



मि. सं. /File No. 25-1/2018/CGHS/JDAYUSH/e - 3175335

भारत सरकार/Government of India

स्वास्थ्य एवं परिवार कल्याण मंत्रालय/Ministry of Health & Family Welfare

केंद्रीय सरकार स्वास्थ्य योजना (मुख्यालय)/Central Government Health Scheme (HQ)

सीजीएचएस भवन, सेक्टर-13, आर. के. पुरम्, नई दिल्ली-66/CGHS Bhawan, Sec-13, R. K. Puram, ND-66

(आयुष अनुभाग)

ईमेल- adayush.dl@cghs.nic.in

दिनांक : फरवरी, 2026

शुद्धि-पत्र /Corrigendum

Subject: Revised Guidelines for Empanelment of Private AYUSH Day Care Therapy Centres/Hospitals under CGHS - regarding minimum space requirement.

The undersigned is directed to refer to this Office Memorandum No.25-1/2018/CGHS/JDAYUSH dated 11.08.2025 regarding Revised Guidelines for Empanelment of Private AYUSH Day Care Therapy Centres/Hospitals under CGHS.

2. In partial modification of the said Office Memorandum, Point No. 5.9.6.1 relating to minimum space requirement is hereby revised as under:

| Existing | Modified |
|---|--|
| The minimum space requirement for the center/hospital should be 650 sq. ft. of floor area. This includes 250 sq. ft. for functional areas such as consultation, reception, waiting area, drug preparation area and drug dispensing unit, which should be appropriately sized, based on the scope of services and patients load. Additionally, 400 sq. ft. allocated for 02 therapy rooms. (200 sq. ft. for each therapy room) | The minimum space requirement for the centre/hospital should be 650 sq. ft. of floor area. Out of which, minimum 200 sq. ft. shall be allocated for two (02) therapy rooms (minimum 100 sq. ft. for each therapy room). The remaining area shall be dedicated for functional requirements such as consultation, reception, waiting area, drug preparation area, drug dispensing unit, and post-therapy rest room/rooms, which should be appropriately sized based on the scope of services and patient load. |

3. However, existing empanelled centres shall be exempted from this requirement up to 31.03.2026. Thereafter, they shall be required to comply with the modified infrastructure norms as prescribed under the revised guidelines for continuation of empanelment. All other terms & conditions of the Office Memorandum dated 11.08.2025 shall remain unchanged.

4. This issues with the approval of the competent authority.

**Digitally signed by
Ashok Mukundappa Iti
Date: 16-02-2026
15:23:13**

(Dr. Ashok M. Iti)
Additional Director (Ayush), CGHS

To

1. All empaneled Health Care Organizations
2. All Stakeholder/Community Members
3. All Ministries / Departments, Government of India via website
4. Director, CGHS, CGHS HQ, CGHS Bhawan, New Delhi
5. Addl. DDG (HQ), CGHS Bhawan, New Delhi
6. Additional Director (HQ), CGHS Bhawan, New Delhi

7. All Additional Directors /Joint Directors of CGHS Cities /Zones
8. MS, CGHS Ayurvedic Hospital, Aliganj, Lodhi Road, New Delhi
9. All Pay & Accounts Officers under CGHS
10. Advisers AYUSH, Block B, GPO Complex, INA Colony, Delhi 110023
11. AD (R&H)/JD (Gr.), CGHS, New Delhi
12. CGHS Desk-I/Desk-II/CGHS-I/CGHS-II, Dte.GHS, CGHS Bhawan, Delhi
13. Estt.I/ Estt.II/ Estt.III/ Estt.IV Sections, MOHFW, New Delhi
14. M S Section, Ministry of Health & Family Welfare, New Delhi
15. Admn.I / Admn.II Sections of Dte.GHS, New Delhi
16. Rajya Sabha / Lok Sabha Secretariat
17. Registrar, Supreme Court of India /Delhi High Court ,Sher Shah Road, New Delhi
Punjab & Haryana High Court, Chandigarh
18. U.P.S.C., New Delhi
19. Finance Division, Ministry of Health & Family Welfare, New Delhi
20. Deputy Secretary (Civil Service News), Department of Personnel & Training, 5" Floor, Sardar Patel Bhawan, New Delhi.
21. PPS to Secretary (H&FW)/ Secretary (AYUSH)/ Secretary (HR)/ Secretary (AIDS Control), Ministry of Health & Family Welfare, New Delhi
22. PPS to DGHS / AS&FA / AS (DG) / AS&DG (NACO), NRHM
23. Swamy Publishers (P) Ltd., P. B. No. 2468, R. A. Puram, Chennai 600028.
24. M/s. of all Ayush Hospitals and diagnostic centers being empanelled.
25. PPS to Secretary, Staff Side, 13-C, Ferozshah Road, New Delhi.
26. M/s. Bahri Brothers 742- Lajpat Rai Market Delhi-1 10006
27. M/s. Nabhi Publications Post Box No. 37 New Delhi -110001
28. All Staff Side Members of National Council (JCM)
29. Office of the Comptroller & Auditor General of India, 10 Bahadur Shah Zafar Marg, New Delhi
30. All Offices / Sections / Desks in the Ministry and CGHS
31. Nodal Officer, CGHS (MCTC) with the request to upload the O.M. on the website of the CGHS.
32. Guard File



F. No. 25-1/2018/CGHS/JD AYUSH
Government of India
Ministry of Health & Family Welfare
Directorate of Central Government Health Scheme
Ayush Section

CGHS Bhawan, RK Puram,
Sec-13, New Delhi-110066
Dated:- August, 2025

Office Memorandum

Subject: Revised Guidelines for Empanelment of Private AYUSH Day Care Therapy Centers/Hospital under CGHS-reg.

The undersigned is directed to convey the approval of the Competent Authority for “Revised Guidelines for Empanelment of Private AYUSH Day Care Therapy Centers/Hospital for Ayurveda, Yoga & Naturopathy, Unani, and Siddha under CGHS.” These guidelines aim to streamline the empanelment process and ensure the uniform implementation of quality AYUSH therapies across CGHS-covered cities in India. The empanelment will remain an ongoing process and is open to eligible AYUSH Day Care Centers that are willing to comply with CGHS norms and provide treatment at CGHS-approved rates.

2. It is to inform that the AYUSH Day Care Therapy Centers/Hospitals already empanelled under CGHS in Delhi/NCR shall be given a period of 45 days to accept the terms & conditions outlined in these guidelines and submit the new Memorandum of Agreement (MoA) accordingly. Failure to comply within the stipulated time may result in de-empanelment of the concerned Centers/Hospital.

3. The guidelines are available on the CGHS website: <https://www.cghs.mohfw.gov.in/AHIMSG5/hissso/Login> → under tab Circular → Ayush Related.

**Digitally signed by
Ashok Mukundappa Iti
Date: 11-08-2025
17:14:25**

(Dr. Ashok M. Iti)
Additional Director (Ayush), CGHS

To

1. All empaneled Health Care Organizations
2. All Stakeholder/Community Members
3. All Ministries / Departments, Government of India via website
4. Director, CGHS, CGHS HQ, CGHS Bhawan, New Delhi

5. Addl. DDG (HQ),CGHS, CGHS Bhawan, New Delhi
6. Additional Director (HQ), CGHS, New Delhi
7. All Additional Directors /Joint Directors of CGHS Cities /Zones
8. MS CGHS Ayurvedic Hospital, Aliganj, Lodhi Road, New Delhi.
9. All Pay & Accounts Officers under CGHS
10. Advisers, AYUSH, Block B, GPO Complex, INA Colony, New Delhi, Delhi 110023
11. AD(R&H)/JD (Gr.) CGHS Delhi
12. CGHS Desk-I/Desk-II/CGHS-I/CGHS-II, Dte.GHS, CGHS Bhawan, New Delhi
13. Estt.I/ Estt.II/ Estt.III/ Estt.IV Sections, Ministry of Health & Family Welfare, New Delhi
14. M S Section, Ministry of Health & Family Welfare, New Delhi
15. Admn.I / Admn.II Sections of Dte.GHS, New Delhi
16. Rajya Sabha / Lok Sabha Secretariat
17. Registrar, Supreme Court of India /Delhi High Court, Sher Shah Road, New Delhi, Punjab & Haryana High Court, Chandigarh
18. U.P.S.C., New Delhi
19. Finance Division, Ministry of Health & Family Welfare, New Delhi
20. Deputy Secretary (Civil Service News), Department of Personnel & Training, 5" Floor, Sardar Patel Bhawan, New Delhi.
21. PPS to Secretary (H&FW)/ Secretary (AYUSH)/ Secretary (HR)/ Secretary (AIDS Control), Ministry of Health & Family Welfare, New Delhi
22. PPS to DGHS / AS&FA / AS (DG) / AS&DG (NACO), NRHM
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30. All Offices / Sections / Desks in the Ministry and CGHS
31. Nodal Officer, CGHS (MCTC) with the request to upload the O.M. on the website of the CGHS.
32. Guard File

(Dr. Ashok M. Iti)
Additional Director (Ayush), CGHS



F. No. 25-1/2018/CGHS/JD AYUSH
 Government of India
 Ministry of Health & Family Welfare
 Directorate of Central Government Health Scheme
 CGHS Bhawan, RK Puram, Sec-13, New Delhi-110066

Dated: August, 2025

**GUIDELINES FOR THE EMPANELMENT OF PRIVATE AYUSH DAY CARE THERAPY CENTERS/HOSPITAL
 FOR AYURVEDA, YOGA & NATUROPATHY, UNANI AND SIDDHA IN CGHS**

1. PREAMBLE:

- 1.1. For the last six decades Central Government Health Scheme (CGHS) is providing comprehensive medical care to the Central Government employees and pensioners enrolled under the scheme. In fact, CGHS caters to the healthcare needs of eligible beneficiaries covering all four pillars of democratic set up in India namely Legislature, Judiciary, Executive and Press. CGHS is the model Health care facility provider for Central Government employees & Pensioners and is unique of its kind due to the large volume of beneficiary base, and open ended generous approach of providing health care.
- 1.2. Presently, more than 47 lakh beneficiaries are covered by CGHS in 80 cities all over India and the endeavor is to include more cities to improve the accessibility of the services. CGHS provides health care through following systems of Medicine:

- Allopathic
- Homoeopathic
- Indian system of medicine
 - Ayurveda
 - Unani
 - Siddha and
 - Yoga & Naturopathy

1.3 While CGHS wellness centers provide consultation services and supply of medicines, many therapeutic procedures of the Indian System of Medicine cannot be conducted at these wellness centers. Therefore, to offer therapeutic procedures to beneficiaries, the concept of a day care center has been introduced by CGHS.

1.4 Day Care Therapy Centers of Ayurveda, Yoga & Naturopathy, Unani, and Siddha refer to a dispensary, clinic, polyclinic, or any private health care center that is registered with local authorities, wherever applicable. It must have the necessary facilities to carry out treatment procedures, therapies, and medical or para-surgical interventions, or both, under the supervision of

registered Ayurveda, Yoga & Naturopathy, Unani, and Siddha medical practitioners on a day-care basis.

- 1.5 Fresh applications are invited for the empanelment of AYUSH Day Care Therapy Centers for Ayurveda, Yoga & Naturopathy, Unani, and Siddha. Interested healthcare organizations may apply for empanelment provided they fulfill the prescribed criteria regarding infrastructure, staff and are willing to accept the charges/rates fixed by CGHS.

