectomy + Salpingo-oophorectomy	20000	20000	19000	17000	Surgical	Reserved	No	No	0	Admission Notes Comprising Of History And Examination With Indications For The Procedure , Clinical Notes With Planned Line Of Treatment (Clearly Indicating Medical Management Tried And Failed Or Not Indicated. If Failed Documents Proving Duration Of Treatment And Failure. The Medical Management Should Have Been Tried For Atleast 4-6 Months Covering 1 Course Of	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Intra-Operative Photograph With Date & Patient Id , Pic Of Gross Specimen Removed , Progress Notes	No	No	Yes	No	No	5
2264	Tertiary	Surgical Oncology - Phase 3	2845000084	Abdominal Hysterectomy + Salpingo-oophorectomy	20000	20000	19000	17000	Surgical	Reserved	No	No	0	Admission Notes Comprising Of History And Examination With Indications For The Procedure , Clinical Notes With Planned Line Of Treatment (Clearly Indicating Medical Management Tried And Failed Or Not Indicated. If Failed Documents Proving Duration Of Treatment And Failure. The Medical Management Should Have Been Tried For Atleast 4-6 Months Covering 1 Course Of	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Intra-Operative Photograph With Date & Patient Id , Pic Of Gross Specimen Removed , Progress Notes	No	No	Yes	No	No	5
2265	Tertiary	Obstetrics & Gynaecology - Phase 3	2838000013	Hysterectomy-Laparoscopic hysterectomy (TLH)	20000	20000	19000	17000	Surgical	Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Usg (Abdomen & Pelvis)/Ct (Abdomen & Pelvis)	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe)	No	No	Yes	No	No	5
2266	Tertiary	Paediatric surgery - Phase 3	2841000087	Hysterectomy-Laparoscopic hysterectomy (TLH)	20000	20000	19000	17000	Surgical	Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Usg (Abdomen & Pelvis)/Ct (Abdomen & Pelvis)	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe)	No	No	Yes	No	No	5
2267	Tertiary	Obstetrics & Gynaecology - Phase 3	2838000014	Hysterectomy-Laparoscopically assisted vaginal hysterectomy (LAVH)	20000	20000	19000	17000	Surgical	Reserved	No	No	0	Admission Notes Comprising Of History And Examination (Clearly Indicating Medical Management Tried And Failed Or Not Indicated With Reason. If Failed Documents Proving Duration Of Treatment And Failure. The Medical Management Should Have Been Tried For Atleast 4-6 Months Covering 1 Course Of Hormone Cycle) , Eb/Eac , Pap Smear , Usg (Abdomen & Pelvis)/Mri (Abdomen &	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Intra-Operative Photograph With Date & Patient Id , Pic Of Gross Specimen Removed , Progress Notes	No	No	Yes	No	No	5

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2268	Tertiary	Paediatric surgery - Phase 3	28410000088	Hysterectomy-Laparoscopically assisted vaginal hysterectomy (LAVH)	20000	20000	19000	17000	Surgical	Reserved	No	No	0	Admission Notes Comprising Of History And Examination (Clearly Indicating Medical Management Tried And Failed Or Not Indicated With Reason. If Failed Documents Proving Duration Of Treatment And Failure. The Medical Management Should Have Been Tried For Atleast 4-6 Months Covering 1 Course Of Hormone Cycle), Eb/Eac, Pap Smear, Usg (Abdomen & Pelvis)/Mri (Abdomen &	Detailed Discharge Summary, Detailed Procedure/Operative Notes, Histopathology (Hpe), Intra-Operative Photograph With Date & Patient Id, Pic Of Gross Specimen Removed, Progress Notes	No	No	Yes	No	No	5
2269	Tertiary	Obstetrics & Gynaecology - Phase 3	28380000015	Hysterectomy as part of VVF / uterovaginal fistula repair (top-up)	5000	5000	4750	4250	Surgical	Not Reserved	No	No	0	Ct-Ivp/Ivp/Cystogram, Cystoscopy, Detailed Clinical Notes, Vaginoscopy	Detailed Discharge Summary, Detailed Procedure/Operative Notes, Histopathology (Hpe)	Yes	No	No	No	No	0
2270	Tertiary	Urology - Phase 3	28460000042	Hysterectomy as part of VVF / uterovaginal fistula repair (top-up)	5000	5000	4750	4250	Surgical	Not Reserved	No	No	0	Ct-Ivp/Ivp/Cystogram, Cystoscopy, Detailed Clinical Notes, Vaginoscopy	Detailed Discharge Summary, Detailed Procedure/Operative Notes, Histopathology (Hpe)	Yes	No	No	No	No	0
2271	Tertiary	Urology - Phase 3	28460000043	Ileal replacement for ureteric stricture	46000	46000	43700	39100	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes, Ivp/Ct Ivp/Mcu Confirming The Stricture Longer Than 5 Cms	Detailed Discharge Summary, Detailed Procedure/Operative Notes Including Details Of Omental Wrapping, Intra Procedure Photograph	No	No	Yes	No	No	4
2272	Tertiary	Paediatric surgery - Phase 3	28410000089	Ileostomy	14000	14000	13300	11900	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes, Endoscopy/Biopsy/Ct Scan	Detailed Discharge Summary, Detailed Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph	No	No	Yes	No	No	6
2273	Tertiary	General Surgery - Phase 3	28350000064	Ileostomy	14000	14000	13300	11900	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes, Endoscopy/Biopsy/Ct Scan	Detailed Discharge Summary, Detailed Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph	No	No	Yes	No	No	6

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2274	Tertiary	Surgical Oncology - Phase 3	2845000085	Ilio-inguinal lymphadenectomy-Bilateral	23500	23500	22325	19975	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Usg/Ct/Biopsy/Mri	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe)	No	No	Yes	No	No	2
2275	Tertiary	Urology - Phase 3	2846000044	Ilio-inguinal lymphadenectomy-Bilateral	23500	23500	22325	19975	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Usg/Ct/Biopsy/Mri	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe)	No	No	Yes	No	No	2
2276	Tertiary	Surgical Oncology - Phase 3	2845000086	Ilio-inguinal lymphadenectomy-Unilateral	18500	18500	17575	15725	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Usg/Ct/Biopsy/Mri	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe)	No	No	Yes	No	No	2
2277	Tertiary	Urology - Phase 3	2846000045	Ilio-inguinal lymphadenectomy-Unilateral	18500	18500	17575	15725	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Usg/Ct/Biopsy/Mri	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe)	No	No	Yes	No	No	2
2278	Tertiary	Paediatric surgery - Phase 3	2841000090	Incision & Drainage of Abscess-General Anesthesia	10000	10000	9500	8500	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Usg	Detailed Discharge Summary , Detailed Operative Notes , Intra-Op Clinical Photograph , Wound Or Pus Culture	No	No	Yes	No	Yes	1
2279	Tertiary	General Surgery - Phase 3	2835000065	Incision & Drainage of Abscess-General Anesthesia	10000	10000	9500	8500	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Usg	Detailed Discharge Summary , Detailed Operative Notes , Intra-Op Clinical Photograph , Wound Or Pus Culture	No	No	Yes	No	Yes	1

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2280	Tertiary	Paediatric surgery - Phase 3	28410000091	Incision & Drainage of Abscess-Local Anesthesia	5000	5000	4750	4250	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Usg	Detailed Discharge Summary , Detailed Operative Notes , Intra-Op Clinical Photograph , Wound Or Pus Culture	No	No	Yes	No	Yes	1
2281	Tertiary	General Surgery - Phase 3	28350000066	Incision & Drainage of Abscess-Local Anesthesia	5000	5000	4750	4250	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Usg	Detailed Discharge Summary , Detailed Operative Notes , Intra-Op Clinical Photograph , Wound Or Pus Culture	No	No	Yes	No	Yes	1
2282	Tertiary	General Surgery - Phase 3	28350000067	Inguinal Node (dissection) - U/L	16000	16000	15200	13600	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Usg/Biopsy	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Intra Procedure Clinical Photograph	No	No	Yes	No	No	3
2283	Tertiary	Paediatric surgery - Phase 3	28410000092	Inguinal Node (dissection) - U/L	16000	16000	15200	13600	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Usg/Biopsy	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Intra Procedure Clinical Photograph	No	No	Yes	No	No	3
2284	Tertiary	General Surgery - Phase 3	28350000068	Intercostal drainage Only	4800	4800	4560	4080	Surgical	Not Reserved	Yes	No	0	Clinical Notes For Icd , Clinical Photograph , X-Ray (Chest)	Analysis Report Of Drained Fluid , Detailed Discharge Summary , Detailed Operative Notes , Post Procedure Clinical Photograph	No	No	Yes	No	Yes	1
2285	Tertiary	Paediatric surgery - Phase 3	28410000093	Intercostal drainage Only	4800	4800	4560	4080	Surgical	Not Reserved	Yes	No	0	Clinical Notes For Icd , Clinical Photograph , X-Ray (Chest)	Analysis Report Of Drained Fluid , Detailed Discharge Summary , Detailed Operative Notes , Post Procedure Clinical Photograph	No	No	Yes	No	Yes	1

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College& Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2286	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	2832000016	Intercostal drainage Only	4800	4800	4560	4080	Surgical	Not Reserved	Yes	No	0	Clinical Notes For Icd , Clinical Photograph , X-Ray (Chest)	Analysis Report Of Drained Fluid , Detailed Discharge Summary , Detailed Operative Notes , Post Procedure Clinical Photograph	No	No	Yes	No	Yes	1
2287	Tertiary	Urology - Phase 3	2846000046	Internal Ureterotomy including cystoscopy as an independent procedure	10000	10000	9500	8500	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Rgu/Mcu	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Endoscopic Intra Procedure Photograph	No	No	Yes	No	Yes	1
2288	Tertiary	Polytrauma - Phase 3	2853000009	Internal fixation of Pelviacetabular fracture	40000	40000	38000	34000	Surgical	Not Reserved	Yes	No	0	Clinical Notes Detailing The Injury And Need Of Surgery , Fir/Mlc , X-Ray/Ct	Detailed Discharge Summary , Detailed Operative Notes , Post-Op Clinical Photograph Showing Implant For Fixation	No	No	Yes	No	No	10
2289	Tertiary	Polytrauma - Phase 3	2853000010	Internal fixation with Flap cover Surgery for wound in compound fracture	40000	40000	38000	34000	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Pre-Op Clinical Photograph , X-Ray/Ct	Detailed Discharge Summary , Detailed Operative Notes , Post-Op Clinical Photograph Showing Implant For Fixation And Flap Cover	No	No	Yes	No	No	10
2290	Tertiary	Surgical Oncology - Phase 3	2845000087	Intersphincteric resection-Lap.	40200	40200	38190	34170	Surgical	Not Reserved	No	No	0	Cect , Clinical Notes With Planned Line Of Treatment , Fnac/Biopsy	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe)	No	No	Yes	No	No	6
2291	Tertiary	Surgical Oncology - Phase 3	2845000088	Intersphincteric resection-Open	40200	40200	38190	34170	Surgical	Not Reserved	No	No	0	Cect , Clinical Notes With Planned Line Of Treatment , Fnac/Biopsy	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe)	No	No	Yes	No	No	6

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College& Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2292	Tertiary	Interventional Neuroradiology - Phase 3	2849000012	Intracranial balloon angioplasty with stenting	160000	160000	152000	136000	Medical	Not Reserved	No	No	0	Ct/Mri/Dsa , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra Procedure Clinical Photograph , Invoices/Bar-Code Of Balloon And Stent	No	No	Yes	No	No	3
2293	Tertiary	Interventional Neuroradiology - Phase 3	2849000013	Intracranial thrombolysis / clot retrieval	160000	160000	152000	136000	Medical	Not Reserved	No	No	0	Ct/Mri/Dsa , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra Procedure Clinical Photograph , Invoices/Bar-Code Of Thrombolytic Agent Used	No	No	Yes	No	No	3
2294	Tertiary	Urology - Phase 3	2846000047	Intravesical BCG / Mitomycin-Induction cycles-Duration + Cycle	15000	15000	14250	12750	Medical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Histopathology/Biopsy	Bills Of Medicines Administered , Detailed Discharge Summary , Detailed Procedure/Operative Notes	No	No	Yes	No	Yes	1
2295	Tertiary	Medical Oncology - Phase 3	28360000227	Intravesical BCG / Mitomycin-Induction cycles-Duration + Cycle	15000	15000	14250	12750	Medical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Histopathology/Biopsy	Bills Of Medicines Administered , Detailed Discharge Summary , Detailed Procedure/Operative Notes	No	No	Yes	No	Yes	1
2296	Tertiary	Urology - Phase 3	2846000048	Intravesical BCG / Mitomycin-Maintenance-Duration + Cycle	30000	30000	28500	25500	Medical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Histopathology/Biopsy	Bills Of Medicines Administered , Detailed Discharge Summary , Detailed Procedure/Operative Notes	No	No	Yes	No	Yes	1
2297	Tertiary	Medical Oncology - Phase 3	28360000228	Intravesical BCG / Mitomycin-Maintenance-Duration + Cycle	30000	30000	28500	25500	Medical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Histopathology/Biopsy	Bills Of Medicines Administered , Detailed Discharge Summary , Detailed Procedure/Operative Notes	No	No	Yes	No	Yes	1

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2298	Tertiary	Paediatric surgery - Phase 3	28410000094	Intussusception-Non – Operative Reduction in infants	20000	20000	19000	17000	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , X-Ray (Abdomen)/Usg-Abdomen	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure X-Ray (Abdomen)	No	No	Yes	No	No	3
2299	Tertiary	Paediatric surgery - Phase 3	28410000095	Intussusception-Operative in infants	25000	25000	23750	21250	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , X-Ray (Abdomen)/Usg-Abdomen	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure X-Ray (Abdomen)	No	No	Yes	No	No	5
2300	Tertiary	Paediatric surgery - Phase 3	28410000096	Isolated Intercostal Drainage and Management of ICD, Intercostal Block, Antibiotics & Physiotherapy	10000	10000	9500	8500	Surgical	Not Reserved	No	No	0	Clinical Notes For Icd , X-Ray (Chest)	Detailed Discharge Summary , Detailed Procedure Notes	No	No	Yes	No	No	4
2301	Tertiary	General Surgery - Phase 3	28350000069	Isolated Intercostal Drainage and Management of ICD, Intercostal Block, Antibiotics & Physiotherapy	10000	10000	9500	8500	Surgical	Not Reserved	No	No	0	Clinical Notes For Icd , X-Ray (Chest)	Detailed Discharge Summary , Detailed Procedure Notes	No	No	Yes	No	No	4
2302	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	28320000017	Isolated Intercostal Drainage and Management of ICD, Intercostal Block, Antibiotics & Physiotherapy	10000	10000	9500	8500	Surgical	Not Reserved	No	No	0	Clinical Notes For Icd , X-Ray (Chest)	Detailed Discharge Summary , Detailed Procedure Notes	No	No	Yes	No	No	4
2303	Tertiary	Medical Oncology - Phase 3	28360000229	LANGERHANS CELL HISTIOCYTOSIS (HISTIOCYTOSIS PROTOCOL-INDUCTION 6 MONTHS)-Langerhans Cell Histiocytosis (Histiocytosis Protocol - Induction)- Duration	22400	22400	21280	19040	Medical	Not Reserved	No	No	0	Biopsy , Bone Marrow Studies , Cbc , Lft , Mdc , Pet-Cect , Rft , Skeletal Survey	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2304	Tertiary	Medical Oncology - Phase 3	28360000230	LANGERHANS CELL HISTIOCYTOSIS (HISTIOCYTOSIS PROTOCOL- MAINTAINENCE 12 MONTHS)-Langerhans Cell Histiocytosis (Histiocytosis Protocol - Maintenance)- Duration	17000	17000	16150	14450	Medical	Not Reserved	No	No	0	Biopsy , Bone Marrow Studies ,Cbc , Lft , Mdc , Pet-Cect , Rft , Skeletal Survey	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Micro biology/Hematology/Bioche mistry/Etc) , Tranfusion Slips	No	No	Yes	No	Yes	1
2305	Tertiary	Emergency Room Packages (Care requiring less than 12 hrs stay) - Phase 3	28480000006	Laceration - Suturing / Dressing	2000	2000	1900	1700	Medical	Not Reserved	Yes	No	0	Clinical Notes With Planned Line Of Treatment , Pre-Op Clinical Photograph	Clinical Notes/Discharge Summary With Planned Line Of Treatment , Post Treatment Clinical Photograph	No	No	Yes	No	No	Not Applicable(NA)
2306	Tertiary	Paediatric surgery - Phase 3	28410000097	Ladd's Procedure	30000	30000	28500	25500	Surgical	Not Reserved	Yes	No	0	X-Ray/Ct Scan Abdomen/Ugi Contrast Study	Detailed Procedure/Operative Notes, Histopathology (Hpe) , Post Procedure Clinical Photograph Of Operated Region	No	No	Yes	No	No	7
2307	Tertiary	Neurosurgery - Phase 3	28370000036	Laminectomy with Fusion	40000	40000	38000	34000	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Mri	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Scar Photo , Post Procedure X-Ray Showing Fixation & Fusion	No	No	Yes	No	No	6
2308	Tertiary	Orthopaedics - Phase 3	28400000025	Laminectomy with Fusion	40000	40000	38000	34000	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Mri	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Scar Photo , Post Procedure X-Ray Showing Fixation & Fusion	No	No	Yes	No	No	6
2309	Tertiary	Neurosurgery - Phase 3	28370000037	Laminectomy with Fusion and fixation	50000	50000	47500	42500	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Mri	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Scar Photo , Post Procedure X-Ray Showing Fixation & Fusion	No	No	Yes	No	No	6

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2310	Tertiary	Orthopaedics - Phase 3	2840000026	Laminectomy with Fusion and fixation	50000	50000	47500	42500	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Mri	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Scar Photo , Post Procedure X-Ray Showing Fixation & Fusion	No	No	Yes	No	No	6
2311	Tertiary	Urology - Phase 3	2846000049	Lap Ureterolithotomy - Follow Up	1000	1000	950	850	Medical	Not Reserved	No	No	0	Discharge Summary	Drugs Details , Usg/Urine Routine	No	No	No	Yes	No	Not Applicable(NA)
2312	Tertiary	Obstetrics & Gynaecology - Phase 3	2838000016	Laparotomy and proceed for Ovarian Cancers. Omentomy with Bilateral Salpingo-oophorectomy	38000	38000	36100	32300	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Usg (Abdomen & Pelvis)/Ct (Abdomen & Pelvis)	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Pre-Op Pic Of Specimen Removed	No	No	Yes	No	No	5
2313	Tertiary	Paediatric surgery - Phase 3	2841000098	Laparotomy and proceed for Ovarian Cancers. Omentomy with Bilateral Salpingo-oophorectomy	38000	38000	36100	32300	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Usg (Abdomen & Pelvis)/Ct (Abdomen & Pelvis)	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Pre-Op Pic Of Specimen Removed	No	No	Yes	No	No	5
2314	Tertiary	Surgical Oncology - Phase 3	2845000089	Laparotomy and proceed for Ovarian Cancers. Omentomy with Bilateral Salpingo-oophorectomy	38000	38000	36100	32300	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Usg (Abdomen & Pelvis)/Ct (Abdomen & Pelvis)	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Pre-Op Pic Of Specimen Removed	No	No	Yes	No	No	5
2315	Tertiary	Surgical Oncology - Phase 3	2845000090	Laryngectomy-Partial laryngectomy (voice preserving)	69000	69000	65550	58650	Surgical	Not Reserved	No	No	0	Biopsy , Cect Report , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Scar Photograph	No	No	Yes	No	No	6

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College& Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2316	Tertiary	Surgical Oncology - Phase 3	2845000091	Total Laryngectomy	36000	36000	34200	30600	Surgical	Not Reserved	No	No	0	Biopsy , Cect Report , Detailed Clinical Notes	Detailed Procedure/Operative Notes , Histopathology (Hpe) , Scar Photograph	No	No	Yes	No	No	11
2317	Tertiary	Neo-natal care Packages - Phase 3	2851000007	Laser Therapy for Retinopathy of Prematurity (Irrespective of no. of eyes affected) - per session	1500	1500	1425	1275	Medical	Not Reserved	No	No	0	Need Of Planned Care And Details Of Planned Post Discharge Care	Detailed Icps , Details Of Procedures/Operative Notes For Congenital Heart Conditions , Investigation Reports Card , Pre And Post Admission General Conditions And Vital Parameters	No	No	Yes	No	Yes	1
2318	Tertiary	Surgical Oncology - Phase 3	2845000092	Lateral skull base procedures-CSF Otorrhoea repair	33700	33700	32015	28645	Surgical	Not Reserved	No	No	0	Biopsy/Ct/Mri , Clinical Notes With Planned Line Of Treatment , Justification Of Surgery	Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	No	6
2319	Tertiary	Otorhinolaryngology (ENT) - Phase 3	2833000022	Lateral skull base procedures-CSF Otorrhoea repair	33700	33700	32015	28645	Surgical	Not Reserved	No	No	0	Biopsy/Ct/Mri , Clinical Notes With Planned Line Of Treatment , Justification Of Surgery	Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	No	6
2320	Tertiary	Surgical Oncology - Phase 3	2845000093	Lateral skull base procedures-Post-traumatic facial nerve decompression	33700	33700	32015	28645	Surgical	Not Reserved	No	No	0	Biopsy/Ct/Mri , Clinical Notes With Planned Line Of Treatment , Justification Of Surgery	Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	No	6
2321	Tertiary	Otorhinolaryngology (ENT) - Phase 3	2833000023	Lateral skull base procedures-Post-traumatic facial nerve decompression	33700	33700	32015	28645	Surgical	Not Reserved	No	No	0	Biopsy/Ct/Mri , Clinical Notes With Planned Line Of Treatment , Justification Of Surgery	Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	No	6

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2322	Tertiary	Otorhinolaryngology (ENT) - Phase 3	28330000024	Lateral skull base procedures-Subtotal petrosectomy	33700	33700	32015	28645	Surgical	Not Reserved	No	No	0	Biopsy/Ct/Mri , Clinical Notes With Planned Line Of Treatment , Justification Of Surgery	Detailed Procedure/Operative Notes, Histopathology (Hpe) , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	No	6
2323	Tertiary	Surgical Oncology - Phase 3	28450000094	Lateral skull base procedures-Subtotal petrosectomy	33700	33700	32015	28645	Surgical	Not Reserved	No	No	0	Biopsy/Ct/Mri , Clinical Notes With Planned Line Of Treatment , Justification Of Surgery	Detailed Procedure/Operative Notes, Histopathology (Hpe) , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	No	6
2324	Tertiary	Surgical Oncology - Phase 3	28450000095	Leiomyoma excision-MIS	42000	42000	39900	35700	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Usg	Detailed Discharge Summary , Detailed Procedure/Operative Notes, Histopathology (Hpe) , Post Procedure Photographs Of Surgical Site	No	No	Yes	No	No	6
2325	Tertiary	Surgical Oncology - Phase 3	28450000096	Leiomyoma excision-Open	42000	42000	39900	35700	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Usg	Detailed Discharge Summary , Detailed Procedure/Operative Notes, Histopathology (Hpe) , Post Procedure Photographs Of Surgical Site	No	No	Yes	No	No	6
2326	Tertiary	Orthopaedics - Phase 3	28400000027	Limb Lengthening / Bone Transport by Ilizarov	35700	35700	33915	30345	Surgical	Not Reserved	Yes	No	0	Clinical Investigations , Clinical Photograph Of Affected Part , Radiological Investigations	Detailed Discharge Summary , Detailed Procedure/Operative Notes, Intra Procedure Photograph , Invoice/Bar-Code Of Implant , Post Procedure Clinical Photograph	No	No	Yes	No	No	8
2327	Tertiary	Paediatric surgery - Phase 3	28410000099	Open - Lobectomy	27500	27500	26125	23375	Surgical	Not Reserved	No	No	0	Biopsy/Cytology , Ct-Thorax , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Intra Procedure Photograph , Scar Photograph	No	No	Yes	No	No	5

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2328	Tertiary	General Surgery - Phase 3	2835000070	Open - Lobectomy	27500	27500	26125	23375	Surgical	Not Reserved	No	No	0	Biopsy/Cytology , Ct-Thorax , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Intra Procedure Clinical Photograph , Scar Photograph	No	No	Yes	No	No	5
2329	Tertiary	Surgical Oncology - Phase 3	2845000097	Open - Lobectomy	27500	27500	26125	23375	Surgical	Not Reserved	No	No	0	Biopsy/Cytology , Ct-Thorax , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Intra Procedure Clinical Photograph , Scar Photograph	No	No	Yes	No	No	5
2330	Tertiary	Surgical Oncology - Phase 3	2845000098	Thoracoscopic - Lobectomy	27500	27500	26125	23375	Surgical	Not Reserved	Yes	No	0	Biopsy/Cytology , Ct-Thorax , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Intra Procedure Clinical Photograph , Scar Photograph	No	No	Yes	No	No	5
2331	Tertiary	General Surgery - Phase 3	2835000071	Thoracoscopic - Lobectomy	27500	27500	26125	23375	Surgical	Not Reserved	Yes	No	0	Biopsy/Cytology , Ct-Thorax , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Intra Procedure Clinical Photograph , Scar Photograph	No	No	Yes	No	No	5
2332	Tertiary	Paediatric surgery - Phase 3	28410000100	Thoracoscopic - Lobectomy	27500	27500	26125	23375	Surgical	Not Reserved	Yes	No	0	Biopsy/Cytology , Ct-Thorax , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Intra Procedure Clinical Photograph , Scar Photograph	No	No	Yes	No	No	5
2333	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	28320000018	Low Cardiac Output syndrome requiring IABP insertion post - operatively	50000	50000	47500	42500	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Discharge Summary , Detailed Procedure/Operative Notes	Yes	No	No	No	No	7

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2334	Tertiary	Neurosurgery - Phase 3	2837000038	Lumbar Discectomy (including pre and post Op. MRI)	30000	30000	28500	25500	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Mri	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Scar Photo , Post-Op Mri	No	No	Yes	No	No	5
2335	Tertiary	Paediatric surgery - Phase 3	28410000101	Lung Hydatid Cyst removal	20000	20000	19000	17000	Surgical	Not Reserved	Yes	No	0	Clinical Photograph , Ct/Mri Chest , Detailed Clinical Notes , X-Ray	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Intra Procedure Clinical Photograph , Post Procedure Clinical Photograph	No	No	Yes	No	No	3
2336	Tertiary	General Surgery - Phase 3	28350000072	Lung Hydatid Cyst removal	20000	20000	19000	17000	Surgical	Not Reserved	Yes	No	0	Clinical Photograph , Ct/Mri Chest , Detailed Clinical Notes , X-Ray	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Intra Procedure Clinical Photograph , Post Procedure Clinical Photograph	No	No	Yes	No	No	3
2337	Tertiary	Surgical Oncology - Phase 3	28450000099	Lung metastectomy-Open	30000	30000	28500	25500	Surgical	Not Reserved	No	No	0	Cect , Detailed Clinical Notes , Fnac/Biopsy	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Scar Photograph	No	No	Yes	No	No	4
2338	Tertiary	Surgical Oncology - Phase 3	28450000100	Lung metastectomy-VATS	30000	30000	28500	25500	Surgical	Not Reserved	No	No	0	Cect , Detailed Clinical Notes , Fnac/Biopsy	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Scar Photograph	No	No	Yes	No	No	4
2339	Tertiary	Paediatric surgery - Phase 3	28410000102	Lung surgery including Thoracotomy- Decortication	45000	45000	42750	38250	Surgical	Not Reserved	Yes	No	0	Ct-Chest , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Operative Notes	No	No	Yes	No	No	10

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2340	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	2832000019	Lung surgery including Thoracotomy- Decortication	45000	45000	42750	38250	Surgical	Not Reserved	Yes	No	0	Ct-Chest , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Operative Notes	No	No	Yes	No	No	10
2341	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	2832000020	Lung surgery including Thoracotomy- Hydatid cyst	45000	45000	42750	38250	Surgical	Not Reserved	No	No	0	Ct-Chest , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Operative Notes	No	No	Yes	No	No	10
2342	Tertiary	Paediatric surgery - Phase 3	28410000103	Lung surgery including Thoracotomy- Hydatid cyst	45000	45000	42750	38250	Surgical	Not Reserved	No	No	0	Ct-Chest , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Operative Notes	No	No	Yes	No	No	10
2343	Tertiary	Paediatric surgery - Phase 3	28410000104	Lung surgery including Thoracotomy-Lung cyst exision	45000	45000	42750	38250	Surgical	Not Reserved	No	No	0	Ct-Chest , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Operative Notes	No	No	Yes	No	No	10
2344	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	28320000021	Lung surgery including Thoracotomy-Lung cyst exision	45000	45000	42750	38250	Surgical	Not Reserved	No	No	0	Ct-Chest , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Operative Notes	No	No	Yes	No	No	10
2345	Tertiary	Paediatric surgery - Phase 3	28410000105	Lung surgery including Thoracotomy- Other simple lung procedure excluding lung resection	45000	45000	42750	38250	Surgical	Not Reserved	No	No	0	Ct-Chest , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Operative Notes	No	No	Yes	No	No	10

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College& Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2346	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	2832000022	Lung surgery including Thoracotomy- Other simple lung procedure excluding lung resection	45000	45000	42750	38250	Surgical	Not Reserved	No	No	0	Ct-Chest , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Operative Notes	No	No	Yes	No	No	10
2347	Tertiary	Surgical Oncology - Phase 3	28450000101	Malignant Soft Tissue Tumour - Excision	24000	24000	22800	20400	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Histopathology (Hpe)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Photographs Of Surgical Site	No	No	Yes	No	No	5
2348	Tertiary	Polytrauma - Phase 3	28530000011	Management of Chest injury with fracture of Long bone-Management of Chest injury with fixation of 2 or more Long bones	45000	45000	42750	38250	Surgical	Not Reserved	Yes	No	0	Clinical Notes Detailing The Injury And Need Of Surgery , Fir/Mlc , X-Ray/Ct/Mri (Of Both Chest & Affected Long Bone)	Detailed Discharge Summary , Detailed Operative Notes , Intra-Op Clinical Photograph , Intra-Op X-Ray Showing Chest Injury Repair And Implant For Fixation	No	No	Yes	No	No	5
2349	Tertiary	Polytrauma - Phase 3	28530000012	Management of Chest injury with fracture of Long bone-Management of Chest injury with fixation of Single Long bone	35000	35000	33250	29750	Surgical	Not Reserved	Yes	No	0	Clinical Notes Detailing The Injury And Need Of Surgery , Fir/Mlc , X-Ray/Ct/Mri (Of Both Chest & Affected Long Bone)	Detailed Discharge Summary , Detailed Operative Notes , Intra-Op Clinical Photograph , Intra-Op X-Ray Showing Chest Injury Repair And Implant For Fixation	No	No	Yes	No	No	5
2350	Tertiary	Polytrauma - Phase 3	28530000013	Management of Nerve Plexus / Tendon injuries-Nerve Plexus injury reconstruction	50000	50000	47500	42500	Surgical	Not Reserved	Yes	No	0	Clinical Notes Detailing The Injury And Need Of Surgery , Mlc/Fir/Nerve Conduction Velocity (Ncv)/ Mri/Emg (Electromyography)	Detailed Discharge Summary , Detailed Operative Notes , Intra-Operative Photograph	No	No	Yes	No	No	10
2351	Tertiary	Polytrauma - Phase 3	28530000014	Management of Nerve Plexus / Tendon injuries-Nerve Plexus injury repair	50000	50000	47500	42500	Surgical	Not Reserved	Yes	No	0	Clinical Notes Detailing The Injury And Need Of Surgery , Mlc/Fir/Nerve Conduction Velocity (Ncv)/ Mri/Emg (Electromyography)	Detailed Discharge Summary , Detailed Operative Notes , Intra-Operative Photograph	No	No	Yes	No	No	10

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2352	Tertiary	Polytrauma - Phase 3	28530000015	Management of Nerve Plexus / Tendon injuries-Tendon Transfer	50000	50000	47500	42500	Surgical	Not Reserved	Yes	No	0	Clinical Notes Detailing The Injury And Need Of Surgery , Mlc/Fir/Nerve Conduction Velocity (Ncv)/ Mri/Emg (Electromyography)	Detailed Discharge Summary , Detailed Operative Notes , Intra-Operative Photograph	No	No	Yes	No	No	10
2353	Tertiary	Polytrauma - Phase 3	28530000016	Management of Nerve Plexus / Tendon injuries-Tendon injury reconstruction	50000	50000	47500	42500	Surgical	Not Reserved	Yes	No	0	Clinical Notes Detailing The Injury And Need Of Surgery , Mlc/Fir/Nerve Conduction Velocity (Ncv)/ Mri/Emg (Electromyography)	Detailed Discharge Summary , Detailed Operative Notes , Intra-Operative Photograph	No	No	Yes	No	No	10
2354	Tertiary	Polytrauma - Phase 3	28530000017	Management of Nerve Plexus / Tendon injuries-Tendon injury repair	50000	50000	47500	42500	Surgical	Not Reserved	Yes	No	0	Clinical Notes Detailing The Injury And Need Of Surgery , Mlc/Fir/Nerve Conduction Velocity (Ncv)/ Mri/Emg (Electromyography)	Detailed Discharge Summary , Detailed Operative Notes , Intra-Operative Photograph	No	No	Yes	No	No	10
2355	Tertiary	Polytrauma - Phase 3	28530000018	Management of Visceral injury and fracture long bone-Surgical intervention for Visceral injury and fixation of fracture of 2 or more long bones	45000	45000	42750	38250	Surgical	Not Reserved	Yes	No	0	Clinical Notes Detailing The Injury And Need Of Surgery , Fir/Mlc , X-Ray/Ct/Mri (Of Both Affected Viscera & Affected Long Bone)	Detailed Discharge Summary , Detailed Operative Notes , Intra-Op Clinical Photograph , X-Rays Showing Visceral Injury Repair And Implant For Fixation	No	No	Yes	No	No	10
2356	Tertiary	Polytrauma - Phase 3	28530000019	Management of Visceral injury and fracture long bone-Surgical intervention for Visceral injury and fixation of fracture of single long bone	30000	30000	28500	25500	Surgical	Not Reserved	Yes	No	0	Clinical Notes Detailing The Injury And Need Of Surgery , Fir/Mlc , X-Ray/Ct/Mri (Of Both Affected Viscera & Affected Long Bone)	Detailed Discharge Summary , Detailed Operative Notes , Intra-Op Clinical Photograph , X-Rays Showing Visceral Injury Repair And Implant For Fixation	No	No	Yes	No	No	10
2357	Tertiary	Oral and Maxillofacial Surgery - Phase 3	28520000005	Mandible Tumour Resection and reconstruction / Cancer surgery	6000	6000	5700	5100	Surgical	Not Reserved	No	No	0	Clinical Photograph , Fnac/Biopsy , Opg/Ct Scan	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph	No	No	Yes	No	No	2

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College& Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2358	Tertiary	General Surgery - Phase 3	2835000073	Radical / Modified Radical Mastectomy	25000	25000	23750	21250	Surgical	Not Reserved	Yes	No	0	Biopsy , Detailed Clinical Notes , Mammography	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe)	No	No	Yes	No	No	4
2359	Tertiary	Surgical Oncology - Phase 3	28450000102	Radical / Modified Radical Mastectomy	25000	25000	23750	21250	Surgical	Not Reserved	Yes	No	0	Biopsy , Detailed Clinical Notes , Mammography	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe)	No	No	Yes	No	No	4
2360	Tertiary	General Surgery - Phase 3	2835000074	Simple Mastectomy	20000	20000	19000	17000	Surgical	Not Reserved	Yes	No	0	Biopsy , Clinical Photograph , Detailed Clinical Notes , Mammography	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph	No	No	Yes	No	No	3
2361	Tertiary	Surgical Oncology - Phase 3	28450000103	Simple Mastectomy	20000	20000	19000	17000	Surgical	Not Reserved	Yes	No	0	Biopsy , Clinical Photograph , Detailed Clinical Notes , Mammography	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph	No	No	Yes	No	No	3
2362	Tertiary	Otorhinolaryngology (ENT) - Phase 3	28330000025	Mastoidectomy-Radical	28000	28000	26600	23800	Surgical	Reserved	Yes	No	0	Audiometry , Clinical Notes Confirming The Indication For The Procedure , X-Ray/Ct	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph , Scar Photograph	No	No	Yes	No	No	2
2363	Tertiary	Surgical Oncology - Phase 3	28450000104	Mastoidectomy-Radical	28000	28000	26600	23800	Surgical	Reserved	Yes	No	0	Audiometry , Clinical Notes Confirming The Indication For The Procedure , X-Ray/Ct	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph , Scar Photograph	No	No	Yes	No	No	2

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2364	Tertiary	Surgical Oncology - Phase 3	28450000105	Mastoidectomy-Simple	28000	28000	26600	23800	Surgical	Reserved	Yes	No	0	Audiometry , Clinical Notes Confirming The Indication For The Procedure , X-Ray/Ct	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph , Scar Photograph	No	No	Yes	No	No	2
2365	Tertiary	Otorhinolaryngology (ENT) - Phase 3	28330000026	Mastoidectomy-Simple	28000	28000	26600	23800	Surgical	Reserved	Yes	No	0	Audiometry , Clinical Notes Confirming The Indication For The Procedure , X-Ray/Ct	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph , Scar Photograph	No	No	Yes	No	No	2
2366	Tertiary	Surgical Oncology - Phase 3	28450000106	Maxillectomy-Partial	27000	27000	25650	22950	Surgical	Not Reserved	No	No	0	Biopsy , Cect , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Scar Photograph	No	No	Yes	No	No	6
2367	Tertiary	Surgical Oncology - Phase 3	28450000107	Maxillectomy-Radical	33000	33000	31350	28050	Surgical	Not Reserved	No	No	0	Biopsy , Cect , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Scar Photograph	No	No	Yes	No	No	8
2368	Tertiary	Surgical Oncology - Phase 3	28450000108	Maxillectomy-Total	30000	30000	28500	25500	Surgical	Not Reserved	No	No	0	Biopsy , Cect , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Scar Photograph	No	No	Yes	No	No	8
2369	Tertiary	Paediatric surgery - Phase 3	28410000106	Meatotomy / Meatoplasty-Meatoplasty	3500	3500	3325	2975	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Evidence Of Confirmed Diagnosis Of Meatal Stenosis	Detailed Discharge Summary , Detailed Procedure/Operative Notes	No	No	Yes	No	Yes	1

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College& Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2370	Tertiary	Urology - Phase 3	2846000050	Meatotomy / Meatotoplasty-Meatoplasty	3500	3500	3325	2975	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Evidence Of Confirmed Diagnosis Of Meatal Stenosis	Detailed Discharge Summary , Detailed Procedure/Operative Notes	No	No	Yes	No	Yes	1
2371	Tertiary	Urology - Phase 3	2846000051	Meatotomy / Meatotoplasty-Meatotomy	3500	3500	3325	2975	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Evidence Of Confirmed Diagnosis Of Meatal Stenosis	Detailed Discharge Summary , Detailed Procedure/Operative Notes	No	No	Yes	No	Yes	1
2372	Tertiary	Paediatric surgery - Phase 3	28410000107	Meatotomy / Meatotoplasty-Meatotomy	3500	3500	3325	2975	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Evidence Of Confirmed Diagnosis Of Meatal Stenosis	Detailed Discharge Summary , Detailed Procedure/Operative Notes	No	No	Yes	No	Yes	1
2373	Tertiary	Surgical Oncology - Phase 3	28450000109	Mediastinal lymphadenectomy-Open	36000	36000	34200	30600	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Ct Scan	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Photographs Of Surgical Site	No	No	Yes	No	No	4
2374	Tertiary	Surgical Oncology - Phase 3	28450000110	Mediastinal lymphadenectomy-Video-assisted	36000	36000	34200	30600	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Ct Scan	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Photographs Of Surgical Site	No	No	Yes	No	No	4
2375	Tertiary	Surgical Oncology - Phase 3	28450000111	Mediastinal mass excision with lung resection	60000	60000	57000	51000	Surgical	Not Reserved	No	No	0	Biopsy , Clinical Notes With Planned Line Of Treatment , Ct Thorax	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Photographs Of Surgical Site	No	No	Yes	No	No	6

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2376	Tertiary	Surgical Oncology - Phase 3	28450000112	Mediastinoscopy-Diagnostic	22200	22200	21090	18870	Surgical	Not Reserved	No	No	0	Detailed Clinical Notes , Radiological Evidence For Indication	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Photographs Of Surgical Site	No	No	Yes	No	No	2
2377	Tertiary	Surgical Oncology - Phase 3	28450000113	Mediastinoscopy-Staging	22200	22200	21090	18870	Surgical	Not Reserved	No	No	0	Detailed Clinical Notes , Radiological Evidence For Indication	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Photographs Of Surgical Site	No	No	Yes	No	No	2
2378	Tertiary	Neurosurgery - Phase 3	28370000039	Meningocele-Anterior	36000	36000	34200	30600	Surgical	Not Reserved	Yes	No	0	Ct/Mri , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure (Ct) , Post Procedure Scar Photo	No	No	Yes	No	No	10
2379	Tertiary	Neurosurgery - Phase 3	28370000040	Meningocele-Lumbar	36000	36000	34200	30600	Surgical	Not Reserved	Yes	No	0	Ct/Mri , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure (Ct) , Post Procedure Scar Photo	No	No	Yes	No	No	10
2380	Tertiary	Neurosurgery - Phase 3	28370000041	Meningocele-Occipital	50000	50000	47500	42500	Surgical	Not Reserved	Yes	No	0	Ct/Mri , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure (Ct) , Post Procedure Scar Photo	No	No	Yes	No	No	10
2381	Tertiary	General Surgery - Phase 3	28350000075	Mesenteric Cyst – Excision	15000	15000	14250	12750	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Usg/Ct/Mri	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Intra Procedure Clinical Photograph	No	No	Yes	No	No	5

