उ0प्र0 पावर कारपोरेशन लिमिटेड

(उ0प्र0 सरकार का उपक्रम)

U.P.Power Corporation Limited

(Govt. of Uttar Pradesh Undertaking)

CIN : U32201UP1999SGC024928

शक्ति भवन विस्तार, 14–अशोक मार्ग, लखनऊ–226001

संख्याः–1001–औ0सं0/2026–11(28)ए0एस0/2004/(वाल्यूम–3) दिनांकः 10 अप्रैल, 2026

कार्यालय ज्ञाप

उत्तर प्रदेश पावर कारपोरेशन लि0 के आदेश संख्या–3330–औ0सं0/2018–11(28)ए0एस0/2004(VOI-2015/CGHS) दिनांक 08.08.2018 एवं आदेश सं0–85–औ0सं0–17/पाकालि/2024–11(28)ए0एस0/04(VOI-2015) दिनांक 04 जनवरी, 2024 को अवक्रमित करते हुए उ0प्र0 पावर कारपोरेशन लि0 एवं सहयोगी डिस्कॉम के सेवारत/सेवानिवृत्त कार्मिकों एवं उनके आश्रितों तथा पारिवारिक पेंन्शनरों को चिकित्सा प्रतिपूर्ति अनुमन्य किये जाने हेतु सी0जी0एच0एस0 के आदेश सं0–F.No. 05-16/CGHS(HQ)/HEC/2024(Part-1) (Comp No. 8365027) दिनांक 03.10.2025 द्वारा पुनरीक्षित सी0जी0एच0एस0–2025 की दरों/पैकेज दरों एवं नियमों को कारपोरेशन में निम्नानुसार अंगीकृत किये जाने हेतु निदेशक मण्डल द्वारा अनुमोदन प्रदान किया गया हैः–

1. कारपोरेशन कार्मिकों को उ0प्र0 में एवं उ0प्र0 से बाहर मान्यता प्राप्त निजी चिकित्सालयों/चिकित्सा संस्थानों में अन्तः रोगी/वाह्य रोगी के रूप में उपचार कराने पर सी0जी0एच0एस0 के आदेश सं0–F.No.05-16/CGHS(HQ)/HEC/2024(Part-1) (Comp No. 8365027) दिनांक 03.10.2025 द्वारा टियर–1, टियर–2 एवं टियर–3 शहरों हेतु निर्धारित सी0जी0एच0एस0–2025 की दरें अनुमन्य की जायेगी।
2. प्रदेश में एवं प्रदेश से बाहर गैर मान्यता प्राप्त चिकित्सालयों में उपचार कराने पर सी0जी0एच0एस0–2025 की दरों पर प्रतिपूर्ति अनुमन्य की जायेगी।
3. देश के सभी अखिल भारतीय आर्युविज्ञान संस्थानों एवं पी0जी0आई0 स्तर के चिकित्सालयों, उ0प्र0 के सभी राजकीय चिकित्सालयों/चिकित्सा संस्थानों एवं राजकीय मेडिकल कालेजो में भर्ती होकर कराये गये उपचार की वास्तविक दरों (नॉन एडमिसिबल आइटम को छोड़कर) पर प्रतिपूर्ति अनुमन्य की जायेगी।
4. हृदय के उपचार में लगने वाले इम्पलान्ट्स, कूल्हे एवं घुटने के प्रत्यारोपण, इन्ट्राओकूलर लेन्स, अन्य इम्प्लांट्स की दरें सी0जी0एच0एस0 द्वारा समय–समय पर निर्धारित दरों के अनुरूप अनुमन्य की जायेगी।
5. उपचार हेतु भर्ती के दौरान कक्ष का किराया एवं वार्ड की पात्रता का निर्धारण निम्नवत् किया जाता है :–

Discription	NABH/NABL Hospital	Non-NABH Hospital
General Ward	Rs. 1500/-	Rs. 1500/-
Semi- Private Ward	Rs. 3000/-	Rs. 3000/-
Private Ward	Rs. 4500/-	Rs. 4500/-
ICU/ICCU/NICU/PICU/HDU/ Isolation Ward	Rs. 5400/-	Rs. 5400/-
Day Care	Rs. 1500/-	Rs. 1500/-

6. चिकित्सा/उपचार हेतु वार्ड की पात्रता निम्नवत् निर्धारित की जाती है :–

Sl. No.	As per Seventh Pay Commission Pay Matrix	Ward Entitlement
1	Level 1 to Level 5	General Ward
2	Level 6 to Level 9	Semi- Private Ward
3	Level 10 & Above	Private Ward

7. सी0जी0एच0एस0–2025 की दरों में सी0जी0एच0एस0 द्वारा अग्रेतर निर्गत किये जाने वाले संशोधन/परिवर्धन आदेश, निर्गमन की तिथि से कारपोरेशन में भी प्रभावी माने जायेंगे।
8. उक्त दरें आदेश जारी किये जाने के उपरान्त करायी गयी चिकित्सा पर लागू होगी। आदेश निर्गत होने से पूर्व के चिकित्सा प्रतिपूर्ति के दावे कारपोरेशन द्वारा पूर्व निर्धारित दरों/नीति के अनुसार निस्तारित किये जायेंगे तथा पूर्व में निस्तारित किये जा चुके प्रकरण पुनरूद्घाटित नहीं किये जायेंगे। चिकित्सा प्रतिपूर्ति हेतु निर्धारित दरों/पैकेज दरों सम्बन्धी पूर्व में निर्गत समस्त आदेश एतद्द्वारा अतिक्रमित माने जायेंगे।
9. उक्त व्यवस्था में नीति के क्रियान्वयन में किसी भी प्रकार की कठिनाई आने पर निर्णय लेने हेतु अध्यक्ष, उ0प्र0 पा0का0लि0 का अनुमोदन प्राप्त किया जाना अनिवार्य होगा।

निदेशक मण्डल की आज्ञा से,

संख्याः–1001–(1) औस–17/पाकालि/2026/तद्दिनांक :–

प्रतिलिपि निम्नलिखित को सूचनार्थ एवम् आवश्यक कार्यवाही हेतु प्रेषित :–

1. अध्यक्ष, उ0प्र0 पावर कारपोरेशन लि0, शक्ति भवन, लखनऊ के निजी सचिव।
2. प्रबन्ध निदेशक, उ0प्र0 पावर कारपोरेशन लि0/उ0प्र0 पावर ट्रॉन्समिशन कारपोरेशन लि0/उ0प्र0 राज्य विद्युत उत्पादन निगम लि0, शक्ति भवन, लखनऊ/एस0एल0डी0सी0 लि0, विभूति खण्ड–2, गोमती नगर, लखनऊ के निजी सचिव।
3. निदेशक (का0 प्र0 एवं प्रशा0)/(वितरण)/(वित्त)/(वाणिज्य)/(कारपोरेट प्लानिंग)/(आई0टी0), उ0प्र0 पावर कारपोरेशन लि0, शक्ति भवन, लखनऊ के निजी सचिव। ।
4. निदेशक (का0प्र0एवं प्रशा0)/(वित्त), उ0प्र0पा0ट्रां0का0लि0/उ0प्र0रा0वि0उ0नि0लि0, शक्ति भवन, लखनऊ के निजी सचिव। ।
5. प्रबन्ध निदेशक, विद्युत वितरण निगम लि0, मध्याँचल, लखनऊ/पूर्वान्चल, वाराणसी/पश्चिमांचल, मेरठ/दक्षिणाँचल, आगरा एवं केस्को, कानपुर।
6. अध्यक्ष, विद्युत सेवा आयोग/जॉच समिति उ0प्र0 पावर कारपोरेशन लि0।
7. मुख्य अभियन्ता (जल–विद्युत), उ0प्र0 पावर कारपोरेशन लि0, शक्ति भवन, लखनऊ।
8. समस्त मुख्य अभियन्ता (वितरण)/(पारेषण), को इस अभ्युक्ति के साथ प्रेषित है कि वे अपने स्तर से उक्त आदेश की प्रति अपने अधीनस्थ सभी अधीक्षण अभियन्ता/अधिशासी अभियन्ता को उपलब्ध करा दें।
9. समस्त अपर सचिव/संयुक्त सचिव/उप सचिव/अनु सचिव/मुख्य महाप्रबन्धक/महाप्रबन्धक/उप महाप्रबन्धक (लेखा/वित्त/प्रशासन/कारपोरेट टैक्स), उप–मुख्य एवं वरिष्ठ लेखाधिकारी/लेखाधिकारी (वेतन एवं लेखा), उ0प्र0 पावर कारपोरेशन लि0।
10. महाप्रबन्धक (औ0सं0)/ वरिष्ठ कार्मिक अधिकारी/कार्मिक अधिकारी, उ0प्र0 पावर कारपोरेशन लि0।
11. समस्त अनुभाग अधिकारी/निजी सचिव, प्रशासनिक एवं लेखा स्कन्ध, उ0प्र0 पावर कारपोरेशन लि0।
12. कम्पनी सचिव, पावर कारपोरेशन लि0 शक्ति भवन, लखनऊ को उनकी टिप्पणी सं0–96/पाकालि/सीएस/2026 दिनांक 01 अप्रैल, 2026 के क्रम में सूचनार्थ प्रेषित।
13. महाप्रबन्धक (चिकित्सा)/ मुख्य चिकित्साधिकारी, उ0प्र0रा0वि0उ0नि0लि0, शक्ति भवन, लखनऊ।
14. सचिव, विद्युत पेंशनर्स परिषद (उ0प्र0), 103 कीर्ति अपार्टमेण्ट स्टेशन रोड, लखनऊ।
15. अधिशासी अभियन्ता (वेब), कक्ष सं0–407, शक्ति भवन विस्तार को कारपोरेशन की वेबसाइट **www.uppcl.org-Medical** पर अपलोड करने हेतु।
16. प्रबन्धकगण समस्त मान्यता प्राप्त चिकित्सालय।
17. कट फाइल ।

10-04-26

(लोकेन्द्र सिंह)
वरिष्ठ कार्मिक अधिकारी

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

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

कार्यालय ज्ञापन/OFFICE MEMORANDUM

Subject: CGHS rates applicable for treatment at healthcare organisation

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

1. Implementation of Revised CGHS Rates

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

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

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

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

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

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

2. Structure of Differential Rates

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

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

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

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

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

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

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

3. Supporting Guidelines and Definitions

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

a) CGHS Package Rate structure and inclusions.

b) Description of Ward Categories.

c) ICU and Nursing Care Charges.

d) Equipment Charges.

e) Admissible vs. Non-Admissible Items.

f) Definition and Criteria for Super Speciality Hospitals.

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

4. Renewal of MoA with Empanelled Hospitals

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

This issues with the approval of the Competent Authority.

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

Tel No. 011-26872280

Copy to:

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

Copy of Information to:

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

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

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Annexure I

CGHS Rate List

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

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

List of X (Tier I) Cities

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

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

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

General Guidelines.

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

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

Method for Calculation and Application of CGHS Rates

CGHS Rates applicable to respective Ward entitlement:

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

Let:

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

Example Table:

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

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

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

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

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

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

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

*Primary Surgery = Surgery with Highest Package Rate

b) Identical surgeries are performed at different anatomical sites

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

Example (Symbolic):

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

Total Reimbursement= X + 50% of X

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

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

CGHS Reimbursement Rule:

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

Illustrative Example (Symbolic):

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

Reimbursement= 75% of X

Package Rates Definition

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

CGHS rates for Tier I (X City)

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

CGHS rates for Tier I (X City)

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

CGHS rates for Tier I (X City)

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

CGHS rates for Tier I (X City)

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

CGHS rates for Tier I (X City)

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

CGHS rates for Tier I (X City)

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

CGHS rates for Tier I (X City)

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

CGHS rates for Tier I (X City)

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

CGHS rates for Tier I (X City)

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

CGHS rates for Tier I (X City)

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

CGHS rates for Tier I (X City)

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

CGHS rates for Tier I (X City)

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

CGHS rates for Tier I (X City)

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

CGHS rates for Tier I (X City)

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

CGHS rates for Tier I (X City)

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

CGHS rates for Tier I (X City)

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

CGHS rates for Tier I (X City)

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

CGHS rates for Tier I (X City)

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

CGHS rates for Tier I (X City)

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

CGHS rates for Tier I (X City)

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

CGHS rates for Tier I (X City)

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

CGHS rates for Tier I (X City)

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

CGHS rates for Tier I (X City)

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

CGHS rates for Tier I (X City)

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

CGHS rates for Tier I (X City)

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

CGHS rates for Tier I (X City)

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

CGHS rates for Tier I (X City)

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

CGHS rates for Tier I (X City)

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

CGHS rates for Tier I (X City)

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

CGHS rates for Tier I (X City)

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

CGHS rates for Tier I (X City)

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			Non-NABH	NABH	Super Speciality	
		treatment outside one FOV or one plan OR SBRT OR SRS OR SRT (per fraction dose >5Gy))				
716	IT001	Radiosynovectomy with Yttrium	21250	25000	28750	Radio-Isotope Therapy
717	IT002	131-Iodine Therapy 51-100mCi	12172	14320	16468	Radio-Isotope Therapy
718	IT003	131-Iodine Therapy >100mCi	16809	19775	22741	Radio-Isotope Therapy
719	IT004	Samarium-153 therapy for metastatic bone pain palliation	17043	20050	23058	Radio-Isotope Therapy
720	IT005	131-Iodine Therapy <15mCi	6299	7410	8522	Radio-Isotope Therapy
721	IT006	131-Iodine Therapy 15-50mCi	9486	11160	12834	Radio-Isotope Therapy
722	IT007	Phosphorus-32 therapy for metastatic bone pain palliation	12040	14165	16290	Radio-Isotope Therapy
723	PT001	Cervical Traction (per session)	255	300	300	Physiotherapy
724	PT002	Lumbar Traction (per session)	255	300	300	Physiotherapy
725	PT003	Exercises /Post Natal Exercises/Prenatal Exercises/Therapeutic Exercises/Orthopaedic Rehabilitation (Joint Replacement/Post Surgery)/Hand Rehab (per session)	255	300	300	Physiotherapy
726	PT004	Chest Physiotherapy/ Breathing Exercise &Postural Drainage per Session/Post Covid Rehabilitation /Pulmonary Rehabilitation/Cardiac Rehabilitation (per session)	255	300	300	Physiotherapy
727	PT005	Ultra Sonic Therapy /Short Wave Diathermy / Microwave/ Long Wave Diathermy /Infrared/IFT) (per session)	255	300	300	Physiotherapy
728	PT006	Electrical Muscle Stimulation/Cryotherapy/TENS (per session)	340	400	400	Physiotherapy
729	PT007	Hot Pack/ Cold Pack/Wax Bath/Moist Heat (per session)	255	300	300	Physiotherapy
730	PT008	Shock Wave Therapy/Matrix Rhythm Therapy/Laser/PEMF -Pulse Electro Magnetic Therapy (per session)	340	400	400	Physiotherapy

CGHS rates for Tier I (X City)

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			Non-NABH	NABH	Super Speciality	
731	PT009	Gait Assessment (per session)	510	600	600	Physiotherapy
732	PT010	Gait Training (per session)	255	300	300	Physiotherapy
733	PT011	Tilt Training/Neuro-Rehab Basic (per session)	255	300	300	Physiotherapy
734	PT012	Neuro Rehabilitation Advanced (per session)	680	800	800	Physiotherapy
735	PT013	Paediatric Rehabilitation (per session)	255	300	300	Physiotherapy
736	BT001	Speech Therapy per session of at least 40 minutes	340	400	400	Behavioural Therapy
737	BT002	Occupational Therapy per session of at least 40 minutes	340	400	400	Behavioural therapy
738	BT003	Applied Behaviour Analysis based behaviour therapy (ABA based Behaviour therapy) per session of at least 40 minutes	340	400	400	Behavioural therapy
739	BT004	Special education per session of at least 40 minutes	340	400	400	Behavioural therapy
740	BT005	Biofeedback per session	2550	3000	3000	Behavioural therapy
741	DI001	Intraoral Periapical (IOPA) Radiograph X-ray/RVG(Single Film)	170	200	200	Dental Investigation
742	DI002	Intraoral Occlusal/Bite Wing X-Ray	255	300	300	Dental Investigation
743	DI003	Digital OPG with X ray film/ CD	425	500	500	Dental Investigation
744	DI004	Biopsy of Oral tissue- Soft	1020	1200	1200	Dental Biopsy
745	DI005	Biopsy of Oral tissue - Hard (bone, tooth)	1700	2000	2000	Dental Biopsy
746	DP001	Abscess - Drainage-Dental	1275	1500	1500	Dental Procedure
747	DP002	Scaling	850	1000	1000	Dental Procedure
748	DP003	Curettage and Root Planning - Per Tooth	298	350	350	Dental Procedure
749	DP004	Curettage and Root Planning - Per Arch	1700	2000	2000	Dental Procedure
750	DP005	Gingivoplasty - Per Quadrant	850	1000	1000	Dental Procedure
751	DP006	Gingivectomy - Per Quadrant	1020	1200	1200	Dental Procedure
752	DP007	Flap Surgery- Per Tooth	383	450	450	Dental Procedure
753	DP008	Flap Surgery- Per Quadrant	1700	2000	2000	Dental Procedure
754	DP009	Flap Surgery and Bone Graft per quadrant	2550	3000	3000	Dental Procedure
755	DP010	Extraction - Normal Tooth	340	400	400	Dental Procedure
756	DP011	Complicated Extraction per tooth under LA	680	800	800	Dental Procedure

CGHS rates for Tier I (X City)

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			Non-NABH	NABH	Super Speciality	
757	DP012	Extraction Impacted - Soft tissue/ 3rd Molar/wisdom tooth extraction	1700	2000	2000	Dental Procedure
758	DP013	Multiple Extraction and Treatment Procedures for Special Children, Patients with Systemic Diseases, Patient with Special Needs Which Requires Admission and Treatment Under GA	5100	6000	6000	Dental Procedure
759	DP014	Extraction - Orthodontic Extraction	638	750	750	Dental Procedure
760	DP015	Operculectomy- Pericoronal flap excision	1700	2000	2000	Dental Procedure
761	DP016	Extraction Impacted – Bony	4250	5000	5000	Dental Procedure
762	DP017	Alveoloplasty - Per Tooth	255	300	300	Dental Procedure
763	DP018	Alveoloplasty - Per Quadrant	1020	1200	1200	Dental Procedure
764	DP019	Frenectomy	2125	2500	2500	Dental Procedure
765	DP020	Excision of hyperplastic tissue - per arch	1020	1200	1200	Dental Procedure
766	DP021	Surgical Augmentation/Alveolectomy per Arch	2975	3500	3500	Dental Procedure
767	DP022	Bone replacement graft for ridge preservation - per site	1700	2000	2000	Dental Procedure
768	DP023	Minor oral surgery, cyst, granuloma, residual infection, mucocele, epulis under LA	1700	2000	2000	Dental Procedure
769	DP024	Application of Desensitizing Medicament	425	500	500	Dental Procedure
770	DP025	Fluoride Application for Children	850	1000	1000	Dental Procedure
771	DP026	Temporary restoration	128	150	150	Dental Procedure
772	DP027	Glass ionomer Cement Restoration	510	600	600	Dental Procedure
773	DP028	Composite - Occlusal Pit/Class I	425	500	500	Dental Procedure
774	DP029	Composite -Class I with buccal extension/Class II Class III/Class IV/Class VI/Diastema Closure/MOD	850	1000	1000	Dental Procedure
775	DP030	RCT-Single Rooted tooth	1700	2000	2000	Dental Procedure
776	DP031	RCT Multiple root and/ canal tooth	2550	3000	3000	Dental Procedure
777	DP032	Re-RCT - Anterior	2125	2500	2500	Dental Procedure
778	DP033	Re-RCT - Posterior	2550	3000	3000	Dental Procedure
779	DP034	Medication -intracanal medicament (only lesion cases)	425	500	500	Dental Procedure

CGHS rates for Tier I (X City)

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

CGHS rates for Tier I (X City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
		Bridge/ Fixed Partial denture (per missing/ extracted tooth) metal crown with Ceramic facing				
806	DP061	Removable Partial Denture - Flexible Per Arch	6375	7500	7500	Dental Procedure
807	DP062	Removable Partial Denture - Cast Metal Up to 3 Teeth	3400	4000	4000	Dental Procedure
808	DP063	Removable Partial Denture - Cast Metal (additional Per tooth)	255	300	300	Dental Procedure
809	DP064	Removable Partial Denture - Acrylic Up to 3 teeth	1700	2000	2000	Dental Procedure
810	DP065	Removable Partial Denture - Tooth Addition (per tooth)	255	300	300	Dental Procedure
811	DP066	Add Clasp to existing Partial Denture	425	500	500	Dental Procedure
812	DP067	Add Tooth to existing Partial Denture	340	400	400	Dental Procedure
813	DP068	Tooth Supported Overdenture Per Arch	6375	7500	7500	Dental Procedure
814	DP069	Complete Denture - Per Arch	8500	10000	10000	Dental Procedure
815	DP070	Removable orthodontic appliance / Post Orthodontic R O A -per arch	2125	2500	2500	Dental Procedure
816	DP071	Fixed orthodontic per arch	12750	15000	15000	Dental Procedure
817	DP072	Space Maintainers - Fixed	3400	4000	4000	Dental Procedure
818	DP073	Minor Treatment to Control Habits-Removable Appliance Therapy	2125	2500	2500	Dental Procedure
819	DP074	Minor Treatment to Control Habits-Fixed Appliance Therapy	3400	4000	4000	Dental Procedure
820	DP075	Functional orthodontic appliance	5100	6000	6000	Dental Procedure
821	DP076	Feeding appliance for Cleft Palate	4250	5000	5000	Dental Procedure
822	DP077	Expansion plate	5525	6500	6500	Dental Procedure
823	DP078	Maxillofacial Prosthesis -Sal/auricular/orbital/Nasal/Palatal/facial lost/ Speech Aid	5950	7000	7000	Dental Procedure
824	DP079	Obturator Prosthesis - Surgical/Definitive/Modification	4250	5000	5000	Dental Procedure
825	DP080	Removal of - Lateral Exostosis/Torus Mandibularis/Torus Palatines/Surgical reduction of Osseous Tuberosity	2550	3000	3000	Dental Procedure
826	DP081	Sialolithotomy/Sialodocotomy/ Closure of Salivary Fistula	1700	2000	2000	Dental Procedure
827	DP082	Excision of Salivary gland	12750	15000	15000	Dental Procedure
828	DP083	Release of fibrous bands & grafting in (OSMF) treatment under GA	17000	20000	20000	Dental Procedure
829	DP084	Facial Space Abscess	4250	5000	5000	Dental Procedure

CGHS rates for Tier I (X City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
830	DP085	Partial Ostectomy / sequestrectomy for removal of non-vital bone	1700	2000	2000	Dental Procedure
831	DP086	Alveolus – Closed Reduction stabilization of Teeth	3400	4000	4000	Dental Procedure
832	DP087	Alveolus – Open Reduction stabilization of Teeth	5100	6000	6000	Dental Procedure
833	DP088	Arch bar fixation	4250	5000	5000	Dental Procedure
834	DP089	Oroantral Fistula closure	4250	5000	5000	Dental Procedure
835	DP090	Osseous, Oste periosteal, or Cartilage graft of the Mandible or Maxilla - autogenous or non-autogenous bone graft	2550	3000	3000	Dental Procedure
836	DP091	Osteoplasty - for Orthognathic deformities/ Mandibular Rami/ Body of Mandible	25500	30000	30000	Dental Procedure
837	DP092	Maxilla - Closed Reduction	5100	6000	6000	Dental Procedure
838	DP093	Maxilla - Open Reduction	8500	10000	10000	Dental Procedure
839	DP094	Mandible - Closed Reduction	5100	6000	6000	Dental Procedure
840	DP095	Mandible – Open Reduction	8500	10000	10000	Dental Procedure
841	DP096	Cyst of Maxilla/mandible by enucleation/excision/marsupialization upto 4 cms under LA	4250	5000	5000	Dental Procedure
842	DP097	Cyst of Maxilla/mandible by enucleation/excision/marsupialization more than 4 cms under LA	5100	6000	6000	Dental Procedure
843	DP098	Cyst of Maxilla/mandible by enucleation/excision/marsupialization more than 4 cms under GA and admission	21250	25000	25000	Dental Procedure
844	DP099	Temporomandibular(TM) joint ankylosis- under GA/Open /Closed Reduction	17000	20000	20000	Dental Procedure
845	DP100	Segmental / Hemi Mandibulectomy with graft	21250	25000	25000	Dental Procedure
846	DP101	Segmental /Hemi Mandibulectomy without graft	17000	20000	20000	Dental Procedure
847	DP102	Sub-Total mandibulectomy with graft	29750	35000	35000	Dental Procedure
848	DP103	Sub-Total mandibulectomy without graft	25500	30000	30000	Dental Procedure
849	DP104	Maxillectomy/Mandibulectomy- Total with graft	29750	35000	35000	Dental Procedure
850	DP105	Maxillectomy/Mandibulectomy- Total without graft	25500	30000	30000	Dental Procedure

CGHS rates for Tier I (X City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
851	DP106	Maxillectomy- partial with graft	21250	25000	25000	Dental Procedure
852	DP107	Maxillectomy- partial without graft	17000	20000	20000	Dental Procedure
853	DP108	Malar and/or Zygomatic arch - Closed Reduction	5100	6000	6000	Dental Procedure
854	DP109	Malar and/or Zygomatic arch - Open Reduction	8500	10000	10000	Dental Procedure
855	DP110	Distraction osteogenesis of mandible or maxilla under GA	25500	30000	30000	Dental Procedure
856	DP111	Facial bones - Complicated Reduction with fixation	38250	45000	45000	Dental Procedure
857	OI001	Refraction with auto refraction - Both Eyes	170	200	200	Ophthalmology Investigation
858	OI002	Indirect Ophthalmoscopy (Fundoscopy) - Both Eyes	255	300	300	Ophthalmology Investigation
859	OI003	Orthoptic check-up- with synoptophore- Both Eyes	170	200	200	Ophthalmology Investigation
860	OI004	Lees' charting or Hess' charting- Both Eyes	255	300	300	Ophthalmology Investigation
861	OI005	Perimetry (Visual Field Testing) -Goldman- Both Eyes	425	500	500	Ophthalmology Investigation
862	OI006	Perimetry /Humphrey Visual Field (HVF) test- Automated- Both Eyes	680	800	800	Ophthalmology Investigation
863	OI007	Fluorescein angiography for fundus or iris- Both Eyes	1700	2000	2000	Ophthalmology Investigation
864	OI008	Indocyanine green angiography - Both Eyes	1700	2000	2000	Ophthalmology Investigation
865	OI009	Ultrasound A- Scan/optical biometry[lenstar, IOL master] - Both Eyes	850	1000	1000	Ophthalmology Investigation
866	OI010	Ultrasound B- Scan - Both Eyes	425	500	500	Ophthalmology Investigation

CGHS rates for Tier I (X City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
867	OI011	Fundus Photo Test /disc photo for glaucoma- Both Eyes	425	500	500	Ophthalmology Investigation
868	OI012	Corneal endothelial cell count with specular microscopy- Both Eyes	510	600	600	Ophthalmology Investigation
869	OI013	Corneal topography /pentacam- Both Eyes	1700	2000	2000	Ophthalmology Investigation
870	OI014	Corneal pachymetry (corneal thickness)/ CCT - Both Eyes	451	530	530	Ophthalmology Investigation
871	OI015	OCT (Optical Coherence Tomography) /Ocular OCT Angiography - Both Eyes	1785	2100	2100	Ophthalmology Investigation
872	OI016	UBM- Ultrasound bio microscopy- Both Eyes	850	1000	1000	Ophthalmology Investigation
873	OI017	Non Contact tonometry (NCT) - Both Eyes	128	150	150	Ophthalmology Investigation
874	OI018	IOP measurement with Schiotz - Both Eyes	85	100	100	Ophthalmology Investigation
875	OI019	IOP measurement with applanation tonometry - Both Eyes	170	200	200	Ophthalmology Investigation
876	OI020	Diurnal variation of IOP - Both Eyes	1275	1500	1500	Ophthalmology Investigation
877	OI021	90 D lens examination/Three mirror examination for retina - Both Eyes	128	150	150	Ophthalmology Investigation
878	OI022	Gonioscopy- Both Eyes	255	300	300	Ophthalmology Investigation
879	OI023	EOG- Electrooculogram - Both Eyes	1760	2070	2070	Ophthalmology Investigation
880	OI024	ERG- Electroretinogram- Both Eyes	1530	1800	1800	Ophthalmology Investigation

CGHS rates for Tier I (X City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
881	OI025	VEP- visually evoked potential - Both Eyes	1530	1800	1800	Ophthalmology Investigation
882	OI026	X Ray orbit -Bilateral	298	350	350	Ophthalmology Investigation
883	OI027	Dacryocystography - Bilateral	1700	2000	2000	Ophthalmology Investigation
884	OI028	Orbital Angiographical Studies - Bilateral	4250	5000	5000	Ophthalmology Investigation
885	OI029	Neostigmine test - Both Eyes	4250	5000	5000	Ophthalmology Investigation
886	OI030	Lipi View One Eye	765	900	900	Ophthalmology Investigation
887	OI031	Lipi View Both Eyes	1275	1500	1500	Ophthalmology Investigation
888	OI032	Schirmer Test	255	300	300	Ophthalmology Investigation
889	OI033	Vitreous biopsy per eye	4250	5000	5000	Ophthalmology Biopsy
890	OP001	Subconjunctival/sub-tenon’s injections in one eye	425	500	500	Ophthalmology Procedure
891	OP002	Subconjunctival/sub-tenon’s injections in both eyes	680	800	800	Ophthalmology Procedure
892	OP003	Pterygium surgery with auto conjunctival graft per eye	11390	13400	13400	Ophthalmology Procedure
893	OP004	Conjunctival Peritomy per eye	1275	1500	1500	Ophthalmology Procedure
894	OP005	Conjunctival wound repair or exploration following blunt trauma per eye	7225	8500	8500	Ophthalmology Procedure
895	OP006	Removal of corneal foreign body	340	400	400	Ophthalmology Procedure
896	OP007	Cauterization of ulcer/subconjunctival injection in one eye	425	500	500	Ophthalmology Procedure
897	OP008	Cauterization of ulcer/subconjunctival injection in both eyes	680	800	800	Ophthalmology Procedure
898	OP009	Corneal grafting—Penetrating keratoplasty per eye	17000	20000	20000	Ophthalmology Procedure
899	OP010	Bandage contact lenses for corneal perforation/PED per eye	1700	2000	2000	Ophthalmology Procedure

CGHS rates for Tier I (X City)

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

CGHS rates for Tier I (X City)

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

CGHS rates for Tier I (X City)

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

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

CGHS rates for Tier I (X City)

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

CGHS rates for Tier I (X City)

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

CGHS rates for Tier I (X City)

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

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

CGHS rates for Tier I (X City)

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

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

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

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			Non-NABH	NABH	Super Speciality	
1165	GP002	Aspiration Pleural Effusion - Diagnostic	595	700	700	General Procedure
1166	GP003	Aspiration Pleural Effusion - Therapeutic	595	700	700	General Procedure
1167	GP004	Abdominal / Peritoneal Aspiration – Diagnostic/Ascitic tapping / Paracentesis - Diagnostic	595	700	700	General Procedure
1168	GP005	Abdominal / Peritoneal Aspiration – Therapeutic/Ascitic tapping / Paracentesis - Therapeutic	638	750	750	General Procedure
1169	GP006	Removal of Sutures (All)	170	200	200	General Procedure
1170	GP007	Venesection	595	700	700	General Procedure
1171	GP008	Sternal puncture	1700	2000	2000	General Procedure
1172	GP009	Urinary bladder Catheterisation	595	700	700	General Procedure
1173	GP010	Incision & Drainage under local Anaesthesia (Large)	1955	2300	2300	General Procedure
1174	GP011	Intercostal Drainage	2975	3500	3500	General Procedure
1175	GP012	Drainage of abscess with anaesthesia	11390	13400	13400	General Procedure
1176	GP013	Excision of lumps under anaesthesia	11390	13400	13400	General Procedure
1177	HN001	Temporal Bone Subtotal Resection	36550	43000	49450	Head and Neck Surgery
1178	HN002	Benign Tumour Excisions of Head and Neck	23375	27500	31625	Head and Neck Surgery
1179	SK001	Excision of Moles	850	1000	1000	Skin Procedure
1180	SK002	Excision of Warts	850	1000	1000	Skin Procedure
1181	SK003	Excision of Molluscum Contagiosum	850	1000	1000	Skin Procedure
1182	SK004	Excision of Venereal Warts	850	1000	1000	Skin Procedure
1183	SK005	Excision of Corns	850	1000	1000	Skin Procedure
1184	SK006	Intradermal (ID) Injection Keloid (Intralesional Injection) including the cost of the drug	850	1000	1000	Skin Procedure
1185	SK007	Chemical Cautery (s)/Cryotherapy	850	1000	1000	Skin Procedure
1186	CI001	Electrocardiogram (ECG)	149	175	175	Cardiology Investigation
1187	CI002	Treadmill Test (TMT)	952	1120	1120	Cardiology Investigation
1188	CI003	Holter analysis per day	2125	2500	2500	Cardiology Investigation
1189	CI004	Ambulatory BP monitoring per day	850	1000	1000	Cardiology Investigation

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			Non-NABH	NABH	Super Speciality	
1190	CI005	Head Up Tilt Test (HUTT)	7820	9200	9200	Cardiology Investigation
1191	CI006	External Loop/event recording -first day Rs.1500	1275	1500	1500	Cardiology Investigation
1192	CI007	External Loop/event recording - subsequent Days 1000/day (Maximum up to 6 days)	850	1000	1000	Cardiology Investigation
1193	CI008	Diagnostic Electrophysiological studies conventional (Including catheter)	61710	72600	72600	Cardiology Investigation
1194	CI009	Stress Thallium / Myocardial Perfusion Scintigraphy	11390	13400	13400	Cardiology Investigation
1195	CI010	Rest Thallium / Myocardial Perfusion Scintigraphy	8160	9600	9600	Cardiology Investigation
1196	CI011	Venography	4250	5000	5000	Cardiology Investigation
1197	CI012	Lymphangiography	4250	5000	5000	Cardiology Investigation
1198	CI013	Sinogram	1700	2000	2000	Cardiology Investigation
1199	CI014	Digital Subtraction Angiography-Peripheral artery	12419	14610	14610	Cardiology Investigation
1200	CI015	Digital Subtraction Angiography- venogram	12419	14610	14610	Cardiology Investigation
1201	CI016	Coronary Angiography	11390	13400	13400	Cardiology Investigation
1202	CI017	Cardiac Catheterization (CATH)	12665	14900	14900	Cardiology Investigation
1203	CP001	Balloon Coronary Angioplasty / Percutaneous transluminal coronary angioplasty (PTCA) /Percutaneous coronary intervention (PCI) with Vascular closure device (VCD) excluding the cost of Stent. Cost of Drug Eluting Balloon allowed in lieu of Stent	82450	97000	111550	Cardiology Procedure
1204	CP002	Balloon Coronary Angioplasty / Percutaneous transluminal coronary angioplasty (PTCA) / Percutaneous coronary intervention (PCI) without Vascular closure device (VCD) excluding the cost of Stent.Cost of Drug Eluting Balloon allowed in lieu of Stent	71166	83725	96284	Cardiology Procedure
1205	CP003	Rotablation excluding the cost of Rotablator Burr/Advancer	52553	61827	71101	Cardiology Procedure
1206	CP004	Balloon Mitral Valvotomy / Percutaneous Transvenous Mitral Commissurotomy (PTMC)	82450	97000	111550	Cardiology Procedure

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			Non-NABH	NABH	Super Speciality	
1207	CP005	Temporary Pacemaker Implantation (TPI) (Temporary Cardiac Pacing) Single Chamber	17952	21120	24288	Cardiology Procedure
1208	CP006	Permanent pacemaker implantation (PPI)- Single Chamber excluding the cost of Pacemaker	29920	35200	40480	Cardiology Procedure
1209	CP007	Permanent pacemaker implantation- Dual Chamber excluding the cost of Pacemaker	40205	47300	54395	Cardiology Procedure
1210	CP008	Permanent pacemaker implantation (PPI)- Biventricular excluding the cost of pacemaker	46400	54588	62776	Cardiology Procedure
1211	CP009	Automatic implantable cardioverter defibrillator (AICD) Single Chamber - excluding the cost of Device	46750	55000	63250	Cardiology Procedure
1212	CP010	Automatic implantable cardioverter defibrillator (AICD) Dual Chamber excluding the cost of Device	48947	57585	66223	Cardiology Procedure
1213	CP011	Combo Device Implantation excluding the cost of Device	55165	64900	74635	Cardiology Procedure
1214	CP012	Radiofrequency (RF) Ablation Conventional	82450	97000	111550	Cardiology Procedure
1215	CP013	Radiofrequency (RF) Ablation Atrial Tachycardia/CARTO	153000	180000	207000	Cardiology Procedure
1216	CP014	Intra-aortic balloon pump (IABP) excluding the cost of the balloon	29750	35000	40250	Cardiology Procedure
1217	CP015	Intra vascular coiling excluding cost of the coils	64600	76000	87400	Cardiology Procedure
1218	CP016	Balloon Septostomy	28050	33000	37950	Cardiology Procedure
1219	CP017	Aortic Valve Balloon Dilatation (AVBD) / Pulmonary Valve Balloon Dilatation (PVBD)	52734	62040	71346	Cardiology Procedure
1220	CP018	Peripheral Angioplasty with Vascular Closure Device (VCD) excluding the cost of Stent	51893	61050	70208	Cardiology Procedure
1221	CP019	Peripheral Angioplasty without Vascular Closure Device (VCD) excluding the cost of Stent	45050	53000	60950	Cardiology Procedure
1222	CP020	Renal Angioplasty excluding the cost of Stent	51425	60500	69575	Cardiology Procedure
1223	CP021	Transcatheter Aortic Valve Implantation (TAVI) / Transcatheter Aortic Valve Replacement (TAVR) – Procedure Cost. (Approval of Director, CGHS in consultation with Special Technical Committee (STC) is required for this procedure)	85000	100000	115000	Cardiology Procedure

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1224	CP022	TAVI / TAVR Implant (cost of implant only)	1284000	1284000	1284000	Cardiology Implant(Valve)
1225	CP023	Cost of Intravascular ultrasound (IVUS) Catheter excluding GST(Procedure Charge included in PTCA)	55000	55000	55000	Cardiology Add on Procedure
1226	CP024	Cost of Fractional flow reserve (FFR) Catheter excluding GST (Procedure Charge included in PTCA)	33000	33000	33000	Cardiology Add on Procedure
1227	CP025	Catheter cost of Intracoronary optical coherence tomography (OCT) / Intravascular optical coherence tomography (IVOCT) / Intravascular Ventricular Assist System excluding GST(Procedure cost is included in PTCA)	65000	65000	65000	Cardiology Add on Procedure
1228	CP026	IVL (Coronary Intra vascular Lithotripsy / Shock wave Lithotripsy – Including GST (Approval of Director, CGHS in consultation with Special Technical Committee (STC) is required for this procedure)	268000	268000	268000	Cardiology Add on Procedure
1229	CV001	Varicose vein Surgery-Trendelenburg Operation with Suturing or Ligation	21505	25300	29095	Cardiovascular And Cardiac Surgery Procedure
1230	CV002	Radio Ablation of Varicose Veins (RFA Ablation) excluding the cost of RFA Catheter	7948	9350	10753	Cardiovascular And Cardiac Surgery Procedure
1231	CV003	Laser Ablation of Varicose Veins	37400	44000	50600	Cardiovascular And Cardiac Surgery Procedure
1232	CV004	Atrial Septal Defect (ASD) closure excluding the cost of the Device	93500	110000	126500	Cardiovascular And Cardiac Surgery Procedure
1233	CV005	Ventricular Septal Defect (VSD) with Graft / VSD Device Closure excluding the cost of the Device	102000	120000	138000	Cardiovascular And Cardiac Surgery Procedure
1234	CV006	Tetralogy of Fallot (TOF)/TAPVC/TCPC/REV/RSOV repair	153000	180000	207000	Cardiovascular And Cardiac Surgery Procedure
1235	CV007	BD Glenn/Left Atrium Myxoma	153000	180000	207000	Cardiovascular And Cardiac Surgery Procedure

CGHS rates for Tier I (X City)

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

CGHS rates for Tier I (X City)

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

CGHS rates for Tier I (X City)

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

CGHS rates for Tier I (X City)

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

CGHS rates for Tier I (X City)

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

CGHS rates for Tier I (X City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1311	MG009	Band ligation of oesophageal varices	7225	8500	8500	Gastroenterology / Endoscopic Procedures
1312	MG010	Sclerotherapy of oesophageal varices	7225	8500	8500	Gastroenterology / Endoscopic Procedures
1313	MG011	Glue injection of varices	11390	13400	13400	Gastroenterology / Endoscopic Procedures
1314	MG012	Argon plasma coagulation	7820	9200	9200	Gastroenterology / Endoscopic Procedures
1315	MG013	Pyloric balloon dilatation	7225	8500	8500	Gastroenterology / Endoscopic Procedures
1316	MG014	Enteral stenting excluding cost of the stent	17000	20000	20000	Gastroenterology / Endoscopic Procedures
1317	MG015	Duodenal stricture dilation	7225	8500	8500	Gastroenterology / Endoscopic Procedures
1318	MG016	Single balloon enteroscopy	11390	13400	13400	Gastroenterology / Endoscopic Procedures
1319	MG017	Double balloon enteroscopy	17000	20000	20000	Gastroenterology / Endoscopic Procedures
1320	MG018	Capsule endoscopy excluding the cost of capsule	11390	13400	13400	Gastroenterology / Endoscopic Procedures
1321	MG019	Piles banding	4250	5000	5000	Gastroenterology / Endoscopic Procedures
1322	MG020	Colonic stricture dilatation	7225	8500	8500	Gastroenterology / Endoscopic Procedures
1323	MG021	Hot biopsy forceps procedures	7225	8500	8500	Gastroenterology / Endoscopic Procedures
1324	MG022	Colonic stenting excluding cost of the stent	11390	13400	13400	Gastroenterology / Endoscopic Procedures

CGHS rates for Tier I (X City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1325	MG023	Junction biopsy	4250	5000	5000	Gastroenterology / Endoscopic Procedures
1326	MG024	Conjugal microscopy	7225	8500	8500	Gastroenterology / Endoscopic Procedures
1327	MG025	ERCP (Endoscopic Retrograde Cholangio – Pancreatography) Diagnostic	11390	13400	13400	Gastro and Hepatobiliary Investigation
1328	MG026	Endoscopic sphincterotomy by ERCP	17000	20000	23000	Gastroenterology / Endoscopic Procedures
1329	MG027	Common Bile Duct (CBD) stone extraction by ERCP	17000	20000	23000	Gastroenterology / Endoscopic Procedures
1330	MG028	Common Bile Duct (CBD) stricture dilatation by ERCP	17000	20000	23000	Gastroenterology / Endoscopic Procedures
1331	MG029	Biliary stenting (plastic and metallic) by ERCP	17000	20000	23000	Gastroenterology / Endoscopic Procedures
1332	MG030	Mechanical lithotripsy of CBD stones by ERCP	29750	35000	40250	Gastroenterology / Endoscopic Procedures
1333	MG031	Pancreatic sphincterotomy by ERCP	17000	20000	23000	Gastroenterology / Endoscopic Procedures
1334	MG032	Pancreatic stricture dilatation by ERCP	17000	20000	23000	Gastroenterology / Endoscopic Procedures
1335	MG033	Pancreatic stone extraction by ERCP	17000	20000	23000	Gastroenterology / Endoscopic Procedures
1336	MG034	Mechanical lithotripsy of pancreatic stones	29750	35000	40250	Gastroenterology / Endoscopic Procedures
1337	MG035	Endoscopic cysto gastrostomy	17000	20000	23000	Gastroenterology / Endoscopic Procedures
1338	MG036	Balloon dilatation of papilla	17000	20000	23000	Gastroenterology / Endoscopic Procedures

CGHS rates for Tier I (X City)

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

CGHS rates for Tier I (X City)

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

CGHS rates for Tier I (X City)

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

CGHS rates for Tier I (X City)

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

CGHS rates for Tier I (X City)

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

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

CGHS rates for Tier I (X City)

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

CGHS rates for Tier I (X City)

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

CGHS rates for Tier I (X City)

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

CGHS rates for Tier I (X City)

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

CGHS rates for Tier I (X City)

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

CGHS rates for Tier I (X City)

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

CGHS rates for Tier I (X City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1506	OG025	Shirodkar/ McDonald stitch//Cervical Stitch(Cerclage)	11390	13400	13400	Obstetrics And Gynaecology Procedure
1507	OG026	Abdominal Hysterectomy with or without salpingo-oophorectomy	36550	43000	43000	Obstetrics And Gynaecology Procedure
1508	OG027	Non-descent Vaginal Hysterectomy (NDVH) with or without BSO	36550	43000	43000	Obstetrics And Gynaecology Procedure
1509	OG028	Vaginal Hysterectomy (including of BSO) with or without repairs	36550	43000	43000	Obstetrics And Gynaecology Procedure
1510	OG029	Myomectomy -laparotomy	29750	35000	35000	Obstetrics And Gynaecology Procedure
1511	OG030	Myomectomy -laparoscopic	36550	43000	43000	Obstetrics And Gynaecology Procedure
1512	OG031	Vaginoplasty	36550	43000	43000	Obstetrics And Gynaecology Procedure
1513	OG032	Vulvectomy -Simple	29750	35000	35000	Obstetrics And Gynaecology Procedure
1514	OG033	Rectovaginal Fistula (RVF) Repair	36550	43000	43000	Obstetrics And Gynaecology Procedure
1515	OG034	Manchester/Fothergill’s operation	29750	35000	35000	Obstetrics And Gynaecology Procedure
1516	OG035	Shirodkar’s sling Operation or other sling operations for prolapse uterus	17000	20000	20000	Obstetrics And Gynaecology Procedure
1517	OG036	Laparoscopic sling operations for prolapse uterus	36550	43000	43000	Obstetrics And Gynaecology Procedure
1518	OG037	Dilatation and Curettage(diagnostic/therapeutic) with or without Polypectomy	11390	13400	13400	Obstetrics And Gynaecology Procedure
1519	OG038	Cervical Biopsy	7820	9200	9200	Obstetrics And Gynaecology Procedure

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

CGHS rates for Tier I (X City)

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

CGHS rates for Tier I (X City)

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

CGHS rates for Tier I (X City)

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

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

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

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

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

CGHS rates for Tier I (X City)

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

CGHS rates for Tier I (X City)

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

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

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

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

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

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

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

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

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

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

CGHS rates for Tier I (X City)

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

CGHS rates for Tier I (X City)

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

CGHS rates for Tier I (X City)

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

CGHS rates for Tier I (X City)

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

CGHS rates for Tier I (X City)

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

CGHS rates for Tier I (X City)

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

CGHS rates for Tier I (X City)

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

CGHS rates for Tier I (X City)

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

CGHS rates for Tier I (X City)

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

B) Rate list for Semiprivate ward for HCOs in Y (Tier II) cities

***Indicative List of Y(Tier II) Cities**

Vijayawada	Warangal	Visakhapatnam	Guntur	Nellore	Guwahati	Patna
Chandigarh	Durg-Bhilai	Raipur	Rajkot	Jamnagar	Bhavnagar	Vadodara
Surat	Faridabad	Gurgaon	Srinagar	Jammu	Jamshedpur	Dhanbad
Ranchi	Bokaro	Belgaum	Hubli-Dharwad	Mangalore	Mysore	Gulbarga
Kozhikode	Kochi	Thiruvananthapuram	Thrissur	Malappuram	Kannur	Kollam
Gwalior	Indore	Bhopal	Jabalpur	Ujjain	Amravati	Nagpur
Aurangabad	Nashik	Bhiwandi	Solapur	Kolhapur	Vasai-Virar	Malegaon
Nanded-Waghala	Sangli	Cuttack	Bhubaneswar	Raurkela	Puducherry	Amritsar
Jalandhar	Ludhiana	Bikaner	Jaipur	Jodhpur	Kota	Ajmer
Salem	Tiruppur	Coimbatore	Tiruchirappalli	Madurai	Erode	Moradabad
Meerut	Ghaziabad	Aligarh	Agra	Bareilly	Lucknow	Kanpur
Allahabad	Gorakhpur	Varanasi	Saharanpur	Noida	Firozabad	Jhansi
Dehradun	Asansol	Siliguri	Durgapur	—		

*as per O.M. No.2/5/2017-E.II(B) dated 07.07.2017.

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

General Guidelines.

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

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

Method for Calculation and Application of CGHS Rates

CGHS Rates applicable to respective Ward entitlement:

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

Let:

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

Example Table:

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

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

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

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

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

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

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

*Primary Surgery = Surgery with Highest Package Rate

b) Identical surgeries are performed at different anatomical sites

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

Example (Symbolic):

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

Total Reimbursement= X + 50% of X

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

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

CGHS Reimbursement Rule:

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

Illustrative Example (Symbolic):

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

Reimbursement= 75% of X

Package Rates Definition

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

CGHS rates for Tier II (Y City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1	CN001	Consultation OPD	350	350	350	Consultation
2	CN002	Consultation for Inpatients	350	350	350	Consultation
3	CN003	Consultation OPD – Super speciality/Psychiatry	700	700	700	Consultation
4	LB001	Urine Routine- pH, Specific Gravity, Sugar, Protein and Microscopy	77	90	90	Laboratory Investigation
5	LB002	Urine Microalbumin	186	219	219	Laboratory Investigation
6	LB003	Stool Routine and Microscopy	61	72	72	Laboratory Investigation
7	LB004	Stool for Occult Blood	77	90	90	Laboratory Investigation
8	LB005	Post Coital Smear Examination	306	360	360	Laboratory Investigation
9	LB006	Semen Analysis (Automated/Manual)	191	225	225	Laboratory Investigation
10	LB007	Haemoglobin (Hb)	38	45	45	Laboratory Investigation
11	LB008	Total Leucocytic Count (TLC)	38	45	45	Laboratory Investigation
12	LB009	Differential Leucocytic Count (DLC)	77	90	90	Laboratory Investigation
13	LB010	Erythrocyte Sedimentation Rate (ESR)	77	90	90	Laboratory Investigation
14	LB011	Total Red Cell count with MCV,MCH,MCHC,DRW	38	45	45	Laboratory Investigation
15	LB012	Complete Haemogram/CBC, Hb, RBC Count and Indices, TLC, DLC, Platelet, ESR, Peripheral Smear Examination)	230	270	270	Laboratory Investigation
16	LB013	Platelet Count	77	90	90	Laboratory Investigation
17	LB014	Reticulocyte Count	77	90	90	Laboratory Investigation
18	LB015	Absolute Eosinophil Count (AEC)	77	90	90	Laboratory Investigation
19	LB016	Packed Cell Volume (PCV)	38	45	45	Laboratory Investigation
20	LB017	Peripheral Smear Examination	77	90	90	Laboratory Investigation
21	LB018	Smear for Malaria/Filaria Parasite	77	90	90	Laboratory Investigation
22	LB019	Bleeding Time	38	45	45	Laboratory Investigation
23	LB020	Clotting Time	38	45	45	Laboratory Investigation
24	LB021	Osmotic Fragility Test	230	270	270	Laboratory Investigation
25	LB022	Bone Marrow Smear Examination	268	315	315	Laboratory Investigation

CGHS rates for Tier II (Y City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
26	LB023	Bone Marrow Smear Examination with Iron Stain	612	720	720	Laboratory Investigation
27	LB024	Bone Marrow Smear Examination and Cytochemistry	9180	10800	10800	Laboratory Investigation
28	LB025	Activated partial Thromboplastin Time (APTT)	222	261	261	Laboratory Investigation
29	LB026	Rapid Test for Malaria (Card Test)/QBC Malaria Test	77	90	90	Laboratory Investigation
30	LB027	Bleeding Disorder Panel- PT, APTT, Thrombin Time Fibrinogen, D-Dimer/ Fibrinogen Degradation Products (FDP)	612	720	720	Laboratory Investigation
31	LB028	Factor Assays-Factor VIII	1148	1350	1350	Laboratory Investigation
32	LB029	Factor Assays-Factor IX	1148	1350	1350	Laboratory Investigation
33	LB030	Platelet Function Tests	968	1139	1139	Laboratory Investigation
34	LB031	Tests for Hypercoagulable States- Protein C, Protein S, Antithrombin	2586	3042	3042	Laboratory Investigation
35	LB032	Tests for Lupus Anticoagulant	995	1170	1170	Laboratory Investigation
36	LB033	Tests for Antiphospholipid Antibody IgG, IgM (for Cardiolipin and B2 Glycoprotein 1)	765	900	900	Laboratory Investigation
37	LB034	Thalassemia Studies (Red Cell Indices and Hb HPLC)	765	900	900	Laboratory Investigation
38	LB035	Tests for Sickling / Hb HPLC)	765	900	900	Laboratory Investigation
39	LB036	Blood Group & Rh Type	69	81	81	Laboratory Investigation
40	LB037	Cross Match	153	180	180	Laboratory Investigation
41	LB038	Coomb’s Test - Direct	153	180	180	Laboratory Investigation
42	LB039	Coomb’s Test - Indirect	191	225	225	Laboratory Investigation
43	LB040	3 Cell Panel- Antibody Screening for Pregnant Female	803	945	945	Laboratory Investigation
44	LB041	11 Cells Panel for Antibody Identification	1748	2057	2057	Laboratory Investigation
45	LB042	Hepatitis B Surface Antigen (HBsAg)	230	270	270	Laboratory Investigation
46	LB043	Hepatitis C Virus (HCV)	383	450	450	Laboratory Investigation
47	LB044	Human Immunodeficiency Virus- HIV I and II	295	347	347	Laboratory Investigation
48	LB045	Venereal Disease Research Laboratory Test (VDRL)	77	90	90	Laboratory Investigation
49	LB046	RH Antibody Titre	230	270	270	Laboratory Investigation
50	LB047	Platelet Concentrate Test	765	900	900	Laboratory Investigation
51	LB048	Routine - H & E	417	491	491	Laboratory Investigation

CGHS rates for Tier II (Y City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
52	LB049	Special Stain	153	180	180	Laboratory Investigation
53	LB050	Histopathology Examination (HPE) - Frozen Section	1148	1350	1350	Laboratory Investigation
54	LB051	Histopathology Examination (HPE) - Paraffin Section	383	450	450	Laboratory Investigation
55	LB052	Pap Smear	306	360	360	Laboratory Investigation
56	LB053	Body Fluid for Malignant cells	268	315	315	Laboratory Investigation
57	LB054	Paroxysmal Nocturnal Haemoglobinuria (PNH) Panel- CD55, CD59	1148	1350	1350	Laboratory Investigation
58	LB055	Blood Glucose Random / Blood Glucose Fasting /Blood Glucose PP	31	36	36	Laboratory Investigation
59	LB056	24 Hrs Urine for Proteins, Sodium, Creatinine	230	270	270	Laboratory Investigation
60	LB057	Blood Urea Nitrogen (BUN) / Urea	77	90	90	Laboratory Investigation
61	LB058	Serum Creatinine	77	90	90	Laboratory Investigation
62	LB059	Urine Bile Pigment and Salt	54	63	63	Laboratory Investigation
63	LB060	Urine Urobilinogen	54	63	63	Laboratory Investigation
64	LB061	Urine Ketones	54	63	63	Laboratory Investigation
65	LB062	Urine Occult Blood	54	63	63	Laboratory Investigation
66	LB063	Urine Total Proteins	54	63	63	Laboratory Investigation
67	LB064	Rheumatoid Factor / Rh Factor Test	574	675	675	Laboratory Investigation
68	LB065	Bence Jones Protein	77	90	90	Laboratory Investigation
69	LB066	Serum Uric Acid	115	135	135	Laboratory Investigation
70	LB067	Serum Bilirubin total & direct	115	135	135	Laboratory Investigation
71	LB068	Serum Iron	191	225	225	Laboratory Investigation
72	LB069	C-Reactive Protein (CRP)	191	225	225	Laboratory Investigation
73	LB070	C-Reactive Protein (CRP) Quantitative	230	270	270	Laboratory Investigation
74	LB071	Body Fluid (CSF/Ascitic Fluid etc.)Sugar, Protein etc.	230	270	270	Laboratory Investigation
75	LB072	Albumin	38	45	45	Laboratory Investigation
76	LB073	Creatinine Clearance	153	180	180	Laboratory Investigation
77	LB074	Serum Cholesterol	115	135	135	Laboratory Investigation
78	LB075	Total Iron Binding Capacity (TIBC)	230	270	270	Laboratory Investigation
79	LB076	Glucose (Fasting & PP)	61	72	72	Laboratory Investigation

CGHS rates for Tier II (Y City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
80	LB077	Serum Calcium –Total	115	135	135	Laboratory Investigation
81	LB078	Serum Calcium – Ionic	459	540	540	Laboratory Investigation
82	LB079	Serum Phosphorus	115	135	135	Laboratory Investigation
83	LB080	Total Protein Albumin/Globulin Ratio (A/G Ratio)	54	63	63	Laboratory Investigation
84	LB081	Immunoglobulin G (IgG)	306	360	360	Laboratory Investigation
85	LB082	Immunoglobulin M(IgM)	306	360	360	Laboratory Investigation
86	LB083	Immunoglobulin A(IgA)	306	360	360	Laboratory Investigation
87	LB084	Antinuclear Antibody (ANA)	501	590	590	Laboratory Investigation
88	LB085	Anti-double stranded DNA (anti-dsDNA)	612	720	720	Laboratory Investigation
89	LB086	Serum Glutamic Pyruvic Transaminase (SGPT) / Alanine Aminotransferase (ALT)	77	90	90	Laboratory Investigation
90	LB087	Serum Glutamic Oxaloacetic Transaminase (SGOT) /Aspartate Aminotransferase (AST)	77	90	90	Laboratory Investigation
91	LB088	Serum Amylase	230	270	270	Laboratory Investigation
92	LB089	Serum Lipase	306	360	360	Laboratory Investigation
93	LB090	Serum Lactate	383	450	450	Laboratory Investigation
94	LB091	Serum Magnesium	230	270	270	Laboratory Investigation
95	LB092	Serum Sodium	92	108	108	Laboratory Investigation
96	LB093	Serum Potassium	92	108	108	Laboratory Investigation
97	LB094	Chloride	115	135	135	Laboratory Investigation
98	LB095	Serum Bicarbonate	153	180	180	Laboratory Investigation
99	LB096	Serum Ammonia	513	603	603	Laboratory Investigation
100	LB097	Anaemia Profile (Hb, Serum Iron, TIBC, Ferritin, Transferrin Saturation, Stool Occult Blood, CBC, Reticulocyte Count)	1010	1188	1188	Laboratory Investigation
101	LB098	Serum Testosterone	306	360	360	Laboratory Investigation
102	LB099	Imprint Smear from Endoscopy	765	900	900	Laboratory Investigation
103	LB100	Triglycerides	115	135	135	Laboratory Investigation
104	LB101	Glucose Tolerance Test (GTT)	230	270	270	Laboratory Investigation

CGHS rates for Tier II (Y City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
105	LB102	Triple Marker Test (AFP,HCG,UE3)	1148	1350	1350	Laboratory Investigation
106	LB103	Creatine Phosphokinase (CPK)/Creatine Kinase (CK)	176	207	207	Laboratory Investigation
107	LB104	Foetal Haemoglobin (HbF)	383	450	450	Laboratory Investigation
108	LB105	Prothrombin Time (PT)/ International normalized ratio (INR)	191	225	225	Laboratory Investigation
109	LB106	Lactate dehydrogenase (LDH)	168	198	198	Laboratory Investigation
110	LB107	Alkaline Phosphatase	115	135	135	Laboratory Investigation
111	LB108	Acid Phosphatase	115	135	135	Laboratory Investigation
112	LB109	CPK MB/CK MB	275	324	324	Laboratory Investigation
113	LB110	CK MB Mass/CPK MB Mass	275	324	324	Laboratory Investigation
114	LB111	Troponin I	536	630	630	Laboratory Investigation
115	LB112	Troponin T	536	630	630	Laboratory Investigation
116	LB113	Glucose-6-Phosphate Dehydrogenase (G6PD)	230	270	270	Laboratory Investigation
117	LB114	Lithium	268	315	315	Laboratory Investigation
118	LB115	Dilantin (Phenytoin)	459	540	540	Laboratory Investigation
119	LB116	Carbamazepine.	536	630	630	Laboratory Investigation
120	LB117	Cyclosporine	1913	2250	2250	Laboratory Investigation
121	LB118	Valproic acid.	459	540	540	Laboratory Investigation
122	LB119	Blood gas analysis / Arterial Blood Gas (ABG)	428	504	504	Laboratory Investigation
123	LB120	Blood gas analysis / Arterial Blood Gas (ABG) with electrolytes	612	720	720	Laboratory Investigation
124	LB121	Urine Pregnancy Test(UPT)	77	90	90	Laboratory Investigation
125	LB122	Glycosylated Haemoglobin (HbA1c)	230	270	270	Laboratory Investigation
126	LB123	Kidney Function Test (KFT)- (Sr.Creatinine,Blood Urea,BUN,Sr.Uric Acid,Sr.Sodium,Sr.Potassium,Urine R/E)	383	450	450	Laboratory Investigation
127	LB124	Liver Function Test (LFT)	383	450	450	Laboratory Investigation
128	LB125	Lipid Profile (Total cholesterol ,Triglycerides, LDL, HDL,VLDL)	375	441	441	Laboratory Investigation
129	LB126	Serum Ferritin	268	315	315	Laboratory Investigation
130	LB127	Vitamin B12 Assay.	459	540	540	Laboratory Investigation
131	LB128	Folic Acid Assay.	497	585	585	Laboratory Investigation

CGHS rates for Tier II (Y City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
132	LB129	Extended Lipid Profile. (Total cholesterol, LDL,HDL, Triglycerides Apo A1,Apo B,Lp (a))	765	900	900	Laboratory Investigation
133	LB130	Apolipoprotein A1 (ApoA1)	306	360	360	Laboratory Investigation
134	LB131	Apolipoprotein B (Apo B)	306	360	360	Laboratory Investigation
135	LB132	Lipoprotein A / Lp A	306	360	360	Laboratory Investigation
136	LB133	CD 3,4 and 8 Counts	949	1116	1116	Laboratory Investigation
137	LB134	CD 3,4 and 8 Percentage	1155	1359	1359	Laboratory Investigation
138	LB135	Low Density Lipoprotein (LDL)	115	135	135	Laboratory Investigation
139	LB136	Homocysteine	497	585	585	Laboratory Investigation
140	LB137	Serum Electrophoresis	536	630	630	Laboratory Investigation
141	LB138	Fibrinogen	383	450	450	Laboratory Investigation
142	LB139	Gamma-Glutamyl Transpeptidase (GGTP)	115	135	135	Laboratory Investigation
143	LB140	Fructosamine	383	450	450	Laboratory Investigation
144	LB141	Beta 2 microglobulin (B2M) /β2 microglobulin	459	540	540	Laboratory Investigation
145	LB142	Prostate Specific Antigen (PSA)- Total	363	428	428	Laboratory Investigation
146	LB143	Prostate-Specific Antigen (PSA) - Free	612	720	720	Laboratory Investigation
147	LB144	Alpha Fetoprotein (AFP)	421	495	495	Laboratory Investigation
148	LB145	Human Chorionic Gonadotropin (HCG)/ Beta HCG	344	405	405	Laboratory Investigation
149	LB146	Cancer Antigen 125 (CA 125)	612	720	720	Laboratory Investigation
150	LB147	Cancer Antigen 19.9 (CA 19.9)	612	720	720	Laboratory Investigation
151	LB148	Cancer Antigen 15.3 (CA 15.3)	612	720	720	Laboratory Investigation
152	LB149	Vanillylmandelic Acid (VMA)	1224	1440	1440	Laboratory Investigation
153	LB150	Calcitonin	918	1080	1080	Laboratory Investigation
154	LB151	Carcinoembryonic Antigen (CEA)	459	540	540	Laboratory Investigation
155	LB152	Direct Immunofluorescence (Skin and Kidney Disease etc)	918	1080	1080	Laboratory Investigation
156	LB153	Indirect (anti ds DNA Anti Smith ANCA)	918	1080	1080	Laboratory Investigation
157	LB154	Calcidiol / 25-hydroxycholecalciferol / Vitamin D3 assay (Vit D3)	765	900	900	Laboratory Investigation

CGHS rates for Tier II (Y City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
158	LB155	Serum Protein electrophoresis with immunofixation electrophoresis (IFE)	536	630	630	Laboratory Investigation
159	LB156	Anti-Cyclic Citrullinated Peptide (Anti CCP)	689	810	810	Laboratory Investigation
160	LB157	Anti-tissue Transglutaminase antibody (Anti TTG Antibody) / Tissue Transglutaminase IgA (tTg-IgA)	612	720	720	Laboratory Investigation
161	LB158	Serum Erythropoietin	918	1080	1080	Laboratory Investigation
162	LB159	Adrenocorticotropic Hormone (ACTH)	918	1080	1080	Laboratory Investigation
163	LB160	T3, T4, TSH -Thyroid Function Test (TFT)	344	405	405	Laboratory Investigation
164	LB161	Thyroid stimulating hormone (TSH)	153	180	180	Laboratory Investigation
165	LB162	Luteinizing hormone (LH)	306	360	360	Laboratory Investigation
166	LB163	Follicle stimulating hormone (FSH)	306	360	360	Laboratory Investigation
167	LB164	Prolactin	306	360	360	Laboratory Investigation
168	LB165	Cortisol	421	495	495	Laboratory Investigation
169	LB166	PTH(Parathormone)	765	900	900	Laboratory Investigation
170	LB167	C-Peptide (Connecting Peptide)	574	675	675	Laboratory Investigation
171	LB168	Insulin	383	450	450	Laboratory Investigation
172	LB169	Progesterone	306	360	360	Laboratory Investigation
173	LB170	17 Hydroxyprogesterone (17 OH Progesterone)	574	675	675	Laboratory Investigation
174	LB171	Dehydroepiandrosterone sulfate (DHEAS)	765	900	900	Laboratory Investigation
175	LB172	Androstenedione	765	900	900	Laboratory Investigation
176	LB173	Growth Hormone	459	540	540	Laboratory Investigation
177	LB174	Thyroid peroxidase antibody (TPO)	536	630	630	Laboratory Investigation
178	LB175	Thyroglobulin.	536	630	630	Laboratory Investigation
179	LB176	Hydatid Serology	627	738	738	Laboratory Investigation
180	LB177	Anti Sperm Antibodies.	689	810	810	Laboratory Investigation
181	LB178	Hepatitis B Virus (HBV) DNA Qualitative	1913	2250	2250	Laboratory Investigation
182	LB179	Hepatitis B Virus (HBV) DNA Quantitative.	2678	3150	3150	Laboratory Investigation
183	LB180	Hepatitis C Virus (HCV) RNA Qualitative.	2295	2700	2700	Laboratory Investigation

CGHS rates for Tier II (Y City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
184	LB181	Human papillomavirus (HPV) Serology	1224	1440	1440	Laboratory Investigation
185	LB182	Rota Virus serology	306	360	360	Laboratory Investigation
186	LB183	Mantoux Test	153	180	180	Laboratory Investigation
187	LB184	ADA(Adenosine deaminase)	497	585	585	Laboratory Investigation
188	LB185	GeneXpert Test (Tuberculosis)	792	932	932	Laboratory Investigation
189	LB186	QuantiFERON TB Gold	1913	2250	2250	Laboratory Investigation
190	LB187	PCR for Tuberculosis (TB)	918	1080	1080	Laboratory Investigation
191	LB188	PCR for Human immunodeficiency virus (HIV)	1377	1620	1620	Laboratory Investigation
192	LB189	Chlamydia antigen	765	900	900	Laboratory Investigation
193	LB190	Chlamydia antibody	650	765	765	Laboratory Investigation
194	LB191	Brucella serology	344	405	405	Laboratory Investigation
195	LB192	Influenza A serology	765	900	900	Laboratory Investigation
196	LB193	Acetylcholine receptor (AChR) antibody titre	3443	4050	4050	Laboratory Investigation
197	LB194	Anti muscle specific receptor tyrosine kinase (Anti MuSK) antibody titre	5126	6030	6030	Laboratory Investigation
198	LB195	Serum Copper	497	585	585	Laboratory Investigation
199	LB196	Serum Ceruloplasmin	497	585	585	Laboratory Investigation
200	LB197	Urinary copper	643	756	756	Laboratory Investigation
201	LB198	Serum phenobarbitone level	459	540	540	Laboratory Investigation
202	LB199	Coagulation profile	574	675	675	Laboratory Investigation
203	LB200	D-Dimer	383	450	450	Laboratory Investigation
204	LB201	CSF/Any Body Fluid for Basic studies including cell count, protein, sugar, gram stain, India Ink preparation and smear for AFB	268	315	315	Laboratory Investigation
205	LB202	PCR for Herpes simplex	1071	1260	1260	Laboratory Investigation
206	LB203	Bacterial culture and sensitivity - Aerobic	352	414	414	Laboratory Investigation
207	LB204	Bacterial culture and sensitivity - Anaerobic	536	630	630	Laboratory Investigation
208	LB205	Mycobacterial culture and sensitivity	421	495	495	Laboratory Investigation
209	LB206	Fungal culture	379	446	446	Laboratory Investigation
210	LB207	Anti measles antibody titre (with serum antibody titre)	918	1080	1080	Laboratory Investigation

CGHS rates for Tier II (Y City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
211	LB208	Viral culture	459	540	540	Laboratory Investigation
212	LB209	Antibody titre (Herpes simplex, cytomegalovirus, flavivirus, zoster varicella virus)	1607	1890	1890	Laboratory Investigation
213	LB210	Oligoclonal bands (OCBs)	1721	2025	2025	Laboratory Investigation
214	LB211	Myelin basic protein (MBP)	2678	3150	3150	Laboratory Investigation
215	LB212	Cryptococcal antigen	1148	1350	1350	Laboratory Investigation
216	LB213	D Xylose test	842	990	990	Laboratory Investigation
217	LB214	Faecal / Faecal fat test/ faecal chymotrypsin/ faecal elastase	765	900	900	Laboratory Investigation
218	LB215	H pylori serology for Coeliac disease /Celiac disease	918	1080	1080	Laboratory Investigation
219	LB216	HBV genotyping	2199	2588	2588	Laboratory Investigation
220	LB217	HCV genotyping	4289	5045	5045	Laboratory Investigation
221	LB218	Urinary Vanillylmandelic Acid (VMA)	1672	1967	1967	Laboratory Investigation
222	LB219	Urinary metanephrine/Normetanephrine	2219	2610	2610	Laboratory Investigation
223	LB220	Urinary free catecholamine	1913	2250	2250	Laboratory Investigation
224	LB221	Serum aldosterone	1377	1620	1620	Laboratory Investigation
225	LB222	24 Hr urinary aldosterone	1148	1350	1350	Laboratory Investigation
226	LB223	Plasma renin activity	1224	1440	1440	Laboratory Investigation
227	LB224	Serum aldosterone/renin ratio	1148	1350	1350	Laboratory Investigation
228	LB225	Osmolality urine	344	405	405	Laboratory Investigation
229	LB226	Osmolality serum	344	405	405	Laboratory Investigation
230	LB227	Urinary sodium	115	135	135	Laboratory Investigation
231	LB228	Urinary Chloride	115	135	135	Laboratory Investigation
232	LB229	Urinary potassium	115	135	135	Laboratory Investigation
233	LB230	Urinary calcium	115	135	135	Laboratory Investigation
234	LB231	Thyroid binding globulin	842	990	990	Laboratory Investigation
235	LB232	24-hour urinary free cortisol	574	675	675	Laboratory Investigation
236	LB233	Islet cell antibody	918	1080	1080	Laboratory Investigation
237	LB234	Glutamic Acid Decarboxylase Autoantibodies test (GAD antibodies)	1530	1800	1800	Laboratory Investigation

CGHS rates for Tier II (Y City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
238	LB235	Insulin associated antibody	750	882	882	Laboratory Investigation
239	LB236	Insulin-like growth factor-1 (IGF-1)	1683	1980	1980	Laboratory Investigation
240	LB237	Insulin-like growth factor binding protein 3 (IGF- BP3)	1760	2070	2070	Laboratory Investigation
241	LB238	Sex hormone binding globulin	1178	1386	1386	Laboratory Investigation
242	LB239	Estradiol (E2)	306	360	360	Laboratory Investigation
243	LB240	Thyroglobulin antibody	536	630	630	Laboratory Investigation
244	LB241	Kappa Lambda Light Chains, Free, Serum/ Serum free light chains (SFLC)	3079	3623	3623	Laboratory Investigation
245	LB242	Serum IgE Level	291	342	342	Laboratory Investigation
246	LB243	N-terminal pro BNP (NT-pro BNP / Brain natriuretic peptide (BNP)	1584	1863	1863	Laboratory Investigation
247	LB244	HCV RNA Quantitative	1411	1661	1661	Laboratory Investigation
248	LB245	Tacrolimus Level	2023	2381	2381	Laboratory Investigation
249	LB246	Protein Creatinine Ratio (PCR), Urine / Albumin Creatinine Ratio (ACR), Urine	116	137	137	Laboratory Investigation
250	LB247	HLA B27 (PCR)	440	518	518	Laboratory Investigation
251	LB248	Procalcitonin	1584	1863	1863	Laboratory Investigation
252	LB249	TORCH Test	985	1159	1159	Laboratory Investigation
253	LB250	Anti –Smooth Muscle Antibody Test (ASMA)	1117	1314	1314	Laboratory Investigation
254	LB251	C ANCA-IFA	1148	1350	1350	Laboratory Investigation
255	LB252	P ANCA-IFA	1148	1350	1350	Laboratory Investigation
256	LB253	Angiotensin converting enzyme (ACE)	765	900	900	Laboratory Investigation
257	LB254	Extractable Nuclear Antigens (ENA) - Quantitative	3519	4140	4140	Laboratory Investigation
258	LB255	Chromogranin A	3825	4500	4500	Laboratory Investigation
259	LB256	Faecal calprotectin	2088	2457	2457	Laboratory Investigation
260	LB257	C3-COMPLEMENT	497	585	585	Laboratory Investigation
261	LB258	C4-COMPLEMENT	497	585	585	Laboratory Investigation
262	LB259	H1N1 (RT-PCR)	829	976	976	Laboratory Investigation
263	LB260	Anti HEV IgM	765	900	900	Laboratory Investigation

CGHS rates for Tier II (Y City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
264	LB261	Anti HAV IgM	574	675	675	Laboratory Investigation
265	LB262	HBsAg Quantitative	497	585	585	Laboratory Investigation
266	LB263	Typhidot IgM	306	360	360	Laboratory Investigation
267	LB264	Hepatitis B Core Antibody (HBcAb) Level (Hepatitis B Core IgM Antibody)	367	432	432	Laboratory Investigation
268	LB265	Hepatitis B surface antibody (anti HBs)	497	585	585	Laboratory Investigation
269	LB266	Free Triiodothyronine (FT3)	96	113	113	Laboratory Investigation
270	LB267	Free Thyroxine (FT4)	96	113	113	Laboratory Investigation
271	LB268	Widal Test	54	63	63	Laboratory Investigation
272	LB269	Dengue NS1 Ag	306	360	360	Laboratory Investigation
273	LB270	Dengue IgM and Ig G	612	720	720	Laboratory Investigation
274	LB271	Interleukin 6 (IL 6)	1224	1440	1440	Laboratory Investigation
275	LB272	Covid Antibody Test	536	630	630	Laboratory Investigation
276	LB273	Cryoglobulins	765	900	900	Laboratory Investigation
277	LB274	Cytogenetics	3825	4500	4500	Laboratory Investigation
278	LB275	Plasma Free Normetanephrine	1760	2070	2070	Laboratory Investigation
279	LB276	Plasma Metanephrines	1760	2070	2070	Laboratory Investigation
280	LB277	PLA2 receptor antibody quantitative	3213	3780	3780	Laboratory Investigation
281	LB278	Allergic Bronchopulmonary Aspergillosis (ABPA) Panel	2219	2610	2610	Laboratory Investigation
282	LB279	Allergy Food Screening Panel	4590	5400	5400	Laboratory Investigation
283	LB280	AMA (Anti Mitochondrial Antibody)	765	900	900	Laboratory Investigation
284	LB281	AMH (Anti- Mullerian Hormone)	765	900	900	Laboratory Investigation
285	LB282	ANA BLOT	2295	2700	2700	Laboratory Investigation
286	LB283	ANA Profile	2295	2700	2700	Laboratory Investigation
287	LB284	Anti GBM (Glomerular Basement Membrane) Antibody	1148	1350	1350	Laboratory Investigation
288	LB285	Anti LKM (Liver Kidney Microsome) Ab	1148	1350	1350	Laboratory Investigation
289	LB286	Anti Parietal Cell Antibodies	1530	1800	1800	Laboratory Investigation
290	LB287	Anti Intrinsic Factor Antibodies	1530	1800	1800	Laboratory Investigation
291	LB288	ASO Titre /ASLO Titre	413	486	486	Laboratory Investigation

CGHS rates for Tier II (Y City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
292	LB289	Aspergillus Fumigatus Specific IgE	1186	1395	1395	Laboratory Investigation
293	LB290	Autoimmune Encephalitis Panel	13005	15300	15300	Laboratory Investigation
294	LB291	Autoimmune Hepatitis Profile	2264	2664	2664	Laboratory Investigation
295	LB292	Beta-D-Glucan Assay	11475	13500	13500	Laboratory Investigation
296	LB293	C1 Esterase inhibitor (Quantitative)	1836	2160	2160	Laboratory Investigation
297	LB294	CMV Quantitative (Viral load) Test	1760	2070	2070	Laboratory Investigation
298	LB295	Double Marker (Beta-hCG,PAPP-A)	1530	1800	1800	Laboratory Investigation
299	LB296	Quadruple test (AFP,HCG,UE3,Inhibin A)	1836	2160	2160	Laboratory Investigation
300	LB297	HBeAb (Hepatitis B envelope Antibody)	275	324	324	Laboratory Investigation
301	LB298	HBeAg (Hepatitis B envelope Antigen)	275	324	324	Laboratory Investigation
302	LB299	HIAA 24 Hours Urinary	1760	2070	2070	Laboratory Investigation
303	LB300	HIV Viral Load by PCR	3825	4500	4500	Laboratory Investigation
304	LB301	HSV 1 & 2 IgG	627	738	738	Laboratory Investigation
305	LB302	Hypersensitive Pneumonitis Panel	5508	6480	6480	Laboratory Investigation
306	LB303	IgG4	1530	1800	1800	Laboratory Investigation
307	LB304	Inhibin A	689	810	810	Laboratory Investigation
308	LB305	Inhibin B	1454	1710	1710	Laboratory Investigation
309	LB306	Scrub Typhus IgM	1224	1440	1440	Laboratory Investigation
310	LB307	Interferon Gamma Release Assay (IGRA)	2295	2700	2700	Laboratory Investigation
311	LB308	KOH Mount	115	135	135	Laboratory Investigation
312	LB309	Serum AMA M2 (IFA Method)	1530	1800	1800	Laboratory Investigation
313	LB310	Serum Gastrin	918	1080	1080	Laboratory Investigation
314	LB311	Serum Haptoglobin Levels	765	900	900	Laboratory Investigation
315	LB312	Skin Prick Test for Allergy	1377	1620	1620	Laboratory Investigation
316	LB313	Myositis Profile (Up to 16 Antigens)	6120	7200	7200	Laboratory Investigation
317	LB314	Paraneoplastic Panel	7650	9000	9000	Laboratory Investigation
318	LB315	TSH Receptor Antibody	918	1080	1080	Laboratory Investigation
319	LB316	Anti-Nuclear Antibodies - IFA	1224	1440	1440	Laboratory Investigation

CGHS rates for Tier II (Y City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
320	LB317	Autoimmune Liver Diseases Profile	3825	4500	4500	Laboratory Investigation
321	LB318	Citrate Urine 24 Hour	880	1035	1035	Laboratory Investigation
322	LB319	Comprehensive Allergy Panel	5355	6300	6300	Laboratory Investigation
323	LB320	Comprehensive Myeloma Protein Panel	5355	6300	6300	Laboratory Investigation
324	LB321	DCP (DES Gamma-Carboxy- Prothrombin)	2563	3015	3015	Laboratory Investigation
325	LB322	Desmoglein (DSG) 1 And 3 Antibody	4131	4860	4860	Laboratory Investigation
326	LB323	Galactomannan	2379	2799	2799	Laboratory Investigation
327	LB324	SCL 70 Antibody	1285	1512	1512	Laboratory Investigation
328	LB325	Serum Chromogranin A	2907	3420	3420	Laboratory Investigation
329	LB326	SSA- Antibody Ro Serum Test	1109	1305	1305	Laboratory Investigation
330	LB327	SSB- Antibody La Serum Test	1109	1305	1305	Laboratory Investigation
331	LB328	Stool for Clostridium difficile Toxin	2173	2556	2556	Laboratory Investigation
332	LB329	TPHA	306	360	360	Laboratory Investigation
333	LB330	UGT1A1 Gene Analysis	4590	5400	5400	Laboratory Investigation
334	LB331	Urine For Myoglobin	421	495	495	Laboratory Investigation
335	LB332	Leptospira Ig M	765	900	900	Laboratory Investigation
336	LB333	Chikungunya Ig M	765	900	900	Laboratory Investigation
337	LB334	Weil Felix Agglutination Test	383	450	450	Laboratory Investigation
338	LB335	Continuous Glucose Monitoring for 2 Weeks	3060	3600	3600	Laboratory Investigation
339	RI001	2D echocardiography	1128	1328	1328	Radiological Investigation
340	RI002	Fetal Echo	1224	1440	1440	Radiological Investigation
341	RI003	2D Transoesophageal Echocardiography (TEE)	1262	1485	1485	Radiological Investigation
342	RI004	3D Transoesophageal Echocardiography (TEE)	1262	1485	1485	Radiological Investigation
343	RI005	Stress Echo- exercise	1836	2160	2160	Radiological Investigation
344	RI006	Stress Echo- pharmacological / D Stress Echo	2295	2700	2700	Radiological Investigation
345	RI007	Stress Myocardial Perfusion Imaging (MPI)- exercise	7038	8280	8280	Radiological Investigation
346	RI008	Stress Myocardial Perfusion Imaging (MPI) - pharmacological	7038	8280	8280	Radiological Investigation
347	RI009	CT Coronary Angiography including Calcium Score Test	7038	8280	8280	Radiological Investigation

CGHS rates for Tier II (Y City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
348	RI010	Cardiac CT scan	4973	5850	5850	Radiological Investigation
349	RI011	MRI Cardiac	6120	7200	7200	Radiological Investigation
350	RI012	Stress Cardiac MRI	7038	8280	8280	Radiological Investigation
351	RI013	Cardiac PET	7038	8280	8280	Radiological Investigation
352	RI014	USG Transvaginal sonography (TVS for Follicular monitoring /aspiration) /TVS for follicular monitoring/pelvic pathology/ET measurement	765	900	900	Radiological Investigation
353	RI015	Growth scan (including BPP, AFI, Doppler)	1530	1800	1800	Radiological Investigation
354	RI016	1st trimester scan-dating scan/NT scan/Early pregnancy scan	536	630	630	Radiological Investigation
355	RI017	USG Colour Doppler Pregnancy / Fetal Doppler/Umbilical Doppler/Uterine Vessel Doppler	1281	1508	1508	Radiological Investigation
356	RI018	Biophysical score / Biophysical profile test (BPP test)	1148	1350	1350	Radiological Investigation
357	RI019	USG Obstetrics for Anomalies scan	1530	1800	1800	Radiological Investigation
358	RI020	USG Whole Abdomen Including Pelvis and post Void urine	612	720	720	Radiological Investigation
359	RI021	Pelvic USG (gynae, infertility, prostate , KUB with post- void residual (PVR) etc).	383	450	450	Radiological Investigation
360	RI022	USG Small parts (scrotum, thyroid, parathyroid etc)	589	693	693	Radiological Investigation
361	RI023	USG Large Parts (Joints/Chest,...etc)	612	720	720	Radiological Investigation
362	RI024	USG Neonatal spine	765	900	900	Radiological Investigation
363	RI025	USG Breast including relevant Lymph nodes- Bilateral/Unilateral	612	720	720	Radiological Investigation
364	RI026	USG Hysterosalpingography (HSG)	1836	2160	2160	Radiological Investigation
365	RI027	Fibroscan Liver	880	1035	1035	Radiological Investigation
366	RI028	Carotid Doppler Bilateral	765	900	900	Radiological Investigation
367	RI029	Arterial Colour Doppler Bilateral	765	900	900	Radiological Investigation
368	RI030	Venous Colour Doppler Bilateral	765	900	900	Radiological Investigation
369	RI031	Colour Doppler, renal arteries/any other organ	765	900	900	Radiological Investigation
370	RI032	X Ray Abdomen AP Supine or Erect (One film)	191	225	225	Radiological Investigation

CGHS rates for Tier II (Y City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
371	RI033	X Ray Abdomen Lateral view (one film)	161	189	189	Radiological Investigation
372	RI034	X Ray Chest PA /AP/ Oblique view (one film)	176	207	207	Radiological Investigation
373	RI035	X Ray Chest Lateral (one film)	176	207	207	Radiological Investigation
374	RI036	X Ray Mastoids: Towne view, oblique views (3 films)	383	450	450	Radiological Investigation
375	RI037	X Ray Extremities (Hand/Leg/Feet/Finger/Toe) bones & Joints (Hip/ Knee/Ankle / shoulder/ Wrist / fingers/Toes, etc) AP & Lateral views (standing or weight bearing)(Two films)	291	342	342	Radiological Investigation
376	RI038	X Ray Pelvis AP (one film)	153	180	180	Radiological Investigation
377	RI039	X Ray Temporomandibular (TM) Joints (one film)	191	225	225	Radiological Investigation
378	RI040	X Ray Abdomen & Pelvis for KUB	180	212	212	Radiological Investigation
379	RI041	X Ray Skull AP & Lateral (2 films)/ Extra oral radiographs - All skull views, TMJ, Lateral oblique [Dental]	306	360	360	Radiological Investigation
380	RI042	X Ray Spine AP & Lateral (2 films)	306	360	360	Radiological Investigation
381	RI043	X Ray Paranasal sinuses (PNS) view (1 film)	153	180	180	Radiological Investigation
382	RI044	Barium Swallow	918	1080	1080	Radiological Investigation
383	RI045	Barium Upper GI study	1148	1350	1350	Radiological Investigation
384	RI046	Barium Upper GI study (Double contrast)	1530	1800	1800	Radiological Investigation
385	RI047	Barium Meal follow through	1530	1800	1800	Radiological Investigation
386	RI048	Barium Enema (Single contrast/double contrast)	1530	1800	1800	Radiological Investigation
387	RI049	Small bowel enteroclysis	1530	1800	1800	Radiological Investigation
388	RI050	General:Fistulography / Sinography/Sialography/Dacrocystography/ T-Tube cholangiogram/Nephrostogram	972	1143	1143	Radiological Investigation
389	RI051	Intravenous Pyelography (IVP)	1262	1485	1485	Radiological Investigation
390	RI052	Micturating Cystourethrography (MCU)	857	1008	1008	Radiological Investigation
391	RI053	Retrograde Urethrography (RGU)	857	1008	1008	Radiological Investigation
392	RI054	Contrast Hystero-Salpingography (HSG)	1530	1800	1800	Radiological Investigation
393	RI055	X ray Arthrography	1530	1800	1800	Radiological Investigation
394	RI056	Ortho Scanogram	1293	1521	1521	Radiological Investigation

CGHS rates for Tier II (Y City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
395	RI057	Cephalography	268	315	315	Radiological Investigation
396	RI058	Myelography	1913	2250	2250	Radiological Investigation
397	RI059	Diagnostic Digital Subtraction Angiography (DSA) cerebral vessels	10251	12060	12060	Radiological Investigation
398	RI060	X Ray Mammography – Bilateral/Unilateral	1052	1238	1238	Radiological Investigation
399	RI061	MRI Mammography	3825	4500	4500	Radiological Investigation
400	RI062	CT Scan Head/ Brain-Without Contrast / NCCT Head/Brain	792	932	932	Radiological Investigation
401	RI063	CT Scan Head / Brain- with Contrast -including CT angiography	1683	1980	1980	Radiological Investigation
402	RI064	CT Scan Chest - without contrast (for lungs)	1530	1800	1800	Radiological Investigation
403	RI065	High Resolution computed Tomography (HRCT Chest)	1530	1800	1800	Radiological Investigation
404	RI066	Contrast Enhanced Computed Tomograpy (CECT) Chest (Including CD)	2199	2588	2588	Radiological Investigation
405	RI067	CT Scan Lower Abdomen (incl. Pelvis) With Contrast/ CT KUB with Contrast	3443	4050	4050	Radiological Investigation
406	RI068	CT Scan Lower Abdomen (Incl. Pelvis) Without Contrast / CT KUB without Contrast	2678	3150	3150	Radiological Investigation
407	RI069	CT Scan Whole Abdomen Without Contrast	2639	3105	3105	Radiological Investigation
408	RI070	CT Scan Whole Abdomen With Contrast	3959	4658	4658	Radiological Investigation
409	RI071	Triple Phase CT abdomen	3959	4658	4658	Radiological Investigation
410	RI072	CT Urography	3443	4050	4050	Radiological Investigation
411	RI073	CT Scan Angiography Chest	3959	4658	4658	Radiological Investigation
412	RI074	CT Scan Angiography Abdomen	3959	4658	4658	Radiological Investigation
413	RI075	CT Angiography Entire Aorta (CT Aortogram)	7650	9000	9000	Radiological Investigation
414	RI076	CT Scan Enteroclysis	5279	6210	6210	Radiological Investigation
415	RI077	CT Scan Neck – Without Contrast	1913	2250	2250	Radiological Investigation
416	RI078	CT Scan Neck – With Contrast	2678	3150	3150	Radiological Investigation
417	RI079	CT Angio-Neck Vessels	4590	5400	5400	Radiological Investigation
418	RI080	CT Scan Orbits - Without Contrast	1683	1980	1980	Radiological Investigation
419	RI081	CT Scan Orbits - With Contrast	2448	2880	2880	Radiological Investigation
420	RI082	CT Scan of Para Nasal Sinuses (CT PNS)- Without Contrast	1760	2070	2070	Radiological Investigation

CGHS rates for Tier II (Y City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
421	RI083	CT Scan of Para Nasal Sinuses (CT PNS)- With Contrast	2525	2970	2970	Radiological Investigation
422	RI084	CT Scan Spine (Cervical, Dorsal, Lumbar,Sacral)–without Contrast	2142	2520	2520	Radiological Investigation
423	RI085	CT Scan Temporal bone – without contrast	1913	2250	2250	Radiological Investigation
424	RI086	CT Scan / Cone Beam CT (CBCT) Dental	1148	1350	1350	Radiological Investigation
425	RI087	CT Scan Limbs -Without Contrast	2142	2520	2520	Radiological Investigation
426	RI088	CT Scan Limbs -With Contrast including CT angiography	4437	5220	5220	Radiological Investigation
427	RI089	MRI Head / Brain – Without Contrast	2104	2475	2475	Radiological Investigation
428	RI090	MRI Head / Brain– With Contrast	3825	4500	4500	Radiological Investigation
429	RI091	MRI Orbits – Without Contrast	1431	1683	1683	Radiological Investigation
430	RI092	MRI Orbits – With Contrast	3825	4500	4500	Radiological Investigation
431	RI093	MRI Nasopharynx and PNS – Without Contrast	2678	3150	3150	Radiological Investigation
432	RI094	MRI Nasopharynx and PNS – With Contrast	3825	4500	4500	Radiological Investigation
433	RI095	MR for Salivary Glands with Sialography/Maxillofacial MRI	3825	4500	4500	Radiological Investigation
434	RI096	MRI Neck - Without Contrast	2678	3150	3150	Radiological Investigation
435	RI097	MRI Neck- with contrast	4399	5175	5175	Radiological Investigation
436	RI098	MRI Shoulder – Without contrast	2678	3150	3150	Radiological Investigation
437	RI099	MRI Shoulder – With contrast	3825	4500	4500	Radiological Investigation
438	RI100	MRI shoulder both Joints - Without contrast	3060	3600	3600	Radiological Investigation
439	RI101	MRI Shoulder both joints – With contrast	4590	5400	5400	Radiological Investigation
440	RI102	MRI Wrist Single joint - Without contrast	2525	2970	2970	Radiological Investigation
441	RI103	MRI Wrist Single joint - With contrast	3825	4500	4500	Radiological Investigation
442	RI104	MRI Wrist both joints - Without contrast	3060	3600	3600	Radiological Investigation
443	RI105	MRI Wrist Both joints - With contrast	4399	5175	5175	Radiological Investigation
444	RI106	MRI knee Single joint - Without contrast	2295	2700	2700	Radiological Investigation
445	RI107	MRI knee Single joint - With contrast	4399	5175	5175	Radiological Investigation
446	RI108	MRI knee both joints - Without contrast	3060	3600	3600	Radiological Investigation
447	RI109	MRI knee both joints - With contrast	4399	5175	5175	Radiological Investigation
448	RI110	MRI Ankle Single joint - Without contrast	2678	3150	3150	Radiological Investigation

CGHS rates for Tier II (Y City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
449	RI111	MRI Ankle single joint - With contrast	3825	4500	4500	Radiological Investigation
450	RI112	MRI Ankle both joints - With contrast	4973	5850	5850	Radiological Investigation
451	RI113	MRI Ankle both joints - Without contrast	2678	3150	3150	Radiological Investigation
452	RI114	MRI Hip - With contrast	3825	4500	4500	Radiological Investigation
453	RI115	MRI Hip – without contrast	2678	3150	3150	Radiological Investigation
454	RI116	MRI Pelvis – Without Contrast	2678	3150	3150	Radiological Investigation
455	RI117	MRI Pelvis – with contrast	4399	5175	5175	Radiological Investigation
456	RI118	MRI Extremities - With contrast	4399	5175	5175	Radiological Investigation
457	RI119	MRI Extremities - Without contrast	2678	3150	3150	Radiological Investigation
458	RI120	MRI Temporomandibular – B/L - With contrast / MRI TMJ (Double Joint) with contrast	3825	4500	4500	Radiological Investigation
459	RI121	MRI Temporomandibular – B/L - Without contrast / MRI -TMJ(Double Joint) without contrast	2678	3150	3150	Radiological Investigation
460	RI122	MR Temporal Bone/ Inner ear with contrast	3825	4500	4500	Radiological Investigation
461	RI123	MRI Temporal Bone/ Inner ear without contrast	2678	3150	3150	Radiological Investigation
462	RI124	MRI Abdomen – Without Contrast	2678	3150	3150	Radiological Investigation
463	RI125	MRI Abdomen – With Contrast	4399	5175	5175	Radiological Investigation
464	RI126	MRI-Prostate (Multi-parametric) (Including CD)	5279	6210	6210	Radiological Investigation
465	RI127	MRI Breast - With Contrast	3825	4500	4500	Radiological Investigation
466	RI128	MRI Breast - Without Contrast	2678	3150	3150	Radiological Investigation
467	RI129	MRI whole Spine Screening- Without Contrast	1530	1800	1800	Radiological Investigation
468	RI130	MRI Chest – Without Contrast	2678	3150	3150	Radiological Investigation
469	RI131	MRI Chest – With Contrast	3825	4500	4500	Radiological Investigation
470	RI132	MRI Whole spine – Without Contrast	3366	3960	3960	Radiological Investigation
471	RI133	MRI Cervical/ Cervico Dorsal Spine – With Contrast	3825	4500	4500	Radiological Investigation
472	RI134	MRI Dorsal/ Dorso Lumbar Spine - Without Contrast	2678	3150	3150	Radiological Investigation
473	RI135	MRI Dorsal/ Dorso Lumbar Spine – With Contrast	3825	4500	4500	Radiological Investigation
474	RI136	MRI Lumbar/ Lumbo-Sacral Spine – Without Contrast	2678	3150	3150	Radiological Investigation

CGHS rates for Tier II (Y City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
475	RI137	MRI Lumbar/ Lumbo-Sacral Spine – With Contrast	4399	5175	5175	Radiological Investigation
476	RI138	Whole body MRI (For oncological workup)	7038	8280	8280	Radiological Investigation
477	RI139	MR cholecysto-pancreatography (MRCP)	6503	7650	7650	Radiological Investigation
478	RI140	MRI Angiography - with contrast	4399	5175	5175	Radiological Investigation
479	RI141	MR Enteroclysis	3825	4500	4500	Radiological Investigation
480	RI142	MRI DEFECOGRAPHY	5355	6300	6300	Radiological Investigation
481	RI143	MRI FISTULOGRAM	3443	4050	4050	Radiological Investigation
482	RI144	MRI SPECTROSCOPY	2295	2700	2700	Radiological Investigation
483	RI145	Dexa Scan Bone Densitometry - Two sites	1530	1800	1800	Radiological Investigation
484	RI146	Dexa Scan Bone Densitometry - Three sites (Spine, Hip &extremity)	1913	2250	2250	Radiological Investigation
485	RI147	Dexa Scan Bone Densitometry Whole body	2295	2700	2700	Radiological Investigation
486	PI001	Pulmonary Function Test (PFT) / (Spirometry with Diffusing Capacity of the Lungs for Carbon monoxide (DLCO)	383	450	450	Pulmonology Investigation
487	PI002	Lung Ventilation & Perfusion Scan (V/Q Scan)	4590	5400	5400	Pulmonology Investigation
488	PI003	Lung Perfusion Scan	3825	4500	4500	Pulmonology Investigation
489	PI004	6 Minute Walk Test	383	450	450	Pulmonology Investigation
490	PI005	FeNO Breathing Test	551	648	648	Pulmonology Investigation
491	PP001	Endo bronchial Ultrasound (EBUS) -Trans bronchial needle aspiration (TBNA) - Excluding the cost of Needle	15300	18000	18000	Pulmonology Procedure
492	PP002	Video Bronchoscopy with BAL	8415	9900	9900	Pulmonology Procedure
493	NM001	Whole Body Bone Scan with SPECT.	3825	4500	4500	Nuclear Medicine Investigation
494	NM002	Three phase whole body Bone Scan	4590	5400	5400	Nuclear Medicine Investigation
495	NM003	Brain Perfusion SPECT Scan with Technetium 99m radiopharmaceuticals.	10251	12060	12060	Nuclear Medicine Investigation
496	NM004	Radionuclide Cisternography for CSF leak	5202	6120	6120	Nuclear Medicine Investigation

CGHS rates for Tier II (Y City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
497	NM005	Renal Cortical Scintigraphy with Technetium 99m Dimercaptosuccinic acid (DMSA)/DTPA	3060	3600	3600	Nuclear Medicine Investigation
498	NM006	Dynamic Renography.	3060	3600	3600	Nuclear Medicine Investigation
499	NM007	Dynamic Renography with Diuretic.	3060	3600	3600	Nuclear Medicine Investigation
500	NM008	Dynamic Renography with Captopril	5202	6120	6120	Nuclear Medicine Investigation
501	NM009	Testicular Scan with Technetium 99m Pertechnetate	1301	1530	1530	Nuclear Medicine Investigation
502	NM010	Thyroid Uptake measurements with 131-Iodine.	1913	2250	2250	Nuclear Medicine Investigation
503	NM011	Thyroid Scan with Technetium 99m Pertechnetate	1454	1710	1710	Nuclear Medicine Investigation
504	NM012	Iodine-131 Whole Body Scan	10251	12060	12060	Nuclear Medicine Investigation
505	NM013	Whole Body Scan with MIBG	10251	12060	12060	Nuclear Medicine Investigation
506	NM014	Parathyroid Scan	5596	6584	6584	Nuclear Medicine Investigation
507	NM015	Scintimammography.	4590	5400	5400	Nuclear Medicine Investigation
508	NM016	Indium labelled octreotide Scan	55080	64800	64800	Nuclear Medicine Investigation
509	NM017	FDG Whole body PET CT Scan	10997	12938	12938	Nuclear Medicine Investigation
510	NM018	Brain / Heart FDG PET CT Scan	10997	12938	12938	Nuclear Medicine Investigation

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Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
511	NM019	Gallium-68 Peptide PET / CT imaging for Neuroendocrine Tumour	10997	12938	12938	Nuclear Medicine Investigation
512	NM020	PSMA PET CT Scan	11475	13500	13500	Nuclear Medicine Investigation
513	NM021	F-DOPA PET-CT scan	11475	13500	13500	Nuclear Medicine Investigation
514	BY001	Skin Biopsy	956	1125	1125	Biopsies
515	BY002	Punch/Wedge biopsy	2295	2700	2700	Biopsies
516	BY003	Excision Biopsy of Ulcers	3825	4500	4500	Biopsies
517	BY004	Excision Biopsy of Superficial Lumps	7038	8280	8280	Biopsies
518	BY005	Incision Biopsy of Growths/Ulcers	3825	4500	4500	Biopsies
519	BY006	Bone Marrow Aspiration and Biopsy	6503	7650	7650	Biopsies
520	BY007	Scalene Node Biopsy	7038	8280	8280	Biopsies
521	BY008	Liver Biopsy	6503	7650	7650	Biopsies
522	BY009	Muscle Biopsy	1913	2250	2250	Biopsies
523	BY010	Trucut Needle Biopsy- (excluding the cost of Needle/Biopsy Gun if used)	2945	3465	3465	Biopsies
524	RP001	USG Guided Intervention- Diagnostic	765	900	900	Interventional Radiological Procedure
525	RP002	USG Guided Intervention -Therapeutic	1530	1800	1800	Interventional Radiological Procedure
526	RP003	USG Guided Intervention - Specialized Procedures excluding cost of Catheter or biopsy gun	2295	2700	2700	Interventional Radiological Procedure
527	RP004	CT Guided biopsy including all the consumables	7038	8280	8280	Interventional Radiology Procedure
528	RP005	CT Guided Intervention -Percutaneous catheter drainage/tube placement excluding the cost of tube /catheter	2678	3150	3150	Interventional Radiological Procedure
529	RP006	Percutaneous transhepatic cholangiography (PTC)	1377	1620	1620	Interventional Radiological Procedure

CGHS rates for Tier II (Y City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
530	RP007	Transarterial Chemoembolization (TACE)	40545	47700	47700	Interventional Radiological Procedure
531	CA001	A, B, DR Molecular Typing PCR - SSP	7891	9284	9284	Oncology Investigations
532	CA002	ABL Kinase Domain Mutation for Chronic Myeloid leukemia (TKI Resistance, Imatinib Resistance	6197	7290	7290	Oncology Investigations
533	CA003	ABL Kinase Domain Mutation for Ph Positive Acute Lymphoblastic leukemia (TKI Resistance, I	6197	7290	7290	Oncology Investigations
534	CA004	Acute Leukemia karyotyping	4242	4991	4991	Oncology Investigations
535	CA005	Acute Leukemia mutation detection (per gene)ASXL1 /c-KIT/DNMT3A/ IDH1 and IDH2 /K RAS and N RAS mutation detection	4123	4851	4851	Oncology Investigations
536	CA006	Acute Leukemia RUNX1 mutation detection	4123	4851	4851	Oncology Investigations
537	CA007	Acute Leukemia TET2 mutation detection	17610	20718	20718	Oncology Investigations
538	CA008	Acute Leukemia TP53 mutation detection	17610	20718	20718	Oncology Investigations
539	CA009	Acute Lymphoblastic leukemia karyotyping	4242	4991	4991	Oncology Investigations
540	CA010	Acute Lymphoblastic Leukemia Mutation Detection	8446	9936	9936	Oncology Investigations
541	CA011	Acute Lymphoblastic Leukemia Transcript Identification	2310	2718	2718	Oncology Investigations
542	CA012	Acute Myeloid Leukemia (AML) Panel	10228	12033	12033	Oncology Investigations
543	CA013	ALK -1	3588	4221	4221	Oncology Investigations
544	CA014	ALK rearrangement: 2p23	3588	4221	4221	Oncology Investigations
545	CA015	B-cell Acute Lymphoblastic Leukemia (B-ALL) Panel	8851	10413	10413	Oncology Investigations
546	CA016	BCL3 rearrangement 19q13.3 / BCL6 rearrangement: 3q27	2666	3137	3137	Oncology Investigations
547	CA017	BCOR alteration	4628	5445	5445	Oncology Investigations
548	CA018	BCR/ABL (Ph) duplication, trisomy 8, trisomy 21, TP53 deletion	4663	5486	5486	Oncology Investigations
549	CA019	BCR/ABL Ph: t(9;22)	2666	3137	3137	Oncology Investigations
550	CA020	BCR-ABL by PCR-Quantitative	3060	3600	3600	Oncology Investigations
551	CA021	BRAF	6885	8100	8100	Oncology Investigations
552	CA022	BRCA1 & BRCA2	15300	18000	18000	Oncology Investigations

CGHS rates for Tier II (Y City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
553	CA023	C3d Single Allele Antibody for HLA Class I (C3dLSA Class I) /C3d Single Allele Antibody for HLA Class II (C3dLSA Class II)	13388	15750	15750	Oncology Investigations
554	CA024	CAN ASSIST	38250	45000	45000	Oncology Investigations
555	CA025	CCND1/IgH: t(11;14)	3588	4221	4221	Oncology Investigations
556	CA026	CD 19 and CD 20	1148	1350	1350	Oncology Investigations
557	CA027	Cell line karyotyping	8492	9990	9990	Oncology Investigations
558	CA028	Chimerism Analysis	1178	1386	1386	Oncology Investigations
559	CA029	Chromosomal breakage (fragility) studies in Fanconi's Anemia/Aplastic Anemia	4242	4991	4991	Oncology Investigations
560	CA030	Chronic Lymphocytic Leukemia (CLL) Panel	8851	10413	10413	Oncology Investigations
561	CA031	Chronic Lymphocytic Leukemia Comprehensive Mutation Profile (IGVH Gene Mutation & Usage, T	25490	29988	29988	Oncology Investigations
562	CA032	Chronic Lymphocytic Leukemia IGVH Mutation Detection	4858	5715	5715	Oncology Investigations
563	CA033	Chronic Lymphoproliferative disorder IGVH Mutation Detection	4858	5715	5715	Oncology Investigations
564	CA034	Chronic Lymphoproliferative disorder NOTCH1 mutation / NOTCH2 mutation	4123	4851	4851	Oncology Investigations
565	CA035	Chronic Lymphoproliferative disorder SF3B1 mutation	4123	4851	4851	Oncology Investigations
566	CA036	Chronic Lymphoproliferative disorder TP53 mutation	17610	20718	20718	Oncology Investigations
567	CA037	CLINICAL EXOME SEQUENCING	11475	13500	13500	Oncology Investigations
568	CA038	CLL PANEL FISH	7650	9000	9000	Oncology Investigations
569	CA039	CML Blast Crisis karyotyping	4242	4991	4991	Oncology Investigations
570	CA040	Combined High Sensitivity JAK2 V617F and Exon12 Mutation Detection	5225	6147	6147	Oncology Investigations
571	CA041	Comprehensive Molecular Testing	14780	17388	17388	Oncology Investigations
572	CA042	Comprehensive Next Generation sequencing assay for Hematolymphoid malignancies	20655	24300	24300	Oncology Investigations
573	CA043	Constitutional karyotyping	4242	4991	4991	Oncology Investigations
574	CA044	Custom Sequencing Assay	8446	9936	9936	Oncology Investigations
575	CA045	DICER1 Mutation	2968	3492	3492	Oncology Investigations

CGHS rates for Tier II (Y City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
576	CA046	Donor Specific Antibodies (DSA)	6120	7200	7200	Oncology Investigations
577	CA047	EGFR Mutation DETECTION	7268	8550	8550	Oncology Investigations
578	CA048	EGFR Resistance Mutation (T790m Mutation Analysis)	6120	7200	7200	Oncology Investigations
579	CA049	ER PR Her2 Neu	2410	2835	2835	Oncology Investigations
580	CA050	ER/PR/Her2neu, Ki67	3825	4500	4500	Oncology Investigations
581	CA051	Extended Immune subset for Post Allogenic Stem Cell Transplant Monitoring	3825	4500	4500	Oncology Investigations
582	CA052	Factor V Leiden Mutation Detection	5049	5940	5940	Oncology Investigations
583	CA053	FISH for 1p33/TAL1 deletion	3810	4482	4482	Oncology Investigations
584	CA054	FISH FOR HER2 Neu	7650	9000	9000	Oncology Investigations
585	CA055	FISH for t(10;11)(p12;q14)/MLLT10(AF10)/PICALM	3810	4482	4482	Oncology Investigations
586	CA056	FISH for t(11;19)(q23;p13.1)/KMT2A/ELL	3810	4482	4482	Oncology Investigations
587	CA057	FISH for t(5;11)(q35;p15.5) NUP98/NSD1	3810	4482	4482	Oncology Investigations
588	CA058	FISH for t(6;14)(p21;q32) IGH/CCND3	3810	4482	4482	Oncology Investigations
589	CA059	FISH on Bone marrow Smear(1 marker)	2666	3137	3137	Oncology Investigations
590	CA060	FISH on bone marrow smear(2 markers)	4188	4928	4928	Oncology Investigations
591	CA061	FISH on FFPE - Block /Slide (2 markers)	3641	4284	4284	Oncology Investigations
592	CA062	FISH PANEL FOR MYELOMA	10710	12600	12600	Oncology Investigations
593	CA063	FISH Test for C19MC amplification	9754	11475	11475	Oncology Investigations
594	CA064	FISH test for CDKN2A	5699	6705	6705	Oncology Investigations
595	CA065	FISH test for CEN 10 loss - on Tissue	3175	3735	3735	Oncology Investigations
596	CA066	FISH test for ETV6 break-apart analysis - On Tissue	5332	6273	6273	Oncology Investigations
597	CA067	FISH test for MAML2 break-apart analysis - On Tissue	5477	6444	6444	Oncology Investigations
598	CA068	Fluorescent PCR + fragment length analysis per Amplicon	268	315	315	Oncology Investigations
599	CA069	GeneCORE Somatic 161 Gene Panel (NGS)	22950	27000	27000	Oncology Investigations
600	CA070	Hairy Cell Leukemia Mutation (BRAF V600E) Detection	2670	3141	3141	Oncology Investigations
601	CA071	Hematolymphoid Malignancy At Diagnosis- Cancer Cytogenetics Testing	13093	15404	15404	Oncology Investigations

CGHS rates for Tier II (Y City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
602	CA072	Hematolymphoid Malignancy Follow-up- Cancer Cytogenetics Testing	11475	13500	13500	Oncology Investigations
603	CA073	Hereditary Cancer Panel	9180	10800	10800	Oncology Investigations
604	CA074	High Sensitivity JAK2 Mutation Detection (V617F)	3527	4149	4149	Oncology Investigations
605	CA075	Histone Mutation Detection Assay	7095	8348	8348	Oncology Investigations
606	CA076	HLA C, DQB Molecular Typing PCR - SSP	5638	6633	6633	Oncology Investigations
607	CA077	HLA Disease Association Next Generation Sequencing HLA-A/B/DRB1/G	3596	4230	4230	Oncology Investigations
608	CA078	HLA Disease Association Sequence based Typing HLA A/B/DRB1	3672	4320	4320	Oncology Investigations
609	CA079	HLA Drug Hypersensitivity Next Generation Sequencing HLA-A/B/DRB1 HLA-A/B/DRB1/G	3596	4230	4230	Oncology Investigations
610	CA080	HLA Drug Hypersensitivity Typing HLA-A/B/DRB1	3672	4320	4320	Oncology Investigations
611	CA081	HLA Loss Chimerism	9180	10800	10800	Oncology Investigations
612	CA082	HLA-A, B, C, DRB1, DQB1, DPB1 (Sequence Based Typing - SBT)	11475	13500	13500	Oncology Investigations
613	CA083	HLA-A, B, DRB1 (Sequence Based Typing - SBT)	7650	9000	9000	Oncology Investigations
614	CA084	HLA-A, B, DRB1(Sequence Specific Oligonucleotide - SSO)	5967	7020	7020	Oncology Investigations
615	CA085	HLA-C, DQB1(Sequence Specific Oligonucleotide - SSO)	3978	4680	4680	Oncology Investigations
616	CA086	HRR Gene Test	23715	27900	27900	Oncology Investigations
617	CA087	IGH Characterization IGH/CCND1:t(11;14), IGH/BCL2:t(14;18),BCL6(3q27), MYC(8q24) (4markers	4055	4770	4770	Oncology Investigations
618	CA088	IgH/BCL2 :t(14;18)	3588	4221	4221	Oncology Investigations
619	CA089	IGHV Gene Mutation	5738	6750	6750	Oncology Investigations
620	CA090	Interphase FISH test for Chr. 1 copy number variations	8186	9630	9630	Oncology Investigations
621	CA091	IRFA/DUSP22 gene rearrangement by FISH	11919	14022	14022	Oncology Investigations
622	CA092	JAK2 Exon 12 Mutation Detection	3527	4149	4149	Oncology Investigations
623	CA093	JAK2V617 MUTATION, WITH REFLEX TO JAK2 EX-12,CALR EX-9 MUTATION AND MPL W515, S505 MUTATION	8798	10350	10350	Oncology Investigations
624	CA094	KI67	995	1170	1170	Oncology Investigations
625	CA095	KIR Typing	4437	5220	5220	Oncology Investigations

CGHS rates for Tier II (Y City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
626	CA096	KMT2A Characterization for AML	6040	7106	7106	Oncology Investigations
627	CA097	KMT2A Characterization for B-ALL	4663	5486	5486	Oncology Investigations
628	CA098	KRAS + NRAS + BRAF + Mutation Profile	10557	12420	12420	Oncology Investigations
629	CA099	Lineage specific Chimerism - B Cell, T Cell and NK Cells	5508	6480	6480	Oncology Investigations
630	CA100	Liquid Biopsy (Onco)	22950	27000	27000	Oncology Investigations
631	CA101	Lung Basic Panel By NGS	22950	27000	27000	Oncology Investigations
632	CA102	Lymphoma Panel	5332	6273	6273	Oncology Investigations
633	CA103	Lymphoplasmacytic Leukemia / Waldenstroms Macroglobulinemia Mutation (MYD88 L265P) Detecti	2670	3141	3141	Oncology Investigations
634	CA104	MDS Panel	5332	6273	6273	Oncology Investigations
635	CA105	MECOM (EVI1) rearrangement: inv(3)(q21.3q26.2)/t(3;3)	3588	4221	4221	Oncology Investigations
636	CA106	MGMT PCR	6227	7326	7326	Oncology Investigations
637	CA107	Miscellaneous Profile I(1 marker)	2666	3137	3137	Oncology Investigations
638	CA108	Miscellaneous profile II(2 markers)	4188	4928	4928	Oncology Investigations
639	CA109	MLPA per gene	3060	3600	3600	Oncology Investigations
640	CA110	Monosomy 5/deletion 5q	2666	3137	3137	Oncology Investigations
641	CA111	Monosomy 7/deletion 7q	2666	3137	3137	Oncology Investigations
642	CA112	MPN (Myelo Proliferative Neoplasm)PANEL	9180	10800	10800	Oncology Investigations
643	CA113	MSI (Micro Satellite Instability) and MMR (Mis Match Repair)	4973	5850	5850	Oncology Investigations
644	CA114	Multigene NGS Germline Panel	13770	16200	16200	Oncology Investigations
645	CA115	Multiple Myeloma (MM) Panel	11376	13383	13383	Oncology Investigations
646	CA116	Multiple Myeloma High Risk Markers (4 Markers)	4055	4770	4770	Oncology Investigations
647	CA117	Multiple Myeloma Screening Panel	6120	7200	7200	Oncology Investigations
648	CA118	MYD88 L265 Mutation Detection Test	5171	6084	6084	Oncology Investigations
649	CA119	Myelodysplastic Syndromes karyotyping	4242	4991	4991	Oncology Investigations
650	CA120	Next generation RNA sequencing assay for Chimeric Trancript in Hematolymphod malignancies	13005	15300	15300	Oncology Investigations

CGHS rates for Tier II (Y City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
651	CA121	Next Generation sequencing assay for Minimal residual disease(MRD) for NPM mutated AML	20655	24300	24300	Oncology Investigations
652	CA122	NGS HLA Typing	7650	9000	9000	Oncology Investigations
653	CA123	NGS Platform-extended Panel >50 gene	27540	32400	32400	Oncology Investigations
654	CA124	NGS Platform-limited Panel(10 Genes)	13770	16200	16200	Oncology Investigations
655	CA125	NRAS (Neuroblastoma RAS) Gene	2678	3150	3150	Oncology Investigations
656	CA126	Panel Reactive Antibodies (PRA) class I	2295	2700	2700	Oncology Investigations
657	CA127	Panel Reactive Antibodies (PRA) class II	2295	2700	2700	Oncology Investigations
658	CA128	PCR + Sanger Sequencing per Amplicon	650	765	765	Oncology Investigations
659	CA129	PDGFRA (4q12), PDGFRB (5q33), FGFR1 (8p11.2) rearrangement	4663	5486	5486	Oncology Investigations
660	CA130	PDGFRA rearrangement: 4q12	3588	4221	4221	Oncology Investigations
661	CA131	PDGFRB rearrangement: 5q33	3588	4221	4221	Oncology Investigations
662	CA132	PDL 1	3825	4500	4500	Oncology Investigations
663	CA133	PDL-1-28-8 (FDA Approved)	5738	6750	6750	Oncology Investigations
664	CA134	Ph: t(9;22) karyotyping	3026	3560	3560	Oncology Investigations
665	CA135	Ph-like ALL Panel (4 Markers)	4055	4770	4770	Oncology Investigations
666	CA136	PIK3CA GENE MUTATION	4131	4860	4860	Oncology Investigations
667	CA137	PIK3CA Mutation Testing	4361	5130	5130	Oncology Investigations
668	CA138	Ploidy analysis	3026	3560	3560	Oncology Investigations
669	CA139	PML-RARA t(15;17), variants	4005	4712	4712	Oncology Investigations
670	CA140	PRA Screen	2295	2700	2700	Oncology Investigations
671	CA141	PTPRT: Deletion 20q	3588	4221	4221	Oncology Investigations
672	CA142	RARA Variant - ZBTB16 / RARA : t(11;17) (1 marker)	2318	2727	2727	Oncology Investigations
673	CA143	RHOA Mutation Detection Assay	5332	6273	6273	Oncology Investigations
674	CA144	ROS 1	7436	8748	8748	Oncology Investigations
675	CA145	RQ PCR based assay for MRD monitoring of Acute Leukaemia	7268	8550	8550	Oncology Investigations
676	CA146	RQ-PCR BCR-ABL (P210)	8384	9864	9864	Oncology Investigations
677	CA147	RQ-PCR PML-RARA	8384	9864	9864	Oncology Investigations

CGHS rates for Tier II (Y City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
678	CA148	RT-PCR Multiplex, Acute Leukaemia Panel	5585	6570	6570	Oncology Investigations
679	CA149	RT-PCR Multiplex, BCR-ABL (P190, P210)	4858	5715	5715	Oncology Investigations
680	CA150	RT-PCR Nested, IGH Chain Gene Rearrangement /TCR Gene Rearrangement	3527	4149	4149	Oncology Investigations
681	CA151	Single Antigen Class I	9945	11700	11700	Oncology Investigations
682	CA152	Single Antigen Class II	9945	11700	11700	Oncology Investigations
683	CA153	Slide / Images for Second Opinion- Cancer Cytogenetics	704	828	828	Oncology Investigations
684	CA154	STR Panel studies	3404	4005	4005	Oncology Investigations
685	CA155	Surface Marker Complete Panel	9306	10949	10949	Oncology Investigations
686	CA156	Surface Marker Individual	1454	1710	1710	Oncology Investigations
687	CA157	t(1;22) and Trisomy 21 in Acute Megakaryoblastic Leukemia (AML -M7) (2 Markers)	3641	4284	4284	Oncology Investigations
688	CA158	T-cell Acute Lymphoblastic Leukemia (T-ALL) Panel	11605	13653	13653	Oncology Investigations
689	CA159	TCR-A rearrangement: 14q11	3588	4221	4221	Oncology Investigations
690	CA160	TERT Promoter Mutation Assay	4441	5225	5225	Oncology Investigations
691	CA161	TFE-3 FISH	9241	10872	10872	Oncology Investigations
692	CA162	TPMT (Thiopurine Methyl Transferase) Genotyping	3902	4590	4590	Oncology Investigations
693	CA163	Trisomy 12	1855	2183	2183	Oncology Investigations
694	CA164	Trisomy 21	1855	2183	2183	Oncology Investigations
695	CA165	Trisomy 4, 10 & 17	2666	3137	3137	Oncology Investigations
696	CA166	Trisomy 8	1855	2183	2183	Oncology Investigations
697	CA167	V Beta Repertoire Analysis by Flow Cytometry for T-Cell Clonality	9306	10949	10949	Oncology Investigations
698	CA168	XX/XY (Chimerism Studies) in Sex mismatch Bone Marrow Transplantation (BMT)	1855	2183	2183	Oncology Investigations
699	CT001	Single drug Chemotherapy	1301	1530	1530	Chemotherapy
700	CT002	Multiple drugs Chemotherapy/Targeted therapy/Immunotherapy	1760	2070	2070	Chemotherapy
701	CT003	Neoadjuvant Chemotherapy	2066	2430	2430	Chemotherapy
702	CT004	Adjuvant Chemotherapy	1683	1980	1980	Chemotherapy

CGHS rates for Tier II (Y City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
703	CT005	Concurrent-chemoradiation	1454	1710	1710	Chemotherapy
704	CT006	Intravesical Instillation of BCG excluding the cost of BCG	2295	2700	2700	Chemotherapy
705	RT001	Level 1- Brachytherapy (Eye Plaque or SIVA or CVS per insertion or application)	5355	6300	7245	Radiotherapy
706	RT002	Level 2- Brachytherapy (Simple ICA with Xray based 2D planning, ILRT, Endobilliary BCT)	7650	9000	10350	Radiotherapy
707	RT003	Level 3- Brachytherapy (Surface Mould, Radical Interstitial BCT, Intraoperative Template or interstitial brachytherapy catheter insertion)	19125	22500	25875	Radiotherapy
708	RT004	Level 4- Brachytherapy (ICA with CT based Planning)	22950	27000	31050	Radiotherapy
709	RT005	Level 5- Brachytherapy (Complex ICA with interstitial with CT or MR based planning)	30600	36000	41400	Radiotherapy
710	RT006	Level 1- Radiation Therapy (1-10 fractions on Cobalt)	11475	13500	15525	Radiotherapy
711	RT007	Level 2- Radiation Therapy (More than 10 fractions on Cobalt OR Upto 10 fractions on LA clinical (without CT or TPS planning) without IGRT OR Hemibody palliative RT (1-2 fractions weekly))	21420	25200	28980	Radiotherapy
712	RT008	Level 3- Radiation Therapy (LA 3D with conventional fractionation of 2-5 Gy OR Weekly hypofractionation of >5 Gy with 3D CRT plan in 1-2 fractions. No IGRT allowed.)	38250	45000	51750	Radiotherapy
713	RT009	Level 4- Radiation therapy (LA 3D with IGRT conventional fractionation of 2- 5 Gy OR Weekly hypofractionation >5 Gy with 3D CRT plan in 1-2 fractions. with IGRT)	48195	56700	65205	Radiotherapy
714	RT010	Level 5- Radiation Therapy (LA IMRT/ Rapid Arc/VMAT with < 5Gy per fraction and <10 IGRT (CBCT or MVCT or EPID) OR Cobalt Radical with LA boost including electron boost OR TSET OR TBI)	114750	135000	155250	Radiotherapy

CGHS rates for Tier II (Y City)

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			Non-NABH	NABH	Super Speciality	
715	RT011	Level 6- Radiation Therapy (LA 4D/DE or DIBH with 3D CRT/ IMRT/ Rapid Arc/VMAT with >10 IGRT (CBCT or MVCT or EPID) OR LA IMRT/ Rapid Arc/VMAT with <5Gy per fraction and >10 IGRT (CBCT or MVCT or EPID) OR Adaptive RT OR CSI OR Multisite treatment outside one FOV or one plan OR SBRT OR SRS OR SRT (per fraction dose >5Gy))	137700	162000	186300	Radiotherapy
716	IT001	Radiosynovectomy with Yttrium	19125	22500	25875	Radio-Isotope Therapy
717	IT002	131-Iodine Therapy 51-100mCi	10955	12888	14821	Radio-Isotope Therapy
718	IT003	131-Iodine Therapy >100mCi	15128	17798	20467	Radio-Isotope Therapy
719	IT004	Samarium-153 therapy for metastatic bone pain palliation	15338	18045	20752	Radio-Isotope Therapy
720	IT005	131-Iodine Therapy <15mCi	5669	6669	7669	Radio-Isotope Therapy
721	IT006	131-Iodine Therapy 15-50mCi	8537	10044	11551	Radio-Isotope Therapy
722	IT007	Phosphorus-32 therapy for metastatic bone pain palliation	10836	12749	14661	Radio-Isotope Therapy
723	PT001	Cervical Traction (per session)	230	270	270	Physiotherapy
724	PT002	Lumbar Traction (per session)	230	270	270	Physiotherapy
725	PT003	Exercises /Post Natal Exercises/Prenatal Exercises/Therapeutic Exercises/Orthopaedic Rehabilitation (Joint Replacement/Post Surgery)/Hand Rehab (per session)	230	270	270	Physiotherapy
726	PT004	Chest Physiotherapy/ Breathing Exercise &Postural Drainage per Session/Post Covid Rehabilitation /Pulmonary Rehabilitation/Cardiac Rehabilitation (per session)	230	270	270	Physiotherapy
727	PT005	Ultra Sonic Therapy /Short Wave Diathermy / Microwave/ Long Wave Diathermy /Infrared/IFT) (per session)	230	270	270	Physiotherapy
728	PT006	Electrical Muscle Stimulation/Cryotherapy/TENS (per session)	306	360	360	Physiotherapy
729	PT007	Hot Pack / Cold Pack/Wax Bath/Moist Heat (per session)	230	270	270	Physiotherapy
730	PT008	Shock Wave Therapy/Matrix Rhythm Therapy/Laser/ PEMF -Pulse Electro Magnetic Therapy (per session)	306	360	360	Physiotherapy

CGHS rates for Tier II (Y City)