2 CATEGORIES OF AYUSH CENTER/HOSPITAL:

CGHS may empanel the following categories of private center/hospital for a period of 2 years with the provision for extension by one more year for treatments of CGHS beneficiaries and their family members covered under CGHS on day care basis: -

- Ayurveda
- Yoga & Naturopathy
- Unani
- Siddha

These guidelines are applicable to CGHS beneficiaries residing in CGHS covered area only.

3 TIMELINES FOR APPLICATION SUBMISSION:

The empanelment of AYUSH Day Care Centres shall remain an ongoing process. Applications submitted in the prescribed format (along with a copy of the receipt/challan or a Demand Draft of ₹2,000/- towards the application fee), will be reviewed by a Committee chaired by the Additional Director, CGHS concerned city. For applications in Delhi/NCR, the Committee will be chaired by the Additional Director, CGHS (HQ). Applications received during a quarter shall be considered on the last working day of March, June, September, and December.

4 APPLICATION FEE:

Application form can be downloaded from the website of CGHS, Ministry of Health & Family Welfare at <https://www.cghs.mohfw.gov.in/AHIMSG5/hisso/Login-circular-ayush> under guidelines for empanelment of AYUSH Day Care Therapy Centers/Hospital. The form should be submitted along with an application fee of Rs. 2000/- (Rs. Two Thousand Only) non-refundable, to the Bharatkosh, CGHS, New Delhi/ Concerned CGHS City or DD of Rs.2000/- in favour of PAO, CGHS Delhi/ Concerned CGHS City. The following steps should be followed: open the URL <https://bharatkosh.gov.in>, select "Non-registered user," choose "Individual/NGO/Institute," select "Purpose," search for "Ministry of Health & Family Welfare," choose the purpose "Application fee for empanelment of hospital," go to "Account," select "Fee," enter the function pay Rs. 2000/-, and submit.

The Application without the prescribed application fee will be summarily rejected.

5 APPLICATION FORM SUBMISSION PROCESS:

- 5.1 The application must be submitted in duplicate—both as a hard copy and via email, accompanied by a short video and photographs. For applications in Delhi/NCR, submissions should be sent to the

Additional Director (Ayush), CGHS (HQ), RK Puram, Sector-13, New Delhi-110066. For all other CGHS cities, applications should be submitted to the Additional Director of the respective CGHS city.

5.2 Application forms should be submitted in a sealed envelope clearly superscribed as: *“Application for Empanelment of AYUSH Day Care Therapy Center/Hospital for Ayurveda / Yoga & Naturopathy / Unani / Siddha, as per stream.*

5.3 The application should have table of content, all the pages of application and annexure(each set) shall be serially numbered, every page of application form and annexure should be signed by the competent person etc. The signatory must mention as to whether he/she is the sole proprietor or authorized person. In case of partnerships, a copy of the partnership agreement duly attested by a notary should be furnished. Appropriate legal document should be furnished for establishing authorization.

5.4 The application form must be accompanied with an undertaking in the format as given in **Annexure-I** and a set of necessary/substantiating documents as given in **Annexure-II**

5.5 All information must be provided in the application. If a particular facility is unavailable, it should be marked as 'not available' rather than 'not applicable'.

5.6 The application shall be rejected if the information given in application is not complete, not fulfilling eligibility criteria or qualification criteria.

5.7 Every application must be accompanied with acceptance letter attached at **Annexure -III**.

5.8 Eligibility Criteria:

5.8.1 Center/Hospital registered with the local authorities of the respective state/UT(if required under Rules/Regulations of the concerned state/UT) and having facilities for carrying out treatment procedures / therapy and medical or para-surgical interventions or both under the supervision of registered Ayurveda, Yoga & Naturopathy, Unani and Siddha Medical Practitioner (s) on Day Care basis.

5.8.2

| | |
|---------------------------------------|---|
| For Type X cities including Delhi/NCR | Valid and full NABH accreditation is mandatory |
| For Type Y cities | Primary (entry-level) NABH accreditation for duration of one year is acceptable |
| For Type Z cities | NABH accreditation will not be required during the first year of empanelment. However, from the second year onwards, the center must obtain either a valid Entry-Level or Full NABH accreditation to continue its empanelment |

If any center/hospital has the facilities for more than one stream (Ayurveda, Yoga & Naturopathy, Unani and Siddha) then the center/hospital should have NABH accreditation for all the streams separately before applying for CGHS empanelment. In addition, any center/hospital cannot add/remove the facilities without informing the CGHS. During the period of empanelment the NABH certificate shall be valid.

5.8.3 Copy of audited balance sheet, Profit/loss account for the last two years(Main documents only i.e., Summary sheet)

***The areas, which are typically not classified under X, Y, or Z categories, the requirement for*

NABH accreditation may be considered on case to case basis..

5.9 Qualification criteria:

- 5.9.1 Minimum 02 doctors should always be available in the center/hospital throughout the functioning of the center/ hospital.
- 5.9.2 At least one Doctor should be post graduate in the concerned field of Ayurveda/Siddha/Unani/Yoga & Naturopathy systems of medicines.
- 5.9.3 Minimum 02 qualified therapists/technicians are required per therapy table in the center/ hospital in which 01 therapy room should be for male and 01 room for female.
- 5.9.4 The center/hospital must submit educational certificates, experience certificates (if any) appointment letters, joining letters, attendance records, bank salary statements, payroll details/or pay slips of each staff.
- 5.9.5 Doctors and therapists must possess qualifications and registrations with the respective boards, in accordance with the minimum standards prescribed by the NCISM or other relevant governing bodies, as applicable in the concerned state or Union Territory.

5.9.6 Infrastructure:

- 5.9.6.1 The minimum space requirement for the center/hospital should be 650 sq. ft. of floor area. This includes 250 sq. ft. for functional areas such as consultation, reception, waiting area, drug preparation area and drug dispensing unit, which should be appropriately sized, based on the scope of services and patients load. Additionally, 400 sq. ft. allocated for 02 therapy rooms. (200 sq. ft. for each therapy room)
- 5.9.6.2 For the multistory building, a lift or a chair lift is essential.
- 5.9.6.3 Separate Male and Female Post Therapy rest room is required.
- 5.9.6.4 Washroom and toilet must be separate for male and female.
- 5.9.6.5 Reception, waiting areas, pharmacy and drug preparation room, are essentially required
- 5.9.6.6 The premises must be accessible to ambulances in case of an emergency.

6 SCRUTINY OF APPLICATIONS:

- 6.1 The Applications received shall be opened in the office of Additional Director (HQ), CGHS Bhawan, RK Puram Sector-13, New Delhi-110066 in case of Delhi/NCR. For cities outside Delhi, applications will be opened at the office of the Additional Director of the respective CGHS city.
- 6.2 The committee appointed by competent authority will scrutinize and examine the application to determine,
 - a) Whether the application is complete and in order in all respects or not
 - b) Whether Application fee has been furnished or not
 - c) Whether the documents have been properly signed, and serially numbered or not.
- 6.3 If any shortcomings are found, the concerned center/hospital will be informed via email to provide the required documents within 7 days.
- 6.4 The designated committee will finalize the process of empanelment once all documentation, formalities including surprise inspection etc. to the center/hospital have been completed.

6.5 If the application has been rejected by the committee, the center/hospital shall submit a fresh application with the prescribed application fee, if so desired.

7 INSPECTION OF AYUSH CENTER/HOSPITAL:

7.1 If the application is complete in all respect, the Additional Director (Ayush), CGHS HQ, New Delhi, will appoint an inspection team for Delhi/NCR consisting of at least two Ayush doctors, one of whom must be from the relevant stream. The inspection team will conduct a surprise inspection to the center/hospital within the stipulated time and submit the report.

7.2 Additional Director of CGHS cities will constitute an inspection team consisting of two doctors preferably both Ayush (one of whom must be from the relevant stream). If incase two Ayush Doctors are not available, the AD of CGHS city will nominate at least one Ayush Doctor in consultation with AD (Ayush).

7.3 In case, no CGHS Ayush Doctor is available, the AD of CGHS city shall constitute a team in consultation with AD (Ayush).

7.4 In case, the surprise visit report is found not satisfactory, center/hospital will not be considered for empanelment which will be communicated via email/post to the center/hospital.

7.5 In case, the center/hospital is recommended for empanelment, it shall be informed via email/post.

8 MEMORANDUM OF AGREEMENT (MoA):

8.1 The center/hospital selected for empanelment shall execute a Memorandum of Agreement (MoA) with the Additional Director (HQ), CGHS Bhawan, RK Puram Sector-13, New Delhi-110066 for Delhi/NCR. For cities outside Delhi/NCR, the MoA shall be executed with the Additional Director of the respective CGHS city. The agreement will outline the provision of services at CGHS approved rates and in accordance with the terms & conditions specified in the MoA.

8.2 The Memorandum of Agreement (MoA) shall be executed on a ₹100/- stamp paper, with the content printed on A4-sized sheets. It must be signed by the authorized signatory(ies) and duly notarized under the jurisdiction of the concerned Additional Director of the respective CGHS city/state. Witnesses are required to provide their full name, address, and contact details, along with a photocopy of a valid identity card.

9 PERFORMANCE BANK GUARANTEE:

9.1 The center/hospital that are selected for empanelment shall have to furnish a Performance Bank Guarantee of Rs.2,00,000/- (Two Lakhs) for Type X cities, Rs. 1, 50,000/- (One Lakh Fifty Thousands) for Type Y cities and Rs. 1,00,000/- (One Lakh) for Type Z cities. The guarantee must be valid for a period of 30 months i.e. six months beyond the empanelment period, to ensure efficient service delivery and safeguard against any defaults.

9.2 The Bank Guarantee shall be issued in favor of the Additional Director (HQ), CGHS Bhawan, RK Puram Sector-13, New Delhi-110066 for Delhi/NCR. For cities outside Delhi/NCR, it shall be issued in favor of the Additional Director of the respective CGHS city.

10 FORFEITURE OF PERFORMANCE BANK GUARANTEE AND REMOVAL FROM LIST OF EMPANELLED CENTER/HOSPITAL:

10.1 In case of any violation of the provisions of the MoA by the center / hospital such as:

- 10.1.1 Refusal of service,
- 10.1.2 Refusal of credit to eligible beneficiaries and direct charging from the CGHS beneficiaries,
- 10.1.3 Conducting un-prescribed procedures beyond the referral including non-listed procedures,
- 10.1.4 Prescribing medicines which are not mentioned in the formulary of CGHS and Essential Drug List of Ministry of Ayush at the time of discharge,
- 10.1.5 Deficient or defective service,
- 10.1.6 Over billing, forge bill claim etc.,
- 10.1.7 Negligence etc.,
- 10.1.8 Reduction in staff/infrastructure/equipment etc. claimed at the time of submission of application, affecting the standard of patient care,
- 10.1.9 Non submission of the report, habitual late submission or submission of incorrect data in the report,
- 10.1.10 Discrimination against CGHS beneficiaries vis-a-vis general patients,
- 10.1.11 Any fraudulent activities,
- 10.1.12 Violation of code of integrity and conflict of interest,
- 10.1.13 Publicity/advertisement within the premises of the CGHS Wellness Center/Hospital building,
- 10.1.14 Misleading advertisements or activities falling within the scope of the Drugs & Magic Remedies (Objectionable Advertisements) Act, 1954,
- 10.1.15 Sending message to beneficiaries inviting them for undergoing treatment in their Centers/Hospital for various diseases,
- 10.1.16 Noncompliance of CGHS instructions/T&C of MoA/Guidelines,
- 10.1.17 If the center/hospital fails to renew its NABH accreditation at any stage, or if the accreditation is revoked.