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2382	Tertiary	Paediatric surgery - Phase 3	28410000108	Mesenteric Cyst – Excision	15000	15000	14250	12750	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Usg/Ct/Mri	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Intra Procedure Clinical Photograph	No	No	Yes	No	No	5
2383	Tertiary	Neurosurgery - Phase 3	28370000042	Micro disectomy-Cervical	40000	40000	38000	34000	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Mri	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra Procedure Photograph , Post Procedure Scar Photo	No	No	Yes	No	No	10
2384	Tertiary	Neurosurgery - Phase 3	28370000043	Micro disectomy-Lumbar	40000	40000	38000	34000	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Mri	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra Procedure Photograph , Post Procedure Scar Photo	No	No	Yes	No	No	10
2385	Tertiary	Plastic & reconstructive Surgery - Phase 3	28430000012	Microvascular reconstruction (free flaps)	60000	60000	57000	51000	Surgical	Not Reserved	No	No	0	Biopsy-Primary , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Scar Photograph	No	No	Yes	No	No	7
2386	Tertiary	Surgical Oncology - Phase 3	28450000114	Microvascular reconstruction (free flaps)	60000	60000	57000	51000	Surgical	Not Reserved	No	No	0	Biopsy-Primary , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Scar Photograph	No	No	Yes	No	No	7
2387	Tertiary	Neurosurgery - Phase 3	28370000044	Muscle Biopsy with report	7000	7000	6650	5950	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Electromyography (Emg) Reports	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Scar Photo	No	No	Yes	No	Yes	1

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2388	Tertiary	Otorhinolaryngology (ENT) - Phase 3	2833000027	Myringotomy with or without Grommet-Bilateral-General Anesthesia	10000	10000	9500	8500	Surgical	Not Reserved	Yes	No	0	Audiogram , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra Procedure Patient'S Photograph	No	No	Yes	No	Yes	1
2389	Tertiary	Surgical Oncology - Phase 3	28450000115	Myringotomy with or without Grommet-Bilateral-General Anesthesia	10000	10000	9500	8500	Surgical	Not Reserved	Yes	No	0	Audiogram , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra Procedure Patient'S Photograph	No	No	Yes	No	Yes	1
2390	Tertiary	Surgical Oncology - Phase 3	28450000116	Myringotomy with or without Grommet-Bilateral-Local Anesthesia	5000	5000	4750	4250	Surgical	Not Reserved	Yes	No	0	Audiogram , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra Procedure Patient'S Photograph	No	No	Yes	No	Yes	1
2391	Tertiary	Otorhinolaryngology (ENT) - Phase 3	28330000028	Myringotomy with or without Grommet-Bilateral-Local Anesthesia	5000	5000	4750	4250	Surgical	Not Reserved	Yes	No	0	Audiogram , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra Procedure Patient'S Photograph	No	No	Yes	No	Yes	1
2392	Tertiary	Surgical Oncology - Phase 3	28450000117	Myringotomy with or without Grommet-Unilateral-General Anesthesia	10000	10000	9500	8500	Surgical	Not Reserved	Yes	No	0	Audiogram , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra Procedure Patient'S Photograph	No	No	Yes	No	Yes	1
2393	Tertiary	Otorhinolaryngology (ENT) - Phase 3	28330000029	Myringotomy with or without Grommet-Unilateral-General Anesthesia	10000	10000	9500	8500	Surgical	Not Reserved	Yes	No	0	Audiogram , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra Procedure Patient'S Photograph	No	No	Yes	No	Yes	1

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2394	Tertiary	Surgical Oncology - Phase 3	28450000118	Myringotomy with or without Grommet-Unilateral-Local Anesthesia	5000	5000	4750	4250	Surgical	Not Reserved	Yes	No	0	Audiogram , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra Procedure Patient'S Photograph	No	No	Yes	No	Yes	1
2395	Tertiary	Otorhinolaryngology (ENT) - Phase 3	28330000030	Myringotomy with or without Grommet-Unilateral-Local Anesthesia	5000	5000	4750	4250	Surgical	Not Reserved	Yes	No	0	Audiogram , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra Procedure Patient'S Photograph	No	No	Yes	No	Yes	1
2396	Tertiary	Plastic & reconstructive Surgery - Phase 3	28430000013	NPWT - Per day	2000	2000	1900	1700	Surgical	Not Reserved	No	No	0	Clinical Notes Of Chronic/ Non Healing Wounds , Clinical Photograph	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Clinical Photograph With Tube And Pump	Yes	No	No	No	No	3
2397	Tertiary	General Surgery - Phase 3	28350000077	Neck dissection-Comprehensive Benign neck tumour excision	18800	18800	17860	15980	Surgical	Not Reserved	No	No	0	Clinical Photograph , Fnac/Biopsy , Indication For Surgery , X-Ray/Ct/Mri	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph Of Affected Part , Post Procedure Imaging	No	No	Yes	No	No	3
2398	Tertiary	Surgical Oncology - Phase 3	28450000119	Neck dissection-Comprehensive Benign neck tumour excision	18800	18800	17860	15980	Surgical	Not Reserved	No	No	0	Clinical Photograph , Fnac/Biopsy , Indication For Surgery , X-Ray/Ct/Mri	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph Of Affected Part , Post Procedure Imaging	No	No	Yes	No	No	3
2399	Tertiary	Otorhinolaryngology (ENT) - Phase 3	28330000031	Neck dissection-Comprehensive Benign neck tumour excision	18800	18800	17860	15980	Surgical	Not Reserved	No	No	0	Clinical Photograph , Fnac/Biopsy , Indication For Surgery , X-Ray/Ct/Mri	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph Of Affected Part , Post Procedure Imaging	No	No	Yes	No	No	3

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2400	Tertiary	Surgical Oncology - Phase 3	28450000120	Neck dissection-Comprehensive Pharyngeal diverticulum excision	18800	18800	17860	15980	Surgical	Not Reserved	Yes	No	0	Clinical Photograph , Fnac/Biopsy , Indication For Surgery , X-Ray/Ct/Mri	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph Of Affected Part , Post Procedure Imaging	No	No	Yes	No	No	3
2401	Tertiary	General Surgery - Phase 3	28350000078	Neck dissection-Comprehensive Pharyngeal diverticulum excision	18800	18800	17860	15980	Surgical	Not Reserved	Yes	No	0	Clinical Photograph , Fnac/Biopsy , Indication For Surgery , X-Ray/Ct/Mri	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph Of Affected Part , Post Procedure Imaging	No	No	Yes	No	No	3
2402	Tertiary	Otorhinolaryngology (ENT) - Phase 3	28330000032	Neck dissection-Comprehensive Pharyngeal diverticulum excision	18800	18800	17860	15980	Surgical	Not Reserved	Yes	No	0	Clinical Photograph , Fnac/Biopsy , Indication For Surgery , X-Ray/Ct/Mri	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph Of Affected Part , Post Procedure Imaging	No	No	Yes	No	No	3
2403	Tertiary	Otorhinolaryngology (ENT) - Phase 3	28330000033	Neck dissection-Selective Benign neck tumour excision	18800	18800	17860	15980	Surgical	Not Reserved	No	No	0	Clinical Photograph , Fnac/Biopsy , Indication For Surgery , X-Ray/Ct/Mri	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph Of Affected Part , Post Procedure Imaging	No	No	Yes	No	No	3
2404	Tertiary	Surgical Oncology - Phase 3	28450000121	Neck dissection-Selective Benign neck tumour excision	18800	18800	17860	15980	Surgical	Not Reserved	No	No	0	Clinical Photograph , Fnac/Biopsy , Indication For Surgery , X-Ray/Ct/Mri	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph Of Affected Part , Post Procedure Imaging	No	No	Yes	No	No	3
2405	Tertiary	General Surgery - Phase 3	28350000079	Neck dissection-Selective Benign neck tumour excision	18800	18800	17860	15980	Surgical	Not Reserved	No	No	0	Clinical Photograph , Fnac/Biopsy , Indication For Surgery , X-Ray/Ct/Mri	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph Of Affected Part , Post Procedure Imaging	No	No	Yes	No	No	3

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2406	Tertiary	Otorhinolaryngology (ENT) - Phase 3	28330000034	Neck dissection-Selective Pharyngeal diverticulum excision	18800	18800	17860	15980	Surgical	Not Reserved	Yes	No	0	Clinical Photograph , Fnac/Biopsy , Indication For Surgery , X-Ray/Ct/Mri	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph Of Affected Part , Post Procedure Imaging	No	No	Yes	No	No	3
2407	Tertiary	General Surgery - Phase 3	28350000080	Neck dissection-Selective Pharyngeal diverticulum excision	18800	18800	17860	15980	Surgical	Not Reserved	Yes	No	0	Clinical Photograph , Fnac/Biopsy , Indication For Surgery , X-Ray/Ct/Mri	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph Of Affected Part , Post Procedure Imaging	No	No	Yes	No	No	3
2408	Tertiary	Surgical Oncology - Phase 3	28450000122	Neck dissection-Selective Pharyngeal diverticulum excision	18800	18800	17860	15980	Surgical	Not Reserved	Yes	No	0	Clinical Photograph , Fnac/Biopsy , Indication For Surgery , X-Ray/Ct/Mri	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph Of Affected Part , Post Procedure Imaging	No	No	Yes	No	No	3
2409	Tertiary	Surgical Oncology - Phase 3	28450000123	Neck dissection - comprehensive	16000	16000	15200	13600	Surgical	Not Reserved	No	No	0	Detailed Clinical Notes , Fnac/Biopsy , Usg/Ct-Neck	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Scar Photograph	No	No	Yes	No	No	4
2410	Tertiary	Paediatric surgery - Phase 3	28410000109	Nephrectomy-For Benign pathology - Lap.	27500	27500	26125	23375	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Usg/Ct/Fnac/Biopsy	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Intra-Operative Photograph	No	No	Yes	No	No	3
2411	Tertiary	Surgical Oncology - Phase 3	28450000124	Nephrectomy-For Benign pathology - Lap.	27500	27500	26125	23375	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Usg/Ct/Fnac/Biopsy	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Intra-Operative Photograph	No	No	Yes	No	No	3

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2412	Tertiary	Urology - Phase 3	2846000052	Nephrectomy-For Benign pathology - Lap.	27500	27500	26125	23375	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Usg/Ct/Fnac/Biopsy	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Intra-Operative Photograph	No	No	Yes	No	No	3
2413	Tertiary	Urology - Phase 3	2846000053	Nephrectomy-For Benign pathology - Open	27500	27500	26125	23375	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Usg/Ct/Fnac/Biopsy	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Intra-Operative Photograph	No	No	Yes	No	No	4
2414	Tertiary	Paediatric surgery - Phase 3	28410000110	Nephrectomy-For Benign pathology - Open	27500	27500	26125	23375	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Usg/Ct/Fnac/Biopsy	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Intra-Operative Photograph	No	No	Yes	No	No	4
2415	Tertiary	Surgical Oncology - Phase 3	28450000125	Nephrectomy-For Benign pathology - Open	27500	27500	26125	23375	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Usg/Ct/Fnac/Biopsy	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Intra-Operative Photograph	No	No	Yes	No	No	4
2416	Tertiary	Urology - Phase 3	2846000054	Nephrectomy-Radical (Renal tumor) - Lap.	27500	27500	26125	23375	Surgical	Not Reserved	Yes	No	0	Ct/Mri/Fnac/Biopsy , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Intra-Operative Photograph/Post Procedure (X-Ray)	No	No	Yes	No	No	3
2417	Tertiary	Paediatric surgery - Phase 3	28410000111	Nephrectomy-Radical (Renal tumor) - Lap.	27500	27500	26125	23375	Surgical	Not Reserved	Yes	No	0	Ct/Mri/Fnac/Biopsy , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Intra-Operative Photograph/Post Procedure (X-Ray)	No	No	Yes	No	No	3

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2418	Tertiary	Surgical Oncology - Phase 3	28450000126	Nephrectomy-Radical (Renal tumor) - Lap.	27500	27500	26125	23375	Surgical	Not Reserved	Yes	No	0	Ct/Mri/Fnac/Biopsy , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Intra-Operative Photograph/Post Procedure (X-Ray)	No	No	Yes	No	No	3
2419	Tertiary	Urology - Phase 3	28460000055	Nephrectomy-Radical (Renal tumor) - Open	27500	27500	26125	23375	Surgical	Not Reserved	Yes	No	0	Ct/Mri/Fnac/Biopsy , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Intra-Operative Photograph/Post Procedure (X-Ray)	No	No	Yes	No	No	4
2420	Tertiary	Paediatric surgery - Phase 3	28410000112	Nephrectomy-Radical (Renal tumor) - Open	27500	27500	26125	23375	Surgical	Not Reserved	Yes	No	0	Ct/Mri/Fnac/Biopsy , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Intra-Operative Photograph/Post Procedure (X-Ray)	No	No	Yes	No	No	4
2421	Tertiary	Surgical Oncology - Phase 3	28450000127	Nephrectomy-Radical (Renal tumor) - Open	27500	27500	26125	23375	Surgical	Not Reserved	Yes	No	0	Ct/Mri/Fnac/Biopsy , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Intra-Operative Photograph/Post Procedure (X-Ray)	No	No	Yes	No	No	4
2422	Tertiary	Paediatric surgery - Phase 3	28410000113	Nephrectomy - Partial or Hemi-Lap.	42000	42000	39900	35700	Surgical	Not Reserved	Yes	No	0	Ct/Mri , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Intra-Operative Photograph	No	No	Yes	No	No	3
2423	Tertiary	Urology - Phase 3	28460000056	Nephrectomy - Partial or Hemi-Lap.	42000	42000	39900	35700	Surgical	Not Reserved	Yes	No	0	Ct/Mri , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Intra-Operative Photograph	No	No	Yes	No	No	3

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2424	Tertiary	Surgical Oncology - Phase 3	28450000128	Nephrectomy - Partial or Hemi-Lap.	42000	42000	39900	35700	Surgical	Not Reserved	Yes	No	0	Ct/Mri , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Intra-Operative Photograph	No	No	Yes	No	No	3
2425	Tertiary	Surgical Oncology - Phase 3	28450000129	Nephrectomy - Partial or Hemi-Open	42000	42000	39900	35700	Surgical	Not Reserved	Yes	No	0	Ct/Mri , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Intra-Operative Photograph	No	No	Yes	No	No	4
2426	Tertiary	Paediatric surgery - Phase 3	28410000114	Nephrectomy - Partial or Hemi-Open	42000	42000	39900	35700	Surgical	Not Reserved	Yes	No	0	Ct/Mri , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Intra-Operative Photograph	No	No	Yes	No	No	4
2427	Tertiary	Urology - Phase 3	28460000057	Nephrectomy - Partial or Hemi-Open	42000	42000	39900	35700	Surgical	Not Reserved	Yes	No	0	Ct/Mri , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Intra-Operative Photograph	No	No	Yes	No	No	4
2428	Tertiary	Urology - Phase 3	28460000058	Nephro ureterectomy (Benign)-Lap.	27500	27500	26125	23375	Surgical	Not Reserved	Yes	No	0	Ct/Ct-ivp/Mri , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Intra-Operative Photograph	No	No	Yes	No	No	3
2429	Tertiary	Surgical Oncology - Phase 3	28450000130	Nephro ureterectomy (Benign)-Lap.	27500	27500	26125	23375	Surgical	Not Reserved	Yes	No	0	Ct/Ct-ivp/Mri , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Intra-Operative Photograph	No	No	Yes	No	No	3

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2430	Tertiary	Paediatric surgery - Phase 3	28410000115	Nephro ureterectomy (Benign)-Lap.	27500	27500	26125	23375	Surgical	Not Reserved	Yes	No	0	Ct/Ct-ivp/Mri , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Intra-Operative Photograph	No	No	Yes	No	No	3
2431	Tertiary	Surgical Oncology - Phase 3	28450000131	Nephro ureterectomy (Benign)-Open	27500	27500	26125	23375	Surgical	Not Reserved	Yes	No	0	Ct/Ct-ivp/Mri , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Intra-Operative Photograph	No	No	Yes	No	No	4
2432	Tertiary	Urology - Phase 3	28460000059	Nephro ureterectomy (Benign)-Open	27500	27500	26125	23375	Surgical	Not Reserved	Yes	No	0	Ct/Ct-ivp/Mri , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Intra-Operative Photograph	No	No	Yes	No	No	4
2433	Tertiary	Paediatric surgery - Phase 3	28410000116	Nephro ureterectomy (Benign)-Open	27500	27500	26125	23375	Surgical	Not Reserved	Yes	No	0	Ct/Ct-ivp/Mri , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Intra-Operative Photograph	No	No	Yes	No	No	4
2434	Tertiary	Surgical Oncology - Phase 3	28450000132	Nephro ureterectomy with cuff of bladder-Lap.	27500	27500	26125	23375	Surgical	Not Reserved	Yes	No	0	Ct/Ct-ivp/Mri/Mri Urogram , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Intra-Operative Photograph	No	No	Yes	No	No	3
2435	Tertiary	Urology - Phase 3	28460000060	Nephro ureterectomy with cuff of bladder-Lap.	27500	27500	26125	23375	Surgical	Not Reserved	Yes	No	0	Ct/Ct-ivp/Mri/Mri Urogram , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Intra-Operative Photograph	No	No	Yes	No	No	3

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2436	Tertiary	Paediatric surgery - Phase 3	28410000117	Nephro ureterectomy with cuff of bladder-Lap.	27500	27500	26125	23375	Surgical	Not Reserved	Yes	No	0	Ct/Ct-Ivp/Mri/Mri Urogram , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Intra-Operative Photograph	No	No	Yes	No	No	3
2437	Tertiary	Paediatric surgery - Phase 3	28410000118	Nephro ureterectomy with cuff of bladder-Open	27500	27500	26125	23375	Surgical	Not Reserved	Yes	No	0	Ct/Ct-Ivp/Mri/Mri Urogram , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Intra-Operative Photograph	No	No	Yes	No	No	4
2438	Tertiary	Surgical Oncology - Phase 3	28450000133	Nephro ureterectomy with cuff of bladder-Open	27500	27500	26125	23375	Surgical	Not Reserved	Yes	No	0	Ct/Ct-Ivp/Mri/Mri Urogram , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Intra-Operative Photograph	No	No	Yes	No	No	4
2439	Tertiary	Urology - Phase 3	28460000061	Nephro ureterectomy with cuff of bladder-Open	27500	27500	26125	23375	Surgical	Not Reserved	Yes	No	0	Ct/Ct-Ivp/Mri/Mri Urogram , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Intra-Operative Photograph	No	No	Yes	No	No	4
2440	Tertiary	Urology - Phase 3	28460000062	Nephrolithotomy-Anatrophic	30000	30000	28500	25500	Surgical	Not Reserved	Yes	No	0	Ct-Ivp , Detailed Clinical Notes , Ivp/Ncct	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure (X-Ray/UsG)	No	No	Yes	No	No	4
2441	Tertiary	Urology - Phase 3	28460000063	Nephrolithotomy-Open	30000	30000	28500	25500	Surgical	Not Reserved	Yes	No	0	Ct-Ivp , Detailed Clinical Notes , Ivp/Ncct	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure (X-Ray/UsG)	No	No	Yes	No	No	4

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College& Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2442	Tertiary	Urology - Phase 3	2846000064	Nephrostomy (PCN) - Follow Up	1200	1200	1140	1020	Medical	Not Reserved	No	No	0	Discharge Summary	Usg/X-Ray-Kub	No	No	No	Yes	No	Not Applicable(NA)
2443	Tertiary	Interventional Neuroradiology - Phase 3	2849000014	Nephrostomy - Percutaneous ultrasound guided	14000	14000	13300	11900	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Usg	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra Procedure Clinical Photograph	No	No	Yes	No	Yes	1
2444	Tertiary	Urology - Phase 3	2846000065	Nephrostomy - Percutaneous ultrasound guided	14000	14000	13300	11900	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Usg	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra Procedure Clinical Photograph	No	No	Yes	No	Yes	1
2445	Tertiary	Paediatric surgery - Phase 3	28410000119	Nephrostomy - Percutaneous ultrasound guided	14000	14000	13300	11900	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Usg	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra Procedure Clinical Photograph	No	No	Yes	No	Yes	1
2446	Tertiary	Neurosurgery - Phase 3	28370000045	Nerve Biopsy excluding Hensens	7000	7000	6650	5950	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Reports Of Previous Investigations And Treatment Taken Ruling Out Hensen'S Differentials Suspected	Detailed Discharge Summary , Detailed Procedure Notes , Hpe Report Of Nerve Biopsy	No	No	Yes	No	No	2
2447	Tertiary	Neurosurgery - Phase 3	28370000046	Nerve Decompression	16000	16000	15200	13600	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Ncv (Nerve Conduction Velocity)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Scar Photo	No	No	Yes	No	No	4

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College& Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2448	Tertiary	Neurosurgery - Phase 3	2837000047	Nerve root block	3000	3000	2850	2550	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , X-Ray Film With Report	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure (X-Ray) With Reports	No	No	Yes	No	Yes	1
2449	Tertiary	Orthopaedics - Phase 3	2840000029	Nerve root block	3000	3000	2850	2550	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , X-Ray Film With Report	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure (X-Ray) With Reports	No	No	Yes	No	Yes	1
2450	Tertiary	Neurosurgery - Phase 3	2837000048	Neurectomy	16000	16000	15200	13600	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Scar Photo	No	No	Yes	No	No	5
2451	Tertiary	Otorhinolaryngology (ENT) - Phase 3	2833000035	Neurectomy - Trigeminal	16500	16500	15675	14025	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Scar Photo	No	No	Yes	No	No	5
2452	Tertiary	Neurosurgery - Phase 3	2837000049	Neurectomy - Trigeminal	16500	16500	15675	14025	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Scar Photo	No	No	Yes	No	No	5
2453	Tertiary	Oral and Maxillofacial Surgery - Phase 3	2852000006	Neurectomy - Trigeminal	16500	16500	15675	14025	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Scar Photo	No	No	Yes	No	No	5

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2454	Tertiary	Surgical Oncology - Phase 3	28450000134	Neuroblastoma Excision	60000	60000	57000	51000	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Histopathology (Hpe)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Photographs Of Surgical Site	No	No	Yes	No	No	8
2455	Tertiary	Paediatric surgery - Phase 3	28410000120	Neurogenic bladder - Package for evaluation / investigation (catheter + ultrasound + culture + RGU/ MCU) for 1 month (medicines - antibiotics)	14300	14300	13585	12155	Medical	Not Reserved	No	No	0	Clinical Notes Detailing The Case History	Evidence Of All Investigations Done , Still Images Of Rgu/ Mcu Done With Patient Name & Date	No	No	Yes	No	Yes	1
2456	Tertiary	Urology - Phase 3	28460000066	Neurogenic bladder - Package for evaluation / investigation (catheter + ultrasound + culture + RGU/ MCU) for 1 month (medicines - antibiotics)	14300	14300	13585	12155	Medical	Not Reserved	No	No	0	Clinical Notes Detailing The Case History	Evidence Of All Investigations Done , Still Images Of Rgu/ Mcu Done With Patient Name & Date	No	No	Yes	No	Yes	1
2457	Tertiary	Surgical Oncology - Phase 3	28450000135	Oesophageal / Tracheal stenting- Oesophageal stenting	45000	45000	42750	38250	Surgical	Not Reserved	No	No	0	Cect , Detailed Clinical Notes , Ogd Scopy	Bar Code Of Stent , Detailed Discharge Summary , Detailed Procedure/Operative Notes	No	No	Yes	No	No	4
2458	Tertiary	Surgical Oncology - Phase 3	28450000136	Oesophageal / Tracheal stenting-Tracheal stenting	45000	45000	42750	38250	Surgical	Not Reserved	No	No	0	Cect , Detailed Clinical Notes , Ogd Scopy	Bar Code Of Stent , Detailed Discharge Summary , Detailed Procedure/Operative Notes	No	No	Yes	No	No	4
2459	Tertiary	Surgical Oncology - Phase 3	28450000137	Oesophagectomy	28300	28300	26885	24055	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Usg/Ct/Biopsy/Mri	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Intra Procedure Clinical Photograph	No	No	Yes	No	No	5

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2460	Tertiary	General Surgery - Phase 3	28350000081	Oesophagectomy	28300	28300	26885	24055	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Usg/Ct/Biopsy/Mri	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Intra Procedure Clinical Photograph	No	No	Yes	No	No	5
2461	Tertiary	Surgical Oncology - Phase 3	28450000138	Omentectomy	21000	21000	19950	17850	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Histopathology (Hpe)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Photographs Of Surgical Site	No	No	Yes	No	No	6
2462	Tertiary	Urology - Phase 3	28460000067	Open Nephrolithotomy - Follow Up	1000	1000	950	850	Medical	Not Reserved	No	No	0	Discharge Summary	Drugs Details , Usg/Urine Routine	No	No	No	Yes	No	Not Applicable(NA)
2463	Tertiary	Urology - Phase 3	28460000068	Open Pyelolithotomy - Follow Up	1200	1200	1140	1020	Medical	Not Reserved	No	No	0	Discharge Summary	Drugs Details , Usg/Urine Routine	No	No	No	Yes	No	Not Applicable(NA)
2464	Tertiary	Urology - Phase 3	28460000069	Open Ureterolithotomy - Follow Up	1000	1000	950	850	Medical	Not Reserved	No	No	0	Discharge Summary	Drugs Details , Usg/Urine Routine	No	No	No	Yes	No	Not Applicable(NA)
2465	Tertiary	Paediatric surgery - Phase 3	28410000121	Open bladder diverticulectomy with / without ureteric re-implantation	25000	25000	23750	21250	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Fir/Mic , Usg/Ct/Mri/Cystoscopy	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra Procedure Clinical Photograph	No	No	Yes	No	No	3

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2466	Tertiary	Urology - Phase 3	2846000070	Open bladder diverticulectomy with / without ureteric re-implantation	25000	25000	23750	21250	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Fir/Mlc , UsG/Ct/Mri/Cystoscopy	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra Procedure Clinical Photograph	No	No	Yes	No	No	3
2467	Tertiary	Otorhinolaryngology (ENT) - Phase 3	2833000036	Open laryngeal framework surgery / Thyroplasty	20000	20000	19000	17000	Surgical	Not Reserved	No	No	0	Biopsy/Ct/Mri , Clinical Photograph , Detailed Clinical Notes , Justification Of Surgery	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	No	1
2468	Tertiary	Surgical Oncology - Phase 3	28450000139	Open laryngeal framework surgery / Thyroplasty	20000	20000	19000	17000	Surgical	Not Reserved	No	No	0	Biopsy/Ct/Mri , Clinical Photograph , Detailed Clinical Notes , Justification Of Surgery	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	No	1
2469	Tertiary	Plastic & reconstructive Surgery - Phase 3	28430000014	Open reduction and internal fixation of maxilla / mandible / zygoma-Open reduction and internal fixation of mandible Multiple	25000	25000	23750	21250	Surgical	Not Reserved	No	No	0	Circumstances That Led To Fracture , Fir/Mlc , X-Ray/Ct	Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	Yes	1
2470	Tertiary	Oral and Maxillofacial Surgery - Phase 3	28520000007	Open reduction and internal fixation of maxilla / mandible / zygoma-Open reduction and internal fixation of mandible Multiple	25000	25000	23750	21250	Surgical	Not Reserved	No	No	0	Circumstances That Led To Fracture , Fir/Mlc , X-Ray/Ct	Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	Yes	1
2471	Tertiary	Otorhinolaryngology (ENT) - Phase 3	28330000037	Open reduction and internal fixation of maxilla / mandible / zygoma-Open reduction and internal fixation of mandible Multiple	25000	25000	23750	21250	Surgical	Not Reserved	No	No	0	Circumstances That Led To Fracture , Fir/Mlc , X-Ray/Ct	Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	Yes	1

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College& Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2472	Tertiary	Plastic & reconstructive Surgery - Phase 3	2843000015	Open reduction and internal fixation of maxilla / mandible / zygoma-Open reduction and internal fixation of mandible Single	18000	18000	17100	15300	Surgical	Not Reserved	No	No	0	Circumstances That Led To Fracture , Fir/Mlc , X-Ray/Ct	Detailed Procedure/Operative Notes, Histopathology (Hpe) , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	Yes	1
2473	Tertiary	Oral and Maxillofacial Surgery - Phase 3	2852000008	Open reduction and internal fixation of maxilla / mandible / zygoma-Open reduction and internal fixation of mandible Single	18000	18000	17100	15300	Surgical	Not Reserved	No	No	0	Circumstances That Led To Fracture , Fir/Mlc , X-Ray/Ct	Detailed Procedure/Operative Notes, Histopathology (Hpe) , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	Yes	1
2474	Tertiary	Otorhinolaryngology (ENT) - Phase 3	2833000038	Open reduction and internal fixation of maxilla / mandible / zygoma-Open reduction and internal fixation of mandible Single	18000	18000	17100	15300	Surgical	Not Reserved	No	No	0	Circumstances That Led To Fracture , Fir/Mlc , X-Ray/Ct	Detailed Procedure/Operative Notes, Histopathology (Hpe) , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	Yes	1
2475	Tertiary	Otorhinolaryngology (ENT) - Phase 3	2833000039	Open reduction and internal fixation of maxilla / mandible / zygoma-Open reduction and internal fixation of maxilla-Multiple	25000	25000	23750	21250	Surgical	Not Reserved	Yes	No	0	Circumstances That Led To Fracture , Fir/Mlc , X-Ray/Ct	Detailed Procedure/Operative Notes, Histopathology (Hpe) , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	Yes	1
2476	Tertiary	Plastic & reconstructive Surgery - Phase 3	2843000016	Open reduction and internal fixation of maxilla / mandible / zygoma-Open reduction and internal fixation of maxilla-Multiple	25000	25000	23750	21250	Surgical	Not Reserved	Yes	No	0	Circumstances That Led To Fracture , Fir/Mlc , X-Ray/Ct	Detailed Procedure/Operative Notes, Histopathology (Hpe) , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	Yes	1
2477	Tertiary	Oral and Maxillofacial Surgery - Phase 3	2852000009	Open reduction and internal fixation of maxilla / mandible / zygoma-Open reduction and internal fixation of maxilla-Multiple	25000	25000	23750	21250	Surgical	Not Reserved	Yes	No	0	Circumstances That Led To Fracture , Fir/Mlc , X-Ray/Ct	Detailed Procedure/Operative Notes, Histopathology (Hpe) , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	Yes	1

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2478	Tertiary	Otorhinolaryngology (ENT) - Phase 3	2833000040	Open reduction and internal fixation of maxilla / mandible / zygoma-Open reduction and internal fixation of maxilla-Single	18000	18000	17100	15300	Surgical	Not Reserved	Yes	No	0	Circumstances That Led To Fracture , Fir/Mlc , X-Ray/Ct	Detailed Procedure/Operative Notes, Histopathology (Hpe) , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	Yes	1
2479	Tertiary	Plastic & reconstructive Surgery - Phase 3	2843000017	Open reduction and internal fixation of maxilla / mandible / zygoma-Open reduction and internal fixation of maxilla-Single	18000	18000	17100	15300	Surgical	Not Reserved	Yes	No	0	Circumstances That Led To Fracture , Fir/Mlc , X-Ray/Ct	Detailed Procedure/Operative Notes, Histopathology (Hpe) , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	Yes	1
2480	Tertiary	Oral and Maxillofacial Surgery - Phase 3	2852000010	Open reduction and internal fixation of maxilla / mandible / zygoma-Open reduction and internal fixation of maxilla-Single	18000	18000	17100	15300	Surgical	Not Reserved	Yes	No	0	Circumstances That Led To Fracture , Fir/Mlc , X-Ray/Ct	Detailed Procedure/Operative Notes, Histopathology (Hpe) , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	Yes	1
2481	Tertiary	Oral and Maxillofacial Surgery - Phase 3	2852000011	Open reduction and internal fixation of maxilla / mandible / zygoma-Open reduction and internal fixation of zygoma-Multiple	25000	25000	23750	21250	Surgical	Not Reserved	No	No	0	Circumstances That Led To Fracture , Fir/Mlc , X-Ray/Ct	Detailed Procedure/Operative Notes, Histopathology (Hpe) , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	Yes	1
2482	Tertiary	Plastic & reconstructive Surgery - Phase 3	2843000018	Open reduction and internal fixation of maxilla / mandible / zygoma-Open reduction and internal fixation of zygoma-Multiple	25000	25000	23750	21250	Surgical	Not Reserved	No	No	0	Circumstances That Led To Fracture , Fir/Mlc , X-Ray/Ct	Detailed Procedure/Operative Notes, Histopathology (Hpe) , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	Yes	1
2483	Tertiary	Otorhinolaryngology (ENT) - Phase 3	2833000041	Open reduction and internal fixation of maxilla / mandible / zygoma-Open reduction and internal fixation of zygoma-Multiple	25000	25000	23750	21250	Surgical	Not Reserved	No	No	0	Circumstances That Led To Fracture , Fir/Mlc , X-Ray/Ct	Detailed Procedure/Operative Notes, Histopathology (Hpe) , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	Yes	1

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2484	Tertiary	Plastic & reconstructive Surgery - Phase 3	28430000019	Open reduction and internal fixation of maxilla / mandible / zygoma-Open reduction and internal fixation of zygoma-Single	18000	18000	17100	15300	Surgical	Not Reserved	No	No	0	Circumstances That Led To Fracture , Fir/Mlc , X-Ray/Ct	Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	Yes	1
2485	Tertiary	Oral and Maxillofacial Surgery - Phase 3	28520000012	Open reduction and internal fixation of maxilla / mandible / zygoma-Open reduction and internal fixation of zygoma-Single	18000	18000	17100	15300	Surgical	Not Reserved	No	No	0	Circumstances That Led To Fracture , Fir/Mlc , X-Ray/Ct	Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	Yes	1
2486	Tertiary	Otorhinolaryngology (ENT) - Phase 3	28330000042	Open reduction and internal fixation of maxilla / mandible / zygoma-Open reduction and internal fixation of zygoma-Single	18000	18000	17100	15300	Surgical	Not Reserved	No	No	0	Circumstances That Led To Fracture , Fir/Mlc , X-Ray/Ct	Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	Yes	1
2487	Tertiary	Urology - Phase 3	28460000071	Open simple prostatectomy for BPH	27500	27500	26125	23375	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Post Void Volume/Psa , Uroflowmetry , Usg-Prostate	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe)	No	No	Yes	No	No	3
2488	Tertiary	Surgical Oncology - Phase 3	28450000140	Operation for Carcinoma Lip-Cheek advancement	26800	26800	25460	22780	Surgical	Not Reserved	Yes	No	0	Biopsy , Clinical Photograph , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph	No	No	Yes	No	No	6
2489	Tertiary	General Surgery - Phase 3	28350000082	Operation for Carcinoma Lip-Cheek advancement	26800	26800	25460	22780	Surgical	Not Reserved	Yes	No	0	Biopsy , Clinical Photograph , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph	No	No	Yes	No	No	6

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2490	Tertiary	General Surgery - Phase 3	2835000083	Operation for Carcinoma Lip-Wedge Excision	19000	19000	18050	16150	Surgical	Not Reserved	Yes	No	0	Biopsy , Clinical Photograph , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph	No	No	Yes	No	No	6
2491	Tertiary	Surgical Oncology - Phase 3	28450000141	Operation for Carcinoma Lip-Wedge Excision	19000	19000	18050	16150	Surgical	Not Reserved	Yes	No	0	Biopsy , Clinical Photograph , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph	No	No	Yes	No	No	6
2492	Tertiary	Surgical Oncology - Phase 3	28450000142	Operation for Carcinoma Lip-Wedge Excision and Vermilionectomy	23800	23800	22610	20230	Surgical	Not Reserved	No	No	0	Biopsy , Clinical Photograph , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph	No	No	Yes	No	No	6
2493	Tertiary	General Surgery - Phase 3	28350000084	Operation for Carcinoma Lip-Wedge Excision and Vermilionectomy	23800	23800	22610	20230	Surgical	Not Reserved	No	No	0	Biopsy , Clinical Photograph , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph	No	No	Yes	No	No	6
2494	Tertiary	Paediatric surgery - Phase 3	28410000122	Operation for Duplication of Intestine	18000	18000	17100	15300	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Usg- Abdomen/Ct/Mri/Usg- Endoscopic	Detailed Discharge Summary , Detailed Operative Notes , Hpe Of Removed Tissue , Intra-Op Clinical Photograph , Usg	No	No	Yes	No	No	7
2495	Tertiary	General Surgery - Phase 3	28350000085	Operation for Duplication of Intestine	18000	18000	17100	15300	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Usg- Abdomen/Ct/Mri/Usg- Endoscopic	Detailed Discharge Summary , Detailed Operative Notes , Hpe Of Removed Tissue , Intra-Op Clinical Photograph , Usg	No	No	Yes	No	No	7

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2496	Tertiary	General Surgery - Phase 3	2835000086	Operation for Hydrocele (U/L)	5000	5000	4750	4250	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Usg-Scrotum/Usg-Scrotal	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Intra Procedure Clinical Photograph	No	No	Yes	No	Yes	1
2497	Tertiary	Paediatric surgery - Phase 3	28410000123	Operation for Hydrocele (U/L)	5000	5000	4750	4250	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Usg-Scrotum/Usg-Scrotal	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Intra Procedure Clinical Photograph	No	No	Yes	No	Yes	1
2498	Tertiary	General Surgery - Phase 3	2835000087	Operation of Choledochal Cyst	24500	24500	23275	20825	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Usg/Ct Abdomen	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Scar Photograph	No	No	Yes	No	No	5
2499	Tertiary	Paediatric surgery - Phase 3	28410000124	Operation of Choledochal Cyst	24500	24500	23275	20825	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Usg/Ct Abdomen	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Scar Photograph	No	No	Yes	No	No	5
2500	Tertiary	Paediatric surgery - Phase 3	28410000125	Operations for Replacement of Oesophagus by Colon	30500	30500	28975	25925	Surgical	Not Reserved	Yes	No	0	Biopsy , Ct/Mri/Ugi Endoscopy (Ugie) , Detailed Clinical Notes , X-Ray	Detailed Discharge Summary , Detailed Operative Notes , Intra Procedure Photograph Of Removed Esophagus , Scar Photo (Should Be Two Scars Or One Huge Thoracolumbar Scar Covering Both Colon Removal & Esophagus Replacement)	No	No	Yes	No	No	10
2501	Tertiary	General Surgery - Phase 3	2835000088	Operations for Replacement of Oesophagus by Colon	30500	30500	28975	25925	Surgical	Not Reserved	Yes	No	0	Biopsy , Ct/Mri/Ugi Endoscopy (Ugie) , Detailed Clinical Notes , X-Ray	Detailed Discharge Summary , Detailed Operative Notes , Intra Procedure Photograph Of Removed Esophagus , Scar Photo (Should Be Two Scars Or One Huge Thoracolumbar Scar Covering Both Colon Removal & Esophagus Replacement)	No	No	Yes	No	No	10

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2502	Tertiary	General Surgery - Phase 3	2835000089	Operative Cholecystostomy-Lap.	10000	10000	9500	8500	Surgical	Not Reserved	Yes	No	0	Ct/Usg , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Operative Notes , Intra Procedure Clinical Photograph	No	No	Yes	No	No	4
2503	Tertiary	Paediatric surgery - Phase 3	28410000126	Operative Cholecystostomy-Lap.	10000	10000	9500	8500	Surgical	Not Reserved	Yes	No	0	Ct/Usg , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Operative Notes , Intra Procedure Clinical Photograph	No	No	Yes	No	No	4
2504	Tertiary	Paediatric surgery - Phase 3	28410000127	Operative Cholecystostomy-Open	10000	10000	9500	8500	Surgical	Not Reserved	Yes	No	0	Ct/Usg , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Operative Notes , Intra Procedure Clinical Photograph	No	No	Yes	No	No	4
2505	Tertiary	General Surgery - Phase 3	28350000090	Operative Cholecystostomy-Open	10000	10000	9500	8500	Surgical	Not Reserved	Yes	No	0	Ct/Usg , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Operative Notes , Intra Procedure Clinical Photograph	No	No	Yes	No	No	4
2506	Tertiary	General Surgery - Phase 3	28350000091	Operative Gastrostomy	15000	15000	14250	12750	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Endoscopy Report/Video/Biopsy/Ct Scan	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Intra Procedure Clinical Photograph , Post Procedure Clinical Photograph	No	No	Yes	No	No	5
2507	Tertiary	Paediatric surgery - Phase 3	28410000128	Operative Gastrostomy	15000	15000	14250	12750	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Endoscopy Report/Video/Biopsy/Ct Scan	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Intra Procedure Clinical Photograph , Post Procedure Clinical Photograph	No	No	Yes	No	No	5

