

**ANNEXURE 7A**

**GOVERNMENT ORDER NO. HFW 69 CGE 2018, dated: 15.11.2018**

**SECONDARY HEALTHCARE TREATMENTS TO BE PROVIDED IN PUBLIC HEALTH INSTITUTIONS ONLY**

sl.no	PROCEDURE NAME	Approved Rates	ARK Code	Category
<b>OPHTHALMOLOGY</b>				
1	Buckle Removal	5,000	2A.149	2A
2	Pterygium + ConjunctivalAutograft	9,000	2A.146	2A
3	Dacryocystectomy with implants	10,000	2A.140	2A
4	LimbalDermoid Removal	4,000	2A.150	2A
5	Cataract with foldable hydrophobic acrylic IOL by Phaco emulsification tech	7,500	2A.138	2A
6	Cataract with non-foldable IOL using SICS technique	5,000	2A.137	2A
7	Conjunctival tumour excision + AMG	5,000	2A.134	2A
8	Entropion correction	4,000	2A.139	2A
9	Ectropion correction	5,000	2A.142	2A
10	Evisceration	3,500	2A.135	2A
11	Lid tear	5,000	2A.155	2A
<b>ENT</b>				
12	Aural polypectomy	4,000	2A.184	2A
13	Mastoidectomy	12,500	2B.125	2A
14	Myringotomy – Bilateral	6,000	2B.129	2A
15	Myringotomy – Unilateral	3,500	2B.130	2A
16	Myringotomy with Grommet - One ear	6,500	2B.131	2A
17	Myrinogotomy with Grommet - Both ear	8,500	2B.132	2A
18	Partial amputation – Pinna	4,000	2B.140	2A
19	Tympanoplasty	9,000	2B.141	2A
20	Ear lobe repair - single (daycare)	1,500	2A.185	2A
21	Functional Endoscopic Sinus (FESS)	11,000	2B.134	2A
22	Intra Nasal Ethmoidectomy	5,000	2A.186	2A
23	Turbinectomy Partial – Bilateral	3,000	2A.172	2A
24	Turbinectomy Partial – Unilateral	2,000	2A.173	2A
25	Rhinoplasty	15,000	2A.187	2A
26	Septoplasty	5,000	2A.171	2A
27	Youngs operation	3,000	2A.190	2A
28	Angiofibrom Excision	18,000	2A.191	2A
29	Endoscopic Hypophysectomy	21,000	2A.192	2A
30	Intranasal Diathermy	3,000	2A.193	2A

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31	Rhinosporidiosis	7,000	2B.118	2A
32	Adeno Tonsillectomy	8,000	2A.174	2A
33	Adenoidectomy	5,000	2A.175	2A
34	Retro pharyngeal abscess – Drainage	5,000	2A.177	2A
35	Tonsillectomy – (Uni/ Bilateral)	7,500	2A.180	2A
36	Superficial Parotidectomy	12,000	2A.269	2A
37	Excision of Branchial Cyst	7,000	2A.181	2A
38	Excision of Branchial Sinus	7,000	2A.182	2A
39	Ranula excision	7,000	2A.183	2A
40	Removal of Submandibular Salivary gland	5,000	2A.221	2A
41	Fracture reduction nose with septal correction	8,000		2A
42	Palatopharyngoplasty	10,000		2A
<b>ORTHOPAEDICS</b>				
43	AC joint reconstruction/ Stabilization/ Acromionplasty Nonoperative management is recommended for Rockwood type I and II injuries, whereas surgical reconstruction is recommended for type IV and VI separations. The management for type III and V injuries is more controversial and is determined on a case-by-case basis (pre-auth)	25,000	2A.117	2A
44	Amputation - Above Elbow	18,000	2B.31	2A
45	Amputation – one or more fingers	6,000	2A.68	2A
46	Amputation – Wrist	15,000	2A.79	2A
47	Amputation – Below Knee	15,000	2A.81	2A
48	Amputation – Above Knee	20,000	2B.32	2A
49	Foot & Hand Amputation (whole/ partial)	15,000	2A.77	2A
50	Excision Arthroplasty of Femur head	22,500	2A.119	2A
51	Clavicle fracture management - conservative (daycare)	3,000	2A.105	2A
52	Close Reduction - Small Joints	4,000	2A.57	2A
53	Debridement & Closure of Minor injuries	3,000	2A.128	2A
54	Duputryen's Contracture release + rehabilitation	10,000	2A.129	2A
55	External fixation - Small bone	10,000	2A.55	2A

