

- Ack. Copy -

To:

Mr. G. V. Reddy,
Asst. Registrar (RTI), University of Hyderabad,
Central University P.O., C. R. Rao Road,
Gachibowli, Hyderabad, Telangana - 500 046.

And

Mr. Ashish J. Thomas,
Public Relations Officer, University of Hyderabad,
Central University P.O., C. R. Rao Road,
Gachibowli, Hyderabad, Telangana - 500 046.

From:

Sameer Khan,


Sub: Request for true copy of signed Memorandum of Understanding between University of Hyderabad and respective Referral Hospitals, as per Right to Information Act, 2005.

Ref: UoH Circular UH/REG/R-33/2024/28268 dated 25-07-2024.

Date: 09-02-2025

Dear Sirs,

Please grant the following request as per Right to Information Act, 2005 (RTI).

Specific and particular information sought from University of Hyderabad (UoH):

- Please provide a True Copy of, the respective, signed agreement or Memorandum of Understanding with its terms and conditions, for each of the 37 "Referral Hospitals" listed in, Circular UH/REG/R-33/2024/28268 of 25-07-2024.

The physical signatures of the Authorized Signatory, in each of the 37 respective agreement documents, must be clearly visible along with the name and designation of the hospital's Authorized Signatory on the date of its signing.




Thank you for your kind attention and time.

Sincerely and faithfully,



Sameer Khan

09/02/2025


R.T.I.
IN/OUTWARD
No. 
Date 



UNIVERSITY OF HYDERABAD
Prof.C.R. Rao, Central University P.O.,
Gachibowli, Hyderabad

Ref.No. UH/RTI/2025/1294

Dated: 21.02.2025

Sub: Forwarding reply of RTI query date: 10.02.2025.

Ref: 1. Your RTI Query date: 10.02.2025.

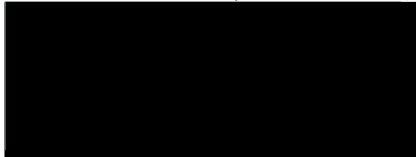
2. Approval of competent Authority date: 20.02.2025.

I am directed to forward the Reply to your RTI query no RTI/709. dt: 10.02.2025. cited under reference (1) above

The Registrar, UoH is the first appellate authority.

C. Venkateshwar *21/2/2025*
Assistant Registrar (RTI)

To,
Mr. Sameer Khan,





कुलसचिव कार्यालय
Office of the Registrar
हैदराबाद विश्वविद्यालय
University of Hyderabad



Phone: 2313 2100. Email: registrar@uohyd.ac.in

UH/REG/R-11/2025/

17 February 2025

OFFICE NOTE

Sub: Information pertaining to section under RTI Act 2005 – reg.
Ref: 1. RTI application dated 09.02.2025

An RTI application letter dated 09.02.2025 received from applicant Mr. Sameer khan has been duly forwarded by Assistant Registrar (RTI) Section dated 10.02.2025 vide cited above seeking information under RTI act, 2005. The reply is given below:

Query No.	Request for Information	From Section reply
1	Please provide a True Copy of the respective, signed agreement of Memorandum of Understanding with this terms and conditions, for each of the 37 "Referral Hospitals" listed in, Circular UH/REG/R-33/2024/28268 of 25-07-2024.	Copy enclosed The Circular dated 25.07.2024 was updated hospitals and is available at Link: https://intranet.uohyd.ac.in/ --> then click on circulars

REGISTERAR

To
The Assistant Registrar (RTI cell)

INWARD
No. 721
Date

QA

4692

Payment request sent out.
through email on 10/02/2025.

To:

Mr. G. V. Reddy,
Asst. Registrar (RTI), University of Hyderabad,
Central University P.O., C. R. Rao Road,
Gachibowli, Hyderabad, Telangana - 500 046.

And

Mr. Ashish J. Thomas,
Public Relations Officer, University of Hyderabad,
Central University P.O., C. R. Rao Road,
Gachibowli, Hyderabad, Telangana - 500 046.

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Date: 09-02-2025

Dear Sirs,

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Specific and particular information sought from University of Hyderabad (UoH):

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The physical signatures of the Authorized Signatory, in each of the 37 respective agreement documents, must be clearly visible along with the name and designation of the hospital's Authorized Signatory on the date of its signing.

Thank you for your kind attention and time.

Sincerely and faithfully,

Sameer Khan

Sameer Khan

09/02/2025

IN/OUTWARD

No. 709

Date 10/02/2025



4691

Requesting payment for photocopying charges for providing RTI reply.

Right To Information <rti@uohyd.ac.in>

Mon, Feb 10, 2025 at 12:33 PM

To: [REDACTED]

Dear applicant

With reference to your RTI application dated 10th Feb 2025, we are here by requesting payment payment for photocopying charges for providing RTI reply (40 pages, Rs 80) and RTI application charge, Rs 10.

We are kindly requesting you please pay the amount of total 90 rupees through postal order.

Thank you
RTI/CPGRAMS Section
University of Hyderabad

4690

NOT NEGOTIABLE

भारतीय पोस्टल ऑर्डर
INDIAN POSTAL ORDER

सचिव, भारत-विदेश डाक DIRECTOR GENERAL OF POSTS

PAY TO CPD. WDH

GACHIBOWLY, MID-SPRING

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कमीशन COMMISSION रुपये 1 RUPEE

AT THE POST OFFICE AT

के हाकपर में अदा करें

SUB POSTMASTER

लिंगमपल्ली / Lingampally

दरभानाद / Hyderabad 500019

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अपरक्राम्य

NOT NEGOTIABLE

INDIAN POSTAL ORDER

डा. नाथियान्स DIRECTOR GENERAL OF POSTS

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GACHIBOWLE YD-50014

FOR THE FIRST TIME IN OVER TEN YEARS

अपीयन COMMISSION रुपया 1 RUPEE

AT THE POST OFFICE

के हाथों में आया

SUB POSTMASTER

लिंगमपल्ली / Lingampally

राबाद / Hyderabad-500019.

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地址：上海南京路100号 电话：021-23111111

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THE UNITED STATES DEPARTMENT OF JUSTICE
FEDERAL BUREAU OF INVESTIGATION

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ATTORNEY AT LAW



SUB POSTMASTER

लिंगमपल्ली / Lingampally

हैदराबाद / Hyderabad-500018

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भारतीय डाक निकाय के अधिकारियों द्वारा जारी किया गया है। इसका उपयोग केवल डाक के माध्यम से ही किया जा सकता है।

NOT NEGOTIABLE



डाक महानिदेशक DIRECTOR GENERAL OF POSTS.



PAY TO CPD, UOH,
GACHIBOWLI, HYD-500046 को

पचास रुपये की रकम THE SUM OF RUPEES FIFTY ONLY

रुपये 50.00Rs.

कमीशन COMMISSION रुपये 2.50 RUPEES

प्रेषक अपना नाम और पता यहां लिख दें।
SENDER MAY FILL IN HIS NAME AND ADDRESS HERE.

SAMEER AHMAD KHAN



AT THE POST OFFICE AT

उप डाकपाल

के डाकघर में अदा करें।

पोस्ट मास्टर POSTMASTER

लिंगमपल्ली / Lingampally

हैदराबाद / Hyderabad-500019

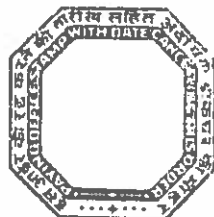
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NOT NEGOTIABLE



डाक महानिदेशक DIRECTOR GENERAL OF POSTS.



PAY TO CPD, UOH
GACHIBOWLI, HYD-500046 को

दस रुपये की रकम THE SUM OF RUPEES TEN ONLY

₹ 10

कमीशन COMMISSION रुपये 1 RUPEE

प्रेषक अपना नाम और पता यहां लिख दें।
SENDER MAY FILL IN HIS NAME AND ADDRESS HERE.

SAMEER AHMAD KHAN



AT THE POST OFFICE AT

के डाकघर में अदा करें।

पोस्ट मास्टर POSTMASTER

उप डाकपाल

SUB POSTMASTER

लिंगमपल्ली / Lingampally

हैदराबाद / Hyderabad-500019

69F 077602



Fwd: RTI Request

1 message

Thomas UoH <pro@uohyd.ac.in>

Mon, Feb 10, 2025 at 6:58 AM

To: Right To Information <rti@uohyd.ac.in>, venkateswara reddy g <gvreddy.ar@uohyd.ac.in>

For your kind perusal.

----- Forwarded message -----

From: sameer-a-khan [REDACTED]

Date: Mon, 10 Feb, 2025, 5:18 am

Subject: RTI Request

To: ctc@uohyd.ac.in <ctc@uohyd.ac.in>, pro@uohyd.ac.in <pro@uohyd.ac.in>

To:

Mr. G. V. Reddy,
Asst. Registrar (RTI),
University of Hyderabad,
Central University P.O., C. R. Rao Road,
Gachibowli, Hyderabad, Telangana - 500 046.

And

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Public Relations Officer,
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From:

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[REDACTED]

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Ref: UoH Circular UH/REG/R-33/2024/28268 dated 25-07-2024.

Date: 09-02-2025

Dear Sirs,

Please find attached, copy of my signed letter with RTI request for the above-mentioned subject matter.

Thank you.

Sincere,

Sameer Khan

"And so we hold our truth with open palms."

This email communication and its attachments are private and confidential. Please do not forward, copy or print any parts of it without prior permission. If you believe you have received this communication in error, please delete it and notify the sender.

Sent with Proton Mail secure email.



2025_02_09-scanned_copy-rti_quest-letter_to-assit_registrar_uoh.pdf
376K



कुलसचिव कार्यालय
Office of the Registrar
हैदराबाद विश्वविद्यालय
University of Hyderabad



Phone: 2313 2100. Email: registrar@uohyd.ac.in

UH/REG/R-33/2024/ 28268

25 July 2024

CIRCULAR

Sub:- Recognition of Hospitals as referral Hospitals for undergoing in-patient & out-patient treatment – reg.
Ref: The Vice-Chancellor's approval dated 20.07.2024.

The following Hospitals have been recognized by the University as referral Hospitals for undergoing in-patient & outpatient treatment by the employees and their dependents and pensioners and their spouses and have agreed to offer CGHS/applicable hospital tariffs as detailed below:

Sl. No.	Name of the Hospitals	Tariff Offered
1	Yashoda Hospitals Branches : Hitech City, Secunderabad, Somajiguda & Malakpet.	1.CGHS 2014 NABH Hyderabad Tariff on Cardiology, Cardiothoracic surgery, Oncology (Medical, Surgical & Radiation) and Specialized Orthopedics (Joint Replacement). 2.10% discount on Yashoda Hospitals 2019 Tariff for all other specialties other than the mentioned above. Consultation: MD< MS – Rs. 500/- per Consultation DM, MCH – Rs. 700/- per Consultation OP Investigation – 10% Discount on Yashoda Hospital Tariff 2019
2	Renova Hospitals Branches : Langar House, Kompally, Banjara Bills Sanath Nagar, Karkhana (Secunderabad)	IP & OP services as per CGHS Hyderabad tariff Cashless facility shall be extended for regular employees for pensioners, the amount will be collected at time of admission or during discharge.
3	Prathima Hospitals #26 & 27, Opp Arjun Theatre, K.P.H.B Main Road, Kukatpally, Hyderabad 500072.	IP & OP services as per CGHS 2014 NABH tariff Free ambulance pickup in case of any emergencies to (within 10kms radius)
4	Basavatarakam Indo-American Cancer Hospital & Research Institute /Road No. 10,Banjara Hills, Hyderabad - 5000034	Oncology services only as per CGHS 2014 NABH oncology tariff Other services as per hospital tariff
5	Pace Hospitals Plot No.23, Huda Techno Enclave, Patrika Nagar, Madhapur, Hyderabad - 500081	IP & OP services as per CGHS applicable tariff
6	Medicare super specialty Hospital Near Pillar No. A 600, Plot No. 65 & 66, Miyapur main road, Hyderabad -500049	IP & OP services as per CGHS tariff

7	SLG Hospitals SLG Circle, No.306, No. 306, Nizampet Raod, Bachupally, Hyderabad, Telangana -5000090	IP & OP services as per CGHS tariff
8	Sai Sanjeevini hospitals # 11-08-99/4418 Narsimhapuri Colony, Kothapet, Hyderabad - 500035	IP & OP services as per CGHS 2014 NABH tariff 20% discount on hospital tariff for the Inpatient treatment / lab investigations which are not covered under CGHS 2014 rates - NABH
9	PRK Hospitals Gangaram, Chandanagar, Hyderabad -500050	IP & OP services as per CGHS 2014 NABH tariff Free ambulance with in 5kms. Radius of the hospital.
10	Wellness Hospitals Branches : Ameerpet, Sangareddy & Hastinapuram	IP & OP services as per CGHS tariff
11	Virinchi Hospitals Road#1, Bajara Hills, Hyderabad -500034	IP & OP services as per CGHS tariff
12	Star Hospitals #2-74, survey no.74, Nanakramguda Village, financial dist, Serlingampally Mandal, RR Dist, Hyderabad - 500008	IP & OP services as per NABH tariff
13	Apollo Hospitals All Branches in Hyderabad	(No CGHS tariff) *Apollo Hospitals Existing Tariff dated 2 nd Aug – 2023 * 20% discount n room rents * 20% discount on IP investigations (excluding Pharmacy and Implants) * 10% discount on all packages. * 15% discount on OP Investigations (Excluding CT & MRI) * Doctor consultation super spl 1200/- spl 900/-
14	American Oncology Institute 1-100/1/CCH, Nallagandala Village, Serilingampally Mandal, Hyderabad – 500019, Telangana	As per CGHS tariff for Oncology services only
15	Citizens Specialty Hospital Nallagandala Village, Serillingampally, Hyderabad 500019	1.GIPSA tariff on Gyaecology, General & Laparoscopic surgeries and ENT 2.CGHS tariff on other specialties
16	Care Hospital All Branches in Hyderabad	10% discount on Care Hospitals 2023 tariff on in- patient services, outpatient services (excluding outsourced investigations, Implants, stents, etc. _ and Health Check Packages. ambulance service with in 5 KM radius of any of their branches.
17	Continental Hospitals Plot No.3, Road 2, IT & Financial district, Gachibowli, Nanakramguda,, Hyderabad 500032	CGHS NABH 2014 tariff on: 1.All Out-patient Services (OPD Consultations, Lab & Investigations) except for Dental, Dermatology & Psychiatry

