

ANNEXURE I

List of Expenses Generally Excluded ('Non-admissible Expenses') in Hospitalisation Policy

GUIDELINES ON STANDARDISATION IN HEALTH INSURANCE - IRDA CIRCULAR No IRDA/HLT/CIR/036/02/2013 DATED 20.02.2013

| S.No. | Items | Remarks |
|---|---|---|
| A Toiletries/ Cosmetics/ Personal Comfort or Convenience Items | | |
| 1 | Hair Removing Cream | Not Payable |
| 2 | Baby Charges (unless specified/indicated) | Not Payable |
| 3 | Baby Food | Not Payable |
| 4 | Baby Utilities Charges | Not Payable |
| 5 | Baby Set | Not Payable |
| 6 | Baby Bottles | Not Payable |
| 7 | Brush | Not Payable |
| 8 | Cosy Towel | Not Payable |
| 9 | Hand Wash | Not Payable |
| 10 | Moisturiser Paste Brush | Not Payable |
| 11 | Powder | Not Payable |
| 12 | Razor | Payable |
| 13 | Shoe Cover | Not Payable |
| 14 | Beauty Services | Not Payable |
| 15 | Belts/ Braces | Essential and Should be Paid at least Specifically for Cases who have undergone surgery of Thoracic or Lumbar Spine. |
| 16 | Buds | Not Payable |
| 17 | Barber Charges | Not Payable |
| 18 | Caps | Not Payable |
| 19 | Cold Pack/Hot Pack | Not Payable |
| 20 | Carry Bags | Not Payable |
| 21 | Cradle Charges | Not Payable |
| 22 | Comb | Not Payable |
| 23 | Disposable Razor Charges (For Site Preparations) | Payable |
| 24 | Eau-De-Cologne / Room Freshners | Not Payable |
| 25 | Eye Pad | Not Payable |
| 26 | Eye Sheild | Not Payable |
| 27 | Eye Sheild | Not Payable |
| 28 | Email / Internet Charges | Not Payable |
| 29 | Food Charges (other than Patient's Diet Provided by Hospital) | Not Payable |
| 30 | Foot Cover | Not Payable |
| 31 | Gown | Not Payable |
| 32 | Leggings | Essential in Bariatric and Varicose Vein Surgery and may be considered for at least these conditions where Surgery itself is Payable. |
| 33 | Laundry Charges | Not Payable |
| 34 | Mineral Water | Not Payable |
| 35 | Oil Charges | Not Payable |
| 36 | Sanitary Pad | Not Payable |
| 37 | Slippers | Not Payable |
| 38 | Telephone Charges | Not Payable |
| 39 | Tissue Paper | Not Payable |
| 40 | Tooth Paste | Not Payable |
| 41 | Tooth Brush | Not Payable |
| 42 | Guest Services | Not Payable |
| 43 | Bed Pan | Not Payable |
| 44 | Bed Under Pad Charges | Not Payable |
| 45 | Camera Cover | Not Payable |
| 46 | Cliniplast | Not Payable |
| 47 | Crepe Bandage | Not Payable/ Payable by the Patient |
| 48 | Curapore | Not Payable |
| 49 | Diaper Of Any Type | Not Payable |
| 50 | DVD, CD Charges | Not Payable(However if CD is specifically sought by Insurer/TPA then Payable) |
| 51 | Eyelet Collar | Not Payable |
| 52 | Face Mask | Not Payable |
| 53 | Flexi Mask | Not Payable |
| 54 | Gause Soft | Not Payable |
| 55 | Gauze | Not Payable |
| 56 | Hand Holder | Not Payable |
| 57 | Hansaplast/ Adhesive Bandages | Not Payable |
| 58 | Infant Food | Not Payable |
| 59 | Slings | Reasonable costs for one sling in case of Upper Arm Fractures may be considered |
| B Items Specifically Excluded in Policies | | |
| 59 | Weight Control Programs/ Supplies/ Services | Exclusion in Policy unless otherwise specified |
| 60 | Cost Of Spectacles/ Contact Lenses/ Hearing Aids Etc., | Exclusion in Policy unless otherwise specified |
| 61 | Dental Treatment Expenses that do not require Hospitalisation | Exclusion in Policy unless otherwise specified |
| 62 | Hormone Replacement Therapy | Exclusion in Policy unless otherwise specified |
| 63 | Home Visit Charges | Exclusion in Policy unless otherwise specified |
| 64 | Infertility/ Subfertility/ Assisted Conception Procedure | Exclusion in Policy unless otherwise specified |

| S.No. | Items | Remarks |
|---|---|---|
| 65 | Obesity (including Morbid Obesity) Treatment if Exclusion in Policy | Excluded in Policy unless otherwise specified |
| 66 | Psychiatric & Psychosomatic Disorders | Exclusion in Policy unless otherwise specified |
| 67 | Corrective Surgery for Refractive Error | Exclusion in Policy unless otherwise specified |
| 68 | Treatment of Sexually Transmitted Diseases | Exclusion in Policy unless otherwise specified |
| 69 | Donor Screening Charges | Exclusion in Policy unless otherwise specified |
| 70 | Admission/Registration Charges | Exclusion in Policy unless otherwise specified |
| 71 | Hospitalisation for Evaluation/ Diagnostic Purpose | Exclusion in Policy unless otherwise specified |
| 72 | Expenses for Investigation/ Treatment irrelevant to the Disease for which admitted or diagnosed | Exclusion in Policy not payable unless otherwise specified |
| 73 | Any Expenses when the Patient is diagnosed Retro Virus+or suffering from /HIV/ Aids etc is detected/ directly or indirectly | Not Payable as per HIV/ with AIDS Exclusion |
| 74 | Stem Cell Implantation/ Surgery & Storage | Not Payable except Bone Marrow Transplantation where covered by Policy |
| C Items Which form Part of Hospital Services where Separate Consumables are not Payable but the Service is | | |
| 75 | Ward and Theatre Booking Charges | Payable Under OT Charges, Not Payable Separately |
| 76 | Arthroscopy & Endoscopy Instruments | Rental Charged by the Hospital Payable. Purchase of Instruments Not Payable. |
| 77 | Microscope Cover | Payable Under OT Charges, Not Payable Separately |
| 78 | Surgical Blades, Harmonic Scalpel, Shaver | Payable Under OT Charges, Not Payable Separately |
| 79 | Surgical Drill | Payable Under OT Charges, Not Payable Separately |
| 80 | Eye Kit | Payable Under OT Charges, Not Payable Separately |
| 81 | Eye Drape | Payable Under OT Charges, Not Payable Separately |
| 82 | X-Ray Film | Payable Under Radiology Charges, Not as Consumable |
| 83 | Sputum Cup | Payable Under Investigation Charges, Not as Consumable |
| 84 | Boyles Apparatus Charges | Part of OT Charges, Not Separately |
| 85 | Blood Grouping and Cross Matching of Donors Samples | Part of Cost of Blood, Not Payable |
| 86 | Antiseptic & Disinfectant Lotions | Not Payable-Part of Dressing Charges |
| 87 | Band Aids, Bandages, Sterile Injections, Needles, Syringes | Not Payable - Part of Dressing Charges |
| 88 | Cotton | Not Payable-Part of Dressing Charges |
| 89 | Cotton Bandage | Not Payable-Part of Dressing Charges |
| 90 | Micropore/ Surgical Tape | Not Payable-payable by the Patient when Prescribed, otherwise included as Dressing Charges |
| 91 | Blade | Not Payable |
| 92 | Apron | Not Payable -Part of Hospital Services/Disposable Linen to be Part of OT/ICU Charges |
| 93 | Torniquet | Not Payable (service is charged by Hospitals, Consumables cannot be separately charged) |
| 94 | Orthobundle, Gynaec Bundle | Part of Dressing Charges |
| 95 | Urine Container | Not Payable |
| D Elements of Room Charge | | |
| 96 | Luxury Tax | Policy Exclusion - Not Payable. If there is no Policy Exclusion, then Actual Tax Levied by Government is Payable - Part of Room Charge for Sub Limits |
| 97 | HVAC | Part of Room Charge |
| 98 | House Keeping Charges | Not Payable Separately |
| 99 | Service Charges where Nursing Charge also charged | Part of Room Charge |
| 100 | Television & Air Conditioner Charges | Not Payable Separately |
| 101 | Surcharges | Payable Under Room Charges Not if separately levied |

