

Bill No. 37 of 2022

THE HEALTH INSURANCE (FOR PERSONS LIVING BELOW
POVERTY LINE) BILL, 2022

By

SHRI JANARDAN SINGH 'SIGRIWAL', M.P.

A

BILL

*to provide for health insurance to persons living below poverty line and for
matters connected therewith or incidental thereto.*

BE it enacted by Parliament in the Seventy-third Year of the Republic of India
as follows:—

1. (1) This Act may be called the Health Insurance (For Persons Living
Below Poverty Line) Act, 2022.

Short title and
extent.

(2) It extends to the whole of India.

2. In this Act, unless the context otherwise requires,—

Definitions.

(i) “person living below poverty line” means a person, whose annual income
from all sources is less than rupees fifty thousand; and

(ii) “prescribed” means prescribed by rules made under this Act.

Health Insurance Scheme.	3. The Central Government shall frame a health insurance scheme for persons living below poverty line.	
Health cards to persons living below poverty line.	4. (1) The Central Government shall, through the State Government or the Union territory Administration, as the case may be, issue a health card to every citizen living below poverty line.	5
	(2) The health card shall contain the details such as name and age, address, details of family members, annual income and such other information as may be prescribed.	
Citizens to approach District Administration if card is not issued to them.	5. Any citizen, who is entitled to a health card but has not been issued the same, may approach the district administration, which shall, after necessary verification, issue the health card.	10
Right of health cardholders to get treatment from hospitals.	6. (1) Any person, who has been issued a health card, may approach any hospital, including a privately run hospital for treatment of self or any of his family member, whose name has been included in the health card.	
	(2) The hospital shall not charge any fees from the cardholder for his treatment or treatment of any member of his family and shall also provide the prescribed medicines free of charge.	15
	(3) The hospital shall make entries in the health card regarding the total expenditure incurred by it in the treatment of the cardholder or his family members and send a copy of the detailed expenses to the Central Government in such manner as may be prescribed.	20
Limit of expenditure on the treatment of cardholders.	7. The total expenditure on the treatment in respect of a health cardholder and his family members shall not exceed rupees twenty-five thousand per year:	
	Provided that the cardholder may submit an application in the form as may be prescribed to the Central Government for enhancing the limit in case of any critical illness and the Central Government may allow an enhanced expenditure for the treatment of the particular disease.	25
Hospitals not to refuse treatment to cardholders.	8. Subject to the provisions of section 7, no hospital shall refuse treatment to any cardholder, on the ground that the cardholder has not made any advance deposit with the hospital for treatment.	30
Procedure for reimbursement.	9. The hospital shall make its claim for reimbursement of expenses in connection with treatment of a cardholder or a member of his family to the Central Government in such manner as may be prescribed.	
Reimbursement to be made within a month.	10. The Central Government on receipt of a claim under section 9 shall process the same and reimburse the expenses within one month of the receipt of the claim to the hospital concerned.	35
Life insurance for nominee of the cardholder.	11. (1) Every cardholder shall be insured for a sum of rupees twenty-five thousand.	
	(2) The amount of insurance shall be paid to a nominee of the cardholder in case of his death.	40
	(3) The premium for insurance of the cardholder shall be paid by the Central Government.	
Penalty for violation.	12. If any hospital refuses to treat any cardholder or member of his family without any valid reason, the Central Government shall issue directions for cancellation of the licence of the hospital.	45

13. (1) The appropriate Government may, by notification in the Official Gazette, make rules for carrying out the purposes of this Act.

Power to
make rules.

5 (2) Every rule made under this Act by the Central Government shall be laid, as soon as may be after it is made, before each House of Parliament, while it is in session, for a total period of thirty days which may be comprised in one session or in two or more successive sessions, and if, before the expiry of the session immediately following the session or the successive sessions aforesaid, both Houses agree in making any modification in the rule or both the Houses agree that the rule should not be made, the rule shall thereafter have effect only in such modified form or be of 10 no effect, as the case may be; so, however, that any such modification or annulment shall be without prejudice to the validity of anything previously done under that rule.

STATEMENT OF OBJECTS AND REASONS

Poor people cannot afford treatment in hospitals as it has become a costly affair. Huge crowds in Government hospitals discourage elderly, physically challenged persons and women from taking treatment there. As a result, they are left uncared for. Even in Government hospitals, they have to spend money on purchasing medicines, etc.

India, being a welfare State, care has to be taken of the under privileged sections of the society by the Government. It is proposed to provide that persons living below poverty line will be allowed to take free treatment in hospitals including private hospitals and there is also a provision for their life insurance.

This, it is hoped, will mitigate the hardship of the poor people to some extent.

Hence this Bill.

NEW DELHI;
10 *February*, 2022.

JANARDAN SINGH 'SIGRIWAL'

FINANCIAL MEMORANDUM

Clause 3 of the Bill provides for a health insurance scheme for all persons living below poverty line. Clause 4 provides for issuance of health cards to all persons living below poverty line to enable them to take treatment in hospitals. Clause 10 provides for reimbursement of expenses by the Central Government to the hospitals concerned. There is also a provision for free life insurance of the cardholder under clause 11.

The Bill, therefore, if enacted, would involve expenditure from the Consolidated Fund of India. It is likely to involve a recurring expenditure of about rupees five thousand crore per annum.

A non-recurring expenditure of about rupees one thousand crore will also be involved for issuing health cards.

MEMORANDUM REGARDING DELEGATED LEGISLATION

Clause 13 of the Bill empowers the Central Government to make rules for carrying out the purposes of the Bill.

As the rules will relate to matters of detail only, the delegation of legislative power is of a normal character.

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(Shri Janardan Singh 'Sagriwal', M.P.)