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56	Head Radius – Excision	8,000	2A.112	2A
57	Nerve Transposition/Release/ Neurolysis	8,000	2A.122	2A
58	Osteotomy -Small Bone	17,000	2A.66	2A
59	Sequestrectomy of Long Bones + anti-biotics + dressing	25,000	2A.62	2A
60	Tendo Achilles Tenotomy	5,000	2A.125	2A
61	Tendon Release/ Tenotomy	5,000	2A.126	2A
62	Correction of club foot per cast	15,000	2A.110	2A
63	Accessory bone – Excision (limbs) – congenital Accessory digits sometime can be removed (pre-auth)	6,000	2A.67	2A
64	Amputation - one or more toes/ digits	6,000	2A.72	2A
65	Arthorotomy of any joint	15,000	2A.118	2A
66	Closed Interlocking Tibia + Orif of Fracture Fixation	30,000	2B.45	2A
67	Closed reduction of dislocation (Knee/ Hip)	6,000	2B.52	2A
68	Fracture - Ulna Internal Fixation	10,000	2A.115	2A
69	Internal Fixation of other Small Bones (metatarsals)	10,000	2A.56	2A
70	Osteotomy -Long Bone	30,000	2A.116	2A
71	Arthrodesis of shoulder	40,000	2A.65	2A
72	Amputation - Below Elbow	15,000		2A
73	Osteochondroma excision/ Excision of Exostosis	10,000		2A
74	Excision Arthroplasty	15,000		2A
75	Arthrodesis Ankle Triple	15,000		2A
76	Close Fixation - Hand Bones	4,000		2A
77	Close Fixation - Foot Bones	4,000		2A
78	Closed Reduction and Percutaneous Pinning	15,000		2A
79	Closed Reduction of the Hip (including hip Spika)	7,000		2A
80	Closed reduction of dislocation (Shoulder/ Elbow)	5,000		2A
81	Exploration and Ulnar nerve Repair	10,000		2A

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<b>sl.no</b>	<b>PROCEDURE NAME</b>	<b>Approved Rates</b>	<b>ARK Code</b>	<b>Category</b>
82	Fracture - Fibula Internal Fixation	10,000		2A
83	Fracture - Olecranon of Ulna	10,000		2A
84	Fracture - Radius Internal Fixation	10,000		2A
85	Fracture - TIBIA Internal Fixation plating	17,000		2A
86	High Tibial Osteotomy	17,000		2A
87	Closed reduction + Hip Spica	7,000		2A
88	Internal Fixation Lateral Epicondyle	10,000		2A
89	Open Reduction of Small Joint	15,000		2A
90	Patellectomy	8,000		2A
91	Percutaneous - Fixation of Fracture	7,000		2A
92	Excision of Bursa	3,000		2A
93	Tenolysis	5,000		2A
94	Tension Band Wiring Patella	15,000		2A
95	Application of P.O.P. casts for Upper & Lower Limbs	3,000		2A
96	Application of P.O.P. Spikas & Jackets	3,500		2A
97	Application of Skeletal Traction with pin	3,000		2A
98	Application of Skin Traction	1,000		2A
99	Head radius - Excision + Fracture - Ulna Internal Fixation	20,000		2A
<b>UROLOGY</b>				
100	Perinephric Abscess drainage (percutaneous)	10,000	2A.162	2A
101	Diagnostic Cystoscopy	5,000	2B.305	2A
102	Reduction of Paraphimosis	2,000	2A.241	2A
103	Meatoplasty	3,500	2A.165	2A
104	Meatotomy	3,500	2A.163	2A
105	Varicocele-unilateral-non microsurgical	10,000	2a.166	2A
106	Varicocele-bilateral-non microsurgical	15,000	2A.167	2A
107	Priapism-aspiration/shunt	15,000	2A.168	2A
108	Urethral Dilatation-non endoscopic as an independent procedure	2,000	2A.164	2A

