

List of Expenses Generally excluded in RGHS Hospitalisation

List of Expenses Generally Excluded ("Non-Medical")

S.No	NAME OF THE NON MEDICAL ITEM	SUGGESTIONS
	TOILETRIES/ COSMETICS/ PERSO	ONAL COMFORT OR CONVENIENCE ITEMS
1	ANNE FRENCH CHARGES	Not Payable
2	BABY CHARGES (UNLESS SPECIFIED/INDICATED)	Not Payable
3	BABY FOOD	Not Payable
4	BABY UTILITES CHARGES	Not Payable
5	BABY SET	Not Payable
6	BABY BOTTLES	Not Payable
7	BOTTLE	Not Payable
8	BRUSH	Not Payable
9	COSY TOWEL	Not Payable
10	HAND WASH	Not Payable
11	MOISTURISER PASTE BRUSH	Not Payable
12	POWDER	Not Payable
13	RAZOR	Payable
14	TOWEL	Not Payable
15	SHOE COVER	Not Payable
16	BEAUTY SERVICES	Not Payable
17	BELTS/ BRACES	Essential and should be paid at least specifically for cases who have undergone surgery of thoracic or lumbar spine.
18	BUDS	Not Payable
19	BARBER CHARGES	Not Payable
20	CAPS	Not Payable
21	COLD PACK/HOT PACK	Not Payable
22	CARRY BAGS	Not Payable
23	CRADLE CHARGES	Not Payable
24	COMB	Not Payable
25	DISPOSABLES RAZORS CHARGES (for site preparations)	Payable
26	EAU-DE-COLOGNE / ROOM FRESHNERS	Not Payable
27	EYE PAD	Not Payable
28	EYE SHEILD	Not Payable
29	EMAIL / INTERNET CHARGES	Not Payable
30	FOOD CHARGES (OTHER THAN PATIENT'S DIET PROVIDED BY HOSPITAL)	Not Payable
	FOOT COVER	Not Payable
32	GOWN	Not Payable
33	LEGGINGS	Essential in surgery for bariatric and varicose veins and may be considered for at least these conditions where surgery itself is payable.
$\overline{}$	LAUNDRY CHARGES	Not Payable
	MINERAL WATER	Not Payable
	OIL CHARGES	Not Payable
30		y

. 1	CANUTADY DAD	N. D. 11
	SANITARY PAD	Not Payable
	SLIPPERS	Not Payable
	TELEPHONE CHARGES	Not Payable
	TISSUE PAPER	Not Payable
	TOOTH PASTE	Not Payable
42	TOOTH BRUSH	Not Payable
	GUEST SERVICES	Not Payable
44	BED PAN	Not Payable
45	BED UNDER PAD CHARGES	Not Payable
46	CAMERA COVER	Not Payable
47	CARE FREE	Not Payable
48	CLINIPLAST	Not Payable
49	CREPE BANDAGE	Not Payable
50	CURAPORE	Not Payable
51	DIAPER OF ANY TYPE	Not Payable
		Not Payable (However if CD is specifically sought by Insurer/TPA
52	DVD, CD CHARGES	then payable)
53	EYELET COLLAR	Not Payable
٠.	FACE MASK	Not Payable
55	FLEXI MASK	Not Payable
56	GAUSE SOFT	Not Payable
57	GAUZE	Not Payable
58	HAND HOLDER	Not Payable
59	HANSAPLAST/ ADHESIVE BANDAGES	Not Payable
60	LACTOGEN/ INFANT FOOD	Not Payable
		Reasonable costs for one sling in case of upper arm fractures may be
61	SLINGS	considered ITEMS SPECIFICALLY EXCLUDED IN THE POLICIES
01		CALLY EXCLUDED IN THE POLICIES
	WEIGHT CONTROL PROGRAMS/ SUPPLIES/	CALLY EXCLUDED IN THE POLICIES
	SERVICES	Exclusion in policy unless otherwise specified
	COST OF SPECTACLES/ CONTACT LENSES/	
63	HEARING AIDS ETC.,	Not Payable
64	HORMONE REPLACEMENT THERAPY	Exclusion in policy unless otherwise specified
	HOME VISIT CHARGES	Exclusion in policy unless otherwise specified
	INFERTILITY/ SUBFERTILITY/ ASSISTED	
	CONCEPTION PROCEDURE	Exclusion in policy unless otherwise specified
	OBESITY (INCLUDING MORBID OBESITY) TREATMENT	Exclusion in policy unless otherwise specified
	PSYCHIATRIC & PSYCHOSOMATIC DISORDERS	Exclusion in policy unless otherwise specified
	DONOR SCREENING CHARGES	Exclusion in policy unless otherwise specified
		· · ·
	ADMISSION/REGISTRATION CHARGES HOSPITALISATION FOR EVALUATION/ DIAGNOSTIC	Exclusion in policy unless otherwise specified
	PURPOSE	Exclusion in policy unless otherwise specified
		1 ,
	EXPENSES FOR INVESTIGATION/ TREATMENT	
	EXPENSES FOR INVESTIGATION/ TREATMENT IRRELEVANT TO THE DISEASE FOR WHICH	Not Payable - Exclusion in policy unless otherwise specified

