



LIST-I,II,III & IV covered under SAFEGUARD+

Since these Expenses are not covered under the provisions of Basic Policy. SAFEGUARD+ covers these expenses as well & hence no need to pay extra.

LIST-I

Sl. No.	ITEMS NOT COVERED	Sl. No.	ITEMS NOT COVERED2
1	BABY FOOD	36	SPACER
2	BABY UTILITIES CHARGES	37	SPIROMETER
3	BEAUTY SERVICES	38	NEBULIZER KIT
4	BELTS/BRACES	39	STEAM INHALER
5	BUDS	40	ARMSLING
6	COLD PACK/HOT PACK	41	THERMOMETER
7	CARRY BAGS	42	CERVICAL COLLAR
8	EMAIL/INTERNET CHARGES	43	LUMBO SACREL BELT
9	FOOD CHARGES (OTHER THAN PATIENT'S DIET)	44	NIMBUS BED/WATER/AIR BED CHARGES
10	LEGGINGS	45	AMBULANCE COLLAR
11	LAUNDRY CHARGES	46	AMBULANCE EQUIPMENT
12	MINERAL WATER	47	ABDOMINAL BINDER
13	SANITARY PAD	48	PRIVATE NURSES CHARGES
14	PHONE CHARGES	49	SUGAR FREE TABLETS
15	GUEST SERVICES	50	SPLINT
16	CREPE BANDAGES	51	DIABETIC FOOTWEAR
17	DIAPER OF ANY TYPE	52	KNEE BRACES(SHORT/LONG)
18	EYELET COLLAR	53	KNEE/SHOULDER IMMOBILIZER
19	SLINGS	54	CREAMS/POWDERS/TOILETRIES
20	BLOOD GROUPING & CROSS MATCHING OF DONOR SAMPLES	55	EEG ELECTRODES
21	SERVICE CHARGES LIKE NURSING	56	GLOVES
22	TV CHARGES	57	NEBULISATION KIT
23	SURCHARGES	58	ANY KIT WITH NO DETAILS MENTIONED (DELIVERY KIT/ORTHOKIT/RECOVERY KIT ETC)
24	ATTENDANT CHARGES	59	KIDNEY TRAY
25	EXTRA DIET OF PATIENT (OTHER THAN BED CHARGES)	60	MASK
26	BIRTH CERTIFICATE	61	OUNCE GLASS
27	CERTIFICATE CHARGES	62	OXYGEN MASK
28	COURIER CHARGES	63	PELVIC TRACTION BELT
29	CONVEYANCE CHARGES	64	PAN CAN
30	MEDICAL CERTIFICATE	65	TROLLY COVER
31	MEDICAL RECORDS	66	UROMETER. URINE JUG
32	PHOTOCOPY CHARGES	67	AMBULANCE
33	MORTUARY CHARGES	68	VASOFIX SAFETY
34	WALKING AIDS CHARGES		
35	OXYGEN CYLINDER(OUTSIDE HOSPITAL)		

LIST-II - ITEMS THAT ARE TO BE SUBSUMED INTO ROOM CHRGES

Sl. No.	ITEMS NOT COVERED	Sl. No.	ITEMS NOT COVERED2
1	BABY CHARGES UNLESS SPCIFIED	20	LUXURY TAX
2	HAND WASH	21	HVAC
3	SHOE COVER	22	HOUSE KEEPING CJARGES
4	CAPS	23	AIR CONDITION CHARGES
5	CRADLE CHARGES	24	ADMISSION KIT
6	COMB	25	DIABETIC CHART CHARGES
7	EAU DE COLOGNE	26	DOCUMENTATION/ADMIN CHARGES
8	FOOT COVERS	27	DISCHARGE PROCEDURE CHARGES
9	GOWN	28	DAILY CHART CHARGES
10	SLIPPERS	29	VISITOR PASS CHARGES
11	TISSUE PAPER	30	DISCHARGE PRESCRIPTION CHARGES
12	TOOTH PASTE	31	IM IV INJECTION CHARGES
13	TOOTH BRUSH	32	CLEAN SHEET
14	BED PAN	33	BLANKET/WARMER BLANKET
15	FACE MASK	34	FILE OPENING CHARGES



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16	FLEXI MASK	35	INCIDENTAL EXPENSES
17	HAND HOLDER	36	PATIENT IDENTIFICATION TAGS
18	SPUTUM CUP	37	PULSE OXYMETER CHARGES
19	DISINFECTANT LOTIONS		