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College& Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2508	Tertiary	Paediatric surgery - Phase 3	28410000129	Operative Management of Volvulus of Large Bowel	25000	25000	23750	21250	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , X-Ray (Abdomen)/Ct Contrast-Abd	Detailed Discharge Summary , Detailed Operative Notes , X-Ray (Abdomen)	No	No	Yes	No	No	4
2509	Tertiary	General Surgery - Phase 3	28350000092	Operative Management of Volvulus of Large Bowel	25000	25000	23750	21250	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , X-Ray (Abdomen)/Ct Contrast-Abd	Detailed Discharge Summary , Detailed Operative Notes , X-Ray (Abdomen)	No	No	Yes	No	No	4
2510	Tertiary	Paediatric surgery - Phase 3	28410000130	Operative drainage of Appendicular Abscess	12000	12000	11400	10200	Surgical	Not Reserved	No	No	0	Detailed Clinical Notes , Usq	Detailed Discharge Summary , Detailed Operative Notes , Intra-Op Clinical Photograph	No	No	Yes	No	No	3
2511	Tertiary	General Surgery - Phase 3	28350000093	Operative drainage of Appendicular Abscess	12000	12000	11400	10200	Surgical	Not Reserved	No	No	0	Detailed Clinical Notes , Usq	Detailed Discharge Summary , Detailed Operative Notes , Intra-Op Clinical Photograph	No	No	Yes	No	No	3
2512	Tertiary	Surgical Oncology - Phase 3	28450000143	Orchidectomy	11200	11200	10640	9520	Surgical	Not Reserved	No	No	0	Clinical Notes Describing Swelling In Scrotum , Fnac , Justification Of Orchidectmy , Tumour Markers , Usq-Scrotum/Usq-Scrotal	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Intra-Op Clinical Photograph	No	No	Yes	No	No	2
2513	Tertiary	General Surgery - Phase 3	28350000094	Orchidectomy	11200	11200	10640	9520	Surgical	Not Reserved	No	No	0	Clinical Notes Describing Swelling In Scrotum , Fnac , Justification Of Orchidectmy , Tumour Markers , Usq-Scrotum/Usq-Scrotal	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Intra-Op Clinical Photograph	No	No	Yes	No	No	2

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2514	Tertiary	Paediatric surgery - Phase 3	28410000131	Orchidectomy	11200	11200	10640	9520	Surgical	Not Reserved	No	No	0	Clinical Notes Describing Swelling In Scrotum , Fnac , Justification Of Orchidectmy , Tumour Markers , Usg: Scrotum/Usg-Scrotal	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Intra-Op Clinical Photograph	No	No	Yes	No	No	2
2515	Tertiary	Paediatric surgery - Phase 3	28410000132	Orchiectomy-High inguinal	13800	13800	13110	11730	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Usg/Ct/Biopsy	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe)	No	No	Yes	No	No	2
2516	Tertiary	Urology - Phase 3	28460000072	Orchiectomy-High inguinal	13800	13800	13110	11730	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Usg/Ct/Biopsy	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe)	No	No	Yes	No	No	2
2517	Tertiary	Surgical Oncology - Phase 3	28450000144	Orchiectomy-High inguinal	13800	13800	13110	11730	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Usg/Ct/Biopsy	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe)	No	No	Yes	No	No	2
2518	Tertiary	Paediatric surgery - Phase 3	28410000133	Orchiectomy-Simple	10000	10000	9500	8500	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Usg/Ct/Biopsy	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe)	No	No	Yes	No	Yes	1
2519	Tertiary	Surgical Oncology - Phase 3	28450000145	Orchiectomy-Simple	10000	10000	9500	8500	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Usg/Ct/Biopsy	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe)	No	No	Yes	No	Yes	1

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2520	Tertiary	Urology - Phase 3	2846000073	Orchiectomy-Simple	10000	10000	9500	8500	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Usg/Ct/Biopsy	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe)	No	No	Yes	No	Yes	1
2521	Tertiary	Paediatric surgery - Phase 3	28410000134	Orchiopexy with laparoscopy-Bilateral	35000	35000	33250	29750	Surgical	Not Reserved	Yes	No	0	Clinical Photograph Of Affected Part , Detailed Clinical Notes , Usg	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	No	2
2522	Tertiary	Urology - Phase 3	28460000074	Orchiopexy with laparoscopy-Bilateral	35000	35000	33250	29750	Surgical	Not Reserved	Yes	No	0	Clinical Photograph Of Affected Part , Detailed Clinical Notes , Usg	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	No	2
2523	Tertiary	Paediatric surgery - Phase 3	28410000135	Orchiopexy with laparoscopy-Unilateral	30000	30000	28500	25500	Surgical	Not Reserved	Yes	No	0	Clinical Photograph Of Affected Part , Detailed Clinical Notes , Usg	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	No	2
2524	Tertiary	Urology - Phase 3	28460000075	Orchiopexy with laparoscopy-Unilateral	30000	30000	28500	25500	Surgical	Not Reserved	Yes	No	0	Clinical Photograph Of Affected Part , Detailed Clinical Notes , Usg	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	No	2
2525	Tertiary	Urology - Phase 3	28460000076	Orchiopexy without laparoscopy - B/L	15000	15000	14250	12750	Surgical	Not Reserved	Yes	No	0	Clinical Photograph Of Affected Part , Detailed Clinical Notes , Usg	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	No	2

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2526	Tertiary	Paediatric surgery - Phase 3	28410000136	Orchiopexy without laparoscopy - B/L	15000	15000	14250	12750	Surgical	Not Reserved	Yes	No	0	Clinical Photograph Of Affected Part , Detailed Clinical Notes , Usg	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	No	2
2527	Tertiary	Paediatric surgery - Phase 3	28410000137	Orchiopexy without laparoscopy - U/L	15000	15000	14250	12750	Surgical	Not Reserved	Yes	No	0	Clinical Photograph Of Affected Part , Detailed Clinical Notes , Usg	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	No	2
2528	Tertiary	Urology - Phase 3	28460000077	Orchiopexy without laparoscopy - U/L	15000	15000	14250	12750	Surgical	Not Reserved	Yes	No	0	Clinical Photograph Of Affected Part , Detailed Clinical Notes , Usg	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	No	2
2529	Tertiary	Urology - Phase 3	28460000078	PCNL (Percutaneous Nephrolithotomy)-Bilateral	29000	29000	27550	24650	Surgical	Not Reserved	Yes	No	0	Ct-Ivp , Detailed Clinical Notes , Ivp/Ncct	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra-Operative Photograph , Post Procedure (X-Ray/Usg)	No	No	Yes	No	No	2
2530	Tertiary	Urology - Phase 3	28460000079	PCNL (Percutaneous Nephrolithotomy)-Unilateral	24000	24000	22800	20400	Surgical	Not Reserved	Yes	No	0	Ct-Ivp , Detailed Clinical Notes , Ivp/Ncct	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra-Operative Photograph , Post Procedure (X-Ray/Usg)	No	No	Yes	No	No	2
2531	Tertiary	Urology - Phase 3	28460000080	PCNL - Follow Up	1200	1200	1140	1020	Medical	Not Reserved	No	No	0	Discharge Summary	Drugs Details , Usg/Urine Routine	No	No	No	Yes	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2532	Tertiary	Cardiology - Phase 3	2831000017	PDA Device Closure	55000	55000	52250	46750	Medical	Not Reserved	No	No	0	Detailed Clinical Notes , Echo Report Showing Pda	Detailed Discharge Summary , Invoice Of Blade/Device Used , Post Procedure 2-D Echo With Report , Procedure/Operative Notes With Images	No	No	Yes	No	No	2
2533	Tertiary	Medical Oncology - Phase 3	28360000231	PEDIATRIC AML CONSOLIDATION (high dose cytarabine) x 3 cycles-Consolidation - High Dose Cytarabine-Cycle	57600	57600	54720	48960	Medical	Not Reserved	No	No	0	Bone Marrow Aspiration , Cbc , Cytogenetics , Lt , Molecular , Peripheral Blood Flow Cytometry , Rbs , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
2534	Tertiary	Medical Oncology - Phase 3	28360000232	PEDIATRIC APML CONSOLIDATION (2 MONTHS)-Consolidation-Duration	36800	36800	34960	31280	Medical	Not Reserved	No	No	0	Biochemistry , Bone Marrow Studies , Cbc , Ecg , Pmi-Rara , Rq Pcr	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
2535	Tertiary	Medical Oncology - Phase 3	28360000233	PEDIATRIC APML INDUCTION (2 MONTHS)-Induction-Duration	97600	97600	92720	82960	Medical	Not Reserved	No	No	0	Biochemistry , Cbc	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
2536	Tertiary	Medical Oncology - Phase 3	28360000234	PEDIATRIC APML MAINTENANCE (18 MONTHS)-Maintenance-Cycle	39300	39300	37335	33405	Medical	Not Reserved	No	No	0	2-D Echo , Aptt , Biochemistry , Biopsy , Bone Marrow Flow Cytometry , Cbc , Cytogenetics , Fibrinogen , Hbsag , Hcv , Hiv , Mdc , Ncct-Chest , Pmi-Rara , Pt , Rq Pcr	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
2537	Tertiary	Medical Oncology - Phase 3	28360000235	PEDIATRIC NON HODGKINS LYMPHOMA (LMB 89-96) CONSOLIDATION (8 WEEKS) 2 cycles-LMB 89 - 96 - Consolidation-Duration + Cycle	33500	33500	31825	28475	Medical	Not Reserved	No	No	0	2-D Echo , Biochemistry , Biopsy/Fluid Flow Cytometry , Bone Marrow Studies , Cbc , Ecg , Pet-Ct Or Cect-Chest Abdomen And Pelvis	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2538	Tertiary	Medical Oncology - Phase 3	28360000236	PEDIATRIC NON HODGKINS LYMPHOMA (LMB 89-96) INDUCTION-COPADAM (8 WEEKS, 2 CYCLES)-LMB 89 - 96 - Induction COPADAM-Duration + Cycle	33100	33100	31445	28135	Medical	Not Reserved	No	No	0	2-D Echo , Biochemistry , Biopsy/Fluid Flow Cytometry , Bone Marrow Studies , Cbc , Ecg , Pet-Ct Or Cect-Chest Abdomen And Pelvis	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
2539	Tertiary	Medical Oncology - Phase 3	28360000237	PEDIATRIC NON HODGKINS LYMPHOMA (LMB 89-96) MAINTAINENCE (12 WEEKS)-LMB 89 - 96 - Maintenance	15400	15400	14630	13090	Medical	Not Reserved	No	No	0	2-D Echo , Biochemistry , Biopsy/Fluid Flow Cytometry , Bone Marrow Studies , Cbc , Ecg , Pet-Ct Or Cect-Chest Abdomen And Pelvis	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
2540	Tertiary	Medical Oncology - Phase 3	28360000238	PEDIATRIC NON HODGKINS LYMPHOMA (MCP-842) 8 cycles-MCP - 842-Cycle	13200	13200	12540	11220	Medical	Not Reserved	No	No	0	2-D Echo , Biochemistry , Biopsy/Fluid Flow Cytometry , Bone Marrow Studies , Cbc , Ecg , Pet-Ct Or Cect-Chest Abdomen And Pelvis	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
2541	Tertiary	Medical Oncology - Phase 3	28360000239	PEDIATRIC-GCT/JEB-Cycle	10000	10000	9500	8500	Medical	Not Reserved	No	No	0	Audiometry , Biochemistry , Biopsy , Cbc , Cect-Chest/ Abdomen , Gfr , Tumour Markers	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	1
2542	Tertiary	Otorhinolaryngology (ENT) - Phase 3	28330000043	Palatectomy-Hard palate	20000	20000	19000	17000	Surgical	Not Reserved	No	No	0	Biopsy , Clinical Photograph , Ct/Mri , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Scar Photograph	No	No	Yes	No	No	6
2543	Tertiary	Surgical Oncology - Phase 3	28450000146	Palatectomy-Hard palate	20000	20000	19000	17000	Surgical	Not Reserved	No	No	0	Biopsy , Clinical Photograph , Ct/Mri , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Scar Photograph	No	No	Yes	No	No	6

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College& Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2544	Tertiary	Otorhinolaryngology (ENT) - Phase 3	2833000044	Palatectomy-Soft palate	20000	20000	19000	17000	Surgical	Not Reserved	No	No	0	Biopsy , Clinical Photograph , Ct/Mri , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Scar Photograph	No	No	Yes	No	No	4
2545	Tertiary	Surgical Oncology - Phase 3	28450000147	Palatectomy-Soft palate	20000	20000	19000	17000	Surgical	Not Reserved	No	No	0	Biopsy , Clinical Photograph , Ct/Mri , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Scar Photograph	No	No	Yes	No	No	4
2546	Tertiary	Surgical Oncology - Phase 3	28450000148	Pancreaticoduodenectomy (Whipple's)	30000	30000	28500	25500	Surgical	Not Reserved	Yes	No	0	Ct/Usg , Detailed Clinical Notes , Ercp	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Intra Procedure Clinical Photograph	No	No	Yes	No	No	7
2547	Tertiary	General Surgery - Phase 3	28350000095	Pancreaticoduodenectomy (Whipple's)	30000	30000	28500	25500	Surgical	Not Reserved	Yes	No	0	Ct/Usg , Detailed Clinical Notes , Ercp	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Intra Procedure Clinical Photograph	No	No	Yes	No	No	7
2548	Tertiary	Surgical Oncology - Phase 3	28450000149	Parapharyngeal Tumour Excision	31200	31200	29640	26520	Surgical	Not Reserved	Yes	No	0	Clinical Notes With Planned Line Of Treatment , Ct/Mri , Histopathology (Hpe)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Photographs Of Surgical Site	No	No	Yes	No	No	6
2549	Tertiary	Interventional Neuroradiology - Phase 3	28490000015	Parent vessel occlusion - Basic	30000	30000	28500	25500	Medical	Not Reserved	No	No	0	Ct/Mri/Dsa , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes With Procedure Deployed , Intra Procedure Photograph Showing Coil , Invoice/Bar-Code Of Used Coil	No	No	Yes	No	No	3

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts) 95% of the package amount	Package Rate (Remaining Hospitals) 85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2550	Tertiary	General Surgery - Phase 3	2835000096	Superficial Parotidectomy	23800	23800	22610	20230	Surgical	Not Reserved	Yes	No	0	Clinical Photograph Of Affected Part , Ct Scan , Fnac	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	No	3
2551	Tertiary	Otorhinolaryngology (ENT) - Phase 3	2833000045	Superficial Parotidectomy	23800	23800	22610	20230	Surgical	Not Reserved	Yes	No	0	Clinical Photograph Of Affected Part , Ct Scan , Fnac	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	No	3
2552	Tertiary	Surgical Oncology - Phase 3	28450000150	Superficial Parotidectomy	23800	23800	22610	20230	Surgical	Not Reserved	Yes	No	0	Clinical Photograph Of Affected Part , Ct Scan , Fnac	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	No	3
2553	Tertiary	Surgical Oncology - Phase 3	28450000151	Total Parotidectomy	28200	28200	26790	23970	Surgical	Not Reserved	Yes	No	0	Clinical Photograph Of Affected Part , Ct Scan , Fnac	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	No	3
2554	Tertiary	General Surgery - Phase 3	28350000097	Total Parotidectomy	28200	28200	26790	23970	Surgical	Not Reserved	Yes	No	0	Clinical Photograph Of Affected Part , Ct Scan , Fnac	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	No	3
2555	Tertiary	Otorhinolaryngology (ENT) - Phase 3	28330000046	Total Parotidectomy	28200	28200	26790	23970	Surgical	Not Reserved	Yes	No	0	Clinical Photograph Of Affected Part , Ct Scan , Fnac	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	No	3

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2556	Tertiary	Urology - Phase 3	2846000081	Partial Cystectomy-Lap.	23000	23000	21850	19550	Surgical	Not Reserved	Yes	No	0	Ct/Mri , Detailed Clinical Notes , Fnac/Biopsy	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe)	No	No	Yes	No	No	2
2557	Tertiary	Paediatric surgery - Phase 3	28410000138	Partial Cystectomy-Lap.	23000	23000	21850	19550	Surgical	Not Reserved	Yes	No	0	Ct/Mri , Detailed Clinical Notes , Fnac/Biopsy	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe)	No	No	Yes	No	No	2
2558	Tertiary	Surgical Oncology - Phase 3	28450000152	Partial Cystectomy-Lap.	23000	23000	21850	19550	Surgical	Not Reserved	Yes	No	0	Ct/Mri , Detailed Clinical Notes , Fnac/Biopsy	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe)	No	No	Yes	No	No	2
2559	Tertiary	Surgical Oncology - Phase 3	28450000153	Partial Cystectomy-Open	23000	23000	21850	19550	Surgical	Not Reserved	Yes	No	0	Ct/Mri , Detailed Clinical Notes , Fnac/Biopsy	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe)	No	No	Yes	No	No	3
2560	Tertiary	Paediatric surgery - Phase 3	28410000139	Partial Cystectomy-Open	23000	23000	21850	19550	Surgical	Not Reserved	Yes	No	0	Ct/Mri , Detailed Clinical Notes , Fnac/Biopsy	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe)	No	No	Yes	No	No	3
2561	Tertiary	Urology - Phase 3	28460000082	Partial Cystectomy-Open	23000	23000	21850	19550	Surgical	Not Reserved	Yes	No	0	Ct/Mri , Detailed Clinical Notes , Fnac/Biopsy	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe)	No	No	Yes	No	No	3

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2562	Tertiary	Urology - Phase 3	2846000083	Partial Cystectomy - Follow Up	1000	1000	950	850	Medical	Not Reserved	No	No	0	Discharge Summary	Usg	No	No	No	Yes	No	Not Applicable(NA)
2563	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	2832000026	Patent Ductus Arteriosus (PDA) Closure via thoracotomy	57000	57000	54150	48450	Surgical	Not Reserved	No	No	0	2-D Echo , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Operative Notes	No	No	Yes	No	No	7
2564	Tertiary	Surgical Oncology - Phase 3	28450000154	Pelvic Exenteration-Anterior - Lap.	58800	58800	55860	49980	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Ct Report, Histopathology (Hpe)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe)	No	No	Yes	No	No	15
2565	Tertiary	Surgical Oncology - Phase 3	28450000155	Pelvic Exenteration-Anterior - Open	58800	58800	55860	49980	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Ct Report, Histopathology (Hpe)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe)	No	No	Yes	No	No	15
2566	Tertiary	Surgical Oncology - Phase 3	28450000156	Pelvic Exenteration-Total - Lap.	58800	58800	55860	49980	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Ct Report, Histopathology (Hpe)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe)	No	No	Yes	No	No	15
2567	Tertiary	Surgical Oncology - Phase 3	28450000157	Pelvic Exenteration-Total - Open	58800	58800	55860	49980	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Ct Report, Histopathology (Hpe)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe)	No	No	Yes	No	No	15

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College& Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2568	Tertiary	Urology - Phase 3	2846000084	Partial Penectomy	15000	15000	14250	12750	Surgical	Not Reserved	Yes	No	0	Biopsy , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe)	No	No	Yes	No	No	1
2569	Tertiary	Surgical Oncology - Phase 3	28450000158	Partial Penectomy	15000	15000	14250	12750	Surgical	Not Reserved	Yes	No	0	Biopsy , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe)	No	No	Yes	No	No	2
2570	Tertiary	Urology - Phase 3	2846000085	Total Penectomy + Perineal Urethrostomy	25000	25000	23750	21250	Surgical	Not Reserved	Yes	No	0	Biopsy , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe)	No	No	Yes	No	No	2
2571	Tertiary	Surgical Oncology - Phase 3	28450000159	Total Penectomy + Perineal Urethrostomy	25000	25000	23750	21250	Surgical	Not Reserved	Yes	No	0	Biopsy , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe)	No	No	Yes	No	No	2
2572	Tertiary	Surgical Oncology - Phase 3	28450000160	Penile preserving surgery (WLE, Glansectomy, Laser)	25000	25000	23750	21250	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Histopathology (Hpe)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe)	No	No	Yes	No	No	5
2573	Tertiary	Urology - Phase 3	28460000086	Penile preserving surgery (WLE, Glansectomy, Laser)	25000	25000	23750	21250	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Histopathology (Hpe)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe)	No	No	Yes	No	No	5

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2574	Tertiary	Urology - Phase 3	2846000087	Penile prosthesis insertion	35000	35000	33250	29750	Surgical	Not Reserved	Yes	No	0	Clinical Notes Showing The Panectomy And Its Indication	Bar-Code Of Implant/S , Detailed Discharge Summary , Detailed Procedure/Operative Notes	No	No	Yes	No	No	2
2575	Tertiary	Cardiology - Phase 3	2831000018	Percutaneous Transluminal Septal Myocardial Ablation	34000	34000	32300	28900	Medical	Not Reserved	No	No	0	2-D Echo , Coronary Angiography (Cag) , Detailed Clinical Notes , Ecg	Angiogram Report With Stills , Invoice/Bar-Code Of Stent	No	No	Yes	No	No	2
2576	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	2832000028	Pericardial window (via thoracotomy)	30000	30000	28500	25500	Surgical	Not Reserved	No	No	0	Ct-Chest , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Operative Notes	No	No	Yes	No	No	7
2577	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	2832000029	Pericardiectomy	67000	67000	63650	56950	Surgical	Not Reserved	No	No	0	2-D Echo , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Operative Notes	No	No	Yes	No	No	10
2578	Tertiary	General Surgery - Phase 3	2835000098	Pericardiocentesis	12100	12100	11495	10285	Medical	Not Reserved	No	No	0	2-D Echo , Detailed Clinical Notes	Analysis Report Of Fluid Removed , Intra Procedure Clinical Photograph , Post Procedure 2-D Echo With Report	No	No	Yes	No	No	1
2579	Tertiary	Cardiology - Phase 3	2831000019	Pericardiocentesis	12100	12100	11495	10285	Medical	Not Reserved	No	No	0	2-D Echo , Detailed Clinical Notes	Analysis Report Of Fluid Removed , Intra Procedure Clinical Photograph , Post Procedure 2-D Echo With Report	No	No	Yes	No	No	1

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2580	Tertiary	Paediatric surgery - Phase 3	28410000140	Perineal Urethrostomy without closure	20000	20000	19000	17000	Surgical	Not Reserved	Yes	No	0	Clinical Notes Detailing Original Pathology , Mcu (Micturating Cysto-Urethrogram) , Rgu(Retrograde Urethrography)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra Procedure Clinical Photograph	No	No	Yes	No	No	2
2581	Tertiary	Urology - Phase 3	28460000088	Perineal Urethrostomy without closure	20000	20000	19000	17000	Surgical	Not Reserved	Yes	No	0	Clinical Notes Detailing Original Pathology , Mcu (Micturating Cysto-Urethrogram) , Rgu(Retrograde Urethrography)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra Procedure Clinical Photograph	No	No	Yes	No	No	2
2582	Tertiary	Urology - Phase 3	28460000089	Perinephric Abscess drainage-Open	14000	14000	13300	11900	Surgical	Not Reserved	Yes	No	0	Ct/Usg , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra Procedure Photograph	No	No	Yes	No	No	2
2583	Tertiary	Urology - Phase 3	28460000090	Perinephric Abscess drainage- Percutaneous	14000	14000	13300	11900	Surgical	Not Reserved	Yes	No	0	Ct/Usg , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra Procedure Photograph	No	No	Yes	No	No	2
2584	Tertiary	Cardiology - Phase 3	28310000020	Peripheral Angioplasty	55500	55500	52725	47175	Medical	Not Reserved	No	No	0	2-D Echo , Angiography Stills With Report , Doppler Stills	Implant/Bar-Code Of Stent , Post-Op Angiogram Report/ Stills	No	No	Yes	No	No	2
2585	Tertiary	Neurosurgery - Phase 3	28370000050	Peripheral Nerve Surgery-Major	30000	30000	28500	25500	Surgical	Not Reserved	No	No	0	Detailed Clinical Notes , Electromyography (Emg) Reports , Ncv (Nerve Conduction Velocity)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Scar Photo	No	No	Yes	No	No	5

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2586	Tertiary	Neurosurgery - Phase 3	2837000051	Peripheral Nerve Surgery-Minor	15000	15000	14250	12750	Surgical	Not Reserved	No	No	0	Detailed Clinical Notes , Electromyography (Emg) Reports , Ncv (Nerve Conduction Velocity)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Scar Photo	No	No	Yes	No	No	3
2587	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	2832000030	Peripheral arterial injury repair (without bypass)	30000	30000	28500	25500	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Doppler Report	Detailed Discharge Summary , Detailed Operative Notes	No	No	Yes	No	No	4
2588	Tertiary	Otorhinolaryngology (ENT) - Phase 3	2833000047	Peritonsillar abscess drainage / intraoral calculus removal-Intraoral calculus removal	5800	5800	5510	4930	Surgical	Not Reserved	No	No	0	Clinical Photograph , Doctor'S Note With Complaint , Physical Examination Findings With Indications , Supporting Investigations	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Clinical Photograph Of Affected Part , Pus Culture	No	No	Yes	No	Yes	1
2589	Tertiary	Paediatric surgery - Phase 3	28410000141	Peritonsillar abscess drainage / intraoral calculus removal-Intraoral calculus removal	5800	5800	5510	4930	Surgical	Not Reserved	No	No	0	Clinical Photograph , Doctor'S Note With Complaint , Physical Examination Findings With Indications , Supporting Investigations	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Clinical Photograph Of Affected Part , Pus Culture	No	No	Yes	No	Yes	1
2590	Tertiary	Paediatric surgery - Phase 3	28410000142	Peritonsillar abscess drainage / intraoral calculus removal-Peritonsillar abscess drainage	5800	5800	5510	4930	Surgical	Not Reserved	Yes	No	0	Clinical Photograph , Doctor'S Note With Complaint , Physical Examination Findings With Indications , Supporting Investigations	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Clinical Photograph Of Affected Part , Pus Culture	No	No	Yes	No	Yes	1
2591	Tertiary	Otorhinolaryngology (ENT) - Phase 3	2833000048	Peritonsillar abscess drainage / intraoral calculus removal-Peritonsillar abscess drainage	5800	5800	5510	4930	Surgical	Not Reserved	Yes	No	0	Clinical Photograph , Doctor'S Note With Complaint , Physical Examination Findings With Indications , Supporting Investigations	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Clinical Photograph Of Affected Part , Pus Culture	No	No	Yes	No	Yes	1

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2592	Tertiary	Surgical Oncology - Phase 3	28450000161	Pinna surgery for tumour / trauma-Pinna surgery for tumour	3000	3000	2850	2550	Surgical	Not Reserved	Yes	No	0	Biopsy , Clinical History , Pre-Op Clinical Photograph	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	Yes	1
2593	Tertiary	Otorhinolaryngology (ENT) - Phase 3	28330000049	Pinna surgery for tumour / trauma-Pinna surgery for tumour	3000	3000	2850	2550	Surgical	Not Reserved	Yes	No	0	Biopsy , Clinical History , Pre-Op Clinical Photograph	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	Yes	1
2594	Tertiary	Surgical Oncology - Phase 3	28450000162	Pleurectomy Decortication	39000	39000	37050	33150	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Ct Scan , Histopathology (Hpe)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Photographs Of Surgical Site	No	No	Yes	No	No	5
2595	Tertiary	Polytrauma - Phase 3	28530000020	Plexus injury along with Vascular injury repair / graft-Plexus injury along with Vascular injury graft	60000	60000	57000	51000	Surgical	Not Reserved	Yes	No	0	Clinical Notes Detailing The Injury And Need Of Surgery , Mic/Fir/Nerve Conduction Velocity (Ncv)/Mri/Mra/Emg (Electromyography)	Detailed Discharge Summary , Detailed Operative Notes , Intra-Operative Photograph	No	No	Yes	No	No	10
2596	Tertiary	Polytrauma - Phase 3	28530000021	Plexus injury along with Vascular injury repair / graft-Plexus injury along with Vascular injury repair	60000	60000	57000	51000	Surgical	Not Reserved	Yes	No	0	Clinical Notes Detailing The Injury And Need Of Surgery , Mic/Fir/Nerve Conduction Velocity (Ncv)/Mri/Mra/Emg (Electromyography)	Detailed Discharge Summary , Detailed Operative Notes , Intra-Operative Photograph	No	No	Yes	No	No	10
2597	Tertiary	Surgical Oncology - Phase 3	28450000163	Pneumonectomy	54000	54000	51300	45900	Surgical	Not Reserved	Yes	No	0	Biopsy , Clinical Notes With Planned Line Of Treatment , Ct Thorax	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Photographs Of Surgical Site	No	No	Yes	No	No	6

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2598	Tertiary	General Surgery - Phase 3	2835000099	Porto Caval Anastomosis	31500	31500	29925	26775	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Usg- Doppler/Ct/Mri Report	Detailed Discharge Summary , Detailed Operative Notes , Intra Procedure Clinical Photograph	No	No	Yes	No	No	7
2599	Tertiary	Burns Management - Phase 3	2847000011	Post Burn Contracture surgeries for Functional Improvement (Package including splints, pressure garments, silicone - gel sheet and physiotherapy): Excluding Neck contracture; Contracture release with - Split thickness Skin Graft (STSG) / Full Thickness Skin Graft (FTSG) / Flap cover is done for each joint with post-operative regular dressings for STSG / FTSG / Flap cover.	50000	50000	47500	42500	Surgical	Not Reserved	No	No	0	Clinical History Detailing The Burn-Aetiology , Detailed Note Functional Disability And Expected Functional Improvement , Pre-Op Clinical Photograph	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Treatment Clinical Photograph	No	No	Yes	No	No	10
2600	Tertiary	Burns Management - Phase 3	2847000012	Post Burn Contracture surgeries for Functional Improvement (Package including splints, pressure garments, silicone - gel sheet and physiotherapy): Neck contracture; Contracture release with - Split thickness Skin Graft (STSG) / Full Thickness Skin Graft (FTSG) / Flap cover is done for each joint with post-operative regular dressings for STSG / FTSG / Flap cover.	50000	50000	47500	42500	Surgical	Not Reserved	No	No	0	Clinical History Detailing The Burn-Aetiology , Detailed Note Functional Disability And Expected Functional Improvement , Pre-Op Clinical Photograph	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Treatment Clinical Photograph	No	No	Yes	No	No	10
2601	Tertiary	Urology - Phase 3	2846000091	Post TURBT - Check Cystoscopy (Per sitting) with cold-cup biopsy	10000	10000	9500	8500	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Histopathology/Biopsy	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra Procedure Photograph	No	No	Yes	No	Yes	1
2602	Tertiary	Paediatric surgery - Phase 3	28410000143	Post. Urethral Valve fulguration	14000	14000	13300	11900	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Usg/Uroflowmetry , Voiding Cystourethrogram	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra Procedure Clinical Photograph , Post Procedure (Usg)	No	No	Yes	No	Yes	1
2603	Tertiary	Urology - Phase 3	2846000092	Post. Urethral Valve fulguration	14000	14000	13300	11900	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Usg/Uroflowmetry , Voiding Cystourethrogram	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra Procedure Clinical Photograph , Post Procedure (Usg)	No	No	Yes	No	Yes	1

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2604	Tertiary	Neurosurgery - Phase 3	2837000052	Posterior Cervical Discectomy without implant	30000	30000	28500	25500	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Mri	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Scar Photo	No	No	Yes	No	No	7
2605	Tertiary	Neurosurgery - Phase 3	2837000053	Posterior Cervical Fusion with implant (Lateral mass fixation)	50000	50000	47500	42500	Surgical	Not Reserved	No	No	0	Detailed Clinical Notes , Mri	Cervical Spine X-Ray Showing Implant , Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Scar Photo	No	No	Yes	No	No	7
2606	Tertiary	Interventional Neuroradiology - Phase 3	2849000016	Pre-operative tumour embolization (per session)	40000	40000	38000	34000	Medical	Not Reserved	No	No	0	Ct/Mri/Dsa , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra Procedure Clinical Photograph , Invoice/Bar-Code Of Embolic Agent Used	No	No	Yes	No	No	5
2607	Tertiary	Plastic & reconstructive Surgery - Phase 3	2843000020	Pressure Sore – Surgery	30000	30000	28500	25500	Surgical	Not Reserved	No	No	0	Clinical Notes Of Pressure Sores , Clinical Photograph	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Clinical Photograph	No	No	Yes	No	No	3
2608	Tertiary	Surgical Oncology - Phase 3	28450000164	Procedures Requiring Bypass Techniques	35000	35000	33250	29750	Surgical	Not Reserved	Yes	No	0	Clinical Notes With Planned Line Of Treatment , Histopathology (Hpe)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Photographs Of Surgical Site	No	No	Yes	No	No	4
2609	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	2832000031	Pulmonary Embolectomy / Thromboendarterectomy-Pulmonary Embolectomy	141000	141000	133950	119850	Surgical	Not Reserved	No	No	0	2-D Echo , Ct-Chest , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Operative Notes	No	No	Yes	No	No	10

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2610	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	2832000032	Pulmonary Embolectomy / Thromboendarterectomy-Thromboendarterectomy	141000	141000	133950	119850	Surgical	Not Reserved	No	No	0	2-D Echo , Ct-Chest , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Operative Notes	No	No	Yes	No	No	10
2611	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	2832000033	Pulmonary Resection-Infective	90000	90000	85500	76500	Surgical	Not Reserved	No	No	0	Detailed Clinical Notes , Pre-Op (X-Ray/Ct-Scan)	Detailed Discharge Summary , Detailed Operative Notes , Hpe Of Resected Tissue	No	No	Yes	No	No	10
2612	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	2832000034	Pulmonary Resection-Non - Infective	70000	70000	66500	59500	Surgical	Not Reserved	No	No	0	Detailed Clinical Notes , Pre-Op (X-Ray/Ct-Scan)	Detailed Discharge Summary , Detailed Operative Notes , Hpe Of Resected Tissue	No	No	Yes	No	No	10
2613	Tertiary	Urology - Phase 3	2846000093	Pyelolithotomy-Lap.	28000	28000	26600	23800	Surgical	Not Reserved	Yes	No	0	Ct-Ivp , Detailed Clinical Notes , Ivp/Ncct	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure (X-Ray/Usg)	No	No	Yes	No	No	2
2614	Tertiary	Paediatric surgery - Phase 3	28410000144	Pyelolithotomy-Lap.	28000	28000	26600	23800	Surgical	Not Reserved	Yes	No	0	Ct-Ivp , Detailed Clinical Notes , Ivp/Ncct	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure (X-Ray/Usg)	No	No	Yes	No	No	2
2615	Tertiary	Paediatric surgery - Phase 3	28410000145	Pyelolithotomy-Open	28000	28000	26600	23800	Surgical	Not Reserved	Yes	No	0	Ct-Ivp , Detailed Clinical Notes , Ivp/Ncct	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure (X-Ray/Usg)	No	No	Yes	No	No	3

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College& Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2616	Tertiary	Urology - Phase 3	2846000094	Pyelolithotomy-Open	28000	28000	26600	23800	Surgical	Not Reserved	Yes	No	0	Ct-Ivp , Detailed Clinical Notes , Ivp/Ncct	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure (X-Ray/Usg)	No	No	Yes	No	No	3
2617	Tertiary	Urology - Phase 3	2846000095	Pyeloplasty - Follow Up	1500	1500	1425	1275	Medical	Not Reserved	No	No	0	Discharge Summary	Usg/Ufm/Urine Routine	No	No	No	Yes	No	Not Applicable(NA)
2618	Tertiary	Paediatric surgery - Phase 3	28410000146	Pyeloplasty / Pyeloureterostomy / Pyelopyelostomy-Pyeloplasty - Laparoscopic	27500	27500	26125	23375	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Dtpa Renal Scan , Ivp/Ct/Ct-Ivp	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra-Operative Photograph	No	No	Yes	No	No	2
2619	Tertiary	Urology - Phase 3	2846000096	Pyeloplasty / Pyeloureterostomy / Pyelopyelostomy-Pyeloplasty - Laparoscopic	27500	27500	26125	23375	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Dtpa Renal Scan , Ivp/Ct/Ct-Ivp	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra-Operative Photograph	No	No	Yes	No	No	2
2620	Tertiary	Paediatric surgery - Phase 3	28410000147	Pyeloplasty / Pyeloureterostomy / Pyelopyelostomy-Pyeloplasty - Open	27500	27500	26125	23375	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Dtpa Renal Scan , Ivp/Ct/Ct-Ivp	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra-Operative Photograph	No	No	Yes	No	No	3
2621	Tertiary	Urology - Phase 3	2846000097	Pyeloplasty / Pyeloureterostomy / Pyelopyelostomy-Pyeloplasty - Open	27500	27500	26125	23375	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Dtpa Renal Scan , Ivp/Ct/Ct-Ivp	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra-Operative Photograph	No	No	Yes	No	No	3

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2622	Tertiary	Urology - Phase 3	2846000098	Pyeloplasty / Pyeloureterostomy / Pyelopyelostomy-Pyelopyelostomy - Laparoscopic	27500	27500	26125	23375	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Dtpa Renal Scan , lvp/Ct/Ct-lvp	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra-Operative Photograph	No	No	Yes	No	No	2
2623	Tertiary	Paediatric surgery - Phase 3	28410000148	Pyeloplasty / Pyeloureterostomy / Pyelopyelostomy-Pyelopyelostomy - Laparoscopic	27500	27500	26125	23375	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Dtpa Renal Scan , lvp/Ct/Ct-lvp	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra-Operative Photograph	No	No	Yes	No	No	2
2624	Tertiary	Urology - Phase 3	2846000099	Pyeloplasty / Pyeloureterostomy / Pyelopyelostomy-Pyelopyelostomy - Open	27500	27500	26125	23375	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Dtpa Renal Scan , lvp/Ct/Ct-lvp	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra-Operative Photograph	No	No	Yes	No	No	3
2625	Tertiary	Paediatric surgery - Phase 3	28410000149	Pyeloplasty / Pyeloureterostomy / Pyelopyelostomy-Pyelopyelostomy - Open	27500	27500	26125	23375	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Dtpa Renal Scan , lvp/Ct/Ct-lvp	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra-Operative Photograph	No	No	Yes	No	No	3
2626	Tertiary	Urology - Phase 3	28460000100	Pyeloplasty / Pyeloureterostomy / Pyelopyelostomy-Pyeloureterostomy - Laparoscopic	27500	27500	26125	23375	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Dtpa Renal Scan , lvp/Ct/Ct-lvp	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra-Operative Photograph	No	No	Yes	No	No	2
2627	Tertiary	Paediatric surgery - Phase 3	28410000150	Pyeloplasty / Pyeloureterostomy / Pyelopyelostomy-Pyeloureterostomy - Laparoscopic	27500	27500	26125	23375	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Dtpa Renal Scan , lvp/Ct/Ct-lvp	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra-Operative Photograph	No	No	Yes	No	No	2

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College& Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2628	Tertiary	Paediatric surgery - Phase 3	28410000151	Pyeloplasty / Pyeloureterostomy / Pyelopyelostomy-Pyeloureterostomy - Open	27500	27500	26125	23375	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Dtpa Renal Scan , lvp/Ct/Ct-lvp	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra-Operative Photograph	No	No	Yes	No	No	3
2629	Tertiary	Urology - Phase 3	28460000101	Pyeloplasty / Pyeloureterostomy / Pyelopyelostomy-Pyeloureterostomy - Open	27500	27500	26125	23375	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Dtpa Renal Scan , lvp/Ct/Ct-lvp	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra-Operative Photograph	No	No	Yes	No	No	3
2630	Tertiary	General Surgery - Phase 3	28350000100	Pyloromyotomy	15000	15000	14250	12750	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Endoscopy Report Confirming The Diagnosis Of Infantile Hypertrophic Pyloric Stenosis	Detailed Discharge Summary , Detailed Operative Notes , Endoscopic Photograph	No	No	Yes	No	No	5
2631	Tertiary	Paediatric surgery - Phase 3	28410000152	Pyloromyotomy	15000	15000	14250	12750	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Endoscopy Report Confirming The Diagnosis Of Infantile Hypertrophic Pyloric Stenosis	Detailed Discharge Summary , Detailed Operative Notes , Endoscopic Photograph	No	No	Yes	No	No	5
2632	Tertiary	Paediatric surgery - Phase 3	28410000153	Pyloroplasty	14000	14000	13300	11900	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Endoscopy	Detailed Discharge Summary , Detailed Operative Notes , Intra Procedure Clinical Photograph	No	No	Yes	No	No	5
2633	Tertiary	General Surgery - Phase 3	28350000101	Pyloroplasty	14000	14000	13300	11900	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Endoscopy	Detailed Discharge Summary , Detailed Operative Notes , Intra Procedure Clinical Photograph	No	No	Yes	No	No	5