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			Non-NABH	NABH	Super Speciality	
731	PT009	Gait Assessment (per session)	459	540	540	Physiotherapy
732	PT010	Gait Training (per session)	230	270	270	Physiotherapy
733	PT011	Tilt Training/Neuro-Rehab Basic (per session)	230	270	270	Physiotherapy
734	PT012	Neuro Rehabilitation Advanced (per session)	612	720	720	Physiotherapy
735	PT013	Paediatric Rehabilitation (per session)	230	270	270	Physiotherapy
736	BT001	Speech Therapy per session of at least 40 minutes	306	360	360	Behavioural Therapy
737	BT002	Occupational Therapy per session of at least 40 minutes	306	360	360	Behavioural therapy
738	BT003	Applied Behaviour Analysis based behaviour therapy (ABA based Behaviour therapy) per session of at least 40 minutes	306	360	360	Behavioural therapy
739	BT004	Special education per session of at least 40 minutes	306	360	360	Behavioural therapy
740	BT005	Biofeedback per session	2295	2700	2700	Behavioural therapy
741	DI001	Intraoral Periapical (IOPA) Radiograph X-ray/RVG(Single Film)	153	180	180	Dental Investigation
742	DI002	Intraoral Occlusal/Bite Wing X-Ray	230	270	270	Dental Investigation
743	DI003	Digital OPG with X ray film/ CD	383	450	450	Dental Investigation
744	DI004	Biopsy of Oral tissue- Soft	918	1080	1080	Dental Biopsy
745	DI005	Biopsy of Oral tissue - Hard (bone, tooth)	1530	1800	1800	Dental Biopsy
746	DP001	Abscess - Drainage-Dental	1148	1350	1350	Dental Procedure
747	DP002	Scaling	765	900	900	Dental Procedure
748	DP003	Curettage and Root Planning - Per Tooth	268	315	315	Dental Procedure
749	DP004	Curettage and Root Planning - Per Arch	1530	1800	1800	Dental Procedure
750	DP005	Gingivoplasty - Per Quadrant	765	900	900	Dental Procedure
751	DP006	Gingivectomy - Per Quadrant	918	1080	1080	Dental Procedure
752	DP007	Flap Surgery- Per Tooth	344	405	405	Dental Procedure
753	DP008	Flap Surgery- Per Quadrant	1530	1800	1800	Dental Procedure
754	DP009	Flap Surgery and Bone Graft per quadrant	2295	2700	2700	Dental Procedure
755	DP010	Extraction - Normal Tooth	306	360	360	Dental Procedure
756	DP011	Complicated Extraction per tooth under LA	612	720	720	Dental Procedure
757	DP012	Extraction Impacted - Soft tissue/ 3rd Molar/wisdom tooth extraction	1530	1800	1800	Dental Procedure

CGHS rates for Tier II (Y City)

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			Non-NABH	NABH	Super Speciality	
758	DP013	Multiple Extraction and Treatment Procedures for Special Children, Patients with Systemic Diseases, Patient with Special Needs Which Requires Admission and Treatment Under GA	4590	5400	5400	Dental Procedure
759	DP014	Extraction - Orthodontic Extraction	574	675	675	Dental Procedure
760	DP015	Operculectomy- Pericoronal flap excision	1530	1800	1800	Dental Procedure
761	DP016	Extraction Impacted – Bony	3825	4500	4500	Dental Procedure
762	DP017	Alveoloplasty - Per Tooth	230	270	270	Dental Procedure
763	DP018	Alveoloplasty - Per Quadrant	918	1080	1080	Dental Procedure
764	DP019	Frenectomy	1913	2250	2250	Dental Procedure
765	DP020	Excision of hyperplastic tissue - per arch	918	1080	1080	Dental Procedure
766	DP021	Surgical Augmentation/Alveolectomy per Arch	2678	3150	3150	Dental Procedure
767	DP022	Bone replacement graft for ridge preservation - per site	1530	1800	1800	Dental Procedure
768	DP023	Minor oral surgery, cyst, granuloma, residual infection, mucocele, epulis under LA	1530	1800	1800	Dental Procedure
769	DP024	Application of Desensitizing Medicament	383	450	450	Dental Procedure
770	DP025	Fluoride Application for Children	765	900	900	Dental Procedure
771	DP026	Temporary restoration	115	135	135	Dental Procedure
772	DP027	Glass ionomer Cement Restoration	459	540	540	Dental Procedure
773	DP028	Composite - Occlusal Pit/Class I	383	450	450	Dental Procedure
774	DP029	Composite -Class I with buccal extension/Class II Class III/Class IV/Class VI/Diastema Closure/MOD	765	900	900	Dental Procedure
775	DP030	RCT-Single Rooted tooth	1530	1800	1800	Dental Procedure
776	DP031	RCT Multiple root and/ canal tooth	2295	2700	2700	Dental Procedure
777	DP032	Re-RCT - Anterior	1913	2250	2250	Dental Procedure
778	DP033	Re-RCT - Posterior	2295	2700	2700	Dental Procedure
779	DP034	Medication -intracanal medicament (only lesion cases)	383	450	450	Dental Procedure
780	DP035	Apicectomy-Single tooth	1530	1800	1800	Dental Procedure
781	DP036	Apicectomy-Multiple tooth	2295	2700	2700	Dental Procedure

CGHS rates for Tier II (Y City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
782	DP037	Apexification with any bio-compatible material	1530	1800	1800	Dental Procedure
783	DP038	Root end resection and Retro grade filling	2295	2700	2700	Dental Procedure
784	DP039	Surgical - Apicectomy/ Periapical surgery without bone grafting	536	630	630	Dental Procedure
785	DP040	Tissue Conditioning, Maxillary/Mandibular	230	270	270	Dental Procedure
786	DP041	Core build-up/ Post and Core - Custom made /Inlay/onlay	1148	1350	1350	Dental Procedure
787	DP042	Crown lengthening - Per Tooth	383	450	450	Dental Procedure
788	DP043	Crown - PMMA Crown	765	900	900	Dental Procedure
789	DP044	Crown - All Metal-Nickel Free	1530	1800	1800	Dental Procedure
790	DP045	Crown - Metal with Ceramic Facing	2295	2700	2700	Dental Procedure
791	DP046	Crown - Recementation	459	540	540	Dental Procedure
792	DP047	Crown - Removal	383	450	450	Dental Procedure
793	DP048	Odontoplasty/Enameloplasty	383	450	450	Dental Procedure
794	DP049	Pulpectomy (Anterior Tooth)	1530	1800	1800	Dental Procedure
795	DP050	Pulpectomy (Posterior Tooth)	2295	2700	2700	Dental Procedure
796	DP051	Pulpotomy	765	900	900	Dental Procedure
797	DP052	Veneer - Ceramic paediatric	2295	2700	2700	Dental Procedure
798	DP053	Interceptive Orthodontic Treatment of the Primary Dentition/Transition Dentition	5355	6300	6300	Dental Procedure
799	DP054	Limited Orthodontic Treatment of the Primary Dentition	3825	4500	4500	Dental Procedure
800	DP055	Occlusion Analysis/Adjustment/Occlusal Equilibration	383	450	450	Dental Procedure
801	DP056	Tooth Splinting -General	1148	1350	1350	Dental Procedure
802	DP057	Splinting - Periodontally weak teeth	1377	1620	1620	Dental Procedure
803	DP058	Night Guard	1530	1800	1800	Dental Procedure
804	DP059	Bridge/ Fixed Partial denture (per missing/ extracted tooth) metal crown	1530	1800	1800	Dental Procedure
805	DP060	Bridge/ Fixed Partial denture (per missing/ extracted tooth) metal crown with Ceramic facing	2295	2700	2700	Dental Procedure
806	DP061	Removable Partial Denture - Flexible Per Arch	5738	6750	6750	Dental Procedure
807	DP062	Removable Partial Denture - Cast Metal Up to 3 Teeth	3060	3600	3600	Dental Procedure

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Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
808	DP063	Removable Partial Denture - Cast Metal (additional Per tooth)	230	270	270	Dental Procedure
809	DP064	Removable Partial Denture - Acrylic Up to 3 teeth	1530	1800	1800	Dental Procedure
810	DP065	Removable Partial Denture - Tooth Addition (per tooth)	230	270	270	Dental Procedure
811	DP066	Add Clasp to existing Partial Denture	383	450	450	Dental Procedure
812	DP067	Add Tooth to existing Partial Denture	306	360	360	Dental Procedure
813	DP068	Tooth Supported Overdenture Per Arch	5738	6750	6750	Dental Procedure
814	DP069	Complete Denture - Per Arch	7650	9000	9000	Dental Procedure
815	DP070	Removable orthodontic appliance / Post Orthodontic R O A -per arch	1913	2250	2250	Dental Procedure
816	DP071	Fixed orthodontic per arch	11475	13500	13500	Dental Procedure
817	DP072	Space Maintainers - Fixed	3060	3600	3600	Dental Procedure
818	DP073	Minor Treatment to Control Habits-Removable Appliance Therapy	1913	2250	2250	Dental Procedure
819	DP074	Minor Treatment to Control Habits-Fixed Appliance Therapy	3060	3600	3600	Dental Procedure
820	DP075	Functional orthodontic appliance	4590	5400	5400	Dental Procedure
821	DP076	Feeding appliance for Cleft Palate	3825	4500	4500	Dental Procedure
822	DP077	Expansion plate	4973	5850	5850	Dental Procedure
823	DP078	Maxillofacial Prosthesis -Sal/auricular/orbital/Nasal/Palatal/facial lost/ Speech Aid	5355	6300	6300	Dental Procedure
824	DP079	Obturator Prosthesis - Surgical/Definitive/Modification	3825	4500	4500	Dental Procedure
825	DP080	Removal of - Lateral Exostosis/Torus Mandibularis/Torus Palatines/Surgical reduction of Osseous Tuberosity	2295	2700	2700	Dental Procedure
826	DP081	Sialolithotomy/Sialodocotomy/ Closure of Salivary Fistula	1530	1800	1800	Dental Procedure
827	DP082	Excision of Salivary gland	11475	13500	13500	Dental Procedure
828	DP083	Release of fibrous bands & grafting in (OSMF) treatment under GA	15300	18000	18000	Dental Procedure
829	DP084	Facial Space Abscess	3825	4500	4500	Dental Procedure
830	DP085	Partial Ostectomy / sequestrectomy for removal of non-vital bone	1530	1800	1800	Dental Procedure
831	DP086	Alveolus – Closed Reduction stabilization of Teeth	3060	3600	3600	Dental Procedure
832	DP087	Alveolus – Open Reduction stabilization of Teeth	4590	5400	5400	Dental Procedure
833	DP088	Arch bar fixation	3825	4500	4500	Dental Procedure

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Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
834	DP089	Oroantral Fistula closure	3825	4500	4500	Dental Procedure
835	DP090	Osseous, Osteoperiosteal, or Cartilage graft of the Mandible or Maxilla - autogenous or non-autogenous bone graft	2295	2700	2700	Dental Procedure
836	DP091	Osteoplasty - for Orthognathic deformities/ Mandibular Rami/ Body of Mandible	22950	27000	27000	Dental Procedure
837	DP092	Maxilla - Closed Reduction	4590	5400	5400	Dental Procedure
838	DP093	Maxilla - Open Reduction	7650	9000	9000	Dental Procedure
839	DP094	Mandible - Closed Reduction	4590	5400	5400	Dental Procedure
840	DP095	Mandible – Open Reduction	7650	9000	9000	Dental Procedure
841	DP096	Cyst of Maxilla/mandible by enucleation/excision/marsupialization upto 4 cms under LA	3825	4500	4500	Dental Procedure
842	DP097	Cyst of Maxilla/mandible by enucleation/excision/marsupialization more than 4 cms under LA	4590	5400	5400	Dental Procedure
843	DP098	Cyst of Maxilla/mandible by enucleation/excision/marsupialization more than 4 cms under GA and admission	19125	22500	22500	Dental Procedure
844	DP099	Temporomandibular(TM) joint ankylosis- under GA/Open /Closed Reduction	15300	18000	18000	Dental Procedure
845	DP100	Segmental / Hemi Mandibulectomy with graft	19125	22500	22500	Dental Procedure
846	DP101	Segmental /Hemi Mandibulectomy without graft	15300	18000	18000	Dental Procedure
847	DP102	Sub-Total mandibulectomy with graft	26775	31500	31500	Dental Procedure
848	DP103	Sub-Total mandibulectomy without graft	22950	27000	27000	Dental Procedure
849	DP104	Maxillectomy/Mandibulectomy- Total with graft	26775	31500	31500	Dental Procedure
850	DP105	Maxillectomy/Mandibulectomy- Total without graft	22950	27000	27000	Dental Procedure
851	DP106	Maxillectomy- partial with graft	19125	22500	22500	Dental Procedure
852	DP107	Maxillectomy- partial without graft	15300	18000	18000	Dental Procedure
853	DP108	Malar and/or Zygomatic arch - Closed Reduction	4590	5400	5400	Dental Procedure
854	DP109	Malar and/or Zygomatic arch - Open Reduction	7650	9000	9000	Dental Procedure
855	DP110	Distraction osteogenesis of mandible or maxilla under GA	22950	27000	27000	Dental Procedure

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Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
856	DP111	Facial bones - Complicated Reduction with fixation	34425	40500	40500	Dental Procedure
857	OI001	Refraction with auto refraction - Both Eyes	153	180	180	Ophthalmology Investigation
858	OI002	Indirect Ophthalmoscopy (Fundoscopy) - Both Eyes	230	270	270	Ophthalmology Investigation
859	OI003	Orthoptic check-up- with synoptophore- Both Eyes	153	180	180	Ophthalmology Investigation
860	OI004	Lees' charting or Hess' charting- Both Eyes	230	270	270	Ophthalmology Investigation
861	OI005	Perimetry (Visual Field Testing) -Goldman- Both Eyes	383	450	450	Ophthalmology Investigation
862	OI006	Perimetry /Humphrey Visual Field (HVF) test- Automated- Both Eyes	612	720	720	Ophthalmology Investigation
863	OI007	Fluorescein angiography for fundus or iris- Both Eyes	1530	1800	1800	Ophthalmology Investigation
864	OI008	Indocyanine green angiography - Both Eyes	1530	1800	1800	Ophthalmology Investigation
865	OI009	Ultrasound A- Scan/optical biometry[lenstar, IOL master] - Both Eyes	765	900	900	Ophthalmology Investigation
866	OI010	Ultrasound B- Scan - Both Eyes	383	450	450	Ophthalmology Investigation
867	OI011	Fundus Photo Test /disc photo for glaucoma- Both Eyes	383	450	450	Ophthalmology Investigation
868	OI012	Corneal endothelial cell count with specular microscopy- Both Eyes	459	540	540	Ophthalmology Investigation
869	OI013	Corneal topography /pentacam- Both Eyes	1530	1800	1800	Ophthalmology Investigation

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Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
870	OI014	Corneal pachymetry (corneal thickness)/ CCT - Both Eyes	405	477	477	Ophthalmology Investigation
871	OI015	OCT (Optical Coherence Tomography) /Ocular OCT Angiography - Both Eyes	1607	1890	1890	Ophthalmology Investigation
872	OI016	UBM- Ultrasound bio microscopy- Both Eyes	765	900	900	Ophthalmology Investigation
873	OI017	Non Contact tonometry (NCT) - Both Eyes	115	135	135	Ophthalmology Investigation
874	OI018	IOP measurement with Schiotz - Both Eyes	77	90	90	Ophthalmology Investigation
875	OI019	IOP measurement with applanation tonometry - Both Eyes	153	180	180	Ophthalmology Investigation
876	OI020	Diurnal variation of IOP - Both Eyes	1148	1350	1350	Ophthalmology Investigation
877	OI021	90 D lens examination/Three mirror examination for retina - Both Eyes	115	135	135	Ophthalmology Investigation
878	OI022	Gonioscopy- Both Eyes	230	270	270	Ophthalmology Investigation
879	OI023	EOG- Electrooculogram - Both Eyes	1584	1863	1863	Ophthalmology Investigation
880	OI024	ERG- Electroretinogram- Both Eyes	1377	1620	1620	Ophthalmology Investigation
881	OI025	VEP- visually evoked potential - Both Eyes	1377	1620	1620	Ophthalmology Investigation
882	OI026	X Ray orbit -Bilateral	268	315	315	Ophthalmology Investigation
883	OI027	Dacryocystography - Bilateral	1530	1800	1800	Ophthalmology Investigation

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Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
884	OI028	Orbital Angiographical Studies - Bilateral	3825	4500	4500	Ophthalmology Investigation
885	OI029	Neostigmine test - Both Eyes	3825	4500	4500	Ophthalmology Investigation
886	OI030	Lipi View One Eye	689	810	810	Ophthalmology Investigation
887	OI031	Lipi View Both Eyes	1148	1350	1350	Ophthalmology Investigation
888	OI032	Schirmer Test	230	270	270	Ophthalmology Investigation
889	OI033	Vitreous biopsy per eye	3825	4500	4500	Ophthalmology Biopsy
890	OP001	Subconjunctival/sub-tenon’s injections in one eye	383	450	450	Ophthalmology Procedure
891	OP002	Subconjunctival/sub-tenon’s injections in both eyes	612	720	720	Ophthalmology Procedure
892	OP003	Pterygium surgery with auto conjunctival graft per eye	10251	12060	12060	Ophthalmology Procedure
893	OP004	Conjunctival Peritomy per eye	1148	1350	1350	Ophthalmology Procedure
894	OP005	Conjunctival wound repair or exploration following blunt trauma per eye	6503	7650	7650	Ophthalmology Procedure
895	OP006	Removal of corneal foreign body	306	360	360	Ophthalmology Procedure
896	OP007	Cauterization of ulcer/subconjunctival injection in one eye	383	450	450	Ophthalmology Procedure
897	OP008	Cauterization of ulcer/subconjunctival injection in both eyes	612	720	720	Ophthalmology Procedure
898	OP009	Corneal grafting—Penetrating keratoplasty per eye	15300	18000	18000	Ophthalmology Procedure
899	OP010	Bandage contact lenses for corneal perforation/PED per eye	1530	1800	1800	Ophthalmology Procedure
900	OP011	Scleral grafting or conjunctival flap for corneal perforation per eye	6503	7650	7650	Ophthalmology Procedure
901	OP012	Keratoconus correction with therapeutic contact lenses - Both Eyes	6503	7650	7650	Ophthalmology Procedure
902	OP013	Ultraviolet (UV) radiation for cross-linking for keratoconus /C3R/KXL - Both Eyes	15300	18000	18000	Ophthalmology Procedure
903	OP014	EDTA for band shaped keratopathy - Both Eyes	2295	2700	2700	Ophthalmology Procedure

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Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
904	OP015	Arcuate keratotomy for astigmatism /Limbal Relaxing Incision - Both Eyes	5202	6120	6120	Ophthalmology Procedure
905	OP016	Re-suturing (Primary suturing) of corneal wound per eye	3825	4500	4500	Ophthalmology Procedure
906	OP017	Penetrating keratoplasty with glaucoma surgery per eye	26775	31500	31500	Ophthalmology Procedure
907	OP018	Penetrating keratoplasty with vitrectomy per eye	26775	31500	31500	Ophthalmology Procedure
908	OP019	Penetrating keratoplasty with IOL implantation per eye	26775	31500	31500	Ophthalmology Procedure
909	OP020	DALK- Deep anterior lamellar keratoplasty per eye	32895	38700	38700	Ophthalmology Procedure
910	OP021	Keratoprosthesis stage I and II per eye	32895	38700	38700	Ophthalmology Procedure
911	OP022	DSAEK Descemet's stripping automated endothelial keratoplasty/DMEK-Descemet membrane endothelial keratoplasty per eye	32895	38700	38700	Ophthalmology Procedure
912	OP023	ALTK- Automated lamellar therapeutic keratoplasty per eye	32895	38700	38700	Ophthalmology Procedure
913	OP024	Bleb repair with conjunctival autograft per eye	11475	13500	13500	Ophthalmology Procedure
914	OP025	Bleb compression sutures per eye	5355	6300	6300	Ophthalmology Procedure
915	OP026	Bleb needling with MMC/5-FU per eye	6120	7200	7200	Ophthalmology Procedure
916	OP027	Probing and Syringing of lacrimal sac- in one eye	765	900	900	Ophthalmology Procedure
917	OP028	Probing and Syringing of lacrimal sac- in both eye	1148	1350	1350	Ophthalmology Procedure
918	OP029	Dacryocystorhinostomy-Plain	10251	12060	12060	Ophthalmology Procedure
919	OP030	Dacryocystorhinostomy-Plain with intubation and/or with lacrimal implants excluding the cost of implant per eye	15300	18000	18000	Ophthalmology Procedure
920	OP031	Dacryocystorhinostomy-conjunctival with implant excluding the cost of implant per eye	15300	18000	18000	Ophthalmology Procedure
921	OP032	Canaliculoplasty per eye	4047	4761	4761	Ophthalmology Procedure
922	OP033	Dacryocystectomy per eye	7038	8280	8280	Ophthalmology Procedure
923	OP034	Punctal plugs for dry eyes - Both Eyes	344	405	405	Ophthalmology Procedure
924	OP035	Chalazion incision and curettage in one eye	1530	1800	1800	Ophthalmology Procedure
925	OP036	Chalazion incision and curettage in both eyes	2295	2700	2700	Ophthalmology Procedure
926	OP037	Ptosis surgery with Fasanella-Servat procedure /Ptosis surgery with LPS resection one lid Ptosis surgery with Sling surgery one lid	15300	18000	18000	Ophthalmology Procedure

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Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
927	OP038	Ectropion surgery- one lid	6503	7650	7650	Ophthalmology Procedure
928	OP039	Ectropion surgery- both lids	10251	12060	12060	Ophthalmology Procedure
929	OP040	Epicanthus correction - Both Eyes	6503	7650	7650	Ophthalmology Procedure
930	OP041	Cantholysis and canthotomy- Both Eyes	2678	3150	3150	Ophthalmology Procedure
931	OP042	Entropion surgery- one lid	6503	7650	7650	Ophthalmology Procedure
932	OP043	Entropion surgery- both lids	10251	12060	12060	Ophthalmology Procedure
933	OP044	Tarsorrhaphy- Both Eyes	2295	2700	2700	Ophthalmology Procedure
934	OP045	Suturing of lid lacerations- Both Eyes	3825	4500	4500	Ophthalmology Procedure
935	OP046	Lid retraction repair per eye	6503	7650	7650	Ophthalmology Procedure
936	OP047	Concretions removal- Both Eyes	383	450	450	Ophthalmology Procedure
937	OP048	Bucket handle procedure for lid tumours per eye (for non-malignant conditions)	10251	12060	12060	Ophthalmology Procedure
938	OP049	Eyelid reconstruction with flap one eye	15300	18000	18000	Ophthalmology Procedure
939	OP050	Eyelid reconstruction with flap both eyes	19125	22500	22500	Ophthalmology Procedure
940	OP051	Cheek rotation flap for lid tumours per eye (for non-malignant conditions)	15300	18000	18000	Ophthalmology Procedure
941	OP052	Orbitotomy per eye	21038	24750	24750	Ophthalmology Procedure
942	OP053	Enucleation per eye(for non-malignant conditions)	10251	12060	12060	Ophthalmology Procedure
943	OP054	Enucleation with orbital implants and artificial (Cost of implants included) per eye	15300	18000	18000	Ophthalmology Procedure
944	OP055	Evisceration per eye	10251	12060	12060	Ophthalmology Procedure
945	OP056	Evisceration with orbital implants and artificial (Cost of implants included) prosthesis per eye	15300	18000	18000	Ophthalmology Procedure
946	OP057	Telecanthus correction- Both Eyes	10251	12060	12060	Ophthalmology Procedure
947	OP058	Orbital decompression /with incision or excision biopsy per eye	26775	31500	31500	Ophthalmology Procedure
948	OP059	Exenteration per eye	15300	18000	18000	Ophthalmology Procedure
949	OP060	Exenteration with skin grafting per eye	26775	31500	31500	Ophthalmology Procedure
950	OP061	Fracture orbital repair per eye	26775	31500	31500	Ophthalmology Procedure

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Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
951	OP062	Retinal laser procedures -green laser for PRP,retinal tears, ROP,endolaser per eye	2678	3150	3150	Ophthalmology Procedure
952	OP063	Retinal detachment surgery (RDS) per eye	21038	24750	24750	Ophthalmology Procedure
953	OP064	Retinal detachment surgery (RDS) with scleral buckling per eye	26775	31500	31500	Ophthalmology Procedure
954	OP065	Buckle removal per eye	6503	7650	7650	Ophthalmology Procedure
955	OP066	Silicone oil removal per eye	7038	8280	8280	Ophthalmology Procedure
956	OP067	Anterior retinal cryopexy per eye	3825	4500	4500	Ophthalmology Procedure
957	OP068	Squint correction for one eye	10251	12060	12060	Ophthalmology Procedure
958	OP069	Squint correction for both eyes	15300	18000	18000	Ophthalmology Procedure
959	OP070	Trabeculectomy per eye	15300	18000	18000	Ophthalmology Procedure
960	OP071	Trabeculotomy /kahook dual blade goniotomy excluding blade cost per eye	15300	18000	18000	Ophthalmology Procedure
961	OP072	Trabeculectomy with Trabeculotomy- Both Eyes	26775	31500	31500	Ophthalmology Procedure
962	OP073	Microincisional trabeculectomy(MIT) per eye	19125	22500	22500	Ophthalmology Procedure
963	OP074	Surgical posterior capsulotomy one eye	7650	9000	9000	Ophthalmology Procedure
964	OP075	Goniotomy per eye	3825	4500	4500	Ophthalmology Procedure
965	OP076	Glaucoma surgery with Glaucoma valves (Cost of Valve extra) per eye	15300	18000	18000	Ophthalmology Procedure
966	OP077	Cost of the Glaucoma valve/Glaucoma Ahmed valve per eye	15000	15000	15000	Ophthalmology Procedure
967	OP078	AC wash per eye	3825	4500	4500	Ophthalmology Procedure
968	OP079	Endocyclophotocoagulation per eye	13770	16200	16200	Ophthalmology Procedure
969	OP080	Cyclocryotherapy /Trans scleral cyclophotocoagulation TSCPC per eye	3825	4500	4500	Ophthalmology Procedure
970	OP081	YAG Laser iridotomy / Hyaloidotomy/Laser suture lysis post trabeculectomy per eye	3825	4500	4500	Ophthalmology Procedure
971	OP082	YAG Laser capsulotomy per eye	3825	4500	4500	Ophthalmology Procedure
972	OP083	ALT-Argon laser trabeculoplasty per eye	3825	4500	4500	Ophthalmology Procedure
973	OP084	TTT- Transpupillary thermal therapy per eye	6503	7650	7650	Ophthalmology Procedure
974	OP085	PTK- Phototherapeutic keratectomy /PRK for keratoconus per eye	10251	12060	12060	Ophthalmology Procedure
975	OP086	Argon/diode laser for retinal detachment per eye	6503	7650	7650	Ophthalmology Procedure

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			Non-NABH	NABH	Super Speciality	
976	OP087	Intralase application for keratoconus /CAIRS Corneal allogenic intrastromal ring segments per eye excluding the cost of the rings	15300	18000	18000	Ophthalmology Procedure
977	OP088	Vitrectomy- pars plana including Fluid air exchange (per eye)	26775	31500	31500	Ophthalmology Procedure
978	OP089	Vitrectomy +membrane peeling +fluid air exchange+endolaser+ gas/silicon oil tamponade per eye	30600	36000	36000	Ophthalmology Procedure
979	OP090	Macular hole surgery- Vitrectomy +membrane peeling + ILM peeling+ fluid air exchange+endolaser+ gas/silicon oil tamponade per eye	31365	36900	36900	Ophthalmology Procedure
980	OP091	Vitrectomy +phaco fragmentation/ IOL drop +/- secondary IOL per eye	19125	22500	22500	Ophthalmology Procedure
981	OP092	Anterior vitrectomy per eye	6120	7200	7200	Ophthalmology Procedure
982	OP093	Membranectomy one eye	9180	10800	10800	Ophthalmology Procedure
983	OP094	Membranectomy both eyes	11475	13500	13500	Ophthalmology Procedure
984	OP095	Intravitreal injections of antibiotics excluding the cost of the antibiotic per eye	3825	4500	4500	Ophthalmology Procedure
985	OP096	Intravitreal Injection of drugs (Ranibizumab/ Aflibercept etc) excluding the cost of the drug per eye	3825	4500	4500	Ophthalmology Procedure
986	OP097	Intravitreal Insertion of Drug Implant excluding cost of the Drug Implant (Ozurdex,...etc) per eye	4590	5400	5400	Ophthalmology Procedure
987	OP098	Extracapsular cataract extraction (ECCE) with IOL excluding the cost of IOL per eye	10251	12060	12060	Ophthalmology Procedure
988	OP099	Small Incision Cataract Surgery (SICS) with IOL excluding the cost of IOL per eye	10251	12060	12060	Ophthalmology Procedure
989	OP100	Phaco with foldable IOL (silicone and acrylic)/PMMA IOL / MICS surgery excluding the cost of IOL per eye	13005	15300	15300	Ophthalmology Procedure
990	OP101	Pars plana lensectomy with/without IOL excluding the cost of IOL per eye	13005	15300	15300	Ophthalmology Procedure
991	OP102	Secondary IOL implantation- AC IOL PC IOL or scleral fixated IOL excluding the cost of IOL per eye	15300	18000	18000	Ophthalmology Procedure

CGHS rates for Tier II (Y City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
992	OP103	Cataract extraction with IOL with capsular tension rings (Cionni's ring)(cost of the ring included) excluding the cost of IOL per eye	26775	31500	31500	Ophthalmology Procedure
993	OP104	Paediatric cataract surgery +parsplana capsulotomy + anterior vitrectomy excluding the cost of IOL - one eye	15300	18000	18000	Ophthalmology Procedure
994	OP105	Paediatric cataract surgery +parsplana capsulotomy + anterior vitrectomy excluding the cost of IOL - Both Eyes	19125	22500	22500	Ophthalmology Procedure
995	OP106	IOL exchange [excluding IOL cost] per eye	7650	9000	9000	Ophthalmology Procedure
996	OP107	IOL reposition per eye	4590	5400	5400	Ophthalmology Procedure
997	OP108	IOL explantation per eye	6120	7200	7200	Ophthalmology Procedure
998	OP109	Iridodialysis repair or pupillary reconstruction /Cyclodialysis repair per eye	10251	12060	12060	Ophthalmology Procedure
999	OP110	Iris cyst removal /synechiolysis/surgical iridectomy per eye	3825	4500	4500	Ophthalmology Procedure
1000	OP111	Lid Abscess incision and Drainage per eye	3825	4500	4500	Ophthalmology Procedure
1001	OP112	Orbital Abscess incision and Drainage per eye	6503	7650	7650	Ophthalmology Procedure
1002	OP113	Excision Biopsy of lid, conjunctiva, cornea per eye	7038	8280	8280	Ophthalmology Procedure
1003	OP114	Paracentesis (eye) per eye	3825	4500	4500	Ophthalmology Procedure
1004	OP115	Scleral graft for scleral melting or perforation per eye	10251	12060	12060	Ophthalmology Procedure
1005	OP116	Amniotic membrane grafting /symblepharon release with AMG per eye	10251	12060	12060	Ophthalmology Procedure
1006	OP117	Intraocular foreign body removal per eye	6503	7650	7650	Ophthalmology Procedure
1007	OP118	Electrolysis (eye) - Both Eyes	765	900	900	Ophthalmology Procedure
1008	OP119	Perforating injury repair (eye) per eye	10251	12060	12060	Ophthalmology Procedure
1009	OP120	Botulinum injection for blepharospasm or squint /epiphora/entropion/lid retraction (excluding cost of drug) per eye	3825	4500	4500	Ophthalmology Procedure
1010	OP121	C3F8 GAS Injection intravitreal for descemetopexy/retinopexy/pneumatopexy (per eye)	3825	4500	4500	Ophthalmology Procedure
1011	OP122	Silicone Oil injection (per eye)	3825	4500	4500	Ophthalmology Procedure
1012	OP123	Epiretinal Membrane (ERM) Peeling (per eye)	5355	6300	6300	Ophthalmology Procedure

CGHS rates for Tier II (Y City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1013	OP124	Epiretinal Membrane (ERM) Removal (per eye)	2295	2700	2700	Ophthalmology Procedure
1014	OP125	Internal limiting membrane (ILM) peeling (per eye)	2295	2700	2700	Ophthalmology Procedure
1015	OP126	Punctoplasty (per eye)	4973	5850	5850	Ophthalmology Procedure
1016	OP127	Punctal plug(Collagen/silicone) per eye	3060	3600	3600	Ophthalmology Procedure
1017	OP128	Laser Trabeculoplasty Gonioplasty - Both Eyes	12240	14400	14400	Ophthalmology Procedure
1018	OP129	Eye laser pulse therapy /Lipiflow/IPL [Intense pulse light] per eye	2678	3150	3150	Ophthalmology Procedure
1019	OP130	Malyugin Ring /pupil dilator/iris expander per eye	7650	9000	9000	Ophthalmology Procedure
1020	OP131	Globe exploration per eye	7650	9000	9000	Ophthalmology Procedure
1021	OP132	Scleral Fixation Tissue glue /fibrin glue per eye	6426	7560	7560	Ophthalmology Procedure
1022	OP133	PFCL Injection Per Eye Including Cost of The Drug	2088	2457	2457	Ophthalmology Procedure
1023	OP134	Methylprednisolone Injection IV Infusion per day Excluding the cost of the drug	1913	2250	2250	Ophthalmology Procedure
1024	OP135	Retinoblastoma[RB] EUA both eyes	2295	2700	2700	Ophthalmology Procedure
1025	OP136	RB intravitreal/intravenous/subtenons chemotherapy affected eye excluding the cost of the chemotherapy drug	2678	3150	3150	Ophthalmology Procedure
1026	OP137	RB TTT/ Cryotherapy affected eye	3443	4050	4050	Ophthalmology Procedure
1027	OP138	Plaque brachytherapy-surface affected eye	11475	13500	13500	Ophthalmology Procedure
1028	OP139	Plaque brachytherapy-intraocular affected eye	15300	18000	18000	Ophthalmology Procedure
1029	OP140	Simple limbal stem cell transplant SLET per eye	15300	18000	18000	Ophthalmology Procedure
1030	OP141	Mucous membrane grafting MMG one eyelid	15300	18000	18000	Ophthalmology Procedure
1031	OP142	Mucous membrane grafting MMG two eyelids	19125	22500	22500	Ophthalmology Procedure
1032	OP143	iStent Inject per eye including the cost of consumables and implant	61200	72000	72000	Ophthalmology Procedure
1033	OP144	Orthoptic exercises per session	191	225	225	Ophthalmology Physiotherapy
1034	OP145	Pleoptic exercises per session	191	225	225	Ophthalmology Physiotherapy
1035	EI001	Impedance with stapedial reflex / Impedance Audiometry	459	540	540	ENT Investigation
1036	EI002	Pure Tone Audiogram / Pure Tone Audiometry / PTA	344	405	405	ENT Investigation

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Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1037	EI003	Short Increment Sensitivity Index (SISI) Tone Decay	306	360	360	ENT Investigation
1038	EI004	Speech Assessment	306	360	360	ENT Investigation
1039	EI005	Speech Discrimination Score	306	360	360	ENT Investigation
1040	EI006	Multiple hearing assessment test to Adults	306	360	360	ENT Investigation
1041	EI007	BERA (Brain stem evoked response audiometry)	1913	2250	2250	ENT Investigation
1042	EI008	OAE (Otoacoustic Emission Test)	964	1134	1134	ENT Investigation
1043	EI009	Hearing Aid Trail	153	180	180	ENT Investigation
1044	EI010	Vestibular Evoked Myogenic Potential (VEMP)	2104	2475	2475	ENT Investigation
1045	EI011	Cold Calorie Test for Vestibular function	459	540	540	ENT Investigation
1046	EI012	Electronystagmography (ENG)	1148	1350	1350	ENT Investigation
1047	EI013	Videonystagmography(VNG)	1913	2250	2250	ENT Investigation
1048	EI014	Video Laryngoscopy	4590	5400	5400	ENT investigation
1049	EI015	Videostroboscopy	4208	4950	4950	ENT Investigation
1050	EI016	Fibreoptic examination of Larynx (FOL) under LA	3825	4500	4500	ENT Investigation
1051	EI017	Fibro optic Nasal Endoscopy	1760	2070	2070	ENT Investigation
1052	EP001	Removal of foreign body From Nose	536	630	630	ENT Procedure
1053	EP002	Removal of foreign body From Ear/otoscopy diagnostic or therapeutic	536	630	630	ENT Procedure
1054	EP003	Syringing (Ear)	383	450	450	ENT Procedure
1055	EP004	Polyp removal under LA (Larynx)	3825	4500	4500	ENT Procedure
1056	EP005	Polyp removal under GA (Larynx)	7038	8280	8280	ENT Procedure
1057	EP006	Peritonsillar abscess Drainage under LA	6503	7650	7650	ENT Procedure
1058	EP007	Myringoplasty	21038	24750	24750	ENT Procedure
1059	EP008	Stapedectomy	21038	24750	24750	ENT Procedure
1060	EP009	Myringotomy with Grommet Insertion	10251	12060	12060	ENT Procedure
1061	EP010	Tympanotomy	21038	24750	24750	ENT Procedure
1062	EP011	Tympanoplasty	26775	31500	31500	ENT Procedure
1063	EP012	Mastoidectomy	26775	31500	31500	ENT Procedure
1064	EP013	Otoplasty	26775	31500	31500	ENT Procedure

CGHS rates for Tier II (Y City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1065	EP014	Labyrinthectomy	26775	31500	31500	ENT Procedure
1066	EP015	Skull Base Surgery	40545	47700	47700	ENT Procedure
1067	EP016	Facial Nerve Decompression	32895	38700	38700	ENT Procedure
1068	EP017	Septoplasty	21038	24750	24750	ENT Procedure
1069	EP018	Submucous Resection	10251	12060	12060	ENT Procedure
1070	EP019	Septo-Rhinoplasty	32895	38700	38700	ENT Procedure
1071	EP020	Rhinoplasty- Non-cosmetic	26775	31500	31500	ENT Procedure
1072	EP021	Fracture Reduction of Nasal Bone	10251	12060	12060	ENT Procedure
1073	EP022	Intra Nasal Diathermy	4590	5400	5400	ENT Procedure
1074	EP023	Turbinectomy	10251	12060	12060	ENT Procedure
1075	EP024	Endoscopic Dacryocystorhinostomy (DCR)	26775	31500	31500	ENT Procedure
1076	EP025	Endoscopic Surgery (ENT)	26775	31500	31500	ENT Procedure
1077	EP026	Septal Perforation Repair	21038	24750	24750	ENT Procedure
1078	EP027	Antrum Puncture	2295	2700	2700	ENT Procedure
1079	EP028	Lateral Rhinotomy	15300	18000	18000	ENT Procedure
1080	EP029	Cranio-Facial resection	32895	38700	38700	ENT Procedure
1081	EP030	Angiofibroma Excision	32895	38700	38700	ENT Procedure
1082	EP031	Endoscopic Hypophysectomy	40545	47700	47700	ENT Procedure
1083	EP032	Endoscopic Optic Nerve Decompression	40545	47700	47700	ENT Procedure
1084	EP033	Tonsillectomy	21038	24750	24750	ENT Procedure
1085	EP034	Uvulo-palatoplasty	26775	31500	31500	ENT Procedure
1086	EP035	Functional Endoscopic Sinus Surgery (FESS) for Antrochoanal polyp	26775	31500	31500	ENT Procedure
1087	EP036	Functional Endoscopic Sinus Surgery (FESS) for Ethmoidal polyp	26775	31500	31500	ENT Procedure
1088	EP037	Polyp removal ear	3825	4500	4500	ENT Procedure
1089	EP038	Polyp removal Nose (Septal polyp)	6503	7650	7650	ENT Procedure
1090	EP039	Mastoidectomy plus Ossiculoplasty including TORP (Total Ossicular Replacement Prosthesis) or PORP (Partial Ossicular Replacement Prosthesis)	26775	31500	31500	ENT Procedure

CGHS rates for Tier II (Y City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1091	EP040	Endolymphatic sac decompression	32895	38700	38700	ENT Procedure
1092	EP041	Diagnostic endoscopy under GA	3825	4500	4500	ENT Procedure
1093	EP042	Young's operation for Atrophic rhinitis	15300	18000	18000	ENT Procedure
1094	EP043	Vidian neurectomy for vasomotor Rhinitis	21038	24750	24750	ENT Procedure
1095	EP044	Nasal Packing-anterior	1913	2250	2250	ENT Procedure
1096	EP045	Nasal Packing-Posterior	2295	2700	2700	ENT Procedure
1097	EP046	Ranula Excision	15300	18000	18000	ENT Procedure
1098	EP047	Tongue Tie excision	6503	7650	7650	ENT Procedure
1099	EP048	Sub Mandibular Duct Lithotomy	5202	6120	6120	ENT Procedure
1100	EP049	Adenoidectomy	15300	18000	18000	ENT Procedure
1101	EP050	Palatopharyngoplasty	26775	31500	31500	ENT Procedure
1102	EP051	Pharyngoplasty	32895	38700	38700	ENT Procedure
1103	EP052	Styloidectomy	15300	18000	18000	ENT Procedure
1104	EP053	Direct Laryngoscopy including Biopsy under GA	10251	12060	12060	ENT Procedure
1105	EP054	Oesophagoscopy with foreign body removal from Oesophagus	10251	12060	12060	ENT Procedure
1106	EP055	Bronchoscopy with foreign body (FB) removal	10251	12060	12060	ENT Procedure
1107	EP056	Ear Lobe Repair one side	3060	3600	3600	ENT Procedure
1108	EP057	Excision of Pinna for non-cancerous Growth/Injuries - Skin Only	7038	8280	8280	ENT Procedure
1109	EP058	Excision of Pinna for non-cancerous/ Injuries - Skin and Cartilage	10251	12060	12060	ENT Procedure
1110	EP059	Partial Amputation of Pinna	10251	12060	12060	ENT Procedure
1111	EP060	Total Amputation of Pinna	15300	18000	18000	ENT Procedure
1112	EP061	Total Amputation & Excision of External Auditory Meatus	15300	18000	18000	ENT Procedure
1113	EP062	Excision of Cystic Hygroma	15300	18000	18000	ENT Procedure
1114	EP063	Excision of Cystic Hygroma Extensive	21038	24750	24750	ENT Procedure
1115	EP064	Excision of Branchial Cyst	21038	24750	24750	ENT Procedure
1116	EP065	Excision of Branchial Sinus	21038	24750	24750	ENT Procedure
1117	EP066	Excision of Pharyngeal Diverticulum	21038	24750	24750	ENT Procedure
1118	EP067	Excision of Carotid Body / Carotid Body Tumours	32895	38700	38700	ENT Procedure

CGHS rates for Tier II (Y City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1119	EP068	Operation for Cervical Rib	26775	31500	31500	ENT Procedure
1120	EP069	Estlander Operation (Estlander flap in plastic surgery of lips)	26775	31500	31500	ENT Procedure
1121	EP070	Abbe Operation (Abbe flap in plastic surgery of lips)	21038	24750	24750	ENT Procedure
1122	EP071	Cheek Advancement	26775	31500	31500	ENT Procedure
1123	EP072	Excision of the Maxilla	32895	38700	38700	ENT Procedure
1124	EP073	Excision of mandible-segmental	26775	31500	31500	ENT Procedure
1125	EP074	Parotidectomy - Superficial	26775	31500	31500	ENT Procedure
1126	EP075	Parotidectomy - Total	32895	38700	38700	ENT Procedure
1127	EP076	Repair of Parotid Duct	21038	24750	24750	ENT Procedure
1128	EP077	Removal of Submandibular Salivary gland	21038	24750	24750	ENT Procedure
1129	EP078	Hemithyroidectomy	26775	31500	31500	ENT Procedure
1130	EP079	Partial Thyroidectomy (lobectomy)	26775	31500	31500	ENT Procedure
1131	EP080	Subtotal Thyroidectomy	32895	38700	38700	ENT Procedure
1132	EP081	Total Thyroidectomy	40545	47700	47700	ENT Procedure
1133	EP082	Resection Enucleation of thyroid Adenoma	21038	24750	24750	ENT Procedure
1134	EP083	Excision of Lingual Thyroid	26775	31500	31500	ENT Procedure
1135	EP084	Excision of Thyroglossal Cyst/Duct/Fistula	26775	31500	31500	ENT Procedure
1136	EP085	Laryngectomy	40545	47700	47700	ENT Procedure
1137	EP086	Hyoid Suspension	21038	24750	24750	ENT Procedure
1138	EP087	Genioplasty	26775	31500	31500	ENT Procedure
1139	EP088	Phonosurgery	21038	24750	24750	ENT Procedure
1140	EP089	Microlaryngeal Surgery	21038	24750	24750	ENT Procedure
1141	EP090	Laryngofissure	32895	38700	38700	ENT Procedure
1142	EP091	Tracheal Stenosis Excision	32895	38700	38700	ENT Procedure
1143	EP092	Tracheostomy	10251	12060	12060	ENT Procedure
1144	CC001	ICU/CCU/PICU/MICU/HDU (For all categories of ward entitlement, inclusive of Room Rent)	5400	5400	5400	Critical Care
1145	CC002	Compressed Air / Piped Oxygen per hour	77	90	90	Critical Care

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Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1146	CC003	Ventilator charges (Per day) inclusive of associated disposables	2295	2700	2700	Critical Care
1147	CC004	Non invasive Ventilator charges (Per day)(inclusive of associated disposables)	459	540	540	Critical Care
1148	CC005	Pneupac Ventilator in Nursery (Per day)	1989	2340	2340	Critical Care
1149	CC006	Incubator charges (Per day)	1148	1350	1350	Critical Care
1150	CC007	Neonatal ICU charges (Per day) inclusive of incubator	5400	5400	5400	Critical Care
1151	CC008	Exchange Transfusion	2678	3150	3150	Critical Care
1152	CC009	Phototherapy per session (up to 6 Hours)	306	360	360	Critical Care
1153	CC010	Resuscitation/CPR/Intubation	1148	1350	1350	Critical Care
1154	CC011	PICC line (peripherally inserted Central Cannulisation)	3825	4500	4500	Critical Care
1155	CC012	Nebulization Per Session	38	45	45	Critical Care
1156	CC013	PICC Line Removal	765	900	900	Critical Care
1157	CC014	Ryles Tube Insertion	689	810	810	Critical Care
1158	BC001	Blood Component Charges - Whole Blood per Unit	1550	1550	1550	Blood Component Charges
1159	BC002	Blood Component Charges - Packed Red Cell per Unit	1550	1550	1550	Blood Component Charges
1160	BC003	Blood Component Charges - Fresh Frozen Plasma	400	400	400	Blood Component Charges
1161	BC004	Platelet Concentrate- Random Donor Platelet (RDP)	400	400	400	Blood Component Charges
1162	BC005	Blood Component Charges - Cryoprecipitate	250	250	250	Blood Component Charges
1163	BC006	Platelet Concentrate – Single Donor Platelet (SDP)- Apheresis per unit	11000	11000	11000	Blood Component Charges
1164	GP001	Dressings of wounds	230	270	270	General Procedure
1165	GP002	Aspiration Pleural Effusion - Diagnostic	536	630	630	General Procedure
1166	GP003	Aspiration Pleural Effusion - Therapeutic	536	630	630	General Procedure
1167	GP004	Abdominal / Peritoneal Aspiration – Diagnostic/Ascitic tapping / Paracentesis - Diagnostic	536	630	630	General Procedure
1168	GP005	Abdominal / Peritoneal Aspiration – Therapeutic/Ascitic tapping / Paracentesis - Therapeutic	574	675	675	General Procedure
1169	GP006	Removal of Sutures (All)	153	180	180	General Procedure
1170	GP007	Venesection	536	630	630	General Procedure

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			Non-NABH	NABH	Super Speciality	
1171	GP008	Sternal puncture	1530	1800	1800	General Procedure
1172	GP009	Urinary bladder Catheterisation	536	630	630	General Procedure
1173	GP010	Incision & Drainage under local Anaesthesia (Large)	1760	2070	2070	General Procedure
1174	GP011	Intercostal Drainage	2678	3150	3150	General Procedure
1175	GP012	Drainage of abscess with anaesthesia	10251	12060	12060	General Procedure
1176	GP013	Excision of lumps under anaesthesia	10251	12060	12060	General Procedure
1177	HN001	Temporal Bone Subtotal Resection	32895	38700	44505	Head and Neck Surgery
1178	HN002	Benign Tumour Excisions of Head and Neck	21038	24750	28463	Head and Neck Surgery
1179	SK001	Excision of Moles	765	900	900	Skin Procedure
1180	SK002	Excision of Warts	765	900	900	Skin Procedure
1181	SK003	Excision of Molluscum Contagiosum	765	900	900	Skin Procedure
1182	SK004	Excision of Venereal Warts	765	900	900	Skin Procedure
1183	SK005	Excision of Corns	765	900	900	Skin Procedure
1184	SK006	Intradermal (ID) Injection Keloid (Intralesional Injection) including the cost of the drug	765	900	900	Skin Procedure
1185	SK007	Chemical Cautery (s)/Cryotherapy	765	900	900	Skin Procedure
1186	CI001	Electrocardiogram (ECG)	134	158	158	Cardiology Investigation
1187	CI002	Treadmill Test (TMT)	857	1008	1008	Cardiology Investigation
1188	CI003	Holter analysis per day	1913	2250	2250	Cardiology Investigation
1189	CI004	Ambulatory BP monitoring per day	765	900	900	Cardiology Investigation
1190	CI005	Head Up Tilt Test (HUTT)	7038	8280	8280	Cardiology Investigation
1191	CI006	External Loop/event recording -first day Rs.1500	1148	1350	1350	Cardiology Investigation
1192	CI007	External Loop/event recording - subsequent Days 1000/day (Maximum up to 6 days)	765	900	900	Cardiology Investigation
1193	CI008	Diagnostic Electrophysiological studies conventional (Including catheter)	55539	65340	65340	Cardiology Investigation
1194	CI009	Stress Thallium / Myocardial Perfusion Scintigraphy	10251	12060	12060	Cardiology Investigation
1195	CI010	Rest Thallium / Myocardial Perfusion Scintigraphy	7344	8640	8640	Cardiology Investigation

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			Non-NABH	NABH	Super Speciality	
1196	CI011	Venography	3825	4500	4500	Cardiology Investigation
1197	CI012	Lymphangiography	3825	4500	4500	Cardiology Investigation
1198	CI013	Sinogram	1530	1800	1800	Cardiology Investigation
1199	CI014	Digital Subtraction Angiography-Peripheral artery	11177	13149	13149	Cardiology Investigation
1200	CI015	Digital Subtraction Angiography- venogram	11177	13149	13149	Cardiology Investigation
1201	CI016	Coronary Angiography	10251	12060	12060	Cardiology Investigation
1202	CI017	Cardiac Catheterization (CATH)	11399	13410	13410	Cardiology Investigation
1203	CP001	Balloon Coronary Angioplasty / Percutaneous transluminal coronary angioplasty (PTCA) /Percutaneous coronary intervention (PCI) with Vascular closure device (VCD) excluding the cost of Stent. Cost of Drug Eluting Balloon allowed in lieu of Stent	74205	87300	100395	Cardiology Procedure
1204	CP002	Balloon Coronary Angioplasty / Percutaneous transluminal coronary angioplasty (PTCA) / Percutaneous coronary intervention (PCI) without Vascular closure device (VCD) excluding the cost of Stent. Cost of Drug Eluting Stent allowed in lieu of Stent	64050	75353	86655	Cardiology Procedure
1205	CP003	Rotablation excluding the cost of Rotablator Burr/Advancer	47298	55644	63991	Cardiology Procedure
1206	CP004	Balloon Mitral Valvotomy / Percutaneous Transvenous Mitral Commissurotomy (PTMC)	74205	87300	100395	Cardiology Procedure
1207	CP005	Temporary Pacemaker Implantation (TPI) (Temporary Cardiac Pacing) Single Chamber	16157	19008	21859	Cardiology Procedure
1208	CP006	Permanent pacemaker implantation (PPI)- Single Chamber excluding the cost of Pacemaker	26928	31680	36432	Cardiology Procedure
1209	CP007	Permanent pacemaker implantation- Dual Chamber excluding the cost of Pacemaker	36185	42570	48956	Cardiology Procedure
1210	CP008	Permanent pacemaker implantation (PPI)- Biventricular excluding the cost of pacemaker	41760	49129	56499	Cardiology Procedure
1211	CP009	Automatic implantable cardioverter defibrillator (AICD) Single Chamber - excluding the cost of Device	42075	49500	56925	Cardiology Procedure

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			Non-NABH	NABH	Super Speciality	
1212	CP010	Automatic implantable cardioverter defibrillator (AICD) Dual Chamber excluding the cost of Device	44053	51827	59600	Cardiology Procedure
1213	CP011	Combo Device Implantation excluding the cost of Device	49649	58410	67172	Cardiology Procedure
1214	CP012	Radiofrequency (RF) Ablation Conventional	74205	87300	100395	Cardiology Procedure
1215	CP013	Radiofrequency (RF) Ablation Atrial Tachycardia/CARTO	137700	162000	186300	Cardiology Procedure
1216	CP014	Intra-aortic balloon pump (IABP) excluding the cost of the balloon	26775	31500	36225	Cardiology Procedure
1217	CP015	Intra vascular coiling excluding cost of the coils	58140	68400	78660	Cardiology Procedure
1218	CP016	Balloon Septostomy	25245	29700	34155	Cardiology Procedure
1219	CP017	Aortic Valve Balloon Dilatation (AVBD) / Pulmonary Valve Balloon Dilatation (PVBD)	47461	55836	64211	Cardiology Procedure
1220	CP018	Peripheral Angioplasty with Vascular Closure Device (VCD) excluding the cost of Stent	46703	54945	63187	Cardiology Procedure
1221	CP019	Peripheral Angioplasty without Vascular Closure Device (VCD) excluding the cost of Stent	40545	47700	54855	Cardiology Procedure
1222	CP020	Renal Angioplasty excluding the cost of Stent	46283	54450	62618	Cardiology Procedure
1223	CP021	Transcatheter Aortic Valve Implantation (TAVI) / Transcatheter Aortic Valve Replacement (TAVR) – Procedure Cost. (Approval of Director, CGHS in consultation with Special Technical Committee (STC) is required for this procedure)	76500	90000	103500	Cardiology Procedure
1224	CP022	TAVI / TAVR Implant (cost of implant only)	1284000	1284000	1284000	Cardiology Implant(Valve)
1225	CP023	Cost of Intravascular ultrasound (IVUS) Catheter excluding GST(Procedure Charge included in PTCA)	55000	55000	55000	Cardiology Add on Procedure
1226	CP024	Cost of Fractional flow reserve (FFR) Catheter excluding GST (Procedure Charge included in PTCA)	33000	33000	33000	Cardiology Add on Procedure
1227	CP025	Catheter cost of Intracoronary optical coherence tomography (OCT) / Intravascular optical coherence tomography (IVOCT) / Intravascular Ventricular Assist System excluding GST(Procedure cost is included in PTCA)	65000	65000	65000	Cardiology Add on Procedure

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Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1228	CP026	IVL (Coronary Intra vascular Lithotripsy / Shock wave Lithotripsy – Including GST (Approval of Director, CGHS in consultation with Special Technical Committee (STC) is required for this procedure)	268000	268000	268000	Cardiology Add on Procedure
1229	CV001	Varicose vein Surgery-Trendelenburg Operation with Suturing or Ligation	19355	22770	26186	Cardiovascular And Cardiac Surgery Procedure
1230	CV002	Radio Ablation of Varicose Veins (RFA Ablation) excluding the cost of RFA Catheter	7153	8415	9677	Cardiovascular And Cardiac Surgery Procedure
1231	CV003	Laser Ablation of Varicose Veins	33660	39600	45540	Cardiovascular And Cardiac Surgery Procedure
1232	CV004	Atrial Septal Defect (ASD) closure excluding the cost of the Device	84150	99000	113850	Cardiovascular And Cardiac Surgery Procedure
1233	CV005	Ventricular Septal Defect (VSD) with Graft / VSD Device Closure excluding the cost of the Device	91800	108000	124200	Cardiovascular And Cardiac Surgery Procedure
1234	CV006	Tetralogy of Fallot (TOF)/TAPVC/TCPC/REV/RSOV repair	137700	162000	186300	Cardiovascular And Cardiac Surgery Procedure
1235	CV007	BD Glenn/Left Atrium Myxoma	137700	162000	186300	Cardiovascular And Cardiac Surgery Procedure
1236	CV008	Senning/Arterial Switch Operation (ASO) with graft	137700	162000	186300	Cardiovascular And Cardiac Surgery Procedure
1237	CV009	Double Switch Operation (DSO)	180540	212400	244260	Cardiovascular And Cardiac Surgery Procedure
1238	CV010	Atrioventricular(AV) Canal Repair	180540	212400	244260	Cardiovascular And Cardiac Surgery Procedure
1239	CV011	Fontan Procedure	209610	246600	283590	Cardiovascular And Cardiac Surgery Procedure
1240	CV012	Conduit Repair	180540	212400	244260	Cardiovascular And Cardiac Surgery Procedure

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Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1241	CV013	Coronary Artery Bypass Graft surgery (CABG)	137700	162000	186300	Cardiovascular And Cardiac Surgery Procedure
1242	CV014	Coronary Artery Bypass Graft surgery (CABG) + Intra-Aortic Balloon Pump (IABP)	180540	212400	244260	Cardiovascular And Cardiac Surgery Procedure
1243	CV015	Coronary Artery Bypass Graft surgery (CABG) + Valve Replacement excluding the cost of the valve	209610	246600	283590	Cardiovascular And Cardiac Surgery Procedure
1244	CV016	CABG without bypass.	180540	212400	244260	Cardiovascular And Cardiac Surgery Procedure
1245	CV017	Ascending Aorta Replacement	209610	246600	283590	Cardiovascular And Cardiac Surgery Procedure
1246	CV018	Double Valve Replacement (DVR)	180540	212400	244260	Cardiovascular And Cardiac Surgery Procedure
1247	CV019	Mitral valve Replacement(MVR)/ Aortic valve Replacement (AVR)/ Tricuspid Valve Replacement (TVR) / Pulmonary valve replacement (PVR)	137700	162000	186300	Cardiovascular And Cardiac Surgery Procedure
1248	CV020	Mitral valve (MV) Repair + Aortic valve (AV) Repair / Tricuspid Valve (TV) Repair + Pulmonary valve (PV) repair	137700	162000	186300	Cardiovascular And Cardiac Surgery Procedure
1249	CV021	Aorta Femoral Bypass	98685	116100	133515	Cardiovascular And Cardiac Surgery Procedure
1250	CV022	Blalock-Taussig Shunt (BT Shunt) / Coarctation	116280	136800	157320	Cardiovascular And Cardiac Surgery Procedure
1251	CV023	Pulmonary Artery Banding (PA Banding) Septostomy	116280	136800	157320	Cardiovascular And Cardiac Surgery Procedure
1252	CV024	Pericardiocentesis	7650	9000	9000	Cardiovascular And Cardiac Surgery Procedure
1253	CV025	Pericardiectomy	116280	136800	157320	Cardiovascular And Cardiac Surgery Procedure

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Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1254	CV026	Patent Ductus Arteriosus (PDA)-Device Closure	84150	99000	113850	Cardiovascular And Cardiac Surgery Procedure
1255	CV027	Heart Transplant Surgery (As per Guidelines mentioned in OM.No. Z-42011/11/2021-MG/EHS Dated 1st December, 2023)	1350000	1350000	1350000	Cardiovascular And Cardiac Surgery Procedure
1256	CV028	Aortic Arch Replacement	209610	246600	283590	Cardiovascular And Cardiac Surgery Procedure
1257	CV029	Aortic Dissection	209610	246600	283590	Cardiovascular And Cardiac Surgery Procedure
1258	CV030	Thoraco Abdominal Aneurysm Repair	180540	212400	244260	Cardiovascular And Cardiac Surgery Procedure
1259	CV031	Embolectomy	58140	68400	78660	Cardiovascular And Cardiac Surgery Procedure
1260	CV032	Vascular Repair	58140	68400	78660	Cardiovascular And Cardiac Surgery Procedure
1261	CV033	Bentall Repair with Prosthetic Valve	209610	246600	283590	Cardiovascular And Cardiac Surgery Procedure
1262	CV034	Bentall Repair with Biologic Valve	180540	212400	244260	Cardiovascular And Cardiac Surgery Procedure
1263	CV035	Coarctation dilatation / Balloon dilatation of Aortic coarctation -Excluding the cost of Balloon	60251	70884	81517	Cardiovascular And Cardiac Surgery Procedure
1264	CV036	Coarctation dilatation with Stenting	48195	56700	65205	Cardiovascular And Cardiac Surgery Procedure
1265	CV037	Septostomy- Blade	48195	56700	65205	Cardiovascular And Cardiac Surgery Procedure
1266	CV038	Aortic stent grafting for aortic aneurysm	137700	162000	186300	Cardiovascular And Cardiac Surgery Procedure
1267	CV039	Inferior Vena Cava (IVC) filter implantation- excluding the cost of filter	25245	29700	34155	Cardiovascular And Cardiac Surgery Procedure

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Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1268	CV040	Video Assisted Thoracoscopic Surgery (VATS) for Decortication of Lungs/Thymectomy/Other Major Surgeries	137700	162000	186300	Cardiovascular And Cardiac Surgery Procedure
1269	GS001	Sclerotherapy Injection / Banding of Haemorrhoids (cost of drug/sclerotherapy agent/band extra)	536	630	630	General Surgery
1270	GS002	Injection for Varicose Veins (cost of drug/sclerotherapy agent extra)	536	630	630	General Surgery
1271	GS003	Suturing of small wounds	1052	1238	1238	General Surgery
1272	GS004	Secondary suture of wounds	3366	3960	3960	General Surgery
1273	GS005	Debridement of wounds - Small	1262	1485	1485	General Surgery
1274	GS006	Phimosis Under LA	4590	5400	5400	General Surgery
1275	GS007	Removal Of Foreign Bodies -without C-ARM	1148	1350	1350	General Surgery
1276	GS008	Toe Nail Removal	765	900	900	General Surgery
1277	GS009	Excision of Cervical Lymph Node under Local Anaesthesia	2372	2790	2790	General Surgery
1278	GS010	Excision of Axillary Lymph Node under General Anaesthesia	6503	7650	7650	General Surgery
1279	GS011	Excision of Inguinal Lymph Node under Local Anaesthesia	2295	2700	2700	General Surgery
1280	GS012	Excision of Sebaceous Cysts	3825	4500	4500	General Surgery
1281	GS013	Excision of Superficial Lipoma	3825	4500	4500	General Surgery
1282	GS014	Excision of Superficial Neurofibroma	3825	4500	4500	General Surgery
1283	GS015	Excision of Dermoid Cysts	3825	4500	4500	General Surgery
1284	GS016	Excision of Keloid	7038	8280	8280	General Surgery
1285	GS017	Excision of mammary fistula	21038	24750	24750	General Surgery
1286	GS018	Haemorrhoidectomy	25245	29700	29700	General Surgery
1287	GS019	Stapler haemorrhoidectomy excluding the cost of Stapler	26775	31500	31500	General Surgery
1288	GS020	Debridement of Large wounds including Diabetic Wound under Anaesthesia	21038	24750	24750	General Surgery
1289	GI001	Gastro Oesophageal Reflux Study (GER Study)	2295	2700	2700	Gastro and Hepatobiliary Investigation

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Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1290	GI002	Meckel's Scan	2295	2700	2700	Gastro and Hepatobiliary/Nuclear Medicine Investigation
1291	GI003	Hepatobiliary Scintigraphy.	3060	3600	3600	Gastro and Hepatobiliary/Nuclear Medicine Investigation
1292	GI004	Gastrointestinal Bleed (GloB.) Study with Technetium 99m labeled RBCs.	4590	5400	5400	Gastro and Hepatobiliary/Nuclear Medicine Investigation
1293	GI005	Gastric Emptying	1913	2250	2250	Gastro and Hepatobiliary/Nuclear Medicine Investigation
1294	GI006	Hepatosplenic scintigraphy with Technetium-99m radiopharmaceuticals	3825	4500	4500	Gastro and Hepatobiliary/Nuclear Medicine Investigation
1295	GI007	Diagnostic Angiography	7038	8280	8280	Gastroenterology/Interventional Radiology Investigation
1296	GI008	Oesophageal pH metry	7038	8280	8280	Gastroenterology / Endoscopic Procedures
1297	GI009	Oesophageal Manometry	7038	8280	8280	Gastroenterology / Endoscopic Procedures
1298	GI010	Small Bowel Manometry	7650	9000	9000	Gastroenterology / Endoscopic Procedures
1299	GI011	Anorectal manometry	32895	38700	38700	Gastroenterology / Endoscopic Investigation
1300	GI012	Colonic manometry	26775	31500	31500	Gastroenterology / Endoscopic Investigation