		<p>consultations, Out-sourced investigations and non covered CGHS investigations.</p> <p>2.All in-patients Services (Medical Cases) like Cardiology, Neurology, Gen Medicine, Nephrology, Critical Care, Pulmonology, Oncology including Radiation, Medical & Surgical Oncology, Gastro, Special Orthopaedic procedures like TKR & THR</p> <p>3.All in-patients Surgical Cases on Continental Hospital 2019 tariff with 20% discount except Food, Pharmacy, Consumable and Implants</p> <p>4. 15 % discount on Health Checkup Packages</p> <p>5. 20% discount on Physiotherapy</p> <p>6. 10% discount on OP Pharmacy</p>
18	MAA Hospitals Branches : Balanagar, KPHB, Dilsukhnagar, Jubilee Hills, Malkajgiri, Mehdiapatnam, Somajiguda.	As per CGHS NABH tariff
19	Medicover Hospitals HITEC City, Chandanagar, Begumpet	As per CGHS NABH tariff
20	Sri Sri Holistic Hospitals Kondapur, Hyderabad	As per CGHS NABH tariff
21	AIG Hospital Gachibowli, Hyderabad – 500032	As per CGHS NABH tariff for Cardiology, Ortho and Oncology Services only.
22	Omega Hospitals Branches: Banjarahills, Gachibowli, Hyderabad	Banjara hills branch for Oncology Services CGHS tariff / Gachibowli for Multi-Super-specialty along with oncology CGHS tariff
23	TX Hospital Branches: Kachiguda, Uppal, Banjara Hills Hyderabad	As per CGHS NABH tariff
24	KIMS Hospitals Branch: Secunderabad, KIMS sunshine Begumpet, Kondapur and Gachibowli, Hyd.	<p>a. A discount of 15% on consultation and investigations for Outpatient services.</p> <p>b. A discount of 15% on Room Rents, investigation, Procedures on IP services.</p> <p>c. A discount of 10% on the package for in-patient services.</p> <p>d. the discounts are not applicable on pharmacy, medicines, stents, implants, consumable, blood products and outsourced investigations.</p> <p>e. All Govt imposed Tax's shall be applicable.</p>
25	Century Hospital Banjar Hills, Hyderabad - 500034	<p>Out-patient services: 20% discount on hospital tariff excluding external diagnostics</p> <p>In-patient services: 15% discount on hospital tariff (Excluding packages, drugs, disposable and external diagnostics)</p>
26	Smart Vision Eye Hospital Branches are Gachibowli, Kokapet, L.B. Nagar, Madinaguda & Secunderabad	IP & OP services as per CGHS tariff

27	Saijyothi Eye Institute Plot No. 185, Road No.1, West Marredpally, Secunderabad - 500026	As per CGHS tariff
28	Sree Netralaya Eye hospitals #11-9-1, Vimal Complex, Opp. Bus Stop, Kothapet, Dilsukhanagar, Hyderabad - 500035	As per CGHS tariff
29	Neovision Eye Care Main Road Habsiguda Hyderabad - 500007	IP & OP services as per CGHS NABH tariff
30	SOLIS Eye care hospitals SVK Towers, Kusaiguda Main Raod, ECIL X Road, Hyderabad - 500062	As per CGHS tariff
31	Maxivision Eye hospital All Branches	As per CGHS NABH tariff
32	Dr. Agarwals eye hospitals	As per CGHS tariff
33	VASAN eye care Hospitals Branches: Kukatpally, Chandanagar, Secunderabad, Santoshnagar, Dilsukhnagar, Begumpet, Khammam, Karimnagar, Warangal.	As per CGHS tariff
34	Anu's Dental hospital RTC X Road, Chikkadpally, Hyderabad - 500020	As per CGHS tariff
35	Dr. Shiva Nagini Yalavarthi Multi Speciality Dental Clinic Opp. Gem Motor Service Centrer, Raghavendra Cology, Kondapur, Hyderabad, Telangana 500084	CGHS Tariff for CGHS procedures and 50% discount on hospital tariff for Non-CGHS procedures.
36	AARTHI Scans & Labs (Diagnostic Centre) All branches	As per CGHS tariff
37	Sri Visista Super Speciality Ayurveda Somajiguda, Saroor Nagar, Hyderabad	As per CGHS NABH tariff (Ayurveda)

As there are very few Dental Hospitals recognized by CGHS (only Dr. Anu's Dental Care, Chikkadpally, Hyderabad agreed to provide at CGHS tariff) and some Hospitals are not willing to extend the CGHS tariff for many procedures, it is advised that the beneficiaries may consult any Dental Hospital located in the twin cities for their treatment. However, reimbursement will be restricted to the rates prescribed in the CGHS tariff and no advances will be sanctioned for these cases.

Instructions to the Employees and Pensioners:

- 1 Whenever, the beneficiaries visit the referral Hospitals, they are advised to insist the Hospital to mention the CGHS code in the Estimation Form without fail for all treatments to avail 90% Medical Advances, carry their Original Medical Identity Card (s) and submit a copy of the same to the Hospital Authorities, for undergoing in-patient & out-patient treatment. While seeking admission for undergoing treatment as in-patient, the beneficiaries are advised to submit a copy of the latest pay slip to the Hospital authorities to enable them to allot applicable accommodation. In Case of Non-CGHS treatments, the University will provide only 50% advance or up to 70% at the discretion of Medical Officers of UH Health Centre.
- 2 The procedure hitherto being followed with regard to drawing of Medical Advance, Adjustments of Medical Advance and submission of Medical Reimbursement claims shall remain the same.
- 3 At the time of leaving the hospital after undergoing treatment, the beneficiaries shall ensure that the Discharge Certificate, Original Bills, Essentiality Certificate, etc., duly signed by the Hospital Authorities / Medical Officer, are obtained for the purpose of settlement / reimbursement of expenses incurred.
- 4 All the claims (in-patient and out-patient) will be restricted to the rates prescribed under CGHS tariff and revised from time to time. The in-admissible expenses, if any, shall be borne by the beneficiaries themselves.
- 5 In emergency cases involving accidents, serious nature of diseases, etc., the patient may be admitted in any Private Hospital / Clinic, in case no recognized hospital is available at nearby location. In such cases, a certificate from the doctor / hospital stating that the patient is admitted under emergency circumstances / condition, shall be obtained and submit the same to the CMO, University Health Centre, for recommending payment.
- 6 All the beneficiaries are advised to submit their claims in the prescribed application form duly furnishing all the particulars mentioned therein, along with necessary certificates / bills for their settlement / reimbursement.


 (Dr. DEVESH NIGAM)
 REGISTRAR

Copy to:

1. CMO, Health Centre
2. P.S to Finance Officer
3. OSD to Vice-Chancellor
4. Webmaster – with a request to upload the Circular on the University Website

हैदराबाद विश्वविद्यालय
आचार्य सी.आर. राव मार्ग
केंद्रीय विश्वविद्यालय डाक घर
हैदराबाद 500 046

डॉ. देवेश निगम
कुलसचिव



4666
University of Hyderabad
Professor C.R. Rao Road
P.O. Central University
Hyderabad 500 046, Telangana,
India
Phone.: +91-40-2313 2100
Email: registrar@uohyd.ac.in,
Dr. Devesh Nigam
Registrar

सं संख्या Ref. No.: UH/REG/R-33/2024/

तिथी

Date: 27 February 2024

To
The Care Hospitals
Care Corporate Office
1st Floor, Kohinoor Building, Opp, Park Hyatt,
Road No.2, Banajara Hills, Hyderabad – 500034.

Dear Sir,

Sub: Empanelment of your hospital for availing in-patient and out-patient treatment by the University's Staff & pensioners –reg.
Ref: 1. UoH letter dated 19.10.2023
2. Your letter / email dt. 13.01.2024

Kind attention is invited to the University's letter cited at (1) for empanelment of your hospital for availing in-patient / out-patient treatments by the University employees and their dependents & pensioners and their spouses and your consent for the same vide your letter / email date 13.01.2024

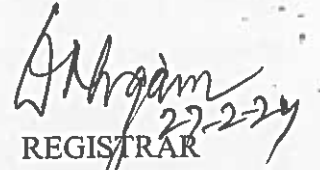
In this regard, I am pleased to inform you that your hospital has been recognized by the University as a referral hospital as per the following tariffs:

Name of the Hospital	Tariffs / services applicable
Care Hospitals	10% discount on Care Hospitals 2023 tariff on in-patient services, outpatient services (excluding outsourced investigations, Implants, stents, etc.) and Health Check Packages. Free Ambulance service with in 5 km radius of any of their branches

General information:

- The empanelment shall be valid for a period of two years with immediate effect. In case you wish to sign a MoU, it is requested to submit the same for signatures.
- In case an employee/ their dependent avails in-patient services, they can make the complete payment (or) the University shall remit upto 90% of the bill estimate as medical advance, during the time of admission and the remaining amount shall be settled by the beneficiaries themselves. However, no advance shall be admissible to pensioners/ their spouses and they shall make the total payment upfront at the time of discharge.

iii. In case of any clarification, the undersigned may be contacted over phone or email.


22-2-24
REGISTRAR

Copy to:

1. Chief Medical Officer i/c, Health Centre
2. OSD to VC

कुलसचिव / REGISTRAR
हेदराबाद विश्वविद्यालय
University of Hyderabad
हेदराबाद / Hyderabad - 500 046.

Memorandum of Understanding

This Memorandum of Understanding is made and executed on this 22th day of May 2024 at Hyderabad, Telangana, India.

Between

University of Hyderabad, Central University Rd, CUC, Gachibowli, India Post Lingampally, Hyderabad, Telangana-500046. and having its Registered office Act of Parliament (Act No.39 of 1974) on October 02, 1974 as a Central University at and represented by its Dr. Devesh Nigam, Registrar (hereinafter referred to as "University" which expression shall, unless it be repugnant to the context or meaning there of be deemed to mean and their respective heirs, legal representatives, successors, administrators and assigns etc.,) of the One Part.

And

Quality Care India Limited, a company incorporated under the Companies Act, 1956, having its registered office at 6-3-248/2, Road No 1, Banajra Hills, Hyderabad-500034 and represented by its Group CEO, Jasdeep Singh (hereinafter referred to as "CARE HOSPITALS" which expression shall unless repugnant to the context or meaning thereof mean and include their respective heirs, legal representatives, successors, administrators and assigns etc.,) of the other Part.

(The parties of the One and Other part shall hereinafter be collectively referred to as "Parties" and individually as "Party").

RECITALS

CARE HOSPITALS is engaged in the Healthcare Services and provides medical and health care services to its patients including services of OPD and IPD through its multi-specialty Hospitals at all units.

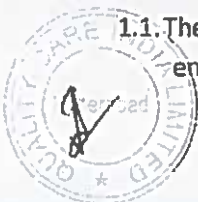
CARE HOSPITALS in mutual agreement with University and is willing to provide the hospital & health related services at CARE HOSPITALS Banjara, Nampally, Musheerabad, Hitech City & Malakpet units, Hyderabad.

NOW THEREFORE, IT IS AGREED AS FOLLOWS BETWEEN THE PARTIES HERETO:

1. APPOINTMENT:

1.1. The University hereby appoints CARE HOSPITALS to provide the healthcare services to its employees and their dependent family members, retired employees & their dependents


REGISTRAR
हैदराबाद विश्वविद्यालय
Hyderabad
हैदराबाद / Hyderabad - 500 046.



and CARE HOSPITALS accept such appointment. University shall provide a list of its employees who are desirous of availing the services of CARE HOSPITALS and would set out a process which would be made available before the commencement of the services to the University to help CARE HOSPITALS to make identification of the employees who wish to avail such services.

- 1.2. For the purpose of identification of the employee availing services at the Hospital, employee would be required to bring his office identification card and a reference letter from the University issued by bearing signatures of the above authority along with validity period of the letter for availing the services offered by CARE HOSPITALS. In terms of Availing treatment through ER.

2. PAYMENT:

CARE HOSPITALS shall do the billing as per the prevailing tariff subject to consideration of following discount

I. Inpatient Services (IP):

10% discount on the total bill with the respective unit's 2023 cash tariff, excluding Drugs/Medicines, consumables, disposables, Implants, stents, packages, and outsourced investigations.

II. Outpatient Services (OP):

10% discount on Doctor consultations and investigations (excluding outsourced investigations).

III. Health Check Packages:

10% discount on all our respective unit's actual day health check packages.

IV. Complimentary Ambulance Service:

Free ambulance service within a 5 KM radius of any of our units if the patient is admitted as IP.

Tariff Applicability:

The 2023 respective unit tariff will be applicable for a duration of 2 years from the date of signing the Memorandum of Understanding (MOU), covering both Inpatient and Outpatient services.

Health Check tariffs will be based on the actual day respective unit tariff whenever the person comes to the hospital.

Exclusivity Clause:

The above-mentioned discounts will not be applicable if the respective person avails of any other facilities simultaneously (both Inpatient, Outpatient & Health Checks).



Signature: *[Signature]*
 BISTRAR
 Hyderabad
 University of Hyderabad
 Hyderabad / Hyderabad - 500 C46.

3. ADMISSION PROCEDURES IN CASE OF EMERGENCIES:

- 3.1. In case of emergency when the University requires emergency admission, the hospital shall admit the patient on the basis of employee identification card or any written communication from his office. In the event of non-producing of identity proof at the time of admission, the same shall be submitted within 24 hours or extend it to 48 hours of the next day is holiday. In such case employee shall deposit initial amount as demanded by Hospital on submission of identity proof. Retired employee should show the health card along with Aadhar card for self & dependents.
- 3.2. After discharge from the hospital, the patient would be handed over the Original Discharge summary, Original reports of all investigations undertaken during his/her stay in the hospital.
- 3.3. All payments are to be made in respect of the final bill generated by CARE HOSPITALS on the basis of the treatment of the patient in the hospital. Bill shall be cleared by the patient or its dependent or University of Hyderabad at the time of discharge.
- 3.4. This MOU agreed only for cash payment and no credit will be allowed.

4. VALIDITY:

This agreement shall be valid for a period of 2 years from the effective date of this agreement.

5. TARIFF:

As per the respective unit 2023 cash Tariff applicable for this MOU during the period of agreement except Health Checkup package.

6. TERMINATION:

- 6.1. This Memorandum of Understanding may be terminated by ^{30 Days} ~~60 days~~ written notice by either party to the other party at any time during the Memorandum of Understanding period.
- 6.2. Any party to this Memorandum of Understanding may immediately terminate this Memorandum of Understanding by giving written notice to the other party if:
- 6.2.1. Any party commits a material breach of any provision of this Memorandum of Understanding and if the breach is capable of remedy, fails to remedy it within 30 days after being given written notice giving full particulars of the breach and requiring it to be remedied; or
- 6.2.2. Any party goes into liquidation whether compulsory or voluntary or if an order is made or a resolution is passed for the winding up or a receiver or administrator is appointed or it enters into any arrangement or composition with its creditors generally or ceases to carry

③



Signature
REGISTRAR
कलेसियर / रजिस्ट्रार
University of Hyderabad
हैदराबाद / Hyderabad - 500 046.

on business or be able to pay its debts when they fall due or become subject to other proceedings analogous in purpose or effect, including the appointment of a receiver, trustee or liquidator for any such purpose.

7. CONSEQUENCES OF TERMINATION:

7.1. Termination of this Memorandum of Understanding shall not affect any rights or obligations of the parties which may have accrued prior to the termination, nor shall it affect the coming into or continuance in force of any provisions of this Memorandum of Understanding which are expressly, or by implication, intend to come into or continue in force after termination and the parties shall continue to perform and complete the same.

7.2. Upon termination the University shall immediately settle payment of the outstanding bills raised and the services provided till the date of termination by CARE HOSPITALS.

8. REPRESENTATION AND WARRANTIES:

8.1. Each Party represents and warrants to the other party that:

- 8.1.1. It is a corporation or entity duly organized and validly existing under the laws of the state or other jurisdiction of incorporation or formation;
- 8.1.2. It has the corporate power and authority and the legal right to enter into this Memorandum of Understanding and to perform its obligations hereunder;
- 8.1.3. The execution and delivery of this Memorandum of Understanding and the performance by such party of the transactions contemplated hereby have been duly authorized by all necessary corporate action of such party; and
- 8.1.4. The execution, delivery and performance of this Memorandum of Understanding by such party does not require the consent, approval or authorization of or notice declaration, filing or registration with, any governmental or regulatory authority and the execution, delivery or performance of this Memorandum of Understanding by such party does not violate any law, rule or regulation applicable to such a party.

9. ENTIRE AGREEMENT / AMENDMENTS:

This Memorandum of Understanding constitutes the entire agreement between the parties with respect to the subject matters addressed herein. This Memorandum of Understanding may not be amended or modified except by a written Memorandum of Understanding signed by both parties hereto.

10. ENFORCEABILITY:

The invalidity or unenforceability of any provision of this Memorandum of Understanding shall not affect the validity or enforceability of any other provision of this Memorandum of Understanding, each of which shall remain in full force and effect.

[Signature]
 कलसिचर / REGISTRAR
 हैदराबाद विश्वविद्यालय
 University of Hyderabad
 हैदराबाद / Hyderabad - 500 046

②



11. NO CONFLICTING AGREEMENTS:

University shall not, after the signing of this Memorandum of Understanding, enter into any oral or written Memorandum of Understanding or arrangement with any party that would conflict with its obligations under this Memorandum of Understanding.

12. FORCE MAJEURE:

Neither Party shall be deemed in default of this Memorandum of Understanding, nor shall it hold the other Party responsible for, any cessation, interruption or delay in the performance of its obligations (excluding payment obligations) due to earthquake, flood, fire, storm, natural disaster, act of God, war, terrorism, armed conflict, labor strike, lockout, boycott or other similar events beyond the reasonable control of the Party.

13. ASSIGNMENT:

The University shall not assign, sublet or subcontract its rights or obligations under this Memorandum of Understanding to any part thereof without the prior written consent of the care hospitals.

14. GOVERNING LAW:

The Memorandum of Understanding shall be interpreted in accordance with and governed by the laws of India and the parties shall submit to the jurisdiction of the courts in Hyderabad.

15. HEADINGS:

The descriptive headings are inserted for convenience of reference only and are not intended to be part of or to affect the meaning or interpretation of this Memorandum of Understanding.

16. ARBITRATION:

All disputes between the parties arising out of the matters mentioned above in this Memorandum of Understanding and other matters incidental to this Memorandum of Understanding, shall be resolved as per the provisions of the arbitration and conciliation act, 1996 and statutory modifications thereto. The arbitration proceedings shall be conducted by a single arbitrator, who shall be appointed with the mutual consent of both parties and language shall be English and the venue of arbitration shall be in Hyderabad, Telangana, India.

③



[Signature]
कुलसचिव / REGISTRAR
हैदराबाद विश्वविद्यालय
University of Hyderabad
हैदराबाद / Hyderabad - 500 046.

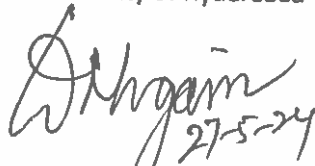
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17. COUNTERPARTS:

This agreement shall be executed in two counterparts; each party shall be entitled to retain one copy.

In witness whereof the both parties hereto have executed this Memorandum of Understanding in the day, month and year herein above written in the presence of;

For University of Hyderabad


27-5-24

Dr. Devesh Nigam / REGISTRAR
Registrar, ~~UZH~~ ^{उज्जैन विश्वविद्यालय}
University of Hyderabad
हैदराबाद / Hyderabad - 500 046.


Witnesses:

Signature:

Name:


S/o:

Address:


CAPT. RAVINDRA KUMAR
CHIEF MEDICAL OFFICER
CENTRAL UNIVERSITY
HYDERABAD-500 046

For Quality Care India Limited




Jasdeep Singh
Group CEO

Witnesses:

Signature:

Name:

S/o:

Address:

Quality Care India Limited

Corporate Office:

D. No:8-2-120/86/10, 1st Floor

Star Maa TV Building,

Opp. Park Hyatt Hotel, Road No:2,

Banjara Hills, Hyderabad-500 034.

हैदराबाद विश्वविद्यालय
आचार्य सी.आर. राव मार्ग
केंद्रीय विश्वविद्यालय डाक घर
हैदराबाद 500 046



University of Hyderabad
Professor C.R. Rao Road
P.O. Central University
Hyderabad 500 046, Telangana,
India
Phone.: +91-40-2313 2100
Email: registrar@uohyd.ac.in,
Dr. Devesh Nigam
Registrar

डॉ. देवेश निगम
कुलसचिव

सं संख्या Ref. No.: UH/REG/R-33/2024/

तिथी

Date: 27 February 2024

To

The Continental Hospitals

Plot No.3, Road 2, It & Financial district,
Gachibowli, Nanakramguda,
Hyderabad 500032

Dear Sir,

Sub: Empanelment of your hospital for availing in-patient and out-patient treatment by the University's Staff & pensioners –reg.

Ref: 1. UoH letter dated 19.10.2023
2. Your letter / email dt. 17.01.2024

Kind attention is invited to the University's letter cited at (1) for empanelment of your hospital for availing in-patient / out-patient treatments by the University employees and their dependents & pensioners and their spouses and your consent for the same vide your letter / email date 17.01.2024

In this regard, I am pleased to inform you that your hospital has been recognized by the University as a referral hospital as per the following tariffs:

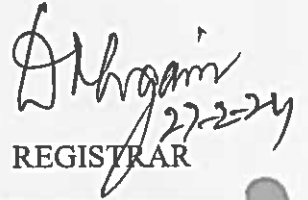
Name of the Hospital	Tariffs / services applicable
Continental Hospitals	<p>CGHS NABH 2014 tariff on:</p> <ol style="list-style-type: none"> 1.All Out-patient Services (OPD Consultations, Lab & Investigations) except for Dental, Dermatology & Psychiatry consultations, Out-sourced investigations and non covered CGHS investigations. 2.All in-patients Services (Medical Cases) like Cardiology, Neurology, Gen Medicine, Nephrology, Critical Care, Pulmonology, Oncology including Radiation, Medical & Surgical Oncology, Gastro, Special Orthopaedic procedures like TKR & THR 3.All in-patients Surgical Cases on Continental Hospital 2019 tariff with 20% discount except Food, Pharmacy, Consumable and Implants 4. 15 % discount on Health Checkup Packages 5. 20% discount on Physiotherapy 6. 10% discount on OP Pharmacy

General information:

- i. The empanelment shall be valid for a period of two years with immediate effect. In case you wish to sign a MoU, it is requested to submit the same for signatures.
- ii. In case an employee/ their dependent avails in-patient services, they can make the complete payment (or) the University shall remit upto 90% of the bill estimate as medical advance, during the time of admission and the remaining amount shall be settled by the beneficiaries themselves. However, no advance shall be admissible to pensioners/ their spouses and they shall make the total payment upfront at the time of discharge.
- iii. In case of any clarification, the undersigned may be contacted over phone or email.

Copy to:

1. Chief Medical Officer i/c, Health Centre
2. OSD to VC


27-2-24
REGISTRAR

कुलसचिव / REGISTRAR
हैदराबाद विश्वविद्यालय
University of Hyderabad
हैदराबाद / Hyderabad - 500 046.

हैदराबाद विश्वविद्यालय
आचार्य सी.आर. राव मार्ग
केंद्रीय विश्वविद्यालय डाक घर
हैदराबाद 500 046



4681
University of Hyderabad
Professor C.R. Rao Road
P.O. Central University
Hyderabad 500 046, Telangana,
India
Phone.: +91-40-2313 2100
Email: registrar@uohyd.ac.in,

डॉ. देवेश निगम
कुलसचिव

Dr. Devesh Nigam
Registrar

संख्या Ref. No.: UH/REG/R-33/2024/24064

तिथी

Date: 17 January 2024

To
Mr. G.D. Ramesh
GM – Corporate Relations
Yashoda Healthcare Services Pvt. Ltd.

Dear Sir,

Sub: Empanelment of your hospital for availing in-patient and out-patient treatment by the University's Staff & pensioners –reg.
Ref: 1. UoH letter dated 19.10.2023
2. Your letter / email dt. 08.11.2023

Kind attention is invited to the University's letter cited at (1) for empanelment of your hospital for availing in-patient / out-patient treatments by the University employees and their dependents & pensioners and their spouses and your consent for the same vide your letter / email dated 08.11.2023

In this regard, I am pleased to inform you that your hospital has been recognized by the University as a referral hospital as per the following tariffs:

Name of the Hospital	Tariffs / services applicable
Yashoda Hospitals Branches: Hitech City, Secunderabad, Somajiguda & Malakpet	1. CGHS NABH Hyderabad tariff on Cardiology, Cardiothoracic surgery, Oncology (Medical, Surgical & Radiation) and Specialized Orthopaedics (Joint Replacement). 2. 10 % discount on Yashoda Hospitals 2019 Tariff for all other specialities other than the mentioned above. Consultation: MD, MS – Rs. 500/- per consultation DM, MCH – Rs. 700/-per consultation OP Investigations – 10% Discount on Yashoda Hospital Tariff 2019

General information:

- The empanelment shall be valid for a period of two years with immediate effect. In case you wish to sign a MoU, it is requested to submit the same for signatures.
- In case an employee/ their dependent avails in-patient services, they can make the complete payment (or) the University shall remit upto 90% of the bill estimate as medical advance, during the time of admission and the remaining amount shall be settled by the beneficiaries

themselves. However, no advance shall be admissible to pensioners/ their spouses and they shall make the total payment upfront at the time of discharge.

iii. In case of any clarification, the undersigned may be contacted over phone or email.

Dr. M. G. Amin
17/12/24

REGISTRAR

कुलसचिव / REGISTRAR

हैदराबाद विश्वविद्यालय

University of Hyderabad

हैदराबाद / Hyderabad - 500 046.

Copy to:

1. Chief Medical Officer i/c, Health Centre
2. OSD to VC

4680

हैदराबाद विश्वविद्यालय
आचार्य सी.आर. राव मार्ग
केंद्रीय विश्वविद्यालय डाक घर
हैदराबाद 500 046



संयुक्त राष्ट्र
ONE EARTH • ONE FAMILY • ONE FUTURE



University of Hyderabad

Professor C.R. Rao Road
P.O. Central University

Hyderabad 500 046, Telangana,
India

Phone.: +91-40-2313 2100

Email: registrar@uohyd.ac.in,

Dr. Devesh Nigam

Registrar

डॉ. देवेश निगम

कुलसचिव

संख्या Ref. No.: UH/REG/R-33/2024/24064

तिथी

Date: 17 January 2024

To

Mr. P. Raghu Mohan Rao

Group General Manager – Business Development

Renova Hospitals

Plot No. 270/A, Padmaja Towers

2nd floor, MLA Colony, Road No. 12,

Banjara Hills, Hyderabad - 500034.

Dear Sir,

Sub: Empanelment of your hospital for availing in-patient and out-patient treatment by the University's Staff & pensioners –reg.

Ref: 1. UoH letter dated 19.10.2023
2. Your letter / email dt. 06.11.2023

Kind attention is invited to the University's letter cited at (1) for empanelment of your hospital for availing in-patient / out-patient treatments by the University employees and their dependents & pensioners and their spouses and your consent for the same vide your letter / email dated 06.11.2023

In this regard, I am pleased to inform you that your hospital has been recognized by the University as a referral hospital as per the following tariffs:

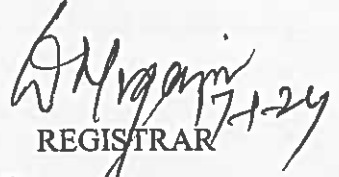
Name of the Hospital	Tariffs / services applicable
Renova Hospitals Branches : Langar House, Kompally, Banjara Hills Sanath Nagar, Karkhana (Secunderabad)	IP & OP services as per CGHS tariff * Cashless facility shall be extended for regular employees. For pensioners, the amount will be collected at time of admission or during discharge.

General information:

- The empanelment shall be valid for a period of two years with immediate effect. In case you wish to sign a MoU, it is requested to submit the same for signatures.
- In case an employee/ their dependent avails in-patient services, they can make the complete payment (or) the University shall remit upto 90% of the bill estimate as medical advance, during the time of admission and the remaining amount shall be settled by the beneficiaries

themselves. However, no advance shall be admissible to pensioners/ their spouses and they shall make the total payment upfront at the time of discharge.

iii. In case of any clarification, the undersigned may be contacted over phone or email.


REGISTRAR

कुलसचिव / REGISTRAR
हैदराबाद विश्वविद्यालय
University of Hyderabad
हैदराबाद / Hyderabad - 500 046.

Copy to:

1. Chief Medical Officer i/c, Health Centre
2. OSD to VC

4679

हैदराबाद विश्वविद्यालय
आचार्य सी.आर. राव मार्ग
केंद्रीय विश्वविद्यालय डाक घर
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University of Hyderabad
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Dr. Devesh Nigam
Registrar

डॉ. देवेश निगम
कुलसचिव

सं संख्या Ref. No.: UH/REG/R-33/2024/24664

तिथी

Date: 17 January 2024

To
Mr. B. Sai Raj Singh,
Vice President – Business Development
Prathima Hospitals,
#26 & 27, Opp Arjun Theatre,
K.P.H.B Main Road, Kukatpally,
Hyderabad 500072.

Dear Sir,

Sub: Empanelment of your hospital for availing in-patient and out-patient treatment by the University's Staff & pensioners –reg.

Ref: 1. UoH letter dated 19.10.2023
2. Your letter / email dt. 09.11.2023

Kind attention is invited to the University's letter cited at (1) for empanelment of your hospital for availing in-patient / out-patient treatments by the University employees and their dependents & pensioners and their spouses and your consent for the same vide your letter / email dated 09.11.2023

In this regard, I am pleased to inform you that your hospital has been recognized by the University as a referral hospital as per the following tariffs:

Name of the Hospital	Tariffs / services applicable
Prathima Hospitals	IP & OP services as per CGHS 2014 NABH tariff Free ambulance pickup in case of any emergencies (within 10kms radius)

General information:

- The empanelment shall be valid for a period of two years with immediate effect. In case you wish to sign a MoU, it is requested to submit the same for signatures.
- In case an employee/ their dependent avails in-patient services, they can make the complete payment (or) the University shall remit upto 90% of the bill estimate as medical advance, during the time of admission and the remaining amount shall be settled by the beneficiaries themselves. However, no advance shall be admissible to pensioners/ their spouses and they shall make the total payment upfront at the time of discharge.

iii. In case of any clarification, the undersigned may be contacted over phone or email.

S. Nigam
17-1-21

REGISTRAR

कुलसचिव / REGISTRAR
हैदराबाद विश्वविद्यालय
University of Hyderabad
हैदराबाद / Hyderabad - 500 046.

Copy to:

1. Chief Medical Officer i/c, Health Centre
2. OSD to VC

4678

हैदराबाद विश्वविद्यालय
आचार्य सी.आर. राव मार्ग
केंद्रीय विश्वविद्यालय डाक घर
हैदराबाद 500 046



समृद्धि सृजति
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University of Hyderabad

Professor C.R. Rao Road

P.O. Central University

Hyderabad 500 046, Telangana,

India

Phone.: +91-40-2313 2100

Email: registrar@uohyd.ac.in,

Dr. Devesh Nigam

Registrar

डॉ. देवेश निगम

कुलसचिव

सं संख्या Ref. No.: UH/REG/R-33/2024/24064

तिथी

Date: 17 January 2024

To

Dr. R.V. Prabhakara Rao

Chief Executive Officer

Basavatarakam Indo-American Cancer Hospital & Research Institute

Road No. 10, Banjara hills,

Hyderabad -500034

Dear Sir,

Sub: Empanelment of your hospital for availing in-patient and out-patient treatment by the University's Staff & pensioners –reg.

Ref: 1. UoH letter dated 19.10.2023
2. Your letter / email dt. 31.10.2023

Kind attention is invited to the University's letter cited at (1) for empanelment of your hospital for availing in-patient / out-patient treatments by the University employees and their dependents & pensioners and their spouses and your consent for the same vide your letter / email dated 31.10.2023.

In this regard, I am pleased to inform you that your hospital has been recognized by the University as a referral hospital as per the following tariffs:

Name of the Hospital	Tariffs / services applicable
Basavatarakam Indo-American Cancer Hospital & Research Institute	Oncology services only as per CGHS 2014 NABH Oncology tariff Other services as per hospital tariff

General information:

- The empanelment shall be valid for a period of two years with immediate effect. In case you wish to sign a MoU, it is requested to submit the same for signatures.
- In case an employee/ their dependent avails in-patient services, they can make the complete payment (or) the University shall remit upto 90% of the bill estimate as medical advance, during the time of admission and the remaining amount shall be settled by the beneficiaries themselves. However, no advance shall be admissible to pensioners/ their spouses and they shall make the total payment upfront at the time of discharge.

iii. In case of any clarification, the undersigned may be contacted over phone or email.

A. Y. Ramani
17-1-24
REGISTRAR

कुलसचिव / REGISTRAR
हैदराबाद विश्वविद्यालय
University of Hyderabad
हैदराबाद / Hyderabad - 500 046.

Copy to:

1. Chief Medical Officer i/c, Health Centre
2. OSD to VC

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Hyderabad 500 046, Telangana,
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Email: registrar@uohyd.ac.in,
Dr. Devesh Nigam
Registrar

डॉ. देवेश निगम
कुलसचिव

सं संख्या Ref. No.: UH/REG/R-33/2024/24064

तिथी

Date: 17 January 2024

To
Mr. Gasper David
VP – Business Relations
PACE Hospitals
Plot No.23, Huda Techno Enclave,
Patrika Nagar, Madhapur,
Hyderabad - 500081

Dear Sir,

Sub: Empanelment of your hospital for availing in-patient and out-patient treatment by the University's Staff & pensioners –reg.

Ref: 1. UoH letter dated 19.10.2023
2. Your letter / email dt. 25.10.2023

Kind attention is invited to the University's letter cited at (1) for empanelment of your hospital for availing in-patient / out-patient treatments by the University employees and their dependents & pensioners and their spouses and your consent for the same vide your letter / email dated 25.10.2023.

In this regard, I am pleased to inform you that your hospital has been recognized by the University as a referral hospital as per the following tariffs:

Name of the Hospital	Tariffs / services applicable
PACE Hospitals	IP & OP services as per CGHS tariff

General information:

- The empanelment shall be valid for a period of two years with immediate effect. In case you wish to sign a MoU, it is requested to submit the same for signatures.
- In case an employee/ their dependent avails in-patient services, they can make the complete payment (or) the University shall remit upto 90% of the bill estimate as medical advance, during the time of admission and the remaining amount shall be settled by the beneficiaries themselves. However, no advance shall be admissible to pensioners/ their spouses and they shall make the total payment upfront at the time of discharge.

iii. In case of any clarification, the undersigned may be contacted over phone or email.

S. Nigam
17-1-24
REGISTRAR

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Copy to:

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Hyderabad 500 046, Telangana,
India

Phone.: +91-40-2313 2100
Email: registrar@uohyd.ac.in,

Dr. Devesh Nigam
Registrar

डॉ. देवेश निगम
कुलसचिव

सं संख्या Ref. No.: UH/REG/R-33/2024/24064

तिथी

Date: 17 January 2024

To
Mr. D. Dinesh
CEO
Medicare Super Speciality Hospital,
Near Pillar No. A 600, Plot No. 65 & 66,
Miyapur main road, Hyderabad - 500049

Dear Sir,

Sub: Empanelment of your hospital for availing in-patient and out-patient treatment by
the University's Staff & pensioners –reg.

Ref: Your letter / email dt. 14.07.2023

Kind attention is invited to your letter dated 14.07.2023 requesting for empanelment of
your hospital for availing in-patient / out-patient treatments by the University employees and
their dependents & pensioners and their spouses.

In this regard, I am pleased to inform you that your hospital has been recognized by the
University as a referral hospital as per the following tariffs:

Name of the Hospital	Tariffs / services applicable
Medicare Super Speciality Hospital	IP & OP services as per CGHS tariff

General information:

- The empanelment shall be valid for a period of two years with immediate effect. In case you wish to sign a MoU, it is requested to submit the same for signatures.
- In case an employee/ their dependent avails in-patient services, they can make the complete payment (or) the University shall remit upto 90% of the bill estimate as medical advance, during the time of admission and the remaining amount shall be settled by the beneficiaries themselves. However, no advance shall be admissible to pensioners/ their spouses and they shall make the total payment upfront at the time of discharge.

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हैदराबाद / Hyderabad - 500 046.

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हैदराबाद 500 046



4625
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Email: registrar@uohyd.ac.in,
Dr. Devesh Nigam
Registrar

डॉ. देवेश निगम
कुलसचिव

सं संख्या Ref. No.: UH/REG/R-33/2024/24064

तिथी

Date: 17 January 2024

To
Mr. DVS Somaraju
Executive Director
SLG Hospitals,
SLG Circle, No.306, Nizampet Raod, Bachupally,
Hyderabad-500090

Dear Sir,

Sub: Empanelment of your hospital for availing in-patient and out-patient treatment by
the University's Staff & pensioners –reg.

Ref: 1. UoH letter dated 19.10.2023
2. Your letter / email dt. 30.11.2023

Kind attention is invited to the University's letter cited at (1) for empanelment of your
hospital for availing in-patient / out-patient treatments by the University employees and their
dependents & pensioners and their spouses and your consent for the same vide your letter / email
dated 30.11.2023.

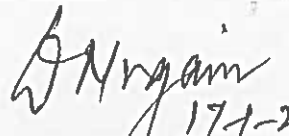
In this regard, I am pleased to inform you that your hospital has been recognized by the
University as a referral hospital as per the following tariffs:

Name of the Hospital	Tariffs / services applicable
SLG Hospitals	IP & OP services as per CGHS tariff

General information:

- The empanelment shall be valid for a period of two years with immediate effect. In
case you wish to sign a MoU, it is requested to submit the same for signatures.
- In case an employee/ their dependent avails in-patient services, they can make the
complete payment (or) the University shall remit upto 90% of the bill estimate as
medical advance, during the time of admission and the remaining amount shall be
settled by the beneficiaries themselves. However, no advance shall be admissible to
pensioners/ their spouses and they shall make the total payment upfront at the time of
discharge.

iii. In case of any clarification, the undersigned may be contacted over phone or email.


17-1-24
REGISTRAR
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हैदराबाद विश्वविद्यालय
University of Hyderabad
हैदराबाद / Hyderabad - 500 046.

Copy to:

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2. OSD to VC

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हैदराबाद 500 046



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Email: registrar@uohyd.ac.in,

डॉ. देवेश निगम
कुलसचिव

Dr. Devesh Nigam
Registrar

सं संख्या Ref. No.: UH/REG/R-33/2024/

तिथी

Date: 27 February 2024

To

The Sai Sanjeevini Hospitals
#11-08-99/4418
Narsimhapuri Colony, Kothapet,
Hyderabad - 500035

Dear Sir,

Sub: Empanelment of your hospital for availing in-patient and out-patient treatment by the University's Staff & pensioners –reg.

Ref: 1. UoH letter dated 19.10.2023
2. Your letter / email dt. 27.10.2023

Kind attention is invited to the University's letter cited at (1) for empanelment of your hospital for availing in-patient / out-patient treatments by the University employees and their dependents & pensioners and their spouses and your consent for the same vide your letter / email date 27.10.2023

In this regard, I am pleased to inform you that your hospital has been recognized by the University as a referral hospital as per the following tariffs:

Name of the Hospital	Tariffs / services applicable
To The Sai Sanjeevini Hospitals	IP & OP services as per CGHS 2014 NABH tariff 20% discount on hospital tariff for the Inpatient treatment / lab investigations which are not covered under CGHS 2014 rates - NABH

General information:

- The empanelment shall be valid for a period of two years with immediate effect. In case you wish to sign a MoU, it is requested to submit the same for signatures.
- In case an employee/ their dependent avails in-patient services, they can make the complete payment (or) the University shall remit upto 90% of the bill estimate as medical advance, during the time of admission and the remaining amount shall be settled by the beneficiaries themselves. However, no advance shall be admissible to pensioners/ their spouses and they shall make the total payment upfront at the time of discharge.

iii. In case of any clarification, the undersigned may be contacted over phone or email.

Copy to:

1. Chief Medical Officer i/c, Health Centre
2. OSD to VC

D. Hrgam
27-2-24
REGISTRAR

कुलसचिव / REGISTRAR
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University of Hyderabad
हैदराबाद / Hyderabad - 500 046.

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केंद्रीय विश्वविद्यालय डाक घर
हैदराबाद 500 046



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Dr. Devesh Nigam
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डॉ. देवेश निगम
कुलसचिव

सं संख्या Ref. No.: UH/REG/R-33/2024/

तिथी

Date: 27 February 2024

To
The PRK Hospitals
Gangaram, Chandanagar,
Hyderabad - 500050

Dear Sir,

Sub: Empanelment of your hospital for availing in-patient and out-patient treatment by the University's Staff & pensioners –reg.

Ref: 1. UoH letter dated 19.10.2023
2. Your letter / email dt. 09.11.2023

Kind attention is invited to the University's letter cited at (1) for empanelment of your hospital for availing in-patient / out-patient treatments by the University employees and their dependents & pensioners and their spouses and your consent for the same vide your letter / email date 09.11.2023

In this regard, I am pleased to inform you that your hospital has been recognized by the University as a referral hospital as per the following tariffs:

Name of the Hospital	Tariffs / services applicable
PRK Hospitals	IP & OP services as per CGHS 2014 NABH tariff Free ambulance with in 5kms. Radius of the hospital.

General information:

- The empanelment shall be valid for a period of two years with immediate effect. In case you wish to sign a MoU, it is requested to submit the same for signatures.
- In case an employee/ their dependent avails in-patient services, they can make the complete payment (or) the University shall remit upto 90% of the bill estimate as medical advance, during the time of admission and the remaining amount shall be settled by the beneficiaries themselves. However, no advance shall be admissible to pensioners/ their spouses and they shall make the total payment upfront at the time of discharge.

iii. In case of any clarification, the undersigned may be contacted over phone or email.

S. H. Gaim
27-2-24
REGISTRAR

Copy to:

1. Chief Medical Officer i/c, Health Centre
2. OSD to VC

कुलसचिव / REGISTRAR
हैदराबाद विश्वविद्यालय
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हैदराबाद 500 046



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Professor C.R. Rao Road
P.O. Central University
Hyderabad 500 046, Telangana,
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Phone.: +91-40-2313 2100
Email: registrar@uohyd.ac.in,

Dr. Devesh Nigam
Registrar

डॉ. देवेश निगम
कुलसचिव

सं संख्या Ref. No.: UH/REG/R-33/2024/ 24064

तिथी

Date: 17 January 2024

To
Mr. Rajesh Vairagare
GM – Corporate Relations
Wellness Hospitals
creditbilling@wellnesshospitals.co.in

Dear Sir,

Sub: Empanelment of your hospital for availing in-patient and out-patient treatment by the University's Staff & pensioners –reg.

Ref: 1. UoH letter dated 19.10.2023
2. Your letter / email dt. 24.10.2023

Kind attention is invited to the University's letter cited at (1) for empanelment of your hospital for availing in-patient / out-patient treatments by the University employees and their dependents & pensioners and their spouses and your consent for the same vide your letter / email dated 24.10.2023.

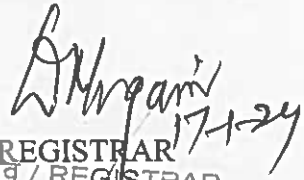
In this regard, I am pleased to inform you that your hospital has been recognized by the University as a referral hospital as per the following tariffs:

Name of the Hospital	Tariffs / services applicable
Wellness Hospitals Branches: Ameerpet, Hastinapuram & Sangareddy	IP & OP services as per CGHS tariff

General information:

- The empanelment shall be valid for a period of two years with immediate effect. In case you wish to sign a MoU, it is requested to submit the same for signatures.
- In case an employee/ their dependent avails in-patient services, they can make the complete payment (or) the University shall remit upto 90% of the bill estimate as medical advance, during the time of admission and the remaining amount shall be settled by the beneficiaries themselves. However, no advance shall be admissible to pensioners/ their spouses and they shall make the total payment upfront at the time of discharge.

iii. In case of any clarification, the undersigned may be contacted over phone or email.


REGISTRAR
कुलसचिव / REGISTRAR
हैदराबाद विश्वविद्यालय
University of Hyderabad
हैदराबाद / Hyderabad - 500 046.

Copy to:

1. Chief Medical Officer i/c, Health Centre
2. OSD to VC

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Email: registrar@uohyd.ac.in,

Dr. Devesh Nigam

Registrar

डॉ. देवेश निगम

कुलसचिव

सं संख्या Ref. No.: UH/REG/R-33/2024/

तिथी

Date: 17 January 2024

To

Mr. V. Satyanarayana

Vice- Chairman and Executive Director

Virinchi Hospitals

Road#1, Virinchi Circle, Banjara Hills,
Hyderabad -500034

Dear Sir,

Sub: Empanelment of your hospital for availing in-patient and out-patient treatment by the University's Staff & pensioners –reg.

Ref: 1. UoH letter dated 19.10.2023
2. Your letter / email dt. 28.12.2023

Kind attention is invited to the University's letter cited at (1) for empanelment of your hospital for availing in-patient / out-patient treatments by the University employees and their dependents & pensioners and their spouses and your consent for the same vide your letter / email dated 28.12.2023.

In this regard, I am pleased to inform you that your hospital has been recognized by the University as a referral hospital as per the following tariffs:

Name of the Hospital	Tariffs / services applicable
Virinchi Hospitals	IP & OP services as per CGHS tariff

General information:

- The empanelment shall be valid for a period of two years with immediate effect. In case you wish to sign a MoU, it is requested to submit the same for signatures.
- In case an employee/ their dependent avails in-patient services, they can make the complete payment (or) the University shall remit upto 90% of the bill estimate as medical advance, during the time of admission and the remaining amount shall be settled by the beneficiaries themselves. However, no advance shall be admissible to pensioners/ their spouses and they shall make the total payment upfront at the time of discharge.
- In case of any clarification, the undersigned may be contacted over phone or email.

Copy to:

- Chief Medical Officer i/c, Health Centre
- OSD to VC

17-1-24
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डॉ. देवेश निगम
कुलसचिव

सं संख्या Ref. No.: UH/REG/R-33/2024/

तिथी

Date: 27 February 2024

To

The Star Hospitals

#2-74, survey no.74,
Nanakramguda Village, financial dist,
Serlingampally Mandal, RR Dist, Hyderabad - 500008

Dear Sir,

Sub: Empanelment of your hospital for availing in-patient and out-patient treatment by the University's Staff & pensioners –reg.

Ref: 1. UoH letter dated 19.10.2023
2. Your letter / email dt. 25.01.2024

Kind attention is invited to the University's letter cited at (1) for empanelment of your hospital for availing in-patient / out-patient treatments by the University employees and their dependents & pensioners and their spouses and your consent for the same vide your letter / email date 25.01.2024

In this regard, I am pleased to inform you that your hospital has been recognized by the University as a referral hospital as per the following tariffs:

Name of the Hospital	Tariffs / services applicable
To Star Hospitals	As per NABH tariff

General information:

- The empanelment shall be valid for a period of two years with immediate effect. In case you wish to sign a MoU, it is requested to submit the same for signatures.
- In case an employee/ their dependent avails in-patient services, they can make the complete payment (or) the University shall remit upto 90% of the bill estimate as medical advance, during the time of admission and the remaining amount shall be settled by the beneficiaries themselves. However, no advance shall be admissible to pensioners/ their spouses and they shall make the total payment upfront at the time of discharge.

iii. In case of any clarification, the undersigned may be contacted over phone or email.


REGISTRAR

Copy to:

1. Chief Medical Officer i/c, Health Centre
2. OSD to VC

कुलसचिव / REGISTRAR
हैदराबाद विश्वविद्यालय
University of Hyderabad
हैदराबाद / Hyderabad - 500 046.

हैदराबाद विश्वविद्यालय
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डॉ. देवेश निगम
कुलसचिव

सं संख्या Ref. No.: UH/REG/R-33/2024/

तिथी

Date: 27 February 2024

To
Apollo Hospitals
All Branches in Hyderabad

Dear Sir,

Sub: Empanelment of your hospital for availing in-patient and out-patient treatment by the University's Staff & pensioners –reg.
Ref: 1. UoH letter dated 19.10.2023
2. Your letter / email dt. 04.01.2024

Kind attention is invited to the University's letter cited at (1) for empanelment of your hospital for availing in-patient / out-patient treatments by the University employees and their dependents & pensioners and their spouses and your consent for the same vide your letter / email date 04.01.2024

In this regard, I am pleased to inform you that your hospital has been recognized by the University as a referral hospital as per the following tariffs:

Name of the Hospital	Tariffs / services applicable
Apollo Hospitals All Branches in Hyderabad	(No CGHS tariff) * Apollo Hospitals Existing Tariff dated 2 nd Aug – 2023 * 20% discount on room rents * 20% discount on IP investigations (excluding Pharmacy and Implants) * 10% discount on all packages. * 15% discount on OP Investigations (Excluding CT & MRI) * Doctor consultation super spl 1200/- spl 900/-

General information:

- The empanelment shall be valid for a period of two years with immediate effect. In case you wish to sign a MoU, it is requested to submit the same for signatures.
- In case an employee/ their dependent avails in-patient services, they can make the complete payment (or) the University shall remit upto 90% of the bill estimate as medical advance, during the time of admission and the remaining amount shall be settled by the beneficiaries themselves. However, no advance shall be admissible to pensioners/ their spouses and they shall make the total payment upfront at the time of discharge.

iii. In case of any clarification, the undersigned may be contacted over phone or email.

Copy to:

1. Chief Medical Officer i/c, Health Centre
2. OSD to VC

S. Nigam
27-2-24

REGISTRAR

कुलसचिव / REGISTRAR
हैदराबाद विश्वविद्यालय
University of Hyderabad
हैदराबाद / Hyderabad - 500 046.

हैदराबाद विश्वविद्यालय
आचार्य सी.आर. राव मार्ग
केंद्रीय विश्वविद्यालय डाक घर
हैदराबाद 500 046



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University of Hyderabad
Professor C.R. Rao Road
P.O. Central University
Hyderabad 500 046, Telangana,
India

Phone.: +91-40-2313 2100
Email: registrar@uohyd.ac.in,

Dr. Devesh Nigam
Registrar

डॉ. देवेश निगम
कुलसचिव

सं संख्या Ref. No.: UH/REG/R-33/2024/24-064

तिथी

Date: 17 January 2024

To

Mr. Dinesh Kumar M
General Manager – Corporate Relations
American Oncology Institute,
1-100/1/CCH,
Nallagandla Village, Serilingampally Mandal,
Hyderabad – 500019

Dear Sir,

Sub: Empanelment of your hospital for availing in-patient and out-patient treatment by the University's Staff & pensioners –reg.

Ref: 1. UoH letter dated 19.10.2023
2. Your letter / email dt. 05.01.2024

Kind attention is invited to the University's letter cited at (1) for empanelment of your hospital for availing in-patient / out-patient treatments by the University employees and their dependents & pensioners and their spouses and your consent for the same vide your letter / email dated 05.01.2024.

In this regard, I am pleased to inform you that your hospital has been recognized by the University as a referral hospital as per the following tariffs:

Name of the Hospital	Tariffs / services applicable
American Oncology Institute	As per CGHS tariff on Oncology services

General information:

- The empanelment shall be valid for a period of two years with immediate effect. In case you wish to sign a MoU, it is requested to submit the same for signatures.
- In case an employee/ their dependent avails in-patient services, they can make the complete payment (or) the University shall remit upto 90% of the bill estimate as medical advance, during the time of admission and the remaining amount shall be settled by the beneficiaries themselves. However, no advance shall be admissible to pensioners/ their spouses and they shall make the total payment upfront at the time of discharge.

iii. In case of any clarification, the undersigned may be contacted over phone or email.