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2634	Tertiary	Neurosurgery - Phase 3	28370000054	R. F. Lesioning for Trigeminal Neuralgia	16500	16500	15675	14025	Surgical	Not Reserved	Yes	No	0	Clinical Notes Establishing Diagnosis Of Trigeminal Neuralgia , Ct/Mri , Justification Of Local Neurectomy	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra Procedure Clinical Cd/ Series Of Still Photographs , Invoice Of Rf Probe	No	No	Yes	No	No	3
2635	Tertiary	Surgical Oncology - Phase 3	28450000165	Radical / Revision Cholecystectomy- Radical	39600	39600	37620	33660	Surgical	Not Reserved	No	No	0	Biopsy , Cect/Mri , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Scar Photograph	No	No	Yes	No	No	6
2636	Tertiary	Surgical Oncology - Phase 3	28450000166	Radical / Revision Cholecystectomy- Revision	39600	39600	37620	33660	Surgical	Not Reserved	No	No	0	Biopsy , Cect/Mri , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Scar Photograph	No	No	Yes	No	No	6
2637	Tertiary	Obstetrics & Gynaecology - Phase 3	28380000017	Radical Hysterectomy-Class I radical Hysterectomy +/- bilateral salpingoophorectomy - Lap.	27000	27000	25650	22950	Surgical	Not Reserved	No	No	0	Biopsy , Cect/Mri , Clinical Notes With Planned Line Of Treatment	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Photographs Of Surgical Site	No	No	Yes	No	No	6
2638	Tertiary	Surgical Oncology - Phase 3	28450000167	Radical Hysterectomy-Class I radical Hysterectomy +/- bilateral salpingoophorectomy - Lap.	27000	27000	25650	22950	Surgical	Not Reserved	No	No	0	Biopsy , Cect/Mri , Clinical Notes With Planned Line Of Treatment	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Photographs Of Surgical Site	No	No	Yes	No	No	6
2639	Tertiary	Obstetrics & Gynaecology - Phase 3	28380000018	Radical Hysterectomy-Class I radical Hysterectomy +/- bilateral salpingoophorectomy - Open	27000	27000	25650	22950	Surgical	Not Reserved	No	No	0	Biopsy , Cect/Mri , Clinical Notes With Planned Line Of Treatment	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Photographs Of Surgical Site	No	No	Yes	No	No	6

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2640	Tertiary	Surgical Oncology - Phase 3	28450000168	Radical Hysterectomy-Class I radical Hysterectomy +/- bilateral salpingoophorectomy - Open	27000	27000	25650	22950	Surgical	Not Reserved	No	No	0	Biopsy , Cect/Mri , Clinical Notes With Planned Line Of Treatment	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Photographs Of Surgical Site	No	No	Yes	No	No	6
2641	Tertiary	Obstetrics & Gynaecology - Phase 3	28380000019	Radical Hysterectomy-Class I radical hysterectomy + bilateral salpingoophorectomy + BPLND - Lap.	27000	27000	25650	22950	Surgical	Not Reserved	No	No	0	Biopsy , Cect/Mri , Clinical Notes With Planned Line Of Treatment	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Photographs Of Surgical Site	No	No	Yes	No	No	11
2642	Tertiary	Surgical Oncology - Phase 3	28450000169	Radical Hysterectomy-Class I radical hysterectomy + bilateral salpingoophorectomy + BPLND - Lap.	27000	27000	25650	22950	Surgical	Not Reserved	No	No	0	Biopsy , Cect/Mri , Clinical Notes With Planned Line Of Treatment	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Photographs Of Surgical Site	No	No	Yes	No	No	11
2643	Tertiary	Surgical Oncology - Phase 3	28450000170	Radical Hysterectomy-Class I radical hysterectomy + bilateral salpingoophorectomy + BPLND - Open	27000	27000	25650	22950	Surgical	Not Reserved	No	No	0	Biopsy , Cect/Mri , Clinical Notes With Planned Line Of Treatment	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Photographs Of Surgical Site	No	No	Yes	No	No	11
2644	Tertiary	Obstetrics & Gynaecology - Phase 3	28380000020	Radical Hysterectomy-Class I radical hysterectomy + bilateral salpingoophorectomy + BPLND - Open	27000	27000	25650	22950	Surgical	Not Reserved	No	No	0	Biopsy , Cect/Mri , Clinical Notes With Planned Line Of Treatment	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Photographs Of Surgical Site	No	No	Yes	No	No	11
2645	Tertiary	Surgical Oncology - Phase 3	28450000171	Radical Hysterectomy-Class II radical hysterctomy + BPLND	27000	27000	25650	22950	Surgical	Not Reserved	No	No	0	Biopsy , Cect/Mri , Clinical Notes With Planned Line Of Treatment	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Photographs Of Surgical Site	No	No	Yes	No	No	11

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2646	Tertiary	Obstetrics & Gynaecology - Phase 3	2838000021	Radical Hysterectomy-Class II radical hysterectomy + BPLND	27000	27000	25650	22950	Surgical	Not Reserved	No	No	0	Biopsy , Cect/Mri , Clinical Notes With Planned Line Of Treatment	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Photographs Of Surgical Site	No	No	Yes	No	No	11
2647	Tertiary	Surgical Oncology - Phase 3	28450000172	Radical Hysterectomy-Class III radical hysterectomy + BPLND	27000	27000	25650	22950	Surgical	Not Reserved	No	No	0	Biopsy , Cect/Mri , Clinical Notes With Planned Line Of Treatment	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Photographs Of Surgical Site	No	No	Yes	No	No	11
2648	Tertiary	Obstetrics & Gynaecology - Phase 3	2838000022	Radical Hysterectomy-Class III radical hysterectomy + BPLND	27000	27000	25650	22950	Surgical	Not Reserved	No	No	0	Biopsy , Cect/Mri , Clinical Notes With Planned Line Of Treatment	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Photographs Of Surgical Site	No	No	Yes	No	No	11
2649	Tertiary	Obstetrics & Gynaecology - Phase 3	2838000023	Radical Hysterectomy-Hysterectomy + bilateral salpingoophorectomy + omentectomy + peritonectomy and organ resections	34000	34000	32300	28900	Surgical	Not Reserved	No	No	0	Biopsy , Cect/Mri , Clinical Notes With Planned Line Of Treatment	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Photographs Of Surgical Site	No	No	Yes	No	No	13
2650	Tertiary	Surgical Oncology - Phase 3	28450000173	Radical Hysterectomy-Hysterectomy + bilateral salpingoophorectomy + omentectomy + peritonectomy and organ resections	34000	34000	32300	28900	Surgical	Not Reserved	No	No	0	Biopsy , Cect/Mri , Clinical Notes With Planned Line Of Treatment	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Photographs Of Surgical Site	No	No	Yes	No	No	13
2651	Tertiary	Surgical Oncology - Phase 3	28450000174	Radical Neck Dissection	15000	15000	14250	12750	Surgical	Not Reserved	Yes	No	0	Biopsy , Clinical Photograph , Ct Scan/Mri Neck , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph/Intra Procedure Clinical Photograph	No	No	Yes	No	No	6

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2652	Tertiary	General Surgery - Phase 3	28350000102	Radical Neck Dissection	15000	15000	14250	12750	Surgical	Not Reserved	Yes	No	0	Biopsy , Clinical Photograph , Ct Scan/Mri Neck , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph/Intra Procedure Clinical Photograph	No	No	Yes	No	No	6
2653	Tertiary	Otorhinolaryngology (ENT) - Phase 3	28330000050	Radical Neck Dissection	15000	15000	14250	12750	Surgical	Not Reserved	Yes	No	0	Biopsy , Clinical Photograph , Ct Scan/Mri Neck , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph/Intra Procedure Clinical Photograph	No	No	Yes	No	No	6
2654	Tertiary	Obstetrics & Gynaecology - Phase 3	28380000024	Radical Retroperitoneal lymph node dissection-Lap.	36500	36500	34675	31025	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Usg/Ct/Biopsy	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe)	No	No	Yes	No	No	3
2655	Tertiary	Surgical Oncology - Phase 3	28450000175	Radical Retroperitoneal lymph node dissection-Lap.	36500	36500	34675	31025	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Usg/Ct/Biopsy	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe)	No	No	Yes	No	No	3
2656	Tertiary	Urology - Phase 3	28460000102	Radical Retroperitoneal lymph node dissection-Lap.	36500	36500	34675	31025	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Usg/Ct/Biopsy	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe)	No	No	Yes	No	No	3
2657	Tertiary	Surgical Oncology - Phase 3	28450000176	Radical Retroperitoneal lymph node dissection-Open	36500	36500	34675	31025	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Usg/Ct/Biopsy	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe)	No	No	Yes	No	No	3

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College& Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2658	Tertiary	Urology - Phase 3	2846000103	Radical Retroperitoneal lymph node dissection-Open	36500	36500	34675	31025	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Usg/Ct/Biopsy	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe)	No	No	Yes	No	No	3
2659	Tertiary	Obstetrics & Gynaecology - Phase 3	2838000025	Radical Retroperitoneal lymph node dissection-Open	36500	36500	34675	31025	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Usg/Ct/Biopsy	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe)	No	No	Yes	No	No	3
2660	Tertiary	Surgical Oncology - Phase 3	28450000177	Radical Small Bowel Resection-Lap.	33000	33000	31350	28050	Surgical	Not Reserved	Yes	No	0	Cect , Clinical Notes With Planned Line Of Treatment , Fnac/Biopsy	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Photographs Of Surgical Site	No	No	Yes	No	No	7
2661	Tertiary	Surgical Oncology - Phase 3	28450000178	Radical Small Bowel Resection-Open	33000	33000	31350	28050	Surgical	Not Reserved	No	No	0	Cect , Clinical Notes With Planned Line Of Treatment , Fnac/Biopsy	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Photographs Of Surgical Site	No	No	Yes	No	No	7
2662	Tertiary	Surgical Oncology - Phase 3	28450000179	Radical Trachelectomy	40000	40000	38000	34000	Surgical	Not Reserved	No	No	0	Biopsy , Cect , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Scar Photograph	No	No	Yes	No	No	11
2663	Tertiary	Urology - Phase 3	28460000104	Radical Urethrectomy	30000	30000	28500	25500	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Ct-Kub	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Photographs Of Surgical Site	No	No	Yes	No	No	5

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2664	Tertiary	Surgical Oncology - Phase 3	28450000180	Radical Urethrectomy	30000	30000	28500	25500	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Ct-Kub	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Photographs Of Surgical Site	No	No	Yes	No	No	5
2665	Tertiary	Surgical Oncology - Phase 3	28450000181	Radical Vulvectomy with Inguinal and Pelvic lymph node dissection	38500	38500	36575	32725	Surgical	Not Reserved	No	No	0	Admission Notes Comprising Of History And Examination With Indications For The Procedure , Ct/Mri Staging , Relevant Investigations (Establishing Diagnosis) , Vulval Biopsy	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Intra-Operative Photograph With Date & Patient Id , Pic Of Gross Specimen Removed , Progress Notes	No	No	Yes	No	No	3
2666	Tertiary	Obstetrics & Gynaecology - Phase 3	28380000026	Radical Vulvectomy with Inguinal and Pelvic lymph node dissection	38500	38500	36575	32725	Surgical	Not Reserved	No	No	0	Admission Notes Comprising Of History And Examination With Indications For The Procedure , Ct/Mri Staging , Relevant Investigations (Establishing Diagnosis) , Vulval Biopsy	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Intra-Operative Photograph With Date & Patient Id , Pic Of Gross Specimen Removed , Progress Notes	No	No	Yes	No	No	3
2667	Tertiary	Surgical Oncology - Phase 3	28450000182	Radical cystectomy-With Ileal Conduit - Lap.	70000	70000	66500	59500	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Ct Scan , Histopathology (Hpe)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Photographs Of Surgical Site	No	No	Yes	No	No	8
2668	Tertiary	Urology - Phase 3	28460000105	Radical cystectomy-With Ileal Conduit - Lap.	70000	70000	66500	59500	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Ct Scan , Histopathology (Hpe)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Photographs Of Surgical Site	No	No	Yes	No	No	8
2669	Tertiary	Urology - Phase 3	28460000106	Radical cystectomy-With Ileal Conduit - Open	70000	70000	66500	59500	Surgical	Not Reserved	Yes	No	0	Clinical Notes With Planned Line Of Treatment , Ct Scan , Histopathology (Hpe)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Photographs Of Surgical Site	No	No	Yes	No	No	8

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2670	Tertiary	Surgical Oncology - Phase 3	28450000183	Radical cystectomy-With Ileal Conduit - Open	70000	70000	66500	59500	Surgical	Not Reserved	Yes	No	0	Clinical Notes With Planned Line Of Treatment , Ct Scan , Histopathology (Hpe)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Photographs Of Surgical Site	No	No	Yes	No	No	8
2671	Tertiary	Surgical Oncology - Phase 3	28450000184	Radical cystectomy-With continent diversion - Open	70000	70000	66500	59500	Surgical	Not Reserved	Yes	No	0	Clinical Notes With Planned Line Of Treatment , Ct Scan , Histopathology (Hpe)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Photographs Of Surgical Site	No	No	Yes	No	No	8
2672	Tertiary	Urology - Phase 3	28460000107	Radical cystectomy-With continent diversion - Open	70000	70000	66500	59500	Surgical	Not Reserved	Yes	No	0	Clinical Notes With Planned Line Of Treatment , Ct Scan , Histopathology (Hpe)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Photographs Of Surgical Site	No	No	Yes	No	No	8
2673	Tertiary	Urology - Phase 3	28460000108	Radical cystectomy-With neobladder - Lap	80000	80000	76000	68000	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Ct Scan , Histopathology (Hpe)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Photographs Of Surgical Site	No	No	Yes	No	No	11
2674	Tertiary	Surgical Oncology - Phase 3	28450000185	Radical cystectomy-With neobladder - Lap	80000	80000	76000	68000	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Ct Scan , Histopathology (Hpe)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Photographs Of Surgical Site	No	No	Yes	No	No	11
2675	Tertiary	Surgical Oncology - Phase 3	28450000186	Radical cystectomy-With neobladder - Open	80000	80000	76000	68000	Surgical	Not Reserved	Yes	No	0	Clinical Notes With Planned Line Of Treatment , Ct Scan , Histopathology (Hpe)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Photographs Of Surgical Site	No	No	Yes	No	No	11

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2676	Tertiary	Urology - Phase 3	2846000109	Radical cystectomy-With neobladder - Open	80000	80000	76000	68000	Surgical	Not Reserved	Yes	No	0	Clinical Notes With Planned Line Of Treatment , Ct Scan , Histopathology (Hpe)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Photographs Of Surgical Site	No	No	Yes	No	No	11
2677	Tertiary	Urology - Phase 3	2846000110	Radical cystectomy-With ureterosigmoidostomy - Lap	65000	65000	61750	55250	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Ct Scan , Histopathology (Hpe)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Photographs Of Surgical Site	No	No	Yes	No	No	8
2678	Tertiary	Surgical Oncology - Phase 3	2845000187	Radical cystectomy-With ureterosigmoidostomy - Lap	65000	65000	61750	55250	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Ct Scan , Histopathology (Hpe)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Photographs Of Surgical Site	No	No	Yes	No	No	8
2679	Tertiary	Urology - Phase 3	2846000111	Radical cystectomy-With ureterosigmoidostomy - Open	65000	65000	61750	55250	Surgical	Not Reserved	Yes	No	0	Clinical Notes With Planned Line Of Treatment , Ct Scan , Histopathology (Hpe)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Photographs Of Surgical Site	No	No	Yes	No	No	8
2680	Tertiary	Surgical Oncology - Phase 3	2845000188	Radical cystectomy-With ureterosigmoidostomy - Open	65000	65000	61750	55250	Surgical	Not Reserved	Yes	No	0	Clinical Notes With Planned Line Of Treatment , Ct Scan , Histopathology (Hpe)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Photographs Of Surgical Site	No	No	Yes	No	No	8
2681	Tertiary	Surgical Oncology - Phase 3	2845000189	Radical cystectomy-With ureterostomy - Lap.	60000	60000	57000	51000	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Ct Scan , Histopathology (Hpe)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Photographs Of Surgical Site	No	No	Yes	No	No	8

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2682	Tertiary	Urology - Phase 3	2846000112	Radical cystectomy-With ureterostomy - Lap.	60000	60000	57000	51000	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Ct Scan , Histopathology (Hpe)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Photographs Of Surgical Site	No	No	Yes	No	No	8
2683	Tertiary	Surgical Oncology - Phase 3	2845000190	Radical cystectomy-With ureterostomy - Open	60000	60000	57000	51000	Surgical	Not Reserved	Yes	No	0	Clinical Notes With Planned Line Of Treatment , Ct Scan , Histopathology (Hpe)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Photographs Of Surgical Site	No	No	Yes	No	No	8
2684	Tertiary	Urology - Phase 3	2846000113	Radical cystectomy-With ureterostomy - Open	60000	60000	57000	51000	Surgical	Not Reserved	Yes	No	0	Clinical Notes With Planned Line Of Treatment , Ct Scan , Histopathology (Hpe)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Photographs Of Surgical Site	No	No	Yes	No	No	8
2685	Tertiary	Urology - Phase 3	2846000114	Radical prostatectomy-Lap.	50000	50000	47500	42500	Surgical	Not Reserved	Yes	No	0	Biopsy , Ct/Mri , Detailed Clinical Notes , Psa	Detailed Discharge Summary , Detailed Procedure/Operative Notes With Details Of Nodes Removed , Hpe-Prostate	No	No	Yes	No	No	4
2686	Tertiary	Urology - Phase 3	2846000115	Radical prostatectomy-Open	50000	50000	47500	42500	Surgical	Not Reserved	Yes	No	0	Biopsy , Ct/Mri , Detailed Clinical Notes , Psa	Detailed Discharge Summary , Detailed Procedure/Operative Notes With Details Of Nodes Removed , Hpe-Prostate	No	No	Yes	No	No	4
2687	Tertiary	Surgical Oncology - Phase 3	2845000191	Radical vaginectomy	30000	30000	28500	25500	Surgical	Not Reserved	No	No	0	Biopsy , Cect , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe)	No	No	Yes	No	No	6

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2688	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	2832000035	Re-do sternotomy	20000	20000	19000	17000	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Discharge Summary , Detailed Procedure/Operative Notes	Yes	No	No	No	No	0
2689	Tertiary	Orthopaedics - Phase 3	2840000030	Reconstruction of Cruciate Ligament with implant and brace-Anterior	42700	42700	40565	36295	Surgical	Not Reserved	No	No	0	Clinical Photograph Of Affected Part , Detailed Clinical Notes , Mri-Affected Knee	Condition-Ensure Brace Is Provided In Package Cost , Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Clinical Photograph , Post Procedure X-Ray Showing Implant	No	No	Yes	No	No	3
2690	Tertiary	Orthopaedics - Phase 3	2840000031	Reconstruction of Cruciate Ligament with implant and brace-Posterior	42700	42700	40565	36295	Surgical	Not Reserved	No	No	0	Clinical Photograph Of Affected Part , Detailed Clinical Notes , Mri-Affected Knee	Condition-Ensure Brace Is Provided In Package Cost , Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Clinical Photograph , Post Procedure X-Ray Showing Implant	No	No	Yes	No	No	3
2691	Tertiary	General Surgery - Phase 3	28350000103	Rectal Polyp Excision	5000	5000	4750	4250	Surgical	Not Reserved	Yes	No	0	Colonoscopy/Biopsy , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Intra Procedure Clinical Photograph	No	No	Yes	No	No	1
2692	Tertiary	Surgical Oncology - Phase 3	28450000192	Rectal Polyp Excision	5000	5000	4750	4250	Surgical	Not Reserved	Yes	No	0	Colonoscopy/Biopsy , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Intra Procedure Clinical Photograph	No	No	Yes	No	No	1
2693	Tertiary	Paediatric surgery - Phase 3	28410000154	Rectal Polypectomy - Sigmoidoscopic Under GA	8000	8000	7600	6800	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Sigmoidoscopy	Detailed Procedure/Operative Notes , Histopathology (Hpe) , Intra Procedure Clinical Photograph	No	No	Yes	No	No	2

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2694	Tertiary	Paediatric surgery - Phase 3	28410000155	Rectovaginal fistula repair	24000	24000	22800	20400	Surgical	Not Reserved	Yes	No	0	Admission Notes Comprising Of History And Examination With Indications For The Procedure , Relevant Investigations (Establishing Diagnosis)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra-Operative Photograph With Date & Patient Id , Progress Notes	No	No	Yes	No	No	3
2695	Tertiary	Obstetrics & Gynaecology - Phase 3	28380000027	Rectovaginal fistula repair	24000	24000	22800	20400	Surgical	Not Reserved	Yes	No	0	Admission Notes Comprising Of History And Examination With Indications For The Procedure , Relevant Investigations (Establishing Diagnosis)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra-Operative Photograph With Date & Patient Id , Progress Notes	No	No	Yes	No	No	3
2696	Tertiary	Surgical Oncology - Phase 3	28450000193	Regional flap-Fasciocutaneous flap	30600	30600	29070	26010	Surgical	Not Reserved	No	No	0	Biopsy-Primary , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Scar Photograph	No	No	Yes	No	No	5
2697	Tertiary	Plastic & reconstructive Surgery - Phase 3	28430000021	Regional flap-Fasciocutaneous flap	30600	30600	29070	26010	Surgical	Not Reserved	No	No	0	Biopsy-Primary , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Scar Photograph	No	No	Yes	No	No	5
2698	Tertiary	Surgical Oncology - Phase 3	28450000194	Regional flap-Myocutaneous flap	30600	30600	29070	26010	Surgical	Not Reserved	No	No	0	Biopsy-Primary , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Scar Photograph	No	No	Yes	No	No	5
2699	Tertiary	Plastic & reconstructive Surgery - Phase 3	28430000022	Regional flap-Myocutaneous flap	30600	30600	29070	26010	Surgical	Not Reserved	No	No	0	Biopsy-Primary , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Scar Photograph	No	No	Yes	No	No	5

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2700	Tertiary	Oral and Maxillofacial Surgery - Phase 3	2852000013	Release of fibrous bands & grafting - in (OSMF) treatment under GA	3000	3000	2850	2550	Surgical	Not Reserved	No	No	0	Biopsy , Clinical Photograph , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes Detailing Grafting , Post Procedure Clinical Photograph	No	No	Yes	No	Yes	1
2701	Tertiary	Surgical Oncology - Phase 3	28450000195	Removal of Chest Wall Tumour-Chest Wall Tumour Excision	36000	36000	34200	30600	Surgical	Not Reserved	Yes	No	0	Clinical Notes With Planned Line Of Treatment , Ct Scan , Histopathology (Hpe)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Photographs Of Surgical Site	No	No	Yes	No	No	6
2702	Tertiary	Surgical Oncology - Phase 3	28450000196	Removal of Chest Wall Tumour-Removal of chest wall tumour with reconstruction	51000	51000	48450	43350	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Ct Scan , Histopathology (Hpe)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Photographs Of Surgical Site	No	No	Yes	No	No	6
2703	Tertiary	Paediatric surgery - Phase 3	28410000156	Renal Cyst deroofing or Marsupialization-Lap.	25000	25000	23750	21250	Surgical	Not Reserved	Yes	No	0	Ct/Usg , Detailed Clinical Notes , Justification Of Surgery	Detailed Discharge Summary , Detailed Operative Notes , Intra-Operative Photograph	No	No	Yes	No	No	2
2704	Tertiary	Urology - Phase 3	28460000116	Renal Cyst deroofing or Marsupialization-Lap.	25000	25000	23750	21250	Surgical	Not Reserved	Yes	No	0	Ct/Usg , Detailed Clinical Notes , Justification Of Surgery	Detailed Discharge Summary , Detailed Operative Notes , Intra-Operative Photograph	No	No	Yes	No	No	2
2705	Tertiary	Paediatric surgery - Phase 3	28410000157	Renal Cyst deroofing or Marsupialization-Open	25000	25000	23750	21250	Surgical	Not Reserved	Yes	No	0	Ct/Usg , Detailed Clinical Notes , Justification Of Surgery	Detailed Discharge Summary , Detailed Operative Notes , Intra-Operative Photograph	No	No	Yes	No	No	2

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College& Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2706	Tertiary	Urology - Phase 3	2846000117	Renal Cyst deroofing or Marsupialization-Open	25000	25000	23750	21250	Surgical	Not Reserved	Yes	No	0	Ct/Usg , Detailed Clinical Notes , Justification Of Surgery	Detailed Discharge Summary , Detailed Operative Notes , Intra-Operative Photograph	No	No	Yes	No	No	2
2707	Tertiary	Urology - Phase 3	2846000118	Repair of stress incontinence - Follow Up	1000	1000	950	850	Medical	Not Reserved	No	No	0	Discharge Summary	Clinical Notes With Planned Line Of Treatment	No	No	No	Yes	No	Not Applicable(NA)
2708	Tertiary	Paediatric surgery - Phase 3	28410000158	Resection Anastomosis-Lap.	25000	25000	23750	21250	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , X-Ray Abdomen (Erect)/Usg/ Ct-Abdomen	Detailed Discharge Summary , Detailed Operative Notes , Hpe Of Resected Tissue , Intra Procedure Clinical Photograph	No	No	Yes	No	No	7
2709	Tertiary	General Surgery - Phase 3	28350000104	Resection Anastomosis-Lap.	25000	25000	23750	21250	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , X-Ray Abdomen (Erect)/Usg/ Ct-Abdomen	Detailed Discharge Summary , Detailed Operative Notes , Hpe Of Resected Tissue , Intra Procedure Clinical Photograph	No	No	Yes	No	No	7
2710	Tertiary	General Surgery - Phase 3	28350000105	Resection Anastomosis-Open	25000	25000	23750	21250	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , X-Ray Abdomen (Erect)/Usg/ Ct-Abdomen	Detailed Discharge Summary , Detailed Operative Notes , Hpe Of Resected Tissue , Intra Procedure Clinical Photograph	No	No	Yes	No	No	7
2711	Tertiary	Paediatric surgery - Phase 3	28410000159	Resection Anastomosis-Open	25000	25000	23750	21250	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , X-Ray Abdomen (Erect)/Usg/ Ct-Abdomen	Detailed Discharge Summary , Detailed Operative Notes , Hpe Of Resected Tissue , Intra Procedure Clinical Photograph	No	No	Yes	No	No	7

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2712	Tertiary	Surgical Oncology - Phase 3	28450000197	Resection of nasopharyngeal tumour	40000	40000	38000	34000	Surgical	Not Reserved	No	No	0	Biopsy-Primary , Cect/Mri , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Scar Photograph	No	No	Yes	No	No	8
2713	Tertiary	Paediatric surgery - Phase 3	28410000160	Retro - Peritoneal Lymphangioma Excision	25000	25000	23750	21250	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Usg/Mri Abdomen	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Intra Procedure Clinical Photograph	No	No	Yes	No	No	5
2714	Tertiary	General Surgery - Phase 3	28350000106	Retroperitoneal Tumor – Excision	23000	23000	21850	19550	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , X-Ray/Usg/Ct Scan Abdomen	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Intra Procedure Clinical Photograph	No	No	Yes	No	No	5
2715	Tertiary	Surgical Oncology - Phase 3	28450000198	Retroperitoneal Tumor – Excision	23000	23000	21850	19550	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , X-Ray/Usg/Ct Scan Abdomen	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Intra Procedure Clinical Photograph	No	No	Yes	No	No	5
2716	Tertiary	Paediatric surgery - Phase 3	28410000161	Retroperitoneal Tumor – Excision	23000	23000	21850	19550	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , X-Ray/Usg/Ct Scan Abdomen	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Intra Procedure Clinical Photograph	No	No	Yes	No	No	5
2717	Tertiary	Plastic & reconstructive Surgery - Phase 3	28430000023	Revascularization of limb / digit	25000	25000	23750	21250	Surgical	Not Reserved	No	No	0	Clinical Photograph , Detailed Clinical Notes , Doppler Stills , Fir/Mlc	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra Procedure Clinical Photograph	No	No	Yes	No	No	5

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2718	Tertiary	General Surgery - Phase 3	28350000107	Rib Resection & Drainage	14000	14000	13300	11900	Surgical	Not Reserved	Yes	No	0	Clinical Photograph , Ct/Mri , Detailed Clinical Notes , X-Ray	Detailed Discharge Summary , Detailed Operative Notes , Post Procedure (X-Ray) , Post Procedure Clinical Photograph , Pus Culture	No	No	Yes	No	No	3
2719	Tertiary	Paediatric surgery - Phase 3	28410000162	Rib Resection & Drainage	14000	14000	13300	11900	Surgical	Not Reserved	Yes	No	0	Clinical Photograph , Ct/Mri , Detailed Clinical Notes , X-Ray	Detailed Discharge Summary , Detailed Operative Notes , Post Procedure (X-Ray) , Post Procedure Clinical Photograph , Pus Culture	No	No	Yes	No	No	3
2720	Tertiary	Cardiology - Phase 3	28310000021	Right / Left Heart Catheterization-Left Heart Catheterization	5000	5000	4750	4250	Medical	Not Reserved	No	No	0	2-D Echo , Clinical Notes With Planned Line Of Treatment , Ecg	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Invoices Of Catherter And Other Accessories Used	No	No	Yes	No	No	2
2721	Tertiary	Cardiology - Phase 3	28310000022	Right / Left Heart Catheterization-Right Heart Catheterization	5000	5000	4750	4250	Medical	Not Reserved	No	No	0	2-D Echo , Clinical Notes With Planned Line Of Treatment , Ecg	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Invoices Of Catherter And Other Accessories Used	No	No	Yes	No	No	2
2722	Tertiary	Paediatric surgery - Phase 3	28410000163	Rigid laryngoscopy / bronchoscopy / oesophagoscopy - Diagnostic + / - biopsy-Rigid bronchoscopy - Diagnostic + / - biopsy-General Anesthesia	12000	12000	11400	10200	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe) , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	Yes	1
2723	Tertiary	Otorhinolaryngology (ENT) - Phase 3	28330000051	Rigid laryngoscopy / bronchoscopy / oesophagoscopy - Diagnostic + / - biopsy-Rigid bronchoscopy - Diagnostic + / - biopsy-General Anesthesia	12000	12000	11400	10200	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe) , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	Yes	1

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2724	Tertiary	Paediatric surgery - Phase 3	28410000164	Rigid laryngoscopy / bronchoscopy / oesophagoscopy - Diagnostic + / - biopsy- Rigid bronchoscopy - Diagnostic + / - biopsy-Local Anesthesia	7000	7000	6650	5950	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	Yes	1
2725	Tertiary	Otorhinolaryngology (ENT) - Phase 3	28330000052	Rigid laryngoscopy / bronchoscopy / oesophagoscopy - Diagnostic + / - biopsy- Rigid bronchoscopy - Diagnostic + / - biopsy-Local Anesthesia	7000	7000	6650	5950	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	Yes	1
2726	Tertiary	Paediatric surgery - Phase 3	28410000165	Rigid laryngoscopy / bronchoscopy / oesophagoscopy - Diagnostic + / - biopsy- Rigid laryngoscopy - Diagnostic + / - biopsy- General Anesthesia	12000	12000	11400	10200	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	Yes	1
2727	Tertiary	Otorhinolaryngology (ENT) - Phase 3	28330000053	Rigid laryngoscopy / bronchoscopy / oesophagoscopy - Diagnostic + / - biopsy- Rigid laryngoscopy - Diagnostic + / - biopsy- General Anesthesia	12000	12000	11400	10200	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	Yes	1
2728	Tertiary	Paediatric surgery - Phase 3	28410000166	Rigid laryngoscopy / bronchoscopy / oesophagoscopy - Diagnostic + / - biopsy- Rigid laryngoscopy - Diagnostic + / - biopsy- Local Anesthesia	7000	7000	6650	5950	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	Yes	1
2729	Tertiary	Otorhinolaryngology (ENT) - Phase 3	28330000054	Rigid laryngoscopy / bronchoscopy / oesophagoscopy - Diagnostic + / - biopsy- Rigid laryngoscopy - Diagnostic + / - biopsy- Local Anesthesia	7000	7000	6650	5950	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	Yes	1

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2730	Tertiary	Paediatric surgery - Phase 3	28410000167	Rigid laryngoscopy / bronchoscopy / oesophagoscopy - Diagnostic + / - biopsy- Rigid oesophagoscopy - Diagnostic + / - biopsy-General Anesthesia	12000	12000	11400	10200	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	Yes	1
2731	Tertiary	Otorhinolaryngology (ENT) - Phase 3	28330000055	Rigid laryngoscopy / bronchoscopy / oesophagoscopy - Diagnostic + / - biopsy- Rigid oesophagoscopy - Diagnostic + / - biopsy-General Anesthesia	12000	12000	11400	10200	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	Yes	1
2732	Tertiary	Otorhinolaryngology (ENT) - Phase 3	28330000056	Rigid laryngoscopy / bronchoscopy / oesophagoscopy - Diagnostic + / - biopsy- Rigid oesophagoscopy - Diagnostic + / - biopsy-Local Anesthesia	7000	7000	6650	5950	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	Yes	1
2733	Tertiary	Paediatric surgery - Phase 3	28410000168	Rigid laryngoscopy / bronchoscopy / oesophagoscopy - Diagnostic + / - biopsy- Rigid oesophagoscopy - Diagnostic + / - biopsy-Local Anesthesia	7000	7000	6650	5950	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	Yes	1
2734	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	28320000036	Ross Procedure	270000	270000	256500	229500	Surgical	Not Reserved	No	No	0	2-D Echo, Detailed Clinical Notes	Bar-Code Of Rv-Pa Conduit, Detailed Discharge Summary, Detailed Procedure Notes	No	No	Yes	No	No	10
2735	Tertiary	Surgical Oncology - Phase 3	28450000199	Rotationplasty	45000	45000	42750	38250	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Discharge Summary, Detailed Procedure/Operative Notes, Histopathology (Hpe), Post Procedure Photographs Of Surgical Site	No	No	Yes	No	No	7

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College& Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2736	Tertiary	Radiation Oncology - Phase 3	2844000046	SRS with IGRT (Stereotactic radiotherapy) (Inclusive of Simulation & Planning Cost)- SRS with IGRT (Stereotactic radiotherapy)	70000	70000	66500	59500	Medical	Not Reserved	No	No	0	Biopsy/Hpe , Justification Of Srs	Detailed Discharge Summary (With Rt Treatment And Doses Given)	No	No	Yes	No	Yes	1
2737	Tertiary	Surgical Oncology - Phase 3	28450000200	Sacral Tumour Excision-Anterior + Posterior approach	60000	60000	57000	51000	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Histopathology (Hpe)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Photographs Of Surgical Site	No	No	Yes	No	No	13
2738	Tertiary	Surgical Oncology - Phase 3	28450000201	Sacral Tumour Excision-Posterior approach	54000	54000	51300	45900	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Histopathology (Hpe)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Photographs Of Surgical Site	No	No	Yes	No	No	11
2739	Tertiary	Burns Management - Phase 3	28470000013	Scald burns-% Total Body Surface Area Burns (TBSA) - any % (not requiring admission). Needs at least 5-6 dressing	7000	7000	6650	5950	Surgical	Not Reserved	No	No	0	Clinical Photograph (With Rule Of Chart 9) , Detailed Clinical Notes , Mic	Detailed Clinical Notes , Lab Tests Or Other Diagnostic Procedures Done As A Part Of Treatment , Post Treatment Clinical Photograph	No	No	Yes	No	No	Not Applicable(NA)
2740	Tertiary	Burns Management - Phase 3	28470000014	Scald burns-% Total Body Surface Area Burns (TBSA): 40% - 60 %; Includes % TBSA skin grafted, flap cover, follow-up dressings etc. as deemed necessary; Surgical procedures are required for deep burns that are not amenable to heal with dressings alone.	50000	50000	47500	42500	Surgical	Not Reserved	No	No	0	Clinical Photograph Upto 40-60% Burn (With Rule Of Chart 9) , Detailed Clinical Notes , Mic	Detailed Discharge Summary , Lab Investigations , Post Treatment Clinical Photograph , X-Rays Or Other Diagnostic Procedures Done	No	No	Yes	No	No	19
2741	Tertiary	Burns Management - Phase 3	28470000015	Scald burns-% Total Body Surface Area Burns (TBSA): > 60 %; Includes % TBSA skin grafted, flap cover, follow-up dressings etc. as deemed necessary; Surgical procedures are required for deep burns that are not amenable to heal with dressings alone.	80000	80000	76000	68000	Surgical	Not Reserved	No	No	0	Clinical Photograph >60% Burn (With Rule Of Chart 9) , Detailed Clinical Notes , Mic	Detailed Discharge Summary , Lab Investigations , Post Treatment Clinical Photograph , X-Rays Or Other Diagnostic Procedures Done	No	No	Yes	No	No	19

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2742	Tertiary	Burns Management - Phase 3	2847000016	Scald burns-% Total Body Surface Area Burns (TBSA). Upto 40 %; Includes % TBSA skin grafted, flap cover, follow-up dressings etc. as deemed necessary; Surgical procedures are required for deep burns that are not amenable to heal with dressings alone.	40000	40000	38000	34000	Surgical	Not Reserved	No	No	0	Clinical Photograph Upto 40% Burn (With Rule Of Chart 9) , Detailed Clinical Notes , Mlc	Detailed Discharge Summary , Lab Investigations , Post Treatment Clinical Photograph , X-Rays Or Other Diagnostic Procedures Done	No	No	Yes	No	No	19
2743	Tertiary	Plastic & reconstructive Surgery - Phase 3	2843000024	Scalp avulsion reconstruction	50000	50000	47500	42500	Surgical	Not Reserved	No	No	0	Clinical Notes Detailing How Avulsion Occurred , Clinical Photograph , Mlc	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Clinical Photograph/Intra Procedure Clinical Photograph	No	No	Yes	No	No	5
2744	Tertiary	Surgical Oncology - Phase 3	28450000202	Scalp tumour excision with skull bone excision	30000	30000	28500	25500	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Histopathology (Hpe)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Photographs Of Surgical Site	No	No	Yes	No	No	6
2745	Tertiary	Surgical Oncology - Phase 3	28450000203	Segmental resection of lung-Open	42000	42000	39900	35700	Surgical	Not Reserved	No	No	0	Biopsy , Clinical Notes With Planned Line Of Treatment , Ct Thorax	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Photographs Of Surgical Site	No	No	Yes	No	No	6
2746	Tertiary	Surgical Oncology - Phase 3	28450000204	Segmental resection of lung- Thoracoscopic	42000	42000	39900	35700	Surgical	Not Reserved	No	No	0	Biopsy , Clinical Notes With Planned Line Of Treatment , Ct Thorax	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Photographs Of Surgical Site	No	No	Yes	No	No	6
2747	Tertiary	Surgical Oncology - Phase 3	28450000205	Segmentectomy - hepatobiliary system	50000	50000	47500	42500	Surgical	Not Reserved	No	No	0	Biopsy , Cect/Mri , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Scar Photograph	No	No	Yes	No	No	5

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2748	Tertiary	Oral and Maxillofacial Surgery - Phase 3	2852000014	Sequestrectomy	1500	1500	1425	1275	Surgical	Not Reserved	Yes	No	0	Opg (Orthopantomogram)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph	No	No	Yes	No	No	7
2749	Tertiary	Neurosurgery - Phase 3	2837000055	Shunt Surgery-Theco - peritoneal	30000	30000	28500	25500	Surgical	Not Reserved	Yes	No	0	Ct/Mri , Detailed Clinical Notes	Clinical Photograph , Detailed Discharge Summary , Detailed Procedure/Operative Notes	No	No	Yes	No	No	7
2750	Tertiary	Neurosurgery - Phase 3	2837000056	Shunt Surgery-Ventriculo - atrial	30000	30000	28500	25500	Surgical	Not Reserved	Yes	No	0	Ct/Mri , Detailed Clinical Notes	Clinical Photograph , Detailed Discharge Summary , Detailed Procedure/Operative Notes	No	No	Yes	No	No	7
2751	Tertiary	Neurosurgery - Phase 3	2837000057	Shunt Surgery-Ventriculo - peritoneal	30000	30000	28500	25500	Surgical	Not Reserved	Yes	No	0	Ct/Mri , Detailed Clinical Notes	Clinical Photograph , Detailed Discharge Summary , Detailed Procedure/Operative Notes	No	No	Yes	No	No	7
2752	Tertiary	Neurosurgery - Phase 3	2837000058	Shunt Surgery-Ventriculo - pleural	30000	30000	28500	25500	Surgical	Not Reserved	Yes	No	0	Ct/Mri , Detailed Clinical Notes	Clinical Photograph , Detailed Discharge Summary , Detailed Procedure/Operative Notes	No	No	Yes	No	No	7
2753	Tertiary	Cardiology - Phase 3	2831000023	Single Chamber Permanent Pacemaker Implantation-Permanent Pacemaker Implantation - Single Chamber	69500	69500	66025	59075	Medical	Not Reserved	No	No	0	Angiogram , Detailed Clinical Notes , Ecg , Report By Cardiologist Necessitating Procedure	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Invoice/Bar-Code Of Designated Pacemaker , X Ray Showing The Pacemaker	No	No	Yes	No	No	2

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2754	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	2832000037	Single Chamber Permanent Pacemaker Implantation-Permanent Pacemaker Implantation - Single Chamber	69500	69500	66025	59075	Medical	Not Reserved	No	No	0	Angiogram , Detailed Clinical Notes , Ecg , Report By Cardiologist Necessitating Procedure	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Invoice/Bar-Code Of Designated Pacemaker , X Ray Showing The Pacemaker	No	No	Yes	No	No	2
2755	Tertiary	Plastic & reconstructive Surgery - Phase 3	2843000025	Skin Flaps - Rotation Flaps	11400	11400	10830	9690	Surgical	Not Reserved	Yes	No	0	Clinical Photograph , Detailed Clinical Notes , Supporting Medical Records	Detailed Discharge Summary , Detailed Operative Notes , Post Procedure Clinical Photograph	No	No	Yes	No	Yes	1
2756	Tertiary	Surgical Oncology - Phase 3	28450000206	Skin Flaps - Rotation Flaps	11400	11400	10830	9690	Surgical	Not Reserved	Yes	No	0	Clinical Photograph , Detailed Clinical Notes , Supporting Medical Records	Detailed Discharge Summary , Detailed Operative Notes , Post Procedure Clinical Photograph	No	No	Yes	No	Yes	1
2757	Tertiary	General Surgery - Phase 3	28350000108	Skin Flaps - Rotation Flaps	11400	11400	10830	9690	Surgical	Not Reserved	Yes	No	0	Clinical Photograph , Detailed Clinical Notes , Supporting Medical Records	Detailed Discharge Summary , Detailed Operative Notes , Post Procedure Clinical Photograph	No	No	Yes	No	Yes	1
2758	Tertiary	Neurosurgery - Phase 3	28370000059	Skull Traction	8000	8000	7600	6800	Surgical	Not Reserved	Yes	No	0	Ct/Mri , Detailed Clinical Notes	Clinical Photograph With Traction Applied , Detailed Discharge Summary , Detailed Procedure/Operative Notes Detailing Weights Applied	No	No	Yes	No	No	4
2759	Tertiary	Surgical Oncology - Phase 3	28450000207	Sleeve resection of lung cancer	70000	70000	66500	59500	Surgical	Not Reserved	No	No	0	Cect , Detailed Clinical Notes , Fnac/Biopsy	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Scar Photograph	No	No	Yes	No	No	7

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2760	Tertiary	Paediatric surgery - Phase 3	28410000169	Space - Occupying Lesion (SOL) mediastinum	65500	65500	62225	55675	Surgical	Not Reserved	No	No	0	Ct-Chest , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Operative Notes , Hpe Of Sol	No	No	Yes	No	No	10
2761	Tertiary	General Surgery - Phase 3	28350000109	Space - Occupying Lesion (SOL) mediastinum	65500	65500	62225	55675	Surgical	Not Reserved	No	No	0	Ct-Chest , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Operative Notes , Hpe Of Sol	No	No	Yes	No	No	10
2762	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	28320000038	Space - Occupying Lesion (SOL) mediastinum	65500	65500	62225	55675	Surgical	Not Reserved	No	No	0	Ct-Chest , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Operative Notes , Hpe Of Sol	No	No	Yes	No	No	10
2763	Tertiary	Neo-natal care Packages - Phase 3	28510000008	Special Neonatal Care Package: Babies that required admission to SNCU or NICU: Babies admitted for short term care for conditions like: • Mild Respiratory Distress/tachypnea • Mild encephalopathy • Severe jaundice requiring intensive phototherapy • Haemorrhagic disease of newborn • Unwell baby requiring monitoring • Some dehydration • Hypoglycaemia Mother's stay and food in the hospital for breastfeeding, family centred care and	3000	3000	2850	2550	Medical	Not Reserved	No	No	0	Detailed Clinical Notes , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Evidence Of All Investigations Done	No	No	Yes	No	No	6
2764	Tertiary	Neurosurgery - Phase 3	28370000060	Spina Bifida Surgery	36000	36000	34200	30600	Surgical	Not Reserved	Yes	No	0	Ct Scan , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Scar Photo	No	No	Yes	No	No	10
2765	Tertiary	Neurosurgery - Phase 3	28370000061	Spine - Decompression & Fusion	40000	40000	38000	34000	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Mri	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post-Op X-Ray Showing Fusion	No	No	Yes	No	No	6

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2766	Tertiary	Orthopaedics - Phase 3	2840000032	Spine - Decompression & Fusion	40000	40000	38000	34000	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Mri	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post-Op X-Ray Showing Fusion	No	No	Yes	No	No	6
2767	Tertiary	Orthopaedics - Phase 3	2840000033	Spine - Decompression & Fusion with fixation	50000	50000	47500	42500	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Mri	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post-Op X-Ray Showing Fusion	No	No	Yes	No	No	6
2768	Tertiary	Neurosurgery - Phase 3	2837000062	Spine - Decompression & Fusion with fixation	50000	50000	47500	42500	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Mri	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post-Op X-Ray Showing Fusion	No	No	Yes	No	No	6
2769	Tertiary	Neurosurgery - Phase 3	2837000063	Spine - Extradural Haematoma	30000	30000	28500	25500	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Mri	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Scar Photo	No	No	Yes	No	No	7
2770	Tertiary	Neurosurgery - Phase 3	2837000064	Spine - Extradural Haematoma with fixation	40000	40000	38000	34000	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Mri	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Scar Photo	No	No	Yes	No	No	7
2771	Tertiary	Neurosurgery - Phase 3	2837000065	Spine - Extradural Tumour	30000	30000	28500	25500	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Mri	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology/Biopsy Report , Post Procedure Scar Photo	No	No	Yes	No	No	7

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College& Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2772	Tertiary	Neurosurgery - Phase 3	2837000066	Spine - Extradural Tumour with fixation	40000	40000	38000	34000	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Mri	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology/Biopsy Report , Post Procedure Scar Photo	No	No	Yes	No	No	7
2773	Tertiary	Neurosurgery - Phase 3	2837000067	Spine - Intradural Haematoma	40000	40000	38000	34000	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Mri	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Scar Photo	No	No	Yes	No	No	7
2774	Tertiary	Neurosurgery - Phase 3	2837000068	Spine - Intradural Haematoma with fixation	50000	50000	47500	42500	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Mri	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Scar Photo	No	No	Yes	No	No	7
2775	Tertiary	Neurosurgery - Phase 3	2837000069	Spine - Intradural Tumour	40000	40000	38000	34000	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Mri	Biopsy , Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Scar Photo	No	No	Yes	No	No	7
2776	Tertiary	Neurosurgery - Phase 3	2837000070	Spine - Intradural Tumour with fixation	50000	50000	47500	42500	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Mri	Biopsy , Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Scar Photo	No	No	Yes	No	No	7
2777	Tertiary	Neurosurgery - Phase 3	2837000071	Spine - Intramedullar Tumour	50000	50000	47500	42500	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Mri	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Scar Photo	No	No	Yes	No	No	7

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2778	Tertiary	Neurosurgery - Phase 3	2837000072	Spine - Intramedullar Tumour with fixation	60000	60000	57000	51000	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Mri	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure (Ct/X-Ray) , Post Procedure Scar Photo	No	No	Yes	No	No	7
2779	Tertiary	Paediatric surgery - Phase 3	28410000170	Splenectomy-Lap.	25000	25000	23750	21250	Surgical	Not Reserved	Yes	No	0	Ct/Usg , Detailed Clinical Notes , Lab Investigation	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe)	No	No	Yes	No	No	7
2780	Tertiary	General Surgery - Phase 3	28350000110	Splenectomy-Lap.	25000	25000	23750	21250	Surgical	Not Reserved	Yes	No	0	Ct/Usg , Detailed Clinical Notes , Lab Investigation	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe)	No	No	Yes	No	No	7
2781	Tertiary	General Surgery - Phase 3	28350000111	Splenectomy-Open	25000	25000	23750	21250	Surgical	Not Reserved	Yes	No	0	Ct/Usg , Detailed Clinical Notes , Lab Investigation	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe)	No	No	Yes	No	No	7
2782	Tertiary	Paediatric surgery - Phase 3	28410000171	Splenectomy-Open	25000	25000	23750	21250	Surgical	Not Reserved	Yes	No	0	Ct/Usg , Detailed Clinical Notes , Lab Investigation	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe)	No	No	Yes	No	No	7
2783	Tertiary	Plastic & reconstructive Surgery - Phase 3	28430000026	Split thickness skin grafts-Large (> 8% TBSA)	13500	13500	12825	11475	Surgical	Not Reserved	Yes	No	0	Clinical Notes Detailing Time Of Burns , Clinical Photograph	Detailed Discharge Summary , Detailed Operative Notes , Post Procedure Clinical Photograph	No	No	Yes	No	Yes	1

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2784	Tertiary	General Surgery - Phase 3	28350000112	Split thickness skin grafts-Large (> 8% TBSA)	13500	13500	12825	11475	Surgical	Not Reserved	Yes	No	0	Clinical Notes Detailing Time Of Burns , Clinical Photograph	Detailed Discharge Summary , Detailed Operative Notes , Post Procedure Clinical Photograph	No	No	Yes	No	Yes	1
2785	Tertiary	Paediatric surgery - Phase 3	28410000172	Split thickness skin grafts-Large (> 8% TBSA)	13500	13500	12825	11475	Surgical	Not Reserved	Yes	No	0	Clinical Notes Detailing Time Of Burns , Clinical Photograph	Detailed Discharge Summary , Detailed Operative Notes , Post Procedure Clinical Photograph	No	No	Yes	No	Yes	1
2786	Tertiary	General Surgery - Phase 3	28350000113	Split thickness skin grafts-Medium (4 - 8% TBSA)	13500	13500	12825	11475	Surgical	Not Reserved	Yes	No	0	Clinical Notes Detailing Time Of Burns , Clinical Photograph	Detailed Discharge Summary , Detailed Operative Notes , Post Procedure Clinical Photograph	No	No	Yes	No	Yes	1
2787	Tertiary	Plastic & reconstructive Surgery - Phase 3	28430000027	Split thickness skin grafts-Medium (4 - 8% TBSA)	13500	13500	12825	11475	Surgical	Not Reserved	Yes	No	0	Clinical Notes Detailing Time Of Burns , Clinical Photograph	Detailed Discharge Summary , Detailed Operative Notes , Post Procedure Clinical Photograph	No	No	Yes	No	Yes	1
2788	Tertiary	Paediatric surgery - Phase 3	28410000173	Split thickness skin grafts-Medium (4 - 8% TBSA)	13500	13500	12825	11475	Surgical	Not Reserved	Yes	No	0	Clinical Notes Detailing Time Of Burns , Clinical Photograph	Detailed Discharge Summary , Detailed Operative Notes , Post Procedure Clinical Photograph	No	No	Yes	No	Yes	1
2789	Tertiary	Paediatric surgery - Phase 3	28410000174	Split thickness skin grafts-Small (< 4% TBSA)	13500	13500	12825	11475	Surgical	Not Reserved	Yes	No	0	Clinical Notes Detailing Time Of Burns , Clinical Photograph	Detailed Discharge Summary , Detailed Operative Notes , Post Procedure Clinical Photograph	No	No	Yes	No	Yes	1

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College& Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2790	Tertiary	Plastic & reconstructive Surgery - Phase 3	28430000028	Split thickness skin grafts-Small (< 4% TBSA)	13500	13500	12825	11475	Surgical	Not Reserved	Yes	No	0	Clinical Notes Detailing Time Of Burns , Clinical Photograph	Detailed Discharge Summary , Detailed Operative Notes , Post Procedure Clinical Photograph	No	No	Yes	No	Yes	1
2791	Tertiary	General Surgery - Phase 3	28350000114	Split thickness skin grafts-Small (< 4% TBSA)	13500	13500	12825	11475	Surgical	Not Reserved	Yes	No	0	Clinical Notes Detailing Time Of Burns , Clinical Photograph	Detailed Discharge Summary , Detailed Operative Notes , Post Procedure Clinical Photograph	No	No	Yes	No	Yes	1
2792	Tertiary	Neurosurgery - Phase 3	28370000073	Stereotactic Lesioning	60000	60000	57000	51000	Surgical	Not Reserved	No	No	0	Clinical Notes From Neurologist/Psychiatrist/Mri	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure (Ct) , Post Procedure Scar Photo	No	No	Yes	No	No	10
2793	Tertiary	General Surgery - Phase 3	28350000115	Submandibular Mass Excision	15000	15000	14250	12750	Surgical	Not Reserved	Yes	No	0	Clinical Photograph , Ct/Usg , Detailed Clinical Notes , FnaC/Biopsy	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph	No	No	Yes	No	No	5
2794	Tertiary	Surgical Oncology - Phase 3	28450000208	Submandibular Mass Excision	15000	15000	14250	12750	Surgical	Not Reserved	Yes	No	0	Clinical Photograph , Ct/Usg , Detailed Clinical Notes , FnaC/Biopsy	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph	No	No	Yes	No	No	5
2795	Tertiary	Neurosurgery - Phase 3	28370000074	Superficial Temporal Artery (STA): middle cerebral artery (MCA) or (other EC - IC) Bypass procedure	60000	60000	57000	51000	Surgical	Not Reserved	No	No	0	Detailed Clinical Notes , Mra/Dsa	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure (Ct) , Post Procedure Scar Photo	No	No	Yes	No	No	10

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2796	Tertiary	Paediatric surgery - Phase 3	28410000175	Suprapubic Drainage - Closed / Trocar	5000	5000	4750	4250	Surgical	Not Reserved	Yes	No	0	Ct/Usg , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes Detailing How Much Urine Was Drained	No	No	Yes	No	Yes	1
2797	Tertiary	Urology - Phase 3	28460000119	Suprapubic Drainage - Closed / Trocar	5000	5000	4750	4250	Surgical	Not Reserved	Yes	No	0	Ct/Usg , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes Detailing How Much Urine Was Drained	No	No	Yes	No	Yes	1
2798	Tertiary	Obstetrics & Gynaecology - Phase 3	28380000028	Surgeries for Prolapse - Sling Surgeries	33900	33900	32205	28815	Surgical	Not Reserved	Yes	No	0	Admission Notes Comprising Of History And Examination With Indications For The Procedure , Pap Smear , Patient Consent Form , Relevant Investigations (Establishing Diagnosis)	Bar-Code Of Sling Used , Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra-Operative Photograph , Progress Notes	No	No	Yes	No	No	5
2799	Tertiary	Surgical Oncology - Phase 3	28450000209	Surgery for Abdominal wall tumour- Abdominal wall tumour resection	25000	25000	23750	21250	Surgical	Not Reserved	No	No	0	Biopsy , Ct-Abdomen , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Scar Photograph	No	No	Yes	No	No	3
2800	Tertiary	Surgical Oncology - Phase 3	28450000210	Surgery for Abdominal wall tumour- Abdominal wall tumour resection with reconstruction	39000	39000	37050	33150	Surgical	Not Reserved	No	No	0	Biopsy , Ct-Abdomen , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Scar Photograph	No	No	Yes	No	No	6
2801	Tertiary	Surgical Oncology - Phase 3	28450000211	Surgery for Cardiac Tumour	95000	95000	90250	80750	Surgical	Not Reserved	No	No	0	2-D Echo , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe)	No	No	Yes	No	No	10

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2802	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	2832000039	Surgery for Cardiac Tumour	95000	95000	90250	80750	Surgical	Not Reserved	No	No	0	2-D Echo , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe)	No	No	Yes	No	No	10
2803	Tertiary	Paediatric surgery - Phase 3	28410000176	Surgery for Congenital Lobar Emphysema	25000	25000	23750	21250	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , X-Ray/Ct Scan Stills	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure (X-Ray)	No	No	Yes	No	No	7
2804	Tertiary	Oral and Maxillofacial Surgery - Phase 3	28520000015	Surgery for Cyst & tumour of Maxilla / Mandible-Enucleation / excision / marsupialization for cyst & tumour of Mandible under LA	2500	2500	2375	2125	Surgical	Not Reserved	No	No	0	Clinical Photograph , Fnac/Biopsy , Opg/Ct Scan	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph	No	No	Yes	No	Yes	1
2805	Tertiary	Oral and Maxillofacial Surgery - Phase 3	28520000016	Surgery for Cyst & tumour of Maxilla / Mandible-Enucleation / excision / marsupialization for cyst & tumour of Maxilla under LA	2500	2500	2375	2125	Surgical	Not Reserved	No	No	0	Clinical Photograph , Fnac/Biopsy , Opg/Ct Scan	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph	No	No	Yes	No	Yes	1
2806	Tertiary	Neurosurgery - Phase 3	28370000075	Surgery for Haematoma - Intracranial (including pre and post Op. CT)-Child -subdural	50000	50000	47500	42500	Surgical	Not Reserved	Yes	No	0	Ct/Mri , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure (CT) , Post Procedure Scar Photo	No	No	Yes	No	No	10
2807	Tertiary	Neurosurgery - Phase 3	28370000076	Surgery for Haematoma - Intracranial (including pre and post Op. CT)-Head injuries	55000	55000	52250	46750	Surgical	Not Reserved	Yes	No	0	Ct/Mri , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure (CT) , Post Procedure Scar Photo	No	No	Yes	No	No	8

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2808	Tertiary	Neurosurgery - Phase 3	2837000077	Surgery for Haematoma - Intracranial (including pre and post Op. CT)-Hypertensive	50000	50000	47500	42500	Surgical	Not Reserved	Yes	No	0	Ct/Mri , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure (CT) , Post Procedure Scar Photo	No	No	Yes	No	No	8
2809	Tertiary	Paediatric surgery - Phase 3	28410000177	Surgery for Hirschsprung's Disease-Myectomy	25000	25000	23750	21250	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Usg/Dye Test	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe)	No	No	Yes	No	No	5
2810	Tertiary	Paediatric surgery - Phase 3	28410000178	Surgery for Hirschsprung's Disease-Pull Through	20000	20000	19000	17000	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Usg/Dye Test	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe)	No	No	Yes	No	No	5
2811	Tertiary	Paediatric surgery - Phase 3	28410000179	Surgery for Hirschsprung's Disease-Rectal Biopsy - Punch	10000	10000	9500	8500	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Usg/Dye Test	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe)	No	No	Yes	No	Yes	1
2812	Tertiary	Paediatric surgery - Phase 3	28410000180	Surgery for Hirschsprung's Disease-Rectal Biopsy – Open	10000	10000	9500	8500	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Usg/Dye Test	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe)	No	No	Yes	No	No	2
2813	Tertiary	Paediatric surgery - Phase 3	28410000181	Surgery for Hirschsprung's Disease-Sphincterotomy	15000	15000	14250	12750	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Usg/Dye Test	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe)	No	No	Yes	No	No	3

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2814	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	2832000040	Surgery for Hypertrophic Obstructive Cardiomyopathy (HOCM)	111000	111000	105450	94350	Surgical	Not Reserved	No	No	0	2-D Echo , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Operative Notes	No	No	Yes	No	No	10
2815	Tertiary	Urology - Phase 3	28460000120	Surgery for Priapism-Aspiration	15000	15000	14250	12750	Surgical	Not Reserved	Yes	No	0	Color-Flow Penile Doppler Imaging/Usg	Detailed Discharge Summary , Detailed Procedure/Operative Notes	No	No	Yes	No	No	2
2816	Tertiary	Urology - Phase 3	28460000121	Surgery for Priapism-Shunt	15000	15000	14250	12750	Surgical	Not Reserved	Yes	No	0	Color-Flow Penile Doppler Imaging/Usg	Detailed Discharge Summary , Detailed Procedure/Operative Notes	No	No	Yes	No	No	2
2817	Tertiary	Urology - Phase 3	28460000122	Surgery for Priapism - Follow Up	1000	1000	950	850	Medical	Not Reserved	No	No	0	Discharge Summary	Clinical Notes With Planned Line Of Treatment	No	No	No	Yes	No	Not Applicable(NA)
2818	Tertiary	Paediatric surgery - Phase 3	28410000182	Surgery for Sacrococcygeal Teratoma	20000	20000	19000	17000	Surgical	Not Reserved	Yes	No	0	Biopsy , Ct/Mri , Detailed Clinical Notes	Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Scar Photo	No	No	Yes	No	No	5
2819	Tertiary	Neurosurgery - Phase 3	28370000078	Surgery for Spinal Canal Stenosis	40000	40000	38000	34000	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Mri	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post-Op X-Ray	No	No	Yes	No	No	6

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2820	Tertiary	Neurosurgery - Phase 3	2837000079	Surgery for tumour meninges-Gocussa	50000	50000	47500	42500	Surgical	Not Reserved	No	No	0	Ct Scan , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure (Ct) , Post Procedure Scar Photo	No	No	Yes	No	No	7
2821	Tertiary	Neurosurgery - Phase 3	2837000080	Surgery for tumour meninges-Posterior	50000	50000	47500	42500	Surgical	Not Reserved	No	No	0	Ct Scan , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure (Ct) , Post Procedure Scar Photo	No	No	Yes	No	No	7
2822	Tertiary	Surgical Oncology - Phase 3	28450000212	Surgical Correction of Bronchopleural Fistula	65000	65000	61750	55250	Surgical	Not Reserved	No	No	0	Ct-Chest , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Operative Notes	No	No	Yes	No	No	10
2823	Tertiary	Paediatric surgery - Phase 3	28410000183	Surgical Correction of Bronchopleural Fistula	65000	65000	61750	55250	Surgical	Not Reserved	No	No	0	Ct-Chest , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Operative Notes	No	No	Yes	No	No	10
2824	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	28320000041	Surgical Correction of Bronchopleural Fistula	65000	65000	61750	55250	Surgical	Not Reserved	No	No	0	Ct-Chest , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Operative Notes	No	No	Yes	No	No	10
2825	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	28320000042	Surgical Correction of Category -I Congenital Heart Disease -Coarctation repair	130000	130000	123500	110500	Surgical	Not Reserved	No	No	0	Detailed Clinical Notes , Echo/Doppler Report	Bar-Code Of Implant/S , Detailed Discharge Summary , Detailed Operative Notes	No	No	Yes	No	No	10

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2826	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	2832000043	Surgical Correction of Category -1 Congenital Heart Disease -Glenn procedure	100000	100000	95000	85000	Surgical	Not Reserved	No	No	0	Detailed Clinical Notes , Echo/Doppler Report	Bar-Code Of Implant/S , Detailed Discharge Summary , Detailed Operative Notes	No	No	Yes	No	No	10
2827	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	2832000044	Surgical Correction of Category -1 Congenital Heart Disease -Isolated Secundum Atrial Septal Defect (ASD) Repair	100000	100000	95000	85000	Surgical	Not Reserved	No	No	0	Detailed Clinical Notes , Echo/Doppler Report	Bar-Code Of Implant/S , Detailed Discharge Summary , Detailed Operative Notes	No	No	Yes	No	No	10
2828	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	2832000045	Surgical Correction of Category -1 Congenital Heart Disease -Systemic - Pulmonary shunt	130000	130000	123500	110500	Surgical	Not Reserved	No	No	0	Detailed Clinical Notes , Echo/Doppler Report	Bar-Code Of Implant/S , Detailed Discharge Summary , Detailed Operative Notes	No	No	Yes	No	No	10
2829	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	2832000046	Surgical Correction of Category -1 Congenital Heart Disease -Unifocalization of MAPCA	100000	100000	95000	85000	Surgical	Not Reserved	No	No	0	Detailed Clinical Notes , Echo/Doppler Report	Bar-Code Of Implant/S , Detailed Discharge Summary , Detailed Operative Notes	No	No	Yes	No	No	10
2830	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	2832000047	Surgical Correction of Category -1 Congenital Heart Disease -Vascular Ring division	100000	100000	95000	85000	Surgical	Not Reserved	No	No	0	Detailed Clinical Notes , Echo/Doppler Report	Bar-Code Of Implant/S , Detailed Discharge Summary , Detailed Operative Notes	No	No	Yes	No	No	10
2831	Tertiary	Urology - Phase 3	28460000123	Surgical Correction of Varicocele- Microsurgical-Bilateral	20000	20000	19000	17000	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Usg-Scrotum/Usg-Scrotal	Detailed Discharge Summary , Detailed Procedure/Operative Notes	No	No	Yes	No	Yes	1

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2832	Tertiary	Urology - Phase 3	28460000124	Surgical Correction of Varicocele-Microsurgical-Unilateral	15000	15000	14250	12750	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Usg-Scrotum/Usg-Scrotal	Detailed Discharge Summary , Detailed Procedure/Operative Notes	No	No	Yes	No	Yes	1
2833	Tertiary	Urology - Phase 3	28460000125	Surgical Correction of Varicocele-Non Microsurgical-Bilateral	15000	15000	14250	12750	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Usg-Scrotum/Usg-Scrotal	Detailed Discharge Summary , Detailed Procedure/Operative Notes	No	No	Yes	No	Yes	1
2834	Tertiary	Urology - Phase 3	28460000126	Surgical Correction of Varicocele-Non Microsurgical-Unilateral	10000	10000	9500	8500	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Usg-Scrotum/Usg-Scrotal	Detailed Discharge Summary , Detailed Procedure/Operative Notes	No	No	Yes	No	Yes	1
2835	Tertiary	Paediatric surgery - Phase 3	28410000184	Sympathectomy	15000	15000	14250	12750	Surgical	Not Reserved	Yes	No	0	Clinical Photograph , Ct/Mri , Detailed Clinical Notes , Electromyography (Emg) Reports , Nerve Conduction Study	Detailed Discharge Summary , Detailed Operative Notes , Intra Procedure Clinical Photograph	No	No	Yes	No	No	5
2836	Tertiary	General Surgery - Phase 3	28350000116	Sympathectomy	15000	15000	14250	12750	Surgical	Not Reserved	Yes	No	0	Clinical Photograph , Ct/Mri , Detailed Clinical Notes , Electromyography (Emg) Reports , Nerve Conduction Study	Detailed Discharge Summary , Detailed Operative Notes , Intra Procedure Clinical Photograph	No	No	Yes	No	No	5
2837	Tertiary	Cardiology - Phase 3	28310000024	Systemic Thrombolysis (for MI)	17900	17900	17005	15215	Medical	Not Reserved	No	No	0	Cardiac Markers- Cpk-Mb , Serial Ecgs Showing MI , Trop I/Trop T	Ecg , Invoices/Bar-Code Of Thrombolytic Agent Used , Post-Op 2-D Echo , Trop-T Report	No	No	Yes	No	No	3

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2838	Tertiary	Oral and Maxillofacial Surgery - Phase 3	2852000017	TM joint ankylosis of both jaws - under GA	15000	15000	14250	12750	Surgical	Not Reserved	No	No	0	Clinical Photograph , Ct Scan , X-Ray	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Clinical Photograph With Mouth Open , X-Ray	No	No	Yes	No	No	3
2839	Tertiary	Surgical Oncology - Phase 3	28450000213	TURBT (Transurethral Resection of the Bladder Tumor)	23000	23000	21850	19550	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Usg/Ct/Mri	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe)	No	No	Yes	No	No	2
2840	Tertiary	Urology - Phase 3	28460000127	TURBT (Transurethral Resection of the Bladder Tumor)	23000	23000	21850	19550	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Usg/Ct/Mri	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe)	No	No	Yes	No	No	2
2841	Tertiary	Urology - Phase 3	28460000128	TURBT - Restage	18000	18000	17100	15300	Surgical	Not Reserved	No	No	0	Detailed Clinical Notes , Usg/Ct/Mri	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Intra Procedure Photograph	No	No	Yes	No	No	2
2842	Tertiary	Surgical Oncology - Phase 3	28450000214	TURBT - Restage	18000	18000	17100	15300	Surgical	Not Reserved	No	No	0	Detailed Clinical Notes , Usg/Ct/Mri	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Intra Procedure Photograph	No	No	Yes	No	No	2
2843	Tertiary	Urology - Phase 3	28460000129	TURP-Transurethral Resection of the Prostate, BPH-Bipolar	27500	27500	26125	23375	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Post Void Volume/Psa , Uroflowmetry , Usg-Prostate	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe)	No	No	Yes	No	No	2

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2844	Tertiary	Urology - Phase 3	28460000130	TURP-Transurethral Resection of the Prostate, BPH-Monopolar	27500	27500	26125	23375	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Post Void Volume/Psa , Uroflowmetry , Usg-Prostate	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe)	No	No	Yes	No	No	2
2845	Tertiary	Cardiology - Phase 3	28310000025	Temporary Pacemaker implantation	19200	19200	18240	16320	Medical	Not Reserved	No	No	0	Detailed Clinical Notes , Ecg , Report By Cardiologist Necessitating Procedure	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Invoice/Bar-Code Of Designated Pacemaker , X Ray Showing The Pacemaker	No	No	Yes	No	No	2
2846	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	28320000048	Temporary Pacemaker implantation	19200	19200	18240	16320	Medical	Not Reserved	No	No	0	Detailed Clinical Notes , Ecg , Report By Cardiologist Necessitating Procedure	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Invoice/Bar-Code Of Designated Pacemaker , X Ray Showing The Pacemaker	No	No	Yes	No	No	2
2847	Tertiary	Burns Management - Phase 3	28470000017	Thermal burns-% Total Body Surface Area Burns (TBSA) - any % (not requiring admission). Needs at least 5-6 dressing	7000	7000	6650	5950	Surgical	Not Reserved	No	No	0	Clinical Photograph (With Rule Of Chart 9) , Detailed Clinical Notes , Mic	Detailed Clinical Notes , Lab Tests Or Other Diagnostic Procedures Done As A Part Of Treatment , Post Treatment Clinical Photograph	No	No	Yes	No	No	Not Applicable(NA)
2848	Tertiary	Burns Management - Phase 3	28470000018	Thermal burns-% Total Body Surface Area Burns (TBSA): 40% - 60 %; Includes % TBSA skin grafted, flap cover, follow-up dressings etc. as deemed necessary; Surgical procedures are required for deep burns that are not amenable to heal with dressings alone.	50000	50000	47500	42500	Surgical	Not Reserved	No	No	0	Clinical Photograph Upto 40-60% Burn (With Rule Of Chart 9) , Detailed Clinical Notes , Mic	Detailed Discharge Summary , Lab Investigations , Post Treatment Clinical Photograph , X-Rays Or Other Diagnostic Procedures Done	No	No	Yes	No	No	19
2849	Tertiary	Burns Management - Phase 3	28470000019	Thermal burns-% Total Body Surface Area Burns (TBSA): > 60 %; Includes % TBSA skin grafted, flap cover, follow-up dressings etc. as deemed necessary; Surgical procedures are required for deep burns that are not amenable to heal with dressings alone.	80000	80000	76000	68000	Surgical	Not Reserved	No	No	0	Clinical Photograph >60% Burn (With Rule Of Chart 9) , Detailed Clinical Notes , Mic	Detailed Discharge Summary , Lab Investigations , Post Treatment Clinical Photograph , X-Rays Or Other Diagnostic Procedures Done	No	No	Yes	No	No	19

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2850	Tertiary	Burns Management - Phase 3	2847000020	Thermal burns-% Total Body Surface Area Burns (TBSA). Upto 40 %; Includes % TBSA skin grafted, flap cover, follow-up dressings etc. as deemed necessary; Surgical procedures are required for deep burns that are not amenable to heal with dressings alone.	40000	40000	38000	34000	Surgical	Not Reserved	No	No	0	Clinical Photograph Upto 40% Burn (With Rule Of Chart 9) , Detailed Clinical Notes , Mic	Detailed Discharge Summary , Lab Investigations , Post Treatment Clinical Photograph , X-Rays Or Other Diagnostic Procedures Done	No	No	Yes	No	No	19
2851	Tertiary	Neurosurgery - Phase 3	2837000081	Thoracic / Lumbar Corpectomy with fusion -Lumbar Corpectomy with fusion	60000	60000	57000	51000	Surgical	Not Reserved	No	No	0	Detailed Clinical Notes , Mri	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Scar Photo , Post Procedure X-Ray Showing Implant	No	No	Yes	No	No	7
2852	Tertiary	Orthopaedics - Phase 3	2840000034	Thoracic / Lumbar Corpectomy with fusion -Lumbar Corpectomy with fusion	60000	60000	57000	51000	Surgical	Not Reserved	No	No	0	Detailed Clinical Notes , Mri	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Scar Photo , Post Procedure X-Ray Showing Implant	No	No	Yes	No	No	7
2853	Tertiary	Neurosurgery - Phase 3	2837000082	Thoracic / Lumbar Corpectomy with fusion -Thoracic Corpectomy with fusion	60000	60000	57000	51000	Surgical	Not Reserved	No	No	0	Detailed Clinical Notes , Mri	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Scar Photo , Post Procedure X-Ray Showing Implant	No	No	Yes	No	No	7
2854	Tertiary	Orthopaedics - Phase 3	2840000035	Thoracic / Lumbar Corpectomy with fusion -Thoracic Corpectomy with fusion	60000	60000	57000	51000	Surgical	Not Reserved	No	No	0	Detailed Clinical Notes , Mri	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Scar Photo , Post Procedure X-Ray Showing Implant	No	No	Yes	No	No	7
2855	Tertiary	General Surgery - Phase 3	28350000118	Thoracoplasty	20000	20000	19000	17000	Surgical	Not Reserved	Yes	No	0	Clinical Photograph , CT/Mri Chest , Detailed Clinical Notes , X-Ray	Detailed Discharge Summary , Detailed Operative Notes , Intra Procedure Clinical Photograph , Post Procedure Clinical Photograph	No	No	Yes	No	No	6

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2856	Tertiary	Paediatric surgery - Phase 3	28410000185	Thoracoplasty	20000	20000	19000	17000	Surgical	Not Reserved	Yes	No	0	Clinical Photograph , Ct/Mri Chest , Detailed Clinical Notes ,X-Ray	Detailed Discharge Summary , Detailed Operative Notes , Intra Procedure Clinical Photograph , Post Procedure Clinical Photograph	No	No	Yes	No	No	6
2857	Tertiary	General Surgery - Phase 3	28350000119	Thoracoscopic Segmental Resection	25000	25000	23750	21250	Surgical	Not Reserved	Yes	No	0	Biopsy , Ct-Thorax , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Intra Procedure Clinical Photograph , Scar Photograph	No	No	Yes	No	No	5
2858	Tertiary	Paediatric surgery - Phase 3	28410000186	Thoracoscopic Segmental Resection	25000	25000	23750	21250	Surgical	Not Reserved	Yes	No	0	Biopsy , Ct-Thorax , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Intra Procedure Clinical Photograph , Scar Photograph	No	No	Yes	No	No	5
2859	Tertiary	Surgical Oncology - Phase 3	28450000215	Thoracostomy	19800	19800	18810	16830	Surgical	Not Reserved	Yes	No	0	Clinical Notes With Planned Line Of Treatment , Clinical Photograph	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Photographs Of Surgical Site	No	No	Yes	No	No	2
2860	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	28320000049	Thoracotomy, Thoraco Abdominal Approach	30000	30000	28500	25500	Surgical	Not Reserved	No	No	0	Ct-Chest , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Operative Notes	No	No	Yes	No	No	10
2861	Tertiary	Paediatric surgery - Phase 3	28410000187	Thoracotomy, Thoraco Abdominal Approach	30000	30000	28500	25500	Surgical	Not Reserved	No	No	0	Ct-Chest , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Operative Notes	No	No	Yes	No	No	10

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2862	Tertiary	General Surgery - Phase 3	28350000120	Thromboembolectomy	28000	28000	26600	23800	Surgical	Not Reserved	No	No	0	Evidence Of Embolus/Thrombus In Duplex Usg/ Angio	Detailed Discharge Summary , Detailed Operative Notes	No	No	Yes	No	No	4
2863	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	28320000050	Thromboembolectomy	28000	28000	26600	23800	Surgical	Not Reserved	No	No	0	Evidence Of Embolus/Thrombus In Duplex Usg/ Angio	Detailed Discharge Summary , Detailed Operative Notes	No	No	Yes	No	No	4
2864	Tertiary	Paediatric surgery - Phase 3	28410000188	Thromboembolectomy	28000	28000	26600	23800	Surgical	Not Reserved	No	No	0	Evidence Of Embolus/Thrombus In Duplex Usg/ Angio	Detailed Discharge Summary , Detailed Operative Notes	No	No	Yes	No	No	4
2865	Tertiary	General Surgery - Phase 3	28350000121	Thymectomy	28000	28000	26600	23800	Surgical	Not Reserved	Yes	No	0	Clinical Photograph , Ct/Mri , Detailed Clinical Notes , Single Fiber Electromyography	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph	No	No	Yes	No	No	6
2866	Tertiary	Paediatric surgery - Phase 3	28410000189	Thymectomy	28000	28000	26600	23800	Surgical	Not Reserved	Yes	No	0	Clinical Photograph , Ct/Mri , Detailed Clinical Notes , Single Fiber Electromyography	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph	No	No	Yes	No	No	6
2867	Tertiary	Paediatric surgery - Phase 3	28410000190	Thyroidectomy-Hemi thyroidectomy	17000	17000	16150	14450	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , FnaC/Usg , Justification Of Surgery , Tft (Thyroid Function Test)	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph	No	No	Yes	No	No	2

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2868	Tertiary	General Surgery - Phase 3	28350000122	Thyroidectomy-Hemi thyroidectomy	17000	17000	16150	14450	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Fnac/Usg , Justification Of Surgery , Tft (Thyroid Function Test)	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph	No	No	Yes	No	No	2
2869	Tertiary	Otorhinolaryngology (ENT) - Phase 3	28330000057	Thyroidectomy-Hemi thyroidectomy	17000	17000	16150	14450	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Fnac/Usg , Justification Of Surgery , Tft (Thyroid Function Test)	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph	No	No	Yes	No	No	2
2870	Tertiary	Surgical Oncology - Phase 3	28450000216	Thyroidectomy-Hemi thyroidectomy	17000	17000	16150	14450	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Fnac/Usg , Justification Of Surgery , Tft (Thyroid Function Test)	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph	No	No	Yes	No	No	2
2871	Tertiary	Surgical Oncology - Phase 3	28450000217	Thyroidectomy-Total thyroidectomy	20000	20000	19000	17000	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Fnac/Biopsy/Thyroid Function Test/Usg	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph , Scar Photograph	No	No	Yes	No	No	4
2872	Tertiary	Paediatric surgery - Phase 3	28410000191	Thyroidectomy-Total thyroidectomy	20000	20000	19000	17000	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Fnac/Biopsy/Thyroid Function Test/Usg	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph , Scar Photograph	No	No	Yes	No	No	4
2873	Tertiary	Otorhinolaryngology (ENT) - Phase 3	28330000058	Thyroidectomy-Total thyroidectomy	20000	20000	19000	17000	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Fnac/Biopsy/Thyroid Function Test/Usg	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph , Scar Photograph	No	No	Yes	No	No	4

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2874	Tertiary	General Surgery - Phase 3	28350000123	Thyroidectomy-Total thyroidectomy	20000	20000	19000	17000	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes, Fnac/Biopsy/Thyroid Function Test/Usg	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph , Scar Photograph	No	No	Yes	No	No	4
2875	Tertiary	Otorhinolaryngology (ENT) - Phase 3	28330000059	Total Thyroidectomy with Block Dissection	28000	28000	26600	23800	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Fnac/Usg , Justification Of Surgery , Tft (Thyroid Function Test)	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph	No	No	Yes	No	No	5
2876	Tertiary	General Surgery - Phase 3	28350000124	Total Thyroidectomy with Block Dissection	28000	28000	26600	23800	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Fnac/Usg , Justification Of Surgery , Tft (Thyroid Function Test)	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph	No	No	Yes	No	No	5
2877	Tertiary	Surgical Oncology - Phase 3	28450000218	Total Thyroidectomy with Block Dissection	28000	28000	26600	23800	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Fnac/Usg , Justification Of Surgery , Tft (Thyroid Function Test)	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph	No	No	Yes	No	No	5
2878	Tertiary	Paediatric surgery - Phase 3	28410000192	Total Thyroidectomy with Block Dissection	28000	28000	26600	23800	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Fnac/Usg , Justification Of Surgery , Tft (Thyroid Function Test)	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph	No	No	Yes	No	No	5
2879	Tertiary	Plastic & reconstructive Surgery - Phase 3	28430000029	Tissue Expander for disfigurement following burns / trauma / congenital deformity (including cost of expander / implant)-Tissue Expander for disfigurement following burns	50000	50000	47500	42500	Surgical	Not Reserved	No	No	0	Clinical Photograph , Detailed Clinical Notes Of Original Clinical Event Having Led To Disfigurement Or Confirming Details / Investigations Of Congenital Event	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Invoice Of Expander/Implant Used , Post Procedure Clinical Photograph	No	No	Yes	No	No	5

