Appendix III

S	List of excluded expenses ("Non-Medical") under indemnity	Expenses
NO.	Policy -	
	TOILETRIES/ COSMETICS/ PERSONAL COMFORT OR CONVENIENCE	
1	HAIR REMOVAL CREAM	Not Payable
2	BABY CHARGES (UNLESS SPECIFIED/INDICATED)	Not Payable
3	BABY FOOD	Not Payable
4	BABY UTILITES CHARGES	Not Payable
5	BABY SET	Not Payable
6	BABY BOTTLES	Not Payable
7	BRUSH	Not Payable
8	COSY TOWEL	Not Payable
9	HAND WASH	Not Payable
10	MOISTURISER PASTE BRUSH	Not Payable
11	POWDER	Not Payable
12	RAZOR	Payable
13	SHOE COVER	Not Payable
14	BEAUTY SERVICES	Not Payable
15	BELTS/ BRACES	Essential and should be
.,		paid at least specifically
		for cases who have
		undergone surgery of
		thoracic or lumbar spine
		thoracic of fumbal spille
16	BUDS	Not Payable
17	BARBER CHARGES	Not Payable
18	CAPS	Not Payable
19	COLD PACK/HOT PACK	Not Payable
20	CARRY BAGS	Not Payable
21	CRADLE CHARGES	Not Payable
22	COMB	Not Payable
23	DISPOSABLES RAZORS CHARGES (for site preparations)	Payable
24		Not Payable
25	EYE PAD	Not Payable
26	EYE SHEILD	Not Payable
		,
27	EMAIL / INTERNET CHARGES	Not Payable
28	FOOD CHARGES (OTHER THAN PATIENT'S DIET PROVIDED	Not Payable
29	FOOT COVER	Not Payable
30	GOWN	Not Payable
31	LEGGINGS	Essential in bariatric and varicose vein surgery
		and may be considered
		for at least these
		conditions where
		surgery itself is payable.
32	LAUNDRY CHARGES	surgery itself is payable. Not Payable
32 33	LAUNDRY CHARGES MINERAL WATER	
		Not Payable

36	SLIPPERS	Not Payable
37	TELEPHONE CHARGES	Not Payable
38	TISSUE PAPER	Not Payable
39	TOOTH PASTE	Not Payable
40	TOOTH BRUSH	Not Payable
41	GUEST SERVICES	Not Payable
42	BED PAN	Not Payable
43	BED UNDER PAD CHARGES	Not Payable
44	CAMERA COVER	Not Payable
45	CLINIPLAST	Not Payable
46	CREPE BANDAGE	Not Payable/ Payable by
		the patient
47	CURAPORE	Not Payable
48	DIAPER OF ANY TYPE	Not Payable
49	DVD, CD CHARGES	Not Payable (However if
		CD is specifically sought by
		Insurer/TPA then payable)
50	EYELET COLLAR	Not Payable
51	FACE MASK	Not Payable
52	FLEXI MASK	Not Payable
53	GAUSE SOFT	Not Payable
54	GAUZE	Not Payable
55	HAND HOLDER	Not Payable
56	HANSAPLAST/ ADHESIVE BANDAGES	Not Payable
57	INFANT FOOD	Not Payable
58	SLINGS	Reasonable costs for one
		sling in case of upper arm fractures may be
		considered
	ITEMS SPECIFICALLY EXCLUDED IN THE POLICIES	
59	WEIGHT CONTROL PROGRAMS/ SUPPLIES/ SERVICES	Exclusion in policy unless
		otherwise specified
60	COST OF SPECTACLES/ CONTACT LENSES/ HEARING AIDS	Exclusion in policy unless
	ETC.,	otherwise specified
61	DENTAL TREATMENT EXPENSES THAT DO NOT REQUIRE	Exclusion in policy unless
	HOSPITALISATION	otherwise specified
62	HORMONE REPLACEMENT THERAPY	Exclusion in policy unless
		otherwise specified
63	HOME VISIT CHARGES	Exclusion in policy unless
		otherwise specified
64	INFERTILITY/ SUBFERTILITY/ ASSISTED CONCEPTION	Exclusion in policy unless
<u></u>	PROCEDURE OPECITY (INCLUDING MORPHS OPECITY) TREATMENT	otherwise specified
65	OBESITY (INCLUDING MORBID OBESITY) TREATMENT	Exclusion in policy unless