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Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1301	GI013	Biliary Manometry	32895	38700	38700	Gastroenterology / Endoscopic Investigation
1302	GI014	Breath Tests (Urea breath test/ H. pylori breath test)/RUT	2211	2601	2601	Gastroenterology / Endoscopic Investigation
1303	MG001	Gastroscopy/Upper GI Endoscopy with or without Biopsy	3060	3600	3600	Gastroenterology / Endoscopic Procedures
1304	MG002	Lower GI Endoscopy(Colonoscopy/Sigmoidoscopy) with or without Biopsy	4590	5400	5400	Gastroenterology / Endoscopic Procedures
1305	MG003	Endoscopic mucosal resection	10251	12060	12060	Gastroenterology / Endoscopic Procedures
1306	MG004	Endoscopic Polypectomy - GIT	15300	18000	18000	Gastroenterology / Endoscopic Procedures
1307	MG005	Oesophageal Stricture dilatation	7038	8280	8280	Gastroenterology / Endoscopic Procedures
1308	MG006	Balloon dilatation of achalasia cardia	10251	12060	12060	Gastroenterology / Endoscopic Procedures
1309	MG007	Gastrointestinal (GIT) Foreign body removal	15300	18000	18000	Gastroenterology / Endoscopic Procedures
1310	MG008	Oesophageal stenting excluding the cost of stent	10251	12060	12060	Gastroenterology / Endoscopic Procedures
1311	MG009	Band ligation of oesophageal varices	6503	7650	7650	Gastroenterology / Endoscopic Procedures
1312	MG010	Sclerotherapy of oesophageal varices	6503	7650	7650	Gastroenterology / Endoscopic Procedures
1313	MG011	Glue injection of varices	10251	12060	12060	Gastroenterology / Endoscopic Procedures
1314	MG012	Argon plasma coagulation	7038	8280	8280	Gastroenterology / Endoscopic Procedures

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Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1315	MG013	Pyloric balloon dilatation	6503	7650	7650	Gastroenterology / Endoscopic Procedures
1316	MG014	Enteral stenting excluding cost of the stent	15300	18000	18000	Gastroenterology / Endoscopic Procedures
1317	MG015	Duodenal stricture dilation	6503	7650	7650	Gastroenterology / Endoscopic Procedures
1318	MG016	Single balloon enteroscopy	10251	12060	12060	Gastroenterology / Endoscopic Procedures
1319	MG017	Double balloon enteroscopy	15300	18000	18000	Gastroenterology / Endoscopic Procedures
1320	MG018	Capsule endoscopy excluding the cost of capsule	10251	12060	12060	Gastroenterology / Endoscopic Procedures
1321	MG019	Piles banding	3825	4500	4500	Gastroenterology / Endoscopic Procedures
1322	MG020	Colonic stricture dilatation	6503	7650	7650	Gastroenterology / Endoscopic Procedures
1323	MG021	Hot biopsy forceps procedures	6503	7650	7650	Gastroenterology / Endoscopic Procedures
1324	MG022	Colonic stenting excluding cost of the stent	10251	12060	12060	Gastroenterology / Endoscopic Procedures
1325	MG023	Junction biopsy	3825	4500	4500	Gastroenterology / Endoscopic Procedures
1326	MG024	Conjugal microscopy	6503	7650	7650	Gastroenterology / Endoscopic Procedures
1327	MG025	ERCP (Endoscopic Retrograde Cholangio – Pancreatography) Diagnostic	10251	12060	12060	Gastro and Hepatobiliary Investigation
1328	MG026	Endoscopic sphincterotomy by ERCP	15300	18000	20700	Gastroenterology / Endoscopic Procedures

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Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1329	MG027	Common Bile Duct (CBD) stone extraction by ERCP	15300	18000	20700	Gastroenterology / Endoscopic Procedures
1330	MG028	Common Bile Duct (CBD) stricture dilatation by ERCP	15300	18000	20700	Gastroenterology / Endoscopic Procedures
1331	MG029	Biliary stenting (plastic and metallic) by ERCP	15300	18000	20700	Gastroenterology / Endoscopic Procedures
1332	MG030	Mechanical lithotripsy of CBD stones by ERCP	26775	31500	36225	Gastroenterology / Endoscopic Procedures
1333	MG031	Pancreatic sphincterotomy by ERCP	15300	18000	20700	Gastroenterology / Endoscopic Procedures
1334	MG032	Pancreatic stricture dilatation by ERCP	15300	18000	20700	Gastroenterology / Endoscopic Procedures
1335	MG033	Pancreatic stone extraction by ERCP	15300	18000	20700	Gastroenterology / Endoscopic Procedures
1336	MG034	Mechanical lithotripsy of pancreatic stones	26775	31500	36225	Gastroenterology / Endoscopic Procedures
1337	MG035	Endoscopic cysto gastrostomy	15300	18000	20700	Gastroenterology / Endoscopic Procedures
1338	MG036	Balloon dilatation of papilla	15300	18000	20700	Gastroenterology / Endoscopic Procedures
1339	MG037	Percutaneous Transhepatic Biliary Drainage (PTBD)	15300	18000	20700	Gastroenterology/Interventional Radiology Procedures
1340	MG038	Vascular Embolization	32895	38700	44505	Gastroenterology/Interventional Radiology Procedures
1341	MG039	Transjugular Intrahepatic Portosystemic Shunt (TIPS)	40545	47700	54855	Gastroenterology/Interventional Radiology Procedures
1342	MG040	Inferior Vena Cava (IVC) Venography and Hepatic Vein (HV Venography)	32895	38700	44505	Gastroenterology/Interventional Radiology Procedures

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Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1343	MG041	Muscular Stenting	40545	47700	54855	Gastroenterology / Endoscopic Procedures
1344	MG042	Balloon-Occluded Retrograde Intravenous Obliteration (BRTO)	40545	47700	54855	Gastroenterology/Interventional Radiology Procedures
1345	MG043	Portal Haemodynamic Studies	6503	7650	7650	Gastroenterology/Interventional Radiology Procedures
1346	MG044	Sengstaken Blakemore (SB) Tube Tamponade	7038	8280	8280	Gastroenterology / Endoscopic Procedures
1347	MG045	Lintas Machles Tube Tempode	4590	5400	5400	Gastroenterology / Endoscopic Procedures
1348	MG046	EUS (Endoscopic Ultrasound) guided FNAC Excluding the cost of the Needle	12623	14850	14850	Gastroenterology / Endoscopic Procedures
1349	AG001	Atresia of Oesophagus and Tracheo Oesophageal Fistula	40545	47700	54855	Abdomen/GI Surgery Procedure
1350	AG002	Operations for Replacement of Oesophagus by Colon / Colon-Inter position or Replacement of Oesophagus	40545	47700	54855	Abdomen/GI Surgery Procedure
1351	AG003	Heller’s Operation	32895	38700	44505	Abdomen/GI Surgery Procedure
1352	AG004	Oesophageal Intubation (Mousseau Barbin Tube)	21038	24750	28463	Abdomen/GI Surgery Procedure
1353	AG005	Achalasia Cardia Transthoracic	32895	38700	44505	Abdomen/GI Surgery Procedure
1354	AG006	Achalasia Cardia Abdominal	32895	38700	44505	Abdomen/GI Surgery Procedure
1355	AG007	Pyloromyotomy	21038	24750	28463	Abdomen/GI Surgery Procedure
1356	AG008	Gastrostomy	21038	24750	28463	Abdomen/GI Surgery Procedure

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Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1357	AG009	Simple Closure of Perforated peptic Ulcer	26775	31500	36225	Abdomen/GI Surgery Procedure
1358	AG010	Vagotomy Pyloroplasty / Gastro Jejunostomy	32895	38700	44505	Abdomen/GI Surgery Procedure
1359	AG011	Duodenojejunostomy	40545	47700	54855	Abdomen/GI Surgery Procedure
1360	AG012	Partial/Subtotal Gastrectomy for Ulcer	40545	47700	54855	Abdomen/GI Surgery Procedure
1361	AG013	Operation for Bleeding Peptic Ulcer	32895	38700	44505	Abdomen/GI Surgery Procedure
1362	AG014	Operation for Gastrojejunal Ulcer	32895	38700	44505	Abdomen/GI Surgery Procedure
1363	AG015	Highly Selective Vagotomy	40545	47700	54855	Abdomen/GI Surgery Procedure
1364	AG016	Selective Vagotomy & Drainage	40545	47700	54855	Abdomen/GI Surgery Procedure
1365	AG017	Exploratory Laparotomy (Open)	21038	24750	28463	Abdomen/GI Surgery Procedure
1366	AG018	Congenital Diaphragmatic Hernia	32895	38700	44505	Abdomen/GI Surgery Procedure
1367	AG019	Hiatus Hernia Repair- Abdominal (excluding cost of mesh and tacker if used)	27770	32670	37571	Abdomen/GI Surgery Procedure
1368	AG020	Hiatus Hernia Repair- Transthoracic (excluding cost of mesh and tacker if used)	27770	32670	37571	Abdomen/GI Surgery Procedure
1369	AG021	Epigastric Hernia Repair - excluding the cost of mesh and tacker	21038	24750	28463	Abdomen/GI Surgery Procedure
1370	AG022	Umbilical Hernia Repair - excluding the cost of mesh and tacker	26775	31500	36225	Abdomen/GI Surgery Procedure

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Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1371	AG023	Ventral /incisional Hernia Repair - excluding the cost of mesh and tacker	26775	31500	36225	Abdomen/GI Surgery Procedure
1372	AG024	Inguinal Hernia Herniorrhaphy	21879	25740	29601	Abdomen/GI Surgery Procedure
1373	AG025	Inguinal Hernia - Hernioplasty excluding the cost of mesh and tacker	26775	31500	36225	Abdomen/GI Surgery Procedure
1374	AG026	Femoral Hernia Repair - excluding the cost of mesh and tacker	26775	31500	36225	Abdomen/GI Surgery Procedure
1375	AG027	Rare Hernias Repair (Spigelian, Obturator, Lumbar, Sciatic) - excluding the cost of mesh and tacker	32895	38700	44505	Abdomen/GI Surgery Procedure
1376	AG028	Splenectomy - For Trauma	40545	47700	54855	Abdomen/GI Surgery Procedure
1377	AG029	Splenectomy - For Hypersplenism	48195	56700	65205	Abdomen/GI Surgery Procedure
1378	AG030	Splenorenal Anastomosis	40545	47700	54855	Abdomen/GI Surgery Procedure
1379	AG031	Portocaval Anastomosis	48195	56700	65205	Abdomen/GI Surgery Procedure
1380	AG032	Direct Operation on Oesophagus for Portal Hypertension	40545	47700	54855	Abdomen/GI Surgery Procedure
1381	AG033	Mesentericocaval Anastomosis	32895	38700	44505	Abdomen/GI Surgery Procedure
1382	AG034	Warren Shunt (Distal Splenorenal Shunt)	40545	47700	54855	Abdomen/GI Surgery Procedure
1383	AG035	Pancreaticoduodenectomy (Whipple's procedure)	40545	47700	54855	Abdomen/GI Surgery Procedure
1384	AG036	Cystojejunostomy or Cystogastrostomy	32895	38700	44505	Abdomen/GI Surgery Procedure

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Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1385	AG037	Cholecystectomy	26775	31500	36225	Abdomen/GI Surgery Procedure
1386	AG038	Cholecystectomy & Exploration of CBD	27770	32670	37571	Abdomen/GI Surgery Procedure
1387	AG039	Repair of Common Bile Duct (CBD)	32895	38700	44505	Abdomen/GI Surgery Procedure
1388	AG040	Cholecystostomy	20196	23760	27324	Abdomen/GI Surgery Procedure
1389	AG041	Operation for Hydatid Cyst of Liver	22721	26730	30740	Abdomen/GI Surgery Procedure
1390	AG042	Hepatic Resections (Lobectomy /Hepatectomy)	27770	32670	37571	Abdomen/GI Surgery Procedure
1391	AG043	Operation on Adrenal Glands - Bilateral	48195	56700	65205	Abdomen/GI Surgery Procedure
1392	AG044	Operation on Adrenal Glands - Unilateral	32895	38700	44505	Abdomen/GI Surgery Procedure
1393	AG045	Appendicectomy	15989	18810	21632	Abdomen/GI Surgery Procedure
1394	AG046	Appendicular Abscess – Drainage	26775	31500	36225	Abdomen/GI Surgery Procedure
1395	AG047	Mesenteric Cyst- Excision	26775	31500	36225	Abdomen/GI Surgery Procedure
1396	AG048	Diagnostic Peritonioscopy/Laparoscopy	15300	18000	20700	Abdomen/GI Surgery Procedure
1397	AG049	Jejunostomy	26775	31500	36225	Abdomen/GI Surgery Procedure
1398	AG050	Ileostomy	26775	31500	36225	Abdomen/GI Surgery Procedure

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Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1399	AG051	Resection & Anastomosis of Small Intestine	39971	47025	54079	Abdomen/GI Surgery Procedure
1400	AG052	Duodenal Diverticulum	40545	47700	54855	Abdomen/GI Surgery Procedure
1401	AG053	Operation for Intestinal Obstruction including resection , anastomosis ,Adhesiolysis	40545	47700	54855	Abdomen/GI Surgery Procedure
1402	AG054	Operation for Intestinal perforation including resection ,anastomosis , Adhesiolysis	40545	47700	54855	Abdomen/GI Surgery Procedure
1403	AG055	Operations for Benign Tumours of Small Intestine	40545	47700	54855	Abdomen/GI Surgery Procedure
1404	AG056	Excision of Small Intestine Fistula	37868	44550	51233	Abdomen/GI Surgery Procedure
1405	AG057	Operations for GI Bleed	40545	47700	54855	Abdomen/GI Surgery Procedure
1406	AG058	Operations for Haemorrhage of Small Intestines	40545	47700	54855	Abdomen/GI Surgery Procedure
1407	AG059	Operations of the Duplication of the Intestines – including Exploratory Laparotomy	34502	40590	46679	Abdomen/GI Surgery Procedure
1408	AG060	Operations for Recurrent Intestinal Obstruction (Noble Plication & Other Operations for Adhesions)	40545	47700	54855	Abdomen/GI Surgery Procedure
1409	AG061	Ileosigmoidostomy and related resection	40545	47700	54855	Abdomen/GI Surgery Procedure
1410	AG062	Ileotransverse Colostomy and related resection	40545	47700	54855	Abdomen/GI Surgery Procedure
1411	AG063	Caecostomy	26775	31500	36225	Abdomen/GI Surgery Procedure
1412	AG064	Loop Colostomy Transverse Sigmoid	32895	38700	44505	Abdomen/GI Surgery Procedure

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Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1413	AG065	Terminal Colostomy	25245	29700	34155	Abdomen/GI Surgery Procedure
1414	AG066	Closure of Colostomy	25245	29700	34155	Abdomen/GI Surgery Procedure
1415	AG067	Right Hemicolectomy	26928	31680	36432	Abdomen/GI Surgery Procedure
1416	AG068	Left Hemicolectomy	26928	31680	36432	Abdomen/GI Surgery Procedure
1417	AG069	Total Colectomy	33660	39600	45540	Abdomen/GI Surgery Procedure
1418	AG070	Operations for Volvulus of Large Bowel	40545	47700	54855	Abdomen/GI Surgery Procedure
1419	AG071	Operations for Sigmoid Diverticulitis	32895	38700	44505	Abdomen/GI Surgery Procedure
1420	AG072	Fissure in Ano with Internal sphincterotomy with fissurectomy.	26775	31500	36225	Abdomen/GI Surgery Procedure
1421	AG073	Fissure in Ano - Fissurectomy	21038	24750	28463	Abdomen/GI Surgery Procedure
1422	AG074	Rectal Polyp-Excision	11529	13563	15597	Abdomen/GI Surgery Procedure
1423	AG075	Fistula in Ano - High Fistulectomy	26775	31500	36225	Abdomen/GI Surgery Procedure
1424	AG076	Fistula in Ano - Low Fistulectomy	19355	22770	26186	Abdomen/GI Surgery Procedure
1425	AG077	Prolapse Rectum - Thiersch Wiring	21038	24750	28463	Abdomen/GI Surgery Procedure
1426	AG078	Prolapse Rectum - Rectopexy	11781	13860	15939	Abdomen/GI Surgery Procedure

CGHS rates for Tier II (Y City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1427	AG079	Excision of Pilonidal Sinus (open)	18513	21780	25047	Abdomen/GI Surgery Procedure
1428	AG080	Excision of Pilonidal Sinus with closure	21038	24750	28463	Abdomen/GI Surgery Procedure
1429	AG081	Abdomino-Perineal Excision of Rectum	40545	47700	54855	Abdomen/GI Surgery Procedure
1430	AG082	Anterior Resection of Rectum	48195	56700	65205	Abdomen/GI Surgery Procedure
1431	AG083	Pull Through Abdominal Resection	40545	47700	54855	Abdomen/GI Surgery Procedure
1432	AG084	Retro Peritoneal Tumour Removal	40545	47700	54855	Abdomen/GI Surgery Procedure
1433	AG085	Laparoscopic Fundoplication	48195	56700	65205	Abdomen/GI Surgery Procedure
1434	AG086	Laparoscopic Splenectomy	48195	56700	65205	Abdomen/GI Surgery Procedure
1435	AG087	Laparoscopic Removal of hydatid cyst	48195	56700	65205	Abdomen/GI Surgery Procedure
1436	AG088	Laparoscopic Treatment of Pseudo Pancreatic cyst	48195	56700	65205	Abdomen/GI Surgery Procedure
1437	AG089	Laparoscopic Whipple's operation (Laparoscopic Pancreaticoduodenectomy	40545	47700	54855	Abdomen/GI Surgery Procedure
1438	AG090	Laparoscopic GI bypass operation	48195	56700	65205	Abdomen/GI Surgery Procedure
1439	AG091	Laparoscopic Total Colectomy	48195	56700	65205	Abdomen/GI Surgery Procedure
1440	AG092	Laparoscopic Hemicolectomy	40545	47700	54855	Abdomen/GI Surgery Procedure

CGHS rates for Tier II (Y City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1441	AG093	Laparoscopic Anterior Resection (of Intestine/ Rectum)	48195	56700	65205	Abdomen/GI Surgery Procedure
1442	AG094	Laparoscopic Cholecystectomy	27770	32670	37571	Abdomen/GI Surgery Procedure
1443	AG095	Laparoscopic Appendectomy	25245	29700	34155	Abdomen/GI Surgery Procedure
1444	AG096	Laparoscopic Hernia – Inguinoplasty (excluding the cost of Tacker and Mesh)	29453	34650	39848	Abdomen/GI Surgery Procedure
1445	AG097	Laparoscopic Ventral Hernia Repair (excluding the cost of Tacker and Mesh)	29453	34650	39848	Abdomen/GI Surgery Procedure
1446	AG098	Laparoscopic Paraumbilical Hernia Repair (excluding the cost of Tacker and Mesh)	29453	34650	39848	Abdomen/GI Surgery Procedure
1447	AG099	Laparoscopic Adrenalectomy	48195	56700	65205	Abdomen/GI Surgery Procedure
1448	PS001	Diaphragmatic Hernia Repair (Thoracic or Abdominal Approach)	40545	47700	54855	Paediatric Surgery Procedure
1449	PS002	Tracheoesophageal Fistula (Correction Surgery)	40545	47700	54855	Paediatric Surgery Procedure
1450	PS003	Colon Replacement of Oesophagus	32895	38700	44505	Paediatric Surgery Procedure
1451	PS004	Omphalomesenteric Cyst Excision	32895	38700	44505	Paediatric Surgery Procedure
1452	PS005	Omphalomesenteric Duct- Excision	32895	38700	44505	Paediatric Surgery Procedure
1453	PS006	Omphalocele 1st Stage (Hernia Repair)	26775	31500	36225	Paediatric Surgery Procedure
1454	PS007	Omphalocele 2nd Stage (Hernia Repair)	26775	31500	36225	Paediatric Surgery Procedure

CGHS rates for Tier II (Y City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1455	PS008	Gastroschisis Repair	32895	38700	44505	Paediatric Surgery Procedure
1456	PS009	Inguinal Herniotomy	26775	31500	36225	Paediatric Surgery Procedure
1457	PS010	Congenital Hydrocele	26775	31500	36225	Paediatric Surgery Procedure
1458	PS011	Hydrocele of Cord	21038	24750	28463	Paediatric Surgery Procedure
1459	PS012	Torsion Testis Operation	26775	31500	36225	Paediatric Surgery Procedure
1460	PS013	Congenital Pyloric Stenosis- operation	26775	31500	36225	Paediatric Surgery Procedure
1461	PS014	Duodenal Atresia Operation	32895	38700	44505	Paediatric Surgery Procedure
1462	PS015	Pancreatic Ring Operation	40545	47700	54855	Paediatric Surgery Procedure
1463	PS016	Meconium Ileus Operation	32895	38700	44505	Paediatric Surgery Procedure
1464	PS017	Malrotation of Intestines Operation	32895	38700	44505	Paediatric Surgery Procedure
1465	PS018	Rectal Biopsy (Megacolon)	15300	18000	20700	Paediatric Surgery Procedure
1466	PS019	Colostomy Transverse	32895	38700	44505	Paediatric Surgery Procedure
1467	PS020	Colostomy Left Iliac	32895	38700	44505	Paediatric Surgery Procedure
1468	PS021	Abdominal Perineal Pull Through (Hirschsprung's Disease)	40545	47700	54855	Paediatric Surgery Procedure

CGHS rates for Tier II (Y City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1469	PS022	Imperforate Anus Low Anomaly -Cut Back Operation	21038	24750	28463	Paediatric Surgery Procedure
1470	PS023	Imperforate Anus Low Anomaly - Perineal Anoplasty	26775	31500	36225	Paediatric Surgery Procedure
1471	PS024	Imperforate Anus High Anomaly -Sacroabdomino Perineal Pull Through	40545	47700	54855	Paediatric Surgery Procedure
1472	PS025	Imperforate Anus High Anomaly - Closure of Colostomy	26775	31500	36225	Paediatric Surgery Procedure
1473	PS026	Intussusception Operation	32895	38700	44505	Paediatric Surgery Procedure
1474	PS027	Choledochoduodenostomy for Atresia of Extra Hepatic Biliary Duct	40545	47700	54855	Paediatric Surgery Procedure
1475	PS028	Operation of Choledochal Cyst	40545	47700	54855	Paediatric Surgery Procedure
1476	PS029	Nephrectomy for -Pyonephrosis	32895	38700	44505	Paediatric Surgery Procedure
1477	PS030	Nephrectomy for - Hydronephrosis	32895	38700	44505	Paediatric Surgery Procedure
1478	PS031	Sacro-Coccygeal Teratoma Excision	32895	38700	44505	Paediatric Surgery Procedure
1479	PS032	Congenital Atresia & Stenosis of Small Intestine	40545	47700	54855	Paediatric Surgery Procedure
1480	PS033	Malrotation & Volvulus of the Midgut	32895	38700	44505	Paediatric Surgery Procedure
1481	PS034	Excision of Meckel’s Diverticulum	32895	38700	44505	Paediatric Surgery Procedure
1482	OG001	Non Stress Test	1148	1350	1350	Obstetrics Investigation

CGHS rates for Tier II (Y City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1483	OG002	Normal delivery with or without Episiotomy & P. repair/ forceps delivery /Vacuum delivery/assisted breech delivery including Routine New Born Care	26775	31500	31500	Obstetrics And Gynaecology Procedure
1484	OG003	Normal Delivery of High Risk Pregnancy(Preeclampsia/Eclapsia/GDM/Cardiac/Vascular/Renal/Pulmonary/Twin Pregnancy/RA/SLE/IVF Conception/Severe Anaemia,)	32895	38700	38700	Obstetrics And Gynaecology Procedure
1485	OG004	Caesarean Section(CS) with or without Sterilization including Routine New Born Care	40545	47700	47700	Obstetrics And Gynaecology Procedure
1486	OG005	Caesarian Delivery of High Risk Pregnancy(Preeclampsia/Eclapsia/GDM/Cardiac/Vascular/Renal/Pulmonary/Twin Pregnancy/RA/SLE/IVF Conception/Severe Anaemia)	48195	56700	56700	Obstetrics And Gynaecology Procedure
1487	OG006	Rupture Uterus Closure & Repair with Tubal Ligation	32895	38700	38700	Obstetrics And Gynaecology Procedure
1488	OG007	Perforation of Uterus after D/E Laparotomy & Closure	15300	18000	18000	Obstetrics And Gynaecology Procedure
1489	OG008	Laparotomy for Ectopic Pregnancy	26775	31500	31500	Obstetrics And Gynaecology Procedure
1490	OG009	Laparotomy peritonitis Lavage and Drainage	26775	31500	31500	Obstetrics And Gynaecology Procedure
1491	OG010	Ovarian Cystectomy - Laparoscopic.	32895	38700	38700	Obstetrics And Gynaecology Procedure
1492	OG011	Ovarian Cystectomy - Laparotomy.	26775	31500	31500	Obstetrics And Gynaecology Procedure
1493	OG012	Laparoscopic Broad Ligament Hematoma Drainage with repair	10251	12060	12060	Obstetrics And Gynaecology Procedure
1494	OG013	Exploration of perineal Haematoma & Repair	10251	12060	12060	Obstetrics And Gynaecology Procedure

CGHS rates for Tier II (Y City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1495	OG014	Exploration of abdominal Haematoma (after laparotomy/ LSCS)	21038	24750	24750	Obstetrics And Gynaecology Procedure
1496	OG015	Manual Removal of Placenta	7038	8280	8280	Obstetrics And Gynaecology Procedure
1497	OG016	Examination under anaesthesia (EUA)	3825	4500	4500	Obstetrics And Gynaecology Procedure
1498	OG017	Burst-Abdomen Repair	26775	31500	31500	Obstetrics And Gynaecology Procedure
1499	OG018	Gaping Perineal Wound Secondary Suturing	3825	4500	4500	Obstetrics And Gynaecology Procedure
1500	OG019	Gaping Abdominal Wound Secondary Suturing	6503	7650	7650	Obstetrics And Gynaecology Procedure
1501	OG020	Complete Perineal Tear-Repair	7038	8280	8280	Obstetrics And Gynaecology Procedure
1502	OG021	Pelvic Floor Repair(Rectocele +/- Cystocele +/- Enterocele)	26775	31500	31500	Obstetrics And Gynaecology Procedure
1503	OG022	Suction Evacuation Vesicular Mole	21038	24750	24750	Obstetrics And Gynaecology Procedure
1504	OG023	Colpotomy/Post-Coital Tear Repair	7038	8280	8280	Obstetrics And Gynaecology Procedure
1505	OG024	Excision of urethral carbuncle	10251	12060	12060	Obstetrics And Gynaecology Procedure
1506	OG025	Shirodkar/ McDonald stitch//Cervical Stitch(Cerclage)	10251	12060	12060	Obstetrics And Gynaecology Procedure
1507	OG026	Abdominal Hysterectomy with or without salpingo-oophorectomy	32895	38700	38700	Obstetrics And Gynaecology Procedure
1508	OG027	Non-descent Vaginal Hysterectomy (NDVH) with or without BSO	32895	38700	38700	Obstetrics And Gynaecology Procedure

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Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1509	OG028	Vaginal Hysterectomy (including of BSO) with or without repairs	32895	38700	38700	Obstetrics And Gynaecology Procedure
1510	OG029	Myomectomy -laparotomy	26775	31500	31500	Obstetrics And Gynaecology Procedure
1511	OG030	Myomectomy -laparoscopic	32895	38700	38700	Obstetrics And Gynaecology Procedure
1512	OG031	Vaginoplasty	32895	38700	38700	Obstetrics And Gynaecology Procedure
1513	OG032	Vulvectomy -Simple	26775	31500	31500	Obstetrics And Gynaecology Procedure
1514	OG033	Rectovaginal Fistula (RVF) Repair	32895	38700	38700	Obstetrics And Gynaecology Procedure
1515	OG034	Manchester/Fothergill's operation	26775	31500	31500	Obstetrics And Gynaecology Procedure
1516	OG035	Shirodkar's sling Operation or other sling operations for prolapse uterus	15300	18000	18000	Obstetrics And Gynaecology Procedure
1517	OG036	Laparoscopic sling operations for prolapse uterus	32895	38700	38700	Obstetrics And Gynaecology Procedure
1518	OG037	Dilatation and Curettage(diagnostic/therapeutic) with or without Polypectomy	10251	12060	12060	Obstetrics And Gynaecology Procedure
1519	OG038	Cervical Biopsy	7038	8280	8280	Obstetrics And Gynaecology Procedure
1520	OG039	Transcervical/Hysteroscopic Polypectomy	10251	12060	12060	Obstetrics And Gynaecology Procedure
1521	OG040	Excision of Vaginal Cyst/Bartholin Cyst/Gartner Cyst	7038	8280	8280	Obstetrics And Gynaecology Procedure
1522	OG041	Excision of Vaginal/Uterus Septum	15300	18000	18000	Obstetrics And Gynaecology Procedure

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Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1523	OG042	Diagnostic hysterolaparoscopy (DHL) with or without chromopertubation/Adhesiolysis/ovarian drilling	15300	18000	18000	Obstetrics And Gynaecology Procedure
1524	OG043	Laparoscopy Sterilization/Laparoscopic tubal occlusion(LTO)	21038	24750	24750	Obstetrics And Gynaecology Procedure
1525	OG044	Laparoscopically Assisted Vaginal Hysterectomy (LAVH) with or without BSO	48195	56700	56700	Obstetrics And Gynaecology Procedure
1526	OG045	Balloon Tamponade for Post Partum Haemorrhage/Conservative management of PPH(Atonic/traumatic PPH)	6503	7650	7650	Obstetrics And Gynaecology Procedure
1527	OG046	Total Laparoscopic Hysterectomy with or without BSO	48195	56700	56700	Obstetrics And Gynaecology Procedure
1528	OG047	Laparoscopic Treatment of Ectopic Pregnancy-Milking/Salpingotomy/Salpingectomy	32895	38700	38700	Obstetrics And Gynaecology Procedure
1529	OG048	Conisation of cervix/Chemical Cautery of Cervical Ectopy/Erosion	7038	8280	8280	Obstetrics And Gynaecology Procedure
1530	OG049	Diagnostic hysteroscopy with or without polypectomy/endometrial curettage	15300	18000	18000	Obstetrics And Gynaecology Procedure
1531	OG050	Laparotomy recanalization of Fallopian tubes-(Tuboplasty)	40545	47700	47700	Obstetrics And Gynaecology Procedure
1532	OG051	Laparoscopic recanalization of Fallopian tubes-(Tuboplasty)	40545	47700	47700	Obstetrics And Gynaecology Procedure
1533	OG052	Colposcopy	3825	4500	4500	Obstetrics And Gynaecology Procedure
1534	OG053	Inversion of Uterus – Vaginal Reposition	4590	5400	5400	Obstetrics And Gynaecology Procedure
1535	OG054	Inversion of Uterus – Abdominal Reposition	4590	5400	5400	Obstetrics And Gynaecology Procedure
1536	OG055	Vaginal Vesicovaginal Fistula (VVF) Repair	48195	56700	56700	Obstetrics And Gynaecology Procedure

CGHS rates for Tier II (Y City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1537	OG056	Interventional Ultrasonography- Chorionic villus sampling (CVS)	3825	4500	4500	Obstetrics And Gynaecology Procedure
1538	OG057	Amniocentesis	10251	12060	12060	Obstetrics And Gynaecology Procedure
1539	OG058	Thermal balloon ablation.	26775	31500	31500	Obstetrics And Gynaecology Procedure
1540	OG059	Ultrasonographic myolysis	21038	24750	24750	Obstetrics And Gynaecology Procedure
1541	OG060	Vaginal/Cervical Myomectomy	32895	38700	38700	Obstetrics And Gynaecology Procedure
1542	OG061	Intra Uterine Insemination	3825	4500	4500	Obstetrics And Gynaecology Procedure
1543	OG062	Intracytoplasmic sperm injection (ICSI)	15300	18000	18000	Obstetrics And Gynaecology Procedure
1544	OG063	Laparotomy abdominal sacro-colpopexy	40545	47700	47700	Obstetrics And Gynaecology Procedure
1545	OG064	Vaginal Colpopexy/colpopexy-abdominal	32895	38700	38700	Obstetrics And Gynaecology Procedure
1546	OG065	Laparoscopic abdominal colpopexy/sacro-colpopexy	40545	47700	47700	Obstetrics And Gynaecology Procedure
1547	OG066	Endometrial aspiration cytology/biopsy (including Pipelle Charges)	2295	2700	2700	Obstetrics And Gynaecology Procedure
1548	OG067	Laparoscopic treatment for stress incontinence	32895	38700	38700	Obstetrics And Gynaecology Procedure
1549	OG068	Transvaginal tapes for Stress incontinence	26775	31500	31500	Obstetrics And Gynaecology Procedure
1550	OG069	Trans-obturator tapes for Stress incontinence	32895	38700	38700	Obstetrics And Gynaecology Procedure

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Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1551	OG070	Interventional radiographic arterial embolization/Uterine artery embolization(UAE)	26775	31500	31500	Obstetrics And Gynaecology Procedure
1552	OG071	Internal Iliac Artery ligation	6503	7650	7650	Obstetrics And Gynaecology Procedure
1553	OG072	Surgical management of PPH (Uterine compression stitches/stepwise devascularisation)/peripartum hysterectomy	15300	18000	18000	Obstetrics And Gynaecology Procedure
1554	OG073	Intra-uterine fetal blood transfusion	40545	47700	47700	Obstetrics And Gynaecology Procedure
1555	OG074	Hysteroscopy Transcervical Resection of Endometrium (TCRE)	26775	31500	31500	Obstetrics And Gynaecology Procedure
1556	OG075	Hysteroscopy Removal of Intra-Uterine Contraceptive Device (IUCD)	15300	18000	18000	Obstetrics And Gynaecology Procedure
1557	OG076	hysteroscopic resection of uterine septum	26775	31500	31500	Obstetrics And Gynaecology Procedure
1558	OG077	Diagnostic Hysteroscopy with or without endometrial Biopsy	15300	18000	18000	Obstetrics And Gynaecology Procedure
1559	OG078	Sterilization (minilap)-post partum/post abortion	7038	8280	8280	Obstetrics And Gynaecology Procedure
1560	OG079	Interval Sterilization(minilap)-BAT / Male Sterilization(Vasectomy)	15300	18000	18000	Obstetrics And Gynaecology Procedure
1561	OG080	Medical Termination of Pregnancy (MTP)- 1st Trimester with Medicine /Manual Vacuum Aspiration /Check Curettage	10251	12060	12060	Obstetrics And Gynaecology Procedure
1562	OG081	Medical Termination of Pregnancy (MTP) - 2nd Trimester /Suction and Evacuation/Dilatation and Curettage/Dilatation and expulsion	15300	18000	18000	Obstetrics And Gynaecology Procedure
1563	OG082	Insertion of IUD/IUCD/Pessary	3060	3600	3600	Obstetrics And Gynaecology Procedure
1564	OG083	Removal of IUD/IUCD/Pessary	765	900	900	Obstetrics And Gynaecology Procedure

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Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1565	NU001	Ultrasound guided kidney Biopsy	7038	8280	8280	Nephrology And Urology - Biopsy
1566	NU002	Testicular Biopsy	10251	12060	12060	Nephrology And Urology - Biopsy
1567	NU003	Transrectal Ultrasound (TRUS) guided prostate biopsy	7038	8280	8280	Nephrology And Urology - Biopsy
1568	NU004	Uroflow Study (Uroflowmetry)	765	900	900	Nephrology And Urology Investigation
1569	NU005	Urodynamic Study (Cystometry)	2295	2700	2700	Nephrology And Urology Investigation
1570	NU006	Voiding-cysto-urethrogram and retrograde urethrogram (Nephrostogram)	6503	7650	7650	Nephrology And Urology Investigation
1571	NU007	Fistulogram for Arteriovenous Fistula	7038	8280	8280	Nephrology And Urology Investigation
1572	NU008	Partial Nephrectomy -open	32895	38700	44505	Nephrology And Urology Procedure
1573	NU009	Partial Nephrectomy-Laparoscopic/Endoscopic	40545	47700	54855	Nephrology And Urology Procedure
1574	NU010	Nephrectomy Simple -Open	48195	56700	65205	Nephrology And Urology Procedure
1575	NU011	Laparoscopic Nephrectomy	48195	56700	65205	Nephrology And Urology Procedure
1576	NU012	Nephrolithotomy -open	32895	38700	44505	Nephrology And Urology Procedure
1577	NU013	Nephrolithotomy -Laparoscopic/endoscopic	40545	47700	54855	Nephrology And Urology Procedure
1578	NU014	Pyelolithotomy-open	48195	56700	65205	Nephrology And Urology Procedure

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Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1579	NU015	Pyelolithotomy -Laparoscopic/endoscopic	40545	47700	54855	Nephrology And Urology Procedure
1580	NU016	Operations for Hydronephrosis -pyeloplasty open	40545	47700	54855	Nephrology And Urology Procedure
1581	NU017	Operations for Hydronephrosis -pyeloplasty Lap/endoscopic	48195	56700	65205	Nephrology And Urology Procedure
1582	NU018	Operations for Hydronephrosis Endopyelotomy antegrade	32895	38700	44505	Nephrology And Urology Procedure
1583	NU019	Operations for Hydronephrosis Endopyelotomy retrograde	32895	38700	44505	Nephrology And Urology Procedure
1584	NU020	Operations for Hydronephrosis ureterocalicostomy	32895	38700	44505	Nephrology And Urology Procedure
1585	NU021	Operations for Hydronephrosis-Ileal ureter	40545	47700	54855	Nephrology And Urology Procedure
1586	NU022	Open Drainage of Perinephric Abscess	26775	31500	36225	Nephrology And Urology Procedure
1587	NU023	Percutaneous Drainage of Perinephric Abscess -Ultrasound guided	10251	12060	12060	Nephrology And Urology Procedure
1588	NU024	Cavernostomy	21038	24750	28463	Nephrology And Urology Procedure
1589	NU025	Operations for Cyst of the Kidney -open	32895	38700	44505	Nephrology And Urology Procedure
1590	NU026	Operations for Cyst of the Kidney Lap/endoscopic	40545	47700	54855	Nephrology And Urology Procedure
1591	NU027	Ureterolithotomy -open	32895	38700	44505	Nephrology And Urology Procedure
1592	NU028	Ureterolithotomy-Lap/Endoscopic	40545	47700	54855	Nephrology And Urology Procedure

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Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1593	NU029	Nephroureterectomy open	40545	47700	54855	Nephrology And Urology Procedure
1594	NU030	Operations for Ureter for -Double Ureters	40545	47700	54855	Nephrology And Urology Procedure
1595	NU031	Operations for Ureter -for Ectopia of Single Ureter	32895	38700	44505	Nephrology And Urology Procedure
1596	NU032	Operations for Vesicoureteral Reflux (VUR) -Open	32895	38700	44505	Nephrology And Urology Procedure
1597	NU033	Operations for Vesicoureteral Reflux (VUR)-Lap/Endoscopic	40545	47700	54855	Nephrology And Urology Procedure
1598	NU034	Operations for Vesicoureteral Reflux (VUR)/ Urinary incontinence with bulking agents	32895	38700	44505	Nephrology And Urology Procedure
1599	NU035	Ureterostomy - Cutaneous	26775	31500	36225	Nephrology And Urology Procedure
1600	NU036	Uretero-Colic anastomosis	32895	38700	44505	Nephrology And Urology Procedure
1601	NU037	Formation of an Ileal Conduit	40545	47700	54855	Nephrology And Urology Procedure
1602	NU038	Ureteric Catheterisation/DJ Stenting	15300	18000	20700	Nephrology And Urology Procedure
1603	NU039	DJ stent removal	7321	8613	8613	Nephrology And Urology Procedure
1604	NU040	Biopsy of Bladder (Cystoscopic) including (Cold Cup Biopsy)	10251	12060	12060	Nephrology And Urology Procedure
1605	NU041	Cysto-Litholapaxy	26775	31500	36225	Nephrology And Urology Procedure
1606	NU042	Operations for Injuries of the Bladder	32895	38700	44505	Nephrology And Urology Procedure

CGHS rates for Tier II (Y City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1607	NU043	Suprapubic Drainage (Cystostomy/vesicostomy)	15300	18000	20700	Nephrology And Urology Procedure
1608	NU044	Simple Cystectomy	32895	38700	44505	Nephrology And Urology Procedure
1609	NU045	Diverticulectomy -open	32895	38700	44505	Nephrology And Urology Procedure
1610	NU046	Diverticulectomy- Lap/Endoscopic	40545	47700	54855	Nephrology And Urology Procedure
1611	NU047	Diverticulectomy -Endoscopic incision of neck	26775	31500	36225	Nephrology And Urology Procedure
1612	NU048	Augmentation Cystoplasty	40545	47700	54855	Nephrology And Urology Procedure
1613	NU049	Operations for Exstrophy of the Bladder- Single stage repair	32895	38700	44505	Nephrology And Urology Procedure
1614	NU050	Operations for Exstrophy of the Bladder- Multistage repair	32895	38700	44505	Nephrology And Urology Procedure
1615	NU051	Operations for Exstrophy of the Bladder- simple cystectomy with urinary diversion	48195	56700	65205	Nephrology And Urology Procedure
1616	NU052	Repair of Ureterocele -Open	32895	38700	44505	Nephrology And Urology Procedure
1617	NU053	Repair of Ureterocele -Lap/Endoscopic	32895	38700	44505	Nephrology And Urology Procedure
1618	NU054	Repair of Ureterocele -Endoscopic incision	26775	31500	36225	Nephrology And Urology Procedure
1619	NU055	Vesicovaginal Fistula (VVF) Repair (Open)	32895	38700	44505	Nephrology And Urology Procedure
1620	NU056	Vesicovaginal Fistula (VVF) Repair (Laparoscopic)	40545	47700	54855	Nephrology And Urology Procedure

CGHS rates for Tier II (Y City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1621	NU057	Open Suprapubic Prostatectomy	32895	38700	44505	Nephrology And Urology Procedure
1622	NU058	Open Retropubic Prostatectomy	32895	38700	44505	Nephrology And Urology Procedure
1623	NU059	Transurethral Resection of Prostate (TURP)	48195	56700	65205	Nephrology And Urology Procedure
1624	NU060	Urethroscopy/ Cystopanendoscopy	10251	12060	12060	Nephrology And Urology Procedure
1625	NU061	Internal urethrotomy -optical	21038	24750	28463	Nephrology And Urology Procedure
1626	NU062	Internal urethrotomy -Core through urethroplasty	32895	38700	44505	Nephrology And Urology Procedure
1627	NU063	Urethral Reconstruction -End to end anastomosis	32895	38700	44505	Nephrology And Urology Procedure
1628	NU064	Urethral Reconstruction - substitution urethroplasty (Transpubic urethroplasty)	40545	47700	54855	Nephrology And Urology Procedure
1629	NU065	Abdomino Perineal urethroplasty	40545	47700	54855	Nephrology And Urology Procedure
1630	NU066	Posterior Urethral Valve fulguration.	26775	31500	36225	Nephrology And Urology Procedure
1631	NU067	Operations for Incontinence of Urine - Male -Open	32895	38700	44505	Nephrology And Urology Procedure
1632	NU068	Operations for Incontinence of Urine - Male -Sling	40545	47700	54855	Nephrology And Urology Procedure
1633	NU069	Operations for Incontinence of Urine - Male-Bulking agent	32895	38700	44505	Nephrology And Urology Procedure
1634	NU070	Operations for Incontinence of Urine - Female -Open	32895	38700	44505	Nephrology And Urology Procedure

CGHS rates for Tier II (Y City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1635	NU071	Operations for Incontinence of Urine - Female-Sling	40545	47700	54855	Nephrology And Urology Procedure
1636	NU072	Operations for Incontinence of Urine - Female-Bulking agent	32895	38700	44505	Nephrology And Urology Procedure
1637	NU073	Reduction of Paraphimosis	4590	5400	5400	Nephrology And Urology Procedure
1638	NU074	Circumcision	10251	12060	12060	Nephrology And Urology Procedure
1639	NU075	Meatotomy	6503	7650	7650	Nephrology And Urology Procedure
1640	NU076	Meatoplasty	10251	12060	12060	Nephrology And Urology Procedure
1641	NU077	Operations for Hypospadias + Chordee Correction	26775	31500	36225	Nephrology And Urology Procedure
1642	NU078	Operations for Hypospadias - Second Stage	32895	38700	44505	Nephrology And Urology Procedure
1643	NU079	Operations for Hypospadias - One Stage Repair	32895	38700	44505	Nephrology And Urology Procedure
1644	NU080	Operations for Crippled Hypospadias	32895	38700	44505	Nephrology And Urology Procedure
1645	NU081	Operations for Epispadias -primary repair	32895	38700	44505	Nephrology And Urology Procedure
1646	NU082	Operations for Epispadias-crippled epispadias	40545	47700	54855	Nephrology And Urology Procedure
1647	NU083	Partial Amputation of the Penis	26775	31500	36225	Nephrology And Urology Procedure
1648	NU084	Total amputation of the Penis	32895	38700	44505	Nephrology And Urology Procedure

CGHS rates for Tier II (Y City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1649	NU085	Orchidectomy-Simple	21038	24750	28463	Nephrology And Urology Procedure
1650	NU086	Epididymectomy	15300	18000	20700	Nephrology And Urology Procedure
1651	NU087	Operations for Hydrocele - Unilateral	21038	24750	28463	Nephrology And Urology Procedure
1652	NU088	Operations for Hydrocele - Bilateral	26775	31500	36225	Nephrology And Urology Procedure
1653	NU089	Operation for Torsion of Testis	21038	24750	28463	Nephrology And Urology Procedure
1654	NU090	Micro-surgical Vasovasostomy /Vaso epididymal anastomosis .	21038	24750	28463	Nephrology And Urology Procedure
1655	NU091	Operations for Varicocele Unilateral Microsurgical	26775	31500	36225	Nephrology And Urology Procedure
1656	NU092	Operations for Varicocele Palomo’s Unilateral -Laparoscopic	26775	31500	36225	Nephrology And Urology Procedure
1657	NU093	Operations for Varicocele Bilateral --Microsurgical	32895	38700	44505	Nephrology And Urology Procedure
1658	NU094	Operations for Varicocele Palomo’s Bilateral - Laparoscopic	32895	38700	44505	Nephrology And Urology Procedure
1659	NU095	Excision of Filarial Scrotum	21038	24750	28463	Nephrology And Urology Procedure
1660	NU096	Kidney Transplantation (related)	286110	336600	387090	Nephrology And Urology Procedure
1661	NU097	Kidney Transplantation (Spousal/ unrelated) Including immunosuppressant therapy	325125	382500	439875	Nephrology And Urology Procedure
1662	NU098	Kidney Transplantation (Cadaver)	267750	315000	362250	Nephrology And Urology Procedure

CGHS rates for Tier II (Y City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1663	NU099	ABO incompatible Transplantation	459000	540000	621000	Nephrology And Urology Procedure
1664	NU100	Kidney Transplant Graft Nephrectomy	62730	73800	84870	Nephrology And Urology Procedure
1665	NU101	Donor Nephrectomy (Open)	48195	56700	65205	Nephrology And Urology Procedure
1666	NU102	Donor Nephrectomy (Laparoscopic)	84150	99000	113850	Nephrology And Urology Procedure
1667	NU103	Post-Transplant Collection drainage for Lymphocele (open)	7038	8280	9522	Nephrology And Urology Procedure
1668	NU104	Post-Transplant Collection drainage for Lymphocele (percutaneous)	10251	12060	13869	Nephrology And Urology Procedure
1669	NU105	Post-Transplant Collection drainage for Lymphocele (Laparoscopic)	15300	18000	20700	Nephrology And Urology Procedure
1670	NU106	Arteriovenous Fistula for Haemodialysis	15300	18000	18000	Nephrology And Urology Procedure
1671	NU107	Arteriovenous Shunt for Haemodialysis	15300	18000	18000	Nephrology And Urology Procedure
1672	NU108	Jugular Catheterization for Haemodialysis	4590	5400	5400	Nephrology And Urology Procedure
1673	NU109	Subclavian Catheterization for Haemodialysis	4590	5400	5400	Nephrology And Urology Procedure
1674	NU110	One Sided (single Lumen) Femoral Catheterization for Haemodialysis	3060	3600	3600	Nephrology And Urology Procedure
1675	NU111	Bilateral (single Lumen) Femoral Catheterization for Haemodialysis	4590	5400	5400	Nephrology And Urology Procedure
1676	NU112	Double Lumen Femoral Catheterization for Haemodialysis	10251	12060	12060	Nephrology And Urology Procedure

CGHS rates for Tier II (Y City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1677	NU113	Permcath Insertion excluding the cost of the catheter	6503	7650	7650	Nephrology And Urology Procedure
1678	NU114	Arterio Venous Prosthetic Graft	32895	38700	44505	Nephrology And Urology Procedure
1679	NU115	Single lumen Jugular Catheterization	3825	4500	4500	Nephrology And Urology Procedure
1680	NU116	Single lumen Subclavian Catheterization	3825	4500	4500	Nephrology And Urology Procedure
1681	NU117	Plasma Exchange/ Plasmapheresis	15300	18000	18000	Nephrology And Urology Procedure
1682	NU118	Continuous Ambulatory Peritoneal Dialysis (CAPD) catheter insertion- Open method	15300	18000	18000	Nephrology And Urology Procedure
1683	NU119	Continuous Ambulatory Peritoneal Dialysis (CAPD) catheter insertion- Schlendinger/ Seldinger method	15300	18000	18000	Nephrology And Urology Procedure
1684	NU120	Sustained low efficiency haemodialysis /haemodialysis	7038	8280	8280	Nephrology And Urology Procedure
1685	NU121	Continuous Veno venous/Arteriovenous Haemofiltration /Haemofiltration/CRRT per day	13005	15300	15300	Nephrology And Urology Procedure
1686	NU122	Haemodialysis / Haemodialysis for Sero negative cases including Dialyser and all other Consumables	1913	2250	2250	Nephrology And Urology Procedure
1687	NU123	Haemodialysis / Haemodialysis for Sero Positive cases including Dialyser and all other Consumables	2295	2700	2700	Nephrology And Urology Procedure
1688	NU124	Acute Peritoneal Dialysis	4055	4770	4770	Nephrology And Urology Procedure
1689	NU125	Peritoneal Dialysis	2754	3240	3240	Nephrology And Urology Procedure
1690	NU126	Fistula stenosis dilation	10251	12060	12060	Nephrology And Urology Procedure

CGHS rates for Tier II (Y City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1691	NU127	Slow continuous Ultrafiltration	6503	7650	7650	Nephrology And Urology Procedure
1692	NU128	Percutaneous Nephrolithotomy (PCNL) - Unilateral	40545	47700	54855	Nephrology And Urology Procedure
1693	NU129	Percutaneous Nephrolithotomy (PCNL) - Bilateral	48195	56700	65205	Nephrology And Urology Procedure
1694	NU130	Endoscopic Bulking agent Inject (including cost of bulking agent)	26775	31500	36225	Nephrology And Urology Procedure
1695	NU131	Nephrostomy -Open	26775	31500	36225	Nephrology And Urology Procedure
1696	NU132	Nephrostomy -Lap/Endoscopic	26775	31500	36225	Nephrology And Urology Procedure
1697	NU133	Ureteric Reimplant for Megaureter/ Vesicoureteric reflux/ureterocele (Open)	32895	38700	44505	Nephrology And Urology Procedure
1698	NU134	Ureteric Reimplant for Megaureter / Vesicoureteric reflux/ ureterocele (Laparoscopic)	32895	38700	44505	Nephrology And Urology Procedure
1699	NU135	Partial Cystectomy	40545	47700	54855	Nephrology And Urology Procedure
1700	NU136	Transurethral Resection of Prostate (TURP) with Cystolithotripsy	48195	56700	65205	Nephrology And Urology Procedure
1701	NU137	Closure of Urethral Fistula	26775	31500	36225	Nephrology And Urology Procedure
1702	NU138	Orchidopexy - Unilateral -Open	26775	31500	36225	Nephrology And Urology Procedure
1703	NU139	Orchidopexy - Unilateral- Lap/Endoscopic	32895	38700	44505	Nephrology And Urology Procedure
1704	NU140	Orchidopexy - Bilateral -Open	32895	38700	44505	Nephrology And Urology Procedure

CGHS rates for Tier II (Y City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1705	NU141	Orchidopexy - Bilateral -Lap/Endoscopic	40545	47700	54855	Nephrology And Urology Procedure
1706	NU142	Cystolithotomy -Suprapubic	21038	24750	28463	Nephrology And Urology Procedure
1707	NU143	Endoscopic Removal of Stone in Bladder	26775	31500	36225	Nephrology And Urology Procedure
1708	NU144	Resection Bladder Neck Endoscopic / Bladder neck incision / transurethral incision on prostrate	32895	38700	44505	Nephrology And Urology Procedure
1709	NU145	Ureteroscopic Surgery	26775	31500	36225	Nephrology And Urology Procedure
1710	NU146	Urethroplasty 1st Stage	32895	38700	44505	Nephrology And Urology Procedure
1711	NU147	Scrotal Exploration	21038	24750	28463	Nephrology And Urology Procedure
1712	NU148	Perineal Urethrostomy	26775	31500	36225	Nephrology And Urology Procedure
1713	NU149	Dilatation of Stricture Urethra under G.A.	3825	4500	4500	Nephrology And Urology Procedure
1714	NU150	Laparoscopic pyelolithotomy	48195	56700	65205	Nephrology And Urology Procedure
1715	NU151	Laparoscopic Pyeloplasty	48195	56700	65205	Nephrology And Urology Procedure
1716	NU152	Laparoscopic surgery for Renal cyst	48195	56700	65205	Nephrology And Urology Procedure
1717	NU153	Laparoscopic ureterolithotomy	48195	56700	65205	Nephrology And Urology Procedure
1718	NU154	Laparoscopic Nephroureterectomy	40545	47700	54855	Nephrology And Urology Procedure

CGHS rates for Tier II (Y City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1719	NU155	Extracorporeal Shock Wave Lithotripsy (ESWL)	32895	38700	44505	Nephrology And Urology Procedure
1720	NU156	Diagnostic Cystoscopy	6503	7650	7650	Nephrology And Urology Procedure
1721	NU157	Cystoscopy with Retrograde Catheter -Unilateral/RGP	15300	18000	20700	Nephrology And Urology Procedure
1722	NU158	Cystoscopy with Retrograde Catheter - Bilateral/RGP	21038	24750	28463	Nephrology And Urology Procedure
1723	NU159	Retrograde Intrarenal Surgery (RIRS)/ Flexible Ureteroscopy	48195	56700	65205	Nephrology And Urology Procedure
1724	NU160	Holmium YAG Prostate Surgery	58140	68400	78660	Nephrology And Urology Procedure
1725	NU161	Holmium YAG Optical Internal Urethrotomy (OIU)	32895	38700	44505	Nephrology And Urology Procedure
1726	NU162	Holmium YAG Core through internal Urethrotomy	40545	47700	54855	Nephrology And Urology Procedure
1727	NU163	Holmium YAG Stone Lithotripsy	58140	68400	78660	Nephrology And Urology Procedure
1728	NU164	Green Light Laser for Prostate	58140	68400	78660	Nephrology And Urology Procedure
1729	NU165	Cystoscopic Botulinum Toxin Injection (Over active bladder/ Neurogenic bladder) -excluding cost of drug	10251	12060	12060	Nephrology And Urology Procedure
1730	NU166	Peyronie’s Disease – Plaque excision with grafting	26775	31500	36225	Nephrology And Urology Procedure
1731	NU167	Prosthetic Surgery for urinary incontinence	32895	38700	44505	Nephrology And Urology Procedure
1732	NU168	Ultrasound Guided Percutaneous Nephrostomy (PCN)	15300	18000	18000	Nephrology And Urology Procedure

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Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1733	NI001	Electroencephalogram (EEG)/ Video EEG	765	900	900	Neurology Investigation
1734	NI002	Electromyography (EMG)	1148	1350	1350	Neurology Investigation
1735	NI003	Nerve conduction velocity (NCV), -two or more limbs	1148	1350	1350	Neurology Investigation
1736	NI004	Repetitive nerve stimulation (RNS)-Decremental response (before and after neostigmine)	1148	1350	1350	Neurology Investigation
1737	NI005	Repetitive nerve stimulation (RNS)-Incremental response	1148	1350	1350	Neurology Investigation
1738	NI006	Somatosensory evoked potentials (SSEP)	1148	1350	1350	Neurology Investigation
1739	NI007	Polysomnography (PSG) / Level I Sleep study including Room Rent and Titration	6885	8100	8100	Neurology Investigation
1740	NI008	Brachial plexus study	1148	1350	1350	Neurology Investigation
1741	NI009	RNS(Repetitive Nerve stimulation)	1224	1440	1440	Neurology Investigation
1742	NS001	Lumbar Pressure Monitoring	7038	8280	8280	Neuro-Surgery Investigation
1743	NS002	Brain Mapping	21038	24750	24750	Neuro-Surgery Investigation
1744	NS003	Nerve Biopsy	15300	18000	18000	Neuro-Surgery Biopsy
1745	NS004	Brain Biopsy	32895	38700	38700	Neuro-Surgery Biopsy
1746	NS005	Craniotomy and Evacuation of Haematoma -Subdural	62730	73800	84870	Neuro-Surgery Procedure
1747	NS006	Craniotomy and Evacuation of Haematoma - Extradural	62730	73800	84870	Neuro-Surgery Procedure
1748	NS007	Evacuation /Excision of Brain Abscess by craniotomy	62730	73800	84870	Neuro-Surgery Procedure
1749	NS008	Excision of Lobe (Frontal Temporal Cerebellum etc.)	62730	73800	84870	Neuro-Surgery Procedure
1750	NS009	Twist Drill Craniostomy	32895	38700	44505	Neuro-Surgery Procedure
1751	NS010	Subdural Tapping	10251	12060	13869	Neuro-Surgery Procedure
1752	NS011	Ventricular Tapping	26775	31500	36225	Neuro-Surgery Procedure
1753	NS012	Brain Abscess Tapping	21038	24750	28463	Neuro-Surgery Procedure
1754	NS013	Placement of Intracranial pressure (ICP) Monitor	21038	24750	28463	Neuro-Surgery Procedure
1755	NS014	Skull Traction Application	7038	8280	9522	Neuro-Surgery Procedure
1756	NS015	Vascular Malformations	74205	87300	100395	Neuro-Surgery Procedure
1757	NS016	Meningoencephalocele excision and repair	58140	68400	78660	Neuro-Surgery Procedure
1758	NS017	Meningomyelocele Repair	48195	56700	65205	Neuro-Surgery Procedure

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Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1759	NS018	CSF Rhinorrhoea Repair	48195	56700	65205	Neuro-Surgery Procedure
1760	NS019	Cranioplasty	48195	56700	65205	Neuro-Surgery Procedure
1761	NS020	Anterior Cervical Discectomy	48195	56700	65205	Neuro-Surgery Procedure
1762	NS021	Brachial Plexus Exploration and neurotization	48195	56700	65205	Neuro-Surgery Procedure
1763	NS022	Median Nerve Decompression	32895	38700	44505	Neuro-Surgery Procedure
1764	NS023	Peripheral Nerve Surgery – Major	48195	56700	65205	Neuro-Surgery Procedure
1765	NS024	Peripheral Nerve Surgery Minor	40545	47700	54855	Neuro-Surgery Procedure
1766	NS025	Ventriculoatrial /Ventriculoperitoneal Shunt	40545	47700	54855	Neuro-Surgery Procedure
1767	NS026	Anterior Cervical Spine Surgery with fusion	58140	68400	78660	Neuro-Surgery Procedure
1768	NS027	Anterio Lateral Decompression of spine	62730	73800	84870	Neuro-Surgery Procedure
1769	NS028	Cervical or Dorsal or Lumbar Laminectomy	40545	47700	54855	Neuro-Surgery Procedure
1770	NS029	Combined Trans-Oral Surgery & Craniovertebral (CV) Junction Fusion	48195	56700	65205	Neuro-Surgery Procedure
1771	NS030	Craniovertebral Junction (CVJ) Fusion procedures	58140	68400	78660	Neuro-Surgery Procedure
1772	NS031	Depressed Fracture Elevation	40545	47700	54855	Neuro-Surgery Procedure
1773	NS032	Lumbar Discectomy	48195	56700	65205	Neuro-Surgery Procedure
1774	NS033	Endarterectomy (Carotid)	48195	56700	65205	Neuro-Surgery Procedure
1775	NS034	Radiofrequency (RF) Lesion for Trigeminal Neuralgia	40545	47700	54855	Neuro-Surgery Procedure
1776	NS035	Spasticity Surgery	40545	47700	54855	Neuro-Surgery Procedure
1777	NS036	Spinal Fusion Procedure	58140	68400	78660	Neuro-Surgery Procedure
1778	NS037	Spinal Bifida Surgery Major	48195	56700	65205	Neuro-Surgery Procedure
1779	NS038	Spinal Bifida Surgery Minor	40545	47700	54855	Neuro-Surgery Procedure
1780	NS039	Stereotaxic Procedures- biopsy/aspiration of cyst	32895	38700	44505	Neuro-Surgery Procedure
1781	NS040	Trans Sphenoidal Surgery	40545	47700	54855	Neuro-Surgery Procedure
1782	NS041	Trans Oral Surgery	40545	47700	54855	Neuro-Surgery Procedure
1783	NS042	Implantation of Deep Brain Stimulation (DBS) -One electrode (as per guidelines mentioned in OM.No.Z15025/44/2023/DIR/CGHS/EHS Dated 09.09.2024)	48195	56700	65205	Neuro-Surgery Procedure

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Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1784	NS043	Implantation of Deep Brain Stimulation (DBS) -two electrodes (as per guidelines mentioned in OM.No.Z15025/44/2023/DIR/CGHS/EHS Dated 09.09.2024)	58140	68400	78660	Neuro-Surgery Procedure
1785	NS044	Endoscopic aqueductoplasty	40545	47700	54855	Neuro-Surgery Procedure
1786	NS045	Facial nerve reconstruction	58140	68400	78660	Neuro-Surgery Procedure
1787	NS046	Carotid Stenting excluding the cost of Stent	48195	56700	65205	Neuro-Surgery Procedure
1788	NS047	Cervical disc arthroplasty	48195	56700	65205	Neuro-Surgery Procedure
1789	NS048	Lumbar disc arthroplasty	40545	47700	54855	Neuro-Surgery Procedure
1790	NS049	Corpus callostomy for Epilepsy	62730	73800	84870	Neuro-Surgery Procedure
1791	NS050	Hemispherotomy for Epilepsy	62730	73800	84870	Neuro-Surgery Procedure
1792	NS051	Endoscopic CSF rhinorrhoea repair	40545	47700	54855	Neuro-Surgery Procedure
1793	NS052	Burr hole evacuation of chronic subdural haematoma	48195	56700	65205	Neuro-Surgery Procedure
1794	NS053	Epilepsy surgery other than at Code No. NS049 and NS050	74205	87300	100395	Neuro-Surgery Procedure
1795	NS054	Radiofrequency (RF) lesion for facet joint pain syndrome	48195	56700	65205	Neuro-Surgery Procedure
1796	NS055	Cervical Laminoplasty	58140	68400	78660	Neuro-Surgery Procedure
1797	NS056	Lateral mass C1-C2 screw fixation	58140	68400	78660	Neuro-Surgery Procedure
1798	NS057	Microsurgical decompression for Trigeminal nerve	48195	56700	65205	Neuro-Surgery Procedure
1799	NS058	Microsurgical decompression for hemifacial spasm	48195	56700	65205	Neuro-Surgery Procedure
1800	NS059	Extracranial-Intracranial Bypass Procedures (EC-IC) bypass procedures	48195	56700	65205	Neuro-Surgery Procedure
1801	NS060	Image Guided Craniotomy	62730	73800	84870	Neuro-Surgery Procedure
1802	NS061	Baclofen pump implantation lesioning for movement disorder including Parkinsonism/Spinal Cord Stimulator Implantation	58140	68400	78660	Neuro-Surgery Procedure
1803	NS062	Programmable Ventriculo-Peritoneal (VP) shunt excluding the cost of the Device	48195	56700	65205	Neuro-Surgery Procedure
1804	NS063	Endoscopic Sympathectomy	48195	56700	65205	Neuro-Surgery Procedure
1805	NS064	Lumbar Puncture	2295	2700	2700	Neuro-Surgery Procedure
1806	NS065	External Ventricular Drainage (EVD)	21038	24750	28463	Neuro-Surgery Procedure