11 PROCEDURE FOR PENAL ACTION:

11.1 Any violation of the MoA/Guidelines, if observed by the competent authority on the basis of a complaint, medical audit, Suo Moto cognizance or inspections etc. carried out by CGHS at random.

The competent authority shall take following actions:

- a) Show cause notice
- b) Suspension of empanelment
- c) Imposition of penalty
- d) Forfeit of PBG
- e) De-empanelment
- f) Black listing from future empanelment of CGHS
- g) Any other legal action if deemed necessary

11.2 A show cause notice clearly specifying the details of MoA/guideline violations committed by the center/hospital, will be issued to the concerned center/hospital, with or without suspension,

depending on the severity of the violations. The center/hospital must respond to the notice within 07 days.

11.3 The competent authority will review the response and may proceed with further penal action as deemed necessary.

11.4 Suspension may be imposed immediately if serious violations are found prima facie. In other cases, where the response to the show cause notice is deemed unsatisfactory, the competent authority may invoke suspension pending further investigation. If the response from the center/hospital is found satisfactory, the competent authority may revoke the suspension, with or without imposing a penalty, as deemed necessary.

11.5 The imposition of a penalty, forfeiture of the security deposit*, de-empanelment of the center/hospital, blacklisting from future CGHS empanelment, and any other legal action may be decided by the competent authority based on the outcome of the investigation.

*a minimum of 15% of the Performance Bank Guarantee (PBG).

13 SUBMISSION OF CLAIM:

13.1 On-boarding on NHA /TMS portal: The empanelled center/hospital must complete their on-boarding on the NHA platform within 30 days from the date of empanelment, after signing the MoA, submitting the PBG, and providing the Letter of Acceptance of Rates. The center/hospital has to submit claims as per CGHS guidelines as per OM G.28011/1/2010-CGHS.II (Pt) dated 26th April, 2024. The following are the categories of beneficiaries:

- Serving
- Pensioners
- Freedom Fighters
- MPs
- Ex-MPs
- Others (includes Journalists, Autonomous bodies and Family Permit cards)

13.2 For serving employees the payment will be made by the beneficiary as per CGHS rates/entitlement and the patient will claim reimbursement from their respective office/department subject to the approved ceiling rates.

13.3 Center/hospital shall submit credit bills for pensioners, former Governors, former Vice-Presidents, ex-MPs, Freedom Fighters, and other eligible beneficiaries through the Bill Clearing Agency (BCA). For Delhi/NCR, the bills shall be submitted to the Additional Director (HQ), CGHS Bhawan, RK Puram Sector-13, New Delhi-110066. For cities outside Delhi/NCR, the bills shall be submitted to the Additional Director of the respective CGHS city. For Members of Parliament, bills shall be submitted to the Rajya Sabha Secretariat or Lok Sabha Secretariat, as applicable. Credit bills for serving beneficiaries of CGHS, DGHS, and the Ministry of Health & Family Welfare shall be submitted by Center/Hospital to their respective departments for consideration.

13.4 Geo-tagging (Digital mapping with GIS- Geographic Information System) shall be implemented whereby photographs with geo -tagging of the patients is taken on day to day basis. For payment, it is

essential to submit these geo-tagged photographic details during the submission of bills on the NHA portal and submission of bills offline as well.

14 Referral Mechanism under Day Care: -

14.1 Referral for Day Care procedures is at the discretion of authorized **Doctor of CGHS only**.

14.2 Referral Mechanism for Delhi/NCR is given in the table below:

| Clause/Scenario | Who Can Refer | Who can register and generate a Referral |
|--|--|---|
| 1 Referral for Yoga & Naturopathy | Ayurveda/ Siddha CGHS Doctor only . | Ayurveda/ Siddha CGHS Doctor only . |
| 2 Referral for Yoga & Naturopathy (If CGHS Ayurveda/Siddha doctor is not available) | Medical practitioner of Yoga & Naturopathy posted at Govt. hospitals/autonomous institutes under central/state government. | Before initiating treatment at Ayush empaneled center or any Government Institute, the beneficiary must intimate concerned AD of the CGHS city via email or letter. |

14.3 Referral Mechanism for CGHS covered cities (other than Delhi/NCR) is given in the table below:

| S. No. | Clause/Scenario | Who Can Refer | Who can register and generate a Referral |
|--------|---|--|---|
| 1 | CGHS AYUSH doctor of concerned stream is available | Concerned CGHS AYUSH Doctor only | Concerned CGHS AYUSH Doctor only . |
| 2 | CGHS AYUSH doctor of concerned stream is not available | Medical practitioner of concerned AYUSH stream attached to Govt. hospitals/autonomous institutes under central/state Government. | Before initiating treatment at Ayush empaneled center or any Government Institute, the beneficiary must intimate concerned AD of the CGHS city via email or letter. |
| 3 | Referral for Yoga & Naturopathy | Ayurveda/Siddha CGHS doctor only | Ayurveda/Siddha CGHS doctor only . |
| 4 | Referral for Yoga & Naturopathy (If CGHS Ayurveda/Siddha doctor is not available) | Medical practitioner of Yoga & Naturopathy posted at Govt. hospitals/autonomous institutes under central/state | Before initiating treatment at Ayush empaneled center or any Government Institute, the beneficiary must intimate concerned AD of the CGHS city via email or letter. |

| | | | |
|--|--|-------------|--|
| | | government. | |
|--|--|-------------|--|

- 14.4 The validity of referral date shall not be beyond 03 months.
- 14.5 The referral shall clearly mention the diagnosis and the recommended procedures, including their duration.
- 14.6 Referral shall be issued for a maximum period of two-weeks initially. Extension of the treatment duration for a further period of up to two-weeks under the Ayurveda, Siddha, and Unani systems shall be admissible only with prior approval from a CGHS/Government Doctor (mentioned in 14.2 and 14.3) of the concerned stream. In the case of Yoga and Naturopathy, such an extension shall be admissible only with prior approval from a CGHS/Government Doctor (mentioned in 14.2 and 14.3) of Ayurveda or Siddha. The CGHS beneficiaries will be referred to the Day Care Therapy Centers for Ayurveda, Yoga & Naturopathy, Siddha and Unani on the basis of the requirement of Day Care Therapy in a diseased condition which is not treatable by medication only.
- 14.7 The endorsing authority of CGHS i.e., CGHS Ayush Doctor shall record the necessary entry for such a referral in the CGHS doctor online module only. However, in case of net connectivity or electricity issue, manual endorsement shall be done in register specially made for this purpose.
- 14.8 The referral issued by a non-CGHS doctor should have the name and address of the hospital, the name of the doctor, qualification, their designation, and the registration number of the respective board (recognized under the NCISM/NCH Act or state board).
- 14.9 Only the regular CMO I/c, CMO, SMO, or MO are authorized to refer beneficiaries to private AYUSH HCOs for treatment.
In the absence of the Ayush regular CMO I/c, CMO, SMO, or MO, the Contractual Doctors shall refer.
In CGHS Ayush Wellness Centers where there is posting of only contractual Ayush Doctors, he/she shall be issuing referral to all beneficiaries.
- 14.10A referral is required for AYUSH procedures for beneficiaries of all age groups, including those aged 70 years and above.**
- 14.11A minimum gap of at least **6 months** should be observed before repeating Ayurveda/Yoga & Naturopathy/ Unani/Siddha treatment except in some parasurgical procedures (Kshara-sutra, Agnikarma, Ksharakarma etc.) wherever follow-up is required.

15 CHARGES AND OTHER CONDITIONS:

- 15.1 The center/hospital shall charge beneficiaries as per the CGHS approved rates and the conditions specified in the relevant OM. Only treatment procedures/therapies listed under CGHS shall be permitted at center/hospital offering Ayurveda, Yoga & Naturopathy, Unani, and Siddha systems of medicine.
- 15.2 It is clarified that the procedures suffixed with package treatment in annexure A2, Y2, N2, U2 & S2 are "Package treatment" and reimbursement shall be limited to the package rates.
- 15.3 The 'package rate' includes all charges pertaining to a particular treatment/procedure including registration charges, admission charges, accommodation charges, cost of medicines, Panch Karma charges, Room charges, charges for Kshara-sutra operation/procedure charges Doctor/Consultant visit charges, Monitoring charges, operation theatre charges, procedural charges/Surgeon's fee, cost

of disposable surgical charges and cost of all sundries used during hospitalization, routine investigations, physiotherapy charges etc. This also is inclusive of all sub-procedures and related procedures to complete the treatment.

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

15.5 The ceiling of maximum Rs. 1000/- as one-day combined package for both Yoga & Naturopathy procedures (Rs. 250/- per day as one-day yoga therapy package for Yoga and Rs. 750/- per day as one-day package treatment for Naturopathy), may be allowed as per the approved CGHS rates. However, rates and numbers of treating days will be counted as per the clarification issued by CGHS on dated **30th September, 2022** which is available CGHS website under Ayush circulars.

15.6 The Ayurveda, Yoga & Naturopathy, Unani and Siddha center/hospital will not refuse treatment to Central Government Employees or their dependent family members who are not CGHS beneficiaries, if they produce certified / attested copies of identity cards issued by the Government of India and shall not charge more than the CGHS prescribed **package/unit rates mentioned in A2/N2/Y2/S2/U2 Annexures of OM dated 09.11.2017**. In such cases, the Central Government employee shall make the payment in cash and subsequently claim reimbursement from their parent office/department as per the CGHS prescribed rates.

15.7 The list of CGHS rates for Ayurveda, Yoga & Naturopathy, Unani and Siddha are **enclosed (A2/N2/Y2/S2/U2)** are applicable to NABH accredited AYUSH Centers/Hospital and Non- NABH AYUSH Centers/Hospital shall be entitled for 15% lower Rates.

15.8 The unit rates mentioned in the rate list are all-inclusive (covering manpower, medicines, infrastructure, consumables, and the cost of all sundries used in the procedures). Therefore, no additional charges may be added to the claims beyond the approved rate list.

Room rent is **not admissible** for treatment procedures/therapies administered in Day Care Therapy Centers.

15.9 An Ayurveda, Yoga & Naturopathy, Unani and Siddha center/hospital empanelled as above, whose rates for treatment procedures are lower than the prescribed rates shall charge lower rates.

15.10 For the purpose of Day Care Therapy in Ayurveda, Yoga & Naturopathy, Unani, and Siddha, Government hospitals, autonomous hospitals funded by the Central or State Government, hospitals managed and run by councils under various ministries, and national institutes funded by the Central or State Government are deemed to be CGHS-empanelled. Treatments taken at such center/hospital shall be reimbursed at CGHS rates or hospital rates; whichever is lower. No referral is required for taking consultation and treatment at any Govt. Ayush hospital. However, such government facilities are encouraged to have a MoA with CGHS and to be on-boarded with NHA for providing credit facilities to the eligible CGHS beneficiaries.

15.11 When beneficiaries avail, day care therapy from a Government hospital, they may obtain the prescribed medicines from the AYUSH facility of the relevant stream under CGHS, if available in that city. Additionally, the concerned CGHS doctor may provide the same medicine or with equivalent therapeutic value available in the CGHS Wellness Centre. In CGHS cities where AYUSH facilities are not available, beneficiaries may procure the prescribed medicines from the open market with a valid GST

invoice and submit the bill to the concerned Additional Director of the respective CGHS city for reimbursement.

15.12 During the period of treatment at an AYUSH Day Care Center/Hospital, prescribed medicines shall be obtained from the CGHS AYUSH Wellness Centre in consultation with CGHS AYUSH doctor.

15.13 The empanelled Ayurveda Day Care Therapy Center/Hospital are strictly required to provide only CGHS approved procedures. If medicines are to be prescribed, they must be selected exclusively from the CGHS formulary.

15.14 Only AYUSH medicines manufactured by licensed ASU&H firms will be considered for reimbursement. Health supplements, advertised items, and cosmetics are not considered for reimbursement.

15.15 Center /Hospital shall provide credit facility to the entitled class of CGHS beneficiaries which includes Central Government pensioners and other entitled class of beneficiary, serving employees of Ministry of Health & Family Welfare, Serving employees of DGHS / CGHS and other notified categories.

15.16 In case of CGHS beneficiaries (Both serving & pensioners), CGHS card is valid at any Wellness Centers in India for availing CGHS facilities, irrespective of the WC/City, where it is registered. Empaneled HCOs shall provide treatment on credit basis to CGHS pensioner beneficiaries, ex-MPs, etc., irrespective of the City/Wellness Center where the CGHS Card is registered.

15.17 The **Ayurvedic treatment procedures** like *Vamana, Virechana, Snehapana, Siravyadhana (Raktmokhsana), Pizhichil, ShashtikaSaliPinda Sweda, Kasaya Basti (Nirooha Basti), Anuvasana (Sneha Basti);Siddha treatment procedureslike *Aruvai, Keeral, KuruthiVaangal (Cupping), Murichal/Kombu, Peetchu (Rectal oil Douche), Peetchu(Vaginal Douche) and Vamanam (Herbal Kudinner or Tablet)* are not permitted under Day Care System.*

15.18 Only 2 - 3 procedures per day from the relevant stream are allowed under the Day Care System.

15.19 Only treatment procedures / therapy as per CGHS list would be allowed to be taken from Day Care Center/Hospital in Ayurveda, Yoga & Naturopathy, Unani and Siddha.

15.20 The duration of treatment under the Day Care System for all AYUSH streams shall not be extended beyond 02 weeks.

15.21 The CGHS beneficiaries will be referred to the Ayurveda /Yoga & Naturopathy/ Unani/ Siddha Day Care Therapy Centre on the basis of the requirement of the Day Care Therapy in a diseased condition which is not treatable by medication only.

15.22 The shortlisted center/hospital recommended for empanelment shall have to sign MOA and submit Performance Bank Guarantee of requisite amount valid for a period of two year and six months before they are notified as empanelled under CGHS.

16 INSPECTION OF EMPANELED CENTERS/HOSPITAL:

16.1 CGHS reserves the right to monitor the treatment and procedures provided at the center/hospital.

16.2 The CGHS team will conduct surprise visits to empanelled center/hospital as needed to ensure the quality and safety of treatment for beneficiaries, and to evaluate the center/hospital's performance in accordance with the MoA.

17 LEGAL LIABILITIES:

17.1 Any legal liability arising out of such services, responsibility solely rests on the center/hospital and shall be dealt with the concerned empanelled center/hospital. Services will be provided by the center/hospital as per the terms of agreement to be signed between the center/hospital and Additional Director (HQ), CGHS Bhawan, RK Puram Sector-13, New Delhi-110066 in case of Delhi/NCR or with Additional Director of the concerned CGHS city in case of cities outside Delhi/NCR.

17.2 The decision of the CGHS will be final. However, Center/Hospital will have the right of appeal to Additional Director (HQ), CGHS Bhawan, RK Puram Sector-13, New Delhi-110066 in case of Delhi/NCR or to Additional Director of the concerned CGHS city in case of cities outside Delhi/NCR.

18 EXIT FROM THE PANEL:

The rates fixed by CGHS shall remain valid unless revised by CGHS. If the notified rates are not acceptable to the empanelled center/hospital, or if the center/hospital no longer wishes to continue for any other reason, center/hospital may apply for exclusion from the panel by giving a **30 days' notice** to CGHS. The center/hospital must ensure that any ongoing treatment of CGHS beneficiary is completed within the notice period.

Digitally signed by
Dr Satheesh Y H
Date: 08-08-2025
10:01:13
(Dr. Satheesh Y.H.)
Director, CGHS

6. Whether NABH Accredited

Whether Entry Level NABH

Whether Non-NABH

Details of Accreditation and validity period:-

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

➤ Ayurveda

➤ Yoga & Naturopathy

➤ Unani

➤ Siddha

8. Details of Demand Draft/ Bharatkosh: -

| S. No. | Fee | Name of the Bank and address | Detail of DD or Bharatkosh | | Amount in Rs. |
|--------|-----------------|------------------------------|----------------------------|------|---------------|
| | | | DD No. | Date | |
| 1 | Application Fee | | | | |
| 2 | Bharatkosh | | | | |

9. Details pertaining to the Centre/Hospital :

a. Total number of Therapy room

➤ Centre/Hospital with 02 therapy rooms (01 for male and 01 for female) or more will be considered. Hospitals with less than 02 therapy rooms will not be considered.

b. Separate Male and Female Post Therapy rest room

c. Area of the Center/ Hospital and particular therapy rooms:

- Total area (in sq. ft.) of the center/ hospital
- Area (in sq. ft.) allotted to OPD
- Area (in sq. ft.) allotted to therapy rooms

d. Staff Details:

- No. of the Doctors (Male/Female)
- No. of Specialists/Consultants
- No. of visiting Specialist/Consultants
- Total no. of Therapist (Male/Female)
- Total no. of pharmacist, if any
- Other staff

e. Alternate power source Yes No

f. Laboratory facilities if available Yes No

g. Supportive services:

- Ambulance Services
- Lift/ Chaircar
- Laundry
- Housekeeping
- Canteen
- Any other

Date:

Place:

Signature of Applicant/ Authorized Person

CERTIFICATE OF UNDERTAKING

1. It is certified that the particulars given above are correct and eligibility criteria are fulfilled.
2. That Centre/Hospital shall not charge CGHS beneficiaries higher than the CGHS notified rates or the rates charged from other patients who are not CGHS beneficiaries.
3. That the rates have been provided against a facility/procedure actually available at the institution.
4. That if any information is found to be untrue, Centre/ Hospital will be liable for de-recognition by CGHS. The institution will also be liable to pay compensation for any physical and or mental injuries caused to its beneficiaries or any financial loss caused to CGHS beneficiaries by its action.
5. That the Centre/ Hospital have the capability to submit bills/ medical records in electronic format. That all billing will be done electronic format and medical records will be submitted in Electronic format.
6. The Centre/Hospital will pay damage to the beneficiaries if any injury, loss of part or death occurs due to gross negligence.
7. That the center has not been de-recognized by CGHS or any state government or other organizations, after being empanelled.
8. That no investigation by Central Government/any State Government or any statutory investigating agency is pending or contemplated against the Centre/ Hospital.
9. The Centre/Hospital will duly communicate any changes in the infrastructure and manpower/staff at the time and after the empanelment.
10. Center/Hospital agrees to implement Electronic Medical Records and EHR as per the standards approved by Ministry.
11. Also I/We are not under suspension at the time of applying for empanelment/blacklisted by any PSU/Government Department/ Financial Organization/ Court.
12. Undertaking for submitting signed MOA on Rs. 100/- Non Judicial Stamp Paper.
13. Centre/Hospital will cooperate in every situation if or when CGHS Inspection committee will visit the Centre/Hospital.
14. Undertaking in the name of the owner of the Hospital for no on-going dispute with any person /organization in any terms including land, property, etc.
15. I/We hereby certify that I/We have read and understood the complete Terms & Conditions of empanelment, and I/We agree to abide by all the clauses and conditions stated therein.

Date:

Place:

Signature of Applicant/ Authorized Person

LIST OF DOCUMENTS TO BE ENCLOSED

1. Copy of certificate or memo of State Health authority, if any, recognizing the Centre/ Hospital.
2. Copy of valid fully accredited NABH Certificate/Entry Level NABH, if applicable.
3. Copy of audited balance sheet, profit and loss account for the last 02 years-(Main documents only-Summary sheet).
4. Copy of legal status, place of registration and principal place of business of the Centre/ Hospital or partnership firm etc.
5. A copy of partnership deed/memorandum and articles of association , if any
6. Copies of all statutory requirements like BMW disposal management, Air and Water consent, Drug License, Green clearance, Fire clearance etc.
7. Photo copy of PAN card.
8. Name and address of their bankers along with crossed blank cheque to facilitate ECS system.
9. Copy of the existing list of rates approved by the Centre/ Hospital for various services/ procedures being provided by as well as copy of approved rate list issued by CGHS.
10. List of staff working in the Centre/ Hospital including visiting specialists.
11. Staff's Certificates i.e. Educational Certificates, Appointment letter, Joining letter, Attendance, Pay roll and Salary statement issued by bank and for Doctors- copy of Valid Ayush Board registration certificate of respective state etc.
12. The application fee of Rs. 2000/- must be paid either through a Demand Draft (DD) in favour of 'PAO, CGHS, New Delhi/concerned CGHS City' or via the Bharatkosh Payment System.
13. Any other documents relevant to empanelment.

Signature of Applicant/ Authorized Person

Date:

Place:

ACCEPTANCE LETTER

Dated:-

From,

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

To,

The Additional Director (HQ)/The Additional Director (city.....) CGHS
Address ...

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

Sir,

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

Category:

- Ayurveda
- Yoga & Naturopathy
- Unani
- Siddha

Yours faithfully,

(Signature &Name with stamp)

Unit Cost of Ayurvedic therapies / interventions in OPD/IPD offered to NABH accredited empanelled Hospitals in CGHS.

| Therapy/Intervention | | |
|----------------------|---|---------------------|
| S.No. | Treatment Name | Unit Cost in Rupees |
| 1 | Abhyanga | 1145 |
| 2 | Abhyanga-Sthanika | 570 |
| 3 | Abhyanga+Sweda | 1280 |
| 4 | Avagaha | 765 |
| 5 | Anjana | 340 |
| 6 | Aanchana (Traction) | 480 |
| 7 | Annalepa/Njavaratheppu-Full Body | 1290 |
| 8 | Annalepa/Njavaratheppu- Sthanikam | 755 |
| 9 | Aschothana | 335 |
| 10 | Agnikarma-Infra Red Coagulation (Package rate for full Course of treatment) | 10,000 |
| 11 | Agnikarma-High frequency Coagulation (Package rate for full Course of treatment) | 10,000 |
| 12 | Agnikarma-Radio frequency Coagulation (Package rate for full Course of treatment) | 10,000 |
| 13 | Achasnehapana/day | 440 |
| 14 | Bhedana (of Eye) | 565 |
| 15 | BhagnaBandhana (Fracture Bandage with Reduction & Immobilisation) | 885 |
| 16 | Choorna Pinda Sweda/Podikkizhi-Full Body | 1210 |
| 17 | Choorna Pinda Sweda/Podikkizhi- Sthanika/Ekangam | 715 |
| 18 | DhanyaPindaswedam/Dhanyakkizhi/Navadhanyakkizhi-Full Body | 1245 |
| 19 | Dhara/Sirodhara-Thaila | 1420 |
| 20 | Dhanyamladhara-Sthanika/Local-Katee Dhara etc | 705 |
| 21 | Dhoopana | 480 |
| 22 | Dhoomapana | 460 |
| 23 | Dhanyamla Pindaweda/Dhanyamlakkizhi/Kaatikkizhi-Full Body | 1240 |
| 24 | Eshana | 565 |
| 25 | Greevavasthi | 845 |
| 26 | Gandoosha | 390 |
| 27 | Goshbanabandha | 300 |
| 28 | Jaloukavacharana | 745 |
| 29 | Jambeerapindasweda/Narangakkizhi-Full Body | 1190 |
| 30 | Januvasthi | 845 |
| 31 | Kabala | 390 |
| 32 | Kateevasthi | 845 |

