COLOUR FUNDUS PHOTOGRAPHY

Procedure Charges	1,730	2,250	2,510	2,930	3,030	3,460	3,890
Doctor Fees	860	1,120	1,250	1,460	1,510	1,720	1,940

Twin

Special

Deluxe

Super

Deluxe

Ex.

Suit

Common Economy

OPTICAL COHERENCE TOMOGRAPHY(OCT)

Procedure Charges	3,460	4,500	5,020	5,850	6,060	6,920	7,790
Doctor Fees	2,590	3,370	3,760	4,380	4,530	5,180	5,830

LASER BARRAGE

Procedure Charges	6,910	8,980	10,020	11,680	12,090	13,820	15,550
Doctor Fees	6,910	8,980	10,020	11,680	12,090	13,820	15,550

EXTENDED LASER BARRAGE

Procedure Charges	7,920	9,900	10,690	11,960	12,280	13,460	14,260
Doctor Fees	7,920	9,900	10,690	11,960	12,280	13,460	14,260

INTRAOCULAR AND PERIOCULAR STEROID INJECTION

Procedure Charges	3,460	4,500	5,020	5,850	6,060	6,920	7,790
Doctor Fees	3,460	4,500	5,020	5,850	6,060	6,920	7,790

- Tariff given are effective from 1st September 2020.
- Mode of Payment accepted: Cash / Card / Pay Order / Demand Draft / RTGS / NEFT / IMPS
- Refunds for excess amount if any will be refunded by crossed CHEQUE/RTGS/NEFT.
- All rates are subject to revision without prior notice.
- Incase preferred class is not available, patient will be admitted in available class and charged as per allotted class.
- If daycare patient requires Indoor admission, the minimum class applicable would be Twin sharing.
- Reservation deposit paid for operation theatre in advance is only for blocking the theatre and not for reserving the bed, admission is subject
 to availability of beds. RESERVATION DEPOSIT IS NOT REFUNDABLE.
- Surcharge @ 20% will be applicable to Foreign Nationals, NRIs, PIO and OCI Patients.
- All Foreign National / NRI / PIO and OCI patients are requested to submit copy of Patients Passport, Visa / PIO and OCI before admission.
- Minimum class permissible for Foreign National / NR / POI / and OCI patient is Twin Sharing
- Upgradation from lower class to higher class, all charges of the higher class applicable from the date of admission.
- Emergency charges will be applicable as per hospital policy for cases done on Sundays / Public Holidays / after standard working hours / when an unscheduled case is accommodated during regular working hours despite non-availability of any vacant slot.
- PAN CARD copy of patient must be submitted to Billing Department for billed amount of Rs. 2000004- and above w.e.f. January 2016. If
 patient does not have PAN CARD then FORM No.60 has to be filled by patient / next of kin and copy of proof of identity and residence
 has to be attached.
- As per section 26ST in the income tax act, no person shall receive / accept an amount of Rs. 2,00,000/- or more in cash. The hospital will not accept above Rs. 1,95,000/- per patient in cash.
- For further assistance please contact Billing Dept. on Ext. 1585/1586/1591/1592/1594

TARIFFS FOR

CATARACT SURG ERY & OPHTHALMOLOGY





NABH Accredited Health Care Provider

Lilavati Hospital and Research Centre

A-791, Bandra Reclamation, Bandra (West), Mumbai - 400 050 Tel : +91 22 2675 1000 / 2656 8000 / Extn : 1585 / 1586 / 1591 / 1592 / 1594. Fax No : 2640 5119 W : www.lilavatihospital.com