66	PSYCHIATRIC & PSYCHOSOMATIC DISORDERS	otherwise specified Exclusion in policy unless
00	1 STCHIATRIC & ESTCHOSOMATIC DISORDERS	otherwise specified
67	CORRECTIVE SURGERY FOR REFRACTIVE ERROR	Exclusion in policy unless
"/	COMMENTE SONGENT FOR METIVICITY E EMILOR	otherwise specified
68	TREATMENT OF SEXUALLY TRANSMITTED DISEASES	Exclusion in policy unless
		otherwise specified
69	DONOR SCREENING CHARGES	Exclusion in policy unless
_		otherwise specified

70	ADMISSION/REGISTRATION CHARGES	Exclusion in policy unless otherwise specified
71	HOSPITALISATION FOR EVALUATION/ DIAGNOSTIC PURPOSE	Exclusion in policy unless otherwise specified
72	EXPENSES FOR INVESTIGATION/ TREATMENT IRRELEVANT TO THE DISEASE FOR WHICH ADMITTED OR DIAGNOSED	Not Payable - Exclusion in policy unless otherwise specified
73	ANY EXPENSES WHEN THE PATIENT IS DIAGNOSED WITH RETRO VIRUS + OR SUFFERING FROM /HIV/ AIDS ETC IS DETECTED/ DIRECTLY OR INDIRECTLY	Not payable as per HIV/AIDS exclusion
74	STEM CELL IMPLANTATION/ SURGERY	Not Payable except Bone Marrow Transplantation where covered by policy
	ITEMS WHICH FORM PART OF HOSPITAL SERVICES WHERE SEPARATE CONSUMABLES	
75	WARD AND THEATRE BOOKING CHARGES	Payable under OT Charges, not payable separately
76	ARTHROSCOPY & ENDOSCOPY INSTRUMENTS	Rental charged by the hospital payable. Purchase of Instruments not
77	MICROSCOPE COVER	Payable under OT Charges, not separately
78	SURGICAL BLADES,HARMONIC SCALPEL,SHAVER	Payable under OT Charges, not separately
79	SURGICAL DRILL	Payable under OT Charges, not separately
80	EYE KIT	Payable under OT Charges, not separately
81	EYE DRAPE	Payable under OT Charges, not separately
82	X-RAY FILM	Payable under Radiology Charges, not as consumable
83	SPUTUM CUP	Payable under Investigation Charges, not as consumable
84	BOYLES APPARATUS CHARGES	Part of OT Charges, not seperately
85	BLOOD GROUPING AND CROSS MATCHING OF DONORS SAMPLES	Part of Cost of Blood, not payable
86	SAVLON	Not Payable-Part of Dressing Charges
87	BAND AIDS, BANDAGES, STERLILE INJECTIONS, NEEDLES, SYRINGES	Not Payable - Part of Dressing charges
88	COTTON	Not Payable-Part of Dressing Charges

89	COTTON BANDAGE	Not Payable- Part of
		Dressing Charges
90	MICROPORE/ SURGICAL TAPE	Not Payable-Payable by
_		the patient when
		prescribed, otherwise
		included as Dressing
		Charges
01	BLADE	Not Payable
91	APRON	Not Payable -Part of
92	Arnon	Hospital Services/
		Disposable linen to be
		part of OT/ICU charges
	TORNIOUET	
93	TORNIQUET	Not Payable (service is
		charged by hospitals,
		consumables cannot
		be separately
94	ORTHOBUNDLE, GYNAEC BUNDLE	Part of Dressing Charges
95	URINE CONTAINER	Not Payable
	ELEMENTS OF ROOM CHARGE	
96	LUXURY TAX	Actual tax levied by
		government is
		payable.Part of
		room charge for sub
97	HVAC	Part of room charge not
	HOUSE VEEDING SHAD SES	payable separately
98	HOUSE KEEPING CHARGES	Part of room charge not
	SERVICE CHARGES WHERE NURSING CHARGE ALSO	payable separately
99		Part of room charge not
100	CHARGED TELEVISION & AIR CONDITIONER CHARGES	payable separately Payable under room