| | | |
|----|--|--------|
| 33 | Kashayavasthi (Niroohavasthi)-Different varieties | 1030 |
| 34 | KashayaDhara-Full Body | 1045 |
| 35 | KashayaDhara-Ekangam/Local | 635 |
| 36 | KsheeraDhara (Medicated-different varieties)-Full Body | 1155 |
| 37 | KsheeraDhooma | 735 |
| 38 | Kshara Karma (Package rate for full course of treatment) | 10,000 |
| 39 | Ksharasoothra-Low level fistula (Package rate for full course of treatment) | 10,000 |
| 40 | Ksharasoothra-Middle level fistula (Package rate for full course of treatment) | 10,000 |
| 41 | Ksharasoothra-High level fistula (Package rate for full course of treatment) | 10,000 |
| 42 | Kshalana | 355 |
| 43 | Kshara Pathana (Package rate for full course of treatment) | 10,000 |
| 44 | Karnapoorana | 350 |
| 45 | Kuttanam | 540 |
| 46 | Lekhana | 540 |
| 47 | Lepa/Lepana-Local | 390 |
| 48 | Mathravasthi | 350 |
| 49 | MamsaPindaSweda/Mamsakkizhi-Full Body | 1420 |
| 50 | MamsaPindaSweda/Mamsakkizhi-Sthanikam/Ekangam | 820 |
| 51 | Mukhalepa | 490 |
| 52 | Moordhataila | 315 |
| 53 | Nadeesweda/Snigdhasweda-Full | 580 |
| 54 | Nadeesweda/Snigdhasweda-Ekangam/Local | 450 |
| 55 | Nethradhara/Akshiseka | 595 |
| 56 | Nasya | 600 |
| 57 | PathraPindaSweda/Ilakkizhi-full | 1220 |
| 58 | PathraPindaSweda/Ilakkizhi-Sthanika/Ekangam | 720 |
| 59 | Pizhichil/Kayaseka | 1995 |
| 60 | Pizhichil-Sthanikam/Ekangam/Local | 1105 |
| 61 | Pichu | 410 |
| 62 | Prushtavasthi | 845 |
| 63 | Putapaka | 850 |
| 64 | Prachanna | 590 |
| 65 | Pindi | 450 |
| 66 | ShashtikapindaSweda/Navarakkizhi-Full Body | 1320 |
| 67 | ShashtikapindaSweda/Navarakkizhi-Ekangam/Sthanikam | 770 |
| 68 | Sirovasthi | 970 |
| 69 | Snehapana/day | 440 |
| 70 | Sirolepa/Thalapothichil | 1120 |
| 71 | Siravayadha/Siravedha/Rakthamoksha | 640 |
| 72 | Taila Vasthi | 710 |

| | | |
|----|---|--------|
| 73 | Thakradhara | 1145 |
| 74 | Thalam | 410 |
| 75 | Tharpana | 735 |
| 76 | Tailadaha (Package rate for full course of treatment) | 10,000 |
| 77 | Thakrapana | 250 |
| 78 | Utharavasthi | 1100 |
| 79 | Udwarthana | 1095 |
| 80 | Urovasthi | 845 |
| 81 | Upanaha/Upanahasweda | 590 |
| 82 | Vamana | 745 |
| 83 | Virechana | 355 |
| 84 | Valukasweda/Manalkkizhi-Full Body | 1080 |
| 85 | Vitalaka/Bitalaka | 450 |
| 86 | Yoniprakshalana | 500 |
| 87 | Yonidhavana | 500 |
| 88 | Yoni Pichu | 460 |
| 89 | Yoni Poorana | 460 |
| 90 | Yoni Dhoopana | 335 |
| 91 | Yoni Dhoopana | 655 |
| 92 | Valukasweda/Manalkkizhi-Sthanikam | 1095 |
| 93 | Ksheeradhara-Head | 735 |
| 94 | Jambeerapindasweda/Narangakkizhi-Sthanika/Local | 730 |
| 95 | Dhanyapindasweda-Sthanika/Local | 705 |
| 96 | Dhanyamlapindasweda/Katikkizhi-Sthanika | 330 |
| 97 | Veshtanam | 995 |
| | Agnikarma (Classical with Panchalohasalaka) | |

1. Determination of treatment expenditure for payment / reimbursement.

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

- The above unit rates of therapies / interventions shall be benchmarks for calculating treatment expenditure.
- The above unit rates are inclusive of the implication of materials medicines, accessories, equipments maintenance, manpower (Medical, Paramedical and Nursing) and diet used in imparting therapies.
- Pre and post procedure cost will be chargeable @ Rs. 75 per day.

**Unit Cost of Yoga therapies / interventions in OPD/IPD offered to NABH
accredited empanelled Hospitals in CGHS.**

| S.No. | Procedures/Treatment | Rate per Unit. |
|-------|--|----------------|
| 01 | Jalaneti (OPD) | Rs. 050/- |
| 02 | Sutra neti (OPD) | Rs.050/- |
| 03 | Dugdhaneti (OPD) | Rs.100/- |
| 04 | Ghritaneti (OPD) | Rs.100/- |
| 05 | Kunjala/ Vamanadhouti (OPD) | Rs.100/- |
| 06 | Vastradhouti (OPD) | Rs.100/- |
| 07 | Jalabasti (OPD) | Rs.150/- |
| 08 | Sthalabasti (OPD) | Rs.050/- |
| 09 | Moolashodhana/ Chakri Karma (OPD) | Rs.050/- |
| 10 | Shankhprakashalana (with therapeutic diet) (OPD) | Rs.500/- |
| 11 | Kapalabhati (OPD) | Rs.025/- |
| 12 | Nauli (OPD) | Rs.050/- |
| 13 | Trataka (Jyoti) (OPD) | Rs.050/- |
| 14 | Shat Karma package-I (Jalaneti, Sutra neti and Kapalabhati) (OPD) | Rs.150/- |
| 15 | Shat Karma Package-II (Jalaneti, Sutra neti, Kunjala/Vastra Dhauti and Kapalabhati) (OPD) | Rs.200/- |
| 16 | Trataka Package (Jatrutrataka, Jyoti Trataka, Eye wash and relaxation technique) (OPD) | Rs.100/- |
| 17 | Individual Yoga Therapy Session (Yogic Sukshmvayayama, Surya namaskar, Yogasana, Relaxation) (Minimum one hour duration) (OPD) | Rs.100/- |
| 18 | Individual Pranayama/ Dhyana (Meditation) session (Minimum one hour duration) (OPD) | Rs.100/- |
| 19 | One day individual Yoga therapy package (Shatkarma, Yogasana, Pranayama, Dhyana) (around 3 hours) (OPD) | Rs.250/- |
| 20 | One week individual Yoga therapy package (Shatkarma, Yogasana, Pranayama, Dhyana etc. (Minimum 01 hour daily) (OPD) | Rs.500/- |
| 21 | One month individual Yoga therapy package (Shatkarma, Yogasana, Pranayama, Dhyana etc.) (Minimum one hour daily) (OPD) | Rs.1,500/- |
| 22 | One week Yoga therapy package (3-4 hours per day) (OPD) | Rs.1500/- |
| 23 | Two weeks Yoga therapy package (3-4 hours per day) (OPD) | Rs.2500/- |
| 24 | One month Yoga therapy package (3-4 hours per day) (OPD) | Rs.5000/- |
| 25 | One week Yoga therapy package (Indoor)/(IPD) | Rs.10,000/- |
| 26 | Two weeks Yoga therapy package (Indoor)/(IPD) | Rs.18,000/- |
| 27 | Three weeks Yoga therapy package (Indoor)/(IPD) | Rs.25,000/- |

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

1. Determination of treatment expenditure for payment / reimbursement.

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

- a) The above unit rates of therapies / interventions shall be benchmarks for calculating treatment expenditure.
- b) The above unit rates are inclusive of the implication of materials medicines, accessories, equipments maintenance, manpower (Medical, Paramedical and Nursing) and diet used in imparting therapies.
- c) Pre and post procedure cost will be chargeable @ Rs. 75 per day.

**Unit Cost of Naturopathy therapies / interventions in OPD/IPD offered to
NABH accredited empanelled Hospitals in CGHS.**

| S.No. | Procedures/Treatment | Rate per Unit |
|-------|--|---------------|
| | JalChikitsa (Hydrotherapy) | |
| 1 | Hip Bath | Rs. 150/- |
| 2 | Spinal Bath | Rs.100/- |
| 3 | Spinal Spray | Rs.200/- |
| 4 | Arm/Foot Bath | Rs.150/- |
| 5 | Full Immersion Bath | Rs.200/- |
| 6 | Local jet spray | Rs.200/- |
| 7 | Under Water Massage | Rs.350/- |
| 8 | Deluxe Hydro Massage | Rs.400/- |
| 9 | Whirl pool Bath | Rs.400/- |
| 10 | Circular jet bath | Rs.350/- |
| 11 | Enema | Rs.100/- |
| 12 | Colon Hydorthrapy | Rs.500/- |
| 13 | Local steam | Rs.100/- |
| 14 | Full Body steam | Rs.200/- |
| 15 | Sauna Bath | Rs.250/- |
| | Mardana Chikitsa | |
| 16 | Full Body Mardana | Rs.300/- |
| 17 | Local Mardana | Rs.150/- |
| 18 | Dry Mardana | Rs.200/- |
| | Packs/Fomentation | |
| 19 | Full wet sheet pack or Fomentation | Rs.150/- |
| 20 | Local Pack / fomentation (chest,abdomen, leg etc.) | Rs.100/- |
| | Mud Therapy | |
| 21 | Full body mud bath | Rs.250/- |
| 22 | Local Mud pack/application | Rs.100/- |
| | Chromo Therapy | |
| 23 | Thermoleum Sun Bath | Rs:200/- |
| | Naturopathy Therapeutic Diet | |
| 24 | Naturopathy diet (Single Serve) | Rs.100/- |
| | Package Treatments with minimum 3 procedures. | |
| 25 | One day package treatment (OPD) | Rs.750/- |
| 26 | One week package treatment (OPD) | Rs.3,500/- |
| 27 | Two weeks package treatment (OPD) | Rs.6,000/- |
| 28 | Three weeks package treatment (OPD) | Rs.9,000/- |
| 29 | One week package treatment (IPD) | Rs.10,000/- |
| 30 | Two weeks package treatment (IPD) | Rs.18,000/- |
| 31 | Three weeks package treatment (IPD) | Rs.25,000 |

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

1. Determination of treatment expenditure for payment / reimbursement.

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

- a) The above unit rates of therapies / interventions shall be benchmarks for calculating treatment expenditure.
- b) The above unit rates are inclusive of the implication of materials medicines, accessories, equipments maintenance, manpower (Medical, Paramedical and Nursing) and diet used in imparting therapies.
- c) Pre and post procedure cost will be chargeable @ Rs. 75 per day.

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

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

| Sl. No | Disease | Condition needing hospitalization | Indicated therapies required as per the condition of patient | Likely duration of hospitalization |
|--------|--|---|--|------------------------------------|
| 1. | SwasaRoga, KasaRoga (Restrictive /Obstructive Pulmonary Diseases, Bronchial Asthma, Emphysema, COPD..etc) | <ul style="list-style-type: none"> Breathing difficulty Cough Fever | Snehapana, Abhyanga, Nadeesweda, Vamana, Virechana, Kavala, Dhoomapana, Nasya, Pizhichil, Thakra Dhara, Urovasthi, Taila Vasthi, Kashaya Vasthi,Pichu, Thailam, Kashay Dhara, Dhanyamla Dhara, Lepam | 7- 28 DAYS |
| 2 | Greevastambha, Greevashundana (Cervical spondylosis, Cervical spondylitis, Ankylosing spondylitis of cervical spine, Cervical disc prolapse.etc) | <ul style="list-style-type: none"> Persisting or radiating pain in cervical region Restricted neck movements Tenderness Numbness Vertigo | Abhyanga, Lepa, Upanaha, Jambeerapindasweda,, Kukkutandapindasweda, Shashtikapindasweda, Churnapindasweda, Pizhichil, Pathrapindasweda, Dhanyamlapindasweda, Dhanyamladhara, Pichu, Valukasweda, Aanchanam, Sthanika Sekam, Nadeesweda, Greevavasthi, Nasya, Kavala, Dhoomapana, Sirovasthi, Snehapana,Vamana, | 7- 28 DAYS |

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| | | | Virechana, Kashaya Vasthi, Thailavasthi, Thalam, Veshtanam, Dhanya Pindasweda, Valuka Sweda | |
| 3 | Kateegraha, gridhrasi, kateesoolatrikap ristakateegraha, (Sciatica, Low Back Pain/Ache, I.V.D.P, Spondylolysthesi s...etc) | <ul style="list-style-type: none"> • Persistent or radiating back pain • Restricted movements of low back/ hip region • Tenderness • Burning sensation | KatiVasthi, PrishtaVasthi, Agnikarma, Kati-pichu, SiraVyadha/Siravedha, Virechana Abhyanga, Lepa, Upanaha, Jambeerapindasweda, Kukkutandapindasweda, Shashtikapindasweda, Churnapindasweda, Pizhichil, Pathrapindasweda, Dhanyamla Pindasweda, Dhanyamla Dhara, Pichu, Valukasweda, Aanchanam, Sthanika sekam, Nadeesweda, Kati Vasthi, Avagaha, Snehapana, Virechana, Thailavasthi, Kashayavasthi, Ksheeradhara, Prishtasandhi-marma abhyanga (Lumbar manipulation), Veshtana, Dhanya pindasweda, Valuka sweda | 7- 28 DAYS |
| 4 | Apabahuka, Viswachi (Frozen shoulder, Periarthritis, Tendinitis, | <ul style="list-style-type: none"> • Radiating or local pain in shoulder region • Restricted shoulder movements • Tenderness • Numbness | Agnikarma, Abhyanga, Lepa, Upanaha, Veshtanam, Jambeerapindasweda, Kukkutandapindasweda, Shashtikapindasweda, Churnapindasweda, Pizhichil, | 7-28 DAYS |

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|---|--|---|--|-----------------|
| | Brachial neuralgia.....etc) | <ul style="list-style-type: none"> • Muscle wasting | Pathrapindasweda, Dhanyamlapindasweda, Dhanyamladhara, Pichu, Valukasweda, Aanchanam, Sthanika sekam, Nadeesweda, Greevavasthi, Nasya, KaVala, Dhoomapana, Sirovasthi, Snehapana, Vamana, Thailavasthi, Kashayavasthi, Dhanya pindasweda, Valuka sweda, Mamsa pindasweda | |
| 5 | Pakshaghata (Paralysis, Hemiplegia, Hemiparesis...etc) | <ul style="list-style-type: none"> • Weakness of one side of the body • Stiffness of muscles • Muscle weakness • Numbness • Pain • Tremor • Difficulty in speech | virechana, kashaya vasthi, taila vasthi, shashtikapindasweda, pathra pindasweda, choorna pindasweda, jambeera pindasweda, dhanyamla pindasweda, sirovasthi, thalapothichil, pichu,seka, nasya, kabala, dhoomapana, abhyanga, thalam, moordhathailam, pizhichil, thailadhara, kashayadahara, ksheeradhara, ksheera dhoomam, jihwalepam, nadeeswedam, valuka sweda, mamsa pindasweda | 14 – 35 DAYS |
| 6 | Kampavata(Neuro-spastic conditions, Parkinson's | <ul style="list-style-type: none"> • Tremor • Stiffness of muscles • Muscle weakness • Walking | pizhichil, nasya, kabala, gandoosha, dhoomapana, sirovasthi, ushmasweda, pichu, choornapindasweda, | 14- 28 DAYS |

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| | disease..etc) | <p>difficulty</p> <ul style="list-style-type: none"> • Sluttering movements • Difficulty in speech | <p>pathrapindasweda, jambeerapindasweda, shashtikapindasweda,lepa,abhyanga, nadeesweda,ksheeradhooma, thailavasthi, kashayavasthi, ksheeradhara-full body (different varieties), dhanyamlapindasweda, dhanyapindasweda, mamsapindasweda</p> | |
| 7 | Ardita (Facial Paralysis..etc) | <ul style="list-style-type: none"> • Weakness of facial muscles • Drooping of eye lids • Numbness of facial muscles • Salivation | <p>murdhataila, nasya, kabala, dhoomapana, mukhabhyanga, nadeesweda, gandushaksheeradhooma, karnapoorana, akshitharpana, thalam, thailadhara,thakradhara, sirovasthi, pichu, thalapothichil/sirolepa, virechana, tailavasthi, kashayavasthi, choornapindasweda, pathrapindasweda, annalepa/ navaratheppu- sthanika</p> | 7- 21 DAYS |
| 8 | Vatarakta (gouti arthritis ischaemic limb, sle, rheumatoid arthritis..etc), kroshtukasheers ha | <ul style="list-style-type: none"> • Joint pain • Swelling • Tenderness • Deformity • Burning sensation • Discolouration | <p>kashaya vasthi, thaila vasthi, virechana, parisheka, rakthamoksham- jaloukavacharana, siravedha, patra pinda sweda, nadee sweda, veshtana, valuka sweda, choorna pinda</p> | 14-28 DAYS |

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| | | | sweda, shashtika pinda sweda, dhanyamla dhara, dhanyamla pinda sweda, ksheera dhara, kashaya dhara, lepana, upanaha, avagaha, snehapana, pizhichil | |
| 9 | Amavata (Connective tissue disorder, Rheumatic fever..etc) | <ul style="list-style-type: none"> • Heaviness of body • Body ache • Immobility • Fever • Swelling • Pain in low back | virechana, kashaya vasthi, thaila vasthi, valuka sweda, choorna pinda sweda, dhanyamla pinda sweda, dhanyamla dhara, rakthamokshana, upanaha, lepana, dhanya pindasweda, nadee swedam | 14-28 DAYS |
| 10 | Sarvanga Vata (Cerebral atrophy, Cerebral Diplegia, Motor-Neuron diseases, M.N.D, M.S, C.P..etc), SUPTHI (Neurological disorders, Fibromyalgia..etc) | <ul style="list-style-type: none"> • Generalized pain • Stiffness • Numbness • Weakness • Feeling of coldness | Shastikapidna sweda, Kaya Seka/Pizhichil, Annalepana/Navaratheppu, Abhyanga, Kashayavasthi, thailavasthi, Shiropichu, Snehapana, ChoornaPindasweda, DhanyamlaDhara, DhanyamlaPindaSweda, PathraPindaSweda, Thailadhara, ThakraDhara, Sirolepam, Nasyam, Ksheeradharma, MamsaPindasweda | 14-28 DAYS |
| 11 | Sandhigatavata (DEGENERATIVE JOINT) | <ul style="list-style-type: none"> • Joint pain • Restricted joint movements • Stiffness | Januvasti, Kashaya vasthi, Thaila Vasthi, Prushta Vasthi, Katee Vasthi, Greeva | 14-28 Days |

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| | DISORDERS, TENNIS ELBOW), VATHAKANDAKAM (CALCANEAL SPUR) | <ul style="list-style-type: none"> • Crepitus | Vasthi, Jaloukavacharana, Choorna Pindsweda, Pathra Pinda Sweda, Shashtika Pinda Sweda, Sthanika Annalepa, Sthanika Vasthi, Upanaha, Lepa, Pichu, Snehapana, Parisheka, Veshtana, Mamsakkizhi, Ksheeradhara, Pizhichil | |
| 12 | Twak Vikara (Skin Diseases), Kitibha, Ekakushta, Vicharchika, Gajacharma (Lichen Planus, Psoriasis, Eczema..etc) | <ul style="list-style-type: none"> • Discolouration • Itching • Scaling • Oozing • Peeling • Burning sensation • Numbness | Vamana, Virechana, Nehapana, Rakthamokshana- (Jaloukavacharana, prachana, siravedha/ siravyadha) , Parisheka, Takradhara, Lepa, KashayaDhara, KashayaVasthi, TailaVasthi, Kshalana, Abhyanga, NadeeSweda | 8-28 Days |
| 13 | Visarpa (Cellulitis, Erisipelus, Necrotising Cellulitis, Impetigo, Pemphigus vulgaris...etc), Grandhi, Arbuda(Benign & Malignant growths, Hodgkins | <ul style="list-style-type: none"> • Rashes • Blisters • Itching • Oozing • Burning sensation • Pain • Growths | Rakthamokshana, Jalukavacharana, Vamana, virechana, Kashaya Vasthi, Thaila Vasthi, Kashaya Dhara, Thakra Dhara, Abhyanga, lepa, | 14- 28 Days |

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| | disease..etc)), | | | |
| 14 | Arsha, Bhagandara, Parikarthika (Haemorrhoid, Fistula in ano, Fissure in ano..etc), NADEE VRANA (Pilonoidal sinus..etc) | <ul style="list-style-type: none"> • Constipation • Pain in anal region • Itching around anus • Burning sensation • Prolapse of mass from anus • Bleeding from anus • Pus from anus | Virechana, Avagaha, Upanaha, Lepa, Taila Vasthi- Mathravasthi, Kshalana, Thakrapana, Varthi, Ksharakarma,Ksharasoothra, Agnikarma Varieties Like Classical/ Infra Red Coagulation/ High Frequency Coagulation/ Radio Frequency coagulation ..etc, suction aided ring ligation procedure, Kshara Pathana, Taila Daha, Dhoopana, Goshbanabandha, | 1-7 DAYS |
| 15 | Moothraghata, Moothrakruchra, Asmari (Renal dysfunction, Renal/Urinary Calculi, Urinary Dysfunction/ Obstruction...etc) | <ul style="list-style-type: none"> • Painful micturition or Pain in scrotum and penis with decreased urine output • Presence of blood with urine may be present | Snehapana, Nadee Sweda, Virechana, Avagaha, Kashaya vasthi, Taila Vasthi, Abhyanga,Uthara Vasthi, Lepa, Dhara-Sthanika | 14-28 DAYS |
| 16 | Kashtarthava, Kruchrarthava, Artava Dushti, Yonee Roga , Rakthapradara (Amenorrhoea, Dysmenorrhoea, | <ul style="list-style-type: none"> • Severe pain with menstruation • Very less menstrual flow or no Menstruation • Irregular menstruation • Abnormal menstruation | Vamana, virechana, Kashaya vasthi, Thaila Vasthi, Nasya, snehapana, Uthara vasthi, Yoni Prakshalana, Udwarthana, Dhanyamla Dhara, Dhanyamla Pinda | 14- 28 DAYS |