AMrgam
17-1-24
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कुलसचिव / REGISTRAR
हैदराबाद विश्वविद्यालय
University of Hyderabad
हैदराबाद / Hyderabad - 500 046.

Copy to:

1. Chief Medical Officer i/c, Health Centre
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Dr. Devesh Nigam
Registrar

डॉ. देवेश निगम
कुलसचिव

सं संख्या Ref. No.: UH/REG/R-33/2024/24064

तिथी

Date: 17 January 2024

To
Mr. Dinesh Kumar M
General Manager – Corporate Relations
Citizens Specialty Hospital
Nallagandla Village, Serilingampally,
Hyderabad 500019

Dear Sir,

Sub: Empanelment of your hospital for availing in-patient and out-patient treatment by the University's Staff & pensioners –reg.
Ref: 1. UoH letter dated 19.10.2023
2. Your letter / email dt. 05.01.2024

Kind attention is invited to the University's letter cited at (1) for empanelment of your hospital for availing in-patient / out-patient treatments by the University employees and their dependents & pensioners and their spouses and your consent for the same vide your letter / email dated 05.01.2024.

In this regard, I am pleased to inform you that your hospital has been recognized by the University as a referral hospital as per the following tariffs:

Name of the Hospital	Tariffs / services applicable
Citizens Specialty Hospital	1. GIPSA tariff on Gynaecology, General & Laparoscopic surgeries and ENT services 2. CGHS tariff on other specialties

General information:

- The empanelment shall be valid for a period of two years with immediate effect. In case you wish to sign a MoU, it is requested to submit the same for signatures.
- In case an employee/ their dependent avails in-patient services, they can make the complete payment (or) the University shall remit upto 90% of the bill estimate as medical advance, during the time of admission and the remaining amount shall be settled by the beneficiaries themselves. However, no advance shall be admissible to pensioners/ their spouses and they shall make the total payment upfront at the time of discharge.

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S. Nigam
17-1-24

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2. OSD to VC

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Registrar

डॉ. देवेश निगम
कुलसचिव

सं संख्या Ref. No.: UH/REG/R-33/2024/

तिथी

Date: 27 February 2024

To

MAA Hospitals

Branches: Balangar, KPHB,
Dilsukhnagar, Jubilee Hills,
Malkajgiri, Mehdiapatnam,
Somajiguda.

Dear Sir,

Sub: Empanelment of your hospital for availing in-patient and out-patient treatment by the University's Staff & pensioners –reg.

Ref: 1. UoH letter dated 19.10.2023
2. Your letter / email dt. 06.02.2024

Kind attention is invited to the University's letter cited at (1) for empanelment of your hospital for availing in-patient / out-patient treatments by the University employees and their dependents & pensioners and their spouses and your consent for the same vide your letter / email date 06.02.2024

In this regard, I am pleased to inform you that your hospital has been recognized by the University as a referral hospital as per the following tariffs:

Name of the Hospital	Tariffs / services applicable
To MAA Hospitals	As per CGHS NABH tariff

General information:

- The empanelment shall be valid for a period of two years with immediate effect. In case you wish to sign a MoU, it is requested to submit the same for signatures.
- In case an employee/ their dependent avails in-patient services, they can make the complete payment (or) the University shall remit upto 90% of the bill estimate as medical advance, during the time of admission and the remaining amount shall be settled by the beneficiaries themselves. However, no advance shall be admissible to pensioners/ their spouses and they shall make the total payment upfront at the time of discharge.

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Copy to:

1. Chief Medical Officer i/c, Health Centre
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Professor C.R. Rao Road
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Email: registrar@uohyd.ac.in,
Dr. Devesh Nigam
Registrar

संख्या

Ref. No.: UH/REG/R-33/2024/

तिथी

Date: 27 February 2024

To

Medicover Hospitals

All Branches

Dear Sir,

Sub: Empanelment of your hospital for availing in-patient and out-patient treatment by the University's Staff & pensioners –reg.

Ref: 1. UoH letter dated 19.10.2023

2. Your letter / email dt. 24.01.2024

Kind attention is invited to the University's letter cited at (1) for empanelment of your hospital for availing in-patient / out-patient treatments by the University employees and their dependents & pensioners and their spouses and your consent for the same vide your letter / email date 24.01.2024

In this regard, I am pleased to inform you that your hospital has been recognized by the University as a referral hospital as per the following tariffs:

Name of the Hospital	Tariffs / services applicable
To Medicover Hospitals	As per CGHS NABH tariff

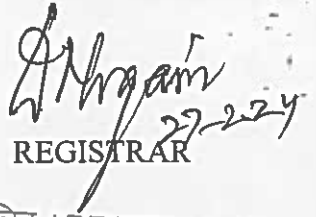
General information:

- The empanelment shall be valid for a period of two years with immediate effect. In case you wish to sign a MoU, it is requested to submit the same for signatures.
- In case an employee/ their dependent avails in-patient services, they can make the complete payment (or) the University shall remit upto 90% of the bill estimate as medical advance, during the time of admission and the remaining amount shall be settled by the beneficiaries themselves. However, no advance shall be admissible to pensioners/ their spouses and they shall make the total payment upfront at the time of discharge.

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Copy to:

1. Chief Medical Officer i/c, Health Centre
2. OSD to VC


27-2-24
REGISTRAR

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4662

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डॉ. देवेश निगम
कुलसचिव

सं संख्या

Ref. No.: UH/REG/R-33/2024/

तिथी

Date: 27 February 2024

To

Sri Sri Holistic Hospitals
Kondapur, Hyderabad.

Dear Sir,

Sub: Empanelment of your hospital for availing in-patient and out-patient treatment by the University's Staff & pensioners –reg.

Ref: 1. UoH letter dated 19.10.2023
2. Your letter / email dt. 13.02.2024

Kind attention is invited to the University's letter cited at (1) for empanelment of your hospital for availing in-patient / out-patient treatments by the University employees and their dependents & pensioners and their spouses and your consent for the same vide your letter / email date 13.02.2024

In this regard, I am pleased to inform you that your hospital has been recognized by the University as a referral hospital as per the following tariffs:

Name of the Hospital	Tariffs / services applicable
To Sri Sri Holistic Hospitals	As per CGHS NABH tariff

General information:

- The empanelment shall be valid for a period of two years with immediate effect. In case you wish to sign a MoU, it is requested to submit the same for signatures.
- In case an employee/ their dependent avails in-patient services, they can make the complete payment (or) the University shall remit upto 90% of the bill estimate as medical advance, during the time of admission and the remaining amount shall be settled by the beneficiaries themselves. However, no advance shall be admissible to pensioners/ their spouses and they shall make the total payment upfront at the time of discharge.

iii. In case of any clarification, the undersigned may be contacted over phone or email.

Copy to:

1. Chief Medical Officer i/c, Health Centre
2. OSD to VC

S. H. G. Saini
27-2-24
REGISTRAR

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हैदराबाद विश्वविद्यालय
University of Hyderabad
हैदराबाद / Hyderabad - 500 046.

हैदराबाद विश्वविद्यालय
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हैदराबाद 500 046



4661
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डॉ. देवेश निगम
कुलसचिव

सं संख्या Ref. No.: UH/REG/R-33/2024/

तिथी

Date: 27 February 2024

To
The AIG Hospitals
Mind space Road,
Gachibowli, Hyderabad - 500032

Dear Sir,

Sub: Empanelment of your hospital for availing in-patient and out-patient treatment by the University's Staff & pensioners –reg.
Ref: 1. UoH letter dated 19.10.2023
2. Your letter / email dt. 16.02.2024

Kind attention is invited to the University's letter cited at (1) for empanelment of your hospital for availing in-patient / out-patient treatments by the University employees and their dependents & pensioners and their spouses and your consent for the same vide your letter / email date 16.02.2024

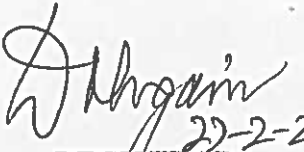
In this regard, I am pleased to inform you that your hospital has been recognized by the University as a referral hospital as per the following tariffs:

Name of the Hospital	Tariffs / services applicable
AIG Hospitals	As per CGHS NABH tariff for Cardiology, Ortho and Oncology Services only. Other specialization as per Hospital tariff

General information:

- The empanelment shall be valid for a period of two years with immediate effect. In case you wish to sign a MoU, it is requested to submit the same for signatures.
- In case an employee/ their dependent avails in-patient services, they can make the complete payment (or) the University shall remit upto 90% of the bill estimate as medical advance, during the time of admission and the remaining amount shall be settled by the beneficiaries themselves. However, no advance shall be admissible to pensioners/ their spouses and they shall make the total payment upfront at the time of discharge.

iii. In case of any clarification, the undersigned may be contacted over phone or email.


22-2-24
REGISTRAR

Copy to:

1. Chief Medical Officer i/c, Health Centre
2. OSD to VC

कुलसचिव / REGISTRAR
हैदराबाद विश्वविद्यालय
University of Hyderabad
हैदराबाद / Hyderabad - 500 046.

4660

हैदराबाद विश्वविद्यालय
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Dr. Devesh Nigam
Registrar

डॉ. देवेश निगम
कुलसचिव

सं संख्या Ref. No.: UH/REG/R-33/2024/ तिथी Date: 08 April 2024

To
The Omega Hospitals
MLA Colony Main Road,
Raod No. 12 Banjarahills Hyd
Near TRS Bhavan

Dear Sir,

Sub: Empanelment of your hospital for availing in-patient and out-patient treatment by the University's Staff & pensioners –reg.
Ref: 1. UoH letter dated 19.10.2023
2. Your letter / email dt. 28.03.2024

Kind attention is invited to the University's letter cited at (1) for empanelment of your hospital for availing in-patient / out-patient treatments by the University employees and their dependents & pensioners and their spouses and your consent for the same vide your letter / email date 28.03.2024

In this regard, I am pleased to inform you that your hospital has been recognized by the University as a referral hospital as per the following tariffs:

Name of the Hospital	Tariffs / services applicable
The Omega Hospitals	Banjara hills branch for Oncology Services CGHS tariff / Gachibowli for Multi-Super-specialty along with oncology CGHS tariff

General information:

- The empanelment shall be valid for a period of two years with immediate effect. In case you wish to sign a MoU, it is requested to submit the same for signatures.
- In case an employee/ their dependent avails in-patient services, they can make the complete payment (or) the University shall remit upto 90% of the bill estimate as medical advance, during the time of admission and the remaining amount shall be settled by the beneficiaries themselves. However, no advance shall be admissible to pensioners/ their spouses and they shall make the total payment upfront at the time of discharge.

iii. In case of any clarification, the undersigned may be contacted over phone or email.

S. Nigam
10-4-24

REGISTRAR

कुलसचिव / REGISTRAR

हेदराबाद विश्वविद्यालय

University of Hyderabad

हेदराबाद / Hyderabad - 500 046.

Copy to:

1. Chief Medical Officer i/c, Health Centre
2. OSD to VC

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Phone.: +91-40-2313 2100
Email: registrar@uohyd.ac.in,
Dr. Devesh Nigam
Registrar

सं संख्या Ref. No.: UH/REG/R-33/2024/ तिथी Date: 08 April 2024

To

The TX Hospital

Branches: Kachiguda, Uppal,
Banjara Hills Hyderabad

Dear Sir,

Sub: Empanelment of your hospital for availing in-patient and out-patient treatment by the University's Staff & pensioners –reg.

Ref: 1. UoH letter dated 19.10.2023
2. Your letter / email dt. 18.03.2024

Kind attention is invited to the University's letter cited at (1) for empanelment of your hospital for availing in-patient / out-patient treatments by the University employees and their dependents & pensioners and their spouses and your consent for the same vide your letter / email date 18.03.2024

In this regard, I am pleased to inform you that your hospital has been recognized by the University as a referral hospital as per the following tariffs:

Name of the Hospital	Tariffs / services applicable
The TX Hospital Branches: Kachiguda, Uppal, Banjara Hills Hyderabad	As per CGHS NABH tariff

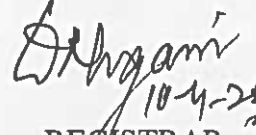
General information:

- The empanelment shall be valid for a period of two years with immediate effect. In case you wish to sign a MoU, it is requested to submit the same for signatures.
- In case an employee/ their dependent avails in-patient services, they can make the complete payment (or) the University shall remit upto 90% of the bill estimate as medical advance, during the time of admission and the remaining amount shall be settled by the beneficiaries themselves. However, no advance shall be admissible to pensioners/ their spouses and they shall make the total payment upfront at the time of discharge.

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Copy to:

1. Chief Medical Officer i/c, Health Centre
2. OSD to VC


10-4-24
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हैदराबाद / Hyderabad - 500 046.

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Dr. Devesh Nigam
Registrar

डॉ. देवेश निगम
कुलसचिव

सं संख्या

Ref. No.: UH/REG/R-33/2024/26655

तिथी

Date: 15 May 2024

To

KIMS Hospitals
Minister Road,
Secunderabad – 500003,

Dear Sir,

Sub: Empanelment of your hospital for availing in-patient and out-patient treatment by the University's Staff & pensioners –reg.

