# **Quality and Accreditation Institute**

**Centre for Accreditation of Health & Social Care** 



Change Adapt Improve

# FEE STRUCTURE FOR CLINIC ACCREDITATION PROGRAMME

Issue No.: 01 | March 2023

**QAI CAHSC 804** 

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## 1. Fee structure for Clinics operating within India

Facility	Assessmen	t Criteria	Accred	itation Fee
	Final Assessment/	Surveillance	Application Fee	Annual Accreditation
	Renewal		(Rs.)	Fee (Rs.)
	Assessment			
Clinic/	One-person day	One-person day	7500	15000
Dispensary				
Clinic/	One-person day/	One-person day	10000	20000
Dispensary	Two-person days			
with additional				
services				
or				
Polyclinic				

**NOTE:** The man days given above for assessment and surveillance are indicative and may change depending on the Clinic. A nominal fee may be charged for remote or hybrid assessment.

In addition to the above-mentioned fee, GST@18.0 % or as applicable from time to time to be paid.

**Assessment Charges:** In addition to the above fee, Clinic shall bear the cost of following (in case of onsite/hybrid assessment):

- a. Travel of the assessment team
- b. Accommodation and meals

### **Fee Payment:**

### Bank Transfer details are:

Beneficiary name: Quality and Accreditation Institute Pvt. Ltd. Beneficiary address: A-34, Sector 48, Noida-201304, India

Bank Account number: 003105031612

Bank Details: ICICI Bank Limited, K-1, Senior Mall, Sector 18, Noida-201301, India

Bank IFSC Code: ICIC0000031 Bank Swift Code: ICICINBBNRI

PAN No.: AADCI3230L GSTIN: 09AADCI3230L1ZK

Note: Any bank charges for transfer of fee are to be paid by the sender.

	QAI CAHSC 804
Quality and Accreditation Institute	
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Email: info@qai.org.in Website: www.qai.org.in <u>LinkedIn  Twitter  Facebook  YouTube</u>	
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