| S.No. | Items | Remarks |
|---|---|---|
| 102 | Attendant Charges | Not Payable Separately Not Payable - |
| 103 | IM/ IV Injection Charges | Part of Room Charges Part of Nursing Charges, Not Payable |
| 104 | Clean Sheet | Part of Laundry/housekeeping Not Payable Separately |
| 105 | Extra Diet of Patient(other than that which forms part of Bed Charge) | Not Payable. Patient Diet Provided by Hospital is Payable |
| 106 | Blanket/Warmer Blanket | Not Payable- Part of Room Charges |
| E Administrative or Non-medical Charges | | |
| 107 | Admission Kit | Not Payable |
| 108 | Birth Certificate | Not Payable |
| 109 | Blood Reservation Charges and Ante Natal Booking Charges | Not Payable |
| 110 | Certificate Charges | Not Payable |
| 111 | Courier Charges | Not Payable |
| 112 | Conveyance Charges | Not Payable |
| 113 | Diabetic Chart Charges | Not Payable |
| 114 | Documentation Charges/ Administrative Expenses | Not Payable |
| 115 | Discharge Procedure Charges | Not Payable |
| 116 | Daily Chart Charges | Not Payable |
| 117 | Entrance Pass / Visitors Pass Charge | Not Payable |
| 118 | Expenses Related to Prescription on Discharge | To be Claimed by Patient under Post -Hospitalisation where admissible |
| 119 | File Opening Charges | Not Payable |
| 120 | Incidental Expenses / Misc. Charges (not Explained) | Not Payable |
| 121 | Medical Certificate | Not Payable |
| 122 | Maintenance Charges | Not Payable |
| 123 | Medical Records | Not Payable |
| 124 | Preparation Charges | Not Payable |
| 125 | Photocopies Charges | Not Payable |
| 126 | Patient Identification Band / Name Tag | Not Payable |
| 127 | Washing Charges | Not Payable |
| 128 | Medicine Box | Not Payable |
| 129 | Mortuary Charges | Payable Upto 24 Hrs, Shifting Charges Not Payable |
| 130 | Medico Legal Case Charges (MLC Charges) | Not Payable |
| F External Durable Devices | | |
| 131 | Walking Aids Charges | Not Payable |
| 132 | Bipap Machine | Not Payable |
| 133 | Commode | Not Payable |
| 134 | CPAP/ CPAD Equipments Device | Not Payable |
| 135 | Infusion Pump - Cost | Not Payable |
| 136 | Oxygen Cylinder (for Usage outside the Hospital) | Not Payable |
| 137 | Oxygen Cylinder (for Usage outside the Hospital) | Not Payable |
| 138 | Pulseoxymeter Charges Device | Not Payable |
| 139 | Spacer | Not Payable |
| 140 | Spirometre | Not Payable |
| 141 | SPO2 Probe | Not Payable |
| 142 | Nebulizer Kit | Not Payable |
| 143 | Steam Inhaler | Not Payable |
| 144 | Armsling | Not Payable |
| 145 | Thermometer | Not Payable (paid By Patient) |
| 146 | Cervical Collar | Not Payable |
| 147 | Splint | Not Payable |
| 148 | Diabetic Foot Wear | Not Payable |
| 149 | Knee Braces (Long/ Short/ Hinged) | Not Payable |
| 150 | Knee Immobilizer/Shoulder Immobilizer | Not Payable |
| 151 | Lumbo Sacral Belt | Essential and should be paid at least specifically for cases who have undergone Surgery of Lumbar Spine |
| 151 | Nimbus Bed or Water or Air Bed Charges | Payable for any ICU Patient requiring more than 3 Days in ICU; All Patients with Paraplegia/Quadriplegia for reason and at Reasonable of approximately Rs200/Day |
| any Cost | | |
| 152 | Ambulance Collar | Not Payable |
| 153 | Ambulance Equipment | Not Payable |
| 154 | Microsheild | Not Payable |
| 155 | Abdominal Binder | Essential and should be Paid at least in Post Surgery Patients of Major Abdominal Surgery Including TAH, LSCS, Incisional Hernia Repair, Exploratory Laparotomy for Intestinal Obstruction, Liver Transplant Etc. |
| G Items Payable If Supported By A Prescription | | |
| 156 | Betadine \ Hydrogen Peroxide\spirit\ Disinfectants Etc | May be Payable when prescribed for Patient, Not Payable for Hospital use in OT |