100	TELEVISION WAIN CONDITIONER CHANGES	charges not if
		separately levied
101	SURCHARGES	Part of Room Charge, Not
		payable separately
102	ATTENDANT CHARGES	Not Payable - Part of
		Room Charges
103	IM IV INJECTION CHARGES	Part of nursing charges,
		not payable
104	CLEAN SHEET	Part of
		Laundry/Housekeeping
		not payable separately
105	EXTRA DIET OF PATIENT(OTHER THAN THAT WHICH FORMS	Patient Diet provided by
105	PART OF BED CHARGE)	hospital is payable
106	BLANKET/WARMER BLANKET	Not Payable- part of room
	.,	charges
	ADMINISTRATIVE OR NON-MEDICAL CHARGES	
107	ADMISSION KIT	Not Payable
108	BIRTH CERTIFICATE	Not Payable
400	DI COD DESERVATION CHARGES AND ANTENIATAL	Not Double
109	BLOOD RESERVATION CHARGES AND ANTE NATAL	Not Payable
	BOOKING CHARGES	

110	CERTIFICATE CHARGES	Not Payable
110	CENTIFICATE CHANGES	
111	COURIER CHARGES	Not Payable
112	CONVENYANCE CHARGES	Not Payable
113	DIABETIC CHART CHARGES	Not Payable
114	DOCUMENTATION CHARGES / ADMINISTRATIVE EXPENSES	Not Payable
115	DISCHARGE PROCEDURE CHARGES	Not Payable
116	DAILY CHART CHARGES	Not Payable
117	ENTRANCE PASS / VISITORS PASS CHARGES	Not Payable
118	EXPENSES RELATED TO PRESCRIPTION ON DISCHARGE	To be claimed by patient under Post Hosp where admissible
119	FILE OPENING CHARGES	Not Payable
120	INCIDENTAL EXPENSES / MISC. CHARGES (NOT EXPLAINED)	Not Payable
121	MEDICAL CERTIFICATE	Not Payable
122	MAINTAINANCE CHARGES	Not Payable
123	MEDICAL RECORDS	Not Payable
124	PREPARATION CHARGES	Not Payable
125	PHOTOCOPIES CHARGES	Not Payable
126	PATIENT IDENTIFICATION BAND / NAME TAG	Not Payable
127	WASHING CHARGES	Not Payable
128	MEDICINE BOX	Not Payable
129	MORTUARY CHARGES	Payable upto 24 hrs, shifting charges not payable
130	MEDICO LEGAL CASE CHARGES (MLC CHARGES)	Not Payable
	EXTERNAL DURABLE DEVICES	
131	WALKING AIDS CHARGES	Not Payable
132	BIPAP MACHINE	Not Payable
133	COMMODE	Not Payable
134	CPAP/ CAPD EQUIPMENTS	Device not payable

136 OXYGEN CYLINDER (FOR USAGE OUTSIDE THE HOSPITAL) 137 PULSEOXYMETER CHARGES 138 SPACER 139 SPIROMETRE 140 SPO2 PROBE 141 NEBULIZER KIT 142 STEAM INHALER 143 ARMSLING 144 THERMOMETER 145 CERVICAL COLLAR 146 SPLINT 147 DIABETIC FOOT WEAR 148 KNEE BRACES (LONG/ SHORT/ HINGED) 149 KNEE IMMOBILIZER/SHOULDER IMMOBILIZER 150 LUMBO SACRAL BELT 151 NIMBUS BED OR WATER OR AIR BED CHARGES 152 AMBULANCE COLLAR 153 AMBULANCE COLLAR Not Payable 154 MICROSHEILD Not Payable Not Payable Payable for any ICU patient swift paraplegia/quadriplegia for any reason and at reasonable cost of approximately RS 200/day MICROSHEILD Not Payable Not Payable Not Payable for any ICU patient requiring more than 3 days in ICU, all patients with paraplegia/quadriplegia for any reason and at reasonable cost of approximately RS 200/day MICROSHEILD Not Payable Not Payable for any ICU patient requiring more than 3 days in ICU, all patients with paraplegia/quadriplegia for any reason and at reasonable cost of approximately RS 200/day Not Payable Not Payable	135	INFUSION PUMP - COST	Device not payable