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109	Varicocele-unilateral-microsurgical	12,000	2A.293	2A
110	Orchiectomy-simple	10,000		2A
111	Acute management of upper urinary tract trauma – conservative	2,000/ DAY		2A
<b>OBSTETRICS &amp; GYNAECOLOGY</b>				
112	Hysterectomy ± Salpingo-oophorectomy	20,000	2A.26	2A
113	Abdominal Myomectomy	16,000	2A.30	2A
114	Surgeries for Stress Incontinence 'Burch'	35,000	2A.33	2A
115	Incisional Hernia Repair	15,000	2A.229	2A
116	Radical Hysterectomy (Wertheims)	20,000	2A.31	2A
117	Non descent vaginal hysterectomy	14,000	2A.27	2A
118	Bartholins Cyst Enucleation/ Incision drainage	3,000	2A.35	2A
119	Hysteroscopic polypectomy	3,000	2A.25	2A
120	Hysteroscopic IUCD removal	3,000	2A.46	2A
121	Caesarian Delivery	9,000	2A.53	2A
122	Caesarian hysterectomy	16,000	2B.12	2A
123	MTP > 12 weeks	3,000	2A.43	2A
124	MTP upto 12 weeks	5,000	2A.44	2A
125	MTP upto 8 weeks	3,500	2A.45	2A
126	Laparotomy for broad ligament haematoma	16,000	2A.47	2A
127	Ablation of Endometriotic Spot + Adhenolysis	10,000	2A.50	2A
128	Cone Biopsy Cervix	1,000	2A.49	2A
129	Conventional Tubectomy	4,000	2A.42	2A
130	Cyst-Labial	3,000	2A.36	2A
131	D&C (Dilatation&curretage)	3,000	2A.37	2A
132	Gaping Perineal wound secondary suturing/ episiotomy	2,500	2A.51	2A
133	Hymenectomy& Repair of Hymen	7,000	2A.38	2A
134	Hysterotomes - 2nd Trimester abortions	5,000		2A
135	Dilation and Evacuation (D&E)	5,000		2A
136	Cervical biopsy and Polypectomy	3,000		2A

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sl.no	PROCEDURE NAME	Approved Rates	ARK Code	Category
137	Cyst -Vaginal Enucleation	3,000		2A
138	D&C (Dilatation & curettage) + Electro Cauterisation Cryo Surgery	4,000		2A
139	Fractional Curettage	4,000		2A
140	Amniocentesis	5,000		2A
<b>GENERAL SURGERY</b>				
141	Adventitious Burse – Excision	10,000	2A.236	2A
142	Appendicectomy	10,000	2A.231	2A
143	Bakers Cyst – Excision	6,000	2A.237	2A
144	Cervical Lymphnodes – Excision	2,000	2A.239	2A
145	Colostomy	10,000	2A.235	2A
146	Cyst over Scrotum – Excision	2,000	2A.240	2A
147	Cystic Mass – Excision	4,000	2B.255	2A
148	Dermoid Cyst - Large – Excision	4,000	2A.202	2A
149	Dermoid Cyst - Small – Excision	2,000	2A.203	2A
150	Drainage of Ischio Rectal Abscess	4,000	2A.242	2A
151	Incision and Drainage of large Abscess	4,000	2A.243	2A
152	Drainage of Psoas Abscess	7,500	2A.244	2A
153	Epididectomy	8,000	2A.245	2A
154	Epididymal Swelling –Excision	6,000	2A.204	2A
155	Epidymal Cyst	4,000	2A.205	2A
156	Evacuation of Scrotal Hematoma	5,000	2A.246	2A
157	Drainage of liver Abscess	8,000	2A.247	2A
158	Excision Filarial Scrotum	5,000	2A.248	2A
159	Excision Mammary Fistula	5,500	2B.212	2A
160	Excision Pilonidal Sinus	8,000	2A.211	2A
161	Excision of Large Swelling in Hand	3,000	2A.249	2A
162	Excision of Small Swelling in Hand	1,500	2A.250	2A
163	Excision of Neurofibroma	3,000	2A.251	2A
164	Excision of Sinus and Curettage	5,000	2A.252	2A
165	Fibroadenoma – Unilateral	7,000	2A.201	2A
166	Fissurectomy and Haemorrhoidectomy	12,000	2A.254	2A
167	G J Vagotomy/ Vagotomy + Pyloroplasty	15,000	2A.232	2A