Ref: 1. UoH letter dated 19.10.2023
2. Your letter / email dt. 25.04.2024

Kind attention is invited to the University's letter cited at (1) for empanelment of your hospital for availing in-patient / out-patient treatments by the University employees and their dependents & pensioners and their spouses and your consent for the same vide your letter / email date 25.04.2024

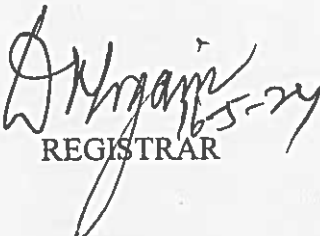
In this regard, I am pleased to inform you that your hospital has been recognized by the University as a referral hospital as per the following tariffs:

Name of the Hospital	Tariffs / services applicable
KIMS Hospitals	a. A discount of 15% on consultation and investigations for Outpatient services. b. A discount of 15% on Room Rents, investigation, Procedures on IP services. c. A discount of 10% on the package for in-patient services. d. the discounts are not applicable on pharmacy, medicines, stents, implants, consumable, blood products and outsourced investigations. e. All Govt imposed Tax's shall be applicable.

General information:

- The empanelment shall be valid for a period of two years with immediate effect. In case you wish to sign a MoU, it is requested to submit the same for signatures.
- In case an employee/ their dependent avails in-patient services, they can make the complete payment (or) the University shall remit upto 90% of the bill estimate as medical advance, during the time of admission and the remaining amount shall be settled by the beneficiaries themselves. However, no advance shall be admissible to pensioners/ their spouses and they shall make the total payment upfront at the time of discharge.

- iii. In case of any clarification, the undersigned may be contacted over phone or email.


REGISTRAR

Copy to:

1. Chief Medical Officer i/c, Health Centre
2. OSD to VC

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Phone.: +91-40-2313 2100

Email: registrar@uohyd.ac.in,

Dr. Devesh Nigam

Registrar

डॉ. देवेश निगम

कुलसचिव

सं संख्या

Ref. No.: UH/REG/R-33/2024/28269

तिथी

Date: 25 February 2024

To

Century Hospital
Banjar Hills,
Hyderabad - 500034

Dear Sir,

Sub: Empanelment of your hospital for availing in-patient and out-patient treatment by the University's Staff & pensioners –reg.

Ref: 1. UoH letter dated 19.10.2023
2. Your letter / email dt. 18.07.2024

Kind attention is invited to the University's letter cited at (1) for empanelment of your hospital for availing in-patient / out-patient treatments by the University employees and their dependents & pensioners and their spouses and your consent for the same vide your letter / email date 18.07.2024

In this regard, I am pleased to inform you that your hospital has been recognized by the University as a referral hospital as per the following tariffs:

Name of the Hospital	Tariffs / services applicable
To Century Hospital	Out-Patient services: 20% discount on hospital tariff excluding external diagnostics In-patient services: 15% discount on hospital tariff (Excluding packages, drugs, disposable and external diagnostics)

General information:

- The empanelment shall be valid for a period of two years with immediate effect. In case you wish to sign a MoU, it is requested to submit the same for signatures.
- In case an employee/ their dependent avails in-patient services, they can make the complete payment (or) the University shall remit upto 90% of the bill estimate as medical advance, during the time of admission and the remaining amount shall be settled by the beneficiaries themselves. However, no advance shall be admissible to pensioners/ their spouses and they shall make the total payment upfront at the time of discharge.

iii. In case of any clarification, the undersigned may be contacted over phone or email.

AN Mogan
25-7-24
REGISTRAR

Copy to:

1. Chief Medical Officer i/c, Health Centre

iv. 2. OSD to VC

हैदराबाद विश्वविद्यालय
आचार्य सी.आर. राव मार्ग
केंद्रीय विश्वविद्यालय डाक घर
हैदराबाद 500 046



University of Hyderabad
Professor C.R. Rao Road
P.O. Central University
Hyderabad 500 046, Telangana,
India

Phone.: +91-40-2313 2100

Email: registrar@uohyd.ac.in,

Dr. Devesh Nigam
Registrar

डॉ. देवेश निगम
कुलसचिव

सं संख्या Ref. No.: UH/REG/R-33/2024/14064

तिथी

Date: 17 January 2024

To

Mr. Phalguna Rao
Manager – Marketing
Smart Vision Eye Specialities Pvt. Ltd.
smartvisioneyecorporate@gmail.com

Dear Sir,

Sub: Empanelment of your hospital for availing in-patient and out-patient treatment by the University's Staff & pensioners –reg.

Ref: 1. UoH letter dated 19.10.2023
2. Your letter / email dt. 25.10.2023

Kind attention is invited to the University's letter cited at (1) for empanelment of your hospital for availing in-patient / out-patient treatments by the University employees and their dependents & pensioners and their spouses and your consent for the same vide your letter / email dated 25.10.2023.

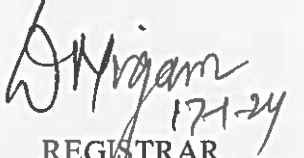
In this regard, I am pleased to inform you that your hospital has been recognized by the University as a referral hospital as per the following tariffs:

Name of the Hospital	Tariffs / services applicable
Smart Vision Eye Hospital	As per CGHS tariff
Branches: Srinagar Colony, Gachibowli, Kokapet, L.B. Nagar, Madinaguda & Secunderabad	

General information:

- The empanelment shall be valid for a period of two years with immediate effect. In case you wish to sign a MoU, it is requested to submit the same for signatures.
- In case an employee/ their dependent avails in-patient services, they can make the complete payment (or) the University shall remit upto 90% of the bill estimate as medical advance, during the time of admission and the remaining amount shall be settled by the beneficiaries themselves. However, no advance shall be admissible to pensioners/ their spouses and they shall make the total payment upfront at the time of discharge.

- iii. In case of any clarification, the undersigned may be contacted over phone or email.


17-24
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हैदराबाद / Hyderabad - 500 046.

Copy to:

1. Chief Medical Officer i/c, Health Centre
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डॉ. देवेश निगम
कुलसचिव

सं संख्या Ref. No.: UH/REG/R-33/2024/24664

तिथी

Date: 17 January 2024

To
Dr. A. Saibaba Goud
Medical Director
Saijyothi Eye Institute
Plot No. 185, Road No.1,
West Marredpally, Secunderabad - 500026

Dear Sir,

Sub: Empanelment of your hospital for availing in-patient and out-patient treatment by the University's Staff & pensioners –reg.

Ref: 1. UoH letter dated 19.10.2023
2. Your letter / email dt. 25.10.2023

Kind attention is invited to the University's letter cited at (1) for empanelment of your hospital for availing in-patient / out-patient treatments by the University employees and their dependents & pensioners and their spouses and your consent for the same vide your letter / email dated 25.10.2023.

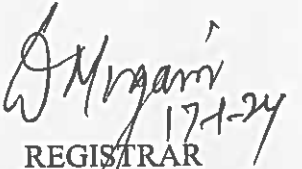
In this regard, I am pleased to inform you that your hospital has been recognized by the University as a referral hospital as per the following tariffs:

Name of the Hospital	Tariffs / services applicable
Saijyothi Eye Institute	As per CGHS tariff

General information:

- The empanelment shall be valid for a period of two years with immediate effect. In case you wish to sign a MoU, it is requested to submit the same for signatures.
- In case an employee/ their dependent avails in-patient services, they can make the complete payment (or) the University shall remit upto 90% of the bill estimate as medical advance, during the time of admission and the remaining amount shall be settled by the beneficiaries themselves. However, no advance shall be admissible to pensioners/ their spouses and they shall make the total payment upfront at the time of discharge.

- iii. In case of any clarification, the undersigned may be contacted over phone or email.


17-1-24
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University of Hyderabad
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Copy to:

1. Chief Medical Officer i/c, Health Centre
2. OSD to VC

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डॉ. देवेश निगम
कुलसचिव

सं संख्या Ref. No.: UH/REG/R-33/2024/24664

तिथी

Date: 17 January 2024

To

Dr. S. Srinivasa Sastry
Medical Superintendent
Sree Netralaya Eye Hospitals
#11-9-1, Vimal Complex, Opp. Bus Stop,
Kothapet, Dilsukhanagar,
Hyderabad – 500035

Dear Sir,

Sub: Empanelment of your hospital for availing in-patient and out-patient treatment by the University's Staff & pensioners –reg.

Ref: 1. UoH letter dated 19.10.2023
2. Your letter / email dt. 25.10.2023

Kind attention is invited to the University's letter cited at (1) for empanelment of your hospital for availing in-patient / out-patient treatments by the University employees and their dependents & pensioners and their spouses and your consent for the same vide your letter / email dated 25.10.2023.

In this regard, I am pleased to inform you that your hospital has been recognized by the University as a referral hospital as per the following tariffs:

Name of the Hospital	Tariffs / services applicable
Sree Netralaya Eye Hospitals	As per CGHS tariff

General information:

- The empanelment shall be valid for a period of two years with immediate effect. In case you wish to sign a MoU, it is requested to submit the same for signatures.
- In case an employee/ their dependent avails in-patient services, they can make the complete payment (or) the University shall remit upto 90% of the bill estimate as medical advance, during the time of admission and the remaining amount shall be settled by the beneficiaries themselves. However, no advance shall be admissible to pensioners/ their spouses and they shall make the total payment upfront at the time of discharge.

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AMrgam
17-1-24
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कुलसचिव

सं संख्या Ref. No.: UH/REG/R-33/2024/

तिथी

Date: 27 February 2024

To

Neovision Eye Care

Main Road Habsiguda Hyderabad – 500007

Dear Sir,

Sub: Empanelment of your hospital for availing in-patient and out-patient treatment by the University's Staff & pensioners –reg.

Ref: 1. UoH letter dated 19.10.2023
2. Your letter / email dt. 23.10.2023

Kind attention is invited to the University's letter cited at (1) for empanelment of your hospital for availing in-patient / out-patient treatments by the University employees and their dependents & pensioners and their spouses and your consent for the same vide your letter / email date 23.10.2023

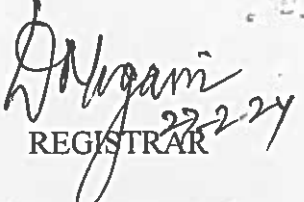
In this regard, I am pleased to inform you that your hospital has been recognized by the University as a referral hospital as per the following tariffs:

Name of the Hospital	Tariffs / services applicable
To The Neovision Eye Care	IP & OP services as per CGHS NABH tariff

General information:

- The empanelment shall be valid for a period of two years with immediate effect. In case you wish to sign a MoU, it is requested to submit the same for signatures.
- In case an employee/ their dependent avails in-patient services, they can make the complete payment (or) the University shall remit upto 90% of the bill estimate as medical advance, during the time of admission and the remaining amount shall be settled by the beneficiaries themselves. However, no advance shall be admissible to pensioners/ their spouses and they shall make the total payment upfront at the time of discharge.

iii. In case of any clarification, the undersigned may be contacted over phone or email.


REGISTRAR

Copy to:

1. Chief Medical Officer i/c, Health Centre
2. OSD to VC

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हैदराबाद 500 046



4652
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Professor C.R. Rao Road
P.O. Central University
Hyderabad 500 046, Telangana,
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Phone.: +91-40-2313 2100

Email: registrar@uohyd.ac.in,

Dr. Devesh Nigam
Registrar

डॉ. देवेश निगम
कुलसचिव

सं संख्या Ref. No.: UH/REG/R-33/2024/24064

तिथी

Date: 17 January 2024

To
Mr. S. Vikram
Empanelment Executive
SOLIS Eyecare Hospitals,
Plot No. 13, SVK Towers,
Kushaiguda Main Road, ECIL X Road
Hyderabad - 500062

Dear Sir,

Sub: Empanelment of your hospital for availing in-patient and out-patient treatment by the University's Staff & pensioners – reg.

Ref: 1. UoH letter dated 19.10.2023
2. Your letter / email dt. 27.10.2023

Kind attention is invited to the University's letter cited at (1) for empanelment of your hospital for availing in-patient / out-patient treatments by the University employees and their dependents & pensioners and their spouses and your consent for the same vide your letter / email dated 27.10.2023.

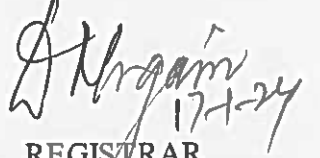
In this regard, I am pleased to inform you that your hospital has been recognized by the University as a referral hospital as per the following tariffs:

Name of the Hospital	Tariffs / services applicable
SOLIS Eyecare Hospitals – ECIL, Sainikpuri, Malkajgiri	As per CGHS tariff

General information:

- The empanelment shall be valid for a period of two years with immediate effect. In case you wish to sign a MoU, it is requested to submit the same for signatures.
- In case an employee/ their dependent avails in-patient services, they can make the complete payment (or) the University shall remit upto 90% of the bill estimate as medical advance, during the time of admission and the remaining amount shall be settled by the beneficiaries themselves. However, no advance shall be admissible to pensioners/ their spouses and they shall make the total payment upfront at the time of discharge.

- iii. In case of any clarification, the undersigned may be contacted over phone or email.


17-1-24
REGISTRAR
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हैदराबाद विश्वविद्यालय
University of Hyderabad
हैदराबाद / Hyderabad - 500 046.

Copy to:

1. Chief Medical Officer i/c, Health Centre
2. OSD to VC

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हैदराबाद विश्वविद्यालय
आचार्य सी.आर. राव मार्ग
केंद्रीय विश्वविद्यालय डाक घर
हैदराबाद 500 046



University of Hyderabad
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P.O. Central University
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Registrar

डॉ. देवेश निगम
कुलसचिव

सं संख्या Ref. No.: UH/REG/R-33/2024/

तिथी

Date: 27 February 2024

To
The Maxivision Eye hospital
All Branches

Dear Sir,

Sub: Empanelment of your hospital for availing in-patient and out-patient treatment by the University's Staff & pensioners –reg.