138 SPACER 139 SPIROMETRE Device not payable 140 SPO2 PROBE Not Payable 141 NEBULIZER KIT Not Payable 142 STEAM INHALER Not Payable 143 ARMSLING Not Payable 144 THERMOMETER Not Payable (paid by patient) 145 CERVICAL COLLAR Not Payable 146 SPLINT Not Payable 147 DIABETIC FOOT WEAR Not Payable 148 KNEE BRACES (LONG/ SHORT/ HINGED) Not Payable 150 LUMBO SACRAL BELT Sesential and should be paid at least specifically for cases who have undergone surgery of lumbar 151 NIMBUS BED OR WATER OR AIR BED CHARGES Payable for any ICU patient requiring more than 3 days in ICU, all patients with paraplegia/quadriplegia for any reason and at reasonable cost of approximately Rs 200/ day 152 AMBULANCE COLLAR Not Payable Not Payable Not Payable	136	OXYGEN CYLINDER (FOR USAGE OUTSIDE THE HOSPITAL)	Not Payable
139 SPIROMETRE Device not payable 140 SPO2 PROBE Not Payable 141 NEBULIZER KIT Not Payable 142 STEAM INHALER Not Payable 143 ARMSLING Not Payable 144 THERMOMETER Not Payable (paid by patient) 145 CERVICAL COLLAR Not Payable 146 SPLINT Not Payable 147 DIABETIC FOOT WEAR Not Payable 148 KNEE BRACES (LONG/ SHORT/ HINGED) Not Payable 149 KNEE IMMOBILIZER/SHOULDER IMMOBILIZER Not Payable 150 LUMBO SACRAL BELT Essential and should be paid at least specifically for cases who have undergone surgery of lumbar 151 NIMBUS BED OR WATER OR AIR BED CHARGES Payable for any ICU patient requiring more than 3 days in ICU, all patients with paraplegia/quadriplegia for any reason and at reasonable cost of approximately Rs 200/ day 152 AMBULANCE COLLAR Not Payable	137	PULSEOXYMETER CHARGES	Device not payable
140 SPO2 PROBE 141 NEBULIZER KIT 142 STEAM INHALER 143 ARMSLING 144 THERMOMETER 145 CERVICAL COLLAR 146 SPLINT 147 DIABETIC FOOT WEAR 148 KNEE BRACES (LONG/ SHORT/ HINGED) 149 KNEE IMMOBILIZER/SHOULDER IMMOBILIZER 150 LUMBO SACRAL BELT 151 NIMBUS BED OR WATER OR AIR BED CHARGES 151 NIMBUS BED OR WATER OR AIR BED CHARGES 152 AMBULANCE COLLAR Not Payable Not Payable 153 AMBULANCE EQUIPMENT Not Payable Not Payable Not Payable 155 Not Payable 156 Payable for any ICU patient requiring more than 3 days in ICU, all patients with paraplegia/quadriplegia for any reason and at reasonable cost of approximately Rs 200/ day 152 AMBULANCE COLLAR Not Payable Not Payable	138	SPACER	Not Payable
141 NEBULIZER KIT Not Payable 142 STEAM INHALER Not Payable 143 ARMSLING Not Payable 144 THERMOMETER Not Payable (paid by patient) 145 CERVICAL COLLAR Not Payable 146 SPLINT Not Payable 147 DIABETIC FOOT WEAR Not Payable 148 KNEE BRACES (LONG/ SHORT/ HINGED) Not Payable 149 KNEE IMMOBILIZER/SHOULDER IMMOBILIZER Not Payable 150 LUMBO SACRAL BELT Essential and should be paid at least specifically for cases who have undergone surgery of lumbar 151 NIMBUS BED OR WATER OR AIR BED CHARGES Payable for any ICU patient requiring more than 3 days in ICU, all patients with paraplegia/quadriplegia for any reason and at reasonable cost of approximately Rs 200/day 152 AMBULANCE COLLAR Not Payable	139	SPIROMETRE	Device not payable
142 STEAM INHALER 143 ARMSLING 144 THERMOMETER 145 CERVICAL COLLAR 146 SPLINT 147 DIABETIC FOOT WEAR 148 KNEE BRACES (LONG/ SHORT/ HINGED) 149 KNEE IMMOBILIZER/SHOULDER IMMOBILIZER 150 LUMBO SACRAL BELT 151 NIMBUS BED OR WATER OR AIR BED CHARGES 151 NIMBUS BED OR WATER OR AIR BED CHARGES 152 AMBULANCE COLLAR Not Payable Not Payable 153 AMBULANCE EQUIPMENT Not Payable Not Payable 154 Payable for any ICU patient requiring more than 3 days in ICU, all patients with paraplegia/quadriplegia for any reason and at reasonable cost of approximately Rs 200/ day 154 AMBULANCE EQUIPMENT Not Payable	140	SPO2 PROBE	Not Payable
143 ARMSLING 144 THERMOMETER 145 CERVICAL COLLAR 146 SPLINT 147 DIABETIC FOOT WEAR 148 KNEE BRACES (LONG/ SHORT/ HINGED) 149 KNEE IMMOBILIZER/SHOULDER IMMOBILIZER 150 LUMBO SACRAL BELT 151 NIMBUS BED OR WATER OR AIR BED CHARGES 152 AMBULANCE COLLAR 153 AMBULANCE EQUIPMENT Not Payable Not Payable Postable (paid by patient) Not Payable Not Payable Sesential and should be paid at least specifically for cases who have undergone surgery of lumbar	141	NEBULIZER KIT	Not Payable
144 THERMOMETER Not Payable (paid by patient) 145 CERVICAL COLLAR Not Payable 146 SPLINT Not Payable 147 DIABETIC FOOT WEAR Not Payable 148 KNEE BRACES (LONG/ SHORT/ HINGED) Not Payable 149 KNEE IMMOBILIZER/SHOULDER IMMOBILIZER Not Payable 150 LUMBO SACRAL BELT Essential and should be paid at least specifically for cases who have undergone surgery of lumbar 151 NIMBUS BED OR WATER OR AIR BED CHARGES Payable for any ICU patient requiring more than 3 days in ICU, all patients with paraplegia/quadriplegia for any reason and at reasonable cost of approximately Rs 200/ day 152 AMBULANCE COLLAR Not Payable 153 AMBULANCE EQUIPMENT Not Payable	142	STEAM INHALER	Not Payable
patient) 145 CERVICAL COLLAR Not Payable 146 SPLINT Not Payable 147 DIABETIC FOOT WEAR Not Payable 148 KNEE BRACES (LONG/ SHORT/ HINGED) Not Payable 149 KNEE IMMOBILIZER/SHOULDER IMMOBILIZER Not Payable 150 LUMBO SACRAL BELT Essential and should be paid at least specifically for cases who have undergone surgery of lumbar 151 NIMBUS BED OR WATER OR AIR BED CHARGES Payable for any ICU patient requiring more than 3 days in ICU, all patients with paraplegia/quadriplegia for any reason and at reasonable cost of approximately Rs 200/ day 152 AMBULANCE COLLAR Not Payable Not Payable	143	ARMSLING	Not Payable
146 SPLINT Not Payable 147 DIABETIC FOOT WEAR Not Payable 148 KNEE BRACES (LONG/ SHORT/ HINGED) Not Payable 149 KNEE IMMOBILIZER/SHOULDER IMMOBILIZER Not Payable 150 LUMBO SACRAL BELT Essential and should be paid at least specifically for cases who have undergone surgery of lumbar 151 NIMBUS BED OR WATER OR AIR BED CHARGES Payable for any ICU patient requiring more than 3 days in ICU, all patients with paraplegia/quadriplegia for any reason and at reasonable cost of approximately Rs 200/ day 152 AMBULANCE COLLAR Not Payable 153 AMBULANCE EQUIPMENT Not Payable	144	THERMOMETER	