		T
	ANY EXPENSES WHEN THE PATIENT IS DIAGNOSED WITH RETRO VIRUS + OR SUFFERING FROM /HIV/AIDS ETC IS DETECTED/ DIRECTLY OR INDIRECTLY	Not payable as per HIV/AIDS exclusion Not Payable except Bone Marrow Transplantation where covered
74	STEM CELL IMPLANTATION/ SURGERY	by policy
	ITEMS WHICH FORM PART OF HOSPITAL SERVICES WHER	E SEPARATE CONSUMABLES ARE NOT PAYABLE BUT THE SERVICE IS PAYABLE
75	WARD AND THEATRE BOOKING CHARGES	Payable under OT Charges, not payable separately
	ARTHROSCOPY & ENDOSCOPY INSTRUMENTS	Rental charged by the hospital payable. Purchase of Instruments not payable.
77	MICROSCOPE COVER	Payable under OT Charges, not separately
78	SURGICAL BLADES,HARMONIC SCALPEL,SHAVER	Payable under OT Charges, not separately
79	SURGICAL DRILL	Payable under OT Charges, not separately
80	EYE KIT	Payable under OT Charges, not separately
81	EYE DRAPE	Payable under OT Charges, not separately
82	X-RAY FILM	Payable under Radiology Charges, not as consumable
83	SPUTUM CUP	Payable under Investigation Charges, not as consumable
84	BOYLES APPARATUS CHARGES	Part of OT Charges, not separately
	BLOOD GROUPING AND CROSS MATCHING OF DONORS SAMPLES	Part of Cost of Blood, not payable
86	SAVLON Not	Payable-Part of Dressing Charges
	BAND AIDS, BANDAGES, STERLILE INJECTIONS,	
87	NEEDLES, SYRINGES	Not Payable - Part of Dressing charges
88	COTTON	Not Payable-Part of Dressing Charges
89	COTTON BANDAGE	Not Payable- Part of Dressing Charges
90	MICROPORE/ SURGICAL TAPE	Not Payable-Payable by the patient when prescribed, otherwise included as Dressing Charges
91	BLADE	Not Payable
92	APRON	Not Payable -Part of Hospital Services/ Disposable linen to be part of OT/ICU charges
00	TORNIOLIET	Not Payable (service is charged by hospitals, consumables cannot
	TORNIQUET CYMASC BUNDLS	be separately charged)
-	ORTHOBUNDLE, GYNAEC BUNDLE	Part of Dressing Charges
95	URINE CONTAINER	Not Payable
	ELEN	MENTS OF ROOM CHARGE
96	LUXURY TAX	Actual tax levied by government is payable.Part of room charge for sub limits
	HVAC	Part of room charge not payable separately
$\overline{}$	HOUSE KEEPING CHARGES	Part of room charge not payable separately
	SERVICE CHARGES WHERE NURSING CHARGE ALSO CHARGED	Part of room charge not payable separately
	TELEVISION & AIR CONDITIONER CHARGES	Payable under room charges not if separately levied
	SURCHARGES	Part of Room Charge, Not payable separately
\vdash	ATTENDANT CHARGES	Not Payable - Part of Room Charges
$\overline{}$	IM IV INJECTION CHARGES	Part of nursing charges, not payable
-	CLEAN SHEET	Part of Laundry/Housekeeping not payable separately
104	EXTRA DIET OF PATIENT(OTHER THAN THAT	The state of Education Attended to the state of Education Action and the state of Education Action Action and the state of Education Action Actio
	WHICH FORMS PART OF BED CHARGE)	Patient Diet provided by hospital is payable
106	BLANKET/WARMER BLANKET	Not Payable- part of room charges