Ref: 1. UoH letter dated 19.10.2023
2. Your letter / email dt. 24.10.2023

Kind attention is invited to the University's letter cited at (1) for empanelment of your hospital for availing in-patient / out-patient treatments by the University employees and their dependents & pensioners and their spouses and your consent for the same vide your letter / email date 24.10.2023

In this regard, I am pleased to inform you that your hospital has been recognized by the University as a referral hospital as per the following tariffs:

Name of the Hospital	Tariffs / services applicable
To The Maxivision Eye hospital	As per CGHS NABH tariff

General information:

- The empanelment shall be valid for a period of two years with immediate effect. In case you wish to sign a MoU, it is requested to submit the same for signatures.
- In case an employee/ their dependent avails in-patient services, they can make the complete payment (or) the University shall remit upto 90% of the bill estimate as medical advance, during the time of admission and the remaining amount shall be settled by the beneficiaries themselves. However, no advance shall be admissible to pensioners/ their spouses and they shall make the total payment upfront at the time of discharge.

iii. In case of any clarification, the undersigned may be contacted over phone or email.

A. H. G. M.
27-2-24
REGISTRAR

Copy to:

1. Chief Medical Officer i/c, Health Centre
2. OSD to VC

कुलसचिव / REGISTRAR
हैदराबाद विश्वविद्यालय
University of Hyderabad
हैदराबाद / Hyderabad - 500 046.

हैदराबाद विश्वविद्यालय
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डॉ. देवेश निगम

कुलसचिव

सं संख्या Ref. No.: UH/REG/R-33/2024/

तिथी

Date: 27 February 2024

To

Dr. Agarwals eye Hospitals

All Branches

Dear Sir,

Sub: Empanelment of your hospital for availing in-patient and out-patient treatment by the University's Staff & pensioners –reg.

Ref: 1. UoH letter dated 19.10.2023
2. Your letter / email dt. 09.02.2024

Kind attention is invited to the University's letter cited at (1) for empanelment of your hospital for availing in-patient / out-patient treatments by the University employees and their dependents & pensioners and their spouses and your consent for the same vide your letter / email date 09.02.2024

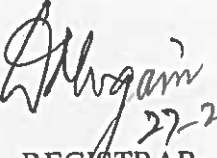
In this regard, I am pleased to inform you that your hospital has been recognized by the University as a referral hospital as per the following tariffs:

Name of the Hospital	Tariffs / services applicable
To Dr. Agarwals eye Hospitals	As per CGHS tariff

General information:

- The empanelment shall be valid for a period of two years with immediate effect. In case you wish to sign a MoU, it is requested to submit the same for signatures.
- In case an employee/ their dependent avails in-patient services, they can make the complete payment (or) the University shall remit upto 90% of the bill estimate as medical advance, during the time of admission and the remaining amount shall be settled by the beneficiaries themselves. However, no advance shall be admissible to pensioners/ their spouses and they shall make the total payment upfront at the time of discharge.

iii. In case of any clarification, the undersigned may be contacted over phone or email.


27-2-24
REGISTRAR

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1. Chief Medical Officer i/c, Health Centre
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हैदराबाद विश्वविद्यालय
University of Hyderabad
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Dr. Devesh Nigam
Registrar

डॉ. देवेश निगम
कुलसचिव

सं संख्या Ref. No.: UH/REG/R-33/2024/26684 तिथी Date: 15 May 2024

To

VASAN eye care

Door No. 8-1-5/7, Janak Plaza, OPP,
Clock Tower, Secunderabad, Telangana – 500003.

Dear Sir,

Sub: Empanelment of your hospital for availing in-patient and out-patient treatment by the University's Staff & pensioners –reg.

Ref: 1. UoH letter dated 19.10.2023
2. Your letter / email dt. 08.05.2024

Kind attention is invited to the University's letter cited at (1) for empanelment of your hospital for availing in-patient / out-patient treatments by the University employees and their dependents & pensioners and their spouses and your consent for the same vide your letter / email date 08.05.2024

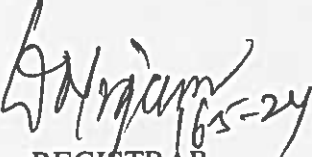
In this regard, I am pleased to inform you that your hospital has been recognized by the University as a referral hospital as per the following tariffs:

Name of the Hospital	Tariffs / services applicable
To VASAN eye care	As per CGHS tariff

General information:

- The empanelment shall be valid for a period of two years with immediate effect. In case you wish to sign a MoU, it is requested to submit the same for signatures.
- In case an employee/ their dependent avails in-patient services, they can make the complete payment (or) the University shall remit upto 90% of the bill estimate as medical advance, during the time of admission and the remaining amount shall be settled by the beneficiaries themselves. However, no advance shall be admissible to pensioners/ their spouses and they shall make the total payment upfront at the time of discharge.

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REGISTRAR

Copy to:

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Hyderabad 500 046, Telangana,
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Dr. Devesh Nigam
Registrar

डॉ. देवेश निगम
कुलसचिव

सं संख्या Ref. No.: UH/REG/R-33/2024/24064

तिथी

Date: 17 January 2024

To
Dr. Fouzia Sultana
Anu's Dental Hospital
RTC X Roads, Chikkadpally
Hyderabad - 500020

Dear Sir,

Sub: Empanelment of your hospital for availing in-patient and out-patient treatment by the University's Staff & pensioners –reg.
Ref: 1. UoH letter dated 19.10.2023
2. Your letter / email dt. 24.10.2023

Kind attention is invited to the University's letter cited at (1) for empanelment of your hospital for availing in-patient / out-patient treatments by the University employees and their dependents & pensioners and their spouses and your consent for the same vide your letter / email dated 24.10.2023.

In this regard, I am pleased to inform you that your hospital has been recognized by the University as a referral hospital as per the following tariffs:

Name of the Hospital	Tariffs / services applicable
Anu's Dental Hospital	As per CGHS tariff

General information:

- The empanelment shall be valid for a period of two years with immediate effect. In case you wish to sign a MoU, it is requested to submit the same for signatures.
- In case an employee/ their dependent avails in-patient services, they can make the complete payment (or) the University shall remit upto 90% of the bill estimate as medical advance, during the time of admission and the remaining amount shall be settled by the beneficiaries themselves. However, no advance shall be admissible to pensioners/ their spouses and they shall make the total payment upfront at the time of discharge.

iii. In case of any clarification, the undersigned may be contacted over phone or email.

[Handwritten Signature]
17-1-24

REGISTRAR

कुलसचिव / REGISTRAR
हैदराबाद विश्वविद्यालय
University of Hyderabad
हैदराबाद / Hyderabad - 500 046.

Copy to:

1. Chief Medical Officer i/c, Health Centre
2. OSD to VC

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आचार्य सी.आर. राव मार्ग

केंद्रीय विश्वविद्यालय डाक घर

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Email: registrar@uohyd.ac.in,

Dr. Devesh Nigam

Registrar

सं संख्या

Ref. No.: UH/REG/R-33/2024/

तिथी

Date: 27 February 2024

To

Dr. Shiva Nagini Yalavarthi

Multi Speciality Dental Clinic

Opp. Gem Motor service Centrer,

Raghavendra Colony, Kondapur,

Hyderabad - 500084

Dear Sir,

Sub: Empanelment of your hospital for availing in-patient and out-patient treatment by the University's Staff & pensioners –reg.

Ref: 1. UoH letter dated 19.10.2023
2. Your letter / email dt. 15.02.2024

Kind attention is invited to the University's letter cited at (1) for empanelment of your hospital for availing in-patient / out-patient treatments by the University employees and their dependents & pensioners and their spouses and your consent for the same vide your letter / email date 15.02.2024

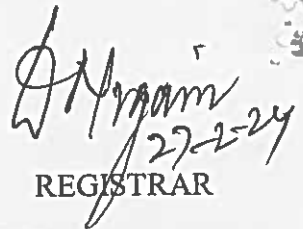
In this regard, I am pleased to inform you that your hospital has been recognized by the University as a referral hospital as per the following tariffs:

Name of the Hospital	Tariffs / services applicable
To Dr. Shiva Nagini Yalavarthi Multi Speciality Dental Clinic	CGHS tariff for CGHS procedures and 50% discount on hospital tariff for Non-CGHS procedures.

General information:

- The empanelment shall be valid for a period of two years with immediate effect. In case you wish to sign a MoU, it is requested to submit the same for signatures.
- In case an employee/ their dependent avails in-patient services, they can make the complete payment (or) the University shall remit upto 90% of the bill estimate as medical advance, during the time of admission and the remaining amount shall be settled by the beneficiaries themselves. However, no advance shall be admissible to pensioners/ their spouses and they shall make the total payment upfront at the time of discharge.

iii. In case of any clarification, the undersigned may be contacted over phone or email.


27-2-24
REGISTRAR

Copy to:

1. Chief Medical Officer i/c, Health Centre
2. OSD to VC

कुलसचिव / REGISTRAR
हैदराबाद विश्वविद्यालय
University of Hyderabad
हैदराबाद / Hyderabad - 500 046.

H6H6

हैदराबाद विश्वविद्यालय

आचार्य सी.आर. राव मार्ग

केंद्रीय विश्वविद्यालय डाक घर

हैदराबाद 500 046

डॉ. देवेश निगम

कुलसचिव



University of Hyderabad

Professor C.R. Rao Road

P.O. Central University

Hyderabad 500 046, Telangana,

India

Phone.: +91-40-2313 2100

Email: registrar@uohyd.ac.in,

Dr. Devesh Nigam

Registrar

सं संख्या Ref. No.: UH/REG/R-33/2024/

तिथी

Date: 08 April 2024

To

The AARTHI Scans & Labs

(Diagnostic Centre)

All branches

Dear Sir,

Sub: Empanelment of your hospital for availing in-patient and out-patient treatment by the University's Staff & pensioners –reg.

Ref: 1. UoH letter dated 19.10.2023
2. Your letter / email dt. 19.03.2024

Kind attention is invited to the University's letter cited at (1) for empanelment of your hospital for availing in-patient / out-patient treatments by the University employees and their dependents & pensioners and their spouses and your consent for the same vide your letter / email date 19.03.2024

In this regard, I am pleased to inform you that your hospital has been recognized by the University as a referral hospital as per the following tariffs:

Name of the Hospital	Tariffs / services applicable
To The AARTHI Scans & Labs (Diagnostic Centre)	As per CGHS tariff

General information:

- The empanelment shall be valid for a period of two years with immediate effect. In case you wish to sign a MoU, it is requested to submit the same for signatures.
- In case an employee/ their dependent avails in-patient services, they can make the complete payment (or) the University shall remit upto 90% of the bill estimate as medical advance, during the time of admission and the remaining amount shall be settled by the beneficiaries themselves. However, no advance shall be admissible to pensioners/ their spouses and they shall make the total payment upfront at the time of discharge.

iii. In case of any clarification, the undersigned may be contacted over phone or email.

Copy to:

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2. OSD to VC

S. Nigam
10-4-24
REGISTRAR
कुलसचिव / REGISTRAR
हैदराबाद विश्वविद्यालय
University of Hyderabad
हैदराबाद / Hyderabad - 500 046.

H645

हैदराबाद विश्वविद्यालय
आचार्य सी.आर. राव मार्ग
केंद्रीय विश्वविद्यालय डाक घर
हैदराबाद 500 046



University of Hyderabad
Professor C.R. Rao Road
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Phone.: +91-40-2313 2100

Email: registrar@uohyd.ac.in,

Dr. Devesh Nigam
Registrar

डॉ. देवेश निगम
कुलसचिव

सं संख्या Ref. No.: UH/REG/R-33/2024/

तिथी

Date: 27 February 2024

To

Sri Visista Super Speciality Ayurveda Somajiguda,
Saroor Nagar, Hyderabad

Dear Sir,

Sub: Empanelment of your hospital for availing in-patient and out-patient treatment by the University's Staff & pensioners –reg.

Ref: 1. UoH letter dated 19.10.2023
2. Your letter / email dt. 20.02.2024

Kind attention is invited to the University's letter cited at (1) for empanelment of your hospital for availing in-patient / out-patient treatments by the University employees and their dependents & pensioners and their spouses and your consent for the same vide your letter / email date 20.02.2024

In this regard, I am pleased to inform you that your hospital has been recognized by the University as a referral hospital as per the following tariffs:

Name of the Hospital	Tariffs / services applicable
To Sri Visista Super Speciality Ayurveda	As per CGHS NABH tariff (Ayurveda)

General information:

- The empanelment shall be valid for a period of two years with immediate effect. In case you wish to sign a MoU, it is requested to submit the same for signatures.
- In case an employee/ their dependent avails in-patient services, they can make the complete payment (or) the University shall remit upto 90% of the bill estimate as medical advance, during the time of admission and the remaining amount shall be settled by the beneficiaries themselves. However, no advance shall be admissible to pensioners/ their spouses and they shall make the total payment upfront at the time of discharge.

iii. In case of any clarification, the undersigned may be contacted over phone or email.

S. Mrgam
27-2-24
REGISTRAR

Copy to:

1. Chief Medical Officer i/c, Health Centre
2. OSD to VC

कुलसचिव / REGISTRAR
हैदराबाद विश्वविद्यालय
University of Hyderabad
हैदराबाद / Hyderabad - 500 046.