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168	Ganglion - large – Excision	3,000	2A.256	2A
169	Ganglion - Small – Excision	2,000	2A.258	2A
170	Granuloma – Excision	2,000	2A.259	2A
171	Haemangioma – Excision (large)	10,000	2A.260	2A
172	Haemorrhage of Small Intestine	15,000	2A.300	2A
173	Hernia – Epigastric	11,000	2A.226	2A
174	Hernia – Incisional	15,000	2A.229	2A
175	Hernia – Umbilical	11,000	2A.228	2A
176	Hernia – Femoral	10,000	2A.227	2A
177	Hydrocele - Excision – Unilateral	5,000	2A.219	2A
178	Hydrocele - Excision – Bilateral	10,000	2A.220	2A
179	Infected Bunion Foot – Excision	4,000	2A.262	2A
180	Lipoma excision	2,500	2A.218	2A
181	Papilloma Rectum – Excision	4,000	2A.289	2A
182	Growth in the Scalp – Excision	4,000	2A.264	2A
183	Rectal Dilation	2,000	2A.265	2A
184	Rectopexy	10,000	2A.213	2A
185	Haemorrhoidectomy	5,000	2A.209	2A
186	Simple closure - Peptic perforation	15,000	2A.266	2A
187	Sinus – Excision	5,000	2A.290	2A
188	Splenectomy	25,000	2B.256	2A
189	Submandibular Lymph node – Excision	5,000	2A.268	2A
190	Swelling in foot (large) – Excision	3,500	2A.270	2A
191	Varicose Veins - Excision and Ligation	10,000	2A.214	2A
192	Cholecystostomy	10,000	2A.233	2A
193	Excision and Skin Graft of Venous Ulcer	15,000	2A.274	2A
194	Total thyroidectomy	20,000	2A.225	2A
195	Ligation of Ankle Perforators	10,500	2B.188	2A
196	Hemodialysis per sitting	2,000	2A.169	2A
197	Debridement of Ulcer-Leprosy	5,000	2A.380	2A
198	Aspiration of cold Abscess of Lymphnode	3,000	2A.286	2A
199	Aspiration of Empyema	2,000	2A.272	2A

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200	Peritoneal dialysis per sitting	2,000	2A.170	2A
201	Vasectomy	2,500	2A.295	2A
202	Breast Lump - Left – Excision	5,000	2A.217	2A
203	Fissurectomy	8,000	2A.206	2A
204	Intercostal drainage	8,000	2B.28	2A
205	Hernia - Repair & release of obstruction+ Hernioplasty	20,000	2A.230	2A
206	Appendicular Abscess – Drainage	12,000		2A
207	Breast Lump - Right – Excision	6,500		2A
208	Bursa – Excision	4,000		2A
209	Hydrocele + Orchiectomy	8,000		2A
210	Eversion of Hydrocele Sac – Bilateral	10,000		2A
211	Eversion of Hydrocele Sac – Unilateral	5,000		2A
212	Hernioplasty – Inguinal	10,000		2A
213	Herniorraphy	9,000		2A
214	Scrotal Swelling (Multiple) – Excision	5,000		2A
215	Soft Tissue Tumor (small) – Excision	5,000		2A
216	Swelling in foot (small) – Excision	1,500		2A
217	Umbilical Sinus – Excision	5,000		2A
<b>NEUROSURGERY</b>				
218	Carpal Tunnel Release including pre and post Op. MRI	10,000		2A
<b>BURNS MANAGEMENT</b>				
219	<b>% Total Body Surface Area Burns (TBSA) (thermal/ scald/ flame burns) - any % (not requiring admission). Needs at least 5-6 dressing</b>	7,000		2A
<b>ORAL AND MAXILLOFACIAL SURGERY</b>				
220	Fixation of fracture of jaw with closed reduction (1 jaw) using wires - under LA	5,000	2A.7	2A
221	Extraction of impacted tooth under LA	500	2A.1	2A
222	Cyst & tumour of Maxilla/mandible by enucleation/excision/marsupialization under LA	2,500	2A.2	2A