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| | PCOD/ PCOS, D.U.B..etc) | | Sweda, Avagaha , Yonidhavana, Yoni Pichu, Yoni Poorana, Yoni Dhoopana, Abhyanga, Ksharakarma, Nadeesweda | |
| 17 | Mamsagata Vikara, Mamsakshaya (Muscular Dystrophy...etc) | <ul style="list-style-type: none"> Weakness of muscles Wastage of muscles | Choorna Pindasweda, Pathra Pinda Sweda, Swedana, Shashtika Pinda Sweda, mamsa Pinda Sweda, Annalepa, Vesthanam, Pizhichil, Udwarthana, Upanaha, Matra Vasthi, Kashaya Vasthi | 14-28 DAYS |
| 18 | Dristidosha- Asama Drishti, Nethraja Rakthapitham, Jeerna Nethrabhishyam, Sushkakshipakam, Adhimandam, Nakulandhyam, Puyalasa, Chathurtha Patalagatha Vikara (Refractive errors, Chronic Allergic & Inflammatory diseases, Chronic | <ul style="list-style-type: none"> Diminished vision Photophobia Dyplopia Watering of eyes Pus formation in eyes Itching of eyes Strain & pain in eyes Restricted field of vision Headache | Tharpana, aschothana, Nasya, Eye exercises, Anjana, Putapaka, Shashtika Pindasweda- Sthanika, Kashaya Vasthi, Thaila Vasthi, Jaloukavacharana, Nethra Dhara/ Akshi Seka, Sirovasthi, Taila Dhara, Thakra Dhara, Pichu, Dhoomapana, Snehapana, Virechana, Pindi, Vitalaka, Kshalana, Sirolepa, Sirolepam, Thalam, Eshana, Bhedana | 7- 28 DAYS |

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| | Conjunctivitis, Dry Eye Syndrom,Retinitis Pigmentosa, Night Blindness, Dacrocystitis, A.R.M.D, Retinopathy, Blepharospasm.. etc) | | | |
| 19 | Sirasoola, Sooryavartham, Ardhavabhedaka m(Migraine, Headache...etc) | <ul style="list-style-type: none"> • Severe headache • Heaviness of head • Nausea • Photophobia | Snehapana, Nadee Sweda, Nasya, Vamana, Virechana, Dhoomapana, Kabala, Gandoosha, Thalam, Moordha Taila, Pichu- Siropichu, Sirovasthi, Tailadhara, Thakradhara | 7- 21 DAYS |
| 20 | Khanja ,Pangu- Abhigathaja, AbhighatajaVikar a(Restricted movements due to fracture/ dislocation..etc) | <ul style="list-style-type: none"> • Dislocation of bone/ cartilage/ vertebrae • Pain • Swelling • Restricted or painful movements of associated area/ nearby muscles | Veshtanam, Lepam, Dhara- Sthanika, Kukkutanda Pinda Sweda, Jambeera Pindasweda, Shashtika Pinda Sweda, Annalepa, Choorna Pindasweda, Pathra Pindasweda, Pizhichil, Dhanyamla Dhara, Pichu, Abhyanga | 14-21 DAYS |

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

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

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

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

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

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

3. Determination of treatment expenditure for payment/reimbursement

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

3. Determination of treatment expenditure for payment/reimbursement

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

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

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

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

| Sl. No | Disease | Condition needing hospitalization | Indicated therapies required as per the condition of patient | Likely duration of hospitalization |
|---------------|--|--|---|---|
| 1 | 2 | 3 | 4 | 5 |
| 1. | Iraippu, Swasa Kasam, Kaba noigal etc., (Restrictive Obstructive Pulmonary Diseases, Bronchial Asthma and other respiratory disorders) | <ul style="list-style-type: none"> • Difficulty in Breathing • Cough • Fever • Head ache | Ennai Kuzhiyal Kalichal / Vaanthi / Kutram thannilai paduthal Thokkanam Nasiyam Nasigaparanam Ottradam Pasai Pugai Poochu Ennai Poochu Ennai Kattu Patru Pottanam Varthi – Thiri Vedhu Peechu Suttigai Asanam Pranayamam Varmam application | 3- 28 Days |
| 2 | Sagana Vaatham (Cervical Spondylosis, Cervical Spondylitis, | <ul style="list-style-type: none"> • Persisting or radiating pain in cervical region • Restricted neck | Ennai Kuzhiyal Kalichal / Vaanthi / Kutram thannilai | 7- 28 Days |

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

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| | | | Podi Kizhi Illai Kizhi Manar Kizhi Dhaniya Kizhi Poochu Patru Pottanam Pasai Peechu Kattu Kali Suttigai Attai Vidal Ottradam Varthi / Thiri Vedhu Thuvalai Pranayamam Varmam application Asanam | |
| 4 | Keel Vaayu Kumba Vaatham (Arthritis, Frozen Shoulder, Periarthritis, Tendinitis, Brachial Neuralgia) | <ul style="list-style-type: none"> • Radiating or local pain in shoulder region • Restricted shoulder movements • Tenderness • Numbness • Muscle wasting | Ennai Kuzhiyal Kalichal / Vaanthi / Kutram thannilai paduthal Thokkanam Ennai Kizhi Ennai Kattu Ennai Poochu Nasiyam Podi Kizhi Illai Kizhi Manar Kizhi Dhaniya Kizhi Poochu | 7-28 Days |

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| | | | Patru Pottanam Pasai Peechu Kattu Kali Suttigai Attai Vidal Ottradam Varthi / Thiri Vedhu Thuvalai Pranayamam Varmam application Asanam | |
| 5 | Pakka Vatham, Patcha Vaatham (Paralysis, Monoplegia Hemiplegia, hemiparesis) | <ul style="list-style-type: none"> • Weakness of one side of the body • Stiffness of muscles • Muscle weakness • Numbness • Pain • Tremor • Difficulty in speech | Ennai Kuzhiyal Kalichal / Vaanthi / Kutram thannilai paduthal Thokkanam Ennai Kizhi Ennai Kattu Ennai Poochu Nasiyam Podi Kizhi Illai Kizhi Manar Kizhi Dhaniya Kizhi Poochu Patru Pottanam Pasai Peechu Kattu | 14 – 35 Days |

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| | | | Kali Suttigai Attai Vidal Ottradam Varthi / Thiri Vedhu Thuvalai Pranayamam Varmam application Asanam | |
| 6 | Paanikkamba vaatham, Sirakamba vaatham | <ul style="list-style-type: none"> • Tremor • Stiffness of muscles • Muscle weakness • Difficulty in walking • Sluttering movements • Difficulty in speech | Ennai Kuzhiyal Kalichal / Vaanthi / Kutram thannilai paduthal Thokkanam Ennai Kizhi Ennai Kattu Ennai Poochu Nasiyam Podi Kizhi Illai Kizhi Manar Kizhi Dhaniya Kizhi Poochu Patru Pottanam Pasai Peechu Kattu Kali Suttigai Attai Vidal Ottradam | 14- 28 Days |

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| | | | <p>Varthi / Thiri Vedhu Thuvalai Pranayamam Varmam application Asanam</p> | |
| 7 | <p>Arpudtha Vaatham, Muga Vaatham (Facial Paralysis)</p> | <ul style="list-style-type: none"> • Weakness of facial muscles • Drooping of eye lids • Numbness of facial muscles • Salivation | <p>Ennai Kuzhiyal Kalichal / Vaanthi / Kutram thannilai paduthal Thokkanam Ennai Kizhi Ennai Kattu Ennai Poochu Nasiyam Podi Kizhi Illai Kizhi Manar Kizhi Dhaniya Kizhi Poochu Patru Pottanam Pasai Peechu Kattu Kali Suttigai Attai Vidal Otradam Varthi / Thiri Vedhu Thuvalai Pranayamam Varmam application</p> | 7- 21 Days |

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| | | | Asanam | |
| 8 | Uthira Vaatha Suronitham, Paithaya Vatha Suronitham Vali Azhal Keelvayu (Gout Arthritis SLE, Rheumatoid Arthritis), | <ul style="list-style-type: none"> • Joint pain • Swelling • Tenderness • Deformity • Burning sensation • Discolouration of skin • Palpable cutaneous nodules • Migrating arthritis | Ennai Kuzhiyal Kalichal / Vaanthi / Kutram thannilai paduthal Thokkanam Ennai Kizhi Ennai Kattu Ennai Poochu Nasiyam Podi Kizhi Illai Kizhi Manar Kizhi Dhaniya Kizhi Poochu Patru Pottanam Pasai Peechu Kattu Kali Suttigai Attai Vidal Ottradam Varthi / Thiri Vedhu Thuvalai Pranayamam Varmam application Asanam | 14-28 Days |
| 9 | Vali Keelvayu (Rheumatic Fever & Arthritis) | <ul style="list-style-type: none"> • Pain and swelling in the joint • Immobility • Fever | Ennai Kuzhiyal Kalichal / Vaanthi / Kutram thannilai | 14-28 Days |

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| | | <ul style="list-style-type: none"> • low back Pain • Fleeting arthritis | <p>paduthal</p> <p>Thokkanam</p> <p>Ennai Kizhi</p> <p>Ennai Kattu</p> <p>Ennai Poochu</p> <p>Nasiyam</p> <p>Podi Kizhi</p> <p>Illai Kizhi</p> <p>Manar Kizhi</p> <p>Dhaniya Kizhi</p> <p>Poochu</p> <p>Patru</p> <p>Pottanam</p> <p>Pasai</p> <p>Peechu</p> <p>Kattu</p> <p>Kali</p> <p>Suttigai</p> <p>Attai Vidal</p> <p>Ottradam</p> <p>Varthi / Thiri</p> <p>Vedhu</p> <p>Thuvalai</p> <p>Pranayamam</p> <p>Varmam application</p> <p>Asanam</p> | |
| 10 | <p>Sarvanga Vatham, Mutrudal vatham (Cerebral and Cerebellar atrophy, Neurological Disorders, Fibromyalgia)</p> | <ul style="list-style-type: none"> • Generalized body pain • Stiffness • Numbness • Weakness • Feeling of coldness | <p>Ennai Kuzhiyal</p> <p>Kalichal</p> <p>Vaanthi / Kutram</p> <p>thannilai paduthal</p> <p>Thokkanam</p> <p>Ennai Kizhi</p> <p>Ennai Kattu</p> <p>Ennai Poochu</p> | <p>14-28 Days</p> |

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| | | | <p>Nasiyam Podi Kizhi Illai Kizhi Manar Kizhi Dhaniya Kizhi Poochu Patru Pottanam Pasai Peechu Kattu Kali Suttigai Attai Vidal Ottradam Varthi / Thiri Vedhu Thuvalai Pranayamam Varmam application Asanam</p> | |
| 11 | <p>Azhal Keelvayu (Degenerative Joint disorders Tennis Elbow, Kuthi Kaal Vaatham (Calcaneal Spur)</p> | <ul style="list-style-type: none"> • Joint pain • Restricted joint movements • Stiffness • Crepitus • Difficulty in walking • Difficulty in squatting | <p>Ennai Kuzhiyal Kalichal / Vaanthi / Kutram thannilai paduthal Thokkanam Ennai Kizhi Ennai Kattu Ennai Poochu Nasiyam Podi Kizhi Illai Kizhi Manar Kizhi Dhaniya Kizhi</p> | <p>14-28 Days</p> |

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| | | | <p>Poochu Patru Pottanam Pasai Peechu Kattu Kali Suttigai Attai Vidal Ottradam Varthi / Thiri Vedhu Thuvalai Pranayamam Varmam application Asanam</p> | |
| 12 | <p>Thol Noikal, Kalanjaga Padai, Karappan, Pathinen Vagai Kuttam (18 Types Kuttam - Skin Diseases), (Lichen Planus, Psoriasis, Eczema)</p> | <ul style="list-style-type: none"> • Discolouration of skin • Patches • Itching • Scaling • Oozing • Peeling • Burning sensation • Numbness • Rashes | <p>Ennai Kuzhiyal Kalichal / Vaanthi / Kutram thannilai paduthal Dhaniya Kizhi Ennai Poochu Kaaram Kalimbu Kali Kattu Kuruthi Vaangal Kalikkam Neer Pugai Poochu Patru Pasai Patti Kattal</p> | 8-28 Days |

