

**GOVERNMENT OF INDIA
MINISTRY OF HEALTH AND FAMILY WELFARE
DEPARTMENT OF HEALTH AND FAMILY WELFARE**

**RAJYA SABHA
UNSTARRED QUESTION NO. 279
TO BE ANSWERED ON 22ND JULY, 2025**

MEDICAL POVERTY IN THE COUNTRY

279. SHRI MANOJ KUMAR JHA:

Will the Minister of **HEALTH AND FAMILY WELFARE** be pleased to state:

- (a) the percentage of healthcare services in the country being provided by private sector;
- (b) whether Government acknowledges the growing incidence of medical poverty in the country;
- (c) the steps being taken to strengthen public health infrastructure, particularly in Bihar;
- (d) whether Government has any plans to regulate costs in private hospitals and medicines to reduce dependence on private care; and
- (e) whether any measures are being considered to increase public healthcare spending as a share of GDP?

**ANSWER
THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY
WELFARE
(SMT. ANUPRIYA PATEL)**

(a) to (e): 'Health' being a State subject, it is the primary responsibility of States/UTs to provide healthcare services and to strengthen public health infrastructure. Data and details of healthcare services provided by private sector are not maintained centrally.

The Ministry of Health and family Welfare provides technical and financial support to the States/UTs to strengthen the public health care system, based on the proposals received in the form of Program Implementation Plans (PIPs) under National Health Mission (NHM) Scheme. The Government of India has approved several health infrastructure projects under NHM through Record of Proceedings (RoPs) for all the states/ UTs which include construction of various health facilities i.e. District Hospitals/ Sub-Divisional Hospitals / Community Health Centres / Primary Health Centres/ Sub-Centre-Ayushman Aarogya Mandir, Healthcare Wellness Centre, as proposed by States/UTs. Since 2023-24, the Government of India has

supported the proposals of Bihar for the construction/up-gradation of healthcare institutions, which includes strengthening of 23 District Hospitals, 41 Sub Divisional Hospitals, 50 Community Health Centres, more than 300 Primary Health Centres (including day care centres) and 10 drug warehouses.

Further, under Pradhan Mantri Swasthya Suraksha Yojana (PMSSY) All India Institute of Medical Science (AIIMS) has been established at Patna and the Institute is fully functional. Apart from AIIMS Patna, Union Cabinet has also approved setting up of new AIIMS at Darbhanga. Moreover, for expansion and strengthening of tertiary healthcare facilities in the State of Bihar, under another component of PMSSY, upgradation of six Government Medical Colleges (GMCs) on Centre-State sharing basis by way of construction of Super Speciality Blocks, Trauma Centres and Regional Institute of Ophthalmology has been done. These GMCs include (i) Srikrishna Medical College, Muzaffarpur, (ii) Darbhanga Medical College & Hospital, Darbhanga, (iii) Patna Medical College & Hospital, Patna, (iv) Government Medical College, Bhagalpur, (v) Government Medical College, Gaya and (vi) IGIMS Patna.

Under the Pradhan Mantri- Ayushman Bharat Health Infrastructure Mission (PM-ABHIM), the National Centre for Disease Control Branch for the State of Bihar and a Metropolitan Surveillance Unit have been established at Patna, with an aim to augment the States preparedness against Public Health Emergency of Concern by boosting its capacity and capability for regular disease surveillance, outbreak investigation, laboratory testing of high risk pathogens and generating a rapid response to contain or combat outbreaks for the benefit of the local populace of the State of Bihar.

The Central Government enacted the Clinical Establishments (Registration and Regulation) Act, 2010 in order to prescribe minimum standards of healthcare facilities and services uniformly in the country. The Act is applicable to all types of clinical establishments in both Government (except owned, controlled and managed by the Armed Forces) and private health facilities. Under the Act, the Clinical Establishments (Central Government) Rules, 2012 had been notified which stipulates that all clinical establishments charge the rates for each type of procedures and services within the range of rates determined and issued by the Central Government from time to time in consultation with the State Governments. At present, nineteen States/UTs have adopted the Act and other States/UTs have their own Acts. The responsibility of implementation of the provisions of the Act or the corresponding State Acts, as the case may be, lies with the States/UTs.

Moreover, the National Pharmaceutical Pricing Authority under Department of Pharmaceuticals, Ministry of Chemicals and Fertilizers fixes the ceiling price of Scheduled drugs specified under the Drugs (Prices Control) Order, 2013 (DPCO, 2013). The prices of Non-Scheduled formulations are monitored as per the provisions of DPCO, 2013 which mandates that no manufacturer may increase the maximum retail price (MRP) by more than 10% of MRP during preceding twelve months.