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2880	Tertiary	Plastic & reconstructive Surgery - Phase 3	28430000030	Tissue Expander for disfigurement following burns / trauma / congenital deformity (including cost of expander / implant)-Tissue Expander for disfigurement following congenital deformity	50000	50000	47500	42500	Surgical	Not Reserved	No	No	0	Clinical Photograph , Detailed Clinical Notes Of Original Clinical Event Having Led To Disfigurement Or Confirming Details / Investigations Of Congenital Event	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Invoice Of Expander/Implant Used , Post Procedure Clinical Photograph	No	No	Yes	No	No	5
2881	Tertiary	Plastic & reconstructive Surgery - Phase 3	28430000031	Tissue Expander for disfigurement following burns / trauma / congenital deformity (including cost of expander / implant)-Tissue Expander for disfigurement following trauma	50000	50000	47500	42500	Surgical	Not Reserved	No	No	0	Clinical Photograph , Detailed Clinical Notes Of Original Clinical Event Having Led To Disfigurement Or Confirming Details / Investigations Of Congenital Event	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Invoice Of Expander/Implant Used , Post Procedure Clinical Photograph	No	No	Yes	No	No	5
2882	Tertiary	General Surgery - Phase 3	28350000125	Total Colectomy-Lap.	23000	23000	21850	19550	Surgical	Not Reserved	Yes	No	0	Biopsy-Lsion , Colonoscopy/Ct Scan , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Intra Procedure Clinical Photograph	No	No	Yes	No	No	7
2883	Tertiary	Surgical Oncology - Phase 3	28450000219	Total Colectomy-Lap.	23000	23000	21850	19550	Surgical	Not Reserved	Yes	No	0	Biopsy-Lsion , Colonoscopy/Ct Scan , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Intra Procedure Clinical Photograph	No	No	Yes	No	No	7
2884	Tertiary	General Surgery - Phase 3	28350000126	Total Colectomy-Open	23000	23000	21850	19550	Surgical	Not Reserved	No	No	0	Biopsy-Lsion , Colonoscopy/Ct Scan , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Intra Procedure Clinical Photograph	No	No	Yes	No	No	7
2885	Tertiary	Surgical Oncology - Phase 3	28450000220	Total Colectomy-Open	23000	23000	21850	19550	Surgical	Not Reserved	No	No	0	Biopsy-Lsion , Colonoscopy/Ct Scan , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Operative Notes , Histopathology (Hpe) , Intra Procedure Clinical Photograph	No	No	Yes	No	No	7

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2886	Tertiary	Orthopaedics - Phase 3	28400000036	Revision - Total Hip Replacement	140000	140000	133000	119000	Surgical	Reserved	No	No	0	Detailed Clinical Notes , X-Ray/Ct	Bar-Code Of Implant & Cement Used , Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure X-Ray Showing Implant	No	No	Yes	No	No	7
2887	Tertiary	Orthopaedics - Phase 3	28400000037	Total Hip Replacement-Cemented	70000	70000	66500	59500	Surgical	Reserved	No	No	0	Detailed Clinical Notes , X-Ray/Ct	Bar-Code Of Implant/S , Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure X-Ray Showing Implant	No	No	Yes	No	No	7
2888	Tertiary	Orthopaedics - Phase 3	28400000038	Total Hip Replacement-Cementless	97000	97000	92150	82450	Surgical	Reserved	No	No	0	Detailed Clinical Notes , X-Ray/Ct	Bar-Code Of Implant/Cement Used , Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure X-Ray Showing Implant	No	No	Yes	No	No	7
2889	Tertiary	Orthopaedics - Phase 3	28400000039	Total Hip Replacement-Hybrid	77000	77000	73150	65450	Surgical	Reserved	No	No	0	Detailed Clinical Notes , X-Ray/Ct	Bar-Code Of Implant/Cement Used , Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure X-Ray Showing Implant	No	No	Yes	No	No	7
2890	Tertiary	Orthopaedics - Phase 3	28400000040	Primary - Total Knee Replacement	80000	80000	76000	68000	Surgical	Reserved	No	No	0	Detailed Clinical Notes , X-Ray/Ct	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Invoice/Bar-Code Of Implant , Post Procedure Clinical Photograph , Post-Op X-Ray Showing Implant	No	No	Yes	No	No	5
2891	Tertiary	Orthopaedics - Phase 3	28400000041	Revision - Total Knee Replacement	130000	130000	123500	110500	Surgical	Reserved	No	No	0	Detailed Clinical Notes , X-Ray/Ct	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Invoice/Bar-Code Of Implant , Post Procedure Clinical Photograph , Post-Op X-Ray Showing Implant	No	No	Yes	No	No	5

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2892	Tertiary	Surgical Oncology - Phase 3	2845000221	Total Pharyngectomy	36000	36000	34200	30600	Surgical	Not Reserved	Yes	No	0	Clinical Notes With Planned Line Of Treatment , Ct/Mri , Histopathology (Hpe)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Photographs Of Surgical Site	No	No	Yes	No	No	8
2893	Tertiary	Surgical Oncology - Phase 3	2845000222	Tracheal / Carinal resection	58800	58800	55860	49980	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Ct/Mri , Histopathology (Hpe)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Photographs Of Surgical Site	No	No	Yes	No	No	8
2894	Tertiary	Surgical Oncology - Phase 3	2845000223	Tracheal Stenosis (End to end Anastamosis) (Throat)	36000	36000	34200	30600	Surgical	Not Reserved	Yes	No	0	Clinical Notes With Planned Line Of Treatment , Ct/Mri , Histopathology (Hpe)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Photographs Of Surgical Site	No	No	Yes	No	No	6
2895	Tertiary	Surgical Oncology - Phase 3	2845000224	Tracheal resection	36000	36000	34200	30600	Surgical	Not Reserved	No	No	0	Cect/Biopsy , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Scar Photograph	No	No	Yes	No	No	8
2896	Tertiary	Neurosurgery - Phase 3	2837000083	Trans Sphenoidal Surgery (including pre and post Op. MRI)	50000	50000	47500	42500	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Mri	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure (Mri)	No	No	Yes	No	No	7
2897	Tertiary	Neurosurgery - Phase 3	2837000084	Trans oral Surgery	40000	40000	38000	34000	Surgical	Not Reserved	Yes	No	0	Mri-Spine , X-Ray	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure (X-Ray)	No	No	Yes	No	No	7

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College& Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2898	Tertiary	Urology - Phase 3	28460000131	Transrectal Ultrasound guided prostate biopsy (minimum 12 core)	14000	14000	13300	11900	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Post Void Volume , Psa , Usg- Prostate	Detailed Discharge Summary , Detailed Procedure/Operative Notes With Details Of Nodes Removed , Histopathology Showing Reporting Of Minimum 12 Core Samples Of Prostate	No	No	Yes	No	Yes	1
2899	Tertiary	Surgical Oncology - Phase 3	28450000225	Transthoracic esophagectomy: 2F / 3F- MIS	60000	60000	57000	51000	Surgical	Not Reserved	No	No	0	Cect , Clinical Notes With Planned Line Of Treatment , Fnac/Biopsy	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Photographs Of Surgical Site	No	No	Yes	No	No	7
2900	Tertiary	Surgical Oncology - Phase 3	28450000226	Transthoracic esophagectomy: 2F / 3F- Open	60000	60000	57000	51000	Surgical	Not Reserved	No	No	0	Cect , Clinical Notes With Planned Line Of Treatment , Fnac/Biopsy	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Photographs Of Surgical Site	No	No	Yes	No	No	7
2901	Tertiary	Neurosurgery - Phase 3	28370000085	Twist Drill Craniostomy	15000	15000	14250	12750	Surgical	Not Reserved	Yes	No	0	Ct Scan , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure (Ct/Mri) , Post Procedure Scar Photo	No	No	Yes	No	No	2
2902	Tertiary	Urology - Phase 3	28460000132	URSL / URSL - Laser - Follow Up	1000	1000	950	850	Medical	Not Reserved	No	No	0	Discharge Summary	Drugs Details , Usg/Urine Routine	No	No	No	Yes	No	Not Applicable(NA)
2903	Tertiary	Paediatric surgery - Phase 3	28410000193	Undescended Testis-Bilateral - Palpable + Nonpalpable	15000	15000	14250	12750	Surgical	Not Reserved	Yes	No	0	Clinical Photograph , Detailed Clinical Notes , Usg	Detailed Procedure/Operative Notes , Post Procedure Scar Photo	No	No	Yes	No	No	4

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College& Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2904	Tertiary	Paediatric surgery - Phase 3	28410000194	Undescended Testis-Bilateral Non - Palpable	20000	20000	19000	17000	Surgical	Not Reserved	Yes	No	0	Clinical Photograph , Detailed Clinical Notes , Usg	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Scar Photo	No	No	Yes	No	No	4
2905	Tertiary	Paediatric surgery - Phase 3	28410000195	Undescended Testis-Bilateral Palpable	15000	15000	14250	12750	Surgical	Not Reserved	Yes	No	0	Clinical Photograph , Detailed Clinical Notes , Usg	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Scar Photo	No	No	Yes	No	No	4
2906	Tertiary	Paediatric surgery - Phase 3	28410000196	Undescended Testis-Reexploration / Second Stage	20000	20000	19000	17000	Surgical	Not Reserved	Yes	No	0	Clinical Photograph , Detailed Clinical Notes , Usg	Detailed Procedure/Operative Notes , Post Procedure Scar Photo	No	No	Yes	No	No	4
2907	Tertiary	Paediatric surgery - Phase 3	28410000197	Undescended Testis-Unilateral - Palpable	15000	15000	14250	12750	Surgical	Not Reserved	Yes	No	0	Clinical Photograph , Detailed Clinical Notes , Usg	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Scar Photo	No	No	Yes	No	No	4
2908	Tertiary	Urology - Phase 3	28460000133	Urachal Cyst excision - Laparoscopic	18500	18500	17575	15725	Surgical	Not Reserved	No	No	0	Detailed Clinical Notes , Usg/Ct/Mri	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe)	No	No	Yes	No	No	2
2909	Tertiary	Urology - Phase 3	28460000134	Urachal Cyst excision - Open	18500	18500	17575	15725	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Usg/Ct/Mri	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe)	No	No	Yes	No	No	2

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2910	Tertiary	Surgical Oncology - Phase 3	28450000227	Ureteric end to end anastomosis	24000	24000	22800	20400	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Ct-Kub	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Photographs Of Surgical Site	No	No	Yes	No	No	6
2911	Tertiary	Urology - Phase 3	28460000135	Ureteric reimplantation-Lap.-Bilateral	33000	33000	31350	28050	Surgical	Not Reserved	Yes	No	0	Ct-Ivp/Mri Urogram , Detailed Clinical Notes , Mcu (Micturating Cysto-Urethrogram)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra Procedure Photograph	No	No	Yes	No	No	2
2912	Tertiary	Paediatric surgery - Phase 3	28410000198	Ureteric reimplantation-Lap.-Bilateral	33000	33000	31350	28050	Surgical	Not Reserved	Yes	No	0	Ct-Ivp/Mri Urogram , Detailed Clinical Notes , Mcu (Micturating Cysto-Urethrogram)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra Procedure Photograph	No	No	Yes	No	No	2
2913	Tertiary	Urology - Phase 3	28460000136	Ureteric reimplantation-Lap.-Unilateral	23000	23000	21850	19550	Surgical	Not Reserved	Yes	No	0	Ct-Ivp/Mri Urogram , Detailed Clinical Notes , Mcu (Micturating Cysto-Urethrogram)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra Procedure Photograph	No	No	Yes	No	No	2
2914	Tertiary	Paediatric surgery - Phase 3	28410000199	Ureteric reimplantation-Lap.-Unilateral	23000	23000	21850	19550	Surgical	Not Reserved	Yes	No	0	Ct-Ivp/Mri Urogram , Detailed Clinical Notes , Mcu (Micturating Cysto-Urethrogram)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra Procedure Photograph	No	No	Yes	No	No	2
2915	Tertiary	Urology - Phase 3	28460000137	Ureteric reimplantation-Open -Bilateral	33000	33000	31350	28050	Surgical	Not Reserved	Yes	No	0	Ct-Ivp/Mri Urogram , Detailed Clinical Notes , Mcu (Micturating Cysto-Urethrogram)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra Procedure Photograph	No	No	Yes	No	No	3

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2916	Tertiary	Paediatric surgery - Phase 3	28410000200	Ureteric reimplantation-Open -Bilateral	33000	33000	31350	28050	Surgical	Not Reserved	Yes	No	0	Ct-Ivp/Mri Urogram , Detailed Clinical Notes , Mcu (Micturating Cysto-Urethrogram)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra Procedure Photograph	No	No	Yes	No	No	3
2917	Tertiary	Urology - Phase 3	28460000138	Ureteric reimplantation-Open -Unilateral	23000	23000	21850	19550	Surgical	Not Reserved	Yes	No	0	Ct-Ivp/Mri Urogram , Detailed Clinical Notes , Mcu (Micturating Cysto-Urethrogram)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra Procedure Photograph	No	No	Yes	No	No	3
2918	Tertiary	Paediatric surgery - Phase 3	28410000201	Ureteric reimplantation-Open -Unilateral	23000	23000	21850	19550	Surgical	Not Reserved	Yes	No	0	Ct-Ivp/Mri Urogram , Detailed Clinical Notes , Mcu (Micturating Cysto-Urethrogram)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra Procedure Photograph	No	No	Yes	No	No	3
2919	Tertiary	Urology - Phase 3	28460000139	Ureteric sampling including cystoscopy, ureteric catheterization, retrograde pyelogram	11000	11000	10450	9350	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , X-Ray/Usg/Ct Scan	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Evidence Of Cystoscopy , Evidence Of Retrograde Pyelogram , Evidence Of Ureteric Catheterization	No	No	Yes	No	Yes	1
2920	Tertiary	Urology - Phase 3	28460000140	Uretero-ureterostomy-Lap.	25000	25000	23750	21250	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Dtpa Renal Scan , Ivp/Ct/Ct-Ivp	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra-Operative Photograph	No	No	Yes	No	No	3
2921	Tertiary	Paediatric surgery - Phase 3	28410000202	Uretero-ureterostomy-Lap.	25000	25000	23750	21250	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Dtpa Renal Scan , Ivp/Ct/Ct-Ivp	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra-Operative Photograph	No	No	Yes	No	No	3

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College& Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2922	Tertiary	Paediatric surgery - Phase 3	28410000203	Uretero-ureterostomy-Open	25000	25000	23750	21250	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Dtpa Renal Scan , lvp/Ct/Ct-lvp	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra-Operative Photograph	No	No	Yes	No	No	3
2923	Tertiary	Urology - Phase 3	28460000141	Uretero-ureterostomy-Open	25000	25000	23750	21250	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Dtpa Renal Scan , lvp/Ct/Ct-lvp	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra-Operative Photograph	No	No	Yes	No	No	3
2924	Tertiary	Urology - Phase 3	28460000142	Uretero-vaginal / Uterine fistula repair- Uretero - Uterine fistula repair - Laparoscopic	25000	25000	23750	21250	Surgical	Not Reserved	Yes	No	0	Ct-lvp/lvp , Cystoscopy , Detailed Clinical Notes , Vaginoscopy	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra Procedure Photograph	No	No	Yes	No	No	2
2925	Tertiary	Obstetrics & Gynaecology - Phase 3	28380000029	Uretero-vaginal / Uterine fistula repair- Uretero - Uterine fistula repair - Laparoscopic	25000	25000	23750	21250	Surgical	Not Reserved	Yes	No	0	Ct-lvp/lvp , Cystoscopy , Detailed Clinical Notes , Vaginoscopy	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra Procedure Photograph	No	No	Yes	No	No	2
2926	Tertiary	Urology - Phase 3	28460000143	Uretero-vaginal / Uterine fistula repair- Uretero - Uterine fistula repair - Open	25000	25000	23750	21250	Surgical	Not Reserved	Yes	No	0	Ct-lvp/lvp , Cystoscopy , Detailed Clinical Notes , Vaginoscopy	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra Procedure Photograph	No	No	Yes	No	No	3
2927	Tertiary	Obstetrics & Gynaecology - Phase 3	28380000030	Uretero-vaginal / Uterine fistula repair- Uretero - Uterine fistula repair - Open	25000	25000	23750	21250	Surgical	Not Reserved	Yes	No	0	Ct-lvp/lvp , Cystoscopy , Detailed Clinical Notes , Vaginoscopy	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra Procedure Photograph	No	No	Yes	No	No	3

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2928	Tertiary	Urology - Phase 3	28460000144	Uretero-vaginal / Uterine fistula repair- Uretero - vaginal fistula repair - Laparoscopic	25000	25000	23750	21250	Surgical	Not Reserved	Yes	No	0	Ct-lvp/lvp , Cystoscopy , Detailed Clinical Notes , Vaginoscopy	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra Procedure Photograph	No	No	Yes	No	No	2
2929	Tertiary	Obstetrics & Gynaecology - Phase 3	28380000031	Uretero-vaginal / Uterine fistula repair- Uretero - vaginal fistula repair - Laparoscopic	25000	25000	23750	21250	Surgical	Not Reserved	Yes	No	0	Ct-lvp/lvp , Cystoscopy , Detailed Clinical Notes , Vaginoscopy	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra Procedure Photograph	No	No	Yes	No	No	2
2930	Tertiary	Obstetrics & Gynaecology - Phase 3	28380000032	Uretero-vaginal / Uterine fistula repair- Uretero - vaginal fistula repair - Open	25000	25000	23750	21250	Surgical	Not Reserved	Yes	No	0	Ct-lvp/lvp , Cystoscopy , Detailed Clinical Notes , Vaginoscopy	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra Procedure Photograph	No	No	Yes	No	No	3
2931	Tertiary	Urology - Phase 3	28460000145	Uretero-vaginal / Uterine fistula repair- Uretero - vaginal fistula repair - Open	25000	25000	23750	21250	Surgical	Not Reserved	Yes	No	0	Ct-lvp/lvp , Cystoscopy , Detailed Clinical Notes , Vaginoscopy	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra Procedure Photograph	No	No	Yes	No	No	3
2932	Tertiary	Urology - Phase 3	28460000146	Ureterocalycostomy - Laparoscopic	25000	25000	23750	21250	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Dtpa Renal Scan , lvp/Ct/Ct-lvp	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra-Operative Photograph	No	No	Yes	No	No	3
2933	Tertiary	Paediatric surgery - Phase 3	28410000204	Ureterocalycostomy - Laparoscopic	25000	25000	23750	21250	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Dtpa Renal Scan , lvp/Ct/Ct-lvp	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra-Operative Photograph	No	No	Yes	No	No	3

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College& Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2934	Tertiary	Paediatric surgery - Phase 3	28410000205	Ureterocalycostomy - Open	25000	25000	23750	21250	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Dtpa Renal Scan , Ivp/Ct/Ct-Ivp	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra-Operative Photograph	No	No	Yes	No	No	4
2935	Tertiary	Urology - Phase 3	28460000147	Ureterocalycostomy - Open	25000	25000	23750	21250	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Dtpa Renal Scan , Ivp/Ct/Ct-Ivp	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra-Operative Photograph	No	No	Yes	No	No	4
2936	Tertiary	Urology - Phase 3	28460000148	Ureteroceles incision including cystoscopy, ureteric catheterization, retrograde pyelogram	15000	15000	14250	12750	Surgical	Not Reserved	Yes	No	0	Ct-Ivp/Ivp , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Evidence Of Cystoscopy , Evidence Of Retrograde Pyelogram , Evidence Of Ureteric Catheterization	No	No	Yes	No	Yes	1
2937	Tertiary	Urology - Phase 3	28460000149	Ureterolithotomy-Lap.	20000	20000	19000	17000	Surgical	Not Reserved	Yes	No	0	Ct-Ivp , Detailed Clinical Notes , Ivp/Ncct	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure (X-Ray/Usg)	No	No	Yes	No	No	2
2938	Tertiary	Paediatric surgery - Phase 3	28410000206	Ureterolithotomy-Lap.	20000	20000	19000	17000	Surgical	Not Reserved	Yes	No	0	Ct-Ivp , Detailed Clinical Notes , Ivp/Ncct	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure (X-Ray/Usg)	No	No	Yes	No	No	2
2939	Tertiary	Urology - Phase 3	28460000150	Ureterolithotomy-Open	20000	20000	19000	17000	Surgical	Not Reserved	Yes	No	0	Ct-Ivp , Detailed Clinical Notes , Ivp/Ncct	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure (X-Ray/Usg)	No	No	Yes	No	No	3

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2940	Tertiary	Paediatric surgery - Phase 3	28410000207	Ureterolithotomy-Open	20000	20000	19000	17000	Surgical	Not Reserved	Yes	No	0	Ct-Ivp , Detailed Clinical Notes , Ivp/Ncct	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure (X-Ray/Usg)	No	No	Yes	No	No	3
2941	Tertiary	Urology - Phase 3	28460000151	Ureterolysis for retroperitoneal fibrosis (with or without omental wrapping)-Lap.	28000	28000	26600	23800	Surgical	Not Reserved	Yes	No	0	Ct-Ivp/Mri Urogram , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes Including Details Of Omental Wrapping , Intra Procedure Photograph	No	No	Yes	No	No	2
2942	Tertiary	Urology - Phase 3	28460000152	Ureterolysis for retroperitoneal fibrosis (with or without omental wrapping)-Open	28000	28000	26600	23800	Surgical	Not Reserved	Yes	No	0	Ct-Ivp/Mri Urogram , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes Including Details Of Omental Wrapping , Intra Procedure Photograph	No	No	Yes	No	No	3
2943	Tertiary	Urology - Phase 3	28460000153	Ureteroscopy + Stone removal with lithotripsy-Lower Ureter-Bilateral	43000	43000	40850	36550	Surgical	Not Reserved	Yes	No	0	Ct-Ivp , Detailed Clinical Notes , Ivp/Ncct	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure (X-Ray/Usg)	No	No	Yes	No	Yes	1
2944	Tertiary	Urology - Phase 3	28460000154	Ureteroscopy + Stone removal with lithotripsy-Lower Ureter-Unilateral	28000	28000	26600	23800	Surgical	Not Reserved	Yes	No	0	Ct-Ivp , Detailed Clinical Notes , Ivp/Ncct	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure (X-Ray/Usg)	No	No	Yes	No	Yes	1
2945	Tertiary	Urology - Phase 3	28460000155	Ureteroscopy + Stone removal with lithotripsy-Upper Ureter-Bilateral	43000	43000	40850	36550	Surgical	Not Reserved	Yes	No	0	Ct-Ivp , Detailed Clinical Notes , Ivp/Ncct	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure (X-Ray/Usg)	No	No	Yes	No	Yes	1

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College& Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2946	Tertiary	Urology - Phase 3	28460000156	Ureteroscopy + Stone removal with lithotripsy-Upper Ureter-Unilateral	28000	28000	26600	23800	Surgical	Not Reserved	Yes	No	0	Ct-Ivp , Detailed Clinical Notes , Ivp/Ncct	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure (X-Ray/Usg)	No	No	Yes	No	Yes	1
2947	Tertiary	Urology - Phase 3	28460000157	Ureterostomy (Cutaneous)	20000	20000	19000	17000	Surgical	Not Reserved	Yes	No	0	Ct/Mri , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Clinical Photograph Stoma	No	No	Yes	No	No	2
2948	Tertiary	Paediatric surgery - Phase 3	28410000208	Ureterostomy (Cutaneous)	20000	20000	19000	17000	Surgical	Not Reserved	Yes	No	0	Ct/Mri , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Clinical Photograph Stoma	No	No	Yes	No	No	2
2949	Tertiary	Paediatric surgery - Phase 3	28410000209	Urethral Dilatation-Endoscopic as an independent procedure	9500	9500	9025	8075	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Rgu/Mcu	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Endoscopic Intra Procedure Photograph	No	No	Yes	No	Yes	1
2950	Tertiary	Urology - Phase 3	28460000158	Urethral Dilatation-Endoscopic as an independent procedure	9500	9500	9025	8075	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Rgu/Mcu	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Endoscopic Intra Procedure Photograph	No	No	Yes	No	Yes	1
2951	Tertiary	Paediatric surgery - Phase 3	28410000210	Urethral Dilatation-Non endoscopic as an independent procedure	2000	2000	1900	1700	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Rgu/Mcu	Detailed Discharge Summary , Detailed Procedure/Operative Notes Detailing Size Of Dilators Used	No	No	Yes	No	Yes	1

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2952	Tertiary	Urology - Phase 3	28460000159	Urethral Dilatation-Non endoscopic as an independent procedure	2000	2000	1900	1700	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Rgu/Mcu	Detailed Discharge Summary , Detailed Procedure/Operative Notes Detailing Size Of Dilators Used	No	No	Yes	No	Yes	1
2953	Tertiary	Urology - Phase 3	28460000160	Urethroplasty - End to end	28000	28000	26600	23800	Surgical	Not Reserved	Yes	No	0	Acu (Anterograde Urethrography)/Mcu (Micturating Cysto-Urethrogram) , Detailed Clinical Notes , Rgu(Retrograde Urethrography)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra Procedure Clinical Photograph	No	No	Yes	No	No	2
2954	Tertiary	Paediatric surgery - Phase 3	28410000211	Urethroplasty - End to end	28000	28000	26600	23800	Surgical	Not Reserved	Yes	No	0	Acu (Anterograde Urethrography)/Mcu (Micturating Cysto-Urethrogram) , Detailed Clinical Notes , Rgu(Retrograde Urethrography)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra Procedure Clinical Photograph	No	No	Yes	No	No	2
2955	Tertiary	Urology - Phase 3	28460000161	Urethroplasty - Substitution - single stage	28000	28000	26600	23800	Surgical	Not Reserved	Yes	No	0	Acu (Anterograde Urethrography)/Mcu (Micturating Cysto-Urethrogram) , Detailed Clinical Notes , Rgu(Retrograde Urethrography)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra Procedure Clinical Photograph	No	No	Yes	No	No	4
2956	Tertiary	Paediatric surgery - Phase 3	28410000212	Urethroplasty - Substitution - single stage	28000	28000	26600	23800	Surgical	Not Reserved	Yes	No	0	Acu (Anterograde Urethrography)/Mcu (Micturating Cysto-Urethrogram) , Detailed Clinical Notes , Rgu(Retrograde Urethrography)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra Procedure Clinical Photograph	No	No	Yes	No	No	4
2957	Tertiary	Paediatric surgery - Phase 3	28410000213	Urethroplasty - Substitution - two stage	41500	41500	39425	35275	Surgical	Not Reserved	Yes	No	0	Acu (Anterograde Urethrography)/Mcu (Micturating Cysto-Urethrogram) , Detailed Clinical Notes , Rgu(Retrograde Urethrography)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra Procedure Clinical Photograph	No	No	Yes	No	No	4

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2958	Tertiary	Urology - Phase 3	28460000162	Urethroplasty - Substitution - two stage	41500	41500	39425	35275	Surgical	Not Reserved	Yes	No	0	Acu (Anterograde Urethrography)/Mcu (Micturating Cysto-Urethrogram) , Detailed Clinical Notes , Rgu(Retrograde Urethrography)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra Procedure Clinical Photograph	No	No	Yes	No	No	4
2959	Tertiary	Paediatric surgery - Phase 3	28410000214	Urethroplasty - Transpubic	32000	32000	30400	27200	Surgical	Not Reserved	Yes	No	0	Acu (Anterograde Urethrography)/Mcu (Micturating Cysto-Urethrogram) , Detailed Clinical Notes , Rgu(Retrograde Urethrography)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra Procedure Clinical Photograph	No	No	Yes	No	No	4
2960	Tertiary	Urology - Phase 3	28460000163	Urethroplasty - Transpubic	32000	32000	30400	27200	Surgical	Not Reserved	Yes	No	0	Acu (Anterograde Urethrography)/Mcu (Micturating Cysto-Urethrogram) , Detailed Clinical Notes , Rgu(Retrograde Urethrography)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra Procedure Clinical Photograph	No	No	Yes	No	No	4
2961	Tertiary	Urology - Phase 3	28460000164	Urethroplasty Follow Up	1000	1000	950	850	Medical	Not Reserved	No	No	0	Discharge Summary	Usg/Ufm/Urine Routine	No	No	No	Yes	No	Not Applicable(NA)
2962	Tertiary	Urology - Phase 3	28460000165	Urethrorectal fistula repair	40000	40000	38000	34000	Surgical	Not Reserved	Yes	No	0	Cystoscopy & Sigmoidoscopy/Rgu & Mcu , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes	No	No	Yes	No	No	4
2963	Tertiary	Paediatric surgery - Phase 3	28410000215	Urethrorectal fistula repair	40000	40000	38000	34000	Surgical	Not Reserved	Yes	No	0	Cystoscopy & Sigmoidoscopy/Rgu & Mcu , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes	No	No	Yes	No	No	4

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2964	Tertiary	Paediatric surgery - Phase 3	28410000216	Urethrovaginal fistula repair	30000	30000	28500	25500	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Urethro Cystoscopy , Usg , Vaginoscopy	Detailed Discharge Summary , Detailed Procedure/Operative Notes	No	No	Yes	No	No	2
2965	Tertiary	Urology - Phase 3	28460000166	Urethrovaginal fistula repair	30000	30000	28500	25500	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Urethro Cystoscopy , Usg , Vaginoscopy	Detailed Discharge Summary , Detailed Procedure/Operative Notes	No	No	Yes	No	No	2
2966	Tertiary	Obstetrics & Gynaecology - Phase 3	28380000033	Urethrovaginal fistula repair	30000	30000	28500	25500	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Urethro Cystoscopy , Usg , Vaginoscopy	Detailed Discharge Summary , Detailed Procedure/Operative Notes	No	No	Yes	No	No	2
2967	Tertiary	Paediatric surgery - Phase 3	28410000217	Uvulopalatopharyngoplasty (UPPP)	18600	18600	17670	15810	Surgical	Not Reserved	Yes	No	0	Ct/Mri , Detailed Clinical Notes , Polysomnography (Sleep Study)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	No	2
2968	Tertiary	Otorhinolaryngology (ENT) - Phase 3	28330000060	Uvulopalatopharyngoplasty (UPPP)	18600	18600	17670	15810	Surgical	Not Reserved	Yes	No	0	Ct/Mri , Detailed Clinical Notes , Polysomnography (Sleep Study)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Clinical Photograph Of Affected Part	No	No	Yes	No	No	2
2969	Tertiary	Cardiology - Phase 3	28310000026	VSD Device Closure	109900	109900	104405	93415	Medical	Not Reserved	No	No	0	Detailed Clinical Notes , Echo Report Showing Vsd	Detailed Discharge Summary , Invoice Of Blade/Device Used , Post Procedure 2-D Echo With Report , Procedure/Operative Notes With Images	No	No	Yes	No	No	2

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2970	Tertiary	Urology - Phase 3	28460000167	VVF Repair - Follow Up	1500	1500	1425	1275	Medical	Not Reserved	No	No	0	Discharge Summary	Usg/Ufm/Urine Routine	No	No	No	Yes	No	Not Applicable(NA)
2971	Tertiary	Obstetrics & Gynaecology - Phase 3	28380000034	Vaginal repair for vesico-vaginal fistula	34000	34000	32300	28900	Surgical	Not Reserved	Yes	No	0	Admission Notes Comprising Of History And Examination With Indications For The Procedure , Cystoscopy/Cystourethroscopy , Relevant Investigations (Establishing Diagnosis) , Voiding Cystourethrogram (Optional)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra-Operative Photograph With Date & Patient Id , Progress Notes	No	No	Yes	No	No	5
2972	Tertiary	Urology - Phase 3	28460000168	Vaginal repair for vesico-vaginal fistula	34000	34000	32300	28900	Surgical	Not Reserved	Yes	No	0	Admission Notes Comprising Of History And Examination With Indications For The Procedure , Cystoscopy/Cystourethroscopy , Relevant Investigations (Establishing Diagnosis) , Voiding Cystourethrogram (Optional)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra-Operative Photograph With Date & Patient Id , Progress Notes	No	No	Yes	No	No	5
2973	Tertiary	Surgical Oncology - Phase 3	28450000228	Vascular reconstruction	57600	57600	54720	48960	Surgical	Not Reserved	No	No	0	Detailed Clinical Notes	Detailed Discharge Summary	No	No	Yes	No	No	9
2974	Tertiary	Plastic & reconstructive Surgery - Phase 3	28430000032	Vascular reconstruction	57600	57600	54720	48960	Surgical	Not Reserved	No	No	0	Detailed Clinical Notes	Detailed Discharge Summary	No	No	Yes	No	No	9
2975	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	28320000054	Vascular reconstruction	57600	57600	54720	48960	Surgical	Not Reserved	No	No	0	Detailed Clinical Notes	Detailed Discharge Summary	No	No	Yes	No	No	9

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2976	Tertiary	General Surgery - Phase 3	28350000127	Vasovasostomy	12000	12000	11400	10200	Surgical	Not Reserved	Yes	No	0	Clinical Notes Detailing Need Of Surgery After Vasectomy? Evidence Of When And Where Was Vasectomy Done? Is The Ehcp Equipped For Microsurgery?	Detailed Discharge Summary , Detailed Operative Notes , Intra-Op Clinical Photograph , Microsurgery Evaluate Time	No	No	Yes	No	No	2
2977	Tertiary	Urology - Phase 3	28460000169	Vasovasostomy	12000	12000	11400	10200	Surgical	Not Reserved	Yes	No	0	Clinical Notes Detailing Need Of Surgery After Vasectomy? Evidence Of When And Where Was Vasectomy Done? Is The Ehcp Equipped For Microsurgery?	Detailed Discharge Summary , Detailed Operative Notes , Intra-Op Clinical Photograph , Microsurgery Evaluate Time	No	No	Yes	No	No	2
2978	Tertiary	Neurosurgery - Phase 3	28370000086	Ventricular Puncture	15000	15000	14250	12750	Surgical	Not Reserved	Yes	No	0	Ct Scan , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure (Ct) , Post Procedure Scar Photo	No	No	Yes	No	No	3
2979	Tertiary	Neo-natal care Packages - Phase 3	28510000010	Ventriculoperitoneal Shunt Surgery (VP) or Omayya Reservoir or External Drainage for Hydrocephalus	5000	5000	4750	4250	Surgical	Not Reserved	No	No	0	Detailed Clinical Notes , Fundoscope Reports/Still/ Showing Extent Of Rop	Details Of Laser Therapy	No	No	Yes	No	No	2
2980	Tertiary	Surgical Oncology - Phase 3	28450000229	Vertebral Tumour Excision and Reconstruction	54000	54000	51300	45900	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Radiological Evidence For Indication	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Photographs Of Surgical Site	No	No	Yes	No	No	11
2981	Tertiary	Interventional Neuroradiology - Phase 3	28490000017	Vertebroplasty	40000	40000	38000	34000	Medical	Not Reserved	No	No	0	Ct/Mri , Detailed Clinical Notes , Fir/Mic	Detailed Discharge Summary , Detailed Procedure/Operative Notes With Procedure Deployed , Intra Procedure Photograph Showing Coil , Invoices Of Cement Used	No	No	Yes	No	No	3

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2982	Tertiary	Obstetrics & Gynaecology - Phase 3	2838000035	Vulvectomy + reconstruction procedures	36000	36000	34200	30600	Surgical	Not Reserved	No	No	0	Biopsy/Hpe , Clinical Notes With Planned Line Of Treatment	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe)	No	No	Yes	No	No	11
2983	Tertiary	Surgical Oncology - Phase 3	28450000230	Vulvectomy + reconstruction procedures	36000	36000	34200	30600	Surgical	Not Reserved	No	No	0	Biopsy/Hpe , Clinical Notes With Planned Line Of Treatment	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe)	No	No	Yes	No	No	11
2984	Tertiary	Obstetrics & Gynaecology - Phase 3	2838000036	Vulvectomy simple	15000	15000	14250	12750	Surgical	Not Reserved	Yes	No	0	Admission Notes Comprising Of History And Examination With Indications For The Procedure , Clinical Photograph , Relevant Investigations (Establishing Diagnosis)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Intra Procedure Clinical Photograph , Progress Notes	No	No	Yes	No	No	3
2985	Tertiary	Surgical Oncology - Phase 3	28450000231	Vulvectomy simple	15000	15000	14250	12750	Surgical	Not Reserved	Yes	No	0	Admission Notes Comprising Of History And Examination With Indications For The Procedure , Clinical Photograph , Relevant Investigations (Establishing Diagnosis)	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Clinical Photograph , Progress Notes	No	No	Yes	No	No	3
2986	Tertiary	Surgical Oncology - Phase 3	28450000232	Wedge resection lung-Open	36000	36000	34200	30600	Surgical	Not Reserved	No	No	0	Biopsy , Clinical Notes With Planned Line Of Treatment , Ct Thorax	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Photographs Of Surgical Site	No	No	Yes	No	No	6
2987	Tertiary	Surgical Oncology - Phase 3	28450000233	Wedge resection lung-Thorascopic	36000	36000	34200	30600	Surgical	Not Reserved	No	No	0	Biopsy , Clinical Notes With Planned Line Of Treatment , Ct Thorax	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Photographs Of Surgical Site	No	No	Yes	No	No	6

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2988	Tertiary	Paediatric surgery - Phase 3	28410000218	Wilms tumors: surgery	33000	33000	31350	28050	Surgical	Not Reserved	No	No	0	Biopsy/Hpe , Clinical Notes With Planned Line Of Treatment , Ct-Abdomen	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Photographs Of Surgical Site	No	No	Yes	No	No	8
2989	Tertiary	Surgical Oncology - Phase 3	28450000234	Wilms tumors: surgery	33000	33000	31350	28050	Surgical	Not Reserved	No	No	0	Biopsy/Hpe , Clinical Notes With Planned Line Of Treatment , Ct-Abdomen	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure Photographs Of Surgical Site	No	No	Yes	No	No	8
2990	Tertiary	Urology - Phase 3	28460000170	Y V Plasty of Bladder Neck / Bladder Neck Reconstruction	23000	23000	21850	19550	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Urethro Cystoscopy , Usg	Detailed Discharge Summary , Detailed Procedure/Operative Notes	No	No	Yes	No	No	4
2991	Tertiary	Paediatric surgery - Phase 3	28410000219	Y V Plasty of Bladder Neck / Bladder Neck Reconstruction	23000	23000	21850	19550	Surgical	Not Reserved	Yes	No	0	Detailed Clinical Notes , Urethro Cystoscopy , Usg	Detailed Discharge Summary , Detailed Procedure/Operative Notes	No	No	Yes	No	No	4
2992	Tertiary	Neo-natal care Packages - Phase 3	28510000002	Advanced Neonatal Care Package (Rs. 6000 per day, maximum of Rs. 75,000 – pre-auth is needed after 7 days): Babies with birthweight of 1200-1499 g or Babies of any birthweight with at least one of the following conditions: • Any condition requiring invasive ventilation longer than 24 hours • Hypoxic ischemic encephalopathy requiring Therapeutic Hypothermia	6000	6000	5700	5100	Medical	Not Reserved	No	No	0	Detailed Clinical Notes , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Evidence Of All Investigations Done	No	No	Yes	No	No	7
2993	Tertiary	Neo-natal care Packages - Phase 3	28510000009	Intensive Neonatal Care Package Babies with birthweight 1500-1799 g or Babies of any birthweight and at least one of the following conditions: • Need for mechanical ventilation for less than 24 hours or non-invasive respiratory support (CPAP, HFFNC) • Sepsis / pneumonia without complications	5000	5000	4750	4250	Medical	Not Reserved	No	No	0	Detailed Clinical Notes , Supporting Investigations	Detailed Discharge Summary , Detailed Icps , Evidence Of All Investigations Done	No	No	Yes	No	No	7

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
2994	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	2832000064	Surgical Correction of Category - II Congenital Heart Disease-Partial AV canal repair	120000	120000	114000	102000	Surgical	Not Reserved	No	No	0	2-D Echo , Detailed Clinical Notes	Bar-Code Of Implant/S , Detailed Discharge Summary , Detailed Operative Notes	No	No	Yes	No	No	10
2995	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	2832000065	Surgical Correction of Category - II Congenital Heart Disease-Intermediate AV canal repair	120000	120000	114000	102000	Surgical	Not Reserved	No	No	0	2-D Echo , Detailed Clinical Notes	Bar-Code Of Implant/S , Detailed Discharge Summary , Detailed Operative Notes	No	No	Yes	No	No	10
2996	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	2832000066	Surgical Correction of Category - II Congenital Heart Disease-Atrial septectomy + Glenn	120000	120000	114000	102000	Surgical	Not Reserved	No	No	0	2-D Echo , Detailed Clinical Notes	Bar-Code Of Implant/S , Detailed Discharge Summary , Detailed Operative Notes	No	No	Yes	No	No	10
2997	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	2832000067	Surgical Correction of Category - II Congenital Heart Disease-Atrial septectomy + PA Band	120000	120000	114000	102000	Surgical	Not Reserved	No	No	0	2-D Echo , Detailed Clinical Notes	Bar-Code Of Implant/S , Detailed Discharge Summary , Detailed Operative Notes	No	No	Yes	No	No	10
2998	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	2832000068	Surgical Correction of Category - II Congenital Heart Disease-Sinus of Valsalva aneurysm repair with aortic valve procedure	120000	120000	114000	102000	Surgical	Not Reserved	No	No	0	2-D Echo , Detailed Clinical Notes	Bar-Code Of Implant/S , Detailed Discharge Summary , Detailed Operative Notes	No	No	Yes	No	No	10
2999	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	2832000069	Surgical Correction of Category - II Congenital Heart Disease-Sinus of Valsalva aneurysm repair without aortic valve procedure	120000	120000	114000	102000	Surgical	Not Reserved	No	No	0	2-D Echo , Detailed Clinical Notes	Bar-Code Of Implant/S , Detailed Discharge Summary , Detailed Operative Notes	No	No	Yes	No	No	10