More than Healthcare, Human Care

CATARACT SURGERY PACKAGE

SR	Name of Package	Lens and Consumables Description	HOSPITAL	PROFESSIAL	PACKAGE
NO.			CHARGES	CHARGES	AMOUNT
1	PLAN MULTIFOCAL TORIC	Trifocal Lens (Alcon Acrysof IQ Panoptix Toric) or EDOF TORIC Lens (Abbott Tecnis Symfony Toric IOL), Injection (Healon 0.55 + Viscoat 0.55) or Healon G V 0.85	80,000	80,000	1,60,000
2	PLAN TRIFOCAL	Trifocal Lens (Alcon Acrysof IQ Panoptix), Injection (Healon 0.55 + Viscoat 0.55) or Healon G V 0.85	75,000	65,000	1,40,000
3	PLAN - EDOF	EDOF Lens (Abbott Tecnis Symfony IOL), Injection (Healon 0.55 + Viscoat 0.55) or Healon G V 0.85	70,000	60,000	1,30,000
4	PLAN APODIZED MULTI FOCAL	Bifocal Restore Lens (Alcon Acrysof IQ) or (Abbot Tecnis1 Aspheric Multifocal), Injection (Healon 0.55 + Viscoat 0.55) or Healon G V 0.85	73000	52000	125000
5	PLAN - TORIC	Monofocal Lens (Alcon Toric), Injection (Healon 0.55 + Viscoat 0.55) or Healon G V 0.85	50,000	50,000	1,00,000
6	PLAN A+	Monofocal Lens (Alcon Acrysof IQ) or (Abbot Tecnis1 Aspheric), Injection (Healon 0.55 + Viscoat 0.55) or Healon G V 0.85	37,000	35,000	72,000
7	PLAN A	Monofocal IOL Lens (Alcon acrysof Single Piece) or (Abbot Sensar) or (Hoya), Injection (Healon 0.55 + Viscoat 0.55) or Healon G V 0.85	35,000	25,000	60,000
8	PLAN B	Preloaded IOL Spheric Lens (Ryner RayOne), Injection Zyonate	28,500	21,500	50,000
9	PLAN C	Acrylic Foldable Lens (RYCF-SQ)	21,000	13,000	34,000

GUIDELINES FOR THE PACKAGE BILLING

- Plan must be selected at the time of consultation by completing a form provided at the opthalmic department. The
 Operating Surgeon will counter sign the form. Once a plan is selected it cannot be changed subsequently.
- In the event of any condition requiring the re-operation after Cataract Surgery, such as wound re-suturing, exterior chamber wash, etc., the patient will be charged at actuals as per the prevailing hospital tariffs for the respective grade of surgery.
- Rates mentioned above are applicable to a single eye.
- Entire amount should be paid in advance before the patient is admitted.

DETAILS OF PACKAGE INCLUSIONS AND EXCLUSIONS

HOSPITAL CHARGE

- Hospital Charge includes -
 - Operation Theatre and Hospital Anaesthesia Charges
 - Pharmacy and Materials generally required during the surgery (including the cost of one lens and one injection/visco-elastic).
 - Day Care bed charges for upto one day i.e Rs. 2250/-
 - Phacoimulsification
- Extra amount will be charged for -
 - Investigations and Procedures
 - Medicines or materials issued to the patient's room
 - Special consumables used during the surgery (Please consult with your operating surgeon for an estimate)
 - If more than one lens or injection is used during the surgery
 - charges will be extra for the additional lens or injection.
 - Accommodation for ward or ICU's on a per day basis as per the prevailing hospital tariff.

DOCTORS FEES

- Doctors Fee includes professional charges of the Surgeon and Anaesthetist. A fixed amount will be charged even
 if more than one Surgeon is present during the surgery.
- Visit Fees will be charged extra for indoor patients. Visit fees are not chargeable to patients admitted in Day Care.

2) CATARACT SURGERY OPEN PLAN

- If the patient does not opt for a package scheme, then charges for Cataract Surgery will be billed as per tariffs for grade II surgery. Please refer the leaflet "Tariffs for Surgeries" or contact billing department for further details.
- · Other charges will be billed on the basis of actuals.
- Choice of lens in the case of open plan will be agreed upon mutually between the patient and doctor prior to the Surgery.
- No Surcharge will be charged if the lens is procured through the hospital.