CGHS rates for Tier II (Y City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1807	NS066	Endoscopic 3rd ventriculostomy	40545	47700	54855	Neuro-Surgery Procedure
1808	NS067	Endoscopic cranial surgery/Biopsy/aspiration	48195	56700	65205	Neuro-Surgery Procedure
1809	NS068	Endoscopic discectomy (Lumbar, Cervical)	48195	56700	65205	Neuro-Surgery Procedure
1810	NS069	Aneurysm coiling (Endovascular)	48195	56700	65205	Neuro-Surgery Procedure
1811	NS070	Surgery for Skull Fractures	58140	68400	78660	Neuro-Surgery Procedure
1812	NS071	Carpel Tunnel decompression	32895	38700	44505	Neuro-Surgery Procedure
1813	NS072	Clipping of intracranial aneurysm	62730	73800	84870	Neuro-Surgery Procedure
1814	NS073	Surgery for intracranial Arteriovenous malformations (AVM)	74205	87300	100395	Neuro-Surgery Procedure
1815	NS074	Foramen magnum decompression for Chiari Malformation	98685	116100	133515	Neuro-Surgery Procedure
1816	NS075	Dorsal column stimulation for backache in failed back syndrome	48195	56700	65205	Neuro-Surgery Procedure
1817	NS076	Surgery for recurrent disc prolapse/epidural fibrosis	48195	56700	65205	Neuro-Surgery Procedure
1818	NS077	Decompressive craniotomy for hemispherical acute subdural haematoma/ brain swelling/large infarct	62730	73800	84870	Neuro-Surgery Procedure
1819	NS078	Intra-arterial thrombolysis with Tissue Plasminogen Activator (TPA) (for ischemic stroke)	26775	31500	36225	Neuro-Surgery Procedure
1820	NS079	Stereotactic aspiration of intracerebral haematoma	58140	68400	78660	Neuro-Surgery Procedure
1821	NS080	Endoscopic aspiration of intracerebellar haematoma	58140	68400	78660	Neuro-Surgery Procedure
1822	NS081	Stereotactic Radiosurgery for brain pathology (X knife/Gamma) - ONE session	40545	47700	54855	Neuro-Surgery Procedure
1823	NS082	Stereotactic Radiosurgery for brain pathology (X knife / Gamma knife -Two or more sessions)	58140	68400	78660	Neuro-Surgery Procedure
1824	NS083	Battery Placement for Deep Brain Stimulation (DBS)	26775	31500	36225	Neuro-Surgery Procedure
1825	NS084	Baclofen pump implantation for spasticity/Intra-thecal Pump Implantation	26775	31500	36225	Neuro-Surgery Procedure
1826	NS085	Surgery for Scalp Arteriovenous Malformations (AVMs)	48195	56700	65205	Neuro-Surgery Procedure
1827	NS086	Kyphoplasty excluding the cost of implants	40545	47700	54855	Neuro-Surgery Procedure
1828	NS087	Balloon Kyphoplasty	48195	56700	65205	Neuro-Surgery Procedure
1829	NS088	Lesioning procedures for Parkinson’s disease,Dystonia etc.	40545	47700	54855	Neuro-Surgery Procedure

CGHS rates for Tier II (Y City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1830	OR001	Joints Aspiration	1224	1440	1440	Orthopaedics Procedure
1831	OR002	Plaster Work	3825	4500	4500	Orthopaedics Procedure
1832	OR003	Fingers (post slab)	765	900	900	Orthopaedics Procedure
1833	OR004	Fingers full plaster	1148	1350	1350	Orthopaedics Procedure
1834	OR005	Colles Fracture - Below elbow	4590	5400	5400	Orthopaedics Procedure
1835	OR006	Colles Fracture - Full plaster	3443	4050	4050	Orthopaedics Procedure
1836	OR007	Colles fracture Ant. Or post. slab	2295	2700	2700	Orthopaedics Procedure
1837	OR008	Above elbow full plaster	3060	3600	3600	Orthopaedics Procedure
1838	OR009	Above Knee post-slab	2295	2700	2700	Orthopaedics Procedure
1839	OR010	Below Knee full plaster	3060	3600	3600	Orthopaedics Procedure
1840	OR011	Below Knee post-slab	3825	4500	4500	Orthopaedics Procedure
1841	OR012	Tube Plaster (or plaster cylinder)	3825	4500	4500	Orthopaedics Procedure
1842	OR013	Above knee full plaster	3825	4500	4500	Orthopaedics Procedure
1843	OR014	Above knee full slab	2678	3150	3150	Orthopaedics Procedure
1844	OR015	Minerva Jacket	7038	8280	8280	Orthopaedics Procedure
1845	OR016	Plaster Jacket	4590	5400	5400	Orthopaedics Procedure
1846	OR017	Shoulder spica	6503	7650	7650	Orthopaedics Procedure
1847	OR018	Single Hip spica	5355	6300	6300	Orthopaedics Procedure
1848	OR019	Double Hip spica	6503	7650	7650	Orthopaedics Procedure
1849	OR020	Strapping of Finger	383	450	450	Orthopaedics Procedure
1850	OR021	Strapping of Toes	459	540	540	Orthopaedics Procedure
1851	OR022	Strapping of Wrist	574	675	675	Orthopaedics Procedure
1852	OR023	Strapping of Elbow	1148	1350	1350	Orthopaedics Procedure
1853	OR024	Strapping of Knee	765	900	900	Orthopaedics Procedure
1854	OR025	Strapping of Ankle	612	720	720	Orthopaedics Procedure
1855	OR026	Strapping of Chest	1148	1350	1350	Orthopaedics Procedure
1856	OR027	Strapping of Shoulder	1148	1350	1350	Orthopaedics Procedure
1857	OR028	Figure of 8 bandage	765	900	900	Orthopaedics Procedure

CGHS rates for Tier II (Y City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1858	OR029	Collar and cuff sling	383	450	450	Orthopaedics Procedure
1859	OR030	Ball bandage	612	720	720	Orthopaedics Procedure
1860	OR031	Application of POP Casts for Upper & Lower Limbs	4590	5400	5400	Orthopaedics Procedure
1861	OR032	Application of Functional Cast Brace	3060	3600	3600	Orthopaedics Procedure
1862	OR033	Application of Skin Traction	1913	2250	2250	Orthopaedics Procedure
1863	OR034	Application of Skeletal Tractions	4590	5400	5400	Orthopaedics Procedure
1864	OR035	Bandage & Strappings for Fractures	1530	1800	1800	Orthopaedics Procedure
1865	OR036	Aspiration & Intra Articular Injections	3825	4500	4500	Orthopaedics Procedure
1866	OR037	Application of POP Spices & Jackets	4590	5400	5400	Orthopaedics Procedure
1867	OR038	Close Reduction of Fractures of Limb & POP	10251	12060	12060	Orthopaedics Procedure
1868	OR039	Open Reduction & Internal Fixation (ORIF) of Fingers & Toes	15300	18000	18000	Orthopaedics Procedure
1869	OR040	Open Reduction of fracture of Long Bones of Upper / Lower Limb -Nailing & External Fixation	32895	38700	38700	Orthopaedics Procedure
1870	OR041	Open Reduction of fracture of Long Bones of Upper /Lower Limb -AO Procedures	32895	38700	38700	Orthopaedics Procedure
1871	OR042	Tension Band Wirings	21038	24750	24750	Orthopaedics Procedure
1872	OR043	Bone Grafting	21038	24750	24750	Orthopaedics Procedure
1873	OR044	Excision or other Operations for Scaphoid Fractures	26775	31500	31500	Orthopaedics Procedure
1874	OR045	Sequestrectomy & Saucerisation	26775	31500	31500	Orthopaedics Procedure
1875	OR046	Sequestrectomy & Saucerizations -Arthrotomy	26775	31500	31500	Orthopaedics Procedure
1876	OR047	Multiple Pinning Fracture Neck Femur	40545	47700	47700	Orthopaedics Procedure
1877	OR048	Plate Fixations for Fracture Neck Femur	40545	47700	47700	Orthopaedics Procedure
1878	OR049	AO Compression Procedures for Fracture Neck Femur	40545	47700	47700	Orthopaedics Procedure
1879	OR050	Open Reduction of Fracture Neck Femur Muscle Pedicle Graft and Internal Fixations	40545	47700	47700	Orthopaedics Procedure
1880	OR051	Close Reduction of Dislocations	15300	18000	18000	Orthopaedics Procedure
1881	OR052	Open Reduction of Dislocations	26775	31500	31500	Orthopaedics Procedure
1882	OR053	Open Reduction & Internal Fixation (ORIF) of Fracture Dislocation	32895	38700	38700	Orthopaedics Procedure

CGHS rates for Tier II (Y City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1883	OR054	Neurolysis/Nerve repair	32895	38700	38700	Orthopaedics Procedure
1884	OR055	Nerve Repair with Grafting	48195	56700	56700	Orthopaedics Procedure
1885	OR056	Tendon with Transplant or Graft	32895	38700	38700	Orthopaedics Procedure
1886	OR057	Tendon Lengthening/Tendon repair	21038	24750	24750	Orthopaedics Procedure
1887	OR058	Tendon Transfer	26775	31500	31500	Orthopaedics Procedure
1888	OR059	Split Osteotomy and Internal Fixations	40545	47700	47700	Orthopaedics Procedure
1889	OR060	Anterolateral decompression for tuberculosis/ Costo-Transversectomy	32895	38700	38700	Orthopaedics Procedure
1890	OR061	Anterolateral Decompression and Spine Fusion	48195	56700	56700	Orthopaedics Procedure
1891	OR062	Corrective Osteotomy & Internal Fixation- short bones	26775	31500	31500	Orthopaedics Procedure
1892	OR063	Corrective Osteotomy & Internal Fixation- long bones	32895	38700	38700	Orthopaedics Procedure
1893	OR064	Arthrodesis of - Minor Joints	26775	31500	31500	Orthopaedics Procedure
1894	OR065	Arthrodesis of - Major Joints	32895	38700	38700	Orthopaedics Procedure
1895	OR066	Soft Tissue Operations for Congenital Talipes Equinovarus (CTEV)	26775	31500	31500	Orthopaedics Procedure
1896	OR067	Hemiarthroplasty- Hip	48195	56700	56700	Orthopaedics Procedure
1897	OR068	Hemiarthroplasty- Shoulder	40545	47700	47700	Orthopaedics Procedure
1898	OR069	Operations for Brachial Plexus & Cervical Rib	58140	68400	68400	Orthopaedics Procedure
1899	OR070	Amputations - Below Knee	32895	38700	38700	Orthopaedics Procedure
1900	OR071	Amputations - Below Elbow	26775	31500	31500	Orthopaedics Procedure
1901	OR072	Amputations - Above Knee	40545	47700	47700	Orthopaedics Procedure
1902	OR073	Amputations - Above Elbow	32895	38700	38700	Orthopaedics Procedure
1903	OR074	Amputations - Forequarter	48195	56700	56700	Orthopaedics Procedure
1904	OR075	Amputations -Hind Quarter and Hemipelvectomy	58140	68400	68400	Orthopaedics Procedure
1905	OR076	Disarticulations - Major joint	32895	38700	38700	Orthopaedics Procedure
1906	OR077	Disarticulations - Minor joint	26775	31500	31500	Orthopaedics Procedure
1907	OR078	Arthrography	15300	18000	18000	Orthopaedics Investigation
1908	OR079	Arthroscopy - Diagnostic	26775	31500	31500	Orthopaedics Procedure
1909	OR080	Arthroscopy-therapeutic: without implant	32895	38700	38700	Orthopaedics Procedure
1910	OR081	Arthroscopy-therapeutic: with implant	40545	47700	47700	Orthopaedics Procedure

CGHS rates for Tier II (Y City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1911	OR082	Soft Tissue Operation on Joints -Small	21038	24750	24750	Orthopaedics Procedure
1912	OR083	Soft Tissue Operation on Joints -Large	32895	38700	38700	Orthopaedics Procedure
1913	OR084	Myocutaneous and Fasciocutaneous Flap Procedures for Limbs	40545	47700	47700	Orthopaedics Procedure
1914	OR085	Removal of Wires & Screw	10251	12060	12060	Orthopaedics Procedure
1915	OR086	Removal of Plates	21038	24750	24750	Orthopaedics Procedure
1916	OR087	Total Hip Replacement (THR)	98685	116100	133515	Orthopaedics Procedure
1917	OR088	Total Ankle Joint Replacement (TAR) - Unilateral	98685	116100	133515	Orthopaedics Procedure
1918	OR089	Total Knee Joint Replacement (TKR) - Unilateral	116280	136800	157320	Orthopaedics Procedure
1919	OR090	Total Shoulder Joint Replacement - Unilateral	98685	116100	133515	Orthopaedics Procedure
1920	OR091	Total Elbow Joint Replacement - Unilateral	84150	99000	113850	Orthopaedics Procedure
1921	OR092	Total Wrist Joint Replacement - Unilateral	98685	116100	133515	Orthopaedics Procedure
1922	OR093	Total Finger Joint Replacement	48195	56700	65205	Orthopaedics Procedure
1923	OR094	Tubular external fixator	26775	31500	31500	Orthopaedics Procedure
1924	OR095	Ilizarov's External Fixator	40545	47700	47700	Orthopaedics Procedure
1925	OR096	Pelvi-acetabular fracture -Internal fixation	48195	56700	56700	Orthopaedics Procedure
1926	OR097	Meniscectomy	40545	47700	47700	Orthopaedics Procedure
1927	OR098	Meniscus Repair	48195	56700	56700	Orthopaedics Procedure
1928	OR099	Anterior Cruciate Ligament (ACL) Reconstruction	48195	56700	56700	Orthopaedics Procedure
1929	OR100	Posterior Cruciate Ligament (PCL) Reconstruction	58140	68400	68400	Orthopaedics Procedure
1930	OR101	Knee Collateral Ligament Reconstruction	58140	68400	68400	Orthopaedics Procedure
1931	OR102	Bankart Repair Shoulder	48195	56700	56700	Orthopaedics Procedure
1932	OR103	Rotator cuff repair / RC repair	48195	56700	56700	Orthopaedics Procedure
1933	OR104	Biceps Tenodesis	40545	47700	47700	Orthopaedics Procedure
1934	OR105	Distal biceps tendon repair	40545	47700	47700	Orthopaedics Procedure
1935	OR106	Arthrolysis of knee	40545	47700	47700	Orthopaedics Procedure
1936	OR107	Capsulotomy of Shoulder	40545	47700	47700	Orthopaedics Procedure
1937	OR108	Conservative Plaster of Paris (POP)	3060	3600	3600	Orthopaedics Procedure
1938	OR109	Application for CTEV per sitting	6503	7650	7650	Orthopaedics Procedure

CGHS rates for Tier II (Y City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1939	OR110	Total Hip Replacement (THR) Revision Stage-I	74205	87300	100395	Orthopaedics Procedure
1940	OR111	Total Hip Replacement (THR) Revision Stage-II	98685	116100	133515	Orthopaedics Procedure
1941	OR112	Total Knee Replacement (TKR) Revision Stage-I	74205	87300	100395	Orthopaedics Procedure
1942	OR113	Total Knee Replacement (TKR) Revision Stage-II	98685	116100	133515	Orthopaedics Procedure
1943	OR114	Illizarov/ external fixation for limb lengthening/deformity correction	48195	56700	56700	Orthopaedics Procedure
1944	OR115	Discectomy/ Micro Discectomy	62730	73800	73800	Orthopaedics Procedure
1945	OR116	Spinal Fixation Cervical/dorsolumbar/ lumbosacral	116280	136800	136800	Orthopaedics Procedure
1946	OR117	Fusion Surgery Cervical/ Lumbar Spine up to 2 Level	48195	56700	56700	Orthopaedics Procedure
1947	OR118	Spinal Fusion Surgery Cervical/ Lumbar Spine -More than 2 Level	62730	73800	73800	Orthopaedics Procedure
1948	OR119	Scoliosis Surgery/ Deformity Correction of Spine	74205	87300	87300	Orthopaedics Procedure
1949	OR120	Vertebroplasty	58140	68400	68400	Orthopaedics Procedure
1950	OR121	Spinal Injections	3825	4500	4500	Orthopaedics Procedure
1951	OR122	Dynamic Hip Screw (DHS) for Fracture Neck Femur	40545	47700	47700	Orthopaedics Procedure
1952	OR123	Proximal Femur Nail (PFN) for IT fracture (Intertrochanteric Fractures)	40545	47700	47700	Orthopaedics Procedure
1953	OR124	Spinal Osteotomy	40545	47700	47700	Orthopaedics Procedure
1954	OR125	Illizarov's / External Fixation for Trauma	40545	47700	47700	Orthopaedics Procedure
1955	OR126	Soft Tissue Operations for Polio/ Cerebral Palsy	26775	31500	31500	Orthopaedics Procedure
1956	OR127	Mini Fixator for Hand/Foot	26775	31500	31500	Orthopaedics Procedure
1957	BP001	Injection of Keloids - Ganglion	3060	3600	3600	Burns And Plastic Surgery Procedure
1958	BP002	Injection of Keloids - Haemangioma	3060	3600	3600	Burns And Plastic Surgery Procedure
1959	BP003	Free Grafts - Wolfe Grafts	15300	18000	20700	Burns And Plastic Surgery Procedure
1960	BP004	Free Grafts - Thiersch- Small Area 5%	15300	18000	20700	Burns And Plastic Surgery Procedure
1961	BP005	Free Grafts - Large Area 10%	26775	31500	36225	Burns And Plastic Surgery Procedure

CGHS rates for Tier II (Y City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1962	BP006	Free Grafts - Very Large Area 20% and above.	32895	38700	44505	Burns And Plastic Surgery Procedure
1963	BP007	Skin Flaps - Rotation Flaps	21038	24750	28463	Burns And Plastic Surgery Procedure
1964	BP008	Skin Flaps - Advancement Flaps	26775	31500	36225	Burns And Plastic Surgery Procedure
1965	BP009	Skin Flaps - Direct- cross Leg Flaps- Cross Arm Flap	32895	38700	44505	Burns And Plastic Surgery Procedure
1966	BP010	Skin Flaps - Cross Finger	26775	31500	36225	Burns And Plastic Surgery Procedure
1967	BP011	Skin Flaps - Abdominal	26775	31500	36225	Burns And Plastic Surgery Procedure
1968	BP012	Skin Flaps - Thoracic	21038	24750	28463	Burns And Plastic Surgery Procedure
1969	BP013	Skin Flaps - Arm Etc.	21038	24750	28463	Burns And Plastic Surgery Procedure
1970	BP014	Subcutaneous Pedicle Flaps Raising	21038	24750	28463	Burns And Plastic Surgery Procedure
1971	BP015	Subcutaneous Pedicle Flaps Delay	21038	24750	28463	Burns And Plastic Surgery Procedure
1972	BP016	Subcutaneous Pedicle Flaps Transfer	21038	24750	28463	Burns And Plastic Surgery Procedure
1973	BP017	Cartilage Grafting	32895	38700	44505	Burns And Plastic Surgery Procedure
1974	BP018	Cleft Lip - Repair.	26775	31500	36225	Burns And Plastic Surgery Procedure
1975	BP019	Cleft Palate Repair	32895	38700	44505	Burns And Plastic Surgery Procedure

CGHS rates for Tier II (Y City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1976	BP020	Primary Bone Grafting for Alveolar Cleft in Cleft Lip	32895	38700	44505	Burns And Plastic Surgery Procedure
1977	BP021	Secondary Surgery for Cleft Lip Deformity	32895	38700	44505	Burns And Plastic Surgery Procedure
1978	BP022	Secondary Surgery for Cleft Palate	32895	38700	44505	Burns And Plastic Surgery Procedure
1979	BP023	Reconstruction of Eyelid Defects - Minor	21038	24750	28463	Burns And Plastic Surgery Procedure
1980	BP024	Reconstruction of Eyelid Defects - Major	26775	31500	36225	Burns And Plastic Surgery Procedure
1981	BP025	Plastic Surgery of Different Regions of the Ear -Minor	26775	31500	36225	Burns And Plastic Surgery Procedure
1982	BP026	Plastic Surgery of Different Regions of the Ear -Major	32895	38700	44505	Burns And Plastic Surgery Procedure
1983	BP027	Plastic Surgery of the Nose - Minor	21038	24750	28463	Burns And Plastic Surgery Procedure
1984	BP028	Plastic Surgery of the Nose - Major	32895	38700	44505	Burns And Plastic Surgery Procedure
1985	BP029	Plastic Surgery for Facial Paralysis (Support with Reanimation)	32895	38700	44505	Burns And Plastic Surgery Procedure
1986	BP030	After Mastectomy (Reconstruction) Mammoplasty	32895	38700	44505	Burns And Plastic Surgery Procedure
1987	BP031	Syndactyly Repair	26775	31500	36225	Burns And Plastic Surgery Procedure
1988	BP032	Dermabrasion Face	32895	38700	44505	Burns And Plastic Surgery Procedure
1989	BP033	Flap Reconstructive Surgery - Head and Neck	48195	56700	65205	Burns and Plastic Surgery

CGHS rates for Tier II (Y City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1990	BP034	up to 30% Burns 1st Dressing	2295	2700	2700	Burns And Plastic Surgery Procedure
1991	BP035	up to 30% Burns Subsequent Dressing	1913	2250	2250	Burns And Plastic Surgery Procedure
1992	BP036	30% to 50% Burns 1st Dressing	3825	4500	4500	Burns And Plastic Surgery Procedure
1993	BP037	30% to 50% Burns Subsequent Dressing	2678	3150	3150	Burns And Plastic Surgery Procedure
1994	BP038	Extensive Burn -above 50% Frist Dressing	4590	5400	5400	Burns And Plastic Surgery Procedure
1995	BP039	Extensive Burn -above 50% Subsequent dressing	2678	3150	3150	Burns And Plastic Surgery Procedure
1996	BP040	VAC Therapy/Dressing including all Consumables	7650	9000	9000	Burns And Plastic Surgery Procedure
1997	HC001	Annual Health Check-up - CCS Group A Officer of above 40 years of age / Pensioner primary card holder 75 years of age and above–Male,	2000	2000	2000	Annual Health Check-up
1998	HC002	Annual Health Check-up - CCS Group A Officer of above 40 years of age / Pensioner primary card holder 75 years of age and above - Female	2200	2200	2200	Annual Health Check-up

C) Rate list for Semiprivate ward for HCOs in Z (Tier III) cities

***List of Z (Tier III) Cities**

All others Cities not mentioned above

*as per O.M. No.2/5/2017-E.II(B) dated 07.07.2017.

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

General Guidelines.

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

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

Method for Calculation and Application of CGHS Rates

CGHS Rates applicable to respective Ward entitlement:

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

Let:

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

Example Table:

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

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

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

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

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

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

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

*Primary Surgery = Surgery with Highest Package Rate

b) Identical surgeries are performed at different anatomical sites

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

Example (Symbolic):

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

Total Reimbursement= X + 50% of X

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

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

CGHS Reimbursement Rule:

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

Illustrative Example (Symbolic):

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

Reimbursement= 75% of X

Package Rates Definition

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

CGHS rates for Tier III (Z City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1	CN001	Consultation OPD	350	350	350	Consultation
2	CN002	Consultation for Inpatients	350	350	350	Consultation
3	CN003	Consultation OPD – Super speciality/Psychiatry	700	700	700	Consultation
4	LB001	Urine Routine- pH, Specific Gravity, Sugar, Protein and Microscopy	68	80	80	Laboratory Investigation
5	LB002	Urine Microalbumin	165	194	194	Laboratory Investigation
6	LB003	Stool Routine and Microscopy	54	64	64	Laboratory Investigation
7	LB004	Stool for Occult Blood	68	80	80	Laboratory Investigation
8	LB005	Post Coital Smear Examination	272	320	320	Laboratory Investigation
9	LB006	Semen Analysis (Automated/Manual)	170	200	200	Laboratory Investigation
10	LB007	Haemoglobin (Hb)	34	40	40	Laboratory Investigation
11	LB008	Total Leucocytic Count (TLC)	34	40	40	Laboratory Investigation
12	LB009	Differential Leucocytic Count (DLC)	68	80	80	Laboratory Investigation
13	LB010	Erythrocyte Sedimentation Rate (ESR)	68	80	80	Laboratory Investigation
14	LB011	Total Red Cell count with MCV,MCH,MCHC,DRW	34	40	40	Laboratory Investigation
15	LB012	Complete Haemogram/CBC, Hb, RBC Count and Indices, TLC, DLC, Platelet, ESR, Peripheral Smear Examination)	204	240	240	Laboratory Investigation
16	LB013	Platelet Count	68	80	80	Laboratory Investigation
17	LB014	Reticulocyte Count	68	80	80	Laboratory Investigation
18	LB015	Absolute Eosinophil Count (AEC)	68	80	80	Laboratory Investigation
19	LB016	Packed Cell Volume (PCV)	34	40	40	Laboratory Investigation
20	LB017	Peripheral Smear Examination	68	80	80	Laboratory Investigation
21	LB018	Smear for Malaria/Filaria Parasite	68	80	80	Laboratory Investigation
22	LB019	Bleeding Time	34	40	40	Laboratory Investigation
23	LB020	Clotting Time	34	40	40	Laboratory Investigation
24	LB021	Osmotic Fragility Test	204	240	240	Laboratory Investigation
25	LB022	Bone Marrow Smear Examination	238	280	280	Laboratory Investigation

CGHS rates for Tier III (Z City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
26	LB023	Bone Marrow Smear Examination with Iron Stain	544	640	640	Laboratory Investigation
27	LB024	Bone Marrow Smear Examination and Cytochemistry	8160	9600	9600	Laboratory Investigation
28	LB025	Activated partial Thromboplastin Time (APTT)	197	232	232	Laboratory Investigation
29	LB026	Rapid Test for Malaria (Card Test)/QBC Malaria Test	68	80	80	Laboratory Investigation
30	LB027	Bleeding Disorder Panel- PT, APTT, Thrombin Time Fibrinogen, D-Dimer/ Fibrinogen Degradation Products (FDP)	544	640	640	Laboratory Investigation
31	LB028	Factor Assays-Factor VIII	1020	1200	1200	Laboratory Investigation
32	LB029	Factor Assays-Factor IX	1020	1200	1200	Laboratory Investigation
33	LB030	Platelet Function Tests	860	1012	1012	Laboratory Investigation
34	LB031	Tests for Hypercoagulable States- Protein C, Protein S, Antithrombin	2298	2704	2704	Laboratory Investigation
35	LB032	Tests for Lupus Anticoagulant	884	1040	1040	Laboratory Investigation
36	LB033	Tests for Antiphospholipid Antibody IgG, IgM (for Cardiolipin and B2 Glycoprotein 1)	680	800	800	Laboratory Investigation
37	LB034	Thalassemia Studies (Red Cell Indices and Hb HPLC)	680	800	800	Laboratory Investigation
38	LB035	Tests for Sickling / Hb HPLC)	680	800	800	Laboratory Investigation
39	LB036	Blood Group & Rh Type	61	72	72	Laboratory Investigation
40	LB037	Cross Match	136	160	160	Laboratory Investigation
41	LB038	Coomb’s Test - Direct	136	160	160	Laboratory Investigation
42	LB039	Coomb’s Test - Indirect	170	200	200	Laboratory Investigation
43	LB040	3 Cell Panel- Antibody Screening for Pregnant Female	714	840	840	Laboratory Investigation
44	LB041	11 Cells Panel for Antibody Identification	1554	1828	1828	Laboratory Investigation
45	LB042	Hepatitis B Surface Antigen (HBsAg)	204	240	240	Laboratory Investigation
46	LB043	Hepatitis C Virus (HCV)	340	400	400	Laboratory Investigation
47	LB044	Human Immunodeficiency Virus- HIV I and II	262	308	308	Laboratory Investigation
48	LB045	Venereal Disease Research Laboratory Test (VDRL)	68	80	80	Laboratory Investigation
49	LB046	Rh Antibody Titre	204	240	240	Laboratory Investigation
50	LB047	Platelet Concentrate Test	680	800	800	Laboratory Investigation
51	LB048	Routine - H & E	371	436	436	Laboratory Investigation

CGHS rates for Tier III (Z City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
52	LB049	Special Stain	136	160	160	Laboratory Investigation
53	LB050	Histopathology Examination (HPE) - Frozen Section	1020	1200	1200	Laboratory Investigation
54	LB051	Histopathology Examination (HPE) - Paraffin Section	340	400	400	Laboratory Investigation
55	LB052	Pap Smear	272	320	320	Laboratory Investigation
56	LB053	Body Fluid for Malignant cells	238	280	280	Laboratory Investigation
57	LB054	Paroxysmal Nocturnal Haemoglobinuria (PNH) Panel- CD55, CD59	1020	1200	1200	Laboratory Investigation
58	LB055	Blood Glucose Random / Blood Glucose Fasting /Blood Glucose PP	27	32	32	Laboratory Investigation
59	LB056	24 Hrs Urine for Proteins, Sodium, Creatinine	204	240	240	Laboratory Investigation
60	LB057	Blood Urea Nitrogen (BUN) / Urea	68	80	80	Laboratory Investigation
61	LB058	Serum Creatinine	68	80	80	Laboratory Investigation
62	LB059	Urine Bile Pigment and Salt	48	56	56	Laboratory Investigation
63	LB060	Urine Urobilinogen	48	56	56	Laboratory Investigation
64	LB061	Urine Ketones	48	56	56	Laboratory Investigation
65	LB062	Urine Occult Blood	48	56	56	Laboratory Investigation
66	LB063	Urine Total Proteins	48	56	56	Laboratory Investigation
67	LB064	Rheumatoid Factor / Rh Factor Test	510	600	600	Laboratory Investigation
68	LB065	Bence Jones Protein	68	80	80	Laboratory Investigation
69	LB066	Serum Uric Acid	102	120	120	Laboratory Investigation
70	LB067	Serum Bilirubin total & direct	102	120	120	Laboratory Investigation
71	LB068	Serum Iron	170	200	200	Laboratory Investigation
72	LB069	C-Reactive Protein (CRP)	170	200	200	Laboratory Investigation
73	LB070	C-Reactive Protein (CRP) Quantitative	204	240	240	Laboratory Investigation
74	LB071	Body Fluid (CSF/Ascitic Fluid etc.)Sugar, Protein etc.	204	240	240	Laboratory Investigation
75	LB072	Albumin	34	40	40	Laboratory Investigation
76	LB073	Creatinine Clearance	136	160	160	Laboratory Investigation
77	LB074	Serum Cholesterol	102	120	120	Laboratory Investigation
78	LB075	Total Iron Binding Capacity (TIBC)	204	240	240	Laboratory Investigation
79	LB076	Glucose (Fasting & PP)	54	64	64	Laboratory Investigation

CGHS rates for Tier III (Z City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
80	LB077	Serum Calcium –Total	102	120	120	Laboratory Investigation
81	LB078	Serum Calcium – Ionic	408	480	480	Laboratory Investigation
82	LB079	Serum Phosphorus	102	120	120	Laboratory Investigation
83	LB080	Total Protein Albumin/Globulin Ratio (A/G Ratio)	48	56	56	Laboratory Investigation
84	LB081	Immunoglobulin G (IgG)	272	320	320	Laboratory Investigation
85	LB082	Immunoglobulin M(IgM)	272	320	320	Laboratory Investigation
86	LB083	Immunoglobulin A(IgA)	272	320	320	Laboratory Investigation
87	LB084	Antinuclear Antibody (ANA)	445	524	524	Laboratory Investigation
88	LB085	Anti-double stranded DNA (anti-dsDNA)	544	640	640	Laboratory Investigation
89	LB086	Serum Glutamic Pyruvic Transaminase (SGPT) / Alanine Aminotransferase (ALT)	68	80	80	Laboratory Investigation
90	LB087	Serum Glutamic Oxaloacetic Transaminase (SGOT) /Aspartate Aminotransferase (AST)	68	80	80	Laboratory Investigation
91	LB088	Serum Amylase	204	240	240	Laboratory Investigation
92	LB089	Serum Lipase	272	320	320	Laboratory Investigation
93	LB090	Serum Lactate	340	400	400	Laboratory Investigation
94	LB091	Serum Magnesium	204	240	240	Laboratory Investigation
95	LB092	Serum Sodium	82	96	96	Laboratory Investigation
96	LB093	Serum Potassium	82	96	96	Laboratory Investigation
97	LB094	Chloride	102	120	120	Laboratory Investigation
98	LB095	Serum Bicarbonate	136	160	160	Laboratory Investigation
99	LB096	Serum Ammonia	456	536	536	Laboratory Investigation
100	LB097	Anaemia Profile (Hb, Serum Iron, TIBC, Ferritin, Transferrin Saturation, Stool Occult Blood, CBC, Reticulocyte Count)	898	1056	1056	Laboratory Investigation
101	LB098	Serum Testosterone	272	320	320	Laboratory Investigation
102	LB099	Imprint Smear from Endoscopy	680	800	800	Laboratory Investigation
103	LB100	Triglycerides	102	120	120	Laboratory Investigation
104	LB101	Glucose Tolerance Test (GTT)	204	240	240	Laboratory Investigation

CGHS rates for Tier III (Z City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
105	LB102	Triple Marker Test (AFP,HCG,UE3)	1020	1200	1200	Laboratory Investigation
106	LB103	Creatine Phosphokinase (CPK)/Creatine Kinase (CK)	156	184	184	Laboratory Investigation
107	LB104	Foetal Haemoglobin (HbF)	340	400	400	Laboratory Investigation
108	LB105	Prothrombin Time (PT)/ International normalized ratio (INR)	170	200	200	Laboratory Investigation
109	LB106	Lactate dehydrogenase (LDH)	150	176	176	Laboratory Investigation
110	LB107	Alkaline Phosphatase	102	120	120	Laboratory Investigation
111	LB108	Acid Phosphatase	102	120	120	Laboratory Investigation
112	LB109	CPK MB/CK MB	245	288	288	Laboratory Investigation
113	LB110	CK MB Mass/CPK MB Mass	245	288	288	Laboratory Investigation
114	LB111	Troponin I	476	560	560	Laboratory Investigation
115	LB112	Troponin T	476	560	560	Laboratory Investigation
116	LB113	Glucose-6-Phosphate Dehydrogenase (G6PD)	204	240	240	Laboratory Investigation
117	LB114	Lithium	238	280	280	Laboratory Investigation
118	LB115	Dilantin (Phenytoin)	408	480	480	Laboratory Investigation
119	LB116	Carbamazepine.	476	560	560	Laboratory Investigation
120	LB117	Cyclosporine	1700	2000	2000	Laboratory Investigation
121	LB118	Valproic acid.	408	480	480	Laboratory Investigation
122	LB119	Blood gas analysis / Arterial Blood Gas (ABG)	381	448	448	Laboratory Investigation
123	LB120	Blood gas analysis / Arterial Blood Gas (ABG) with electrolytes	544	640	640	Laboratory Investigation
124	LB121	Urine Pregnancy Test(UPT)	68	80	80	Laboratory Investigation
125	LB122	Glycosylated Haemoglobin (HbA1c)	204	240	240	Laboratory Investigation
126	LB123	Kidney Function Test (KFT)- (Sr.Creatinine,Blood Urea,BUN,Sr.Uric Acid,Sr.Sodium,Sr.Potassium,Urine R/E)	340	400	400	Laboratory Investigation
127	LB124	Liver Function Test (LFT)	340	400	400	Laboratory Investigation
128	LB125	Lipid Profile (Total cholesterol ,Triglycerides, LDL, HDL,VLDL)	333	392	392	Laboratory Investigation
129	LB126	Serum Ferritin	238	280	280	Laboratory Investigation
130	LB127	Vitamin B12 Assay.	408	480	480	Laboratory Investigation
131	LB128	Folic Acid Assay.	442	520	520	Laboratory Investigation

CGHS rates for Tier III (Z City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
132	LB129	Extended Lipid Profile. (Total cholesterol, LDL,HDL, Triglycerides Apo A1,Apo B,Lp (a))	680	800	800	Laboratory Investigation
133	LB130	Apolipoprotein A1 (ApoA1)	272	320	320	Laboratory Investigation
134	LB131	Apolipoprotein B (Apo B)	272	320	320	Laboratory Investigation
135	LB132	Lipoprotein A / Lp A	272	320	320	Laboratory Investigation
136	LB133	CD 3,4 and 8 Counts	843	992	992	Laboratory Investigation
137	LB134	CD 3,4 and 8 Percentage	1027	1208	1208	Laboratory Investigation
138	LB135	Low Density Lipoprotein (LDL)	102	120	120	Laboratory Investigation
139	LB136	Homocysteine	442	520	520	Laboratory Investigation
140	LB137	Serum Electrophoresis	476	560	560	Laboratory Investigation
141	LB138	Fibrinogen	340	400	400	Laboratory Investigation
142	LB139	Gamma-Glutamyl Transpeptidase (GGTP)	102	120	120	Laboratory Investigation
143	LB140	Fructosamine	340	400	400	Laboratory Investigation
144	LB141	Beta 2 microglobulin (B2M) /β2 microglobulin	408	480	480	Laboratory Investigation
145	LB142	Prostate Specific Antigen (PSA)- Total	323	380	380	Laboratory Investigation
146	LB143	Prostate-Specific Antigen (PSA) - Free	544	640	640	Laboratory Investigation
147	LB144	Alpha Fetoprotein (AFP)	374	440	440	Laboratory Investigation
148	LB145	Human Chorionic Gonadotropin (HCG)/ Beta HCG	306	360	360	Laboratory Investigation
149	LB146	Cancer Antigen 125 (CA 125)	544	640	640	Laboratory Investigation
150	LB147	Cancer Antigen 19.9 (CA 19.9)	544	640	640	Laboratory Investigation
151	LB148	Cancer Antigen 15.3 (CA 15.3)	544	640	640	Laboratory Investigation
152	LB149	Vanillylmandelic Acid (VMA)	1088	1280	1280	Laboratory Investigation
153	LB150	Calcitonin	816	960	960	Laboratory Investigation
154	LB151	Carcinoembryonic Antigen (CEA)	408	480	480	Laboratory Investigation
155	LB152	Direct Immunofluorescence (Skin and Kidney Disease etc)	816	960	960	Laboratory Investigation
156	LB153	Indirect (anti ds DNA Anti Smith ANCA)	816	960	960	Laboratory Investigation
157	LB154	Calcidiol / 25-hydroxycholecalciferol / Vitamin D3 assay (Vit D3)	680	800	800	Laboratory Investigation

CGHS rates for Tier III (Z City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
158	LB155	Serum Protein electrophoresis with immunofixation electrophoresis (IFE)	476	560	560	Laboratory Investigation
159	LB156	Anti-Cyclic Citrullinated Peptide (Anti CCP)	612	720	720	Laboratory Investigation
160	LB157	Anti-tissue Transglutaminase antibody (Anti TTG Antibody) / Tissue Transglutaminase IgA (tTg-IgA)	544	640	640	Laboratory Investigation
161	LB158	Serum Erythropoietin	816	960	960	Laboratory Investigation
162	LB159	Adrenocorticotropic Hormone (ACTH)	816	960	960	Laboratory Investigation
163	LB160	T3, T4, TSH -Thyroid Function Test (TFT)	306	360	360	Laboratory Investigation
164	LB161	Thyroid stimulating hormone (TSH)	136	160	160	Laboratory Investigation
165	LB162	Luteinizing hormone (LH)	272	320	320	Laboratory Investigation
166	LB163	Follicle stimulating hormone (FSH)	272	320	320	Laboratory Investigation
167	LB164	Prolactin	272	320	320	Laboratory Investigation
168	LB165	Cortisol	374	440	440	Laboratory Investigation
169	LB166	PTH(Parathormone)	680	800	800	Laboratory Investigation
170	LB167	C-Peptide (Connecting Peptide)	510	600	600	Laboratory Investigation
171	LB168	Insulin	340	400	400	Laboratory Investigation
172	LB169	Progesterone	272	320	320	Laboratory Investigation
173	LB170	17 Hydroxyprogesterone (17 OH Progesterone)	510	600	600	Laboratory Investigation
174	LB171	Dehydroepiandrosterone sulfate (DHEAS)	680	800	800	Laboratory Investigation
175	LB172	Androstenedione	680	800	800	Laboratory Investigation
176	LB173	Growth Hormone	408	480	480	Laboratory Investigation
177	LB174	Thyroid peroxidase antibody (TPO)	476	560	560	Laboratory Investigation
178	LB175	Thyroglobulin.	476	560	560	Laboratory Investigation
179	LB176	Hydatid Serology	558	656	656	Laboratory Investigation
180	LB177	Anti Sperm Antibodies.	612	720	720	Laboratory Investigation
181	LB178	Hepatitis B Virus (HBV) DNA Qualitative	1700	2000	2000	Laboratory Investigation
182	LB179	Hepatitis B Virus (HBV) DNA Quantitative.	2380	2800	2800	Laboratory Investigation
183	LB180	Hepatitis C Virus (HCV) RNA Qualitative.	2040	2400	2400	Laboratory Investigation

CGHS rates for Tier III (Z City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
184	LB181	Human papillomavirus (HPV) Serology	1088	1280	1280	Laboratory Investigation
185	LB182	Rota Virus serology	272	320	320	Laboratory Investigation
186	LB183	Mantoux Test	136	160	160	Laboratory Investigation
187	LB184	ADA(Adenosine deaminase)	442	520	520	Laboratory Investigation
188	LB185	GeneXpert Test (Tuberculosis)	704	828	828	Laboratory Investigation
189	LB186	QuantiFERON TB Gold	1700	2000	2000	Laboratory Investigation
190	LB187	PCR for Tuberculosis (TB)	816	960	960	Laboratory Investigation
191	LB188	PCR for Human immunodeficiency virus (HIV)	1224	1440	1440	Laboratory Investigation
192	LB189	Chlamydia antigen	680	800	800	Laboratory Investigation
193	LB190	Chlamydia antibody	578	680	680	Laboratory Investigation
194	LB191	Brucella serology	306	360	360	Laboratory Investigation
195	LB192	Influenza A serology	680	800	800	Laboratory Investigation
196	LB193	Acetylcholine receptor (AChR) antibody titre	3060	3600	3600	Laboratory Investigation
197	LB194	Anti muscle specific receptor tyrosine kinase (Anti MuSK) antibody titre	4556	5360	5360	Laboratory Investigation
198	LB195	Serum Copper	442	520	520	Laboratory Investigation
199	LB196	Serum Ceruloplasmin	442	520	520	Laboratory Investigation
200	LB197	Urinary copper	571	672	672	Laboratory Investigation
201	LB198	Serum phenobarbitone level	408	480	480	Laboratory Investigation
202	LB199	Coagulation profile	510	600	600	Laboratory Investigation
203	LB200	D-Dimer	340	400	400	Laboratory Investigation
204	LB201	CSF/Any Body Fluid for Basic studies including cell count, protein, sugar, gram stain, India Ink preparation and smear for AFB	238	280	280	Laboratory Investigation
205	LB202	PCR for Herpes simplex	952	1120	1120	Laboratory Investigation
206	LB203	Bacterial culture and sensitivity - Aerobic	313	368	368	Laboratory Investigation
207	LB204	Bacterial culture and sensitivity - Anaerobic	476	560	560	Laboratory Investigation
208	LB205	Mycobacterial culture and sensitivity	374	440	440	Laboratory Investigation
209	LB206	Fungal culture	337	396	396	Laboratory Investigation
210	LB207	Anti measles antibody titre (with serum antibody titre)	816	960	960	Laboratory Investigation

CGHS rates for Tier III (Z City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
211	LB208	Viral culture	408	480	480	Laboratory Investigation
212	LB209	Antibody titre (Herpes simplex, cytomegalovirus, flavivirus, zoster varicella virus)	1428	1680	1680	Laboratory Investigation
213	LB210	Oligoclonal bands (OCBs)	1530	1800	1800	Laboratory Investigation
214	LB211	Myelin basic protein (MBP)	2380	2800	2800	Laboratory Investigation
215	LB212	Cryptococcal antigen	1020	1200	1200	Laboratory Investigation
216	LB213	D Xylose test	748	880	880	Laboratory Investigation
217	LB214	Faecal / Faecal fat test/ faecal chymotrypsin/ faecal elastase	680	800	800	Laboratory Investigation
218	LB215	H pylori serology for Coeliac disease /Celiac disease	816	960	960	Laboratory Investigation
219	LB216	HBV genotyping	1955	2300	2300	Laboratory Investigation
220	LB217	HCV genotyping	3812	4485	4485	Laboratory Investigation
221	LB218	Urinary Vanillylmandelic Acid (VMA)	1486	1748	1748	Laboratory Investigation
222	LB219	Urinary metanephrine/Normetanephrine	1972	2320	2320	Laboratory Investigation
223	LB220	Urinary free catecholamine	1700	2000	2000	Laboratory Investigation
224	LB221	Serum aldosterone	1224	1440	1440	Laboratory Investigation
225	LB222	24 Hr urinary aldosterone	1020	1200	1200	Laboratory Investigation
226	LB223	Plasma renin activity	1088	1280	1280	Laboratory Investigation
227	LB224	Serum aldosterone/renin ratio	1020	1200	1200	Laboratory Investigation
228	LB225	Osmolality urine	306	360	360	Laboratory Investigation
229	LB226	Osmolality serum	306	360	360	Laboratory Investigation
230	LB227	Urinary sodium	102	120	120	Laboratory Investigation
231	LB228	Urinary Chloride	102	120	120	Laboratory Investigation
232	LB229	Urinary potassium	102	120	120	Laboratory Investigation
233	LB230	Urinary calcium	102	120	120	Laboratory Investigation
234	LB231	Thyroid binding globulin	748	880	880	Laboratory Investigation
235	LB232	24-hour urinary free cortisol	510	600	600	Laboratory Investigation
236	LB233	Islet cell antibody	816	960	960	Laboratory Investigation
237	LB234	Glutamic Acid Decarboxylase Autoantibodies test (GAD antibodies)	1360	1600	1600	Laboratory Investigation

CGHS rates for Tier III (Z City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
238	LB235	Insulin associated antibody	666	784	784	Laboratory Investigation
239	LB236	Insulin-like growth factor-1 (IGF-1)	1496	1760	1760	Laboratory Investigation
240	LB237	Insulin-like growth factor binding protein 3 (IGF- BP3)	1564	1840	1840	Laboratory Investigation
241	LB238	Sex hormone binding globulin	1047	1232	1232	Laboratory Investigation
242	LB239	Estradiol (E2)	272	320	320	Laboratory Investigation
243	LB240	Thyroglobulin antibody	476	560	560	Laboratory Investigation
244	LB241	Kappa Lambda Light Chains, Free, Serum/ Serum free light chains (SFLC)	2737	3220	3220	Laboratory Investigation
245	LB242	Serum IgE Level	258	304	304	Laboratory Investigation
246	LB243	N-terminal pro BNP (NT-pro BNP / Brain natriuretic peptide (BNP)	1408	1656	1656	Laboratory Investigation
247	LB244	HCV RNA Quantitative	1255	1476	1476	Laboratory Investigation
248	LB245	Tacrolimus Level	1799	2116	2116	Laboratory Investigation
249	LB246	Protein Creatinine Ratio (PCR), Urine / Albumin Creatinine Ratio (ACR), Urine	103	122	122	Laboratory Investigation
250	LB247	HLA B27 (PCR)	391	460	460	Laboratory Investigation
251	LB248	Procalcitonin	1408	1656	1656	Laboratory Investigation
252	LB249	TORCH Test	876	1030	1030	Laboratory Investigation
253	LB250	Anti –Smooth Muscle Antibody Test (ASMA)	993	1168	1168	Laboratory Investigation
254	LB251	C ANCA-IFA	1020	1200	1200	Laboratory Investigation
255	LB252	P ANCA-IFA	1020	1200	1200	Laboratory Investigation
256	LB253	Angiotensin converting enzyme (ACE)	680	800	800	Laboratory Investigation
257	LB254	Extractable Nuclear Antigens (ENA) - Quantitative	3128	3680	3680	Laboratory Investigation
258	LB255	Chromogranin A	3400	4000	4000	Laboratory Investigation
259	LB256	Faecal calprotectin	1856	2184	2184	Laboratory Investigation
260	LB257	C3-COMPLEMENT	442	520	520	Laboratory Investigation
261	LB258	C4-COMPLEMENT	442	520	520	Laboratory Investigation
262	LB259	H1N1 (RT-PCR)	737	867	867	Laboratory Investigation
263	LB260	Anti HEV IgM	680	800	800	Laboratory Investigation

CGHS rates for Tier III (Z City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
264	LB261	Anti HAV IgM	510	600	600	Laboratory Investigation
265	LB262	HBsAg Quantitative	442	520	520	Laboratory Investigation
266	LB263	Typhidot IgM	272	320	320	Laboratory Investigation
267	LB264	Hepatitis B Core Antibody (HBcAb) Level (Hepatitis B Core IgM Antibody)	326	384	384	Laboratory Investigation
268	LB265	Hepatitis B surface antibody (anti HBs)	442	520	520	Laboratory Investigation
269	LB266	Free Triiodothyronine (FT3)	85	100	100	Laboratory Investigation
270	LB267	Free Thyroxine (FT4)	85	100	100	Laboratory Investigation
271	LB268	Widal Test	48	56	56	Laboratory Investigation
272	LB269	Dengue NS1 Ag	272	320	320	Laboratory Investigation
273	LB270	Dengue IgM and Ig G	544	640	640	Laboratory Investigation
274	LB271	Interleukin 6 (IL 6)	1088	1280	1280	Laboratory Investigation
275	LB272	Covid Antibody Test	476	560	560	Laboratory Investigation
276	LB273	Cryoglobulins	680	800	800	Laboratory Investigation
277	LB274	Cytogenetics	3400	4000	4000	Laboratory Investigation
278	LB275	Plasma Free Normetanephrine	1564	1840	1840	Laboratory Investigation
279	LB276	Plasma Metanephrines	1564	1840	1840	Laboratory Investigation
280	LB277	PLA2 receptor antibody quantitative	2856	3360	3360	Laboratory Investigation
281	LB278	Allergic Bronchopulmonary Aspergillosis (ABPA) Panel	1972	2320	2320	Laboratory Investigation
282	LB279	Allergy Food Screening Panel	4080	4800	4800	Laboratory Investigation
283	LB280	AMA (Anti Mitochondrial Antibody)	680	800	800	Laboratory Investigation
284	LB281	AMH (Anti- Mullerian Hormone)	680	800	800	Laboratory Investigation
285	LB282	ANA BLOT	2040	2400	2400	Laboratory Investigation
286	LB283	ANA Profile	2040	2400	2400	Laboratory Investigation
287	LB284	Anti GBM (Glomerular Basement Membrane) Antibody	1020	1200	1200	Laboratory Investigation
288	LB285	Anti LKM (Liver Kidney Microsome) Ab	1020	1200	1200	Laboratory Investigation
289	LB286	Anti Parietal Cell Antibodies	1360	1600	1600	Laboratory Investigation
290	LB287	Anti Intrinsic Factor Antibodies	1360	1600	1600	Laboratory Investigation
291	LB288	ASO Titre /ASLO Titre	367	432	432	Laboratory Investigation

CGHS rates for Tier III (Z City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
292	LB289	Aspergillus Fumigatus Specific IgE	1054	1240	1240	Laboratory Investigation
293	LB290	Autoimmune Encephalitis Panel	11560	13600	13600	Laboratory Investigation
294	LB291	Autoimmune Hepatitis Profile	2013	2368	2368	Laboratory Investigation
295	LB292	Beta-D-Glucan Assay	10200	12000	12000	Laboratory Investigation
296	LB293	C1 Esterase inhibitor (Quantitative)	1632	1920	1920	Laboratory Investigation
297	LB294	CMV Quantitative (Viral load) Test	1564	1840	1840	Laboratory Investigation
298	LB295	Double Marker (Beta-hCG,PAPP-A)	1360	1600	1600	Laboratory Investigation
299	LB296	Quadruple test (AFP,HCG,UE3,Inhibin A)	1632	1920	1920	Laboratory Investigation
300	LB297	HBeAb (Hepatitis B envelope Antibody)	245	288	288	Laboratory Investigation
301	LB298	HBeAg (Hepatitis B envelope Antigen)	245	288	288	Laboratory Investigation
302	LB299	HIAA 24 Hours Urinary	1564	1840	1840	Laboratory Investigation
303	LB300	HIV Viral Load by PCR	3400	4000	4000	Laboratory Investigation
304	LB301	HSV 1 & 2 IgG	558	656	656	Laboratory Investigation
305	LB302	Hypersensitive Pneumonitis Panel	4896	5760	5760	Laboratory Investigation
306	LB303	IgG4	1360	1600	1600	Laboratory Investigation
307	LB304	Inhibin A	612	720	720	Laboratory Investigation
308	LB305	Inhibin B	1292	1520	1520	Laboratory Investigation
309	LB306	Scrub Typhus IgM	1088	1280	1280	Laboratory Investigation
310	LB307	Interferon Gamma Release Assay (IGRA)	2040	2400	2400	Laboratory Investigation
311	LB308	KOH Mount	102	120	120	Laboratory Investigation
312	LB309	Serum AMA M2 (IFA Method)	1360	1600	1600	Laboratory Investigation
313	LB310	Serum Gastrin	816	960	960	Laboratory Investigation
314	LB311	Serum Haptoglobin Levels	680	800	800	Laboratory Investigation
315	LB312	Skin Prick Test for Allergy	1224	1440	1440	Laboratory Investigation
316	LB313	Myositis Profile (Up to 16 Antigens)	5440	6400	6400	Laboratory Investigation
317	LB314	Paraneoplastic Panel	6800	8000	8000	Laboratory Investigation
318	LB315	TSH Receptor Antibody	816	960	960	Laboratory Investigation
319	LB316	Anti-Nuclear Antibodies - IFA	1088	1280	1280	Laboratory Investigation

CGHS rates for Tier III (Z City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
320	LB317	Autoimmune Liver Diseases Profile	3400	4000	4000	Laboratory Investigation
321	LB318	Citrate Urine 24 Hour	782	920	920	Laboratory Investigation
322	LB319	Comprehensive Allergy Panel	4760	5600	5600	Laboratory Investigation
323	LB320	Comprehensive Myeloma Protein Panel	4760	5600	5600	Laboratory Investigation
324	LB321	DCP (DES Gamma-Carboxy- Prothrombin)	2278	2680	2680	Laboratory Investigation
325	LB322	Desmoglein (DSG) 1 And 3 Antibody	3672	4320	4320	Laboratory Investigation
326	LB323	Galactomannan	2115	2488	2488	Laboratory Investigation
327	LB324	SCL 70 Antibody	1142	1344	1344	Laboratory Investigation
328	LB325	Serum Chromogranin A	2584	3040	3040	Laboratory Investigation
329	LB326	SSA- Antibody Ro Serum Test	986	1160	1160	Laboratory Investigation
330	LB327	SSB- Antibody La Serum Test	986	1160	1160	Laboratory Investigation
331	LB328	Stool for Clostridium difficile Toxin	1931	2272	2272	Laboratory Investigation
332	LB329	TPHA	272	320	320	Laboratory Investigation
333	LB330	UGT1A1 Gene Analysis	4080	4800	4800	Laboratory Investigation
334	LB331	Urine For Myoglobin	374	440	440	Laboratory Investigation
335	LB332	Leptospira Ig M	680	800	800	Laboratory Investigation
336	LB333	Chikungunya Ig M	680	800	800	Laboratory Investigation
337	LB334	Weil Felix Agglutination Test	340	400	400	Laboratory Investigation
338	LB335	Continuous Glucose Monitoring for 2 Weeks	2720	3200	3200	Laboratory Investigation
339	RI001	2D echocardiography	1003	1180	1180	Radiological Investigation
340	RI002	Fetal Echo	1088	1280	1280	Radiological Investigation
341	RI003	2D Transoesophageal Echocardiography (TEE)	1122	1320	1320	Radiological Investigation
342	RI004	3D Transoesophageal Echocardiography (TEE)	1122	1320	1320	Radiological Investigation
343	RI005	Stress Echo- exercise	1632	1920	1920	Radiological Investigation
344	RI006	Stress Echo- pharmacological / D Stress Echo	2040	2400	2400	Radiological Investigation
345	RI007	Stress Myocardial Perfusion Imaging (MPI)- exercise	6256	7360	7360	Radiological Investigation
346	RI008	Stress Myocardial Perfusion Imaging (MPI) - pharmacological	6256	7360	7360	Radiological Investigation
347	RI009	CT Coronary Angiography including Calcium Score Test	6256	7360	7360	Radiological Investigation

CGHS rates for Tier III (Z City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
348	RI010	Cardiac CT scan	4420	5200	5200	Radiological Investigation
349	RI011	MRI Cardiac	5440	6400	6400	Radiological Investigation
350	RI012	Stress Cardiac MRI	6256	7360	7360	Radiological Investigation
351	RI013	Cardiac PET	6256	7360	7360	Radiological Investigation
352	RI014	USG Transvaginal sonography (TVS for Follicular monitoring /aspiration) /TVS for follicular monitoring/pelvic pathology/ET measurement	680	800	800	Radiological Investigation
353	RI015	Growth scan (including BPP, AFI, Doppler)	1360	1600	1600	Radiological Investigation
354	RI016	1st trimester scan-dating scan/NT scan/Early pregnancy scan	476	560	560	Radiological Investigation
355	RI017	USG Colour Doppler Pregnancy / Fetal Doppler/Umbilical Doppler/Uterine Vessel Doppler	1139	1340	1340	Radiological Investigation
356	RI018	Biophysical score / Biophysical profile test (BPP test)	1020	1200	1200	Radiological Investigation
357	RI019	USG Obstetrics for Anomalies scan	1360	1600	1600	Radiological Investigation
358	RI020	USG Whole Abdomen Including Pelvis and post Void urine	544	640	640	Radiological Investigation
359	RI021	Pelvic USG (gynae, infertility, prostate , KUB with post- void residual (PVR) etc).	340	400	400	Radiological Investigation
360	RI022	USG Small parts (scrotum, thyroid, parathyroid etc)	524	616	616	Radiological Investigation
361	RI023	USG Large Parts (Joints/Chest,...etc)	544	640	640	Radiological Investigation
362	RI024	USG Neonatal spine	680	800	800	Radiological Investigation
363	RI025	USG Breast including relevant Lymph nodes- Bilateral/Unilateral	544	640	640	Radiological Investigation
364	RI026	USG Hysterosalpingography (HSG)	1632	1920	1920	Radiological Investigation
365	RI027	Fibroscan Liver	782	920	920	Radiological Investigation
366	RI028	Carotid Doppler Bilateral	680	800	800	Radiological Investigation
367	RI029	Arterial Colour Doppler Bilateral	680	800	800	Radiological Investigation
368	RI030	Venous Colour Doppler Bilateral	680	800	800	Radiological Investigation
369	RI031	Colour Doppler, renal arteries/any other organ	680	800	800	Radiological Investigation
370	RI032	X Ray Abdomen AP Supine or Erect (One film)	170	200	200	Radiological Investigation

CGHS rates for Tier III (Z City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
371	RI033	X Ray Abdomen Lateral view (one film)	143	168	168	Radiological Investigation
372	RI034	X Ray Chest PA /AP/ Oblique view (one film)	156	184	184	Radiological Investigation
373	RI035	X Ray Chest Lateral (one film)	156	184	184	Radiological Investigation
374	RI036	X Ray Mastoids: Towne view, oblique views (3 films)	340	400	400	Radiological Investigation
375	RI037	X Ray Extremities (Hand/Leg/Feet/Finger/Toe) bones & Joints (Hip/ Knee/Ankle / shoulder/ Wrist / fingers/Toes, etc) AP & Lateral views (standing or weight bearing)(Two films)	258	304	304	Radiological Investigation
376	RI038	X Ray Pelvis AP (one film)	136	160	160	Radiological Investigation
377	RI039	X Ray Temporomandibular (TM) Joints (one film)	170	200	200	Radiological Investigation
378	RI040	X Ray Abdomen & Pelvis for KUB	160	188	188	Radiological Investigation
379	RI041	X Ray Skull AP & Lateral (2 films)/ Extra oral radiographs - All skull views, TMJ, Lateral oblique [Dental]	272	320	320	Radiological Investigation
380	RI042	X Ray Spine AP & Lateral (2 films)	272	320	320	Radiological Investigation
381	RI043	X Ray Paranasal sinuses (PNS) view (1 film)	136	160	160	Radiological Investigation
382	RI044	Barium Swallow	816	960	960	Radiological Investigation
383	RI045	Barium Upper GI study	1020	1200	1200	Radiological Investigation
384	RI046	Barium Upper GI study (Double contrast)	1360	1600	1600	Radiological Investigation
385	RI047	Barium Meal follow through	1360	1600	1600	Radiological Investigation
386	RI048	Barium Enema (Single contrast/double contrast)	1360	1600	1600	Radiological Investigation
387	RI049	Small bowel enteroclysis	1360	1600	1600	Radiological Investigation
388	RI050	General:Fistulography / Sinography/Sialography/Dacrocystography/ T-Tube cholangiogram/Nephrostogram	864	1016	1016	Radiological Investigation
389	RI051	Intravenous Pyelography (IVP)	1122	1320	1320	Radiological Investigation
390	RI052	Micturating Cystourethrography (MCU)	762	896	896	Radiological Investigation
391	RI053	Retrograde Urethrography (RGU)	762	896	896	Radiological Investigation
392	RI054	Contrast Hystero-Salpingography (HSG)	1360	1600	1600	Radiological Investigation
393	RI055	X ray Arthrography	1360	1600	1600	Radiological Investigation
394	RI056	Ortho Scanogram	1149	1352	1352	Radiological Investigation

CGHS rates for Tier III (Z City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
395	RI057	Cephalography	238	280	280	Radiological Investigation
396	RI058	Myelography	1700	2000	2000	Radiological Investigation
397	RI059	Diagnostic Digital Subtraction Angiography (DSA) cerebral vessels	9112	10720	10720	Radiological Investigation
398	RI060	X Ray Mammography – Bilateral/Unilateral	935	1100	1100	Radiological Investigation
399	RI061	MRI Mammography	3400	4000	4000	Radiological Investigation
400	RI062	CT Scan Head/ Brain-Without Contrast / NCCT Head/Brain	704	828	828	Radiological Investigation
401	RI063	CT Scan Head / Brain- with Contrast -including CT angiography	1496	1760	1760	Radiological Investigation
402	RI064	CT Scan Chest - without contrast (for lungs)	1360	1600	1600	Radiological Investigation
403	RI065	High Resolution computed Tomography (HRCT Chest)	1360	1600	1600	Radiological Investigation
404	RI066	Contrast Enhanced Computed Tomograpy (CECT) Chest (Including CD)	1955	2300	2300	Radiological Investigation
405	RI067	CT Scan Lower Abdomen (incl. Pelvis) With Contrast/ CT KUB with Contrast	3060	3600	3600	Radiological Investigation
406	RI068	CT Scan Lower Abdomen (Incl. Pelvis) Without Contrast / CT KUB without Contrast	2380	2800	2800	Radiological Investigation
407	RI069	CT Scan Whole Abdomen Without Contrast	2346	2760	2760	Radiological Investigation
408	RI070	CT Scan Whole Abdomen With Contrast	3519	4140	4140	Radiological Investigation
409	RI071	Triple Phase CT abdomen	3519	4140	4140	Radiological Investigation
410	RI072	CT Urography	3060	3600	3600	Radiological Investigation
411	RI073	CT Scan Angiography Chest	3519	4140	4140	Radiological Investigation
412	RI074	CT Scan Angiography Abdomen	3519	4140	4140	Radiological Investigation
413	RI075	CT Angiography Entire Aorta (CT Aortogram)	6800	8000	8000	Radiological Investigation
414	RI076	CT Scan Enteroclysis	4692	5520	5520	Radiological Investigation
415	RI077	CT Scan Neck – Without Contrast	1700	2000	2000	Radiological Investigation
416	RI078	CT Scan Neck – With Contrast	2380	2800	2800	Radiological Investigation
417	RI079	CT Angio-Neck Vessels	4080	4800	4800	Radiological Investigation
418	RI080	CT Scan Orbits - Without Contrast	1496	1760	1760	Radiological Investigation
419	RI081	CT Scan Orbits - With Contrast	2176	2560	2560	Radiological Investigation
420	RI082	CT Scan of Para Nasal Sinuses (CT PNS)- Without Contrast	1564	1840	1840	Radiological Investigation

CGHS rates for Tier III (Z City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
421	RI083	CT Scan of Para Nasal Sinuses (CT PNS)- With Contrast	2244	2640	2640	Radiological Investigation
422	RI084	CT Scan Spine (Cervical, Dorsal, Lumbar,Sacral)–without Contrast	1904	2240	2240	Radiological Investigation
423	RI085	CT Scan Temporal bone – without contrast	1700	2000	2000	Radiological Investigation
424	RI086	CT Scan / Cone Beam CT (CBCT) Dental	1020	1200	1200	Radiological Investigation
425	RI087	CT Scan Limbs -Without Contrast	1904	2240	2240	Radiological Investigation
426	RI088	CT Scan Limbs -With Contrast including CT angiography	3944	4640	4640	Radiological Investigation
427	RI089	MRI Head / Brain – Without Contrast	1870	2200	2200	Radiological Investigation
428	RI090	MRI Head / Brain– With Contrast	3400	4000	4000	Radiological Investigation
429	RI091	MRI Orbits – Without Contrast	1272	1496	1496	Radiological Investigation
430	RI092	MRI Orbits – With Contrast	3400	4000	4000	Radiological Investigation
431	RI093	MRI Nasopharynx and PNS – Without Contrast	2380	2800	2800	Radiological Investigation
432	RI094	MRI Nasopharynx and PNS – With Contrast	3400	4000	4000	Radiological Investigation
433	RI095	MR for Salivary Glands with Sialography/Maxillofacial MRI	3400	4000	4000	Radiological Investigation
434	RI096	MRI Neck - Without Contrast	2380	2800	2800	Radiological Investigation
435	RI097	MRI Neck- with contrast	3910	4600	4600	Radiological Investigation
436	RI098	MRI Shoulder – Without contrast	2380	2800	2800	Radiological Investigation
437	RI099	MRI Shoulder – With contrast	3400	4000	4000	Radiological Investigation
438	RI100	MRI shoulder both Joints - Without contrast	2720	3200	3200	Radiological Investigation
439	RI101	MRI Shoulder both joints – With contrast	4080	4800	4800	Radiological Investigation
440	RI102	MRI Wrist Single joint - Without contrast	2244	2640	2640	Radiological Investigation
441	RI103	MRI Wrist Single joint - With contrast	3400	4000	4000	Radiological Investigation
442	RI104	MRI Wrist both joints - Without contrast	2720	3200	3200	Radiological Investigation
443	RI105	MRI Wrist Both joints - With contrast	3910	4600	4600	Radiological Investigation
444	RI106	MRI knee Single joint - Without contrast	2040	2400	2400	Radiological Investigation
445	RI107	MRI knee Single joint - With contrast	3910	4600	4600	Radiological Investigation
446	RI108	MRI knee both joints - Without contrast	2720	3200	3200	Radiological Investigation
447	RI109	MRI knee both joints - With contrast	3910	4600	4600	Radiological Investigation
448	RI110	MRI Ankle Single joint - Without contrast	2380	2800	2800	Radiological Investigation

CGHS rates for Tier III (Z City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
449	RI111	MRI Ankle single joint - With contrast	3400	4000	4000	Radiological Investigation
450	RI112	MRI Ankle both joints - With contrast	4420	5200	5200	Radiological Investigation
451	RI113	MRI Ankle both joints - Without contrast	2380	2800	2800	Radiological Investigation
452	RI114	MRI Hip - With contrast	3400	4000	4000	Radiological Investigation
453	RI115	MRI Hip – without contrast	2380	2800	2800	Radiological Investigation
454	RI116	MRI Pelvis – Without Contrast	2380	2800	2800	Radiological Investigation
455	RI117	MRI Pelvis – with contrast	3910	4600	4600	Radiological Investigation
456	RI118	MRI Extremities - With contrast	3910	4600	4600	Radiological Investigation
457	RI119	MRI Extremities - Without contrast	2380	2800	2800	Radiological Investigation
458	RI120	MRI Temporomandibular – B/L - With contrast / MRI TMJ (Double Joint) with contrast	3400	4000	4000	Radiological Investigation
459	RI121	MRI Temporomandibular – B/L - Without contrast / MRI -TMJ(Double Joint) without contrast	2380	2800	2800	Radiological Investigation
460	RI122	MR Temporal Bone/ Inner ear with contrast	3400	4000	4000	Radiological Investigation
461	RI123	MRI Temporal Bone/ Inner ear without contrast	2380	2800	2800	Radiological Investigation
462	RI124	MRI Abdomen – Without Contrast	2380	2800	2800	Radiological Investigation
463	RI125	MRI Abdomen – With Contrast	3910	4600	4600	Radiological Investigation
464	RI126	MRI-Prostate (Multi-parametric) (Including CD)	4692	5520	5520	Radiological Investigation
465	RI127	MRI Breast - With Contrast	3400	4000	4000	Radiological Investigation
466	RI128	MRI Breast - Without Contrast	2380	2800	2800	Radiological Investigation
467	RI129	MRI whole Spine Screening- Without Contrast	1360	1600	1600	Radiological Investigation
468	RI130	MRI Chest – Without Contrast	2380	2800	2800	Radiological Investigation
469	RI131	MRI Chest – With Contrast	3400	4000	4000	Radiological Investigation
470	RI132	MRI Whole spine – Without Contrast	2992	3520	3520	Radiological Investigation
471	RI133	MRI Cervical/ Cervico Dorsal Spine – With Contrast	3400	4000	4000	Radiological Investigation
472	RI134	MRI Dorsal/ Dorso Lumbar Spine - Without Contrast	2380	2800	2800	Radiological Investigation
473	RI135	MRI Dorsal/ Dorso Lumbar Spine – With Contrast	3400	4000	4000	Radiological Investigation
474	RI136	MRI Lumbar/ Lumbo-Sacral Spine – Without Contrast	2380	2800	2800	Radiological Investigation

CGHS rates for Tier III (Z City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
475	RI137	MRI Lumbar/ Lumbo-Sacral Spine – With Contrast	3910	4600	4600	Radiological Investigation
476	RI138	Whole body MRI (For oncological workup)	6256	7360	7360	Radiological Investigation
477	RI139	MR cholecysto-pancreatography (MRCP)	5780	6800	6800	Radiological Investigation
478	RI140	MRI Angiography - with contrast	3910	4600	4600	Radiological Investigation
479	RI141	MR Enteroclysis	3400	4000	4000	Radiological Investigation
480	RI142	MRI DEFECOGRAPHY	4760	5600	5600	Radiological Investigation
481	RI143	MRI FISTULOGRAM	3060	3600	3600	Radiological Investigation
482	RI144	MRI SPECTROSCOPY	2040	2400	2400	Radiological Investigation
483	RI145	Dexa Scan Bone Densitometry - Two sites	1360	1600	1600	Radiological Investigation
484	RI146	Dexa Scan Bone Densitometry - Three sites (Spine, Hip &extremity)	1700	2000	2000	Radiological Investigation
485	RI147	Dexa Scan Bone Densitometry Whole body	2040	2400	2400	Radiological Investigation
486	PI001	Pulmonary Function Test (PFT) / (Spirometry with Diffusing Capacity of the Lungs for Carbon monoxide (DLCO)	340	400	400	Pulmonology Investigation
487	PI002	Lung Ventilation & Perfusion Scan (V/Q Scan)	4080	4800	4800	Pulmonology Investigation
488	PI003	Lung Perfusion Scan	3400	4000	4000	Pulmonology Investigation
489	PI004	6 Minute Walk Test	340	400	400	Pulmonology Investigation
490	PI005	FeNO Breathing Test	490	576	576	Pulmonology Investigation
491	PP001	Endo bronchial Ultrasound (EBUS) -Trans bronchial needle aspiration (TBNA) - Excluding the cost of Needle	13600	16000	16000	Pulmonology Procedure
492	PP002	Video Bronchoscopy with BAL	7480	8800	8800	Pulmonology Procedure
493	NM001	Whole Body Bone Scan with SPECT.	3400	4000	4000	Nuclear Medicine Investigation
494	NM002	Three phase whole body Bone Scan	4080	4800	4800	Nuclear Medicine Investigation
495	NM003	Brain Perfusion SPECT Scan with Technetium 99m radiopharmaceuticals.	9112	10720	10720	Nuclear Medicine Investigation
496	NM004	Radionuclide Cisternography for CSF leak	4624	5440	5440	Nuclear Medicine Investigation

CGHS rates for Tier III (Z City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
497	NM005	Renal Cortical Scintigraphy with Technetium 99m Dimercaptosuccinic acid (DMSA)/DTPA	2720	3200	3200	Nuclear Medicine Investigation
498	NM006	Dynamic Renography.	2720	3200	3200	Nuclear Medicine Investigation
499	NM007	Dynamic Renography with Diuretic.	2720	3200	3200	Nuclear Medicine Investigation
500	NM008	Dynamic Renography with Captopril	4624	5440	5440	Nuclear Medicine Investigation
501	NM009	Testicular Scan with Technetium 99m Pertechnetate	1156	1360	1360	Nuclear Medicine Investigation
502	NM010	Thyroid Uptake measurements with 131-Iodine.	1700	2000	2000	Nuclear Medicine Investigation
503	NM011	Thyroid Scan with Technetium 99m Pertechnetate	1292	1520	1520	Nuclear Medicine Investigation
504	NM012	Iodine-131 Whole Body Scan	9112	10720	10720	Nuclear Medicine Investigation
505	NM013	Whole Body Scan with MIBG	9112	10720	10720	Nuclear Medicine Investigation
506	NM014	Parathyroid Scan	4974	5852	5852	Nuclear Medicine Investigation
507	NM015	Scintimammography.	4080	4800	4800	Nuclear Medicine Investigation
508	NM016	Indium labelled octreotide Scan	48960	57600	57600	Nuclear Medicine Investigation
509	NM017	FDG Whole body PET CT Scan	9775	11500	11500	Nuclear Medicine Investigation
510	NM018	Brain / Heart FDG PET CT Scan	9775	11500	11500	Nuclear Medicine Investigation

CGHS rates for Tier III (Z City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
511	NM019	Gallium-68 Peptide PET / CT imaging for Neuroendocrine Tumour	9775	11500	11500	Nuclear Medicine Investigation
512	NM020	PSMA PET CT Scan	10200	12000	12000	Nuclear Medicine Investigation
513	NM021	F-DOPA PET-CT scan	10200	12000	12000	Nuclear Medicine Investigation
514	BY001	Skin Biopsy	850	1000	1000	Biopsies
515	BY002	Punch/Wedge biopsy	2040	2400	2400	Biopsies
516	BY003	Excision Biopsy of Ulcers	3400	4000	4000	Biopsies
517	BY004	Excision Biopsy of Superficial Lumps	6256	7360	7360	Biopsies
518	BY005	Incision Biopsy of Growths/Ulcers	3400	4000	4000	Biopsies
519	BY006	Bone Marrow Aspiration and Biopsy	5780	6800	6800	Biopsies
520	BY007	Scalene Node Biopsy	6256	7360	7360	Biopsies
521	BY008	Liver Biopsy	5780	6800	6800	Biopsies
522	BY009	Muscle Biopsy	1700	2000	2000	Biopsies
523	BY010	Trucut Needle Biopsy- (excluding the cost of Needle/Biopsy Gun if used)	2618	3080	3080	Biopsies
524	RP001	USG Guided Intervention- Diagnostic	680	800	800	Interventional Radiological Procedure
525	RP002	USG Guided Intervention -Therapeutic	1360	1600	1600	Interventional Radiological Procedure
526	RP003	USG Guided Intervention - Specialized Procedures excluding cost of Catheter or biopsy gun	2040	2400	2400	Interventional Radiological Procedure
527	RP004	CT Guided biopsy including all the consumables	6256	7360	7360	Interventional Radiology Procedure
528	RP005	CT Guided Intervention -Percutaneous catheter drainage/tube placement excluding the cost of tube /catheter	2380	2800	2800	Interventional Radiological Procedure
529	RP006	Percutaneous transhepatic cholangiography (PTC)	1224	1440	1440	Interventional Radiological Procedure

CGHS rates for Tier III (Z City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
530	RP007	Transarterial Chemoembolization (TACE)	36040	42400	42400	Interventional Radiological Procedure
531	CA001	A, B, DR Molecular Typing PCR - SSP	7014	8252	8252	Oncology Investigations
532	CA002	ABL Kinase Domain Mutation for Chronic Myeloid leukemia (TKI Resistance, Imatinib Resistance	5508	6480	6480	Oncology Investigations
533	CA003	ABL Kinase Domain Mutation for Ph Positive Acute Lymphoblastic leukemia (TKI Resistance, I	5508	6480	6480	Oncology Investigations
534	CA004	Acute Leukemia karyotyping	3771	4436	4436	Oncology Investigations
535	CA005	Acute Leukemia mutation detection (per gene)ASXL1 /c-KIT/DNMT3A/ IDH1 and IDH2 /K RAS and N RAS mutation detection	3665	4312	4312	Oncology Investigations
536	CA006	Acute Leukemia RUNX1 mutation detection	3665	4312	4312	Oncology Investigations
537	CA007	Acute Leukemia TET2 mutation detection	15654	18416	18416	Oncology Investigations
538	CA008	Acute Leukemia TP53 mutation detection	15654	18416	18416	Oncology Investigations
539	CA009	Acute Lymphoblastic leukemia karyotyping	3771	4436	4436	Oncology Investigations
540	CA010	Acute Lymphoblastic Leukemia Mutation Detection	7507	8832	8832	Oncology Investigations
541	CA011	Acute Lymphoblastic Leukemia Transcript Identification	2054	2416	2416	Oncology Investigations
542	CA012	Acute Myeloid Leukemia (AML) Panel	9092	10696	10696	Oncology Investigations
543	CA013	ALK -1	3189	3752	3752	Oncology Investigations
544	CA014	ALK rearrangement: 2p23	3189	3752	3752	Oncology Investigations
545	CA015	B-cell Acute Lymphoblastic Leukemia (B-ALL) Panel	7868	9256	9256	Oncology Investigations
546	CA016	BCL3 rearrangement 19q13.3 / BCL6 rearrangement: 3q27	2370	2788	2788	Oncology Investigations
547	CA017	BCOR alteration	4114	4840	4840	Oncology Investigations
548	CA018	BCR/ABL (Ph) duplication, trisomy 8, trisomy 21, TP53 deletion	4145	4876	4876	Oncology Investigations
549	CA019	BCR/ABL Ph: t(9;22)	2370	2788	2788	Oncology Investigations
550	CA020	BCR-ABL by PCR-Quantitative	2720	3200	3200	Oncology Investigations
551	CA021	BRAF	6120	7200	7200	Oncology Investigations
552	CA022	BRCA1 & BRCA2	13600	16000	16000	Oncology Investigations

CGHS rates for Tier III (Z City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
553	CA023	C3d Single Allele Antibody for HLA Class I (C3dLSA Class I) /C3d Single Allele Antibody for HLA Class II (C3dLSA Class II)	11900	14000	14000	Oncology Investigations
554	CA024	CAN ASSIST	34000	40000	40000	Oncology Investigations
555	CA025	CCND1/IgH: t(11;14)	3189	3752	3752	Oncology Investigations
556	CA026	CD 19 and CD 20	1020	1200	1200	Oncology Investigations
557	CA027	Cell line karyotyping	7548	8880	8880	Oncology Investigations
558	CA028	Chimerism Analysis	1047	1232	1232	Oncology Investigations
559	CA029	Chromosomal breakage (fragility) studies in Fanconi's Anemia/Aplastic Anemia	3771	4436	4436	Oncology Investigations
560	CA030	Chronic Lymphocytic Leukemia (CLL) Panel	7868	9256	9256	Oncology Investigations
561	CA031	Chronic Lymphocytic Leukemia Comprehensive Mutation Profile (IGVH Gene Mutation & Usage, T	22658	26656	26656	Oncology Investigations
562	CA032	Chronic Lymphocytic Leukemia IGVH Mutation Detection	4318	5080	5080	Oncology Investigations
563	CA033	Chronic Lymphoproliferative disorder IGVH Mutation Detection	4318	5080	5080	Oncology Investigations
564	CA034	Chronic Lymphoproliferative disorder NOTCH1 mutation / NOTCH2 mutation	3665	4312	4312	Oncology Investigations
565	CA035	Chronic Lymphoproliferative disorder SF3B1 mutation	3665	4312	4312	Oncology Investigations
566	CA036	Chronic Lymphoproliferative disorder TP53 mutation	15654	18416	18416	Oncology Investigations
567	CA037	CLINICAL EXOME SEQUENCING	10200	12000	12000	Oncology Investigations
568	CA038	CLL PANEL FISH	6800	8000	8000	Oncology Investigations
569	CA039	CML Blast Crisis karyotyping	3771	4436	4436	Oncology Investigations
570	CA040	Combined High Sensitivity JAK2 V617F and Exon12 Mutation Detection	4644	5464	5464	Oncology Investigations
571	CA041	Comprehensive Molecular Testing	13138	15456	15456	Oncology Investigations
572	CA042	Comprehensive Next Generation sequencing assay for Hematolymphoid malignancies	18360	21600	21600	Oncology Investigations
573	CA043	Constitutional karyotyping	3771	4436	4436	Oncology Investigations
574	CA044	Custom Sequencing Assay	7507	8832	8832	Oncology Investigations
575	CA045	DICER1 Mutation	2638	3104	3104	Oncology Investigations

CGHS rates for Tier III (Z City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
576	CA046	Donor Specific Antibodies (DSA)	5440	6400	6400	Oncology Investigations
577	CA047	EGFR Mutation DETECTION	6460	7600	7600	Oncology Investigations
578	CA048	EGFR Resistance Mutation (T790m Mutation Analysis)	5440	6400	6400	Oncology Investigations
579	CA049	ER PR Her2 Neu	2142	2520	2520	Oncology Investigations
580	CA050	ER/PR/Her2neu, Ki67	3400	4000	4000	Oncology Investigations
581	CA051	Extended Immune subset for Post Allogenic Stem Cell Transplant Monitoring	3400	4000	4000	Oncology Investigations
582	CA052	Factor V Leiden Mutation Detection	4488	5280	5280	Oncology Investigations
583	CA053	FISH for 1p33/TAL1 deletion	3386	3984	3984	Oncology Investigations
584	CA054	FISH FOR HER2 Neu	6800	8000	8000	Oncology Investigations
585	CA055	FISH for t(10;11)(p12;q14)/MLLT10(AF10)/PICALM	3386	3984	3984	Oncology Investigations
586	CA056	FISH for t(11;19)(q23;p13.1)/KMT2A/ELL	3386	3984	3984	Oncology Investigations
587	CA057	FISH for t(5;11)(q35;p15.5) NUP98/NSD1	3386	3984	3984	Oncology Investigations
588	CA058	FISH for t(6;14)(p21;q32) IGH/CCND3	3386	3984	3984	Oncology Investigations
589	CA059	FISH on Bone marrow Smear(1 marker)	2370	2788	2788	Oncology Investigations
590	CA060	FISH on bone marrow smear(2 markers)	3723	4380	4380	Oncology Investigations
591	CA061	FISH on FFPE - Block /Slide (2 markers)	3237	3808	3808	Oncology Investigations
592	CA062	FISH PANEL FOR MYELOMA	9520	11200	11200	Oncology Investigations
593	CA063	FISH Test for C19MC amplification	8670	10200	10200	Oncology Investigations
594	CA064	FISH test for CDKN2A	5066	5960	5960	Oncology Investigations
595	CA065	FISH test for CEN 10 loss - on Tissue	2822	3320	3320	Oncology Investigations
596	CA066	FISH test for ETV6 break-apart analysis - On Tissue	4740	5576	5576	Oncology Investigations
597	CA067	FISH test for MAML2 break-apart analysis - On Tissue	4869	5728	5728	Oncology Investigations
598	CA068	Fluorescent PCR + fragment length analysis per Amplicon	238	280	280	Oncology Investigations
599	CA069	GeneCORE Somatic 161 Gene Panel (NGS)	20400	24000	24000	Oncology Investigations
600	CA070	Hairy Cell Leukemia Mutation (BRAF V600E) Detection	2373	2792	2792	Oncology Investigations
601	CA071	Hematolymphoid Malignancy At Diagnosis- Cancer Cytogenetics Testing	11638	13692	13692	Oncology Investigations

CGHS rates for Tier III (Z City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
602	CA072	Hematolymphoid Malignancy Follow-up- Cancer Cytogenetics Testing	10200	12000	12000	Oncology Investigations
603	CA073	Hereditary Cancer Panel	8160	9600	9600	Oncology Investigations
604	CA074	High Sensitivity JAK2 Mutation Detection (V617F)	3135	3688	3688	Oncology Investigations
605	CA075	Histone Mutation Detection Assay	6307	7420	7420	Oncology Investigations
606	CA076	HLA C, DQB Molecular Typing PCR - SSP	5012	5896	5896	Oncology Investigations
607	CA077	HLA Disease Association Next Generation Sequencing HLA-A/B/DRB1/G	3196	3760	3760	Oncology Investigations
608	CA078	HLA Disease Association Sequence based Typing HLA A/B/DRB1	3264	3840	3840	Oncology Investigations
609	CA079	HLA Drug Hypersensitivity Next Generation Sequencing HLA-A/B/DRB1 HLA-A/B/DRB1/G	3196	3760	3760	Oncology Investigations
610	CA080	HLA Drug Hypersensitivity Typing HLA-A/B/DRB1	3264	3840	3840	Oncology Investigations
611	CA081	HLA Loss Chimerism	8160	9600	9600	Oncology Investigations
612	CA082	HLA-A, B, C, DRB1, DQB1, DPB1 (Sequence Based Typing - SBT)	10200	12000	12000	Oncology Investigations
613	CA083	HLA-A, B, DRB1 (Sequence Based Typing - SBT)	6800	8000	8000	Oncology Investigations
614	CA084	HLA-A, B, DRB1(Sequence Specific Oligonucleotide - SSO)	5304	6240	6240	Oncology Investigations
615	CA085	HLA-C, DQB1(Sequence Specific Oligonucleotide - SSO)	3536	4160	4160	Oncology Investigations
616	CA086	HRR Gene Test	21080	24800	24800	Oncology Investigations
617	CA087	IGH Characterization IGH/CCND1:t(11;14), IGH/BCL2:t(14;18),BCL6(3q27), MYC(8q24) (4markers	3604	4240	4240	Oncology Investigations
618	CA088	IgH/BCL2 :t(14;18)	3189	3752	3752	Oncology Investigations
619	CA089	IGHV Gene Mutation	5100	6000	6000	Oncology Investigations
620	CA090	Interphase FISH test for Chr. 1 copy number variations	7276	8560	8560	Oncology Investigations
621	CA091	IRFA/DUSP22 gene rearrangement by FISH	10594	12464	12464	Oncology Investigations
622	CA092	JAK2 Exon 12 Mutation Detection	3135	3688	3688	Oncology Investigations
623	CA093	JAK2V617 MUTATION, WITH REFLEX TO JAK2 EX-12,CALR EX-9 MUTATION AND MPL W515, S505 MUTATION	7820	9200	9200	Oncology Investigations
624	CA094	KI67	884	1040	1040	Oncology Investigations
625	CA095	KIR Typing	3944	4640	4640	Oncology Investigations

CGHS rates for Tier III (Z City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
626	CA096	KMT2A Characterization for AML	5369	6316	6316	Oncology Investigations
627	CA097	KMT2A Characterization for B-ALL	4145	4876	4876	Oncology Investigations
628	CA098	KRAS + NRAS + BRAF + Mutation Profile	9384	11040	11040	Oncology Investigations
629	CA099	Lineage specific Chimerism - B Cell, T Cell and NK Cells	4896	5760	5760	Oncology Investigations
630	CA100	Liquid Biopsy (Onco)	20400	24000	24000	Oncology Investigations
631	CA101	Lung Basic Panel By NGS	20400	24000	24000	Oncology Investigations
632	CA102	Lymphoma Panel	4740	5576	5576	Oncology Investigations
633	CA103	Lymphoplasmacytic Leukemia / Waldenstroms Macroglobulinemia Mutation (MYD88 L265P) Detection	2373	2792	2792	Oncology Investigations
634	CA104	MDS Panel	4740	5576	5576	Oncology Investigations
635	CA105	MECOM (EVI1) rearrangement: inv(3)(q21.3q26.2)/t(3;3)	3189	3752	3752	Oncology Investigations
636	CA106	MGMT PCR	5535	6512	6512	Oncology Investigations
637	CA107	Miscellaneous Profile I(1 marker)	2370	2788	2788	Oncology Investigations
638	CA108	Miscellaneous profile II(2 markers)	3723	4380	4380	Oncology Investigations
639	CA109	MLPA per gene	2720	3200	3200	Oncology Investigations
640	CA110	Monosomy 5/deletion 5q	2370	2788	2788	Oncology Investigations
641	CA111	Monosomy 7/deletion 7q	2370	2788	2788	Oncology Investigations
642	CA112	MPN (Myelo Proliferative Neoplasm)PANEL	8160	9600	9600	Oncology Investigations
643	CA113	MSI (Micro Satellite Instability) and MMR (Mis Match Repair)	4420	5200	5200	Oncology Investigations
644	CA114	Multigene NGS Germline Panel	12240	14400	14400	Oncology Investigations
645	CA115	Multiple Myeloma (MM) Panel	10112	11896	11896	Oncology Investigations
646	CA116	Multiple Myeloma High Risk Markers (4 Markers)	3604	4240	4240	Oncology Investigations
647	CA117	Multiple Myeloma Screening Panel	5440	6400	6400	Oncology Investigations
648	CA118	MYD88 L265 Mutation Detection Test	4597	5408	5408	Oncology Investigations
649	CA119	Myelodysplastic Syndromes karyotyping	3771	4436	4436	Oncology Investigations
650	CA120	Next generation RNA sequencing assay for Chimeric Trancript in Hematolymphod malignancies	11560	13600	13600	Oncology Investigations

CGHS rates for Tier III (Z City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
651	CA121	Next Generation sequencing assay for Minimal residual disease(MRD) for NPM mutated AML	18360	21600	21600	Oncology Investigations
652	CA122	NGS HLA Typing	6800	8000	8000	Oncology Investigations
653	CA123	NGS Platform-extended Panel >50 gene	24480	28800	28800	Oncology Investigations
654	CA124	NGS Platform-limited Panel(10 Genes)	12240	14400	14400	Oncology Investigations
655	CA125	NRAS (Neuroblastoma RAS) Gene	2380	2800	2800	Oncology Investigations
656	CA126	Panel Reactive Antibodies (PRA) class I	2040	2400	2400	Oncology Investigations
657	CA127	Panel Reactive Antibodies (PRA) class II	2040	2400	2400	Oncology Investigations
658	CA128	PCR + Sanger Sequencing per Amplicon	578	680	680	Oncology Investigations
659	CA129	PDGFRA (4q12), PDGFRB (5q33), FGFR1 (8p11.2) rearrangement	4145	4876	4876	Oncology Investigations
660	CA130	PDGFRA rearrangement: 4q12	3189	3752	3752	Oncology Investigations
661	CA131	PDGFRB rearrangement: 5q33	3189	3752	3752	Oncology Investigations
662	CA132	PDL 1	3400	4000	4000	Oncology Investigations
663	CA133	PDL-1-28-8 (FDA Approved)	5100	6000	6000	Oncology Investigations
664	CA134	Ph: t(9;22) karyotyping	2689	3164	3164	Oncology Investigations
665	CA135	Ph-like ALL Panel (4 Markers)	3604	4240	4240	Oncology Investigations
666	CA136	PIK3CA GENE MUTATION	3672	4320	4320	Oncology Investigations
667	CA137	PIK3CA Mutation Testing	3876	4560	4560	Oncology Investigations
668	CA138	Ploidy analysis	2689	3164	3164	Oncology Investigations
669	CA139	PML-RARA t(15;17), variants	3560	4188	4188	Oncology Investigations
670	CA140	PRA Screen	2040	2400	2400	Oncology Investigations
671	CA141	PTPRT: Deletion 20q	3189	3752	3752	Oncology Investigations
672	CA142	RARA Variant - ZBTB16 / RARA : t(11;17) (1 marker)	2060	2424	2424	Oncology Investigations
673	CA143	RHOA Mutation Detection Assay	4740	5576	5576	Oncology Investigations
674	CA144	ROS 1	6610	7776	7776	Oncology Investigations
675	CA145	RQ PCR based assay for MRD monitoring of Acute Leukaemia	6460	7600	7600	Oncology Investigations
676	CA146	RQ-PCR BCR-ABL (P210)	7453	8768	8768	Oncology Investigations
677	CA147	RQ-PCR PML-RARA	7453	8768	8768	Oncology Investigations

CGHS rates for Tier III (Z City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
678	CA148	RT-PCR Multiplex, Acute Leukaemia Panel	4964	5840	5840	Oncology Investigations
679	CA149	RT-PCR Multiplex, BCR-ABL (P190, P210)	4318	5080	5080	Oncology Investigations
680	CA150	RT-PCR Nested, IGH Chain Gene Rearrangement /TCR Gene Rearrangement	3135	3688	3688	Oncology Investigations
681	CA151	Single Antigen Class I	8840	10400	10400	Oncology Investigations
682	CA152	Single Antigen Class II	8840	10400	10400	Oncology Investigations
683	CA153	Slide / Images for Second Opinion- Cancer Cytogenetics	626	736	736	Oncology Investigations
684	CA154	STR Panel studies	3026	3560	3560	Oncology Investigations
685	CA155	Surface Marker Complete Panel	8272	9732	9732	Oncology Investigations
686	CA156	Surface Marker Individual	1292	1520	1520	Oncology Investigations
687	CA157	t(1;22) and Trisomy 21 in Acute Megakaryoblastic Leukemia (AML -M7) (2 Markers)	3237	3808	3808	Oncology Investigations
688	CA158	T-cell Acute Lymphoblastic Leukemia (T-ALL) Panel	10316	12136	12136	Oncology Investigations
689	CA159	TCR-A rearrangement: 14q11	3189	3752	3752	Oncology Investigations
690	CA160	TERT Promoter Mutation Assay	3947	4644	4644	Oncology Investigations
691	CA161	TFE-3 FISH	8214	9664	9664	Oncology Investigations
692	CA162	TPMT (Thiopurine Methyl Transferase) Genotyping	3468	4080	4080	Oncology Investigations
693	CA163	Trisomy 12	1649	1940	1940	Oncology Investigations
694	CA164	Trisomy 21	1649	1940	1940	Oncology Investigations
695	CA165	Trisomy 4, 10 & 17	2370	2788	2788	Oncology Investigations
696	CA166	Trisomy 8	1649	1940	1940	Oncology Investigations
697	CA167	V Beta Repertoire Analysis by Flow Cytometry for T-Cell Clonality	8272	9732	9732	Oncology Investigations
698	CA168	XX/XY (Chimerism Studies) in Sex mismatch Bone Marrow Transplantation (BMT)	1649	1940	1940	Oncology Investigations
699	CT001	Single drug Chemotherapy	1156	1360	1360	Chemotherapy
700	CT002	Multiple drugs Chemotherapy/Targeted therapy/Immunotherapy	1564	1840	1840	Chemotherapy
701	CT003	Neoadjuvant Chemotherapy	1836	2160	2160	Chemotherapy
702	CT004	Adjuvant Chemotherapy	1496	1760	1760	Chemotherapy

CGHS rates for Tier III (Z City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
703	CT005	Concurrent-chemoradiation	1292	1520	1520	Chemotherapy
704	CT006	Intravesical Instillation of BCG excluding the cost of BCG	2040	2400	2400	Chemotherapy
705	RT001	Level 1- Brachytherapy (Eye Plaque or SIVA or CVS per insertion or application)	4760	5600	6440	Radiotherapy
706	RT002	Level 2- Brachytherapy (Simple ICA with Xray based 2D planning, ILRT, Endobilliary BCT)	6800	8000	9200	Radiotherapy
707	RT003	Level 3- Brachytherapy (Surface Mould, Radical Interstitial BCT, Intraoperative Template or interstitial brachytherapy catheter insertion)	17000	20000	23000	Radiotherapy
708	RT004	Level 4- Brachytherapy (ICA with CT based Planning)	20400	24000	27600	Radiotherapy
709	RT005	Level 5- Brachytherapy (Complex ICA with interstitial with CT or MR based planning)	27200	32000	36800	Radiotherapy
710	RT006	Level 1- Radiation Therapy (1-10 fractions on Cobalt)	10200	12000	13800	Radiotherapy
711	RT007	Level 2- Radiation Therapy (More than 10 fractions on Cobalt OR Upto 10 fractions on LA clinical (without CT or TPS planning) without IGRT OR Hemibody palliative RT (1-2 fractions weekly))	19040	22400	25760	Radiotherapy
712	RT008	Level 3- Radiation Therapy (LA 3D with conventional fractionation of 2-5 Gy OR Weekly hypofractionation of >5 Gy with 3D CRT plan in 1-2 fractions. No IGRT allowed.)	34000	40000	46000	Radiotherapy
713	RT009	Level 4- Radiation therapy (LA 3D with IGRT conventional fractionation of 2- 5 Gy OR Weekly hypofractionation >5 Gy with 3D CRT plan in 1-2 fractions. with IGRT)	42840	50400	57960	Radiotherapy
714	RT010	Level 5- Radiation Therapy (LA IMRT/ Rapid Arc/VMAT with < 5Gy per fraction and <10 IGRT (CBCT or MVCT or EPID) OR Cobalt Radical with LA boost including electron boost OR TSET OR TBI)	102000	120000	138000	Radiotherapy

CGHS rates for Tier III (Z City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
715	RT011	Level 6- Radiation Therapy (LA 4D/DE or DIBH with 3D CRT/ IMRT/ Rapid Arc/VMAT with >10 IGRT (CBCT or MVCT or EPID) OR LA IMRT/ Rapid Arc/VMAT with <5Gy per fraction and >10 IGRT (CBCT or MVCT or EPID) OR Adaptive RT OR CSI OR Multisite treatment outside one FOV or one plan OR SBRT OR SRS OR SRT (per fraction dose >5Gy))	122400	144000	165600	Radiotherapy
716	IT001	Radiosynovectomy with Yttrium	17000	20000	23000	Radio-Isotope Therapy
717	IT002	131-Iodine Therapy 51-100mCi	9738	11456	13174	Radio-Isotope Therapy
718	IT003	131-Iodine Therapy >100mCi	13447	15820	18193	Radio-Isotope Therapy
719	IT004	Samarium-153 therapy for metastatic bone pain palliation	13634	16040	18446	Radio-Isotope Therapy
720	IT005	131-Iodine Therapy <15mCi	5039	5928	6817	Radio-Isotope Therapy
721	IT006	131-Iodine Therapy 15-50mCi	7589	8928	10267	Radio-Isotope Therapy
722	IT007	Phosphorus-32 therapy for metastatic bone pain palliation	9632	11332	13032	Radio-Isotope Therapy
723	PT001	Cervical Traction (per session)	204	240	240	Physiotherapy
724	PT002	Lumbar Traction (per session)	204	240	240	Physiotherapy
725	PT003	Exercises /Post Natal Exercises/Prenatal Exercises/Therapeutic Exercises/Orthopaedic Rehabilitation (Joint Replacement/Post Surgery)/Hand Rehab (per session)	204	240	240	Physiotherapy
726	PT004	Chest Physiotherapy/ Breathing Exercise &Postural Drainage per Session/Post Covid Rehabilitation /Pulmonary Rehabilitation/Cardiac Rehabilitation (per session)	204	240	240	Physiotherapy
727	PT005	Ultra Sonic Therapy /Short Wave Diathermy / Microwave/ Long Wave Diathermy /Infrared/IFT) (per session)	204	240	240	Physiotherapy
728	PT006	Electrical Muscle Stimulation/Cryotherapy/TENS (per session)	272	320	320	Physiotherapy
729	PT007	Hot Pack / Cold Pack/Wax Bath/Moist Heat (per session)	204	240	240	Physiotherapy
730	PT008	Shock Wave Therapy/Matrix Rhythm Therapy/Laser/ PEMF -Pulse Electro Magnetic Therapy (per session)	272	320	320	Physiotherapy

CGHS rates for Tier III (Z City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
731	PT009	Gait Assessment (per session)	408	480	480	Physiotherapy
732	PT010	Gait Training (per session)	204	240	240	Physiotherapy
733	PT011	Tilt Training/Neuro-Rehab Basic (per session)	204	240	240	Physiotherapy
734	PT012	Neuro Rehabilitation Advanced (per session)	544	640	640	Physiotherapy
735	PT013	Paediatric Rehabilitation (per session)	204	240	240	Physiotherapy
736	BT001	Speech Therapy per session of at least 40 minutes	272	320	320	Behavioural Therapy
737	BT002	Occupational Therapy per session of at least 40 minutes	272	320	320	Behavioural therapy
738	BT003	Applied Behaviour Analysis based behaviour therapy (ABA based Behaviour therapy) per session of at least 40 minutes	272	320	320	Behavioural therapy
739	BT004	Special education per session of at least 40 minutes	272	320	320	Behavioural therapy
740	BT005	Biofeedback per session	2040	2400	2400	Behavioural therapy
741	DI001	Intraoral Periapical (IOPA) Radiograph X-ray/RVG(Single Film)	136	160	160	Dental Investigation
742	DI002	Intraoral Occlusal/Bite Wing X-Ray	204	240	240	Dental Investigation
743	DI003	Digital OPG with X ray film/ CD	340	400	400	Dental Investigation
744	DI004	Biopsy of Oral tissue- Soft	816	960	960	Dental Biopsy
745	DI005	Biopsy of Oral tissue - Hard (bone, tooth)	1360	1600	1600	Dental Biopsy
746	DP001	Abscess - Drainage-Dental	1020	1200	1200	Dental Procedure
747	DP002	Scaling	680	800	800	Dental Procedure
748	DP003	Curettage and Root Planning - Per Tooth	238	280	280	Dental Procedure
749	DP004	Curettage and Root Planning - Per Arch	1360	1600	1600	Dental Procedure
750	DP005	Gingivoplasty - Per Quadrant	680	800	800	Dental Procedure
751	DP006	Gingivectomy - Per Quadrant	816	960	960	Dental Procedure
752	DP007	Flap Surgery- Per Tooth	306	360	360	Dental Procedure
753	DP008	Flap Surgery- Per Quadrant	1360	1600	1600	Dental Procedure
754	DP009	Flap Surgery and Bone Graft per quadrant	2040	2400	2400	Dental Procedure
755	DP010	Extraction - Normal Tooth	272	320	320	Dental Procedure
756	DP011	Complicated Extraction per tooth under LA	544	640	640	Dental Procedure
757	DP012	Extraction Impacted - Soft tissue/ 3rd Molar/wisdom tooth extraction	1360	1600	1600	Dental Procedure

CGHS rates for Tier III (Z City)

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			Non-NABH	NABH	Super Speciality	
758	DP013	Multiple Extraction and Treatment Procedures for Special Children, Patients with Systemic Diseases, Patient with Special Needs Which Requires Admission and Treatment Under GA	4080	4800	4800	Dental Procedure
759	DP014	Extraction - Orthodontic Extraction	510	600	600	Dental Procedure
760	DP015	Operculectomy- Pericoronal flap excision	1360	1600	1600	Dental Procedure
761	DP016	Extraction Impacted – Bony	3400	4000	4000	Dental Procedure
762	DP017	Alveoloplasty - Per Tooth	204	240	240	Dental Procedure
763	DP018	Alveoloplasty - Per Quadrant	816	960	960	Dental Procedure
764	DP019	Frenectomy	1700	2000	2000	Dental Procedure
765	DP020	Excision of hyperplastic tissue - per arch	816	960	960	Dental Procedure
766	DP021	Surgical Augmentation/Alveolectomy per Arch	2380	2800	2800	Dental Procedure
767	DP022	Bone replacement graft for ridge preservation - per site	1360	1600	1600	Dental Procedure
768	DP023	Minor oral surgery, cyst, granuloma, residual infection, mucocele, epulis under LA	1360	1600	1600	Dental Procedure
769	DP024	Application of Desensitizing Medicament	340	400	400	Dental Procedure
770	DP025	Fluoride Application for Children	680	800	800	Dental Procedure
771	DP026	Temporary restoration	102	120	120	Dental Procedure
772	DP027	Glass ionomer Cement Restoration	408	480	480	Dental Procedure
773	DP028	Composite - Occlusal Pit/Class I	340	400	400	Dental Procedure
774	DP029	Composite -Class I with buccal extension/Class II Class III/Class IV/Class VI/Diastema Closure/MOD	680	800	800	Dental Procedure
775	DP030	RCT-Single Rooted tooth	1360	1600	1600	Dental Procedure
776	DP031	RCT Multiple root and/ canal tooth	2040	2400	2400	Dental Procedure
777	DP032	Re-RCT - Anterior	1700	2000	2000	Dental Procedure
778	DP033	Re-RCT - Posterior	2040	2400	2400	Dental Procedure
779	DP034	Medication -intracanal medicament (only lesion cases)	340	400	400	Dental Procedure
780	DP035	Apicectomy-Single tooth	1360	1600	1600	Dental Procedure
781	DP036	Apicectomy-Multiple tooth	2040	2400	2400	Dental Procedure

CGHS rates for Tier III (Z City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
782	DP037	Apexification with any bio-compatible material	1360	1600	1600	Dental Procedure
783	DP038	Root end resection and Retro grade filling	2040	2400	2400	Dental Procedure
784	DP039	Surgical - Apicectomy/ Periapical surgery without bone grafting	476	560	560	Dental Procedure
785	DP040	Tissue Conditioning, Maxillary/Mandibular	204	240	240	Dental Procedure
786	DP041	Core build-up/ Post and Core - Custom made /Inlay/onlay	1020	1200	1200	Dental Procedure
787	DP042	Crown lengthening - Per Tooth	340	400	400	Dental Procedure
788	DP043	Crown - PMMA Crown	680	800	800	Dental Procedure
789	DP044	Crown - All Metal-Nickel Free	1360	1600	1600	Dental Procedure
790	DP045	Crown - Metal with Ceramic Facing	2040	2400	2400	Dental Procedure
791	DP046	Crown - Recementation	408	480	480	Dental Procedure
792	DP047	Crown - Removal	340	400	400	Dental Procedure
793	DP048	Odontoplasty/Enameloplasty	340	400	400	Dental Procedure
794	DP049	Pulpectomy (Anterior Tooth)	1360	1600	1600	Dental Procedure
795	DP050	Pulpectomy (Posterior Tooth)	2040	2400	2400	Dental Procedure
796	DP051	Pulpotomy	680	800	800	Dental Procedure
797	DP052	Veneer - Ceramic paediatric	2040	2400	2400	Dental Procedure
798	DP053	Interceptive Orthodontic Treatment of the Primary Dentition/Transition Dentition	4760	5600	5600	Dental Procedure
799	DP054	Limited Orthodontic Treatment of the Primary Dentition	3400	4000	4000	Dental Procedure
800	DP055	Occlusion Analysis/Adjustment/Occlusal Equilibration	340	400	400	Dental Procedure
801	DP056	Tooth Splinting -General	1020	1200	1200	Dental Procedure
802	DP057	Splinting - Periodontally weak teeth	1224	1440	1440	Dental Procedure
803	DP058	Night Guard	1360	1600	1600	Dental Procedure
804	DP059	Bridge/ Fixed Partial denture (per missing/ extracted tooth) metal crown	1360	1600	1600	Dental Procedure
805	DP060	Bridge/ Fixed Partial denture (per missing/ extracted tooth) metal crown with Ceramic facing	2040	2400	2400	Dental Procedure
806	DP061	Removable Partial Denture - Flexible Per Arch	5100	6000	6000	Dental Procedure
807	DP062	Removable Partial Denture - Cast Metal Up to 3 Teeth	2720	3200	3200	Dental Procedure

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Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
808	DP063	Removable Partial Denture - Cast Metal (additional Per tooth)	204	240	240	Dental Procedure
809	DP064	Removable Partial Denture - Acrylic Up to 3 teeth	1360	1600	1600	Dental Procedure
810	DP065	Removable Partial Denture - Tooth Addition (per tooth)	204	240	240	Dental Procedure
811	DP066	Add Clasp to existing Partial Denture	340	400	400	Dental Procedure
812	DP067	Add Tooth to existing Partial Denture	272	320	320	Dental Procedure
813	DP068	Tooth Supported Overdenture Per Arch	5100	6000	6000	Dental Procedure
814	DP069	Complete Denture - Per Arch	6800	8000	8000	Dental Procedure
815	DP070	Removable orthodontic appliance / Post Orthodontic R O A -per arch	1700	2000	2000	Dental Procedure
816	DP071	Fixed orthodontic per arch	10200	12000	12000	Dental Procedure
817	DP072	Space Maintainers - Fixed	2720	3200	3200	Dental Procedure
818	DP073	Minor Treatment to Control Habits-Removable Appliance Therapy	1700	2000	2000	Dental Procedure
819	DP074	Minor Treatment to Control Habits-Fixed Appliance Therapy	2720	3200	3200	Dental Procedure
820	DP075	Functional orthodontic appliance	4080	4800	4800	Dental Procedure
821	DP076	Feeding appliance for Cleft Palate	3400	4000	4000	Dental Procedure
822	DP077	Expansion plate	4420	5200	5200	Dental Procedure
823	DP078	Maxillofacial Prosthesis -Sal/auricular/orbital/Nasal/Palatal/facial lost/ Speech Aid	4760	5600	5600	Dental Procedure
824	DP079	Obturator Prosthesis - Surgical/Definitive/Modification	3400	4000	4000	Dental Procedure
825	DP080	Removal of - Lateral Exostosis/Torus Mandibularis/Torus Palatines/Surgical reduction of Osseous Tuberosity	2040	2400	2400	Dental Procedure
826	DP081	Sialolithotomy/Sialodocotomy/ Closure of Salivary Fistula	1360	1600	1600	Dental Procedure
827	DP082	Excision of Salivary gland	10200	12000	12000	Dental Procedure
828	DP083	Release of fibrous bands & grafting in (OSMF) treatment under GA	13600	16000	16000	Dental Procedure
829	DP084	Facial Space Abscess	3400	4000	4000	Dental Procedure
830	DP085	Partial Ostectomy / sequestrectomy for removal of non-vital bone	1360	1600	1600	Dental Procedure
831	DP086	Alveolus – Closed Reduction stabilization of Teeth	2720	3200	3200	Dental Procedure
832	DP087	Alveolus – Open Reduction stabilization of Teeth	4080	4800	4800	Dental Procedure
833	DP088	Arch bar fixation	3400	4000	4000	Dental Procedure

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Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
834	DP089	Oroantral Fistula closure	3400	4000	4000	Dental Procedure
835	DP090	Osseous, Osteoperiosteal, or Cartilage graft of the Mandible or Maxilla - autogenous or non-autogenous bone graft	2040	2400	2400	Dental Procedure
836	DP091	Osteoplasty - for Orthognathic deformities/ Mandibular Rami/ Body of Mandible	20400	24000	24000	Dental Procedure
837	DP092	Maxilla - Closed Reduction	4080	4800	4800	Dental Procedure
838	DP093	Maxilla - Open Reduction	6800	8000	8000	Dental Procedure
839	DP094	Mandible - Closed Reduction	4080	4800	4800	Dental Procedure
840	DP095	Mandible – Open Reduction	6800	8000	8000	Dental Procedure
841	DP096	Cyst of Maxilla/mandible by enucleation/excision/marsupialization upto 4 cms under LA	3400	4000	4000	Dental Procedure
842	DP097	Cyst of Maxilla/mandible by enucleation/excision/marsupialization more than 4 cms under LA	4080	4800	4800	Dental Procedure
843	DP098	Cyst of Maxilla/mandible by enucleation/excision/marsupialization more than 4 cms under GA and admission	17000	20000	20000	Dental Procedure
844	DP099	Temporomandibular(TM) joint ankylosis- under GA/Open /Closed Reduction	13600	16000	16000	Dental Procedure
845	DP100	Segmental / Hemi Mandibulectomy with graft	17000	20000	20000	Dental Procedure
846	DP101	Segmental /Hemi Mandibulectomy without graft	13600	16000	16000	Dental Procedure
847	DP102	Sub-Total mandibulectomy with graft	23800	28000	28000	Dental Procedure
848	DP103	Sub-Total mandibulectomy without graft	20400	24000	24000	Dental Procedure
849	DP104	Maxillectomy/Mandibulectomy- Total with graft	23800	28000	28000	Dental Procedure
850	DP105	Maxillectomy/Mandibulectomy- Total without graft	20400	24000	24000	Dental Procedure
851	DP106	Maxillectomy- partial with graft	17000	20000	20000	Dental Procedure
852	DP107	Maxillectomy- partial without graft	13600	16000	16000	Dental Procedure
853	DP108	Malar and/or Zygomatic arch - Closed Reduction	4080	4800	4800	Dental Procedure
854	DP109	Malar and/or Zygomatic arch - Open Reduction	6800	8000	8000	Dental Procedure
855	DP110	Distraction osteogenesis of mandible or maxilla under GA	20400	24000	24000	Dental Procedure

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Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
856	DP111	Facial bones - Complicated Reduction with fixation	30600	36000	36000	Dental Procedure
857	OI001	Refraction with auto refraction - Both Eyes	136	160	160	Ophthalmology Investigation
858	OI002	Indirect Ophthalmoscopy (Fundoscopy) - Both Eyes	204	240	240	Ophthalmology Investigation
859	OI003	Orthoptic check-up- with synoptophore- Both Eyes	136	160	160	Ophthalmology Investigation
860	OI004	Lees' charting or Hess' charting- Both Eyes	204	240	240	Ophthalmology Investigation
861	OI005	Perimetry (Visual Field Testing) -Goldman- Both Eyes	340	400	400	Ophthalmology Investigation
862	OI006	Perimetry /Humphrey Visual Field (HVF) test- Automated- Both Eyes	544	640	640	Ophthalmology Investigation
863	OI007	Fluorescein angiography for fundus or iris- Both Eyes	1360	1600	1600	Ophthalmology Investigation
864	OI008	Indocyanine green angiography - Both Eyes	1360	1600	1600	Ophthalmology Investigation
865	OI009	Ultrasound A- Scan/optical biometry[lenstar, IOL master] - Both Eyes	680	800	800	Ophthalmology Investigation
866	OI010	Ultrasound B- Scan - Both Eyes	340	400	400	Ophthalmology Investigation
867	OI011	Fundus Photo Test /disc photo for glaucoma- Both Eyes	340	400	400	Ophthalmology Investigation
868	OI012	Corneal endothelial cell count with specular microscopy- Both Eyes	408	480	480	Ophthalmology Investigation
869	OI013	Corneal topography /pentacam- Both Eyes	1360	1600	1600	Ophthalmology Investigation

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Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
870	OI014	Corneal pachymetry (corneal thickness)/ CCT - Both Eyes	360	424	424	Ophthalmology Investigation
871	OI015	OCT (Optical Coherence Tomography) /Ocular OCT Angiography - Both Eyes	1428	1680	1680	Ophthalmology Investigation
872	OI016	UBM- Ultrasound bio microscopy- Both Eyes	680	800	800	Ophthalmology Investigation
873	OI017	Non Contact tonometry (NCT) - Both Eyes	102	120	120	Ophthalmology Investigation
874	OI018	IOP measurement with Schiotz - Both Eyes	68	80	80	Ophthalmology Investigation
875	OI019	IOP measurement with applanation tonometry - Both Eyes	136	160	160	Ophthalmology Investigation
876	OI020	Diurnal variation of IOP - Both Eyes	1020	1200	1200	Ophthalmology Investigation
877	OI021	90 D lens examination/Three mirror examination for retina - Both Eyes	102	120	120	Ophthalmology Investigation
878	OI022	Gonioscopy- Both Eyes	204	240	240	Ophthalmology Investigation
879	OI023	EOG- electrooculogram - Both Eyes	1408	1656	1656	Ophthalmology Investigation
880	OI024	ERG- Electroretinogram- Both Eyes	1224	1440	1440	Ophthalmology Investigation
881	OI025	VEP- visually evoked potential - Both Eyes	1224	1440	1440	Ophthalmology Investigation
882	OI026	X Ray orbit -Bilateral	238	280	280	Ophthalmology Investigation
883	OI027	Dacryocystography - Bilateral	1360	1600	1600	Ophthalmology Investigation

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Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
884	OI028	Orbital Angiographical Studies - Bilateral	3400	4000	4000	Ophthalmology Investigation
885	OI029	Neostigmine test - Both Eyes	3400	4000	4000	Ophthalmology Investigation
886	OI030	Lipi View One Eye	612	720	720	Ophthalmology Investigation
887	OI031	Lipi View Both Eyes	1020	1200	1200	Ophthalmology Investigation
888	OI032	Schirmer Test	204	240	240	Ophthalmology Investigation
889	OI033	Vitreous biopsy per eye	3400	4000	4000	Ophthalmology Biopsy
890	OP001	Subconjunctival/sub-tenon’s injections in one eye	340	400	400	Ophthalmology Procedure
891	OP002	Subconjunctival/sub-tenon’s injections in both eyes	544	640	640	Ophthalmology Procedure
892	OP003	Pterygium surgery with auto conjunctival graft per eye	9112	10720	10720	Ophthalmology Procedure
893	OP004	Conjunctival Peritomy per eye	1020	1200	1200	Ophthalmology Procedure
894	OP005	Conjunctival wound repair or exploration following blunt trauma per eye	5780	6800	6800	Ophthalmology Procedure
895	OP006	Removal of corneal foreign body	272	320	320	Ophthalmology Procedure
896	OP007	Cauterization of ulcer/subconjunctival injection in one eye	340	400	400	Ophthalmology Procedure
897	OP008	Cauterization of ulcer/subconjunctival injection in both eyes	544	640	640	Ophthalmology Procedure
898	OP009	Corneal grafting—Penetrating keratoplasty per eye	13600	16000	16000	Ophthalmology Procedure
899	OP010	Bandage contact lenses for corneal perforation/PED per eye	1360	1600	1600	Ophthalmology Procedure
900	OP011	Scleral grafting or conjunctival flap for corneal perforation per eye	5780	6800	6800	Ophthalmology Procedure
901	OP012	Keratoconus correction with therapeutic contact lenses - Both Eyes	5780	6800	6800	Ophthalmology Procedure
902	OP013	Ultraviolet (UV) radiation for cross-linking for keratoconus /C3R/KXL - Both Eyes	13600	16000	16000	Ophthalmology Procedure
903	OP014	EDTA for band shaped keratopathy - Both Eyes	2040	2400	2400	Ophthalmology Procedure
904	OP015	Arcuate keratotomy for astigmatism /Limbal Relaxing Incision - Both Eyes	4624	5440	5440	Ophthalmology Procedure

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Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
905	OP016	Re-suturing (Primary suturing) of corneal wound per eye	3400	4000	4000	Ophthalmology Procedure
906	OP017	Penetrating keratoplasty with glaucoma surgery per eye	23800	28000	28000	Ophthalmology Procedure
907	OP018	Penetrating keratoplasty with vitrectomy per eye	23800	28000	28000	Ophthalmology Procedure
908	OP019	Penetrating keratoplasty with IOL implantation per eye	23800	28000	28000	Ophthalmology Procedure
909	OP020	DALK- Deep anterior lamellar keratoplasty per eye	29240	34400	34400	Ophthalmology Procedure
910	OP021	Keratoprosthesis stage I and II per eye	29240	34400	34400	Ophthalmology Procedure
911	OP022	DSAEK Descemet's stripping automated endothelial keratoplasty/DMEK-Descemet membrane endothelial keratoplasty per eye	29240	34400	34400	Ophthalmology Procedure
912	OP023	ALTK- Automated lamellar therapeutic keratoplasty per eye	29240	34400	34400	Ophthalmology Procedure
913	OP024	Bleb repair with conjunctival autograft per eye	10200	12000	12000	Ophthalmology Procedure
914	OP025	Bleb compression sutures per eye	4760	5600	5600	Ophthalmology Procedure
915	OP026	Bleb needling with MMC/5-FU per eye	5440	6400	6400	Ophthalmology Procedure
916	OP027	Probing and Syringing of lacrimal sac- in one eye	680	800	800	Ophthalmology Procedure
917	OP028	Probing and Syringing of lacrimal sac- in both eye	1020	1200	1200	Ophthalmology Procedure
918	OP029	Dacryocystorhinostomy-Plain	9112	10720	10720	Ophthalmology Procedure
919	OP030	Dacryocystorhinostomy-Plain with intubation and/or with lacrimal implants excluding the cost of implant per eye	13600	16000	16000	Ophthalmology Procedure
920	OP031	Dacryocystorhinostomy-conjunctival with implant excluding the cost of implant per eye	13600	16000	16000	Ophthalmology Procedure
921	OP032	Canaliculoplasty per eye	3597	4232	4232	Ophthalmology Procedure
922	OP033	Dacryocystectomy per eye	6256	7360	7360	Ophthalmology Procedure
923	OP034	Punctal plugs for dry eyes - Both Eyes	306	360	360	Ophthalmology Procedure
924	OP035	Chalazion incision and curettage in one eye	1360	1600	1600	Ophthalmology Procedure
925	OP036	Chalazion incision and curettage in both eyes	2040	2400	2400	Ophthalmology Procedure
926	OP037	Ptosis surgery with Fasanella-Servat procedure /Ptosis surgery with LPS resection one lid Ptosis surgery with Sling surgery one lid	13600	16000	16000	Ophthalmology Procedure
927	OP038	Ectropion surgery- one lid	5780	6800	6800	Ophthalmology Procedure
928	OP039	Ectropion surgery- both lids	9112	10720	10720	Ophthalmology Procedure

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Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
929	OP040	Epicanthus correction - Both Eyes	5780	6800	6800	Ophthalmology Procedure
930	OP041	Cantholysis and canthotomy- Both Eyes	2380	2800	2800	Ophthalmology Procedure
931	OP042	Entropion surgery- one lid	5780	6800	6800	Ophthalmology Procedure
932	OP043	Entropion surgery- both lids	9112	10720	10720	Ophthalmology Procedure
933	OP044	Tarsorrhaphy- Both Eyes	2040	2400	2400	Ophthalmology Procedure
934	OP045	Suturing of lid lacerations- Both Eyes	3400	4000	4000	Ophthalmology Procedure
935	OP046	Lid retraction repair per eye	5780	6800	6800	Ophthalmology Procedure
936	OP047	Concretions removal- Both Eyes	340	400	400	Ophthalmology Procedure
937	OP048	Bucket handle procedure for lid tumours per eye (for non-malignant conditions)	9112	10720	10720	Ophthalmology Procedure
938	OP049	Eyelid reconstruction with flap one eye	13600	16000	16000	Ophthalmology Procedure
939	OP050	Eyelid reconstruction with flap both eyes	17000	20000	20000	Ophthalmology Procedure
940	OP051	Cheek rotation flap for lid tumours per eye (for non-malignant conditions)	13600	16000	16000	Ophthalmology Procedure
941	OP052	Orbitotomy per eye	18700	22000	22000	Ophthalmology Procedure
942	OP053	Enucleation per eye (for non-malignant conditions)	9112	10720	10720	Ophthalmology Procedure
943	OP054	Enucleation with orbital implants and artificial (Cost of implants included) per eye	13600	16000	16000	Ophthalmology Procedure
944	OP055	Evisceration per eye	9112	10720	10720	Ophthalmology Procedure
945	OP056	Evisceration with orbital implants and artificial (Cost of implants included) prosthesis per eye	13600	16000	16000	Ophthalmology Procedure
946	OP057	Telecanthus correction- Both Eyes	9112	10720	10720	Ophthalmology Procedure
947	OP058	Orbital decompression /with incision or excision biopsy per eye	23800	28000	28000	Ophthalmology Procedure
948	OP059	Exenteration per eye	13600	16000	16000	Ophthalmology Procedure
949	OP060	Exenteration with skin grafting per eye	23800	28000	28000	Ophthalmology Procedure
950	OP061	Fracture orbital repair per eye	23800	28000	28000	Ophthalmology Procedure
951	OP062	Retinal laser procedures -green laser for PRP, retinal tears, ROP, endolaser per eye	2380	2800	2800	Ophthalmology Procedure
952	OP063	Retinal detachment surgery (RDS) per eye	18700	22000	22000	Ophthalmology Procedure

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Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
953	OP064	Retinal detachment surgery (RDS) with scleral buckling per eye	23800	28000	28000	Ophthalmology Procedure
954	OP065	Buckle removal per eye	5780	6800	6800	Ophthalmology Procedure
955	OP066	Silicone oil removal per eye	6256	7360	7360	Ophthalmology Procedure
956	OP067	Anterior retinal cryopexy per eye	3400	4000	4000	Ophthalmology Procedure
957	OP068	Squint correction for one eye	9112	10720	10720	Ophthalmology Procedure
958	OP069	Squint correction for both eyes	13600	16000	16000	Ophthalmology Procedure
959	OP070	Trabeculectomy per eye	13600	16000	16000	Ophthalmology Procedure
960	OP071	Trabeculotomy /kahook dual blade goniotomy excluding blade cost per eye	13600	16000	16000	Ophthalmology Procedure
961	OP072	Trabeculectomy with Trabeculotomy- Both Eyes	23800	28000	28000	Ophthalmology Procedure
962	OP073	Microincisional trabeculectomy(MIT) per eye	17000	20000	20000	Ophthalmology Procedure
963	OP074	Surgical posterior capsulotomy one eye	6800	8000	8000	Ophthalmology Procedure
964	OP075	Goniotomy per eye	3400	4000	4000	Ophthalmology Procedure
965	OP076	Glaucoma surgery with Glaucoma valves (Cost of Valve extra) per eye	13600	16000	16000	Ophthalmology Procedure
966	OP077	Cost of the Glaucoma valve/Glaucoma Ahmed valve per eye	15000	15000	15000	Ophthalmology Procedure
967	OP078	AC wash per eye	3400	4000	4000	Ophthalmology Procedure
968	OP079	Endocyclophotocoagulation per eye	12240	14400	14400	Ophthalmology Procedure
969	OP080	Cyclocryotherapy /Trans scleral cyclophotocoagulation TSCPC per eye	3400	4000	4000	Ophthalmology Procedure
970	OP081	YAG Laser iridotomy / Hyaloidotomy/Laser suture lysis post trabeculectomy per eye	3400	4000	4000	Ophthalmology Procedure
971	OP082	YAG Laser capsulotomy per eye	3400	4000	4000	Ophthalmology Procedure
972	OP083	ALT-Argon laser trabeculoplasty per eye	3400	4000	4000	Ophthalmology Procedure
973	OP084	TTT- Transpupillary thermal therapy per eye	5780	6800	6800	Ophthalmology Procedure
974	OP085	PTK- Phototherapeutic keratectomy /PRK for keratoconus per eye	9112	10720	10720	Ophthalmology Procedure
975	OP086	Argon/diode laser for retinal detachment per eye	5780	6800	6800	Ophthalmology Procedure
976	OP087	Intralase application for keratoconus /CAIRS Corneal allogenic intrastromal ring segments per eye excluding the cost of the rings	13600	16000	16000	Ophthalmology Procedure
977	OP088	Vitrectomy- pars plana including Fluid air exchange (per eye)	23800	28000	28000	Ophthalmology Procedure