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
3000	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	2832000070	Surgical Correction of Category - II Congenital Heart Disease-Sub-aortic membrane resection	120000	120000	114000	102000	Surgical	Not Reserved	No	No	0	2-D Echo , Detailed Clinical Notes	Bar-Code Of Implant/S , Detailed Discharge Summary , Detailed Operative Notes	No	No	Yes	No	No	10
3001	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	2832000071	Surgical Correction of Category - III Congenital Heart Disease -Ebsten repair	150000	150000	142500	127500	Surgical	Not Reserved	No	No	0	Echo/Doppler Report	Bar-Code Of Implant/S , Detailed Discharge Summary , Detailed Operative Notes	No	No	Yes	No	No	12
3002	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	2832000072	Surgical Correction of Category - III Congenital Heart Disease -Double switch operation	150000	150000	142500	127500	Surgical	Not Reserved	No	No	0	Echo/Doppler Report	Bar-Code Of Implant/S , Detailed Discharge Summary , Detailed Operative Notes	No	No	Yes	No	No	12
3003	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	2832000073	Surgical Correction of Category - III Congenital Heart Disease -Rastelli Procedure	150000	150000	142500	127500	Surgical	Not Reserved	No	No	0	Echo/Doppler Report	Bar-Code Of Implant/S , Detailed Discharge Summary , Detailed Operative Notes	No	No	Yes	No	No	12
3004	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	2832000074	Surgical Correction of Category - III Congenital Heart Disease -Fontan procedure	150000	150000	142500	127500	Surgical	Not Reserved	No	No	0	Echo/Doppler Report	Bar-Code Of Implant/S , Detailed Discharge Summary , Detailed Operative Notes	No	No	Yes	No	No	12
3005	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	2832000075	Surgical Correction of Category - III Congenital Heart Disease -AP window repair	150000	150000	142500	127500	Surgical	Not Reserved	No	No	0	Echo/Doppler Report	Bar-Code Of Implant/S , Detailed Discharge Summary , Detailed Operative Notes	No	No	Yes	No	No	12

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
3006	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	28320000076	Surgical Correction of Category - III Congenital Heart Disease - Arch Interruption Repair without VSD closure	150000	150000	142500	127500	Surgical	Not Reserved	No	No	0	Echo/Doppler Report	Bar-Code Of Implant/S , Detailed Discharge Summary , Detailed Operative Notes	No	No	Yes	No	No	12
3007	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	28320000077	Surgical Correction of Category - III Congenital Heart Disease - Arch Interruption Repair with VSD closure	150000	150000	142500	127500	Surgical	Not Reserved	No	No	0	Echo/Doppler Report	Bar-Code Of Implant/S , Detailed Discharge Summary , Detailed Operative Notes	No	No	Yes	No	No	12
3008	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	28320000078	Surgical Correction of Category - III Congenital Heart Disease -DORV Repair	150000	150000	142500	127500	Surgical	Not Reserved	No	No	0	Echo/Doppler Report	Bar-Code Of Implant/S , Detailed Discharge Summary , Detailed Operative Notes	No	No	Yes	No	No	12
3009	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	28320000079	Surgical Correction of Category - III Congenital Heart Disease -Supravalvular AS repair	150000	150000	142500	127500	Surgical	Not Reserved	No	No	0	Echo/Doppler Report	Bar-Code Of Implant/S , Detailed Discharge Summary , Detailed Operative Notes	No	No	Yes	No	No	12
3010	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	28320000080	Surgical Correction of Category - III Congenital Heart Disease -Konno procedure	150000	150000	142500	127500	Surgical	Not Reserved	No	No	0	Echo/Doppler Report	Bar-Code Of Implant/S , Detailed Discharge Summary , Detailed Operative Notes	No	No	Yes	No	No	12
3011	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	28320000081	Surgical Correction of Category - III Congenital Heart Disease -Norwood procedure	150000	150000	142500	127500	Surgical	Not Reserved	No	No	0	Echo/Doppler Report	Bar-Code Of Implant/S , Detailed Discharge Summary , Detailed Operative Notes	No	No	Yes	No	No	12

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
3012	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	2832000082	Surgical Correction of Category - III Congenital Heart Disease -VSD closure + RV - PA conduit	150000	150000	142500	127500	Surgical	Not Reserved	No	No	0	Echo/Doppler Report	Bar-Code Of Implant/S , Detailed Discharge Summary , Detailed Operative Notes	No	No	Yes	No	No	12
3013	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	2832000083	Surgical Correction of Category - III Congenital Heart Disease -VSD + Aortic procedure	150000	150000	142500	127500	Surgical	Not Reserved	No	No	0	Echo/Doppler Report	Bar-Code Of Implant/S , Detailed Discharge Summary , Detailed Operative Notes	No	No	Yes	No	No	12
3014	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	2832000084	Surgical Correction of Category - III Congenital Heart Disease -VSD + Mitral procedure	150000	150000	142500	127500	Surgical	Not Reserved	No	No	0	Echo/Doppler Report	Bar-Code Of Implant/S , Detailed Discharge Summary , Detailed Operative Notes	No	No	Yes	No	No	12
3015	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	2832000085	Surgical Correction of Category - III Congenital Heart Disease -VSD + Tricuspid procedure	150000	150000	142500	127500	Surgical	Not Reserved	No	No	0	Echo/Doppler Report	Bar-Code Of Implant/S , Detailed Discharge Summary , Detailed Operative Notes	No	No	Yes	No	No	12
3016	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	2832000086	Surgical Correction of Category - III Congenital Heart Disease -VSD + Pulmonary procedure	150000	150000	142500	127500	Surgical	Not Reserved	No	No	0	Echo/Doppler Report	Bar-Code Of Implant/S , Detailed Discharge Summary , Detailed Operative Notes	No	No	Yes	No	No	12
3017	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	2832000087	Surgical Correction of Category - III Congenital Heart Disease -VSD + Infundibular procedure	150000	150000	142500	127500	Surgical	Not Reserved	No	No	0	Echo/Doppler Report	Bar-Code Of Implant/S , Detailed Discharge Summary , Detailed Operative Notes	No	No	Yes	No	No	12

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
3018	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	28320000088	Surgical Correction of Category - III Congenital Heart Disease -VSD + Coarctation repair	150000	150000	142500	127500	Surgical	Not Reserved	No	No	0	Echo/Doppler Report	Bar-Code Of Implant/S , Detailed Discharge Summary , Detailed Operative Notes	No	No	Yes	No	No	12
3019	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	28320000089	Surgical Correction of Category - III Congenital Heart Disease -TAPVC Repair	150000	150000	142500	127500	Surgical	Not Reserved	No	No	0	Echo/Doppler Report	Bar-Code Of Implant/S , Detailed Discharge Summary , Detailed Operative Notes	No	No	Yes	No	No	12
3020	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	28320000090	Surgical Correction of Category - III Congenital Heart Disease -Truncus arteriosus repair	150000	150000	142500	127500	Surgical	Not Reserved	No	No	0	Echo/Doppler Report	Bar-Code Of Implant/S , Detailed Discharge Summary , Detailed Operative Notes	No	No	Yes	No	No	12
3021	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	28320000091	Surgical Correction of Category - III Congenital Heart Disease -Tetralogy of Fallot Repair	150000	150000	142500	127500	Surgical	Not Reserved	No	No	0	Echo/Doppler Report	Bar-Code Of Implant/S , Detailed Discharge Summary , Detailed Operative Notes	No	No	Yes	No	No	12
3022	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	28320000092	Surgical Correction of Category - III Congenital Heart Disease -Complete AV canal repair	150000	150000	142500	127500	Surgical	Not Reserved	No	No	0	Echo/Doppler Report	Bar-Code Of Implant/S , Detailed Discharge Summary , Detailed Operative Notes	No	No	Yes	No	No	12
3023	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	28320000093	Surgical Correction of Category - III Congenital Heart Disease -Arterial switch operation	150000	150000	142500	127500	Surgical	Not Reserved	No	No	0	Echo/Doppler Report	Bar-Code Of Implant/S , Detailed Discharge Summary , Detailed Operative Notes	No	No	Yes	No	No	12

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
3024	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	2832000094	Surgical Correction of Category - III Congenital Heart Disease -Senning Operation	150000	150000	142500	127500	Surgical	Not Reserved	No	No	0	Echo/Doppler Report	Bar-Code Of Implant/S , Detailed Discharge Summary , Detailed Operative Notes	No	No	Yes	No	No	12
3025	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	2832000095	Surgical Correction of Category - III Congenital Heart Disease -Mustard Operation	150000	150000	142500	127500	Surgical	Not Reserved	No	No	0	Echo/Doppler Report	Bar-Code Of Implant/S , Detailed Discharge Summary , Detailed Operative Notes	No	No	Yes	No	No	12
3026	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	2832000096	Single Valve Procedure-Aortic Valve	119000	119000	113050	101150	Surgical	Not Reserved	No	No	0	Detailed Clinical Notes , Echo/Doppler Report	Bar-Code Of Implant/S , Detailed Discharge Summary , Detailed Procedure Notes , Post-Op 2-D Echo	No	No	Yes	No	No	7
3027	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	2832000097	Single Valve Procedure-Mitral Valve	119000	119000	113050	101150	Surgical	Not Reserved	No	No	0	Detailed Clinical Notes , Echo/Doppler Report	Bar-Code Of Implant/S , Detailed Discharge Summary , Detailed Procedure Notes , Post-Op 2-D Echo	No	No	Yes	No	No	7
3028	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	2832000098	Single Valve Procedure-Tricuspid Valve	119000	119000	113050	101150	Surgical	Not Reserved	No	No	0	Detailed Clinical Notes , Echo/Doppler Report	Bar-Code Of Implant/S , Detailed Discharge Summary , Detailed Procedure Notes , Post-Op 2-D Echo	No	No	Yes	No	No	7
3029	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	2832000099	Double Valve Procedure-Aortic Valve Repair / Aortic Valve Replacement / Mitral Valve Repair / Mitral Valve Replacement / Tricuspid Valve Repair / Tricuspid Valve Replacement	142000	142000	134900	120700	Surgical	Not Reserved	No	No	0	2-D Echo , Detailed Clinical Notes , Doppler Reports Showing Two Cardiac Valves Diseased	Bar-Code Of Valves/Rings Used , Detailed Discharge Summary , Detailed Operative Notes	No	No	Yes	No	No	10

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
3030	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	28320000100	Triple valve procedure on Aortic / Mitral / Tricuspid valves-Aortic Valve Repair/ Aortic Valve Replacement / Mitral Valve Repair / Mitral Valve Replacement / Tricuspid Valve Repair / Tricuspid Valve Replacement	170000	170000	161500	144500	Surgical	Not Reserved	No	No	0	2-D Echo , Detailed Clinical Notes , Doppler Reports Showing Three Cardiac Valves Diseased	Bar-Code Of Valves/Rings Used , Detailed Discharge Summary , Detailed Operative Notes	No	No	Yes	No	No	12
3031	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	28320000101	Aortic Root Replacement Surgery-Bental Procedure	150000	150000	142500	127500	Surgical	Not Reserved	No	No	0	2-D Echo , Angio/Ct-Angio/Mri Reports , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Operative Notes	No	No	Yes	No	No	12
3032	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	28320000102	Aortic Root Replacement Surgery-Aortic Dissection	150000	150000	142500	127500	Surgical	Not Reserved	No	No	0	2-D Echo , Angio/Ct-Angio/Mri Reports , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Operative Notes	No	No	Yes	No	No	12
3033	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	28320000103	Aortic Root Replacement Surgery-Aortic Aneurysm	150000	150000	142500	127500	Surgical	Not Reserved	No	No	0	2-D Echo , Angio/Ct-Angio/Mri Reports , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Operative Notes	No	No	Yes	No	No	12
3034	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	28320000104	Aortic Root Replacement Surgery-Valve sparing root replacement	150000	150000	142500	127500	Surgical	Not Reserved	No	No	0	2-D Echo , Angio/Ct-Angio/Mri Reports , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Operative Notes	No	No	Yes	No	No	12
3035	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	28320000105	Aortic Root Replacement Surgery-AVR + Root enlargement	150000	150000	142500	127500	Surgical	Not Reserved	No	No	0	2-D Echo , Angio/Ct-Angio/Mri Reports , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Operative Notes	No	No	Yes	No	No	12

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
3036	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	28320000106	Aortic Aneurysm Repair using Cardiopulmonary bypass (CPB) / Left Heart Bypass-Aortic Aneurysm Repair using Cardiopulmonary bypass (CPB)	150000	150000	142500	127500	Surgical	Not Reserved	No	No	0	Detailed Clinical Notes , Echo/Angio/Ct-Angio/Mri Reports	Detailed Discharge Summary , Detailed Procedure Notes	No	No	Yes	No	No	10
3037	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	28320000107	Aortic Aneurysm Repair using Cardiopulmonary bypass (CPB) / Left Heart Bypass-Aortic Aneurysm Repair using Left Heart Bypass	150000	150000	142500	127500	Surgical	Not Reserved	No	No	0	Detailed Clinical Notes , Echo/Angio/Ct-Angio/Mri Reports	Detailed Discharge Summary , Detailed Procedure Notes	No	No	Yes	No	No	10
3038	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	28320000108	Aortic Aneurysm Repair without using Cardiopulmonary bypass (CPB) / Left Heart Bypass-Aortic Aneurysm Repair without using Cardiopulmonary bypass (CPB)	95500	95500	90725	81175	Surgical	Not Reserved	No	No	0	Angio/Ct-Angio/Mri Reports , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure Notes	No	No	Yes	No	No	10
3039	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	28320000109	Aortic Aneurysm Repair without using Cardiopulmonary bypass (CPB) / Left Heart Bypass-Aortic Aneurysm Repair without using Left Heart Bypass	95500	95500	90725	81175	Surgical	Not Reserved	No	No	0	Angio/Ct-Angio/Mri Reports , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure Notes	No	No	Yes	No	No	10
3040	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	28320000110	Peripheral Arterial Surgeries-Femoro - Femoral Bypass	50000	50000	47500	42500	Surgical	Not Reserved	No	No	0	Angiogram/Ct-Angiogram/Mri Reports , Detailed Clinical Notes	Bar-Code Of Graft Used , Detailed Discharge Summary , Detailed Operative Notes	No	No	Yes	No	No	7
3041	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	28320000111	Peripheral Arterial Surgeries-Carotid - endarterectomy	50000	50000	47500	42500	Surgical	Not Reserved	No	No	0	Angiogram/Ct-Angiogram/Mri Reports , Detailed Clinical Notes	Bar-Code Of Graft Used , Detailed Discharge Summary , Detailed Operative Notes	No	No	Yes	No	No	7

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
3042	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	28320000112	Peripheral Arterial Surgeries-Carotid Body Tumor Excision	50000	50000	47500	42500	Surgical	Not Reserved	Yes	No	0	Angiogram/Ct-Angiogram/Mri Reports , Detailed Clinical Notes	Bar-Code Of Graft Used , Detailed Discharge Summary , Detailed Operative Notes	No	No	Yes	No	No	7
3043	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	28320000113	Peripheral Arterial Surgeries-Thoracic Outlet syndrome Repair	50000	50000	47500	42500	Surgical	Not Reserved	No	No	0	Angiogram/Ct-Angiogram/Mri Reports , Detailed Clinical Notes	Bar-Code Of Graft Used , Detailed Discharge Summary , Detailed Operative Notes	No	No	Yes	No	No	7
3044	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	28320000114	Peripheral Arterial Surgeries-Carotid aneurysm repair	50000	50000	47500	42500	Surgical	Not Reserved	Yes	No	0	Angiogram/Ct-Angiogram/Mri Reports , Detailed Clinical Notes	Bar-Code Of Graft Used , Detailed Discharge Summary , Detailed Operative Notes	No	No	Yes	No	No	7
3045	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	28320000115	Peripheral Arterial Surgeries-Subclavian aneurysm repair	50000	50000	47500	42500	Surgical	Not Reserved	No	No	0	Angiogram/Ct-Angiogram/Mri Reports , Detailed Clinical Notes	Bar-Code Of Graft Used , Detailed Discharge Summary , Detailed Operative Notes	No	No	Yes	No	No	7
3046	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	28320000116	Peripheral Arterial Surgeries-Axillary aneurysm repair	50000	50000	47500	42500	Surgical	Not Reserved	No	No	0	Angiogram/Ct-Angiogram/Mri Reports , Detailed Clinical Notes	Bar-Code Of Graft Used , Detailed Discharge Summary , Detailed Operative Notes	No	No	Yes	No	No	7
3047	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	28320000117	Peripheral Arterial Surgeries-Brachial aneurysm repair	50000	50000	47500	42500	Surgical	Not Reserved	No	No	0	Angiogram/Ct-Angiogram/Mri Reports , Detailed Clinical Notes	Bar-Code Of Graft Used , Detailed Discharge Summary , Detailed Operative Notes	No	No	Yes	No	No	7

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
3048	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	28320000118	Peripheral Arterial Surgeries-Femoral aneurysm repair	50000	50000	47500	42500	Surgical	Not Reserved	No	No	0	Angiogram/Ct-Angiogram/Mri Reports , Detailed Clinical Notes	Bar-Code Of Graft Used , Detailed Discharge Summary , Detailed Operative Notes	No	No	Yes	No	No	7
3049	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	28320000119	Peripheral Arterial Surgeries-Popliteal aneurysm repair	50000	50000	47500	42500	Surgical	Not Reserved	No	No	0	Angiogram/Ct-Angiogram/Mri Reports , Detailed Clinical Notes	Bar-Code Of Graft Used , Detailed Discharge Summary , Detailed Operative Notes	No	No	Yes	No	No	7
3050	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	28320000120	Peripheral Arterial Surgeries-Femoral - popliteal Bypass	50000	50000	47500	42500	Surgical	Not Reserved	No	No	0	Angiogram/Ct-Angiogram/Mri Reports , Detailed Clinical Notes	Bar-Code Of Graft Used , Detailed Discharge Summary , Detailed Operative Notes	No	No	Yes	No	No	7
3051	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	28320000121	Peripheral Arterial Surgeries-Carotid - carotid Bypass	50000	50000	47500	42500	Surgical	Not Reserved	No	No	0	Angiogram/Ct-Angiogram/Mri Reports , Detailed Clinical Notes	Bar-Code Of Graft Used , Detailed Discharge Summary , Detailed Operative Notes	No	No	Yes	No	No	7
3052	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	28320000122	Peripheral Arterial Surgeries-Carotido - subclavian bypass	50000	50000	47500	42500	Surgical	Not Reserved	No	No	0	Angiogram/Ct-Angiogram/Mri Reports , Detailed Clinical Notes	Bar-Code Of Graft Used , Detailed Discharge Summary , Detailed Operative Notes	No	No	Yes	No	No	7
3053	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	28320000123	Peripheral Arterial Surgeries-Carotido - axillary bypass	50000	50000	47500	42500	Surgical	Not Reserved	No	No	0	Angiogram/Ct-Angiogram/Mri Reports , Detailed Clinical Notes	Bar-Code Of Graft Used , Detailed Discharge Summary , Detailed Operative Notes	No	No	Yes	No	No	7

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
3054	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	28320000124	Peripheral Arterial Surgeries-Axillo-femoral bypass - U/L	50000	50000	47500	42500	Surgical	Not Reserved	No	No	0	Angiogram/Ct-Angiogram/Mri Reports , Detailed Clinical Notes	Bar-Code Of Graft Used , Detailed Discharge Summary , Detailed Operative Notes	No	No	Yes	No	No	7
3055	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	28320000125	Peripheral Arterial Surgeries-Axillo-femoral bypass - B/L	50000	50000	47500	42500	Surgical	Not Reserved	No	No	0	Angiogram/Ct-Angiogram/Mri Reports , Detailed Clinical Notes	Bar-Code Of Graft Used , Detailed Discharge Summary , Detailed Operative Notes	No	No	Yes	No	No	7
3056	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	28320000126	Peripheral Arterial Surgeries-Aorto-carotid bypass	50000	50000	47500	42500	Surgical	Not Reserved	No	No	0	Angiogram/Ct-Angiogram/Mri Reports , Detailed Clinical Notes	Bar-Code Of Graft Used , Detailed Discharge Summary , Detailed Operative Notes	No	No	Yes	No	No	7
3057	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	28320000127	Peripheral Arterial Surgeries-Aorto-subclavian bypass	50000	50000	47500	42500	Surgical	Not Reserved	No	No	0	Angiogram/Ct-Angiogram/Mri Reports , Detailed Clinical Notes	Bar-Code Of Graft Used , Detailed Discharge Summary , Detailed Operative Notes	No	No	Yes	No	No	7
3058	Tertiary	Cardiology - Phase 3	28310000027	Balloon Dilatation-Coarctation of Aorta	38600	38600	36670	32810	Medical	Not Reserved	No	No	0	2-D Echo , Ct-Angiogram Report & Stills	Bar-Code Of Balloon Used , Detailed Discharge Summary , Post Procedure Images/Angiogram , Procedure/Operative Notes With Images	No	No	Yes	No	No	2
3059	Tertiary	Cardiology - Phase 3	28310000028	Balloon Dilatation-Pulmonary Artery Stenosis	38600	38600	36670	32810	Medical	Not Reserved	No	No	0	2-D Echo , Ct-Angiogram Report & Stills	Bar-Code Of Balloon Used , Detailed Discharge Summary , Post Procedure Images/Angiogram , Procedure/Operative Notes With Images	No	No	Yes	No	No	2

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
3060	Tertiary	Cardiology - Phase 3	28310000029	Balloon Pulmonary / Aortic Valvotomy- Balloon Pulmonary Valvotomy	23400	23400	22230	19890	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Echo Reports & Stills	Detailed Discharge Summary , Invoice Of Blade/Balloon Used , Post Procedure 2-D Echo With Report , Procedure/Operative Notes With Images	No	No	Yes	No	No	2
3061	Tertiary	Cardiology - Phase 3	28310000030	Balloon Pulmonary / Aortic Valvotomy- Balloon Aortic Valvotomy	23400	23400	22230	19890	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Echo Reports & Stills	Detailed Discharge Summary , Invoice Of Blade/Balloon Used , Post Procedure 2-D Echo With Report , Procedure/Operative Notes With Images	No	No	Yes	No	No	2
3062	Tertiary	Cardiology - Phase 3	28310000031	PDA stenting	40260	40260	38247	34221	Medical	Not Reserved	No	No	0	Detailed Clinical Notes , Echo Report/Angio Showing Pda	Detailed Discharge Summary , Invoice Of Blade/Bar-Code Of Stent Used , Post Procedure 2-D Echo With Report , Procedure/Operative Notes With Images	No	No	Yes	No	No	2
3063	Tertiary	Cardiology - Phase 3	28310000032	PTCA, inclusive of diagnostic angiogram	40600	40600	38570	34510	Medical	Not Reserved	No	No	0	2-D Echo , Coronary Angiography (Cag) , Ecg	Angiogram Report , Bar Code Of Stent , Detailed Discharge Summary , Procedure/Operative Notes With Images	No	No	Yes	No	No	2
3064	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	28320000055	Surgical Correction of Category - I Congenital Heart Disease -Pulmonary Artery Banding	100000	100000	95000	85000	Surgical	Not Reserved	No	No	0	Detailed Clinical Notes , Echo/Doppler Report	Bar-Code Of Implant/S , Detailed Discharge Summary , Detailed Operative Notes	No	No	Yes	No	No	10
3065	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	28320000056	Surgical Correction of Category - II Congenital Heart Disease-ASD closure + Partial Anomalous Venous Drainage Repair	120000	120000	114000	102000	Surgical	Not Reserved	No	No	0	2-D Echo , Detailed Clinical Notes	Bar-Code Of Implant/S , Detailed Discharge Summary , Detailed Operative Notes	No	No	Yes	No	No	10

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
3066	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	28320000057	Surgical Correction of Category - II Congenital Heart Disease-ASD Closure + Mitral procedure	120000	120000	114000	102000	Surgical	Not Reserved	No	No	0	2-D Echo , Detailed Clinical Notes	Bar-Code Of Implant/S , Detailed Discharge Summary , Detailed Operative Notes	No	No	Yes	No	No	10
3067	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	28320000058	Surgical Correction of Category - II Congenital Heart Disease-ASD Closure + Tricuspid procedure	120000	120000	114000	102000	Surgical	Not Reserved	No	No	0	2-D Echo , Detailed Clinical Notes	Bar-Code Of Implant/S , Detailed Discharge Summary , Detailed Operative Notes	No	No	Yes	No	No	10
3068	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	28320000059	Surgical Correction of Category - II Congenital Heart Disease-ASD Closure + Pulmonary procedure	120000	120000	114000	102000	Surgical	Not Reserved	No	No	0	2-D Echo , Detailed Clinical Notes	Bar-Code Of Implant/S , Detailed Discharge Summary , Detailed Operative Notes	No	No	Yes	No	No	10
3069	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	28320000060	Surgical Correction of Category - II Congenital Heart Disease-ASD Closure + Infundibular procedure	120000	120000	114000	102000	Surgical	Not Reserved	No	No	0	2-D Echo , Detailed Clinical Notes	Bar-Code Of Implant/S , Detailed Discharge Summary , Detailed Operative Notes	No	No	Yes	No	No	10
3070	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	28320000061	Surgical Correction of Category - II Congenital Heart Disease-VSD closure	120000	120000	114000	102000	Surgical	Not Reserved	No	No	0	2-D Echo , Detailed Clinical Notes	Bar-Code Of Implant/S , Detailed Discharge Summary , Detailed Operative Notes	No	No	Yes	No	No	10
3071	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	28320000062	Surgical Correction of Category - II Congenital Heart Disease-Infundibular PS repair	120000	120000	114000	102000	Surgical	Not Reserved	No	No	0	2-D Echo , Detailed Clinical Notes	Bar-Code Of Implant/S , Detailed Discharge Summary , Detailed Operative Notes	No	No	Yes	No	No	10

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
3072	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	2832000063	Surgical Correction of Category - II Congenital Heart Disease-Valvular PS repair	120000	120000	114000	102000	Surgical	Not Reserved	No	No	0	2-D Echo , Detailed Clinical Notes	Bar-Code Of Implant/S , Detailed Discharge Summary , Detailed Operative Notes	No	No	Yes	No	No	10
3073	Tertiary	General Surgery - Phase 3	28350000128	Aortic Aneurysm Repair using Cardiopulmonary bypass (CPB) / Left Heart Bypass-Aortic Aneurysm Repair using Cardiopulmonary bypass (CPB)	150000	150000	142500	127500	Surgical	Not Reserved	No	No	0	Detailed Clinical Notes , Echo/Angio/Ct-Angio/Mri Reports	Detailed Discharge Summary , Detailed Procedure Notes	No	No	Yes	No	No	10
3074	Tertiary	General Surgery - Phase 3	28350000129	Aortic Aneurysm Repair using Cardiopulmonary bypass (CPB) / Left Heart Bypass-Aortic Aneurysm Repair using Left Heart Bypass	150000	150000	142500	127500	Surgical	Not Reserved	No	No	0	Detailed Clinical Notes , Echo/Angio/Ct-Angio/Mri Reports	Detailed Discharge Summary , Detailed Procedure Notes	No	No	Yes	No	No	10
3075	Tertiary	General Surgery - Phase 3	28350000130	Aortic Aneurysm Repair without using Cardiopulmonary bypass (CPB) / Left Heart Bypass-Aortic Aneurysm Repair without using Cardiopulmonary bypass (CPB)	95500	95500	90725	81175	Surgical	Not Reserved	No	No	0	Angio/Ct-Angio/Mri Reports , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure Notes	No	No	Yes	No	No	10
3076	Tertiary	General Surgery - Phase 3	28350000131	Aortic Aneurysm Repair without using Cardiopulmonary bypass (CPB) / Left Heart Bypass-Aortic Aneurysm Repair without using Left Heart Bypass	95500	95500	90725	81175	Surgical	Not Reserved	No	No	0	Angio/Ct-Angio/Mri Reports , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure Notes	No	No	Yes	No	No	10
3077	Tertiary	General Surgery - Phase 3	28350000132	Groin Hernia Repair-Obturator - Lap.	20000	20000	19000	17000	Surgical	Not Reserved	No	No	0	Clinical Photograph , Detailed Clinical Notes , Usg	Detailed Discharge Summary , Detailed Operative Notes , Invoice Of Mesh , Post Procedure Clinical Photograph	No	No	Yes	No	No	2

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College& Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
3078	Tertiary	General Surgery - Phase 3	28350000133	Hernia - Ventral-Epigastric	22400	22400	21280	19040	Surgical	Not Reserved	Yes	No	0	Clinical Photograph , Detailed Clinical Notes , Usg	Detailed Discharge Summary , Detailed Operative Notes , Invoice Of Mesh , Post Procedure Clinical Photograph	No	No	Yes	No	No	4
3079	Tertiary	General Surgery - Phase 3	28350000134	Hernia - Ventral-Umbilical	22400	22400	21280	19040	Surgical	Not Reserved	Yes	No	0	Clinical Photograph , Detailed Clinical Notes , Usg	Detailed Discharge Summary , Detailed Operative Notes , Invoice Of Mesh , Post Procedure Clinical Photograph	No	No	Yes	No	No	4
3080	Tertiary	General Surgery - Phase 3	28350000135	Hernia - Ventral-Parumbilical	22400	22400	21280	19040	Surgical	Not Reserved	No	No	0	Clinical Photograph , Detailed Clinical Notes , Usg	Detailed Discharge Summary , Detailed Operative Notes , Invoice Of Mesh , Post Procedure Clinical Photograph	No	No	Yes	No	No	4
3081	Tertiary	General Surgery - Phase 3	28350000136	Hernia - Ventral-Spigellan	22400	22400	21280	19040	Surgical	Not Reserved	Yes	No	0	Clinical Photograph , Detailed Clinical Notes , Usg	Detailed Discharge Summary , Detailed Operative Notes , Invoice Of Mesh , Post Procedure Clinical Photograph	No	No	Yes	No	No	4
3082	Tertiary	General Surgery - Phase 3	28350000137	Repair of Incisional Hernia	20000	20000	19000	17000	Surgical	Not Reserved	Yes	No	0	Clinical Notes Of Earlier Surgery , Clinical Photograph , Usg	Detailed Discharge Summary , Detailed Operative Notes , Invoice Of Mesh , Post Procedure Clinical Photograph	No	No	Yes	No	No	3
3083	Tertiary	Neurosurgery - Phase 3	28370000087	CranioPlasty-CranioPlasty with Exogenous graft	20000	20000	19000	17000	Surgical	Not Reserved	No	No	0	Ct/Mri	Detailed Procedure/Operative Notes , Post Procedure (Ct/X-Ray) , Post Procedure Clinical Photograph	No	No	Yes	No	No	7

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
3084	Tertiary	Neurosurgery - Phase 3	28370000088	Duroplasty-Duroplasty with Exogenous graft	12500	12500	11875	10625	Surgical	Not Reserved	Yes	No	0	Ct/Mri , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure (Ct) , Post Procedure Scar Photo	No	No	Yes	No	No	5
3085	Tertiary	Neurosurgery - Phase 3	28370000089	Transoral surgery (Anterior) and CV Junction (Posterior Sterilisation)	55000	55000	52250	46750	Surgical	Not Reserved	No	No	0	Mri-Spine , X-Ray	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe) , Post Procedure (X-Ray)	No	No	Yes	No	No	12
3086	Tertiary	Neurosurgery - Phase 3	28370000090	Aneurysm Clipping including angiogram	50000	50000	47500	42500	Surgical	Not Reserved	No	No	0	Ct-Angio/Mra/Dsa , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Invoice Of All Clip(S) Used , Post Procedure (Ct) Showing Clips , Post Procedure Scar Photo	No	No	Yes	No	No	12
3087	Tertiary	Obstetrics & Gynaecology - Phase 3	28380000037	Sacrocolpopexy (Abdominal)-Open	28900	28900	27455	24565	Surgical	Not Reserved	Yes	No	0	Admission Notes Comprising Of History And Examination With Indications For The Procedure , Patient Consent Form , Relevant Investigations (Establishing Diagnosis)	Bar-Code Of Mesh , Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra-Operative Photograph With Date & Patient Id , Progress Notes	No	No	Yes	No	No	7
3088	Tertiary	Obstetrics & Gynaecology - Phase 3	28380000038	Sacrocolpopexy (Abdominal)-Lap.	28900	28900	27455	24565	Surgical	Not Reserved	Yes	No	0	Admission Notes Comprising Of History And Examination With Indications For The Procedure , Patient Consent Form , Relevant Investigations (Establishing Diagnosis)	Bar-Code Of Mesh , Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra-Operative Photograph With Date & Patient Id , Progress Notes	No	No	Yes	No	No	7
3089	Tertiary	Ophthalmology - Phase 3	28390000003	SFIOL (inclusive of Vitrectomy)	15000	15000	14250	12750	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , Pre-Op Clinical Photograph	Bar-Code Of Sfiol , Detailed Discharge Summary , Detailed Operative Notes , Still Image Of The Patient Undergoing The Procedure With Date Stamp	No	No	Yes	No	Yes	1

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
3090	Tertiary	Medical Oncology - Phase 3	28360000240	CT for Ewing Sarcoma-EFT 2001	9700	9700	9215	8245	Medical	Not Reserved	No	No	0	2-D Echo , Biochemistry , Biopsy , Bone Marrow Studies , Cbc , Ecg , Pet-Ct Or Ct-Chest/Bone Scan	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	Not Applicable(NA)
3091	Tertiary	Medical Oncology - Phase 3	28360000241	CT for Osteogenic Sarcoma-Methotrexate + Doxorubicin + Cisplatin	21800	21800	20710	18530	Medical	Not Reserved	No	No	0	2-D Echo , Audiometry , Biochemistry , Biopsy , Bone Scan , Cbc , Ct-Chest , Ecg , Gfr	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	Not Applicable(NA)
3092	Tertiary	Medical Oncology - Phase 3	28360000242	CT for B - Cell NHL - High Grade (Except Burkitt's & PCNSL)-R - CEOP	26200	26200	24890	22270	Medical	Not Reserved	No	No	0	2-D Echo , Biochemistry , Biopsy/Fluid Flow Cytometry , Bone Marrow Studies , Cbc , Ecg , Pet-Ct Or Cect-Chest Abdomen And Pelvis	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	Not Applicable(NA)
3093	Tertiary	Medical Oncology - Phase 3	28360000243	CT for B - Cell NHL - High Grade (Except Burkitt's & PCNSL)-R - CHOP	27000	27000	25650	22950	Medical	Not Reserved	No	No	0	2-D Echo , Biochemistry , Biopsy/Fluid Flow Cytometry , Bone Marrow Studies , Cbc , Ecg , Pet-Ct Or Cect-Chest Abdomen And Pelvis	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	Not Applicable(NA)
3094	Tertiary	Medical Oncology - Phase 3	28360000244	AML- CONSOLIDATION PER CYCLE X3- Consolidation	60000	60000	57000	51000	Medical	Not Reserved	No	No	0	Bone Marrow Aspiration , Cbc , Cytogenetics , Lft , Molecular , Peripheral Blood Flow Cytometry , Rbs , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	Not Applicable(NA)
3095	Tertiary	Medical Oncology - Phase 3	28360000245	AML- INDUCTION (3+7)-Induction	96000	96000	91200	81600	Medical	Not Reserved	No	No	0	Bone Marrow Aspiration , Cbc , Cytogenetics , Lft , Molecular , Peripheral Blood Flow Cytometry , Rbs , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
3096	Tertiary	Medical Oncology - Phase 3	2836000246	ALL - CONSOLIDATION (PHASE II, CNS THERAPY, REINDUCTION)-Consolidation (Phase II, CNS Therapy Reinduction)	160000	160000	152000	136000	Medical	Not Reserved	No	No	0	2-D Echo , Biopsy , Bone Marrow/ Peripheral Blood Flow Cytometry , Cbc , Cytogenetics , Hbsag , Hcv , Hiv , Mdc , Molecular , Ncct-Chest , Pet-Ct Or Cect-Chest Abdomen And Pelvis	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	Not Applicable(NA)
3097	Tertiary	Medical Oncology - Phase 3	2836000247	LBL- CONSOLIDATION (PHASE II, CNS THERAPY, REINDUCTION)-Consolidation (Phase II, CNS Therapy Reinduction)	160000	160000	152000	136000	Medical	Not Reserved	No	No	0	2-D Echo , Biopsy , Bone Marrow/ Peripheral Blood Flow Cytometry , Cbc , Cytogenetics , Hbsag , Hcv , Hiv , Mdc , Molecular , Ncct-Chest , Pet-Ct Or Cect-Chest Abdomen And Pelvis	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	Not Applicable(NA)
3098	Tertiary	Medical Oncology - Phase 3	2836000248	ALL- INDUCTION-Induction	80000	80000	76000	68000	Medical	Not Reserved	No	No	0	Biochemistry , Biopsy , Bone Marrow Flow Cytometry , Cbc , Csf Cytomorphology , Cytogenetics , Fluid Flow Cytometry , Hbsag , Hcv , Hiv , Mdc , Ngs	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	Not Applicable(NA)
3099	Tertiary	Medical Oncology - Phase 3	2836000249	LBL- INDUCTION-Induction	80000	80000	76000	68000	Medical	Not Reserved	No	No	0	Biochemistry , Biopsy , Bone Marrow Flow Cytometry , Cbc , Csf Cytomorphology , Cytogenetics , Fluid Flow Cytometry , Hbsag , Hcv , Hiv , Mdc , Ngs	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	Not Applicable(NA)
3100	Tertiary	Medical Oncology - Phase 3	2836000250	ALL- MAINTENANCE PER MONTH FOR 24 MONTHS-Maintenance	4000	4000	3800	3400	Medical	Not Reserved	No	No	0	Biochemistry , Cbc	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	Not Applicable(NA)
3101	Tertiary	Medical Oncology - Phase 3	2836000251	LBL- MAINTENANCE PER MONTH FOR 24 MONTHS-Maintenance	4000	4000	3800	3400	Medical	Not Reserved	No	No	0	Biochemistry , Cbc	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
3102	Tertiary	Medical Oncology - Phase 3	28360000252	APML- HIGH RISK -CONSOLIDATION X8 CYCLES-High Risk Consolidation	32000	32000	30400	27200	Medical	Not Reserved	No	No	0	Biochemistry , Bone Marrow Studies , Cbc , Ecg , Pmi-Rara , Rq Pcr	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	Not Applicable(NA)
3103	Tertiary	Medical Oncology - Phase 3	28360000253	APML- HIGH RISK INDUCTION 2 MONTHS-High Risk Induction	96000	96000	91200	81600	Medical	Not Reserved	No	No	0	2-D Echo , Aptt , Biochemistry , Biopsy , Bone Marrow Flow Cytometry , Cbc , Cytogenetics , Fibrinogen , Hbsag , Hcv , Hiv , Mdc , Ncct-Chest , Pmi-Rara , Pt , Rq Pcr	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	Not Applicable(NA)
3104	Tertiary	Medical Oncology - Phase 3	28360000254	APML- HIGH RISK- MAINTENANCE X6 CYCLES-High Risk Maintenance	8000	8000	7600	6800	Medical	Not Reserved	No	No	0	2-D Echo , Aptt , Biochemistry , Biopsy , Bone Marrow Flow Cytometry , Cbc , Cytogenetics , Fibrinogen , Hbsag , Hcv , Hiv , Mdc , Ncct-Chest , Pmi-Rara , Pt , Rq Pcr	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	Not Applicable(NA)
3105	Tertiary	Medical Oncology - Phase 3	28360000255	APML- LOW RISK- CONSOLIDATION PER CYCLE X8 CYCLES-Low Risk Consolidation	12000	12000	11400	10200	Medical	Not Reserved	No	No	0	Cbc , Lft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	Not Applicable(NA)
3106	Tertiary	Medical Oncology - Phase 3	28360000256	APML- LOW RISK- INDUCTION 2 MONTHS-Low Risk Induction	80000	80000	76000	68000	Medical	Not Reserved	No	No	0	Biochemistry , Cbc	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	Not Applicable(NA)
3107	Tertiary	Medical Oncology - Phase 3	28360000257	CT for Medulloblastoma / CNS PNET-CET	8300	8300	7885	7055	Medical	Not Reserved	No	No	0	Biochemistry , Biopsy , Cbc , Csf Cytology , Mri- Brain & Spine	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
3108	Tertiary	Medical Oncology - Phase 3	28360000258	PEDIATRIC ALL - CONSOLIDATION (PHASE II, CNS THERAPY, REINDUCTION) * COMPLETE TREATMENT COST/24 WEEKS-Consolidation (Phase II, CNS Therapy Reinduction)	208600	208600	198170	177310	Medical	Not Reserved	No	No	0	2-D Echo , Biopsy , Bone Marrow/ Peripheral Blood Flow Cytometry , Cbc , Cytogenetics , Hbsag , Hcv , Hiv , Mdc , Molecular , Ncct-Chest , Pet-Ct Or Cect-Chest Abdomen And Pelvis	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary , Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	Not Applicable(NA)
3109	Tertiary	Medical Oncology - Phase 3	28360000259	PEDIATRIC LBL- CONSOLIDATION (PHASE II, CNS THERAPY, REINDUCTION) * COMPLETE TREATMENT COST/24 WEEKS-Consolidation (Phase II, CNS Therapy Reinduction)	208600	208600	198170	177310	Medical	Not Reserved	No	No	0	2-D Echo , Biopsy , Bone Marrow/ Peripheral Blood Flow Cytometry , Cbc , Cytogenetics , Hbsag , Hcv , Hiv , Mdc , Molecular , Ncct-Chest , Pet-Ct Or Cect-Chest Abdomen And Pelvis	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary , Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	Not Applicable(NA)
3110	Tertiary	Medical Oncology - Phase 3	28360000260	PEDIATRIC ALL- INDUCTION-Induction	72000	72000	68400	61200	Medical	Not Reserved	No	No	0	2-D Echo , Biopsy , Bone Marrow/ Peripheral Blood Flow Cytometry , Cbc , Cytogenetics , Hbsag , Hcv , Hiv , Mdc , Molecular , Ncct-Chest , Pet-Ct Or Cect-Chest Abdomen And Pelvis	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary , Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	Not Applicable(NA)
3111	Tertiary	Medical Oncology - Phase 3	28360000261	PEDIATRIC LBL- INDUCTION-Induction	72000	72000	68400	61200	Medical	Not Reserved	No	No	0	Biochemistry , Biopsy , Bone Marrow Flow Cytometry , Cbc , Csf Cytomorphology , Cytogenetics , Fluid Flow Cytometry , Hbsag , Hcv , Hiv , Mdc , Ngs	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary , Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	Not Applicable(NA)
3112	Tertiary	Medical Oncology - Phase 3	28360000262	PEDIATRIC ALL- MAINTENANCE PER MONTH FOR 24 MONTHS-Maintenance	2500	2500	2375	2125	Medical	Not Reserved	No	No	0	Biochemistry , Cbc	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary , Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	Not Applicable(NA)
3113	Tertiary	Medical Oncology - Phase 3	28360000263	PEDIATRIC LBL- MAINTENANCE PER MONTH FOR 24 MONTHS-Maintenance	2500	2500	2375	2125	Medical	Not Reserved	No	No	0	Biochemistry , Cbc	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary , Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
3114	Tertiary	Medical Oncology - Phase 3	28360000264	PEDIATRIC AML INDUCTION (3+10+5, ADE)-Induction	94400	94400	89680	80240	Medical	Not Reserved	No	No	0	Bone Marrow Aspiration , Cbc , Cytogenetics , Lt , Molecular , Peripheral Blood Flow Cytometry , Rbs , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	Not Applicable(NA)
3115	Tertiary	Medical Oncology - Phase 3	28360000265	PEDIATRIC AML INDUCTION (3+7)-Induction	92800	92800	88160	78880	Medical	Not Reserved	No	No	0	Bone Marrow Aspiration , Cbc , Cytogenetics , Lt , Molecular , Peripheral Blood Flow Cytometry , Rbs , Rft	Bar Code Of Drugs , Charts Of Chemotherapy Regimen , Detailed Discharge Summary- Day Care Dept , Detailed Discharge Summary- Inpatient Dept , Reports Of The Tests (Pathology/Radiology/Microbiology/Hematology/Biochemistry/Etc) , Transfusion Slips	No	No	Yes	No	Yes	Not Applicable(NA)
3116	Tertiary	Paediatric surgery - Phase 3	28410000220	Groin Hernia Repair-Obturator - Lap.	20000	20000	19000	17000	Surgical	Not Reserved	No	No	0	Clinical Photograph , Detailed Clinical Notes , Usg	Detailed Discharge Summary , Detailed Operative Notes , Invoice Of Mesh , Post Procedure Clinical Photograph	No	No	Yes	No	No	2
3117	Tertiary	Paediatric surgery - Phase 3	28410000221	Hernia - Ventral-Epigastric	22400	22400	21280	19040	Surgical	Not Reserved	Yes	No	0	Clinical Photograph , Detailed Clinical Notes , Usg	Detailed Discharge Summary , Detailed Operative Notes , Invoice Of Mesh , Post Procedure Clinical Photograph	No	No	Yes	No	No	4
3118	Tertiary	Paediatric surgery - Phase 3	28410000222	Hernia - Ventral-Umbilical	22400	22400	21280	19040	Surgical	Not Reserved	Yes	No	0	Clinical Photograph , Detailed Clinical Notes , Usg	Detailed Discharge Summary , Detailed Operative Notes , Invoice Of Mesh , Post Procedure Clinical Photograph	No	No	Yes	No	No	4
3119	Tertiary	Paediatric surgery - Phase 3	28410000223	Hernia - Ventral-Paraumbilical	22400	22400	21280	19040	Surgical	Not Reserved	No	No	0	Clinical Photograph , Detailed Clinical Notes , Usg	Detailed Discharge Summary , Detailed Operative Notes , Invoice Of Mesh , Post Procedure Clinical Photograph	No	No	Yes	No	No	4