	ADMINISTRA'	TIVE OR NON-MEDICAL CHARGES
107	ADMISSION KIT	Not Payable
	BIRTH CERTIFICATE	Not Payable
	BLOOD RESERVATION CHARGES AND ANTE NATAL	,
109	BOOKING CHARGES	Not Payable
110	CERTIFICATE CHARGES	Not Payable
111	COURIER CHARGES	Not Payable
112	CONVENYANCE CHARGES	Not Payable
113	DIABETIC CHART CHARGES	Not Payable
114	DOCUMENTATION CHARGES/ADMINISTRATIVE EXPENSES	Not Payable
115	DISCHARGE PROCEDURE CHARGES	Not Payable
116	DAILY CHART CHARGES	Not Payable
117	ENTRANCE PASS / VISITORS PASS CHARGES	Not Payable
118	EXPENSES RELATED TO PRESCRIPTION ON DISCHARGE	To be claimed by patient under Post Hosp where admissible
119	FILE OPENING CHARGES	Not Payable
120	INCIDENTAL EXPENSES / MISC. CHARGES (NOT EXPLAINED)	Not Payable
121	MEDICAL CERTIFICATE	Not Payable
122	MAINTAINANCE CHARGES	Not Payable
123	MEDICAL RECORDS	Not Payable
124	PREPARATION CHARGES	Not Payable
125	PHOTOCOPIES CHARGES	Not Payable
126	PATIENT IDENTIFICATION BAND / NAME TAG	Not Payable
127	WASHING CHARGES	Not Payable
128	MEDICINE BOX	Not Payable
129	MORTUARY CHARGES	Payable upto 24 hrs, shifting charges not payable
130	MEDICO LEGAL CASE CHARGES (MLC CHARGES)	Not Payable
	EXTE	RNAL DURABLE DEVICES
	WALKING AIDS CHARGES	Not Payable
132	BIPAP MACHINE	Not Payable
	COMMODE	Not Payable
134	CPAP/ CAPD EQUIPMENTS	Device not payable
135	OXYGEN CYLINDER (FOR USAGE OUTSIDE THE HOSPITAL)	Not Payable
	PULSEOXYMETER CHARGES	Device not payable
	SPACER	Not Payable
	SPIROMETRE	Device not payable
139	SPO2 PROBE	Not Payable
	NEBULIZER KIT	Not Payable
	STEAM INHALER	Not Payable
	ARMSLING	Not Payable
	THERMOMETER	Not Payable (paid by patient)
	CERVICAL COLLAR	Not Payable
	SPLINT	Not Payable
	DIABETIC FOOT WEAR	Not Payable
147	KNEE BRACES (LONG/ SHORT/ HINGED)	Not Payable