| S.No. | Items | Remarks |
|---|--|---|
| 157 | Private Nurses Charges- Special Nursing Charges | or Ward or for dressings ward or for dressings Post Hospitalization Nursing Charges Not Payable |
| 158 | Nutrition Planning Charges - Dietician Charges- Diet Charges | Patient Diet provided by Hospital is Payable |
| 159 | Sugar Free Tablets | Payable -Sugar Free variants of admissible medicines are not Excluded |
| 160 | Cream Powder Lotion (Toileteries are Not Payable, only Prescribed Medical Pharmaceuticals Payable) | Payable when Prescribed |
| 161 | Digene Gel | Payable when Prescribed |
| 162 | ECG Electrodes | Upto 5 Electrodes are required for every case visiting OT or ICU. For longer stay in ICU, may Require a Change and at least one set every second day must be Payable. |
| 163 | Gloves | Sterilized Gloves Payable / Unsterilized Gloves not payable |
| 164 | HIV Kit | Payable - Pre-Operative Screening |
| 165 | Listerine/ Antiseptic Mouthwash | Payable When Prescribed |
| 166 | Lozenges | Payable When Prescribed |
| 167 | Mouth Paint | Payable When Prescribed |
| 168 | Nebulisation Kit | If used during Hospitalization is Payable Reasonably |
| 169 | Novarapid | Payable When Prescribed |
| 170 | Volini Gel/ Analgesic Gel | Payable When Prescribed |
| 171 | Zytee Gel | Payable When Prescribed |
| 172 | Vaccination Charges | Routine Vaccination Not Payable / Post Bite Vaccination Payable |
| H Part of Hospital's own Costs and not Payable | | |
| 173 | AHD | Not Payable - Part of Hospital's Internal Cost |
| 174 | Alcohol Swabes | Not Payable - Part of Hospital's Internal Cost |
| 175 | Scrub Solution/ Sterillium | Not Payable - Part of Hospital's Internal Cost |
| I OTHERS | | |
| 176 | Vaccine Charges for Baby | Not Payable |
| 177 | Aesthetic Treatment / Surgery | Not Payable |
| 178 | TPA Charges | Not Payable |
| 179 | Visco Belt Charges | Not Payable |
| 180 | Any Kit with no details mentioned [Delivery Kit, Orthokit, Recovery Kit, Etc] | Not Payable |
| 180 | Any Kit with no details mentioned [Delivery Kit, Orthokit, Recovery Kit, Etc] | Not Payable |
| 181 | Examination Gloves | Not Payable |
| 182 | Kidney Tray | Not Payable |
| 183 | Mask | Not Payable |
| 184 | Ounce Glass | Not Payable |
| 185 | Outstation Consultant's/ Surgeon's Fees | Not Payable, Except For Telemedicine Consultations Where Covered by Policy |
| 186 | Oxygen Mask | Not Payable |
| 187 | Paper Gloves | Not Payable |
| 188 | Pelvic Traction Belt | Should be Payable in case of PIVD requiring traction as this is generally not reused |
| 189 | Referral Doctor's Fees | Not Payable |
| 190 | Accu Check (Glucometry/ Strips) | Not Payable. Pre-Hospitalisation or Post-Hospitalisation / Reports and Charts Required/Device Not Payable |
| 191 | Pan Can | Not Payable |
| 192 | Sofnet | Not Payable |
| 193 | Trolley Cover | Not Payable |
| 194 | Urometer, Urine Jug | Not Payable |
| 195 | Ambulance | Payable - Ambulance from home to Hospital or inter-hospital shifts is Payable/ RTA As Specific Requirement for critical injury is Payable) |
| 196 | Tegaderm / Vasofix Safety | Payable- Maximum of 3 in 48 Hrs and then 1 in 24 Hrs |
| 197 | Urine Bag | Payable where medically necessary till a reasonable cost - Maximum 1 Per 24 Hrs |
| 198 | Softovac | Not Payable |
| 199 | Stockings | Essential for case like CABG etc. Where it should be paid. |