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
3120	Tertiary	Paediatric surgery - Phase 3	28410000224	Hernia - Ventral-Spigelian	22400	22400	21280	19040	Surgical	Not Reserved	Yes	No	0	Clinical Photograph , Detailed Clinical Notes , Usg	Detailed Discharge Summary , Detailed Operative Notes , Invoice Of Mesh , Post Procedure Clinical Photograph	No	No	Yes	No	No	4
3121	Tertiary	Paediatric surgery - Phase 3	28410000225	Repair of Incisional Hernia	20000	20000	19000	17000	Surgical	Not Reserved	Yes	No	0	Clinical Notes Of Earlier Surgery , Clinical Photograph , Usg	Detailed Discharge Summary , Detailed Operative Notes , Invoice Of Mesh , Post Procedure Clinical Photograph	No	No	Yes	No	No	3
3122	Tertiary	Orthopaedics - Phase 3	28400000042	Fracture - Long Bones - Metaphyseal - ORIF	12700	12700	12065	10795	Surgical	Not Reserved	Yes	No	0	Clinical Notes With Planned Line Of Treatment , X-Ray Film With Report	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure (X-Ray) With Reports , Stickers Of Implants Used	No	No	Yes	No	No	4
3123	Tertiary	Orthopaedics - Phase 3	28400000043	Cervical spine fixation including odontoid	20000	20000	19000	17000	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , X-Ray Film With Report	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Invoice/Bar-Code Of Implant , Post Procedure (X-Ray) With Reports	No	No	Yes	No	No	7
3124	Tertiary	Orthopaedics - Phase 3	28400000044	Dorsal and lumber spine fixation-Posterior	30000	30000	28500	25500	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , X-Ray Film With Report	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Invoice/Bar-Code Of Implant , Post Procedure (X-Ray) With Reports	No	No	Yes	No	No	7
3125	Tertiary	Orthopaedics - Phase 3	28400000045	Dorsal and lumber spine fixation-Anterior	40000	40000	38000	34000	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , X-Ray Film With Report	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Invoice/Bar-Code Of Implant , Post Procedure (X-Ray) With Reports	No	No	Yes	No	No	7

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
3126	Tertiary	Orthopaedics - Phase 3	2840000046	Spine deformity correction	30000	30000	28500	25500	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , X-Ray Film With Report	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Invoice/Bar-Code Of Implant , Post Procedure (X-Ray) With Reports	No	No	Yes	No	No	7
3127	Tertiary	Orthopaedics - Phase 3	2840000047	Growth Modulation and fixation	5000	5000	4750	4250	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment , X-Ray Film With Report	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Invoice/Bar-Code Of Implant , Post Procedure (X-Ray) With Reports	No	No	Yes	No	No	6
3128	Tertiary	Radiation Oncology - Phase 3	2844000002	2D External Beam Radiotherapy (6 Fractions) (Inclusive of Simulation & Planning Cost)-Radical	11000	11000	10450	9350	Medical	Not Reserved	No	No	0	Clinical Note With Details Of Rt Treatment Plan , Histopathology (Hpe)	Detailed Discharge Summary (With Rt Treatment And Doses Given)	No	No	Yes	No	Yes	1
3129	Tertiary	Radiation Oncology - Phase 3	2844000003	2D External Beam Radiotherapy (6 Fractions) (Inclusive of Simulation & Planning Cost)-Adjuvant	11000	11000	10450	9350	Medical	Not Reserved	No	No	0	Clinical Note With Details Of Rt Treatment Plan , Histopathology (Hpe)	Detailed Discharge Summary (With Rt Treatment And Doses Given)	No	No	Yes	No	Yes	1
3130	Tertiary	Radiation Oncology - Phase 3	2844000004	2D External Beam Radiotherapy (6 Fractions) (Inclusive of Simulation & Planning Cost)-Neoadjuvant	11000	11000	10450	9350	Medical	Not Reserved	No	No	0	Clinical Note With Details Of Rt Treatment Plan , Histopathology (Hpe)	Detailed Discharge Summary (With Rt Treatment And Doses Given)	No	No	Yes	No	Yes	1
3131	Tertiary	Radiation Oncology - Phase 3	2844000005	2D External Beam Radiotherapy (25 Fractions) (Inclusive of Simulation & Planning Cost)-Neoadjuvant	20000	20000	19000	17000	Medical	Not Reserved	No	No	0	Clinical Note With Details Of Rt Treatment Plan , Histopathology (Hpe)	Detailed Discharge Summary (With Rt Treatment And Doses Given)	No	No	Yes	No	Yes	1

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
3132	Tertiary	Radiation Oncology - Phase 3	2844000006	Linear Accelerator, External Beam Radiotherapy 3D CRT (6 Fractions) (Inclusive of Simulation & Planning Cost)-Radical	21000	21000	19950	17850	Medical	Not Reserved	No	No	0	Clinical Note With Details Of Rt Treatment Plan , Histopathology (Hpe)	Detailed Discharge Summary (With Rt Treatment And Doses Given)	No	No	Yes	No	Yes	1
3133	Tertiary	Radiation Oncology - Phase 3	2844000007	Linear Accelerator, External Beam Radiotherapy 3D CRT (6 Fractions) (Inclusive of Simulation & Planning Cost)-Adjuvant	21000	21000	19950	17850	Medical	Not Reserved	No	No	0	Clinical Note With Details Of Rt Treatment Plan , Histopathology (Hpe)	Detailed Discharge Summary (With Rt Treatment And Doses Given)	No	No	Yes	No	Yes	1
3134	Tertiary	Radiation Oncology - Phase 3	2844000008	Linear Accelerator, External Beam Radiotherapy 3D CRT (6 Fractions) (Inclusive of Simulation & Planning Cost)-Neoadjuvant	21000	21000	19950	17850	Medical	Not Reserved	No	No	0	Clinical Note With Details Of Rt Treatment Plan , Histopathology (Hpe)	Detailed Discharge Summary (With Rt Treatment And Doses Given)	No	No	Yes	No	Yes	1
3135	Tertiary	Radiation Oncology - Phase 3	2844000009	Linear Accelerator, External Beam Radiotherapy 3D CRT (25 Fractions) (Inclusive of Simulation & Planning Cost)-Radical	40000	40000	38000	34000	Medical	Not Reserved	No	No	0	Clinical Note With Details Of Rt Treatment Plan , Histopathology (Hpe)	Detailed Discharge Summary (With Rt Treatment And Doses Given)	No	No	Yes	No	Yes	1
3136	Tertiary	Radiation Oncology - Phase 3	2844000010	Linear Accelerator, External Beam Radiotherapy 3D CRT (25 Fractions) (Inclusive of Simulation & Planning Cost)-Adjuvant	40000	40000	38000	34000	Medical	Not Reserved	No	No	0	Clinical Note With Details Of Rt Treatment Plan , Histopathology (Hpe)	Detailed Discharge Summary (With Rt Treatment And Doses Given)	No	No	Yes	No	Yes	1
3137	Tertiary	Radiation Oncology - Phase 3	2844000011	Linear Accelerator, External Beam Radiotherapy 3D CRT (25 Fractions) (Inclusive of Simulation & Planning Cost)-Neoadjuvant	40000	40000	38000	34000	Medical	Not Reserved	No	No	0	Clinical Note With Details Of Rt Treatment Plan , Histopathology (Hpe)	Detailed Discharge Summary (With Rt Treatment And Doses Given)	No	No	Yes	No	Yes	1

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
3138	Tertiary	Radiation Oncology - Phase 3	2844000012	Linear Accelerator, External Beam Radiotherapy IMRT (Intensity Modulated Radiotherapy) (20 Fractions) (Inclusive of Simulation & Planning Cost)-Radical	70000	70000	66500	59500	Medical	Not Reserved	No	No	0	Clinical Note With Details Of Rt Treatment Plan , Histopathology (Hpe)	Detailed Discharge Summary (With Rt Treatment And Doses Given)	No	No	Yes	No	Yes	1
3139	Tertiary	Radiation Oncology - Phase 3	2844000013	Linear Accelerator, External Beam Radiotherapy IMRT (Intensity Modulated Radiotherapy) (20 Fractions) (Inclusive of Simulation & Planning Cost)-Adjuvant	70000	70000	66500	59500	Medical	Not Reserved	No	No	0	Clinical Note With Details Of Rt Treatment Plan , Histopathology (Hpe)	Detailed Discharge Summary (With Rt Treatment And Doses Given)	No	No	Yes	No	Yes	1
3140	Tertiary	Radiation Oncology - Phase 3	2844000014	Linear Accelerator, External Beam Radiotherapy IMRT (Intensity Modulated Radiotherapy) (20 Fractions) (Inclusive of Simulation & Planning Cost)-Neoadjuvant	70000	70000	66500	59500	Medical	Not Reserved	No	No	0	Clinical Note With Details Of Rt Treatment Plan , Histopathology (Hpe)	Detailed Discharge Summary (With Rt Treatment And Doses Given)	No	No	Yes	No	Yes	1
3141	Tertiary	Radiation Oncology - Phase 3	2844000015	Linear Accelerator, External Beam Radiotherapy IMRT (Intensity Modulated Radiotherapy) (6 Fractions) (Inclusive of Simulation & Planning Cost)-Radical	42000	42000	39900	35700	Medical	Not Reserved	No	No	0	Clinical Note With Details Of Rt Treatment Plan , Histopathology (Hpe)	Detailed Discharge Summary (With Rt Treatment And Doses Given)	No	No	Yes	No	Yes	1
3142	Tertiary	Radiation Oncology - Phase 3	2844000016	Linear Accelerator, External Beam Radiotherapy IMRT (Intensity Modulated Radiotherapy) (6 Fractions) (Inclusive of Simulation & Planning Cost)-Adjuvant	42000	42000	39900	35700	Medical	Not Reserved	No	No	0	Clinical Note With Details Of Rt Treatment Plan , Histopathology (Hpe)	Detailed Discharge Summary (With Rt Treatment And Doses Given)	No	No	Yes	No	Yes	1
3143	Tertiary	Radiation Oncology - Phase 3	2844000017	Linear Accelerator, External Beam Radiotherapy IMRT (Intensity Modulated Radiotherapy) (6 Fractions) (Inclusive of Simulation & Planning Cost)-Neoadjuvant	42000	42000	39900	35700	Medical	Not Reserved	No	No	0	Clinical Note With Details Of Rt Treatment Plan , Histopathology (Hpe)	Detailed Discharge Summary (With Rt Treatment And Doses Given)	No	No	Yes	No	Yes	1

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
3144	Tertiary	Radiation Oncology - Phase 3	2844000018	Linear Accelerator External Beam Radiotherapy IGRT (Image Guided radiotherapy) with 3D CRT or IMRT (20 Fractions) (Inclusive of Simulation & Planning Cost)-Radical	90000	90000	85500	76500	Medical	Not Reserved	No	No	0	Clinical Note With Details Of Rt Treatment Plan , Histopathology (Hpe)	Detailed Discharge Summary (With Rt Treatment And Doses Given)	No	No	Yes	No	Yes	1
3145	Tertiary	Radiation Oncology - Phase 3	2844000019	Linear Accelerator External Beam Radiotherapy IGRT (Image Guided radiotherapy) with 3D CRT or IMRT (20 Fractions) (Inclusive of Simulation & Planning Cost)-Adjuvant	90000	90000	85500	76500	Medical	Not Reserved	No	No	0	Clinical Note With Details Of Rt Treatment Plan , Histopathology (Hpe)	Detailed Discharge Summary (With Rt Treatment And Doses Given)	No	No	Yes	No	Yes	1
3146	Tertiary	Radiation Oncology - Phase 3	2844000020	Linear Accelerator External Beam Radiotherapy IGRT (Image Guided radiotherapy) with 3D CRT or IMRT (20 Fractions) (Inclusive of Simulation & Planning Cost)-Neoadjuvant	90000	90000	85500	76500	Medical	Not Reserved	No	No	0	Clinical Note With Details Of Rt Treatment Plan , Histopathology (Hpe)	Detailed Discharge Summary (With Rt Treatment And Doses Given)	No	No	Yes	No	Yes	1
3147	Tertiary	Radiation Oncology - Phase 3	2844000021	Linear Accelerator External Beam Radiotherapy IGRT (Image Guided radiotherapy) with 3D CRT or IMRT (6 Fractions) (Inclusive of Simulation & Planning Cost)-Radical	55000	55000	52250	46750	Medical	Not Reserved	No	No	0	Clinical Note With Details Of Rt Treatment Plan , Histopathology (Hpe)	Detailed Discharge Summary (With Rt Treatment And Doses Given)	No	No	Yes	No	Yes	1
3148	Tertiary	Radiation Oncology - Phase 3	2844000022	Linear Accelerator External Beam Radiotherapy IGRT (Image Guided radiotherapy) with 3D CRT or IMRT (6 Fractions) (Inclusive of Simulation & Planning Cost)-Adjuvant	55000	55000	52250	46750	Medical	Not Reserved	No	No	0	Clinical Note With Details Of Rt Treatment Plan , Histopathology (Hpe)	Detailed Discharge Summary (With Rt Treatment And Doses Given)	No	No	Yes	No	Yes	1
3149	Tertiary	Radiation Oncology - Phase 3	2844000023	Linear Accelerator External Beam Radiotherapy IGRT (Image Guided radiotherapy) with 3D CRT or IMRT (6 Fractions) (Inclusive of Simulation & Planning Cost)-Neoadjuvant	55000	55000	52250	46750	Medical	Not Reserved	No	No	0	Clinical Note With Details Of Rt Treatment Plan , Histopathology (Hpe)	Detailed Discharge Summary (With Rt Treatment And Doses Given)	No	No	Yes	No	Yes	1

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
3150	Tertiary	Radiation Oncology - Phase 3	2844000024	SRT / SBRT with IGRT (Stereotactic radiotherapy) (4 Fractions) (Inclusive of Simulation & Planning Cost)- SRT / SBRT with IGRT (Stereotactic radiotherapy)	82000	82000	77900	69700	Medical	Not Reserved	No	No	0	Clinical Note With Details Of Rt Treatment Plan , Histopathology (Hpe)	Detailed Discharge Summary (With Rt Treatment And Doses Given)	No	No	Yes	No	Yes	1
3151	Tertiary	Radiation Oncology - Phase 3	2844000025	Respiratory Gating along with Linear Accelerator planning (5 Fractions) (Inclusive of Simulation & Planning Cost)- Respiratory Gating along with Linear Accelerator planning	65000	65000	61750	55250	Medical	Not Reserved	No	No	0	Detailed Clinical Notes , Documentary Evidence Of Respiratory-Gated Radiotherapy	Detailed Discharge Summary (With Rt Treatment And Doses Given)	No	No	Yes	No	Yes	1
3152	Tertiary	Radiation Oncology - Phase 3	2844000026	Brachytherapy High Dose Radiation (5 doses) (Inclusive of Simulation, Planning Cost, OT & other charges)-Interstitial	42000	42000	39900	35700	Medical	Not Reserved	No	No	0	Clinical Note With Details Of Rt Treatment Plan , Histopathology (Hpe)	Detailed Discharge Summary (With Rt Treatment And Doses Given)	No	No	Yes	No	Yes	1
3153	Tertiary	Radiation Oncology - Phase 3	2844000027	Brachytherapy High Dose Radiation (5 doses) (Inclusive of Simulation, Planning Cost, OT & other charges)-Surface Mould	42000	42000	39900	35700	Medical	Not Reserved	No	No	0	Clinical Note With Details Of Rt Treatment Plan , Histopathology (Hpe)	Detailed Discharge Summary (With Rt Treatment And Doses Given)	No	No	Yes	No	Yes	1
3154	Tertiary	Radiation Oncology - Phase 3	2844000028	2D External Beam Radiotherapy (25 Fractions) (Inclusive of Simulation & Planning Cost)-Radical	20000	20000	19000	17000	Medical	Not Reserved	No	No	0	Clinical Note With Details Of Rt Treatment Plan , Histopathology (Hpe)	Detailed Discharge Summary (With Rt Treatment And Doses Given)	No	No	Yes	No	Yes	1
3155	Tertiary	Radiation Oncology - Phase 3	2844000029	2D External Beam Radiotherapy (25 Fractions) (Inclusive of Simulation & Planning Cost)-Adjuvant	20000	20000	19000	17000	Medical	Not Reserved	No	No	0	Clinical Note With Details Of Rt Treatment Plan , Histopathology (Hpe)	Detailed Discharge Summary (With Rt Treatment And Doses Given)	No	No	Yes	No	Yes	1

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
3156	Tertiary	Surgical Oncology - Phase 3	28450000235	Chemo Port Insertion	18000	18000	17100	15300	Surgical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Invoice Of Chemo Port Used	No	No	Yes	No	No	2
3157	Tertiary	Surgical Oncology - Phase 3	28450000236	Stress incontinence surgery-Stress incontinence surgery - Open	23000	23000	21850	19550	Surgical	Not Reserved	Yes	No	0	Cystoscopy/Usq/Urodynamic Studies , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes	No	No	Yes	No	No	3
3158	Tertiary	Urology - Phase 3	28460000001	Stress incontinence surgery-Stress incontinence surgery - Open	23000	23000	21850	19550	Surgical	Not Reserved	Yes	No	0	Cystoscopy/Usq/Urodynamic Studies , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes	No	No	Yes	No	No	3
3159	Tertiary	Urology - Phase 3	28460000002	Sacrocolpopexy (Abdominal)-Open	28900	28900	27455	24565	Surgical	Not Reserved	Yes	No	0	Admission Notes Comprising Of History And Examination With Indications For The Procedure , Patient Consent Form , Relevant Investigations (Establishing Diagnosis)	Bar-Code Of Mesh , Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra-Operative Photograph With Date & Patient Id , Progress Notes	No	No	Yes	No	No	7
3160	Tertiary	Urology - Phase 3	28460000003	Sacrocolpopexy (Abdominal)-Lap.	28900	28900	27455	24565	Surgical	Not Reserved	Yes	No	0	Admission Notes Comprising Of History And Examination With Indications For The Procedure , Patient Consent Form , Relevant Investigations (Establishing Diagnosis)	Bar-Code Of Mesh , Detailed Discharge Summary , Detailed Procedure/Operative Notes , Intra-Operative Photograph With Date & Patient Id , Progress Notes	No	No	Yes	No	No	7
3161	Tertiary	Interventional Neuroradiology - Phase 3	28490000018	Coil embolization for aneurysms (includes cost of first 3 coils + balloon and / or stent if used)	100000	100000	95000	85000	Medical	Not Reserved	No	No	0	Ct-Angio/Mra/Dsa , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Invoice/Bar-Code Of Used Coil/Balloon/Stent , Post Procedure X-Ray Showing Coils	No	No	Yes	No	No	7

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
3162	Tertiary	Interventional Neuroradiology - Phase 3	2849000019	Carotico-cavernous Fistula (CCF) embolization-Carotico-cavernous Fistula (CCF) embolization with coils. [includes 5 coils, guide catheter, micro-catheter, micro-guidewire, general items]	150000	150000	142500	127500	Medical	Not Reserved	No	No	0	Ct/Mri/Dsa , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Invoice/Bar-Code Of Used Coil/Catheter And Other Accessories , Post Procedure X-Ray Showing Coils	No	No	Yes	No	No	7
3163	Tertiary	Interventional Neuroradiology - Phase 3	2849000020	Carotico-cavernous Fistula (CCF) embolization-Carotid-cavernous Fistula (CCF) embolization with balloon (includes one balloon, guide catheter, micro-catheter, micro-guidewire, general items)	75000	75000	71250	63750	Medical	Not Reserved	No	No	0	Ct/Mri/Dsa , Detailed Clinical Notes	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Invoice/Bar-Code Of Used Coil/Catheter And Other Accessories , Post Procedure X-Ray Showing Balloon	No	No	Yes	No	No	7
3164	Tertiary	Urology - Phase 3	28460000171	Retrograde Intra Renal Surgery (RIRS)	12000	12000	11400	10200	Surgical	Not Reserved	No	No	0	Ct-Ivp , Detailed Clinical Notes , Ivp/Usg/Ncct	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure (X-Ray/Usg)	No	No	Yes	No	No	Not Applicable(NA)
3165	Tertiary	Orthopaedics - Phase 3	28400000022	Implant for Growth Modulation & Fixation (Plate)	5000	5000	4750	4250	Surgical	Not Reserved	No	Yes	6	Implant/High End consumables Packages	Implant/High End consumables Packages	No	No	Yes	No	No	Not Applicable(NA)
3166	Tertiary	General Surgery - Phase 3	28350000076	Mesh - 15 X 15	5000	5000	4750	4250	Surgical	Not Reserved	No	Yes	1	Implant/High End consumables Packages	Implant/High End consumables Packages	No	No	Yes	No	No	Not Applicable(NA)
3167	Tertiary	Neurosurgery - Phase 3	28370000035	Implant for "Transoral surgery (Anterior) and CV Junction (Posterior Sterilization)"	To be decided by SHA	To be decided by SHA	To be decided by SHA	To be decided by SHA	Surgical	Not Reserved	No	Yes	1	Implant/High End consumables Packages	Implant/High End consumables Packages	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
3168	Tertiary	Interventional Neuroradiology - Phase 3	2849000007	Coil for embolization of aneurysms	24000	24000	22800	20400	Medical	Not Reserved	No	Yes	17	Implant/High End consumables Packages	Implant/High End consumables Packages	No	No	Yes	No	No	Not Applicable(NA)
3169	Tertiary	Radiation Oncology - Phase 3	28440000034	Additional Fraction for Linear Accelerator, External Beam Radiotherapy 3D CRT	1000	1000	950	850	Medical	Not Reserved	No	Yes	18	Implant/High End consumables Packages	Implant/High End consumables Packages	No	No	Yes	No	No	Not Applicable(NA)
3170	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	28320000025	PTFE Graft - Straight	50000	50000	47500	42500	Surgical	Not Reserved	No	Yes	1	Implant/High End consumables Packages	Implant/High End consumables Packages	No	No	Yes	No	No	Not Applicable(NA)
3171	Tertiary	Orthopaedics - Phase 3	28400000018	Implant for Cervical spine fixation including odontoid (Odontoid Screw)	20000	20000	19000	17000	Surgical	Not Reserved	No	Yes	1	Implant/High End consumables Packages	Implant/High End consumables Packages	No	No	Yes	No	No	Not Applicable(NA)
3172	Tertiary	Surgical Oncology - Phase 3	28450000035	Chemo Port - Adult	15000	15000	14250	12750	Surgical	Not Reserved	No	Yes	1	Implant/High End consumables Packages	Implant/High End consumables Packages	No	No	Yes	No	No	Not Applicable(NA)
3173	Tertiary	Cardiology - Phase 3	28310000005	Cardiac Balloon - Adult	14000	14000	13300	11900	Medical	Not Reserved	No	Yes	1	Implant/High End consumables Packages	Implant/High End consumables Packages	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
3174	Tertiary	Orthopaedics - Phase 3	2840000019	Implant for Cervical spine fixation including odontoid (Screw)	5000	5000	4750	4250	Surgical	Not Reserved	No	Yes	1	Implant/High End consumables Packages	Implant/High End consumables Packages	No	No	Yes	No	No	Not Applicable(NA)
3175	Tertiary	Orthopaedics - Phase 3	2840000024	Implant for Spine deformity correction (Plate including screw)	5000	5000	4750	4250	Surgical	Not Reserved	No	Yes	6	Implant/High End consumables Packages	Implant/High End consumables Packages	No	No	Yes	No	No	Not Applicable(NA)
3176	Tertiary	Radiation Oncology - Phase 3	2844000040	Additional fraction for 2D External Beam Radiotherapy	500	500	475	425	Medical	Not Reserved	No	Yes	18	Implant/High End consumables Packages	Implant/High End consumables Packages	No	No	Yes	No	No	Not Applicable(NA)
3177	Tertiary	Orthopaedics - Phase 3	2840000020	Implant for Dorsal and lumbar spine fixation (Plate including screw)	5000	5000	4750	4250	Surgical	Not Reserved	No	Yes	6	Implant/High End consumables Packages	Implant/High End consumables Packages	No	No	Yes	No	No	Not Applicable(NA)
3178	Tertiary	Cardiology - Phase 3	2831000010	Coronary Stent for PDA stenting - Bare Metal	8700	8700	8265	7395	Medical	Not Reserved	No	Yes	1	Implant/High End consumables Packages	Implant/High End consumables Packages	No	No	Yes	No	No	Not Applicable(NA)
3179	Tertiary	Cardiology - Phase 3	2831000006	Cardiac Balloon - Pediatric	33000	33000	31350	28050	Medical	Not Reserved	No	Yes	1	Implant/High End consumables Packages	Implant/High End consumables Packages	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
3180	Tertiary	Neurosurgery - Phase 3	2837000014	Clip for Aneurysm	15000	15000	14250	12750	Surgical	Not Reserved	No	Yes	1	Implant/High End consumables Packages	Implant/High End consumables Packages	No	No	Yes	No	No	Not Applicable(NA)
3181	Tertiary	Radiation Oncology - Phase 3	2844000033	Additional Fraction for Linear Accelerator, External Beam Radiotherapy 3D CRT	1000	1000	950	850	Medical	Not Reserved	No	Yes	10	Implant/High End consumables Packages	Implant/High End consumables Packages	No	No	Yes	No	No	Not Applicable(NA)
3182	Tertiary	Cardiology - Phase 3	2831000013	Coronary Stent for PTCA - Drug Eluting	31600	31600	30020	26860	Medical	Not Reserved	No	Yes	3	Implant/High End consumables Packages	Implant/High End consumables Packages	No	No	Yes	No	No	Not Applicable(NA)
3183	Tertiary	Neurosurgery - Phase 3	2837000033	Implant for "Cranioplasty with Exogenous graft"	To be decided by SHA	To be decided by SHA	To be decided by SHA	To be decided by SHA	Surgical	Not Reserved	No	Yes	1	Implant/High End consumables Packages	Implant/High End consumables Packages	No	No	Yes	No	No	Not Applicable(NA)
3184	Tertiary	Cardiology - Phase 3	2831000011	Coronary Stent for PDA stenting - Drug Eluting	31600	31600	30020	26860	Medical	Not Reserved	No	Yes	1	Implant/High End consumables Packages	Implant/High End consumables Packages	No	No	Yes	No	No	Not Applicable(NA)
3185	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	2832000024	Mechanical Valve - Tilting Disc	28000	28000	26600	23800	Surgical	Not Reserved	No	Yes	1	Implant/High End consumables Packages	Implant/High End consumables Packages	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
3186	Tertiary	Radiation Oncology - Phase 3	2844000032	Additional Fraction for Linear Accelerator External Beam Radiotherapy IGRT with 3D CRT or IMRT	2500	2500	2375	2125	Medical	Not Reserved	No	Yes	18	Implant/High End consumables Packages	Implant/High End consumables Packages	No	No	Yes	No	No	Not Applicable(NA)
3187	Tertiary	Radiation Oncology - Phase 3	2844000039	Additional fraction for 2D External Beam Radiotherapy	500	500	475	425	Medical	Not Reserved	No	Yes	10	Implant/High End consumables Packages	Implant/High End consumables Packages	No	No	Yes	No	No	Not Applicable(NA)
3188	Tertiary	Radiation Oncology - Phase 3	2844000036	Additional Fraction for Linear Accelerator, External Beam Radiotherapy IMRT	2000	2000	1900	1700	Medical	Not Reserved	No	Yes	18	Implant/High End consumables Packages	Implant/High End consumables Packages	No	No	Yes	No	No	Not Applicable(NA)
3189	Tertiary	Neurosurgery - Phase 3	2837000034	Implant for "Duroplasty - Exogenous"	To be decided by SHA	To be decided by SHA	To be decided by SHA	To be decided by SHA	Surgical	Not Reserved	No	Yes	1	Implant/High End consumables Packages	Implant/High End consumables Packages	No	No	Yes	No	No	Not Applicable(NA)
3190	Tertiary	Ophthalmology - Phase 3	2839000002	Glue for Scleral fixated IOL	3000	3000	2850	2550	Surgical	Not Reserved	No	Yes	1	Implant/High End consumables Packages	Implant/High End consumables Packages	No	No	Yes	No	No	Not Applicable(NA)
3191	Tertiary	Radiation Oncology - Phase 3	2844000038	Additional Fraction for SRT/ SBRT with IGRT	11000	11000	10450	9350	Medical	Not Reserved	No	Yes	4	Implant/High End consumables Packages	Implant/High End consumables Packages	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
3192	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	2832000052	Valve Ring - Mitral	35000	35000	33250	29750	Surgical	Not Reserved	No	Yes	1	Implant/High End consumables Packages	Implant/High End consumables Packages	No	No	Yes	No	No	Not Applicable(NA)
3193	Tertiary	Radiation Oncology - Phase 3	2844000037	Additional Fraction for Respiratory Gating along with Linear Accelerator planning	3500	3500	3325	2975	Medical	Not Reserved	No	Yes	10	Implant/High End consumables Packages	Implant/High End consumables Packages	No	No	Yes	No	No	Not Applicable(NA)
3194	Tertiary	Radiation Oncology - Phase 3	2844000030	Additional Fraction for Brachytherapy High Dose Radiation	1250	1250	1187.5	1062.5	Medical	Not Reserved	No	Yes	15	Implant/High End consumables Packages	Implant/High End consumables Packages	No	No	Yes	No	No	Not Applicable(NA)
3195	Tertiary	Radiation Oncology - Phase 3	2844000031	Additional Fraction for Linear Accelerator External Beam Radiotherapy IGRT with 3D CRT or IMRT	2500	2500	2375	2125	Medical	Not Reserved	No	Yes	15	Implant/High End consumables Packages	Implant/High End consumables Packages	No	No	Yes	No	No	Not Applicable(NA)
3196	Tertiary	Orthopaedics - Phase 3	2840000023	Implant for Spine deformity correction (Cage)	10000	10000	9500	8500	Surgical	Not Reserved	No	Yes	1	Implant/High End consumables Packages	Implant/High End consumables Packages	No	No	Yes	No	No	Not Applicable(NA)
3197	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	2832000009	Composite Aortic Valved conduit - Mechanical	100000	100000	95000	85000	Surgical	Not Reserved	No	Yes	1	Implant/High End consumables Packages	Implant/High End consumables Packages	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
3198	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	2832000023	Mechanical Valve - Bileaflet	40000	40000	38000	34000	Surgical	Not Reserved	No	Yes	1	Implant/High End consumables Packages	Implant/High End consumables Packages	No	No	Yes	No	No	Not Applicable(NA)
3199	Tertiary	Surgical Oncology - Phase 3	2845000036	Chemo Port - Pediatric	25000	25000	23750	21250	Surgical	Not Reserved	No	Yes	1	Implant/High End consumables Packages	Implant/High End consumables Packages	No	No	Yes	No	No	Not Applicable(NA)
3200	Tertiary	Orthopaedics - Phase 3	2840000021	Implant for Dorsal and lumber spine fixation (Cage)	10000	10000	9500	8500	Surgical	Not Reserved	No	Yes	1	Implant/High End consumables Packages	Implant/High End consumables Packages	No	No	Yes	No	No	Not Applicable(NA)
3201	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	2832000027	Pericardial Patch	18000	18000	17100	15300	Surgical	Not Reserved	No	Yes	1	Implant/High End consumables Packages	Implant/High End consumables Packages	No	No	Yes	No	No	Not Applicable(NA)
3202	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	2832000051	Tissue Valve	70000	70000	66500	59500	Surgical	Not Reserved	No	Yes	1	Implant/High End consumables Packages	Implant/High End consumables Packages	No	No	Yes	No	No	Not Applicable(NA)
3203	Tertiary	Urology - Phase 3	2846000011	BIS standard sling for women	5000	5000	4750	4250	Surgical	Not Reserved	No	Yes	1	Implant/High End consumables Packages	Implant/High End consumables Packages	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accredited Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
3204	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	2832000011	Dacron Graft - Straight	30000	30000	28500	25500	Surgical	Not Reserved	No	Yes	1	Implant/High End consumables Packages	Implant/High End consumables Packages	No	No	Yes	No	No	Not Applicable(NA)
3205	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	2832000053	Valve Ring - Tricuspid	35000	35000	33250	29750	Surgical	Not Reserved	No	Yes	1	Implant/High End consumables Packages	Implant/High End consumables Packages	No	No	Yes	No	No	Not Applicable(NA)
3206	Tertiary	General Surgery - Phase 3	28350000117	Tackers	15000	15000	14250	12750	Surgical	Not Reserved	No	Yes	1	Implant/High End consumables Packages	Implant/High End consumables Packages	No	No	Yes	No	No	Not Applicable(NA)
3207	Tertiary	Radiation Oncology - Phase 3	28440000035	Additional Fraction for Linear Accelerator, External Beam Radiotherapy IMRT	2000	2000	1900	1700	Medical	Not Reserved	No	Yes	15	Implant/High End consumables Packages	Implant/High End consumables Packages	No	No	Yes	No	No	Not Applicable(NA)
3208	Tertiary	Cardiology - Phase 3	28310000012	Coronary Stent for PTCA - Bare Metal	8700	8700	8265	7395	Medical	Not Reserved	No	Yes	3	Implant/High End consumables Packages	Implant/High End consumables Packages	No	No	Yes	No	No	Not Applicable(NA)
3209	Tertiary	Orthopaedics - Phase 3	28400000028	Locking Plate for Metaphyseal fracture - Long Bone	7000	7000	6650	5950	Surgical	Not Reserved	No	Yes	2	Implant/High End consumables Packages	Implant/High End consumables Packages	No	No	Yes	No	No	Not Applicable(NA)

S.N.	Package Category	Package Specialities	Package code	Package including procedures name	Original Package Rate	Package Rate (Fully NABH Accrediated Hospitals) 100% of the package amount	Package Rate (PG/DNB Running Medical College & Hospitals/NABH entry level qualified hospitals/9 Specified Districts)95% of the package amount	Package Rate (Remaining Hospitals)85% of the package amount	Surgical/Medical	Reserved for Govt. Hospitals	Pre-authorization Auto Approved (Yes/No)	Implant /High End consumables Packages (Yes/No)	Implant Maximum Multiplier	Pre-auth Mandatory Documents	Claim Submission Mandatory Documents	Add-on Procedures (Yes/No)	Stand Alone Procedures (Yes/No)	Regular Procedures (Yes/No)	Follow Up Procedures (Yes/No)	Day Care Procedures (Yes/No)	Min Length of stay (Only for Indications)
3210	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	28320000128	Excessive bleeding requiring re-exploration	10000	10000	9500	8500	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Discharge Summary , Detailed Procedure/Operative Notes	Yes	No	No	No	No	0
3211	Tertiary	Obstetrics & Gynaecology - Phase 3	28380000039	Hysterectomy as part of VVF / uterovaginal fistula repair (top-up)	5000	5000	4750	4250	Medical	Not Reserved	No	No	0	Ct-lvp/lvp/Cystogram , Cystoscopy , Detailed Clinical Notes , Vaginoscopy	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe)	Yes	No	No	No	No	0
3212	Tertiary	Urology - Phase 3	28460000172	Hysterectomy as part of VVF / uterovaginal fistula repair (top-up)	5000	5000	4750	4250	Medical	Not Reserved	No	No	0	Ct-lvp/lvp/Cystogram , Cystoscopy , Detailed Clinical Notes , Vaginoscopy	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Histopathology (Hpe)	Yes	No	No	No	No	0
3213	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	28320000129	Low Cardiac Output syndrome requiring IABP insertion post - operatively	50000	50000	47500	42500	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Discharge Summary , Detailed Procedure/Operative Notes	Yes	No	No	No	No	7
3214	Tertiary	Plastic & reconstructive Surgery - Phase 3	28430000033	NPWT - Per day	2000	2000	1900	1700	Medical	Not Reserved	No	No	0	Clinical Notes Of Chronic/ Non Healing Wounds , Clinical Photograph	Detailed Discharge Summary , Detailed Procedure/Operative Notes , Post Procedure Clinical Photograph With Tube And Pump	Yes	No	No	No	No	3
3215	Tertiary	Cardio-thoracic & Vascular surgery - Phase 3	28320000130	Re-do sternotomy	20000	20000	19000	17000	Medical	Not Reserved	No	No	0	Clinical Notes With Planned Line Of Treatment	Detailed Discharge Summary , Detailed Procedure/Operative Notes	Yes	No	No	No	No	0