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<b>PEDIATRICS MEDICAL CARE PACKAGES</b>				
223	Diarrhoea	Rs 2000 per day (up to a limit of 1 day after which pre- authorization needs to be sought up to a limit of 5 days)	2A.327	2A
224	Trauma	Rs 2000 per day (up to a limit of 1 day after which pre- authorization needs to be sought up to a limit of 5 days)	2A.127	2A
225	Unexplained severe anemia	Rs 2,000 per day (pre-authorization needs to be sought to continue package beyond 2 and 5 day intervals - up to a limit of 10 days).	2A.375	2A
226	Enteric fever	Rs 2,000 per day (pre-authorization needs to be sought to continue package beyond 5 and 10 day intervals) Note: If shifted to HDU/ ICU, suitable rates would need to be applied and pre- authorization be sought.	2A.329	2A
227	Acute hepatitis	Rs 2,000 per day (pre-authorization needs to be sought to continue package beyond 5 and 10 day intervals) Note: If shifted to HDU/ ICU, suitable rates would need to be applied and pre- authorization be sought.	2A.312	2A
228	ITP	Rs 2,000 per day (pre-authorization needs to be sought to continue package beyond 5 and 10 day intervals) Note: If shifted to HDU/ ICU, suitable rates would need to be applied and pre- authorization be sought.	2A.374	2A
229	Immune haemolytic anemia	Rs 2,000 per day (pre-authorization needs to be sought to continue package beyond 5 and 10 day intervals) Note: If shifted to HDU/ ICU, suitable rates would need to be applied and pre- authorization be sought.	2B.278	2A
230	Neuromuscular disorders	Rs 2,000 per day (pre-authorization needs to be sought to continue package beyond 5 and 10 day intervals) Note: If shifted to HDU/ ICU, suitable rates would need to be applied and pre- authorization be sought.	2A.343	2A

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231	Unexplained jaundice	Rs 2,000 per day (pre-authorization needs to be sought to continue package beyond 5 and 10 day intervals) Note: If shifted to HDU/ ICU, suitable rates would need to be applied and pre- authorization be sought.	2A.372	2A
232	Liver abscess	Rs 4,000 per day (advised to take pre-authorization beyond 1 day - up to a limit of 5 days) Note: If shifted to routine ward/ ICU, suitable rates would need to be applied and pre- authorization be sought. Extend stay beyond 5 and 10 days as required with pre- authorization	2A.304	2A
233	Urinary tract infection	Rs 2000 per day (up to a limit of 1 day after which pre- authorization needs to be sought up to a limit of 5 days)	2B.285	2A
234	Persistent/ Chronic diarrhea	Rs 2,000 per day (pre-authorization needs to be sought to continue package beyond 5 and 10 day intervals) Note: If shifted to HDU/ ICU, suitable rates would need to be applied and pre- authorization be sought.	2A.310	2A
235	Acute dysentery	Rs 2000 per day (up to a limit of 1 day after which pre- authorization needs to be sought up to a limit of 5 days)		2A
236	Pneumonia	Rs 2000 per day (up to a limit of 1 day after which pre- authorization needs to be sought up to a limit of 5 days)		2A
237	Acute glomerulonephritis	Rs 2000 per day (up to a limit of 1 day after which pre- authorization needs to be sought up to a limit of 5 days)		2A
238	Pyrexia of unexplained origin	Rs 2,000 per day (pre-authorization needs to be sought to continue package beyond 2 and 5 day intervals - up to a limit of 10 days).		2A
239	Dysmorphic children	Rs 2,000 per day (pre-authorization needs to be sought to continue package beyond 2 and 5 day intervals - up to a limit of 10 days).		2A
240	Rickets	Rs 2,000 per day (pre-authorization needs to be sought to continue package beyond 2 and 5 day intervals - up to a limit of 10 days).		2A

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241	Short stature	Rs 2,000 per day (pre-authorization needs to be sought to continue package beyond 2 and 5 day intervals - up to a limit of 10 days).		2A
242	Musculoskeletal problems	Rs 2,000 per day (pre-authorization needs to be sought to continue package beyond 2 and 5 day intervals - up to a limit of 10 days).		2A
243	Developmental and behavioral disorders	Rs 2,000 per day (pre-authorization needs to be sought to continue package beyond 2 and 5 day intervals - up to a limit of 10 days).		2A
244	Acute severe malnutrition	Rs 2,000 per day (pre-authorization needs to be sought to continue package beyond 5 and 10 day intervals) Note: If shifted to HDU/ ICU, suitable rates would need to be applied and pre- authorization be sought.		2A
245	Chikungunya	Rs 2,000 per day (pre-authorization needs to be sought to continue package beyond 5 and 10 day intervals) Note: If shifted to HDU/ ICU, suitable rates would need to be applied and pre- authorization be sought.		2A
246	Kala azar	Rs 2,000 per day (pre-authorization needs to be sought to continue package beyond 5 and 10 day intervals) Note: If shifted to HDU/ ICU, suitable rates would need to be applied and pre- authorization be sought.		2A
247	Haemolytic uremic syndrome	Rs 2,000 per day (pre-authorization needs to be sought to continue package beyond 5 and 10 day intervals) Note: If shifted to HDU/ ICU, suitable rates would need to be applied and pre- authorization be sought.		2A
248	Juvenile myasthenia	Rs 2,000 per day (pre-authorization needs to be sought to continue package beyond 5 and 10 day intervals) Note: If shifted to HDU/ ICU, suitable rates would need to be applied and pre- authorization be sought.		2A

