

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

**LOK SABHA
UNSTARRED QUESTION NO. 4356
TO BE ANSWERED ON 11TH AUGUST, 2017**

COSTLY MEDICAL FACILITIES

**4356. SHRIMATI BUTTA RENUKA:
DR. RAVINDRA BABU:**

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

- (a) whether the health services have become beyond the reach of the common people due to high cost charged by the hospitals/doctors;
- (b) if so, any measures are being taken to make the health services affordable;
- (c) whether the Government proposes to regulate the charges levied by private hospitals to make it accessible to poor and if so, the details thereof; and
- (d) whether there is a proposal to bring a legislation on 'Right to Health' covering the entire health services both in Government and private sector hospitals and if so, the details thereof?

**ANSWER
THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND
FAMILY WELFARE
(SHRI FAGGAN SINGH KULASTE)**

(a): As per National Health Accounts 2013-14, the out of pocket expenditure on healthcare as share of total health expenditure is 64.2%. As per Report titled "Health in India" brought out by National Sample Survey (NSS) Office, Ministry of Statistics and Programme Implementation in April, 2016 based on NSS 71st Round (January-June, 2014) conducted by them, around 25% rural households and 18% urban households reported borrowing as the source of finance for meeting the medical (hospitalisation) expenditure.

(b): "Public Health & Hospitals" being a State subject, the primary responsibility for providing free and affordable health services lies with respective State/UT Governments. Technical and financial support under the National Health Mission (NHM) is being provided to States/ UTs for strengthening their health system for provision of accessible, affordable and quality healthcare in public health facilities. Under the NHM, the Central Government is supporting States for provision of a host of free services including for maternal health, child health, adolescent health, family planning, universal immunisation programme, and for major diseases such as Tuberculosis, HIV/ AIDS, vector borne diseases such as Malaria, Dengue and Kala Azar, Leprosy etc. Other major initiatives for which states are being supported for free healthcare services include Janani Shishu Suraksha Karyakram (JSSK), Rashtriya Bal SwasthyaKaryakram (RBSK), Rashtriya Kishor Swasthya Karyakram (RKSK) etc

To reduce out of pocket expenditure and making healthcare affordable to all the citizens, the Government is also supporting States for provision of free essential drugs and diagnostics under NHM Free Drugs Services Initiative and NHM Free Diagnostics Services Initiatives. The Government has recently launched the Pradhan Mantri National Dialysis Programme under NHM for provision of free dialysis services to poor and free universal population based screening and management of common NCDs.

Under the Rashtriya Swasthya Bima Yojana (RSBY), a centrally sponsored scheme, cashless treatment for hospitalisation cases is provided for family of five with insurance upto Rs. 30,000/- per annum for BPL and 11 specified categories of unorganized workers. Further, Senior Citizens Health Insurance Scheme (SCHIS) as top up over existing RSBY scheme has been implemented from 01.04.2016 for senior citizens aged 60 years and above which provides additional coverage of Rs. 30,000 per senior citizen in the family enrolled under RSBY.

(c): Public Health is a State subject. The Government of India has, however, enacted the Clinical Establishments (Registration and Regulation) Act, 2010 and has also notified the Clinical Establishments (Central Government) Rules, 2012 for registration and regulation of all Clinical establishments in the country with a view to prescribe the Minimum Standards of facilities and services provided by them. Currently, the Act is applicable in 10 States namely Sikkim, Mizoram, Arunachal Pradesh, Himachal Pradesh, U.P, Bihar, Jharkhand, