

Quality and Accreditation Institute

Centre for Accreditation of Health & Social Care



Change Adapt Improve

FEE STRUCTURE FOR AMBULATORY CARE FACILITY-DENTAL ACCREDITATION PROGRAMME

Issue No.: 01 | January 2021

CONTENTS

| Sl.No. | Title | Page No. |
|---------------|---|-----------------|
| 1 | Fee structure for Dental Care Facility (according to the type of Dental Facility) operating within India. | 3 - 4 |

1. Fee structure for Dental Care Facility (according to the type of facility) operating within India

| Type of Dental facility (Number of dental chairs in clinic/ facility without inpatients) | Assessment Criteria | | Accreditation Fee | |
|---|--|--|-----------------------|--------------------------------|
| | Final Assessment/ Renewal Assessment | Surveillance | Application Fee (Rs.) | Annual Accreditation Fee (Rs.) |
| 1-3 | One-man day (1x1) | One-man day (1x1) | 5000 | 15000 |
| 4-8 | One-man day (1x1)/ Two-man days (2x1)/ | One-man day (1x1) | 15000 | 40000 |
| 9-15 | Two-man days (2x1)/ Four-man days (2x2) | One-man day (1x1)/ Two-man days (2x1) | 20000 | 60000 |
| Without inpatient | Four-man days (2x2) | Two-man days (2x1) | 33000 | 110000 |

NOTE: The man days given above for assessment and surveillance are indicative and may change depending on the category of the Ambulatory Care Facility Dental. 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, facility shall bear the cost of following (in case of on-site/ 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.

Quality and Accreditation Institute
Centre for Accreditation of Health & Social Care

Email: info@qai.org.in Website: www.qai.org.in

[LinkedIn](#) | [Twitter](#) | [Facebook](#) | [YouTube](#)