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249	Kawasaki Disease	Rs 2,000 per day (pre-authorization needs to be sought to continue package beyond 5 and 10 day intervals) Note: If shifted to HDU/ ICU, suitable rates would need to be applied and pre- authorization be sought.		2A
250	Cyanotic spells	Rs 2,000 per day (pre-authorization needs to be sought to continue package beyond 5 and 10 day intervals) Note: If shifted to HDU/ ICU, suitable rates would need to be applied and pre- authorization be sought.		2A
251	Rheumatic fever	Rs 2,000 per day (pre-authorization needs to be sought to continue package beyond 5 and 10 day intervals) Note: If shifted to HDU/ ICU, suitable rates would need to be applied and pre- authorization be sought.		2A
252	Rheumatoid arthritis	Rs 2,000 per day (pre-authorization needs to be sought to continue package beyond 5 and 10 day intervals) Note: If shifted to HDU/ ICU, suitable rates would need to be applied and pre- authorization be sought.		2A
253	Blood and blood component transfusion for indications like Thalassemia/Hemoglobinopathies-	Rs 1,500 per day (upto a limit of 2 days) - needs mandatory pre-authorization		2A
<b>PEDIATRIC SURGERY</b>				
254	Rectal Polypectomy - Sigmoidoscopic (Ga)	8,000	2A.212	2A
255	Hernia & Hydrocele	20,000		2A
256	Undescended Testis - Bilateral-Palp + Nonpalp	15,000		2A
257	Undescended Testis - Bilateral Palpable	15,000		2A
258	Undescended Testis - Bilateral Non-Palpable	20,000		2A
<b>MEDICAL PACKAGES</b>				
259	Dysentery	Rs 2000 per day (Admission beyond 1 day requires pre-authorization)	2A.328	2A
260	Renal colic	Rs 2000 per day (Admission beyond 1 day requires pre-authorization)	2A.314	2A

## ANNEXURE 7A

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## SECONDARY HEALTHCARE TREATMENTS TO BE PROVIDED IN PUBLIC HEALTH INSTITUTIONS ONLY

sl.no	PROCEDURE NAME	Approved Rates	ARK Code	Category
261	Acute bronchitis	Rs 2000 per day (Admission beyond 1 day requires pre-authorization)	2A.321	2A
262	Severe anemia	Rs 2000 per day (Admission beyond 1 day requires pre-authorization)	2A.318	2A
263	Acute febrile illness	Rs 2000 per day (Admission beyond 1 day requires pre-authorization)	2A.303	2A
264	Dengue fever	Rs 2000 per day (Admission beyond 1 day requires pre-authorization)	2A.325	2A
265	Leptospirosis	Rs 2000 per day (Admission beyond 1 day requires pre-authorization)	2A.337	2A
266	Enteric fever	Rs 2000 per day (Admission beyond 1 day requires pre-authorization)	2A.329	2A
267	Liver abscess	Rs 2000 per day (Admission beyond 1 day requires pre-authorization)	2A.304	2A
268	Acute viral hepatitis	Rs 2000 per day (Admission beyond 1 day requires pre-authorization)	2A.316	2A
269	Pyrexia of unknown origin	Rs 2000 per day (Admission beyond 1 day requires pre-authorization)	2A.352	2A
270	Pericardial/ Pleural tuberculosis	Rs 2000 per day (Admission beyond 1 day requires pre-authorization)	2A.353	2A
271	Systematic lupus erythematosus	Rs 2000 per day (Admission beyond 1 day requires pre-authorization)	2A.357	2A
272	Vasculitis	Rs 2000 per day (Admission beyond 1 day requires pre-authorization)	2A.306	2A
273	Bacterial/ fungal endocarditis	Rs 2,000 per day (pre-authorization needs to be sought to continue package beyond 5 and 10 day intervals)	2A.308	2A
274	Acute and chronic pancreatitis	Rs 2,000 per day (pre-authorization needs to be sought to continue package beyond 5 and 10 day intervals)	2A.322	2A
275	Neuromuscular disorders	Rs 2,000 per day (pre-authorization needs to be sought to continue package beyond 5 and 10 day intervals)	2A.343	2A
276	Acute gastroenteritis with moderate dehydration	Rs 2000 per day (Admission beyond 1 day requires pre-authorization)		2A
277	UTI	Rs 2000 per day (Admission beyond 1 day requires pre-authorization)		2A
278	Malaria	Rs 2000 per day (Admission beyond 1 day requires pre-authorization)		2A