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			Non-NABH	NABH	Super Speciality	
978	OP089	Vitrectomy +membrane peeling +fluid air exchange+endolaser+ gas/silicon oil tamponade per eye	27200	32000	32000	Ophthalmology Procedure
979	OP090	Macular hole surgery- Vitrectomy +membrane peeling + ILM peeling+ fluid air exchange+endolaser+ gas/silicon oil tamponade per eye	27880	32800	32800	Ophthalmology Procedure
980	OP091	Vitrectomy +phaco fragmentation/ IOL drop +/- secondary IOL per eye	17000	20000	20000	Ophthalmology Procedure
981	OP092	Anterior vitrectomy per eye	5440	6400	6400	Ophthalmology Procedure
982	OP093	Membranectomy one eye	8160	9600	9600	Ophthalmology Procedure
983	OP094	Membranectomy both eyes	10200	12000	12000	Ophthalmology Procedure
984	OP095	Intravitreal injections of antibiotics excluding the cost of the antibiotic per eye	3400	4000	4000	Ophthalmology Procedure
985	OP096	Intravitreal Injection of drugs (Ranibizumab/ Aflibercept etc) excluding the cost of the drug per eye	3400	4000	4000	Ophthalmology Procedure
986	OP097	Intravitreal Insertion of Drug Implant excluding cost of the Drug Implant (Ozurdex,...etc) per eye	4080	4800	4800	Ophthalmology Procedure
987	OP098	Extracapsular cataract extraction (ECCE) with IOL excluding the cost of IOL per eye	9112	10720	10720	Ophthalmology Procedure
988	OP099	Small Incision Cataract Surgery (SICS) with IOL excluding the cost of IOL per eye	9112	10720	10720	Ophthalmology Procedure
989	OP100	Phaco with foldable IOL (silicone and acrylic)/PMMA IOL / MICS surgery excluding the cost of IOL per eye	11560	13600	13600	Ophthalmology Procedure
990	OP101	Pars plana lensectomy with/without IOL excluding the cost of IOL per eye	11560	13600	13600	Ophthalmology Procedure
991	OP102	Secondary IOL implantation- AC IOL PC IOL or scleral fixated IOL excluding the cost of IOL per eye	13600	16000	16000	Ophthalmology Procedure
992	OP103	Cataract extraction with IOL with capsular tension rings (Cionni's ring)(cost of the ring included) excluding the cost of IOL per eye	23800	28000	28000	Ophthalmology Procedure
993	OP104	Paediatric cataract surgery +parsplana capsulotomy + anterior vitrectomy excluding the cost of IOL - one eye	13600	16000	16000	Ophthalmology Procedure

CGHS rates for Tier III (Z City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
994	OP105	Paediatric cataract surgery +parsplana capsulotomy + anterior vitrectomy excluding the cost of IOL - Both Eyes	17000	20000	20000	Ophthalmology Procedure
995	OP106	IOL exchange [excluding IOL cost] per eye	6800	8000	8000	Ophthalmology Procedure
996	OP107	IOL reposition per eye	4080	4800	4800	Ophthalmology Procedure
997	OP108	IOL explantation per eye	5440	6400	6400	Ophthalmology Procedure
998	OP109	Iridodialysis repair or pupillary reconstruction /Cyclodialysis repair per eye	9112	10720	10720	Ophthalmology Procedure
999	OP110	Iris cyst removal /synechiolysis/surgical iridectomy per eye	3400	4000	4000	Ophthalmology Procedure
1000	OP111	Lid Abscess incision and Drainage per eye	3400	4000	4000	Ophthalmology Procedure
1001	OP112	Orbital Abscess incision and Drainage per eye	5780	6800	6800	Ophthalmology Procedure
1002	OP113	Excision Biopsy of lid, conjunctiva, cornea per eye	6256	7360	7360	Ophthalmology Procedure
1003	OP114	Paracentesis (eye) per eye	3400	4000	4000	Ophthalmology Procedure
1004	OP115	Scleral graft for scleral melting or perforation per eye	9112	10720	10720	Ophthalmology Procedure
1005	OP116	Amniotic membrane grafting /symblepharon release with AMG per eye	9112	10720	10720	Ophthalmology Procedure
1006	OP117	Intraocular foreign body removal per eye	5780	6800	6800	Ophthalmology Procedure
1007	OP118	Electrolysis (eye) - Both Eyes	680	800	800	Ophthalmology Procedure
1008	OP119	Perforating injury repair (eye) per eye	9112	10720	10720	Ophthalmology Procedure
1009	OP120	Botulinum injection for blepharospasm or squint /epiphora/entropion/lid retraction (excluding cost of drug) per eye	3400	4000	4000	Ophthalmology Procedure
1010	OP121	C3F8 GAS Injection intravitreal for descemetopexy/retinopexy/pneumatopexy (per eye)	3400	4000	4000	Ophthalmology Procedure
1011	OP122	Silicone Oil injection (per eye)	3400	4000	4000	Ophthalmology Procedure
1012	OP123	Epiretinal Membrane (ERM) Peeling (per eye)	4760	5600	5600	Ophthalmology Procedure
1013	OP124	Epiretinal Membrane (ERM) Removal (per eye)	2040	2400	2400	Ophthalmology Procedure
1014	OP125	Internal limiting membrane (ILM) peeling (per eye)	2040	2400	2400	Ophthalmology Procedure
1015	OP126	Punctoplasty (per eye)	4420	5200	5200	Ophthalmology Procedure
1016	OP127	Punctal plug(Collagen/silicone) per eye	2720	3200	3200	Ophthalmology Procedure

CGHS rates for Tier III (Z City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1017	OP128	Laser Trabeculoplasty Gonioplasty - Both Eyes	10880	12800	12800	Ophthalmology Procedure
1018	OP129	Eye laser pulse therapy /Lipiflow/IPL [Intense pulse light] per eye	2380	2800	2800	Ophthalmology Procedure
1019	OP130	Malyugin Ring /pupil dilator/iris expander per eye	6800	8000	8000	Ophthalmology Procedure
1020	OP131	Globe exploration per eye	6800	8000	8000	Ophthalmology Procedure
1021	OP132	Scleral Fixation Tissue glue /fibrin glue per eye	5712	6720	6720	Ophthalmology Procedure
1022	OP133	PFCL Injection Per Eye Including Cost of The Drug	1856	2184	2184	Ophthalmology Procedure
1023	OP134	Methylprednisolone Injection IV Infusion per day Excluding the cost of the drug	1700	2000	2000	Ophthalmology Procedure
1024	OP135	Retinoblastoma[RB] EUA both eyes	2040	2400	2400	Ophthalmology Procedure
1025	OP136	RB intravitreal/intravenous/subtenons chemotherapy affected eye excluding the cost of the chemotherapy drug	2380	2800	2800	Ophthalmology Procedure
1026	OP137	RB TTT/ Cryotherapy affected eye	3060	3600	3600	Ophthalmology Procedure
1027	OP138	Plaque brachytherapy-surface affected eye	10200	12000	12000	Ophthalmology Procedure
1028	OP139	Plaque brachytherapy-intraocular affected eye	13600	16000	16000	Ophthalmology Procedure
1029	OP140	Simple limbal stem cell transplant SLET per eye	13600	16000	16000	Ophthalmology Procedure
1030	OP141	Mucous membrane grafting MMG one eyelid	13600	16000	16000	Ophthalmology Procedure
1031	OP142	Mucous membrane grafting MMG two eyelids	17000	20000	20000	Ophthalmology Procedure
1032	OP143	iStent Inject per eye including the cost of consumables and implant	54400	64000	64000	Ophthalmology Procedure
1033	OP144	Orthoptic exercises per session	170	200	200	Ophthalmology Physiotherapy
1034	OP145	Pleoptic exercises per session	170	200	200	Ophthalmology Physiotherapy
1035	EI001	Impedance with stapedial reflex / Impedance Audiometry	408	480	480	ENT Investigation
1036	EI002	Pure Tone Audiogram / Pure Tone Audiometry / PTA	306	360	360	ENT Investigation
1037	EI003	Short Increment Sensitivity Index (SISI) Tone Decay	272	320	320	ENT Investigation
1038	EI004	Speech Assessment	272	320	320	ENT Investigation
1039	EI005	Speech Discrimination Score	272	320	320	ENT Investigation
1040	EI006	Multiple hearing assessment test to Adults	272	320	320	ENT Investigation

CGHS rates for Tier III (Z City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1041	EI007	BERA (Brain stem evoked response audiometry)	1700	2000	2000	ENT Investigation
1042	EI008	OAE (Otoacoustic Emission Test)	857	1008	1008	ENT Investigation
1043	EI009	Hearing Aid Trail	136	160	160	ENT Investigation
1044	EI010	Vestibular Evoked Myogenic Potential (VEMP)	1870	2200	2200	ENT Investigation
1045	EI011	Cold Calorie Test for Vestibular function	408	480	480	ENT Investigation
1046	EI012	Electronystagmography (ENG)	1020	1200	1200	ENT Investigation
1047	EI013	Videonystagmography(VNG)	1700	2000	2000	ENT Investigation
1048	EI014	Video Laryngoscopy	4080	4800	4800	ENT investigation
1049	EI015	Videostroboscopy	3740	4400	4400	ENT Investigation
1050	EI016	Fibreoptic examination of Larynx (FOL) under LA	3400	4000	4000	ENT Investigation
1051	EI017	Fibro optic Nasal Endoscopy	1564	1840	1840	ENT Investigation
1052	EP001	Removal of foreign body From Nose	476	560	560	ENT Procedure
1053	EP002	Removal of foreign body From Ear/otoscopy diagnostic or therapeutic	476	560	560	ENT Procedure
1054	EP003	Syringing (Ear)	340	400	400	ENT Procedure
1055	EP004	Polyp removal under LA (Larynx)	3400	4000	4000	ENT Procedure
1056	EP005	Polyp removal under GA (Larynx)	6256	7360	7360	ENT Procedure
1057	EP006	Peritonsillar abscess Drainage under LA	5780	6800	6800	ENT Procedure
1058	EP007	Myringoplasty	18700	22000	22000	ENT Procedure
1059	EP008	Stapedectomy	18700	22000	22000	ENT Procedure
1060	EP009	Myringotomy with Grommet Insertion	9112	10720	10720	ENT Procedure
1061	EP010	Tympanotomy	18700	22000	22000	ENT Procedure
1062	EP011	Tympanoplasty	23800	28000	28000	ENT Procedure
1063	EP012	Mastoidectomy	23800	28000	28000	ENT Procedure
1064	EP013	Otoplasty	23800	28000	28000	ENT Procedure
1065	EP014	Labyrinthectomy	23800	28000	28000	ENT Procedure
1066	EP015	Skull Base Surgery	36040	42400	42400	ENT Procedure
1067	EP016	Facial Nerve Decompression	29240	34400	34400	ENT Procedure
1068	EP017	Septoplasty	18700	22000	22000	ENT Procedure

CGHS rates for Tier III (Z City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1069	EP018	Submucous Resection	9112	10720	10720	ENT Procedure
1070	EP019	Septo-Rhinoplasty	29240	34400	34400	ENT Procedure
1071	EP020	Rhinoplasty- Non-cosmetic	23800	28000	28000	ENT Procedure
1072	EP021	Fracture Reduction of Nasal Bone	9112	10720	10720	ENT Procedure
1073	EP022	Intra Nasal Diathermy	4080	4800	4800	ENT Procedure
1074	EP023	Turbinectomy	9112	10720	10720	ENT Procedure
1075	EP024	Endoscopic Dacryocystorhinostomy (DCR)	23800	28000	28000	ENT Procedure
1076	EP025	Endoscopic Surgery (ENT)	23800	28000	28000	ENT Procedure
1077	EP026	Septal Perforation Repair	18700	22000	22000	ENT Procedure
1078	EP027	Antrum Puncture	2040	2400	2400	ENT Procedure
1079	EP028	Lateral Rhinotomy	13600	16000	16000	ENT Procedure
1080	EP029	Cranio-Facial resection	29240	34400	34400	ENT Procedure
1081	EP030	Angiofibroma Excision	29240	34400	34400	ENT Procedure
1082	EP031	Endoscopic Hypophysectomy	36040	42400	42400	ENT Procedure
1083	EP032	Endoscopic Optic Nerve Decompression	36040	42400	42400	ENT Procedure
1084	EP033	Tonsillectomy	18700	22000	22000	ENT Procedure
1085	EP034	Uvulo-palatoplasty	23800	28000	28000	ENT Procedure
1086	EP035	Functional Endoscopic Sinus Surgery (FESS) for Antrochoanal polyp	23800	28000	28000	ENT Procedure
1087	EP036	Functional Endoscopic Sinus Surgery (FESS) for Ethmoidal polyp	23800	28000	28000	ENT Procedure
1088	EP037	Polyp removal ear	3400	4000	4000	ENT Procedure
1089	EP038	Polyp removal Nose (Septal polyp)	5780	6800	6800	ENT Procedure
1090	EP039	Mastoidectomy plus Ossiculoplasty including TORP (Total Ossicular Replacement Prosthesis) or PORP (Partial Ossicular Replacement Prosthesis)	23800	28000	28000	ENT Procedure
1091	EP040	Endolymphatic sac decompression	29240	34400	34400	ENT Procedure
1092	EP041	Diagnostic endoscopy under GA	3400	4000	4000	ENT Procedure
1093	EP042	Young's operation for Atrophic rhinitis	13600	16000	16000	ENT Procedure
1094	EP043	Vidian neurectomy for vasomotor Rhinitis	18700	22000	22000	ENT Procedure

CGHS rates for Tier III (Z City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1095	EP044	Nasal Packing-anterior	1700	2000	2000	ENT Procedure
1096	EP045	Nasal Packing-Posterior	2040	2400	2400	ENT Procedure
1097	EP046	Ranula Excision	13600	16000	16000	ENT Procedure
1098	EP047	Tongue Tie excision	5780	6800	6800	ENT Procedure
1099	EP048	Sub Mandibular Duct Lithotomy	4624	5440	5440	ENT Procedure
1100	EP049	Adenoidectomy	13600	16000	16000	ENT Procedure
1101	EP050	Palatopharyngoplasty	23800	28000	28000	ENT Procedure
1102	EP051	Pharyngoplasty	29240	34400	34400	ENT Procedure
1103	EP052	Styloidectomy	13600	16000	16000	ENT Procedure
1104	EP053	Direct Laryngoscopy including Biopsy under GA	9112	10720	10720	ENT Procedure
1105	EP054	Oesophagoscopy with foreign body removal from Oesophagus	9112	10720	10720	ENT Procedure
1106	EP055	Bronchoscopy with foreign body (FB) removal	9112	10720	10720	ENT Procedure
1107	EP056	Ear Lobe Repair one side	2720	3200	3200	ENT Procedure
1108	EP057	Excision of Pinna for non-cancerous Growth/Injuries - Skin Only	6256	7360	7360	ENT Procedure
1109	EP058	Excision of Pinna for non-cancerous/ Injuries - Skin and Cartilage	9112	10720	10720	ENT Procedure
1110	EP059	Partial Amputation of Pinna	9112	10720	10720	ENT Procedure
1111	EP060	Total Amputation of Pinna	13600	16000	16000	ENT Procedure
1112	EP061	Total Amputation & Excision of External Auditory Meatus	13600	16000	16000	ENT Procedure
1113	EP062	Excision of Cystic Hygroma	13600	16000	16000	ENT Procedure
1114	EP063	Excision of Cystic Hygroma Extensive	18700	22000	22000	ENT Procedure
1115	EP064	Excision of Branchial Cyst	18700	22000	22000	ENT Procedure
1116	EP065	Excision of Branchial Sinus	18700	22000	22000	ENT Procedure
1117	EP066	Excision of Pharyngeal Diverticulum	18700	22000	22000	ENT Procedure
1118	EP067	Excision of Carotid Body / Carotid Body Tumours	29240	34400	34400	ENT Procedure
1119	EP068	Operation for Cervical Rib	23800	28000	28000	ENT Procedure
1120	EP069	Estlander Operation (Estlander flap in plastic surgery of lips)	23800	28000	28000	ENT Procedure
1121	EP070	Abbe Operation (Abbe flap in plastic surgery of lips)	18700	22000	22000	ENT Procedure
1122	EP071	Cheek Advancement	23800	28000	28000	ENT Procedure

CGHS rates for Tier III (Z City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1123	EP072	Excision of the Maxilla	29240	34400	34400	ENT Procedure
1124	EP073	Excision of mandible-segmental	23800	28000	28000	ENT Procedure
1125	EP074	Parotidectomy - Superficial	23800	28000	28000	ENT Procedure
1126	EP075	Parotidectomy - Total	29240	34400	34400	ENT Procedure
1127	EP076	Repair of Parotid Duct	18700	22000	22000	ENT Procedure
1128	EP077	Removal of Submandibular Salivary gland	18700	22000	22000	ENT Procedure
1129	EP078	Hemithyroidectomy	23800	28000	28000	ENT Procedure
1130	EP079	Partial Thyroidectomy (lobectomy)	23800	28000	28000	ENT Procedure
1131	EP080	Subtotal Thyroidectomy	29240	34400	34400	ENT Procedure
1132	EP081	Total Thyroidectomy	36040	42400	42400	ENT Procedure
1133	EP082	Resection Enucleation of thyroid Adenoma	18700	22000	22000	ENT Procedure
1134	EP083	Excision of Lingual Thyroid	23800	28000	28000	ENT Procedure
1135	EP084	Excision of Thyroglossal Cyst/Duct/Fistula	23800	28000	28000	ENT Procedure
1136	EP085	Laryngectomy	36040	42400	42400	ENT Procedure
1137	EP086	Hyoid Suspension	18700	22000	22000	ENT Procedure
1138	EP087	Genioplasty	23800	28000	28000	ENT Procedure
1139	EP088	Phonosurgery	18700	22000	22000	ENT Procedure
1140	EP089	Microlaryngeal Surgery	18700	22000	22000	ENT Procedure
1141	EP090	Laryngofissure	29240	34400	34400	ENT Procedure
1142	EP091	Tracheal Stenosis Excision	29240	34400	34400	ENT Procedure
1143	EP092	Tracheostomy	9112	10720	10720	ENT Procedure
1144	CC001	ICU/CCU/PICU/MICU/HDU (For all categories of ward entitlement, inclusive of Room Rent)	5400	5400	5400	Critical Care
1145	CC002	Compressed Air / Piped Oxygen per hour	68	80	80	Critical Care
1146	CC003	Ventilator charges (Per day) inclusive of associated disposables	2040	2400	2400	Critical Care
1147	CC004	Non invasive Ventilator charges (Per day)(inclusive of associated disposables)	408	480	480	Critical Care
1148	CC005	Pneupac Ventilator in Nursery (Per day)	1768	2080	2080	Critical Care

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			Non-NABH	NABH	Super Speciality	
1149	CC006	Incubator charges (Per day)	1020	1200	1200	Critical Care
1150	CC007	Neonatal ICU charges (Per day) inclusive of incubator	5400	5400	5400	Critical Care
1151	CC008	Exchange Transfusion	2380	2800	2800	Critical Care
1152	CC009	Phototherapy per session (up to 6 Hours)	272	320	320	Critical Care
1153	CC010	Resuscitation/CPR/Intubation	1020	1200	1200	Critical Care
1154	CC011	PICC line (peripherally inserted Central Cannulisation)	3400	4000	4000	Critical Care
1155	CC012	Nebulization Per Session	34	40	40	Critical Care
1156	CC013	PICC Line Removal	680	800	800	Critical Care
1157	CC014	Ryles Tube Insertion	612	720	720	Critical Care
1158	BC001	Blood Component Charges - Whole Blood per Unit	1550	1550	1550	Blood Component Charges
1159	BC002	Blood Component Charges - Packed Red Cell per Unit	1550	1550	1550	Blood Component Charges
1160	BC003	Blood Component Charges - Fresh Frozen Plasma	400	400	400	Blood Component Charges
1161	BC004	Platelet Concentrate- Random Donor Platelet (RDP)	400	400	400	Blood Component Charges
1162	BC005	Blood Component Charges - Cryoprecipitate	250	250	250	Blood Component Charges
1163	BC006	Platelet Concentrate – Single Donor Platelet (SDP)- Apheresis per unit	11000	11000	11000	Blood Component Charges
1164	GP001	Dressings of wounds	204	240	240	General Procedure
1165	GP002	Aspiration Pleural Effusion - Diagnostic	476	560	560	General Procedure
1166	GP003	Aspiration Pleural Effusion - Therapeutic	476	560	560	General Procedure
1167	GP004	Abdominal / Peritoneal Aspiration – Diagnostic/Ascitic tapping / Paracentesis - Diagnostic	476	560	560	General Procedure
1168	GP005	Abdominal / Peritoneal Aspiration – Therapeutic/Ascitic tapping / Paracentesis - Therapeutic	510	600	600	General Procedure
1169	GP006	Removal of Sutures (All)	136	160	160	General Procedure
1170	GP007	Venesection	476	560	560	General Procedure
1171	GP008	Sternal puncture	1360	1600	1600	General Procedure
1172	GP009	Urinary bladder Catheterisation	476	560	560	General Procedure
1173	GP010	Incision & Drainage under local Anaesthesia (Large)	1564	1840	1840	General Procedure
1174	GP011	Intercostal Drainage	2380	2800	2800	General Procedure

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			Non-NABH	NABH	Super Speciality	
1175	GP012	Drainage of abscess with anaesthesia	9112	10720	10720	General Procedure
1176	GP013	Excision of lumps under anaesthesia	9112	10720	10720	General Procedure
1177	HN001	Temporal Bone Subtotal Resection	29240	34400	39560	Head and Neck Surgery
1178	HN002	Benign Tumour Excisions of Head and Neck	18700	22000	25300	Head and Neck Surgery
1179	SK001	Excision of Moles	680	800	800	Skin Procedure
1180	SK002	Excision of Warts	680	800	800	Skin Procedure
1181	SK003	Excision of Molluscum Contagiosum	680	800	800	Skin Procedure
1182	SK004	Excision of Venereal Warts	680	800	800	Skin Procedure
1183	SK005	Excision of Corns	680	800	800	Skin Procedure
1184	SK006	Intradermal (ID) Injection Keloid (Intralesional Injection) including the cost of the drug	680	800	800	Skin Procedure
1185	SK007	Chemical Cautery (s)/Cryotherapy	680	800	800	Skin Procedure
1186	CI001	Electrocardiogram (ECG)	119	140	140	Cardiology Investigation
1187	CI002	Treadmill Test (TMT)	762	896	896	Cardiology Investigation
1188	CI003	Holter analysis per day	1700	2000	2000	Cardiology Investigation
1189	CI004	Ambulatory BP monitoring per day	680	800	800	Cardiology Investigation
1190	CI005	Head Up Tilt Test (HUTT)	6256	7360	7360	Cardiology Investigation
1191	CI006	External Loop/event recording -first day Rs.1500	1020	1200	1200	Cardiology Investigation
1192	CI007	External Loop/event recording - subsequent Days 1000/day (Maximum up to 6 days)	680	800	800	Cardiology Investigation
1193	CI008	Diagnostic Electrophysiological studies conventional (Including catheter)	49368	58080	58080	Cardiology Investigation
1194	CI009	Stress Thallium / Myocardial Perfusion Scintigraphy	9112	10720	10720	Cardiology Investigation
1195	CI010	Rest Thallium / Myocardial Perfusion Scintigraphy	6528	7680	7680	Cardiology Investigation
1196	CI011	Venography	3400	4000	4000	Cardiology Investigation
1197	CI012	Lymphangiography	3400	4000	4000	Cardiology Investigation
1198	CI013	Sinogram	1360	1600	1600	Cardiology Investigation
1199	CI014	Digital Subtraction Angiography-Peripheral artery	9935	11688	11688	Cardiology Investigation

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			Non-NABH	NABH	Super Speciality	
1200	CI015	Digital Subtraction Angiography- venogram	9935	11688	11688	Cardiology Investigation
1201	CI016	Coronary Angiography	9112	10720	10720	Cardiology Investigation
1202	CI017	Cardiac Catheterization (CATH)	10132	11920	11920	Cardiology Investigation
1203	CP001	Balloon Coronary Angioplasty / Percutaneous transluminal coronary angioplasty (PTCA) /Percutaneous coronary intervention (PCI) with Vascular closure device (VCD) excluding the cost of Stent. Cost of Drug Eluting Balloon allowed in lieu of Stent	65960	77600	89240	Cardiology Procedure
1204	CP002	Balloon Coronary Angioplasty / Percutaneous transluminal coronary angioplasty (PTCA) / Percutaneous coronary intervention (PCI) without Vascular closure device (VCD) excluding the cost of Stent.Cost of Drug Eluting Balloon allowed in lieu of Stent	56933	66980	77027	Cardiology Procedure
1205	CP003	Rotablation excluding the cost of Rotablator Burr/Advancer	42042	49462	56881	Cardiology Procedure
1206	CP004	Balloon Mitral Valvotomy / Percutaneous Transvenous Mitral Commissurotomy (PTMC)	65960	77600	89240	Cardiology Procedure
1207	CP005	Temporary Pacemaker Implantation (TPI) (Temporary Cardiac Pacing) Single Chamber	14362	16896	19430	Cardiology Procedure
1208	CP006	Permanent pacemaker implantation (PPI)- Single Chamber excluding the cost of Pacemaker	23936	28160	32384	Cardiology Procedure
1209	CP007	Permanent pacemaker implantation- Dual Chamber excluding the cost of Pacemaker	32164	37840	43516	Cardiology Procedure
1210	CP008	Permanent pacemaker implantation (PPI)- Biventricular excluding the cost of pacemaker	37120	43670	50221	Cardiology Procedure
1211	CP009	Automatic implantable cardioverter defibrillator (AICD) Single Chamber - excluding the cost of Device	37400	44000	50600	Cardiology Procedure
1212	CP010	Automatic implantable cardioverter defibrillator (AICD) Dual Chamber excluding the cost of Device	39158	46068	52978	Cardiology Procedure
1213	CP011	Combo Device Implantation excluding the cost of Device	44132	51920	59708	Cardiology Procedure
1214	CP012	Radiofrequency (RF) Ablation Conventional	65960	77600	89240	Cardiology Procedure

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			Non-NABH	NABH	Super Speciality	
1215	CP013	Radiofrequency (RF) Ablation Atrial Tachycardia/CARTO	122400	144000	165600	Cardiology Procedure
1216	CP014	Intra-aortic balloon pump (IABP) excluding the cost of the balloon	23800	28000	32200	Cardiology Procedure
1217	CP015	Intra vascular coiling excluding cost of the coils	51680	60800	69920	Cardiology Procedure
1218	CP016	Balloon Septostomy	22440	26400	30360	Cardiology Procedure
1219	CP017	Aortic Valve Balloon Dilatation (AVBD) / Pulmonary Valve Balloon Dilatation (PVBD)	42187	49632	57077	Cardiology Procedure
1220	CP018	Peripheral Angioplasty with Vascular Closure Device (VCD) excluding the cost of Stent	41514	48840	56166	Cardiology Procedure
1221	CP019	Peripheral Angioplasty without Vascular Closure Device (VCD) excluding the cost of Stent	36040	42400	48760	Cardiology Procedure
1222	CP020	Renal Angioplasty excluding the cost of Stent	41140	48400	55660	Cardiology Procedure
1223	CP021	Transcatheter Aortic Valve Implantation (TAVI) / Transcatheter Aortic Valve Replacement (TAVR) – Procedure Cost. (Approval of Director, CGHS in consultation with Special Technical Committee (STC) is required for this procedure)	68000	80000	92000	Cardiology Procedure
1224	CP022	TAVI / TAVR Implant (cost of implant only)	1284000	1284000	1284000	Cardiology Implant(Valve)
1225	CP023	Cost of Intravascular ultrasound (IVUS) Catheter excluding GST(Procedure Charge included in PTCA)	55000	55000	55000	Cardiology Add on Procedure
1226	CP024	Cost of Fractional flow reserve (FFR) Catheter excluding GST (Procedure Charge included in PTCA)	33000	33000	33000	Cardiology Add on Procedure
1227	CP025	Catheter cost of Intracoronary optical coherence tomography (OCT) / Intravascular optical coherence tomography (IVOCT) / Intravascular Ventricular Assist System excluding GST(Procedure cost is included in PTCA)	65000	65000	65000	Cardiology Add on Procedure
1228	CP026	IVL (Coronary Intra vascular Lithotripsy / Shock wave Lithotripsy – Including GST (Approval of Director, CGHS in consultation with Special Technical Committee (STC) is required for this procedure)	268000	268000	268000	Cardiology Add on Procedure

CGHS rates for Tier III (Z City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1229	CV001	Varicose vein Surgery-Trendelenburg Operation with Suturing or Ligation	17204	20240	23276	Cardiovascular And Cardiac Surgery Procedure
1230	CV002	Radio Ablation of Varicose Veins (RFA Ablation) excluding the cost of RFA Catheter	6358	7480	8602	Cardiovascular And Cardiac Surgery Procedure
1231	CV003	Laser Ablation of Varicose Veins	29920	35200	40480	Cardiovascular And Cardiac Surgery Procedure
1232	CV004	Atrial Septal Defect (ASD) closure excluding the cost of the Device	74800	88000	101200	Cardiovascular And Cardiac Surgery Procedure
1233	CV005	Ventricular Septal Defect (VSD) with Graft / VSD Device Closure excluding the cost of the Device	81600	96000	110400	Cardiovascular And Cardiac Surgery Procedure
1234	CV006	Tetralogy of Fallot (TOF)/TAPVC/TCPC/REV/RSOV repair	122400	144000	165600	Cardiovascular And Cardiac Surgery Procedure
1235	CV007	BD Glenn/Left Atrium Myxoma	122400	144000	165600	Cardiovascular And Cardiac Surgery Procedure
1236	CV008	Senning/Arterial Switch Operation (ASO) with graft	122400	144000	165600	Cardiovascular And Cardiac Surgery Procedure
1237	CV009	Double Switch Operation (DSO)	160480	188800	217120	Cardiovascular And Cardiac Surgery Procedure
1238	CV010	Atrioventricular(AV) Canal Repair	160480	188800	217120	Cardiovascular And Cardiac Surgery Procedure
1239	CV011	Fontan Procedure	186320	219200	252080	Cardiovascular And Cardiac Surgery Procedure
1240	CV012	Conduit Repair	160480	188800	217120	Cardiovascular And Cardiac Surgery Procedure
1241	CV013	Coronary Artery Bypass Graft surgery (CABG)	122400	144000	165600	Cardiovascular And Cardiac Surgery Procedure
1242	CV014	Coronary Artery Bypass Graft surgery (CABG) + Intra-Aortic Balloon Pump (IABP)	160480	188800	217120	Cardiovascular And Cardiac Surgery Procedure

CGHS rates for Tier III (Z City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1243	CV015	Coronary Artery Bypass Graft surgery (CABG) + Valve Replacement excluding the cost of the valve	186320	219200	252080	Cardiovascular And Cardiac Surgery Procedure
1244	CV016	CABG without bypass.	160480	188800	217120	Cardiovascular And Cardiac Surgery Procedure
1245	CV017	Ascending Aorta Replacement	186320	219200	252080	Cardiovascular And Cardiac Surgery Procedure
1246	CV018	Double Valve Replacement (DVR)	160480	188800	217120	Cardiovascular And Cardiac Surgery Procedure
1247	CV019	Mitral valve Replacement(MVR)/ Aortic valve Replacement (AVR)/ Tricuspid Valve Replacement (TVR) / Pulmonary valve replacement (PVR)	122400	144000	165600	Cardiovascular And Cardiac Surgery Procedure
1248	CV020	Mitral valve (MV) Repair + Aortic valve (AV) Repair / Tricuspid Valve (TV) Repair + Pulmonary valve (PV) repair	122400	144000	165600	Cardiovascular And Cardiac Surgery Procedure
1249	CV021	Aorta Femoral Bypass	87720	103200	118680	Cardiovascular And Cardiac Surgery Procedure
1250	CV022	Blalock-Taussig Shunt (BT Shunt) / Coarctation	103360	121600	139840	Cardiovascular And Cardiac Surgery Procedure
1251	CV023	Pulmonary Artery Banding (PA Banding) Septostomy	103360	121600	139840	Cardiovascular And Cardiac Surgery Procedure
1252	CV024	Pericardiocentesis	6800	8000	8000	Cardiovascular And Cardiac Surgery Procedure
1253	CV025	Pericardiectomy	103360	121600	139840	Cardiovascular And Cardiac Surgery Procedure
1254	CV026	Patent Ductus Arteriosus (PDA)-Device Closure	74800	88000	101200	Cardiovascular And Cardiac Surgery Procedure
1255	CV027	Heart Transplant Surgery (As per Guidelines mentioned in OM.No. Z-42011/11/2021-MG/EHS Dated 1st December 2023)	1200000	1200000	1200000	Cardiovascular And Cardiac Surgery Procedure

CGHS rates for Tier III (Z City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1256	CV028	Aortic Arch Replacement	186320	219200	252080	Cardiovascular And Cardiac Surgery Procedure
1257	CV029	Aortic Dissection	186320	219200	252080	Cardiovascular And Cardiac Surgery Procedure
1258	CV030	Thoraco Abdominal Aneurysm Repair	160480	188800	217120	Cardiovascular And Cardiac Surgery Procedure
1259	CV031	Embolectomy	51680	60800	69920	Cardiovascular And Cardiac Surgery Procedure
1260	CV032	Vascular Repair	51680	60800	69920	Cardiovascular And Cardiac Surgery Procedure
1261	CV033	Bentall Repair with Prosthetic Valve	186320	219200	252080	Cardiovascular And Cardiac Surgery Procedure
1262	CV034	Bentall Repair with Biologic Valve	160480	188800	217120	Cardiovascular And Cardiac Surgery Procedure
1263	CV035	Coarctation dilatation / Balloon dilatation of Aortic coarctation -Excluding the the cost of Balloon	53557	63008	72459	Cardiovascular And Cardiac Surgery Procedure
1264	CV036	Coarctation dilatation with Stenting	42840	50400	57960	Cardiovascular And Cardiac Surgery Procedure
1265	CV037	Septostomy- Blade	42840	50400	57960	Cardiovascular And Cardiac Surgery Procedure
1266	CV038	Aortic stent grafting for aortic aneurysm	122400	144000	165600	Cardiovascular And Cardiac Surgery Procedure
1267	CV039	Inferior Vena Cava (IVC) filter implantation- excluding the cost of filter	22440	26400	30360	Cardiovascular And Cardiac Surgery Procedure
1268	CV040	Video Assisted Thoracoscopic Surgery (VATS) for Decortication of Lungs/Thymectomy/Other Major Surgeries	122400	144000	165600	Cardiovascular And Cardiac Surgery Procedure
1269	GS001	Sclerotherapy Injection / Banding of Haemorrhoids (cost of drug/sclerotherapy agent/band extra)	476	560	560	General Surgery

CGHS rates for Tier III (Z City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1270	GS002	Injection for Varicose Veins (cost of drug/sclerotherapy agent extra)	476	560	560	General Surgery
1271	GS003	Suturing of small wounds	935	1100	1100	General Surgery
1272	GS004	Secondary suture of wounds	2992	3520	3520	General Surgery
1273	GS005	Debridement of wounds - Small	1122	1320	1320	General Surgery
1274	GS006	Phimosis Under LA	4080	4800	4800	General Surgery
1275	GS007	Removal Of Foreign Bodies -without C-ARM	1020	1200	1200	General Surgery
1276	GS008	Toe Nail Removal	680	800	800	General Surgery
1277	GS009	Excision of Cervical Lymph Node under Local Anaesthesia	2108	2480	2480	General Surgery
1278	GS010	Excision of Axillary Lymph Node under General Anaesthesia	5780	6800	6800	General Surgery
1279	GS011	Excision of Inguinal Lymph Node under Local Anaesthesia	2040	2400	2400	General Surgery
1280	GS012	Excision of Sebaceous Cysts	3400	4000	4000	General Surgery
1281	GS013	Excision of Superficial Lipoma	3400	4000	4000	General Surgery
1282	GS014	Excision of Superficial Neurofibroma	3400	4000	4000	General Surgery
1283	GS015	Excision of Dermoid Cysts	3400	4000	4000	General Surgery
1284	GS016	Excision of Keloid	6256	7360	7360	General Surgery
1285	GS017	Excision of mammary fistula	18700	22000	22000	General Surgery
1286	GS018	Haemorrhoidectomy	22440	26400	26400	General Surgery
1287	GS019	Stapler haemorrhoidectomy excluding the cost of Stapler	23800	28000	28000	General Surgery
1288	GS020	Debridement of Large wounds including Diabetic Wound under Anaesthesia	18700	22000	22000	General Surgery
1289	GI001	Gastro Oesophageal Reflux Study (GER Study)	2040	2400	2400	Gastro and Hepatobiliary Investigation
1290	GI002	Meckel's Scan	2040	2400	2400	Gastro and Hepatobiliary/Nuclear Medicine Investigation
1291	GI003	Hepatobiliary Scintigraphy.	2720	3200	3200	Gastro and Hepatobiliary/Nuclear Medicine Investigation

CGHS rates for Tier III (Z City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1292	GI004	Gastrointestinal Bleed (GloB.) Study with Technetium 99m labeled RBCs.	4080	4800	4800	Gastro and Hepatobiliary/Nuclear Medicine Investigation
1293	GI005	Gastric Emptying	1700	2000	2000	Gastro and Hepatobiliary/Nuclear Medicine Investigation
1294	GI006	Hepatosplenic scintigraphy with Technetium-99m radiopharmaceuticals	3400	4000	4000	Gastro and Hepatobiliary/Nuclear Medicine Investigation
1295	GI007	Diagnostic Angiography	6256	7360	7360	Gastroenterology/Interventional Radiology Investigation
1296	GI008	Oesophageal pH metry	6256	7360	7360	Gastroenterology / Endoscopic Procedures
1297	GI009	Oesophageal Manometry	6256	7360	7360	Gastroenterology / Endoscopic Procedures
1298	GI010	Small Bowel Manometry	6800	8000	8000	Gastroenterology / Endoscopic Procedures
1299	GI011	Anorectal manometry	29240	34400	34400	Gastroenterology / Endoscopic Investigation
1300	GI012	Colonic manometry	23800	28000	28000	Gastroenterology / Endoscopic Investigation
1301	GI013	Biliary Manometry	29240	34400	34400	Gastroenterology / Endoscopic Investigation
1302	GI014	Breath Tests (Urea breath test/ H. pylori breath test)/RUT	1965	2312	2312	Gastroenterology / Endoscopic Investigation
1303	MG001	Gastroscopy/Upper GI Endoscopy with or without Biopsy	2720	3200	3200	Gastroenterology / Endoscopic Procedures

CGHS rates for Tier III (Z City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1304	MG002	Lower GI Endoscopy (Colonoscopy/Sigmoidoscopy) with or without Biopsy	4080	4800	4800	Gastroenterology / Endoscopic Procedures
1305	MG003	Endoscopic mucosal resection	9112	10720	10720	Gastroenterology / Endoscopic Procedures
1306	MG004	Endoscopic Polypectomy - GIT	13600	16000	16000	Gastroenterology / Endoscopic Procedures
1307	MG005	Oesophageal Stricture dilatation	6256	7360	7360	Gastroenterology / Endoscopic Procedures
1308	MG006	Balloon dilatation of achalasia cardia	9112	10720	10720	Gastroenterology / Endoscopic Procedures
1309	MG007	Gastrointestinal (GIT) Foreign body removal	13600	16000	16000	Gastroenterology / Endoscopic Procedures
1310	MG008	Oesophageal stenting excluding the cost of stent	9112	10720	10720	Gastroenterology / Endoscopic Procedures
1311	MG009	Band ligation of oesophageal varices	5780	6800	6800	Gastroenterology / Endoscopic Procedures
1312	MG010	Sclerotherapy of oesophageal varices	5780	6800	6800	Gastroenterology / Endoscopic Procedures
1313	MG011	Glue injection of varices	9112	10720	10720	Gastroenterology / Endoscopic Procedures
1314	MG012	Argon plasma coagulation	6256	7360	7360	Gastroenterology / Endoscopic Procedures
1315	MG013	Pyloric balloon dilatation	5780	6800	6800	Gastroenterology / Endoscopic Procedures
1316	MG014	Enteral stenting excluding cost of the stent	13600	16000	16000	Gastroenterology / Endoscopic Procedures
1317	MG015	Duodenal stricture dilation	5780	6800	6800	Gastroenterology / Endoscopic Procedures

CGHS rates for Tier III (Z City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1318	MG016	Single balloon enteroscopy	9112	10720	10720	Gastroenterology / Endoscopic Procedures
1319	MG017	Double balloon enteroscopy	13600	16000	16000	Gastroenterology / Endoscopic Procedures
1320	MG018	Capsule endoscopy excluding the cost of capsule	9112	10720	10720	Gastroenterology / Endoscopic Procedures
1321	MG019	Piles banding	3400	4000	4000	Gastroenterology / Endoscopic Procedures
1322	MG020	Colonic stricture dilatation	5780	6800	6800	Gastroenterology / Endoscopic Procedures
1323	MG021	Hot biopsy forceps procedures	5780	6800	6800	Gastroenterology / Endoscopic Procedures
1324	MG022	Colonic stenting excluding cost of the stent	9112	10720	10720	Gastroenterology / Endoscopic Procedures
1325	MG023	Junction biopsy	3400	4000	4000	Gastroenterology / Endoscopic Procedures
1326	MG024	Conjugal microscopy	5780	6800	6800	Gastroenterology / Endoscopic Procedures
1327	MG025	ERCP (Endoscopic Retrograde Cholangio – Pancreatography) Diagnostic	9112	10720	10720	Gastro and Hepatobiliary Investigation
1328	MG026	Endoscopic sphincterotomy by ERCP	13600	16000	18400	Gastroenterology / Endoscopic Procedures
1329	MG027	Common Bile Duct (CBD) stone extraction by ERCP	13600	16000	18400	Gastroenterology / Endoscopic Procedures
1330	MG028	Common Bile Duct (CBD) stricture dilatation by ERCP	13600	16000	18400	Gastroenterology / Endoscopic Procedures
1331	MG029	Biliary stenting (plastic and metallic) by ERCP	13600	16000	18400	Gastroenterology / Endoscopic Procedures

CGHS rates for Tier III (Z City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1332	MG030	Mechanical lithotripsy of CBD stones by ERCP	23800	28000	32200	Gastroenterology / Endoscopic Procedures
1333	MG031	Pancreatic sphincterotomy by ERCP	13600	16000	18400	Gastroenterology / Endoscopic Procedures
1334	MG032	Pancreatic stricture dilatation by ERCP	13600	16000	18400	Gastroenterology / Endoscopic Procedures
1335	MG033	Pancreatic stone extraction by ERCP	13600	16000	18400	Gastroenterology / Endoscopic Procedures
1336	MG034	Mechanical lithotripsy of pancreatic stones	23800	28000	32200	Gastroenterology / Endoscopic Procedures
1337	MG035	Endoscopic cysto gastrostomy	13600	16000	18400	Gastroenterology / Endoscopic Procedures
1338	MG036	Balloon dilatation of papilla	13600	16000	18400	Gastroenterology / Endoscopic Procedures
1339	MG037	Percutaneous Transhepatic Biliary Drainage (PTBD)	13600	16000	18400	Gastroenterology/Interventional Radiology Procedures
1340	MG038	Vascular Embolization	29240	34400	39560	Gastroenterology/Interventional Radiology Procedures
1341	MG039	Transjugular Intrahepatic Portosystemic Shunt (TIPS)	36040	42400	48760	Gastroenterology/Interventional Radiology Procedures
1342	MG040	Inferior Vena Cava (IVC) Venography and Hepatic Vein (HV Venography)	29240	34400	39560	Gastroenterology/Interventional Radiology Procedures
1343	MG041	Muscular Stenting	36040	42400	48760	Gastroenterology / Endoscopic Procedures
1344	MG042	Balloon-Occluded Retrograde Intravenous Obliteration (BRTO)	36040	42400	48760	Gastroenterology/Interventional Radiology Procedures
1345	MG043	Portal Haemodynamic Studies	5780	6800	6800	Gastroenterology/Interventional Radiology Procedures

CGHS rates for Tier III (Z City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1346	MG044	Sengstaken Blakemore (SB) Tube Tamponade	6256	7360	7360	Gastroenterology / Endoscopic Procedures
1347	MG045	Lintas Machles Tube Tempode	4080	4800	4800	Gastroenterology / Endoscopic Procedures
1348	MG046	EUS (Endoscopic Ultrasound) guided FNAC Excluding the cost of the Needle	11220	13200	13200	Gastroenterology / Endoscopic Procedures
1349	AG001	Atresia of Oesophagus and Tracheo Oesophageal Fistula	36040	42400	48760	Abdomen/GI Surgery Procedure
1350	AG002	Operations for Replacement of Oesophagus by Colon / Colon-Inter position or Replacement of Oesophagus	36040	42400	48760	Abdomen/GI Surgery Procedure
1351	AG003	Heller's Operation	29240	34400	39560	Abdomen/GI Surgery Procedure
1352	AG004	Oesophageal Intubation (Mousseau Barbin Tube)	18700	22000	25300	Abdomen/GI Surgery Procedure
1353	AG005	Achalasia Cardia Transthoracic	29240	34400	39560	Abdomen/GI Surgery Procedure
1354	AG006	Achalasia Cardia Abdominal	29240	34400	39560	Abdomen/GI Surgery Procedure
1355	AG007	Pyloromyotomy	18700	22000	25300	Abdomen/GI Surgery Procedure
1356	AG008	Gastrostomy	18700	22000	25300	Abdomen/GI Surgery Procedure
1357	AG009	Simple Closure of Perforated peptic Ulcer	23800	28000	32200	Abdomen/GI Surgery Procedure
1358	AG010	Vagotomy Pyloroplasty / Gastro Jejunostomy	29240	34400	39560	Abdomen/GI Surgery Procedure
1359	AG011	Duodenojejunostomy	36040	42400	48760	Abdomen/GI Surgery Procedure

CGHS rates for Tier III (Z City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1360	AG012	Partial/Subtotal Gastrectomy for Ulcer	36040	42400	48760	Abdomen/GI Surgery Procedure
1361	AG013	Operation for Bleeding Peptic Ulcer	29240	34400	39560	Abdomen/GI Surgery Procedure
1362	AG014	Operation for Gastrojejunal Ulcer	29240	34400	39560	Abdomen/GI Surgery Procedure
1363	AG015	Highly Selective Vagotomy	36040	42400	48760	Abdomen/GI Surgery Procedure
1364	AG016	Selective Vagotomy & Drainage	36040	42400	48760	Abdomen/GI Surgery Procedure
1365	AG017	Exploratory Laparotomy (Open)	18700	22000	25300	Abdomen/GI Surgery Procedure
1366	AG018	Congenital Diaphragmatic Hernia	29240	34400	39560	Abdomen/GI Surgery Procedure
1367	AG019	Hiatus Hernia Repair- Abdominal (excluding cost of mesh and tacker if used)	24684	29040	33396	Abdomen/GI Surgery Procedure
1368	AG020	Hiatus Hernia Repair- Transthoracic (excluding cost of mesh and tacker if used)	24684	29040	33396	Abdomen/GI Surgery Procedure
1369	AG021	Epigastric Hernia Repair - excluding the cost of mesh and tacker	18700	22000	25300	Abdomen/GI Surgery Procedure
1370	AG022	Umbilical Hernia Repair - excluding the cost of mesh and tacker	23800	28000	32200	Abdomen/GI Surgery Procedure
1371	AG023	Ventral /incisional Hernia Repair - excluding the cost of mesh and tacker	23800	28000	32200	Abdomen/GI Surgery Procedure
1372	AG024	Inguinal Hernia Herniorrhaphy	19448	22880	26312	Abdomen/GI Surgery Procedure
1373	AG025	Inguinal Hernia - Hernioplasty excluding the cost of mesh and tacker	23800	28000	32200	Abdomen/GI Surgery Procedure

CGHS rates for Tier III (Z City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1374	AG026	Femoral Hernia Repair - excluding the cost of mesh and tacker	23800	28000	32200	Abdomen/GI Surgery Procedure
1375	AG027	Rare Hernias Repair (Spigelian, Obturator, Lumbar, Sciatic) - excluding the cost of mesh and tacker	29240	34400	39560	Abdomen/GI Surgery Procedure
1376	AG028	Splenectomy - For Trauma	36040	42400	48760	Abdomen/GI Surgery Procedure
1377	AG029	Splenectomy - For Hypersplenism	42840	50400	57960	Abdomen/GI Surgery Procedure
1378	AG030	Splenorenal Anastomosis	36040	42400	48760	Abdomen/GI Surgery Procedure
1379	AG031	Portocaval Anastomosis	42840	50400	57960	Abdomen/GI Surgery Procedure
1380	AG032	Direct Operation on Oesophagus for Portal Hypertension	36040	42400	48760	Abdomen/GI Surgery Procedure
1381	AG033	Mesentericocaval Anastomosis	29240	34400	39560	Abdomen/GI Surgery Procedure
1382	AG034	Warren Shunt (Distal Splenorenal Shunt)	36040	42400	48760	Abdomen/GI Surgery Procedure
1383	AG035	Pancreaticoduodenectomy (Whipple's procedure)	36040	42400	48760	Abdomen/GI Surgery Procedure
1384	AG036	Cystojejunostomy or Cystogastrostomy	29240	34400	39560	Abdomen/GI Surgery Procedure
1385	AG037	Cholecystectomy	23800	28000	32200	Abdomen/GI Surgery Procedure
1386	AG038	Cholecystectomy & Exploration of CBD	24684	29040	33396	Abdomen/GI Surgery Procedure
1387	AG039	Repair of Common Bile Duct (CBD)	29240	34400	39560	Abdomen/GI Surgery Procedure

CGHS rates for Tier III (Z City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1388	AG040	Cholecystostomy	17952	21120	24288	Abdomen/GI Surgery Procedure
1389	AG041	Operation for Hydatid Cyst of Liver	20196	23760	27324	Abdomen/GI Surgery Procedure
1390	AG042	Hepatic Resections (Lobectomy /Hepatectomy)	24684	29040	33396	Abdomen/GI Surgery Procedure
1391	AG043	Operation on Adrenal Glands - Bilateral	42840	50400	57960	Abdomen/GI Surgery Procedure
1392	AG044	Operation on Adrenal Glands - Unilateral	29240	34400	39560	Abdomen/GI Surgery Procedure
1393	AG045	Appendicectomy	14212	16720	19228	Abdomen/GI Surgery Procedure
1394	AG046	Appendicular Abscess – Drainage	23800	28000	32200	Abdomen/GI Surgery Procedure
1395	AG047	Mesenteric Cyst- Excision	23800	28000	32200	Abdomen/GI Surgery Procedure
1396	AG048	Diagnostic Peritonioscopy/Laparoscopy	13600	16000	18400	Abdomen/GI Surgery Procedure
1397	AG049	Jejunostomy	23800	28000	32200	Abdomen/GI Surgery Procedure
1398	AG050	Ileostomy	23800	28000	32200	Abdomen/GI Surgery Procedure
1399	AG051	Resection & Anastomosis of Small Intestine	35530	41800	48070	Abdomen/GI Surgery Procedure
1400	AG052	Duodenal Diverticulum	36040	42400	48760	Abdomen/GI Surgery Procedure
1401	AG053	Operation for Intestinal Obstruction including resection , anastomosis ,Adhesiolysis	36040	42400	48760	Abdomen/GI Surgery Procedure

CGHS rates for Tier III (Z City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1402	AG054	Operation for Intestinal perforation including resection ,anastomosis , Adhesiolysis	36040	42400	48760	Abdomen/GI Surgery Procedure
1403	AG055	Operations for Benign Tumours of Small Intestine	36040	42400	48760	Abdomen/GI Surgery Procedure
1404	AG056	Excision of Small Intestine Fistula	33660	39600	45540	Abdomen/GI Surgery Procedure
1405	AG057	Operations for GI Bleed	36040	42400	48760	Abdomen/GI Surgery Procedure
1406	AG058	Operations for Haemorrhage of Small Intestines	36040	42400	48760	Abdomen/GI Surgery Procedure
1407	AG059	Operations of the Duplication of the Intestines – including Exploratory Laparotomy	30668	36080	41492	Abdomen/GI Surgery Procedure
1408	AG060	Operations for Recurrent Intestinal Obstruction (Noble Plication & Other Operations for Adhesions)	36040	42400	48760	Abdomen/GI Surgery Procedure
1409	AG061	Ileosigmoidostomy and related resection	36040	42400	48760	Abdomen/GI Surgery Procedure
1410	AG062	Ileotransverse Colostomy and related resection	36040	42400	48760	Abdomen/GI Surgery Procedure
1411	AG063	Caecostomy	23800	28000	32200	Abdomen/GI Surgery Procedure
1412	AG064	Loop Colostomy Transverse Sigmoid	29240	34400	39560	Abdomen/GI Surgery Procedure
1413	AG065	Terminal Colostomy	22440	26400	30360	Abdomen/GI Surgery Procedure
1414	AG066	Closure of Colostomy	22440	26400	30360	Abdomen/GI Surgery Procedure
1415	AG067	Right Hemicolectomy	23936	28160	32384	Abdomen/GI Surgery Procedure

CGHS rates for Tier III (Z City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1416	AG068	Left Hemicolectomy	23936	28160	32384	Abdomen/GI Surgery Procedure
1417	AG069	Total Colectomy	29920	35200	40480	Abdomen/GI Surgery Procedure
1418	AG070	Operations for Volvulus of Large Bowel	36040	42400	48760	Abdomen/GI Surgery Procedure
1419	AG071	Operations for Sigmoid Diverticulitis	29240	34400	39560	Abdomen/GI Surgery Procedure
1420	AG072	Fissure in Ano with Internal sphincterotomy with fissurectomy.	23800	28000	32200	Abdomen/GI Surgery Procedure
1421	AG073	Fissure in Ano - Fissurectomy	18700	22000	25300	Abdomen/GI Surgery Procedure
1422	AG074	Rectal Polyp-Excision	10248	12056	13864	Abdomen/GI Surgery Procedure
1423	AG075	Fistula in Ano - High Fistulectomy	23800	28000	32200	Abdomen/GI Surgery Procedure
1424	AG076	Fistula in Ano - Low Fistulectomy	17204	20240	23276	Abdomen/GI Surgery Procedure
1425	AG077	Prolapse Rectum - Thiersch Wiring	18700	22000	25300	Abdomen/GI Surgery Procedure
1426	AG078	Prolapse Rectum - Rectopexy	10472	12320	14168	Abdomen/GI Surgery Procedure
1427	AG079	Excision of Pilonidal Sinus (open)	16456	19360	22264	Abdomen/GI Surgery Procedure
1428	AG080	Excision of Pilonidal Sinus with closure	18700	22000	25300	Abdomen/GI Surgery Procedure
1429	AG081	Abdomino-Perineal Excision of Rectum	36040	42400	48760	Abdomen/GI Surgery Procedure

CGHS rates for Tier III (Z City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1430	AG082	Anterior Resection of Rectum	42840	50400	57960	Abdomen/GI Surgery Procedure
1431	AG083	Pull Through Abdominal Resection	36040	42400	48760	Abdomen/GI Surgery Procedure
1432	AG084	Retro Peritoneal Tumour Removal	36040	42400	48760	Abdomen/GI Surgery Procedure
1433	AG085	Laparoscopic Fundoplication	42840	50400	57960	Abdomen/GI Surgery Procedure
1434	AG086	Laparoscopic Splenectomy	42840	50400	57960	Abdomen/GI Surgery Procedure
1435	AG087	Laparoscopic Removal of hydatid cyst	42840	50400	57960	Abdomen/GI Surgery Procedure
1436	AG088	Laparoscopic Treatment of Pseudo Pancreatic cyst	42840	50400	57960	Abdomen/GI Surgery Procedure
1437	AG089	Laparoscopic Whipple's operation (Laparoscopic Pancreaticoduodenectomy	36040	42400	48760	Abdomen/GI Surgery Procedure
1438	AG090	Laparoscopic GI bypass operation	42840	50400	57960	Abdomen/GI Surgery Procedure
1439	AG091	Laparoscopic Total Colectomy	42840	50400	57960	Abdomen/GI Surgery Procedure
1440	AG092	Laparoscopic Hemicolectomy	36040	42400	48760	Abdomen/GI Surgery Procedure
1441	AG093	Laparoscopic Anterior Resection (of Intestine/ Rectum)	42840	50400	57960	Abdomen/GI Surgery Procedure
1442	AG094	Laparoscopic Cholecystectomy	24684	29040	33396	Abdomen/GI Surgery Procedure
1443	AG095	Laparoscopic Appendectomy	22440	26400	30360	Abdomen/GI Surgery Procedure

CGHS rates for Tier III (Z City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1444	AG096	Laparoscopic Hernia – Inguinoplasty (excluding the cost of Tacker and Mesh)	26180	30800	35420	Abdomen/GI Surgery Procedure
1445	AG097	Laparoscopic Ventral Hernia Repair (excluding the cost of Tacker and Mesh)	26180	30800	35420	Abdomen/GI Surgery Procedure
1446	AG098	Laparoscopic Paraumbilical Hernia Repair (excluding the cost of Tacker and Mesh)	26180	30800	35420	Abdomen/GI Surgery Procedure
1447	AG099	Laparoscopic Adrenalectomy	42840	50400	57960	Abdomen/GI Surgery Procedure
1448	PS001	Diaphragmatic Hernia Repair (Thoracic or Abdominal Approach)	36040	42400	48760	Paediatric Surgery Procedure
1449	PS002	Tracheoesophageal Fistula (Correction Surgery)	36040	42400	48760	Paediatric Surgery Procedure
1450	PS003	Colon Replacement of Oesophagus	29240	34400	39560	Paediatric Surgery Procedure
1451	PS004	Omphalomesenteric Cyst Excision	29240	34400	39560	Paediatric Surgery Procedure
1452	PS005	Omphalomesenteric Duct- Excision	29240	34400	39560	Paediatric Surgery Procedure
1453	PS006	Omphalocele 1st Stage (Hernia Repair)	23800	28000	32200	Paediatric Surgery Procedure
1454	PS007	Omphalocele 2nd Stage (Hernia Repair)	23800	28000	32200	Paediatric Surgery Procedure
1455	PS008	Gastroschisis Repair	29240	34400	39560	Paediatric Surgery Procedure
1456	PS009	Inguinal Herniotomy	23800	28000	32200	Paediatric Surgery Procedure
1457	PS010	Congenital Hydrocele	23800	28000	32200	Paediatric Surgery Procedure

CGHS rates for Tier III (Z City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1458	PS011	Hydrocele of Cord	18700	22000	25300	Paediatric Surgery Procedure
1459	PS012	Torsion Testis Operation	23800	28000	32200	Paediatric Surgery Procedure
1460	PS013	Congenital Pyloric Stenosis- operation	23800	28000	32200	Paediatric Surgery Procedure
1461	PS014	Duodenal Atresia Operation	29240	34400	39560	Paediatric Surgery Procedure
1462	PS015	Pancreatic Ring Operation	36040	42400	48760	Paediatric Surgery Procedure
1463	PS016	Meconium Ileus Operation	29240	34400	39560	Paediatric Surgery Procedure
1464	PS017	Malrotation of Intestines Operation	29240	34400	39560	Paediatric Surgery Procedure
1465	PS018	Rectal Biopsy (Megacolon)	13600	16000	18400	Paediatric Surgery Procedure
1466	PS019	Colostomy Transverse	29240	34400	39560	Paediatric Surgery Procedure
1467	PS020	Colostomy Left Iliac	29240	34400	39560	Paediatric Surgery Procedure
1468	PS021	Abdominal Perineal Pull Through (Hirschsprung's Disease)	36040	42400	48760	Paediatric Surgery Procedure
1469	PS022	Imperforate Anus Low Anomaly -Cut Back Operation	18700	22000	25300	Paediatric Surgery Procedure
1470	PS023	Imperforate Anus Low Anomaly - Perineal Anoplasty	23800	28000	32200	Paediatric Surgery Procedure
1471	PS024	Imperforate Anus High Anomaly -Sacroabdomino Perineal Pull Through	36040	42400	48760	Paediatric Surgery Procedure

CGHS rates for Tier III (Z City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1472	PS025	Imperforate Anus High Anomaly - Closure of Colostomy	23800	28000	32200	Paediatric Surgery Procedure
1473	PS026	Intussusception Operation	29240	34400	39560	Paediatric Surgery Procedure
1474	PS027	Choledochoduodenostomy for Atresia of Extra Hepatic Biliary Duct	36040	42400	48760	Paediatric Surgery Procedure
1475	PS028	Operation of Choledochal Cyst	36040	42400	48760	Paediatric Surgery Procedure
1476	PS029	Nephrectomy for -Pyonephrosis	29240	34400	39560	Paediatric Surgery Procedure
1477	PS030	Nephrectomy for - Hydronephrosis	29240	34400	39560	Paediatric Surgery Procedure
1478	PS031	Sacro-Coccygeal Teratoma Excision	29240	34400	39560	Paediatric Surgery Procedure
1479	PS032	Congenital Atresia & Stenosis of Small Intestine	36040	42400	48760	Paediatric Surgery Procedure
1480	PS033	Malrotation & Volvulus of the Midgut	29240	34400	39560	Paediatric Surgery Procedure
1481	PS034	Excision of Meckel’s Deverticulum	29240	34400	39560	Paediatric Surgery Procedure
1482	OG001	Non Stress Test	1020	1200	1200	Obstetrics Investigation
1483	OG002	Normal delivery with or without Episiotomy & P. repair/ forceps delivery /Vacuum delivery/assisted breech delivery including Routine New Born Care	23800	28000	28000	Obstetrics And Gynaecology Procedure
1484	OG003	Normal Delivery of High Risk Pregnancy(Preeclampsia/Eclapsia/GDM/Cardiac/Vascular/Renal/Pulmonary/Twin Pregnancy/RA/SLE/IVF Conception/Severe Anaemia,)	29240	34400	34400	Obstetrics And Gynaecology Procedure

CGHS rates for Tier III (Z City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1485	OG004	Caesarean Section(CS) with or without Sterilization including Routine New Born Care	36040	42400	42400	Obstetrics And Gynaecology Procedure
1486	OG005	Caesarian Delivery of High Risk Pregnancy(Preeclampsia/Eclapsia/GDM/Cardiac/Vascular/Renal/Pulmonary/Twin Pregnancy/RA/SLE/IVF Conception/Severe Anaemia)	42840	50400	50400	Obstetrics And Gynaecology Procedure
1487	OG006	Rupture Uterus Closure & Repair with Tubal Ligation	29240	34400	34400	Obstetrics And Gynaecology Procedure
1488	OG007	Perforation of Uterus after D/E Laparotomy & Closure	13600	16000	16000	Obstetrics And Gynaecology Procedure
1489	OG008	Laparotomy for Ectopic Pregnancy	23800	28000	28000	Obstetrics And Gynaecology Procedure
1490	OG009	Laparotomy peritonitis Lavage and Drainage	23800	28000	28000	Obstetrics And Gynaecology Procedure
1491	OG010	Ovarian Cystectomy - Laparoscopic.	29240	34400	34400	Obstetrics And Gynaecology Procedure
1492	OG011	Ovarian Cystectomy - Laparotomy.	23800	28000	28000	Obstetrics And Gynaecology Procedure
1493	OG012	Laparoscopic Broad Ligament Hematoma Drainage with repair	9112	10720	10720	Obstetrics And Gynaecology Procedure
1494	OG013	Exploration of perineal Haematoma & Repair	9112	10720	10720	Obstetrics And Gynaecology Procedure
1495	OG014	Exploration of abdominal Haematoma (after laparotomy/ LSCS)	18700	22000	22000	Obstetrics And Gynaecology Procedure
1496	OG015	Manual Removal of Placenta	6256	7360	7360	Obstetrics And Gynaecology Procedure
1497	OG016	Examination under anaesthesia (EUA)	3400	4000	4000	Obstetrics And Gynaecology Procedure

CGHS rates for Tier III (Z City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1498	OG017	Burst-Abdomen Repair	23800	28000	28000	Obstetrics And Gynaecology Procedure
1499	OG018	Gaping Perineal Wound Secondary Suturing	3400	4000	4000	Obstetrics And Gynaecology Procedure
1500	OG019	Gaping Abdominal Wound Secondary Suturing	5780	6800	6800	Obstetrics And Gynaecology Procedure
1501	OG020	Complete Perineal Tear-Repair	6256	7360	7360	Obstetrics And Gynaecology Procedure
1502	OG021	Pelvic Floor Repair(Rectocele +/- Cystocele +/- Enterocele)	23800	28000	28000	Obstetrics And Gynaecology Procedure
1503	OG022	Suction Evacuation Vesicular Mole	18700	22000	22000	Obstetrics And Gynaecology Procedure
1504	OG023	Colpotomy/Post-Coital Tear Repair	6256	7360	7360	Obstetrics And Gynaecology Procedure
1505	OG024	Excision of urethral carbuncle	9112	10720	10720	Obstetrics And Gynaecology Procedure
1506	OG025	Shirodkar/ McDonald stitch//Cervical Stitch(Cerclage)	9112	10720	10720	Obstetrics And Gynaecology Procedure
1507	OG026	Abdominal Hysterectomy with or without salpingo-oophorectomy	29240	34400	34400	Obstetrics And Gynaecology Procedure
1508	OG027	Non-descent Vaginal Hysterectomy (NDVH) with or without BSO	29240	34400	34400	Obstetrics And Gynaecology Procedure
1509	OG028	Vaginal Hysterectomy (including of BSO) with or without repairs	29240	34400	34400	Obstetrics And Gynaecology Procedure
1510	OG029	Myomectomy -laparotomy	23800	28000	28000	Obstetrics And Gynaecology Procedure
1511	OG030	Myomectomy -laparoscopic	29240	34400	34400	Obstetrics And Gynaecology Procedure

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Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1512	OG031	Vaginoplasty	29240	34400	34400	Obstetrics And Gynaecology Procedure
1513	OG032	Vulvectomy -Simple	23800	28000	28000	Obstetrics And Gynaecology Procedure
1514	OG033	Rectovaginal Fistula (RVF) Repair	29240	34400	34400	Obstetrics And Gynaecology Procedure
1515	OG034	Manchester/Fothergill's operation	23800	28000	28000	Obstetrics And Gynaecology Procedure
1516	OG035	Shirodkar's sling Operation or other sling operations for prolapse uterus	13600	16000	16000	Obstetrics And Gynaecology Procedure
1517	OG036	Laparoscopic sling operations for prolapse uterus	29240	34400	34400	Obstetrics And Gynaecology Procedure
1518	OG037	Dilatation and Curettage(diagnostic/therapeutic) with or without Polypectomy	9112	10720	10720	Obstetrics And Gynaecology Procedure
1519	OG038	Cervical Biopsy	6256	7360	7360	Obstetrics And Gynaecology Procedure
1520	OG039	Transcervical/Hysteroscopic Polypectomy	9112	10720	10720	Obstetrics And Gynaecology Procedure
1521	OG040	Excision of Vaginal Cyst/Bartholin Cyst/Gartner Cyst	6256	7360	7360	Obstetrics And Gynaecology Procedure
1522	OG041	Excision of Vaginal/Uterus Septum	13600	16000	16000	Obstetrics And Gynaecology Procedure
1523	OG042	Diagnostic hysterolaparoscopy(DHL) with or without chromopertubation/Adhesiolysis/ovarian drilling	13600	16000	16000	Obstetrics And Gynaecology Procedure
1524	OG043	Laparoscopy Sterilization/Laparoscopic tubal occlusion(LTO)	18700	22000	22000	Obstetrics And Gynaecology Procedure
1525	OG044	Laparoscopically Assisted Vaginal Hysterectomy (LAVH) with or without BSO	42840	50400	50400	Obstetrics And Gynaecology Procedure

CGHS rates for Tier III (Z City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1526	OG045	Balloon Tamponade for Post Partum Haemorrhage/Conservative management of PPH(Atonic/traumatic PPH)	5780	6800	6800	Obstetrics And Gynaecology Procedure
1527	OG046	Total Laparoscopic Hysterectomy with or without BSO	42840	50400	50400	Obstetrics And Gynaecology Procedure
1528	OG047	Laparoscopic Treatment of Ectopic Pregnancy-Milking/Salpingotomy/Salpingectomy	29240	34400	34400	Obstetrics And Gynaecology Procedure
1529	OG048	Conisation of cervix/Chemical Cautery of Cervical Ectopy/Erosion	6256	7360	7360	Obstetrics And Gynaecology Procedure
1530	OG049	Diagnostic hysteroscopy with or without polypectomy/endometrial curettage	13600	16000	16000	Obstetrics And Gynaecology Procedure
1531	OG050	Laparotomy recanalization of Fallopian tubes-(Tuboplasty)	36040	42400	42400	Obstetrics And Gynaecology Procedure
1532	OG051	Laparoscopic recanalization of Fallopian tubes-(Tuboplasty)	36040	42400	42400	Obstetrics And Gynaecology Procedure
1533	OG052	Colposcopy	3400	4000	4000	Obstetrics And Gynaecology Procedure
1534	OG053	Inversion of Uterus – Vaginal Reposition	4080	4800	4800	Obstetrics And Gynaecology Procedure
1535	OG054	Inversion of Uterus – Abdominal Reposition	4080	4800	4800	Obstetrics And Gynaecology Procedure
1536	OG055	Vaginal Vesicovaginal Fistula (VVF) Repair	42840	50400	50400	Obstetrics And Gynaecology Procedure
1537	OG056	Interventional Ultrasonography- Chorionic villus sampling (CVS)	3400	4000	4000	Obstetrics And Gynaecology Procedure
1538	OG057	Amniocentesis	9112	10720	10720	Obstetrics And Gynaecology Procedure
1539	OG058	Thermal balloon ablation.	23800	28000	28000	Obstetrics And Gynaecology Procedure

CGHS rates for Tier III (Z City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1540	OG059	Ultrasonographic myolysis	18700	22000	22000	Obstetrics And Gynaecology Procedure
1541	OG060	Vaginal/Cervical Myomectomy	29240	34400	34400	Obstetrics And Gynaecology Procedure
1542	OG061	Intra Uterine Insemination	3400	4000	4000	Obstetrics And Gynaecology Procedure
1543	OG062	Intracytoplasmic sperm injection (ICSI)	13600	16000	16000	Obstetrics And Gynaecology Procedure
1544	OG063	Laparotomy abdominal sacro-colpopexy	36040	42400	42400	Obstetrics And Gynaecology Procedure
1545	OG064	Vaginal Colpopexy/colpopexy-abdominal	29240	34400	34400	Obstetrics And Gynaecology Procedure
1546	OG065	Laparoscopic abdominal colpopexy/sacro-colpopexy	36040	42400	42400	Obstetrics And Gynaecology Procedure
1547	OG066	Endometrial aspiration cytology/biopsy (including Pipelle Charges)	2040	2400	2400	Obstetrics And Gynaecology Procedure
1548	OG067	Laparoscopic treatment for stress incontinence	29240	34400	34400	Obstetrics And Gynaecology Procedure
1549	OG068	Transvaginal tapes for Stress incontinence	23800	28000	28000	Obstetrics And Gynaecology Procedure
1550	OG069	Trans-obturator tapes for Stress incontinence	29240	34400	34400	Obstetrics And Gynaecology Procedure
1551	OG070	Interventional radiographic arterial embolization/Uterine artery embolization(UAE)	23800	28000	28000	Obstetrics And Gynaecology Procedure
1552	OG071	Internal Iliac Artery ligation	5780	6800	6800	Obstetrics And Gynaecology Procedure
1553	OG072	Surgical management of PPH (Uterine compression stitches/stepwise devascularisation)/peripartum hysterectomy	13600	16000	16000	Obstetrics And Gynaecology Procedure

CGHS rates for Tier III (Z City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1554	OG073	Intra-uterine fetal blood transfusion	36040	42400	42400	Obstetrics And Gynaecology Procedure
1555	OG074	Hysteroscopy Transcervical Resection of Endometrium (TCRE)	23800	28000	28000	Obstetrics And Gynaecology Procedure
1556	OG075	Hysteroscopy Removal of Intra-Uterine Contraceptive Device (IUCD)	13600	16000	16000	Obstetrics And Gynaecology Procedure
1557	OG076	hysteroscopic resection of uterine septum	23800	28000	28000	Obstetrics And Gynaecology Procedure
1558	OG077	Diagnostic Hysteroscopy with or without endometrial Biopsy	13600	16000	16000	Obstetrics And Gynaecology Procedure
1559	OG078	Sterilization (minilap)-post partum/post abortion	6256	7360	7360	Obstetrics And Gynaecology Procedure
1560	OG079	Interval Sterilization(minilap)-BAT / Male Sterilization(Vasectomy)	13600	16000	16000	Obstetrics And Gynaecology Procedure
1561	OG080	Medical Termination of Pregnancy (MTP)- 1st Trimester with Medicine /Manual Vacuum Aspiration /Check Curettage	9112	10720	10720	Obstetrics And Gynaecology Procedure
1562	OG081	Medical Termination of Pregnancy (MTP) - 2nd Trimester /Suction and Evacuation/Dilatation and Curettage/Dilatation and expulsion	13600	16000	16000	Obstetrics And Gynaecology Procedure
1563	OG082	Insertion of IUD/IUCD/Pessary	2720	3200	3200	Obstetrics And Gynaecology Procedure
1564	OG083	Removal of IUD/IUCD/Pessary	680	800	800	Obstetrics And Gynaecology Procedure
1565	NU001	Ultrasound guided kidney Biopsy	6256	7360	7360	Nephrology And Urology - Biopsy
1566	NU002	Testicular Biopsy	9112	10720	10720	Nephrology And Urology - Biopsy
1567	NU003	Transrectal Ultrasound (TRUS) guided prostate biopsy	6256	7360	7360	Nephrology And Urology - Biopsy

CGHS rates for Tier III (Z City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1568	NU004	Uroflow Study (Uroflowmetry)	680	800	800	Nephrology And Urology Investigation
1569	NU005	Urodynamic Study (Cystometry)	2040	2400	2400	Nephrology And Urology Investigation
1570	NU006	Voiding-cysto-urethrogram and retrograde urethrogram (Nephrostogram)	5780	6800	6800	Nephrology And Urology Investigation
1571	NU007	Fistulogram for Arteriovenous Fistula	6256	7360	7360	Nephrology And Urology Investigation
1572	NU008	Partial Nephrectomy -open	29240	34400	39560	Nephrology And Urology Procedure
1573	NU009	Partial Nephrectomy-Laparoscopic/Endoscopic	36040	42400	48760	Nephrology And Urology Procedure
1574	NU010	Nephrectomy Simple -Open	42840	50400	57960	Nephrology And Urology Procedure
1575	NU011	Laparoscopic Nephrectomy	42840	50400	57960	Nephrology And Urology Procedure
1576	NU012	Nephrolithotomy -open	29240	34400	39560	Nephrology And Urology Procedure
1577	NU013	Nephrolithotomy -Laparoscopic/endoscopic	36040	42400	48760	Nephrology And Urology Procedure
1578	NU014	Pyelolithotomy-open	42840	50400	57960	Nephrology And Urology Procedure
1579	NU015	Pyelolithotomy -Laparoscopic/endoscopic	36040	42400	48760	Nephrology And Urology Procedure
1580	NU016	Operations for Hydronephrosis -pyeloplasty open	36040	42400	48760	Nephrology And Urology Procedure
1581	NU017	Operations for Hydronephrosis -pyeloplasty Lap/endoscopic	42840	50400	57960	Nephrology And Urology Procedure

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Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1582	NU018	Operations for Hydronephrosis Endopyelotomy antegrade	29240	34400	39560	Nephrology And Urology Procedure
1583	NU019	Operations for Hydronephrosis Endopyelotomy retrograde	29240	34400	39560	Nephrology And Urology Procedure
1584	NU020	Operations for Hydronephrosis ureterocalicostomy	29240	34400	39560	Nephrology And Urology Procedure
1585	NU021	Operations for Hydronephrosis-Ileal ureter	36040	42400	48760	Nephrology And Urology Procedure
1586	NU022	Open Drainage of Perinephric Abscess	23800	28000	32200	Nephrology And Urology Procedure
1587	NU023	Percutaneous Drainage of Perinephric Abscess -Ultrasound guided	9112	10720	10720	Nephrology And Urology Procedure
1588	NU024	Cavernostomy	18700	22000	25300	Nephrology And Urology Procedure
1589	NU025	Operations for Cyst of the Kidney -open	29240	34400	39560	Nephrology And Urology Procedure
1590	NU026	Operations for Cyst of the Kidney Lap/endoscopic	36040	42400	48760	Nephrology And Urology Procedure
1591	NU027	Ureterolithotomy -open	29240	34400	39560	Nephrology And Urology Procedure
1592	NU028	Ureterolithotomy-Lap/Endoscopic	36040	42400	48760	Nephrology And Urology Procedure
1593	NU029	Nephroureterectomy open	36040	42400	48760	Nephrology And Urology Procedure
1594	NU030	Operations for Ureter for -Double Ureters	36040	42400	48760	Nephrology And Urology Procedure
1595	NU031	Operations for Ureter -for Ectopia of Single Ureter	29240	34400	39560	Nephrology And Urology Procedure

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Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1596	NU032	Operations for Vesicoureteral Reflux (VUR) -Open	29240	34400	39560	Nephrology And Urology Procedure
1597	NU033	Operations for Vesicoureteral Reflux (VUR)-Lap/Endoscopic	36040	42400	48760	Nephrology And Urology Procedure
1598	NU034	Operations for Vesicoureteral Reflux (VUR)/ Urinary incontinence with bulking agents	29240	34400	39560	Nephrology And Urology Procedure
1599	NU035	Ureterostomy - Cutaneous	23800	28000	32200	Nephrology And Urology Procedure
1600	NU036	Uretero-Colic anastomosis	29240	34400	39560	Nephrology And Urology Procedure
1601	NU037	Formation of an Ileal Conduit	36040	42400	48760	Nephrology And Urology Procedure
1602	NU038	Ureteric Catheterisation/DJ Stenting	13600	16000	18400	Nephrology And Urology Procedure
1603	NU039	DJ stent removal	6508	7656	7656	Nephrology And Urology Procedure
1604	NU040	Biopsy of Bladder (Cystoscopic) including (Cold Cup Biopsy)	9112	10720	10720	Nephrology And Urology Procedure
1605	NU041	Cysto-Litholapaxy	23800	28000	32200	Nephrology And Urology Procedure
1606	NU042	Operations for Injuries of the Bladder	29240	34400	39560	Nephrology And Urology Procedure
1607	NU043	Suprapubic Drainage (Cystostomy/vesicostomy)	13600	16000	18400	Nephrology And Urology Procedure
1608	NU044	Simple Cystectomy	29240	34400	39560	Nephrology And Urology Procedure
1609	NU045	Diverticulectomy -open	29240	34400	39560	Nephrology And Urology Procedure

CGHS rates for Tier III (Z City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1610	NU046	Diverticulectomy- Lap/Endoscopic	36040	42400	48760	Nephrology And Urology Procedure
1611	NU047	Diverticulectomy -Endoscopic incision of neck	23800	28000	32200	Nephrology And Urology Procedure
1612	NU048	Augmentation Cystoplasty	36040	42400	48760	Nephrology And Urology Procedure
1613	NU049	Operations for Exstrophy of the Bladder- Single stage repair	29240	34400	39560	Nephrology And Urology Procedure
1614	NU050	Operations for Exstrophy of the Bladder- Multistage repair	29240	34400	39560	Nephrology And Urology Procedure
1615	NU051	Operations for Exstrophy of the Bladder- simple cystectomy with urinary diversion	42840	50400	57960	Nephrology And Urology Procedure
1616	NU052	Repair of Ureterocele -Open	29240	34400	39560	Nephrology And Urology Procedure
1617	NU053	Repair of Ureterocele -Lap/Endoscopic	29240	34400	39560	Nephrology And Urology Procedure
1618	NU054	Repair of Ureterocele -Endoscopic incision	23800	28000	32200	Nephrology And Urology Procedure
1619	NU055	Vesicovaginal Fistula (VVF) Repair (Open)	29240	34400	39560	Nephrology And Urology Procedure
1620	NU056	Vesicovaginal Fistula (VVF) Repair (Laparoscopic)	36040	42400	48760	Nephrology And Urology Procedure
1621	NU057	Open Suprapubic Prostatectomy	29240	34400	39560	Nephrology And Urology Procedure
1622	NU058	Open Retropubic Prostatectomy	29240	34400	39560	Nephrology And Urology Procedure
1623	NU059	Transurethral Resection of Prostate (TURP)	42840	50400	57960	Nephrology And Urology Procedure

CGHS rates for Tier III (Z City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1624	NU060	Urethroscopy/ Cystopanendoscopy	9112	10720	10720	Nephrology And Urology Procedure
1625	NU061	Internal urethrotomy -optical	18700	22000	25300	Nephrology And Urology Procedure
1626	NU062	Internal urethrotomy -Core through urethroplasty	29240	34400	39560	Nephrology And Urology Procedure
1627	NU063	Urethral Reconstruction -End to end anastomosis	29240	34400	39560	Nephrology And Urology Procedure
1628	NU064	Urethral Reconstruction - substitution urethroplasty (Transpubic urethroplasty)	36040	42400	48760	Nephrology And Urology Procedure
1629	NU065	Abdomino Perineal urethroplasty	36040	42400	48760	Nephrology And Urology Procedure
1630	NU066	Posterior Urethral Valve fulguration.	23800	28000	32200	Nephrology And Urology Procedure
1631	NU067	Operations for Incontinence of Urine - Male -Open	29240	34400	39560	Nephrology And Urology Procedure
1632	NU068	Operations for Incontinence of Urine - Male -Sling	36040	42400	48760	Nephrology And Urology Procedure
1633	NU069	Operations for Incontinence of Urine - Male-Bulking agent	29240	34400	39560	Nephrology And Urology Procedure
1634	NU070	Operations for Incontinence of Urine - Female -Open	29240	34400	39560	Nephrology And Urology Procedure
1635	NU071	Operations for Incontinence of Urine - Female-Sling	36040	42400	48760	Nephrology And Urology Procedure
1636	NU072	Operations for Incontinence of Urine - Female-Bulking agent	29240	34400	39560	Nephrology And Urology Procedure
1637	NU073	Reduction of Paraphimosis	4080	4800	4800	Nephrology And Urology Procedure

CGHS rates for Tier III (Z City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1638	NU074	Circumcision	9112	10720	10720	Nephrology And Urology Procedure
1639	NU075	Meatotomy	5780	6800	6800	Nephrology And Urology Procedure
1640	NU076	Meatoplasty	9112	10720	10720	Nephrology And Urology Procedure
1641	NU077	Operations for Hypospadias + Chordee Correction	23800	28000	32200	Nephrology And Urology Procedure
1642	NU078	Operations for Hypospadias - Second Stage	29240	34400	39560	Nephrology And Urology Procedure
1643	NU079	Operations for Hypospadias - One Stage Repair	29240	34400	39560	Nephrology And Urology Procedure
1644	NU080	Operations for Crippled Hypospadias	29240	34400	39560	Nephrology And Urology Procedure
1645	NU081	Operations for Epispadias -primary repair	29240	34400	39560	Nephrology And Urology Procedure
1646	NU082	Operations for Epispadias-crippled epispadias	36040	42400	48760	Nephrology And Urology Procedure
1647	NU083	Partial Amputation of the Penis	23800	28000	32200	Nephrology And Urology Procedure
1648	NU084	Total amputation of the Penis	29240	34400	39560	Nephrology And Urology Procedure
1649	NU085	Orchidectomy-Simple	18700	22000	25300	Nephrology And Urology Procedure
1650	NU086	Epididymectomy	13600	16000	18400	Nephrology And Urology Procedure
1651	NU087	Operations for Hydrocele - Unilateral	18700	22000	25300	Nephrology And Urology Procedure

CGHS rates for Tier III (Z City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1652	NU088	Operations for Hydrocele - Bilateral	23800	28000	32200	Nephrology And Urology Procedure
1653	NU089	Operation for Torsion of Testis	18700	22000	25300	Nephrology And Urology Procedure
1654	NU090	Micro-surgical Vasovasostomy /Vaso epididymal anastomosis .	18700	22000	25300	Nephrology And Urology Procedure
1655	NU091	Operations for Varicocele Unilateral Microsurgical	23800	28000	32200	Nephrology And Urology Procedure
1656	NU092	Operations for Varicocele Palomo’s Unilateral -Laparoscopic	23800	28000	32200	Nephrology And Urology Procedure
1657	NU093	Operations for Varicocele Bilateral --Microsurgical	29240	34400	39560	Nephrology And Urology Procedure
1658	NU094	Operations for Varicocele Palomo’s Bilateral - Laparoscopic	29240	34400	39560	Nephrology And Urology Procedure
1659	NU095	Excision of Filarial Scrotum	18700	22000	25300	Nephrology And Urology Procedure
1660	NU096	Kidney Transplantation (related)	254320	299200	344080	Nephrology And Urology Procedure
1661	NU097	Kidney Transplantation (Spousal/ unrelated) Including immunosuppressant therapy	289000	340000	391000	Nephrology And Urology Procedure
1662	NU098	Kidney Transplantation (Cadaver)	238000	280000	322000	Nephrology And Urology Procedure
1663	NU099	ABO incompatible Transplantation	408000	480000	552000	Nephrology And Urology Procedure
1664	NU100	Kidney Transplant Graft Nephrectomy	55760	65600	75440	Nephrology And Urology Procedure
1665	NU101	Donor Nephrectomy (Open)	42840	50400	57960	Nephrology And Urology Procedure

CGHS rates for Tier III (Z City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1666	NU102	Donor Nephrectomy (Laparoscopic)	74800	88000	101200	Nephrology And Urology Procedure
1667	NU103	Post-Transplant Collection drainage for Lymphocele (open)	6256	7360	8464	Nephrology And Urology Procedure
1668	NU104	Post-Transplant Collection drainage for Lymphocele (percutaneous)	9112	10720	12328	Nephrology And Urology Procedure
1669	NU105	Post-Transplant Collection drainage for Lymphocele (Laparoscopic)	13600	16000	18400	Nephrology And Urology Procedure
1670	NU106	Arteriovenous Fistula for Haemodialysis	13600	16000	16000	Nephrology And Urology Procedure
1671	NU107	Arteriovenous Shunt for Haemodialysis	13600	16000	16000	Nephrology And Urology Procedure
1672	NU108	Jugular Catheterization for Haemodialysis	4080	4800	4800	Nephrology And Urology Procedure
1673	NU109	Subclavian Catheterization for Haemodialysis	4080	4800	4800	Nephrology And Urology Procedure
1674	NU110	One Sided (single Lumen) Femoral Catheterization for Haemodialysis	2720	3200	3200	Nephrology And Urology Procedure
1675	NU111	Bilateral (single Lumen) Femoral Catheterization for Haemodialysis	4080	4800	4800	Nephrology And Urology Procedure
1676	NU112	Double Lumen Femoral Catheterization for Haemodialysis	9112	10720	10720	Nephrology And Urology Procedure
1677	NU113	Permcath Insertion excluding the cost of the catheter	5780	6800	6800	Nephrology And Urology Procedure
1678	NU114	Arterio Venous Prosthetic Graft	29240	34400	39560	Nephrology And Urology Procedure
1679	NU115	Single lumen Jugular Catheterization	3400	4000	4000	Nephrology And Urology Procedure

CGHS rates for Tier III (Z City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1680	NU116	Single lumen Subclavian Catheterization	3400	4000	4000	Nephrology And Urology Procedure
1681	NU117	Plasma Exchange/ Plasmapheresis	13600	16000	16000	Nephrology And Urology Procedure
1682	NU118	Continuous Ambulatory Peritoneal Dialysis (CAPD) catheter insertion- Open method	13600	16000	16000	Nephrology And Urology Procedure
1683	NU119	Continuous Ambulatory Peritoneal Dialysis (CAPD) catheter insertion- Schlendinger/ Seldinger method	13600	16000	16000	Nephrology And Urology Procedure
1684	NU120	Sustained low efficiency haemodialysis /haemodialysis	6256	7360	7360	Nephrology And Urology Procedure
1685	NU121	Continuous Veno venous/Arteriovenous Haemofiltration /Haemofiltration/CRRT per day	11560	13600	13600	Nephrology And Urology Procedure
1686	NU122	Haemodialysis / Haemodialysis for Sero negative cases including Dialyser and all other Consumables	1700	2000	2000	Nephrology And Urology Procedure
1687	NU123	Haemodialysis / Haemodialysis for Sero Positive cases including Dialyser and all other Consumables	2040	2400	2400	Nephrology And Urology Procedure
1688	NU124	Acute Peritoneal Dialysis	3604	4240	4240	Nephrology And Urology Procedure
1689	NU125	Peritoneal Dialysis	2448	2880	2880	Nephrology And Urology Procedure
1690	NU126	Fistula stenosis dilation	9112	10720	10720	Nephrology And Urology Procedure
1691	NU127	Slow continuous Ultrafiltration	5780	6800	6800	Nephrology And Urology Procedure
1692	NU128	Percutaneous Nephrolithotomy (PCNL) - Unilateral	36040	42400	48760	Nephrology And Urology Procedure
1693	NU129	Percutaneous Nephrolithotomy (PCNL) - Bilateral	42840	50400	57960	Nephrology And Urology Procedure

CGHS rates for Tier III (Z City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1694	NU130	Endoscopic Bulking agent Inject (including cost of bulking agent)	23800	28000	32200	Nephrology And Urology Procedure
1695	NU131	Nephrostomy -Open	23800	28000	32200	Nephrology And Urology Procedure
1696	NU132	Nephrostomy -Lap/Endoscopic	23800	28000	32200	Nephrology And Urology Procedure
1697	NU133	Ureteric Reimplant for Megaureter/ Vesicoureteric reflux/ureterocele (Open)	29240	34400	39560	Nephrology And Urology Procedure
1698	NU134	Ureteric Reimplant for Megaureter / Vesicoureteric reflux/ ureterocele (Laparoscopic)	29240	34400	39560	Nephrology And Urology Procedure
1699	NU135	Partial Cystectomy	36040	42400	48760	Nephrology And Urology Procedure
1700	NU136	Transurethral Resection of Prostate (TURP) with Cystolithotripsy	42840	50400	57960	Nephrology And Urology Procedure
1701	NU137	Closure of Urethral Fistula	23800	28000	32200	Nephrology And Urology Procedure
1702	NU138	Orchidopexy - Unilateral -Open	23800	28000	32200	Nephrology And Urology Procedure
1703	NU139	Orchidopexy - Unilateral- Lap/Endoscopic	29240	34400	39560	Nephrology And Urology Procedure
1704	NU140	Orchidopexy - Bilateral -Open	29240	34400	39560	Nephrology And Urology Procedure
1705	NU141	Orchidopexy - Bilateral -Lap/Endoscopic	36040	42400	48760	Nephrology And Urology Procedure
1706	NU142	Cystolithotomy -Suprapubic	18700	22000	25300	Nephrology And Urology Procedure
1707	NU143	Endoscopic Removal of Stone in Bladder	23800	28000	32200	Nephrology And Urology Procedure

CGHS rates for Tier III (Z City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1708	NU144	Resection Bladder Neck Endoscopic / Bladder neck incision / transurethral incision on prostrate	29240	34400	39560	Nephrology And Urology Procedure
1709	NU145	Ureteroscopic Surgery	23800	28000	32200	Nephrology And Urology Procedure
1710	NU146	Urethroplasty 1st Stage	29240	34400	39560	Nephrology And Urology Procedure
1711	NU147	Scrotal Exploration	18700	22000	25300	Nephrology And Urology Procedure
1712	NU148	Perineal Urethrostomy	23800	28000	32200	Nephrology And Urology Procedure
1713	NU149	Dilatation of Stricture Urethra under G.A.	3400	4000	4000	Nephrology And Urology Procedure
1714	NU150	Laparoscopic pyelolithotomy	42840	50400	57960	Nephrology And Urology Procedure
1715	NU151	Laparoscopic Pyeloplasty	42840	50400	57960	Nephrology And Urology Procedure
1716	NU152	Laparoscopic surgery for Renal cyst	42840	50400	57960	Nephrology And Urology Procedure
1717	NU153	Laparoscopic ureterolithotomy	42840	50400	57960	Nephrology And Urology Procedure
1718	NU154	Laparoscopic Nephroureterectomy	36040	42400	48760	Nephrology And Urology Procedure
1719	NU155	Extracorporeal Shock Wave Lithotripsy (ESWL)	29240	34400	39560	Nephrology And Urology Procedure
1720	NU156	Diagnostic Cystoscopy	5780	6800	6800	Nephrology And Urology Procedure
1721	NU157	Cystoscopy with Retrograde Catheter -Unilateral/RGP	13600	16000	18400	Nephrology And Urology Procedure

CGHS rates for Tier III (Z City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1722	NU158	Cystoscopy with Retrograde Catheter - Bilateral/RGP	18700	22000	25300	Nephrology And Urology Procedure
1723	NU159	Retrograde Intrarenal Surgery (RIRS)/ Flexible Ureteroscopy	42840	50400	57960	Nephrology And Urology Procedure
1724	NU160	Holmium YAG Prostate Surgery	51680	60800	69920	Nephrology And Urology Procedure
1725	NU161	Holmium YAG Optical Internal Urethrotomy (OIU)	29240	34400	39560	Nephrology And Urology Procedure
1726	NU162	Holmium YAG Core through internal Urethrotomy	36040	42400	48760	Nephrology And Urology Procedure
1727	NU163	Holmium YAG Stone Lithotripsy	51680	60800	69920	Nephrology And Urology Procedure
1728	NU164	Green Light Laser for Prostate	51680	60800	69920	Nephrology And Urology Procedure
1729	NU165	Cystoscopic Botulinum Toxin Injection (Over active bladder/ Neurogenic bladder) -excluding cost of drug	9112	10720	10720	Nephrology And Urology Procedure
1730	NU166	Peyronie’s Disease – Plaque excision with grafting	23800	28000	32200	Nephrology And Urology Procedure
1731	NU167	Prosthetic Surgery for urinary incontinence	29240	34400	39560	Nephrology And Urology Procedure
1732	NU168	Ultrasound Guided Percutaneous Nephrostomy (PCN)	13600	16000	16000	Nephrology And Urology Procedure
1733	NI001	Electroencephalogram (EEG)/ Video EEG	680	800	800	Neurology Investigation
1734	NI002	Electromyography (EMG)	1020	1200	1200	Neurology Investigation
1735	NI003	Nerve conduction velocity (NCV), -two or more limbs	1020	1200	1200	Neurology Investigation
1736	NI004	Repetitive nerve stimulation (RNS)-Decremental response (before and after neostigmine)	1020	1200	1200	Neurology Investigation
1737	NI005	Repetitive nerve stimulation (RNS)-Incremental response	1020	1200	1200	Neurology Investigation

CGHS rates for Tier III (Z City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1738	NI006	Somatosensory evoked potentials (SSEP)	1020	1200	1200	Neurology Investigation
1739	NI007	Polysomnography (PSG) / Level I Sleep study including Room Rent and Titration	6120	7200	7200	Neurology Investigation
1740	NI008	Brachial plexus study	1020	1200	1200	Neurology Investigation
1741	NI009	RNS(Repetitive Nerve stimulation)	1088	1280	1280	Neurology Investigation
1742	NS001	Lumbar Pressure Monitoring	6256	7360	7360	Neuro-Surgery Investigation
1743	NS002	Brain Mapping	18700	22000	22000	Neuro-Surgery Investigation
1744	NS003	Nerve Biopsy	13600	16000	16000	Neuro-Surgery Biopsy
1745	NS004	Brain Biopsy	29240	34400	34400	Neuro-Surgery Biopsy
1746	NS005	Craniotomy and Evacuation of Haematoma -Subdural	55760	65600	75440	Neuro-Surgery Procedure
1747	NS006	Craniotomy and Evacuation of Haematoma - Extradural	55760	65600	75440	Neuro-Surgery Procedure
1748	NS007	Evacuation /Excision of Brain Abscess by craniotomy	55760	65600	75440	Neuro-Surgery Procedure
1749	NS008	Excision of Lobe (Frontal Temporal Cerebellum etc.)	55760	65600	75440	Neuro-Surgery Procedure
1750	NS009	Twist Drill Craniostomy	29240	34400	39560	Neuro-Surgery Procedure
1751	NS010	Subdural Tapping	9112	10720	12328	Neuro-Surgery Procedure
1752	NS011	Ventricular Tapping	23800	28000	32200	Neuro-Surgery Procedure
1753	NS012	Brain Abscess Tapping	18700	22000	25300	Neuro-Surgery Procedure
1754	NS013	Placement of Intracranial pressure (ICP) Monitor	18700	22000	25300	Neuro-Surgery Procedure
1755	NS014	Skull Traction Application	6256	7360	8464	Neuro-Surgery Procedure
1756	NS015	Vascular Malformations	65960	77600	89240	Neuro-Surgery Procedure
1757	NS016	Meningoencephalocele excision and repair	51680	60800	69920	Neuro-Surgery Procedure
1758	NS017	Meningomyelocele Repair	42840	50400	57960	Neuro-Surgery Procedure
1759	NS018	CSF Rhinorrhoea Repair	42840	50400	57960	Neuro-Surgery Procedure
1760	NS019	Cranioplasty	42840	50400	57960	Neuro-Surgery Procedure
1761	NS020	Anterior Cervical Discectomy	42840	50400	57960	Neuro-Surgery Procedure
1762	NS021	Brachial Plexus Exploration and neurotization	42840	50400	57960	Neuro-Surgery Procedure
1763	NS022	Median Nerve Decompression	29240	34400	39560	Neuro-Surgery Procedure
1764	NS023	Peripheral Nerve Surgery – Major	42840	50400	57960	Neuro-Surgery Procedure

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Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1765	NS024	Peripheral Nerve Surgery Minor	36040	42400	48760	Neuro-Surgery Procedure
1766	NS025	Ventriculoatrial /Ventriculoperitoneal Shunt	36040	42400	48760	Neuro-Surgery Procedure
1767	NS026	Anterior Cervical Spine Surgery with fusion	51680	60800	69920	Neuro-Surgery Procedure
1768	NS027	Anterio Lateral Decompression of spine	55760	65600	75440	Neuro-Surgery Procedure
1769	NS028	Cervical or Dorsal or Lumbar Laminectomy	36040	42400	48760	Neuro-Surgery Procedure
1770	NS029	Combined Trans-Oral Surgery & Craniovertebral (CV) Junction Fusion	42840	50400	57960	Neuro-Surgery Procedure
1771	NS030	Craniovertebral Junction (CVJ) Fusion procedures	51680	60800	69920	Neuro-Surgery Procedure
1772	NS031	Depressed Fracture Elevation	36040	42400	48760	Neuro-Surgery Procedure
1773	NS032	Lumbar Discectomy	42840	50400	57960	Neuro-Surgery Procedure
1774	NS033	Endarterectomy (Carotid)	42840	50400	57960	Neuro-Surgery Procedure
1775	NS034	Radiofrequency (RF) Lesion for Trigeminal Neuralgia	36040	42400	48760	Neuro-Surgery Procedure
1776	NS035	Spasticity Surgery	36040	42400	48760	Neuro-Surgery Procedure
1777	NS036	Spinal Fusion Procedure	51680	60800	69920	Neuro-Surgery Procedure
1778	NS037	Spinal Bifida Surgery Major	42840	50400	57960	Neuro-Surgery Procedure
1779	NS038	Spinal Bifida Surgery Minor	36040	42400	48760	Neuro-Surgery Procedure
1780	NS039	Stereotaxic Procedures- biopsy/aspiration of cyst	29240	34400	39560	Neuro-Surgery Procedure
1781	NS040	Trans Sphenoidal Surgery	36040	42400	48760	Neuro-Surgery Procedure
1782	NS041	Trans Oral Surgery	36040	42400	48760	Neuro-Surgery Procedure
1783	NS042	Implantation of Deep Brain Stimulation (DBS) -One electrode (as per guidelines mentioned in OM.No.Z15025/44/2023/DIR/CGHS/EHS Dated 09.09.2024)	42840	50400	57960	Neuro-Surgery Procedure
1784	NS043	Implantation of Deep Brain Stimulation (DBS) -two electrodes (as per guidelines mentioned in OM.No.Z15025/44/2023/DIR/CGHS/EHS Dated 09.09.2024)	51680	60800	69920	Neuro-Surgery Procedure
1785	NS044	Endoscopic aqueductoplasty	36040	42400	48760	Neuro-Surgery Procedure
1786	NS045	Facial nerve reconstruction	51680	60800	69920	Neuro-Surgery Procedure
1787	NS046	Carotid Stenting excluding the cost of Stent	42840	50400	57960	Neuro-Surgery Procedure
1788	NS047	Cervical disc arthroplasty	42840	50400	57960	Neuro-Surgery Procedure

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Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1789	NS048	Lumbar disc arthroplasty	36040	42400	48760	Neuro-Surgery Procedure
1790	NS049	Corpus callostomy for Epilepsy	55760	65600	75440	Neuro-Surgery Procedure
1791	NS050	Hemispherotomy for Epilepsy	55760	65600	75440	Neuro-Surgery Procedure
1792	NS051	Endoscopic CSF rhinorrhoea repair	36040	42400	48760	Neuro-Surgery Procedure
1793	NS052	Burr hole evacuation of chronic subdural haematoma	42840	50400	57960	Neuro-Surgery Procedure
1794	NS053	Epilepsy surgery other than at Code No. NS049 and NS050	65960	77600	89240	Neuro-Surgery Procedure
1795	NS054	Radiofrequency (RF) lesion for facet joint pain syndrome	42840	50400	57960	Neuro-Surgery Procedure
1796	NS055	Cervical Laminoplasty	51680	60800	69920	Neuro-Surgery Procedure
1797	NS056	Lateral mass C1-C2 screw fixation	51680	60800	69920	Neuro-Surgery Procedure
1798	NS057	Microsurgical decompression for Trigeminal nerve	42840	50400	57960	Neuro-Surgery Procedure
1799	NS058	Microsurgical decompression for hemifacial spasm	42840	50400	57960	Neuro-Surgery Procedure
1800	NS059	Extracranial-Intracranial Bypass Procedures (EC-IC) bypass procedures	42840	50400	57960	Neuro-Surgery Procedure
1801	NS060	Image Guided Craniotomy	55760	65600	75440	Neuro-Surgery Procedure
1802	NS061	Baclofen pump implantation lesioning for movement disorder including Parkinsonism/Spinal Cord Stimulator Implantation	51680	60800	69920	Neuro-Surgery Procedure
1803	NS062	Programmable Ventriculo-Peritoneal (VP) shunt excluding the cost of the Device	42840	50400	57960	Neuro-Surgery Procedure
1804	NS063	Endoscopic Sympathectomy	42840	50400	57960	Neuro-Surgery Procedure
1805	NS064	Lumbar Puncture	2040	2400	2400	Neuro-Surgery Procedure
1806	NS065	External Ventricular Drainage (EVD)	18700	22000	25300	Neuro-Surgery Procedure
1807	NS066	Endoscopic 3rd ventriculostomy	36040	42400	48760	Neuro-Surgery Procedure
1808	NS067	Endoscopic cranial surgery/Biopsy/aspiration	42840	50400	57960	Neuro-Surgery Procedure
1809	NS068	Endoscopic discectomy (Lumbar, Cervical)	42840	50400	57960	Neuro-Surgery Procedure
1810	NS069	Aneurysm coiling (Endovascular)	42840	50400	57960	Neuro-Surgery Procedure
1811	NS070	Surgery for Skull Fractures	51680	60800	69920	Neuro-Surgery Procedure
1812	NS071	Carpel Tunnel decompression	29240	34400	39560	Neuro-Surgery Procedure
1813	NS072	Clipping of intracranial aneurysm	55760	65600	75440	Neuro-Surgery Procedure

CGHS rates for Tier III (Z City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1814	NS073	Surgery for intracranial Arteriovenous malformations (AVM)	65960	77600	89240	Neuro-Surgery Procedure
1815	NS074	Foramen magnum decompression for Chiari Malformation	87720	103200	118680	Neuro-Surgery Procedure
1816	NS075	Dorsal column stimulation for backache in failed back syndrome	42840	50400	57960	Neuro-Surgery Procedure
1817	NS076	Surgery for recurrent disc prolapse/epidural fibrosis	42840	50400	57960	Neuro-Surgery Procedure
1818	NS077	Decompressive craniotomy for hemispherical acute subdural haematoma/ brain swelling/large infarct	55760	65600	75440	Neuro-Surgery Procedure
1819	NS078	Intra-arterial thrombolysis with Tissue Plasminogen Activator (TPA) (for ischemic stroke)	23800	28000	32200	Neuro-Surgery Procedure
1820	NS079	Stereotactic aspiration of intracerebral haematoma	51680	60800	69920	Neuro-Surgery Procedure
1821	NS080	Endoscopic aspiration of intracerebellar haematoma	51680	60800	69920	Neuro-Surgery Procedure
1822	NS081	Stereotactic Radiosurgery for brain pathology (X knife/Gamma) - ONE session	36040	42400	48760	Neuro-Surgery Procedure
1823	NS082	Stereotactic Radiosurgery for brain pathology (X knife / Gamma knife -Two or more sessions)	51680	60800	69920	Neuro-Surgery Procedure
1824	NS083	Battery Placement for Deep Brain Stimulation (DBS)	23800	28000	32200	Neuro-Surgery Procedure
1825	NS084	Baclofen pump implantation for spasticity/Intra-thecal Pump Implantation	23800	28000	32200	Neuro-Surgery Procedure
1826	NS085	Surgery for Scalp Arteriovenous Malformations (AVMs)	42840	50400	57960	Neuro-Surgery Procedure
1827	NS086	Kyphoplasty excluding the cost of implants	36040	42400	48760	Neuro-Surgery Procedure
1828	NS087	Balloon Kyphoplasty	42840	50400	57960	Neuro-Surgery Procedure
1829	NS088	Lesioning procedures for Parkinson’s disease,Dystonia etc.	36040	42400	48760	Neuro-Surgery Procedure
1830	OR001	Joints Aspiration	1088	1280	1280	Orthopaedics Procedure
1831	OR002	Plaster Work	3400	4000	4000	Orthopaedics Procedure
1832	OR003	Fingers (post slab)	680	800	800	Orthopaedics Procedure
1833	OR004	Fingers full plaster	1020	1200	1200	Orthopaedics Procedure
1834	OR005	Colles Fracture - Below elbow	4080	4800	4800	Orthopaedics Procedure
1835	OR006	Colles Fracture - Full plaster	3060	3600	3600	Orthopaedics Procedure
1836	OR007	Colles fracture Ant. Or post. slab	2040	2400	2400	Orthopaedics Procedure

CGHS rates for Tier III (Z City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1837	OR008	Above elbow full plaster	2720	3200	3200	Orthopaedics Procedure
1838	OR009	Above Knee post-slab	2040	2400	2400	Orthopaedics Procedure
1839	OR010	Below Knee full plaster	2720	3200	3200	Orthopaedics Procedure
1840	OR011	Below Knee post-slab	3400	4000	4000	Orthopaedics Procedure
1841	OR012	Tube Plaster (or plaster cylinder)	3400	4000	4000	Orthopaedics Procedure
1842	OR013	Above knee full plaster	3400	4000	4000	Orthopaedics Procedure
1843	OR014	Above knee full slab	2380	2800	2800	Orthopaedics Procedure
1844	OR015	Minerva Jacket	6256	7360	7360	Orthopaedics Procedure
1845	OR016	Plaster Jacket	4080	4800	4800	Orthopaedics Procedure
1846	OR017	Shoulder spica	5780	6800	6800	Orthopaedics Procedure
1847	OR018	Single Hip spica	4760	5600	5600	Orthopaedics Procedure
1848	OR019	Double Hip spica	5780	6800	6800	Orthopaedics Procedure
1849	OR020	Strapping of Finger	340	400	400	Orthopaedics Procedure
1850	OR021	Strapping of Toes	408	480	480	Orthopaedics Procedure
1851	OR022	Strapping of Wrist	510	600	600	Orthopaedics Procedure
1852	OR023	Strapping of Elbow	1020	1200	1200	Orthopaedics Procedure
1853	OR024	Strapping of Knee	680	800	800	Orthopaedics Procedure
1854	OR025	Strapping of Ankle	544	640	640	Orthopaedics Procedure
1855	OR026	Strapping of Chest	1020	1200	1200	Orthopaedics Procedure
1856	OR027	Strapping of Shoulder	1020	1200	1200	Orthopaedics Procedure
1857	OR028	Figure of 8 bandage	680	800	800	Orthopaedics Procedure
1858	OR029	Collar and cuff sling	340	400	400	Orthopaedics Procedure
1859	OR030	Ball bandage	544	640	640	Orthopaedics Procedure
1860	OR031	Application of POP Casts for Upper & Lower Limbs	4080	4800	4800	Orthopaedics Procedure
1861	OR032	Application of Functional Cast Brace	2720	3200	3200	Orthopaedics Procedure
1862	OR033	Application of Skin Traction	1700	2000	2000	Orthopaedics Procedure
1863	OR034	Application of Skeletal Tractions	4080	4800	4800	Orthopaedics Procedure
1864	OR035	Bandage & Strappings for Fractures	1360	1600	1600	Orthopaedics Procedure

CGHS rates for Tier III (Z City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1865	OR036	Aspiration & Intra Articular Injections	3400	4000	4000	Orthopaedics Procedure
1866	OR037	Application of POP Spices & Jackets	4080	4800	4800	Orthopaedics Procedure
1867	OR038	Close Reduction of Fractures of Limb & POP	9112	10720	10720	Orthopaedics Procedure
1868	OR039	Open Reduction & Internal Fixation (ORIF) of Fingers & Toes	13600	16000	16000	Orthopaedics Procedure
1869	OR040	Open Reduction of fracture of Long Bones of Upper / Lower Limb -Nailing & External Fixation	29240	34400	34400	Orthopaedics Procedure
1870	OR041	Open Reduction of fracture of Long Bones of Upper /Lower Limb -AO Procedures	29240	34400	34400	Orthopaedics Procedure
1871	OR042	Tension Band Wirings	18700	22000	22000	Orthopaedics Procedure
1872	OR043	Bone Grafting	18700	22000	22000	Orthopaedics Procedure
1873	OR044	Excision or other Operations for Scaphoid Fractures	23800	28000	28000	Orthopaedics Procedure
1874	OR045	Sequestrectomy & Saucerisation	23800	28000	28000	Orthopaedics Procedure
1875	OR046	Sequestrectomy & Saucerizations -Arthrotomy	23800	28000	28000	Orthopaedics Procedure
1876	OR047	Multiple Pinning Fracture Neck Femur	36040	42400	42400	Orthopaedics Procedure
1877	OR048	Plate Fixations for Fracture Neck Femur	36040	42400	42400	Orthopaedics Procedure
1878	OR049	AO Compression Procedures for Fracture Neck Femur	36040	42400	42400	Orthopaedics Procedure
1879	OR050	Open Reduction of Fracture Neck Femur Muscle Pedicle Graft and Internal Fixations	36040	42400	42400	Orthopaedics Procedure
1880	OR051	Close Reduction of Dislocations	13600	16000	16000	Orthopaedics Procedure
1881	OR052	Open Reduction of Dislocations	23800	28000	28000	Orthopaedics Procedure
1882	OR053	Open Reduction & Internal Fixation (ORIF) of Fracture Dislocation	29240	34400	34400	Orthopaedics Procedure
1883	OR054	Neurolysis/Nerve repair	29240	34400	34400	Orthopaedics Procedure
1884	OR055	Nerve Repair with Grafting	42840	50400	50400	Orthopaedics Procedure
1885	OR056	Tendon with Transplant or Graft	29240	34400	34400	Orthopaedics Procedure
1886	OR057	Tendon Lengthening/Tendon repair	18700	22000	22000	Orthopaedics Procedure
1887	OR058	Tendon Transfer	23800	28000	28000	Orthopaedics Procedure
1888	OR059	Split Osteotomy and Internal Fixations	36040	42400	42400	Orthopaedics Procedure
1889	OR060	Anterolateral decompression for tuberculosis/ Costo-Transversectomy	29240	34400	34400	Orthopaedics Procedure

CGHS rates for Tier III (Z City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1890	OR061	Anterolateral Decompression and Spine Fusion	42840	50400	50400	Orthopaedics Procedure
1891	OR062	Corrective Osteotomy & Internal Fixation- short bones	23800	28000	28000	Orthopaedics Procedure
1892	OR063	Corrective Osteotomy & Internal Fixation- long bones	29240	34400	34400	Orthopaedics Procedure
1893	OR064	Arthrodesis of - Minor Joints	23800	28000	28000	Orthopaedics Procedure
1894	OR065	Arthrodesis of - Major Joints	29240	34400	34400	Orthopaedics Procedure
1895	OR066	Soft Tissue Operations for Congenital Talipes Equinovarus (CTEV)	23800	28000	28000	Orthopaedics Procedure
1896	OR067	Hemiarthroplasty- Hip	42840	50400	50400	Orthopaedics Procedure
1897	OR068	Hemiarthroplasty- Shoulder	36040	42400	42400	Orthopaedics Procedure
1898	OR069	Operations for Brachial Plexus & Cervical Rib	51680	60800	60800	Orthopaedics Procedure
1899	OR070	Amputations - Below Knee	29240	34400	34400	Orthopaedics Procedure
1900	OR071	Amputations - Below Elbow	23800	28000	28000	Orthopaedics Procedure
1901	OR072	Amputations - Above Knee	36040	42400	42400	Orthopaedics Procedure
1902	OR073	Amputations - Above Elbow	29240	34400	34400	Orthopaedics Procedure
1903	OR074	Amputations - Forequarter	42840	50400	50400	Orthopaedics Procedure
1904	OR075	Amputations -Hind Quarter and Hemipelvectomy	51680	60800	60800	Orthopaedics Procedure
1905	OR076	Disarticulations - Major joint	29240	34400	34400	Orthopaedics Procedure
1906	OR077	Disarticulations - Minor joint	23800	28000	28000	Orthopaedics Procedure
1907	OR078	Arthrography	13600	16000	16000	Orthopaedics Investigation
1908	OR079	Arthroscopy - Diagnostic	23800	28000	28000	Orthopaedics Procedure
1909	OR080	Arthroscopy-therapeutic: without implant	29240	34400	34400	Orthopaedics Procedure
1910	OR081	Arthroscopy-therapeutic: with implant	36040	42400	42400	Orthopaedics Procedure
1911	OR082	Soft Tissue Operation on Joints -Small	18700	22000	22000	Orthopaedics Procedure
1912	OR083	Soft Tissue Operation on Joints -Large	29240	34400	34400	Orthopaedics Procedure
1913	OR084	Myocutaneous and Fasciocutaneous Flap Procedures for Limbs	36040	42400	42400	Orthopaedics Procedure
1914	OR085	Removal of Wires & Screw	9112	10720	10720	Orthopaedics Procedure
1915	OR086	Removal of Plates	18700	22000	22000	Orthopaedics Procedure
1916	OR087	Total Hip Replacement (THR)	87720	103200	118680	Orthopaedics Procedure
1917	OR088	Total Ankle Joint Replacement (TAR) - Unilateral	87720	103200	118680	Orthopaedics Procedure

CGHS rates for Tier III (Z City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1918	OR089	Total Knee Joint Replacement (TKR) - Unilateral	103360	121600	139840	Orthopaedics Procedure
1919	OR090	Total Shoulder Joint Replacement - Unilateral	87720	103200	118680	Orthopaedics Procedure
1920	OR091	Total Elbow Joint Replacement - Unilateral	74800	88000	101200	Orthopaedics Procedure
1921	OR092	Total Wrist Joint Replacement - Unilateral	87720	103200	118680	Orthopaedics Procedure
1922	OR093	Total Finger Joint Replacement	42840	50400	57960	Orthopaedics Procedure
1923	OR094	Tubular external fixator	23800	28000	28000	Orthopaedics Procedure
1924	OR095	Ilizarov's External Fixator	36040	42400	42400	Orthopaedics Procedure
1925	OR096	Pelvi-acetabular fracture -Internal fixation	42840	50400	50400	Orthopaedics Procedure
1926	OR097	Meniscectomy	36040	42400	42400	Orthopaedics Procedure
1927	OR098	Meniscus Repair	42840	50400	50400	Orthopaedics Procedure
1928	OR099	Anterior Cruciate Ligament (ACL) Reconstruction	42840	50400	50400	Orthopaedics Procedure
1929	OR100	Posterior Cruciate Ligament (PCL) Reconstruction	51680	60800	60800	Orthopaedics Procedure
1930	OR101	Knee Collateral Ligament Reconstruction	51680	60800	60800	Orthopaedics Procedure
1931	OR102	Bankart Repair Shoulder	42840	50400	50400	Orthopaedics Procedure
1932	OR103	Rotator cuff repair / RC repair	42840	50400	50400	Orthopaedics Procedure
1933	OR104	Biceps Tenodesis	36040	42400	42400	Orthopaedics Procedure
1934	OR105	Distal biceps tendon repair	36040	42400	42400	Orthopaedics Procedure
1935	OR106	Arthrolysis of knee	36040	42400	42400	Orthopaedics Procedure
1936	OR107	Capsulotomy of Shoulder	36040	42400	42400	Orthopaedics Procedure
1937	OR108	Conservative Plaster of Paris (POP)	2720	3200	3200	Orthopaedics Procedure
1938	OR109	Application for CTEV per sitting	5780	6800	6800	Orthopaedics Procedure
1939	OR110	Total Hip Replacement (THR) Revision Stage-I	65960	77600	89240	Orthopaedics Procedure
1940	OR111	Total Hip Replacement (THR) Revision Stage-II	87720	103200	118680	Orthopaedics Procedure
1941	OR112	Total Knee Replacement (TKR) Revision Stage-I	65960	77600	89240	Orthopaedics Procedure
1942	OR113	Total Knee Replacement (TKR) Revision Stage-II	87720	103200	118680	Orthopaedics Procedure
1943	OR114	Illizarov/ external fixation for limb lengthening/deformity correction	42840	50400	50400	Orthopaedics Procedure
1944	OR115	Discectomy/ Micro Discectomy	55760	65600	65600	Orthopaedics Procedure
1945	OR116	Spinal Fixation Cervical/dorsolumbar/ lumbosacral	103360	121600	121600	Orthopaedics Procedure

CGHS rates for Tier III (Z City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1946	OR117	Fusion Surgery Cervical/ Lumbar Spine up to 2 Level	42840	50400	50400	Orthopaedics Procedure
1947	OR118	Spinal Fusion Surgery Cervical/ Lumbar Spine -More than 2 Level	55760	65600	65600	Orthopaedics Procedure
1948	OR119	Scoliosis Surgery/ Deformity Correction of Spine	65960	77600	77600	Orthopaedics Procedure
1949	OR120	Vertebroplasty	51680	60800	60800	Orthopaedics Procedure
1950	OR121	Spinal Injections	3400	4000	4000	Orthopaedics Procedure
1951	OR122	Dynamic Hip Screw (DHS) for Fracture Neck Femur	36040	42400	42400	Orthopaedics Procedure
1952	OR123	Proximal Femur Nail (PFN) for IT fracture (Intertrochanteric Fractures)	36040	42400	42400	Orthopaedics Procedure
1953	OR124	Spinal Osteotomy	36040	42400	42400	Orthopaedics Procedure
1954	OR125	Illizarov's / External Fixation for Trauma	36040	42400	42400	Orthopaedics Procedure
1955	OR126	Soft Tissue Operations for Polio/ Cerebral Palsy	23800	28000	28000	Orthopaedics Procedure
1956	OR127	Mini Fixator for Hand/Foot	23800	28000	28000	Orthopaedics Procedure
1957	BP001	Injection of Keloids - Ganglion	2720	3200	3200	Burns And Plastic Surgery Procedure
1958	BP002	Injection of Keloids - Haemangioma	2720	3200	3200	Burns And Plastic Surgery Procedure
1959	BP003	Free Grafts - Wolfe Grafts	13600	16000	18400	Burns And Plastic Surgery Procedure
1960	BP004	Free Grafts - Thiersch- Small Area 5%	13600	16000	18400	Burns And Plastic Surgery Procedure
1961	BP005	Free Grafts - Large Area 10%	23800	28000	32200	Burns And Plastic Surgery Procedure
1962	BP006	Free Grafts - Very Large Area 20% and above.	29240	34400	39560	Burns And Plastic Surgery Procedure
1963	BP007	Skin Flaps - Rotation Flaps	18700	22000	25300	Burns And Plastic Surgery Procedure
1964	BP008	Skin Flaps - Advancement Flaps	23800	28000	32200	Burns And Plastic Surgery Procedure

CGHS rates for Tier III (Z City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1965	BP009	Skin Flaps - Direct- cross Leg Flaps- Cross Arm Flap	29240	34400	39560	Burns And Plastic Surgery Procedure
1966	BP010	Skin Flaps - Cross Finger	23800	28000	32200	Burns And Plastic Surgery Procedure
1967	BP011	Skin Flaps - Abdominal	23800	28000	32200	Burns And Plastic Surgery Procedure
1968	BP012	Skin Flaps - Thoracic	18700	22000	25300	Burns And Plastic Surgery Procedure
1969	BP013	Skin Flaps - Arm Etc.	18700	22000	25300	Burns And Plastic Surgery Procedure
1970	BP014	Subcutaneous Pedicle Flaps Raising	18700	22000	25300	Burns And Plastic Surgery Procedure
1971	BP015	Subcutaneous Pedicle Flaps Delay	18700	22000	25300	Burns And Plastic Surgery Procedure
1972	BP016	Subcutaneous Pedicle Flaps Transfer	18700	22000	25300	Burns And Plastic Surgery Procedure
1973	BP017	Cartilage Grafting	29240	34400	39560	Burns And Plastic Surgery Procedure
1974	BP018	Cleft Lip - Repair.	23800	28000	32200	Burns And Plastic Surgery Procedure
1975	BP019	Cleft Palate Repair	29240	34400	39560	Burns And Plastic Surgery Procedure
1976	BP020	Primary Bone Grafting for Alveolar Cleft in Cleft Lip	29240	34400	39560	Burns And Plastic Surgery Procedure
1977	BP021	Secondary Surgery for Cleft Lip Deformity	29240	34400	39560	Burns And Plastic Surgery Procedure
1978	BP022	Secondary Surgery for Cleft Palate	29240	34400	39560	Burns And Plastic Surgery Procedure

CGHS rates for Tier III (Z City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1979	BP023	Reconstruction of Eyelid Defects - Minor	18700	22000	25300	Burns And Plastic Surgery Procedure
1980	BP024	Reconstruction of Eyelid Defects - Major	23800	28000	32200	Burns And Plastic Surgery Procedure
1981	BP025	Plastic Surgery of Different Regions of the Ear -Minor	23800	28000	32200	Burns And Plastic Surgery Procedure
1982	BP026	Plastic Surgery of Different Regions of the Ear -Major	29240	34400	39560	Burns And Plastic Surgery Procedure
1983	BP027	Plastic Surgery of the Nose - Minor	18700	22000	25300	Burns And Plastic Surgery Procedure
1984	BP028	Plastic Surgery of the Nose - Major	29240	34400	39560	Burns And Plastic Surgery Procedure
1985	BP029	Plastic Surgery for Facial Paralysis (Support with Reanimation)	29240	34400	39560	Burns And Plastic Surgery Procedure
1986	BP030	After Mastectomy (Reconstruction) Mammoplasty	29240	34400	39560	Burns And Plastic Surgery Procedure
1987	BP031	Syndactyly Repair	23800	28000	32200	Burns And Plastic Surgery Procedure
1988	BP032	Dermabrasion Face	29240	34400	39560	Burns And Plastic Surgery Procedure
1989	BP033	Flap Reconstructive Surgery - Head and Neck	42840	50400	57960	Burns and Plastic Surgery
1990	BP034	up to 30% Burns 1st Dressing	2040	2400	2400	Burns And Plastic Surgery Procedure
1991	BP035	up to 30% Burns Subsequent Dressing	1700	2000	2000	Burns And Plastic Surgery Procedure
1992	BP036	30% to 50% Burns 1st Dressing	3400	4000	4000	Burns And Plastic Surgery Procedure

CGHS rates for Tier III (Z City)

Sr. No	CGHS Code	CGHS TREATMENT PROCEDURE/INVESTIGATION LIST	Rates for Semi-Private Ward			Speciality Classification
			Non-NABH	NABH	Super Speciality	
1993	BP037	30% to 50% Burns Subsequent Dressing	2380	2800	2800	Burns And Plastic Surgery Procedure
1994	BP038	Extensive Burn -above 50% Frist Dressing	4080	4800	4800	Burns And Plastic Surgery Procedure
1995	BP039	Extensive Burn -above 50% Subsequent dressing	2380	2800	2800	Burns And Plastic Surgery Procedure
1996	BP040	VAC Therapy/Dressing including all Consumables	6800	8000	8000	Burns And Plastic Surgery Procedure
1997	HC001	Annual Health Check-up - CCS Group A Officer of above 40 years of age / Pensioner primary card holder 75 years of age and above–Male,	2000	2000	2000	Annual Health Check-up
1998	HC002	Annual Health Check-up - CCS Group A Officer of above 40 years of age / Pensioner primary card holder 75 years of age and above - Female	2200	2200	2200	Annual Health Check-up

Annexure-II

Definition of Package Rates and inclusions

1. Definition of CGHS Package Rate

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

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

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

2. Ward Entitlement Adjustment

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

3. Chemotherapy Charges

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

4. Implants and Consumables

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

5. Unlisted Procedures and Investigations

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

6. Multiple Surgical Procedures in One OT Session

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

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

7. Consultation

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

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

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Annexure-III

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

1.Ward categories

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

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

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

2. Nursing care Charges

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

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

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

3. ICU and Critical Care Unit Charges

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

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

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

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

4. Equipment Charges

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

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

Table.1 Summary of Ward categories.

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

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

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Annexure-IV

Admissible and Non-Admissible Items (Billing Guidelines)

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

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

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

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

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

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

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

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

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

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

4. List of common Non admissible items

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

Table 2 List of non-admissible items

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

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

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

5. List of items already included under packages.

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

Table 3 . List of included items

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

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

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

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

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Annexure V

Super Speciality Hospitals

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

(a) Hospitals with 200 or more beds.

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

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

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

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Annexure VI

List of Office Memorandum (suppressed)

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

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