LIST-III - ITEMS THAT ARE TO BE SUBSUMED INTO PROCEDURE CHRGES

Sl. No.	ITEMS NOT COVERED	Sl. No.	ITEMS NOT COVERED2
1	HAIR REMOVAL CREAMS	13	BOYLES APPRATUS CHARGES
2	EYE PAD	14	COTTON
3	EYE SHIELD	15	COTTON BANDAGE
4	DISPOSABLE RAZORS CHARGES	16	SURGICAL TAPE
5	CAMERA COVER	17	APRON
6	DVD CD CHARGES	18	TORNIQUET
7	GAUZE SOFT	19	ORTHO BUNDLE,GYNAC BUNDLE
8	GAUZE	20	X RAY FILM
9	WARD & THEATRE BOOKING CHARGES	21	EYE KIT
10	ARTHROSCOPY & ENDOSCOPY INSTRUMENTS	22	EYE DRAP
11	MICROSCOPE COVERS	23	SURGICAL DRILL
12	SURGICAL BLADES/HARMONICS CALPAL, SHAVER		

LIST-IV- ITEMS THAT ARE TO BE SUBSUMED INTO COSTS OF TREATMENT

Sl. No.	ITEMS NOT COVERED	Sl. No.	ITEMS NOT COVERED2
1	ADMISSION/ REGISTRATION CHARGES	10	NUTRITION PLANNING. DIETICIAN CHARGES
2	HOSPITALIZATION FOR DIAGNOSTIC PURPOSE	11	ANTISEPTOC MOUTHWASH
3	URINE CONTAINER	12	LOZENGES
4	BLOOD RESERVATION & ANTE NATAL BOOKING CHARGES	13	MOUTH PAINT
5	BIPAP MACHINE	14	VACCINATION CHARGES
6	CPAP/CPD EQUIPMENT	15	ALCOHOL SWABS
7	INFUSION PUMP COST	16	SCRUB SOLUTION/STERILLIUM
8	HYDROZEN PEROXIDE/SPIRIT/DISINFECTANT CHARGES	17	GLUCOMETER & STRIPS
9	HIV KIT	18	URINE BAG



Annexure I - The expenses that are not covered or subsumed into room charges / procedure charges / costs of treatment

List I – Expenses not covered

Sl. No.	Item	Sl. No.	Item	Sl. No.	Item
1	BABY FOOD	24	ATTENDANT CHARGES	47	LUMBO SACRAL BELT
2	BABY UTILITIES CHARGES	25	EXTRA DIET OF PATIENT (OTHER THAN THAT WHICH FORMS PART OF BED CHARGE)	48	NIMBUS BED OR WATER OR AIR BED CHARGES
3	BEAUTY SERVICES	26	BIRTH CERTIFICATE	49	AMBULANCE COLLAR
4	BELTS/ BRACES	27	CERTIFICATE CHARGES	50	AMBULANCE EQUIPMENT
5	BUDS	28	COURIER CHARGES	51	ABDOMINAL BINDER
6	COLD PACK/HOT PACK	29	CONVEYANCE CHARGES	52	PRIVATE NURSES CHARGES- SPECIAL NURSING CHARGES
7	CARRY BAGS	30	MEDICAL CERTIFICATE	53	SUGAR FREE Tablets
8	EMAIL / INTERNET CHARGES	31	MEDICAL RECORDS	54	CREAMS POWDERS LOTIONS (Toiletries are not payable, only prescribed medical pharmaceuticals payable)
9	FOOD CHARGES (OTHER THAN PATIENT's DIET PROVIDED BY HOSPITAL)	32	PHOTOCOPIES CHARGES	55	ECG ELECTRODES
10	LEGGINGS	33	MORTUARY CHARGES	56	GLOVES
11	LAUNDRY CHARGES	34	WALKING AIDS CHARGES	57	NEBULISATION KIT
12	MINERAL WATER	35	OXYGEN CYLINDER (FOR USAGE OUTSIDE THE HOSPITAL)	58	ANY KIT WITH NO DETAILS MENTIONED [DELIVERY KIT, ORTHOKIT, RECOVERY KIT, ETC]
13	SANITARY PAD	36	SPACER	59	KIDNEY TRAY
14	TELEPHONE CHARGES	37	SPIROMETRE	60	MASK
15	GUEST SERVICES	38	NEBULIZER KIT	61	OUNCE GLASS
16	CREPE BANDAGE	39	STEAM INHALER	62	OXYGEN MASK
17	DIAPER OF ANY TYPE	40	ARMSLING	63	PELVIC TRACTION BELT
18	EYELET COLLAR	41	THERMOMETER	64	PAN CAN
19	SLINGS	42	CERVICAL COLLAR	65	TROLLY COVER
20	BLOOD GROUPING AND CROSS MATCHING OF DONORS SAMPLES	43	SPLINT	66	UROMETER, URINE JUG
21	SERVICE CHARGES WHERE NURSING CHARGE ALSO CHARGED	44	DIABETIC FOOT WEAR	67	AMBULANCE
22	TELEVISION CHARGES	45	KNEE BRACES (LONG/ SHORT/ HINGED)	68	VASOFIX SAFETY
23	SURCHARGES	46	KNEE IMMOBILIZER/ SHOULDER IMMOBILIZER		