147 DIABETIC FOOT WEAR Not Payable 148 KNEE BRACES (LONG/ SHORT/ HINGED) Not Payable 149 KNEE IMMOBILIZER/SHOULDER IMMOBILIZER Not Payable 150 LUMBO SACRAL BELT Essential and should be paid at least specifically for cases who have undergone surgery of lumbar 151 NIMBUS BED OR WATER OR AIR BED CHARGES Payable for any ICU patient requiring more than 3 days in ICU, all patients with paraplegia/quadriplegia for any reason and at reasonable cost of approximately Rs 200/ day 152 AMBULANCE COLLAR Not Payable 153 AMBULANCE EQUIPMENT Not Payable	145	CERVICAL COLLAR	Not Payable
148 KNEE BRACES (LONG/ SHORT/ HINGED) 149 KNEE IMMOBILIZER/SHOULDER IMMOBILIZER 150 LUMBO SACRAL BELT 151 NIMBUS BED OR WATER OR AIR BED CHARGES 151 NIMBUS BED OR WATER OR AIR BED CHARGES 152 AMBULANCE COLLAR 153 AMBULANCE EQUIPMENT Not Payable Not Payable 154 Not Payable 155 Not Payable 156 Not Payable 157 Not Payable 158 Not Payable 159 Not Payable 150 Not Payable 150 Not Payable 150 Not Payable 151 Not Payable	146	SPLINT	Not Payable
150 LUMBO SACRAL BELT 150 LUMBO SACRAL BELT Essential and should be paid at least specifically for cases who have undergone surgery of lumbar 151 NIMBUS BED OR WATER OR AIR BED CHARGES Payable for any ICU patient requiring more than 3 days in ICU, all patients with paraplegia/quadriplegia for any reason and at reasonable cost of approximately Rs 200/day 152 AMBULANCE COLLAR Not Payable 153 AMBULANCE EQUIPMENT Not Payable	147	DIABETIC FOOT WEAR	Not Payable
LUMBO SACRAL BELT Essential and should be paid at least specifically for cases who have undergone surgery of lumbar NIMBUS BED OR WATER OR AIR BED CHARGES Payable for any ICU patient requiring more than 3 days in ICU, all patients with paraplegia/quadriplegia for any reason and at reasonable cost of approximately Rs 200/day AMBULANCE COLLAR Not Payable Not Payable	148	KNEE BRACES (LONG/ SHORT/ HINGED)	Not Payable
paid at least specifically for cases who have undergone surgery of lumbar NIMBUS BED OR WATER OR AIR BED CHARGES Payable for any ICU patient requiring more than 3 days in ICU, all patients with paraplegia/quadriplegia for any reason and at reasonable cost of approximately Rs 200/day AMBULANCE COLLAR Not Payable Not Payable	149	KNEE IMMOBILIZER/SHOULDER IMMOBILIZER	Not Payable
patient requiring more than 3 days in ICU, all patients with paraplegia/quadriplegia for any reason and at reasonable cost of approximately Rs 200/ day 152 AMBULANCE COLLAR Not Payable 153 AMBULANCE EQUIPMENT Not Payable	150	LUMBO SACRAL BELT	paid at least specifically for cases who have undergone
153 AMBULANCE EQUIPMENT Not Payable	151	NIMBUS BED OR WATER OR AIR BED CHARGES	patient requiring more than 3 days in ICU, all patients with paraplegia/quadriplegia for any reason and at reasonable cost of approximately Rs 200/
	152	AMBULANCE COLLAR	Not Payable
154 MICROSHEILD Not Payable	153	AMBULANCE EQUIPMENT	Not Payable
	154	MICROSHEILD	Not Payable

155	ABDOMINAL BINDER	Essential and should be paid at least in post surgery patients of major abdominal surgery including TAH, LSCS, incisional hernia repair, exploratory laparotomy for intestinal obstruction, liver transplant etc.
	ITEMS PAYABLE IF SUPPORTED BY A PRESCRIPTION	
156	BETADINE \ HYDROGEN PEROXIDE\SPIRIT\\DETTOL \SAVLON\ DISINFECTANTS ETC	May be payable when prescribed for patient, not payable for hospital use in OT or ward or for dressings in hospital
157	PRIVATE NURSES CHARGES- SPECIAL NURSING CHARGES	Post hospitalization nursing charges not Pavable
158	NUTRITION PLANNING CHARGES - DIETICIAN CHARGES-	Patient Diet provided by
	DIET CHARGES	hospital is payable
159	ALEX SUGAR FREE	Payable -Sugar free variants of admissable medicines are not excluded
160	CREAMS POWDERS LOTIONS (Toileteries are not payable,only prescribed medical pharmaceuticals payable)	Payable when prescribed
161	DIGENE GEL/ ANTACID GEL	Payable when prescribed
162	ECG ELECTRODES	Upto 5 electrodes are required for every case visiting OT or ICU. For longer stay in ICU, may require a change and at least one set every second day must be payable.
163	GLOVES	Sterilized Gloves payable / unsterilized gloves not payable
164	HIV KIT	Payable - payable Pre operative screening
165	LISTERINE/ ANTISEPTIC MOUTHWASH	Payable when prescribed
166	LOZENGES	Payable when prescribed
167	MOUTH PAINT	Payable when prescribed

168	NEBULISATION KIT	If used during
		hospitalization is
		payable reasonably
	NOVADA DID	D 11 1 11 11
169	NOVARAPID	Payable when prescribed
170	VOLINI GEL/ ANALGESIC GEL	Payable when prescribed
171	ZYTEE GEL	Payable when prescribed
172	VACCINATION CHARGES	Routine Vaccination not Payable / Post Bite
	PART OF HOSPITAL'S OWN COSTS AND NOT PAYABLE	
173	AHD	Not Payable - Part of Hospital's internal Cost
174	ALCOHOL SWABES	Not Payable - Part of Hospital's internal Cost
175	SCRUB SOLUTION/STERILLIUM	Not Payable - Part of Hospital's internal Cost
	OTHERS	Trospital s internal cost
176	VACCINE CHARGES FOR BABY	Not Payable
177	AESTHETIC TREATMENT / SURGERY	Not Payable
178	TPA CHARGES	Not Payable
179	VISCO BELT CHARGES	Not Payable
180	ANY KIT WITH NO DETAILS MENTIONED [DELIVERY KIT, ORTHOKIT, RECOVERY KIT, ETC]	Not Payable
181	EXAMINATION GLOVES	Not payable
182	KIDNEY TRAY	Not Payable
183	MASK	Not Payable
184	OUNCE GLASS	Not Payable
185	OUTSTATION CONSULTANT'S/ SURGEON'S FEES	Not payable, except for telemedicine consultations where covered by policy
186	OXYGEN MASK	Not Payable
187	PAPER GLOVES	Not Payable
188	PELVIC TRACTION BELT	Should be payable in case f PIVD requiring traction s this is generally not reused
189	REFERAL DOCTOR'S FEES	Not Payable

190	ACCU CHECK (Glucometery/ Strips)	Not payable pre hospitilasation or post hospitalisation / Reports and Charts required/ Device not payable
191	PAN CAN	Not Payable
192	SOFNET	Not Payable
193	TROLLY COVER	Not Payable
194	UROMETER, URINE JUG	Not Payable
195	AMBULANCE	Payable-Ambulance from home to hospital or interhospital shifts is payable/ RTA as specific requirement is payable
196	TEGADERM / VASOFIX SAFETY	Payable - maximum of 3 in 48 hrs and then 1 in 24 hrs
197	URINE BAG	Payable where medicaly necessary till a reasonable cost - maximum 1 per 24 hrs
198	SOFTOVAC	Not Payable
199	STOCKINGS	Essential for case like CABG etc. where it should be paid.