## ANNEXURE 7A

GOVERNMENT ORDER NO. HFW 69 CGE 2018, dated: 15.11.2018

## SECONDARY HEALTHCARE TREATMENTS TO BE PROVIDED IN PUBLIC HEALTH INSTITUTIONS ONLY

sl.no	PROCEDURE NAME	Approved Rates	ARK Code	Category
279	Pneumonia	Rs 2000 per day (Admission beyond 1 day requires pre-authorization)		2A
280	Persistent/ Chronic diarrhoea	Rs 2,000 per day (pre-authorization needs to be sought to continue package beyond 5 and 10 day intervals)		2A
281	Blood and blood component transfusion (admission for a diagnostic procedure leading to treatment requiring admission, e.g. bone marrow and bone biopsy, endoscopy, liver biopsy, bronchoscopy, CT/MRI under GA, broncho-alveolar lavage, lumbar puncture, muscle biopsy, pleural aspiration, ascitic tapping etc.)	Rs 2,000 per day (up to a limit of 2 days) - needs mandatory pre- authorization		2A
<b>MENTAL DISORDERS PACKAGES</b>				
282	<b>F20-F29 Schizophrenia, schizotypal and delusional disorders</b>	Rs. 1500 per day (up to a limit of 2 weeks after which pre-authorization needs to be sought up to a limit of 2 weeks)	2A.383	2A
283	F20-F29 Schizophrenia, schizotypal and delusional disorders	which pre-authorization needs to be sought up to a limit of 10 days)	2A.383	2A
284	<b>F00-F09 Organic, including symptomatic, mental disorders</b>	Rs. 1500 per day (up to a limit of 2 weeks after which pre-authorization needs to be sought up to a limit of 2 weeks)		2A
285	<b>F10-F19 Mental and Behavioural disorders due to psychoactive substance use</b>	Rs. 1500 per day (up to a limit of 2 weeks after which pre-authorization needs to be sought up to a limit of 2 weeks)		2A
286	<b>F30-F39 Mood (affective) disorders</b>	Rs. 1500 per day (up to a limit of 2 weeks after which pre-authorization needs to be sought up to a limit of 2 weeks)		2A
287	F40-F48 Neurotic, stress-related and somatoform disorders	Rs. 1500 per day (up to a limit of 2 weeks after which pre-authorization needs to be sought up to a limit of 2 weeks)		2A
288	<b>F50-F59 Behavioural syndromes associated with physiological disturbances and physical factors</b>	Rs. 1500 per day (up to a limit of 2 weeks after which pre-authorization needs to be sought up to a limit of 2 weeks)		2A
289	<b>F70-F79 Mental retardation</b>	Rs. 1500 per day (up to a limit of 2 weeks after which pre-authorization needs to be sought up to a limit of 2 weeks)		2A

ANNEXURE 7A

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SECONDARY HEALTHCARE TREATMENTS TO BE PROVIDED IN PUBLIC HEALTH INSTITUTIONS ONLY

sl.no	PROCEDURE NAME	Approved Rates	ARK Code	Category
290	F10-F19 Mental and Behavioural disorders due to psychoactive substance use	Rs. 2500 per day (up to a limit of 10 days after which pre-authorization needs to be sought up to a limit of 10 days)		2A
291	F30-F39 Mood (affective) disorders	Rs. 2500 per day (up to a limit of 10 days after which pre-authorization needs to be sought up to a limit of 10 days)		2A