1/10	KNEE IMMOBILIZER/SHOULDER IMMOBILIZER	Not Payable
148	TATEL THINGSTELLING STOOLDEN TIVINGODILIZEN	Essential and should be paid at least specifically for cases who have
149	LUMBO SACRAL BELT	undergone surgery of lumbar spine.
		Payable for any ICU patient requiring more than 3 days in ICU, all
		patients with paraplegia/quadriplegia for any reason and at
150	NIMBUS BED OR WATER OR AIR BED CHARGES	reasonable cost of approximately Rs 200/ day
151	AMBULANCE COLLAR	Not Payable
152	AMBULANCE EQUIPMENT	Not Payable
153	MICROSHEILD	Not Payable
		Essential and should be paid at least in post surgery patients of
		major abdominal surgery including TAH, LSCS, incisional hernia
15/	ABDOMINAL BINDER	repair, exploratory laparotomy for intestinal obstruction, liver transplant etc.
154		E IF SUPPORTED BY A PRESCRIPTION
	BETADINE \ HYDROGEN PEROXIDE \SPIRIT\\	May be payable when prescribed for patient, not payable for
155	DETTOL \SAVLON \ DISINFECTANTS ETC	hospital use in OT or ward or for dressings in hospital
	PRIVATE NURSES CHARGES- SPECIAL NURSING	,
156	CHARGES	Post hospitalization nursing charges not Payable
	NUTRITION PLANNING CHARGES - DIETICIAN	
157	CHARGES / DIET CHARGES	Patient Diet provided by hospital is payable
	ALEX CLICAD EDEE	Payable -Sugar free variants of admissable medicines are not
158	ALEX SUGAR FREE	excluded
	CREAMS POWDERS LOTIONS (Toileteries are not payable, only prescribed medical pharmaceuticals	
159	payable)	Payable when prescribed
	DIGENE GEL/ ANTACID GEL	Payable when prescribed
	Process of the second of the s	Upto 5 electrodes are required for every case visiting OT or ICU. For
		longer stay in ICU, may require a change and at least one set every
161	ECG ELECTRODES	second day must be payable.
162	GLOVES	Sterilized Gloves payable / unsterilized gloves not payable
163	HIV KIT	Payable - payable Pre operative screening
164	LISTERINE/ ANTISEPTIC MOUTHWASH	Payable when prescribed
165	LOZENGES	Payable when prescribed
166	MOUTH PAINT	Payable when prescribed
167	NEBULISATION KIT	If used during hospitalization is payable reasonably
168	NEOSPRIN	Payable when prescribed
169	NOVARAPID	Payable when prescribed
170	17 VOLINI GEL/ ANALGESIC GEL	Payable when prescribed
171	ZYTEE GEL	Payable when prescribed
172	VACCINATION CHARGES	Routine Vaccination not Payable / Post Bite Vaccination Payable
	PART OF HOSPIT	'AL'S OWN COSTS AND NOT PAYABLE
173	AHD	Not Payable - Part of Hospital's internal Cost
174	ALCOHOL SWABES	Not Payable - Part of Hospital's internal Cost
175	SCRUB SOLUTION/STERILLIUM	Not Payable - Part of Hospital's internal Cost
		OTHERS
176	VACCINE CHARGES FOR BABY	Not Payable
	AESTHETIC TREATMENT / SURGERY	Not Payable
	TPA CHARGES	Not Payable
	VISCO BELT CHARGES	Not Payable
170	IVISCO BELL CHARGES	

	ANY KIT WITH NO DETAILS MENTIONED [DELIVERY	
180	KIT, ORTHOKIT, RECOVERY KIT, ETC]	Not Payable
181	EXAMINATION GLOVES	Not Payable
182	KIDNEY TRAY	Not Payable
183	MASK	Not Payable
184	OUNCE GLASS	Not Payable
185	OUTSTATION CONSULTANT'S/ SURGEON'S FEES	Not payable, except for telemedicine consultations where covered by policy
186	OXYGEN MASK	Not Payable
187	PAPER GLOVES	Not Payable
		Should be payable in case of PIVD requiring traction as this is
188	PELVIC TRACTION BELT	generally not reused
189	REFERAL DOCTOR'S FEES	Not Payable
190	ACCU CHECK (Glucometery/ Strips)	Not payable pre hospitalisation or post hospitalisation / Reports and Charts required/ Device not payable
191	PAN CAN	Not Payable
192	SOFNET	Not Payable
193	TROLLY COVER	Not Payable
194	UROMETER, URINE JUG	Not Payable
195	AMBULANCE	Payable-Ambulance from home to hospital or interhospital shifts is payable/ RTA as specific requirement is payable
196	TEGADERM / VASOFIX SAFETY	Payable - maximum of 3 in 48 hrs and then 1 in 24 hrs
197	URINE BAG	Payable where medically necessary till a reasonable cost - maximum 1 per 24 hrs
198	SOFTOVAC	Not Payable
199	STOCKINGS	Essential for cases like CABG etc. where it should be paid.