List II – Items that are to be subsumed into Room Charges

Sl. No.	Item	Sl. No.	Item	Sl. No.	Item
1	BABY CHARGES (UNLESS SPECIFIED/ INDICATED)	14	BED PAN	27	ADMISSION KIT
2	HAND WASH	15	FACE MASK	28	DIABETIC CHART CHARGES
3	SHOE COVER	16	FLEXI MASK	29	DOCUMENTATION CHARGES / ADMINISTRATIVE EXPENSES
4	CAPS	17	HAND HOLDER	30	DISCHARGE PROCEDURE CHARGES
5	CRADLE CHARGES	18	SPUTUM CUP	31	DAILY CHART CHARGES
6	COMB	19	DISINFECTANT LOTIONS	32	ENTRANCE PASS / VISITORS PASS CHARGES
7	EAU-DE-COLOGNE / ROOM FRESHNERS	20	LUXURY TAX	33	EXPENSES RELATED TO PRESCRIPTION ON DISCHARGE
8	FOOT COVER	21	HVAC	34	FILE OPENING CHARGES
9	GOWN	22	HOUSE KEEPING CHARGES	35	INCIDENTAL EXPENSES / MISC. CHARGES (NOT EXPLAINED)
10	SLIPPERS	23	AIR CONDITIONER CHARGES	36	PATIENT IDENTIFICATION BAND / NAME TAG
11	TISSUE PAPER	24	IM IV INJECTION CHARGES	37	PULSEOXYMETER CHARGES
12	TOOTH PASTE	25	CLEAN SHEET		
13	TOOTH BRUSH	26	BLANKET/WARMER BLANKET		

List III – Items that are to be subsumed into Procedure Charges

Sl. No.	Item	Sl. No.	Item	Sl. No.	Item
1	HAIR REMOVAL CREAM	9	WARD AND THEATRE BOOKING CHARGES	17	BOYLES APPARATUS CHARGES
2	DISPOSABLES RAZORS CHARGES (for site preparations)	10	ARTHROSCOPY AND ENDOSCOPY INSTRUMENTS	18	COTTON
3	EYE PAD	11	MICROSCOPE COVER	19	COTTON BANDAGE
4	EYE SHEILD	12	SURGICAL BLADES, HARMONICS CALPEL, SHAVER	20	SURGICAL TAPE
5	CAMERA COVER	13	SURGICAL DRILL	21	APRON
6	DVD, CD CHARGES	14	EYE KIT	22	TORNIQUET
7	GAUSE SOFT	15	EYE DRAPE	23	ORTHOBUNDLE, GYNAEC BUNDLE
8	GAUZE	16	X-RAY FILM		

List IV – Items that are to be subsumed into costs of treatment

Sl. No.	Item	Sl. No.	Item	Sl. No.	Item
1	ADMISSION/REGISTRATION CHARGES	7	INFUSION PUMP- COST	13	MOUTH PAINT
2	HOSPITALISATION FOR EVALUATION/ DIAGNOSTIC PURPOSE	8	HYDROGEN PEROXIDE\ SPIRIT\ DISINFECTANTS ETC	14	VACCINATION CHARGES
3	URINE CONTAINER	9	NUTRITION PLANNING CHARGES - DIETICIAN CHARGES- DIET CHARGES	15	ALCOHOL SWABES
4	BLOOD RESERVATION CHARGES AND ANTE NATAL BOOKING CHARGES	10	HIV KIT	16	SCRUB SOLUTION/STERILLIUM
5	BIPAP MACHINE	11	ANTISEPTIC MOUTHWASH	17	GLUCOMETER & STRIPS
6	CPAP/ CAPD EQUIPMENTS	12	LOZENGES	18	URINE BAG