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| | | | Seelai Podi Attai vidal Peechu Nasiyam Suttigai Varthi Vedhu Aruvai Asanam Pranayamam Varmam application | |
| 13 | Pun, Katti, Koppulam, Kiranthi, Pilavai (Cellulitis, Necrotising Cellulitis, Erysipelas, Impetigo, Pemphiguos Vulgaris, Carbungle etc.,) | <ul style="list-style-type: none"> • Ulcer • Rashes • Blisters • Itching • Oozing • Burning sensation • Pain • Suppuration | Ennai Kuzhiyal Kalichal / Vaanthi / Kutram thannilai paduthal Dhaniya Kizhi Ennai Poochu Kaaram Kalimbu Kali Kattu Kuruthi Vaangal Kalikkam Neer Pugai Poochu Patru Pasai Patti Kattal Seelai Podi Attai vidal Peechu Nasiyam | 7- 28 Days |

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| | | | Suttigai Varthi Vedhu Aruvai Asanam Pranayamam Varmam application | |
| 14 | Moolam, Pouthiram, Asana Vaai Vedippu, Katti, Adithallal (Haemorrhoids, Fistula In Ano, Fissure In Ano, Perianal abscess, Rectal prolapse etc.,) | <ul style="list-style-type: none"> • Constipation • Pain in anal region • Itching around anus • Burning sensation • Prolapse of mass from anus • Bleeding from anus • Pus from anus | Ennai Kuzhiyal Kalichal Vaanathi / Kutram thannilai paduthal Kuruthi Vaangal Keeral Kaaram Kalikkam Kalimbu Kaara Nool Sikitchai Podi Patru Peechu Pasai Pugai Salaagai Attai Vidal Vedhu Varthi/Thiri Suttigai Seelai Aruvai Kali Asanam Pranayamam Varmam application | 7- 14 Days |
| 15 | Vindhanu | • Fertility disorders (Male) | Ennai Kuzhiyal | 14-48 |

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|----|--|--|---|-------------|
| | Kuraipaadu, Malattu Thanmai (Male Reproductive Disorders) | <ul style="list-style-type: none"> • Oligospermia • Asthinospermia • Teratozoospermia • Azoospermia • Erectile dysfunction • Spermatorrhoea | Kalichal / Vaanthi / Kutram thannilai paduthal Kalikkam Kali Kattu Pattru Pottanam Ottradam Attai vidal Dhaniya Kizhi Poochu Asanam Pranayamam Varmam application | Days |
| 16 | Karuppai Noikal, Soothaga Kattu, Soothaga Vali, Sinaippai Neer Katty, Athi Uthirapokku (Amenorrhoea, Dysmenorrhoea, Anovulatory, PCOD / PCOS, D.U.B, Menopausal Disorders) | <ul style="list-style-type: none"> • Irregular menstruation • Painful menstruation • Excessive menstruation • Excessive Vaginal discharge. • Uterine prolapse | Ennai Kuzhiyal Kalichal / Vaanthi / Kutram thannilai paduthal Kalikkam Kali Kattu Pattru Pottanam Ottradam Attai vidal Dhaniya Kizhi Poochu Asanam Pranayamam Varmam application | 14- 48 Days |
| 17 | Thasai Vaatham (Muscular Dystrophy) | <ul style="list-style-type: none"> • Weakness of muscles • Muscle wasting • Muscular hypertrophy • Difficulty in | Ennai Kuzhiyal Kalichal / Vamanam / Aamum Neekal Ennai Poochu | 14-48 Days |

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|----|---|---|---|---------------|
| | | movements | Ennai Kattu Patru Poochu Pasai Kali Ottradam Pottanam Podithimirthal Varmam application | |
| 18 | Kan Noigal (Refractive Errors, Amblyopia, Chronic Allergic & Inflammatory Diseases, Chronic Conjunctivitis, Dry Eye Syndrom, Retinitis Pigmentosa, Night Blindness, Dacrocystitis, A.R.M.D, Retinopathy-Diabetic/ Hypertensive) | <ul style="list-style-type: none"> • Diminished vision • Photophobia • Dyplopia • Watering of eyes • Pus formation in eyes • Itching of eyes • Strain & pain in eyes • Restricted field of vision • Headache • Conjunctivitis • Stye | Ennai Kuzhiyal Kalichal / Vaanthi / Kutram thannilai paduthal Kattu Mai Kalikkam Poochu Neer Salaagai Peechu Ottradam Thokkanam Pranayamam Asanam Varma Thadaval Vedhu | 7- 28 Days |
| 19 | Soorya vartham, Chandra vartham, Thalaivali (Migraine, idiopathic Headache) | <ul style="list-style-type: none"> • Severe headache • Heaviness of head • Nausea • Photophobia | Ennai Kuzhiyal Kalichal / Vaanthi / Kutram thannilai paduthal Kalikkam Nasiyam Kattu Ottradam Pottanam | 7- 21 Days |

| | | | | |
|----|--|--|---|-------------|
| | | | <p>Nasigaparanam</p> <p>Pasai</p> <p>Kali</p> <p>Vedhu</p> <p>Poochu</p> <p>Ennai Poochu</p> <p>Patru</p> <p>Thiri</p> <p>Pugai</p> <p>Sira Thokkanam</p> <p>Suttigai</p> <p>Attaival</p> <p>Varma Thadavul</p> <p>Pranyamam</p> <p>Asanam</p> <p>Varmam application</p> | |
| 20 | <p>Enbu Murivu / Mootu nazhuval / (Fracture/ Dislocation / Ligament injuries)</p> | <ul style="list-style-type: none"> • Difficulty in movements / walking • Fracture • Dislocation of bone/ cartilage/ vertebrae • Pain • Swelling • Restricted or painful movements of associated area/ nearby muscles | <p>Ennai Kuzhiyal</p> <p>Kalichal / Vaanthi / Kutram thannilai</p> <p>paduthal</p> <p>Kattu</p> <p>Kombu Kattal</p> <p>Kalimbu Poochu</p> <p>Poochu</p> <p>Ottradam</p> <p>Pottanam</p> <p>Pasai</p> <p>Murichal</p> <p>Thokkanam</p> <p>Asanam</p> <p>Pranayamam</p> <p>Varmam application</p> | 7-21 Days |
| 21 | <p>Vayiru / Kudal Noigal / Gunmam,</p> | <ul style="list-style-type: none"> • Abdominal pain and discomfort • Flatulence | <p>Ennai Kuzhiyal</p> <p>Kalichal / Vaanthi /</p> | 14- 28 Days |

| | | | | |
|----|---|---|---|-------------|
| | Soolai, Peruvayiru, Vikkal, Kazhichal (Gastro intestinal disorders) | <ul style="list-style-type: none"> • Constipation / Diarrhoea • Nausea / Vomiting • Digestive disorders • Fever | Kutram thannilai paduthal Poochu Ottradam Pottanam Patru Peechu Attai vidal Thokkanam Asanam Pranayamam Varmam application | |
| 22 | Kalleral / Manneeral / Kanaya Noigal (Liver, Spleen & Pancreatic diseases) | <ul style="list-style-type: none"> • Nausea / Vomiting • Flatulence • Constipation / Diarrhoea • Indigestion • Abdominal pain and discomfort • Dyspnea • Anaemia • Jaundice • Liver and Speen enlargement. • Madhumegam | Ennai Kuzhiyal Kalichal / Vamanam / Kutram thannilai paduthal Poochu Ottradam Pottanam Pasai Thokkanam Kali Patru Peechu Attail vidal Suttigai Asanam Pranayamam Varmam application | 14- 28 Days |
| 23 | Siruneeraga Noigal (Kidney disorders, Chronic renal failure, Renal calculi, UTI etc) | <ul style="list-style-type: none"> • Dysruia • Anuria • Oliguria • Urinary obstruction • Renal colic • Haematuria • Pyuria | Ennai Kuzhiyal Kalichal / Vamanam / Kutram thannilai paduthal Poochu | 14- 28 Days |

| | | | | |
|----|--|--|--|------------------------|
| | | | <p>Ottradam Pottanam Pasai Thokkanam Kali Patru Peechu Attail vidal Suttigai Seelai Asanam Pranayamam Varmam application</p> | |
| 24 | <p>Thottra noigal (Non communicable disorders such as Diabetes, Hypertension, Cardivascular disorders, Obesity, Cancer etc.,)</p> | <ul style="list-style-type: none"> • Hyperglycaemic • Hypercholesterolemia • Diabetic ulcer • Giddiness • Neruopathy • Weakness • Nephropathy • Weight gain / loss • Depression • Pain | <p>Ennai Kuzhiyal Kalichal / Vaanthi / Kutram thannilai paduthal Kalikkam Nasiyam Kattu Ottradam Pottanam Nasigaparanam Pasai Kali Vedhu Poochu Ennai Poochu Patru Thiri Pugai Sira Thokkanam Suttigai Attaivaldal</p> | <p>14- 48 Days</p> |

| | | | | |
|----|---|---|---|----------------|
| | | | Varma Thadavul Pranyamam Asanam Varmam application | |
| 25 | Mudhiyor noigal (Geriatrics / Nadukku vatham, Marathi noigal, Alzemier's disease, Sleep disorders, Depression) | <ul style="list-style-type: none"> • Generalised debility • Degenerative disorders • Osteopenia & Osteoporosis • Generalised body pain • Neuropathy • Tremour • Memory loss • Sleep disorders | Ennai Kuzhiyal Kalichal / Vaanthi / Kutram thannilai paduthal Kalikkam Nasiyam Kattu Ottradam Pottanam Nasigaparanam Pasai Kali Vedhu Pochu Ennai Pochu Pattru Thiri Pugai Sira Thokkanam Suttigai Attaivaldal Varma Thadavul Pranyamam Asanam Varmam application | 14- 48 Days |
| 26 | Kuzhanthai Noigal (Paediatric diseases such as Sirakamba vatham, Thasai vatham, Valippu, | <ul style="list-style-type: none"> • Cerebral palsy • Infantile paralysis • Myopathy • Mental retardation • Nutritional disorders • Seizures | Ennai Kuzhiyal Kalichal / Vamanam / Aamum Neekal Ennai Pochu Ennai Kattu | 14- 48 Days |

| | | | | |
|----|---|---|--|----------------|
| | Autism) | | Pattru Poochu Pasai Kali Ottradam Pottanam Podithimirthal Varmam application | |
| 27 | Mana noigal / Narambu Noigal) (Psychiatric disorders / Depression / Valippu, Sleep disorders, Nadukku vatham etc) | <ul style="list-style-type: none"> • Mood disorders • Sleep disorders • Tremour • Difficulty in movements • Psychiatric symptoms | Ennai Kuzhiyal Kalichal / Vaanathi / Kutram thannilai paduthal Kalikkam Nasiyam Kattu Ottradam Pottanam Nasigaparanam Pasai Kali Vedhu Poochu Ennai Poochu Pattru Thiri Pugai Sira Thokkanam Suttigai Attaivaldal Varma Thadavul Pranyamam Asanam Varmam application | 14- 48 Days |

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

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

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

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

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

3. Determination of treatment expenditure for payment/reimbursement

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

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

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

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

YOGA

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

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

NATUROPATHY

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

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

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

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

YOGA

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

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

NATUROPATHY

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

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

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

3. Determination of treatment expenditure for payment/reimbursement

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

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

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