3) TARIFFS FOR OPHTHALMIC PROCEDURES

CHALAZION

Doctor Fees

Procedure Charges

A - SCAN SONOGRAPHY	Common	Economy	Twin	Special	Deluxe	Super Deluxe	Ex. Suit
Procedure Charges	860	1,120	1,250	1,460	1,510	1.720	1,940
riocedule Citalges	000	1,120	1,200	1,400	1,510	1,720	1,540
PACHYMETRY							
Procedure Charges	860	1,120	1,250	1,460	1,510	1,720	1,940
Doctor Fees	430	560	620	720	750	860	970
PERIMETRY							
Procedure Charges	1,730	2,250	2,510	2,930	3,030	3,460	3,890
Doctor Fees	860	1,120	1,250	1,460	1,510	1,720	1,940
EL LIODESOEIN ANOLOODA							
FLUORESCEIN ANGIOGRAF Procedure Charges	3,110	4.040	4,510	5.250	5.540	6,220	7,000
Doctor Fees	2,510	3,260	3,640	4,240	4,390	5,020	5,650
Anaesthetist-Fees	430	560	620	720	750	860	970
EYE BANK							
EYE BANK Processing Charge	5,240	6,810	7,600	10,630	9,170	10,480	11,790
Processing Charge LASER PANRETINAL PHOTO	OCOAGUL	ATION					
Processing Charge LASER PANRETINAL PHOTO Procedure Charges	OCOAGUL 4,750	ATION 6,180	6,890	8,030	8,310	9,500	10,690
Processing Charge LASER PANRETINAL PHOTO Procedure Charges Doctor Fees YAG LASER CAPSULTOMY	9COAGUL 4,750 4,750	ATION 6,180 6,180	6,890 6,890	8,030 8,030	8,310 8,310	9,500 9,500	10,690 10,690
Processing Charge LASER PANRETINAL PHOTO Procedure Charges Doctor Fees YAG LASER CAPSULTOMY Procedure Charges	9COAGUL 4,750 4,750 3,000	ATION 6,180 6,180 3,900	6,890 6,890 4,350	8,030 8,030 5,070	8,310 8,310 5,250	9,500 9,500 6,000	10,690 10,690
Processing Charge LASER PANRETINAL PHOTO Procedure Charges Doctor Fees YAG LASER CAPSULTOMY Procedure Charges	9COAGUL 4,750 4,750	ATION 6,180 6,180	6,890 6,890	8,030 8,030	8,310 8,310	9,500 9,500	10,690 10,690 6,750
Processing Charge LASER PANRETINAL PHOTO Procedure Charges Doctor Fees YAG LASER CAPSULTOMY Procedure Charges Doctor Fees	0COAGUL 4,750 4,750 3,000 3,000	ATION 6,180 6,180 3,900 3,900 3,900	6,890 6,890 4,350	8,030 8,030 5,070	8,310 8,310 5,250	9,500 9,500 6,000	10,690 10,690
Processing Charge LASER PANRETINAL PHOTO Procedure Charges Doctor Fees YAG LASER CAPSULTOMY Procedure Charges Doctor Fees YAG LASER PERIPHERAL II	0COAGUL 4,750 4,750 3,000 3,000	ATION 6,180 6,180 3,900 3,900 3,900	6,890 6,890 4,350	8,030 8,030 5,070	8,310 8,310 5,250	9,500 9,500 6,000	
Processing Charge LASER PANRETINAL PHOTO Procedure Charges Doctor Fees YAG LASER CAPSULTOMY Procedure Charges Doctor Fees YAG LASER PERIPHERAL II Procedure Charges	0COAGUL 4,750 4,750 3,000 3,000 3,000	ATION 6,180 6,180 3,900 3,900	6,890 6,890 4,350 4,350	8,030 8,030 5,070 5,070	8,310 8,310 5,250 5,250	9,500 9,500 6,000 6,000	10,690 10,690 6,750 6,750
Processing Charge LASER PANRETINAL PHOTO Procedure Charges Doctor Fees YAG LASER CAPSULTOMY Procedure Charges Doctor Fees YAG LASER PERIPHERAL II Procedure Charges Doctor Fees	3,000 3,000 3,000 3,000 4,500	ATION 6,180 6,180 3,900 3,900 7,5,850	6,890 6,890 4,350 4,350 6,530	8,030 8,030 5,070 5,070	8,310 8,310 5,250 5,250 7,880	9,500 9,500 6,000 6,000	10,690 10,690 6,750 6,750
	3,000 3,000 3,000 3,000 4,500	ATION 6,180 6,180 3,900 3,900 7,5,850	6,890 6,890 4,350 4,350 6,530	8,030 8,030 5,070 5,070	8,310 8,310 5,250 5,250 7,880	9,500 9,500 6,000 6,000	10,690 10,690 6,750 6,750

2.700

5,620

3.020

6,260

3.520

7,300

3.640

7,560

4.160

8,640

4.680

9,720

2.080

4,320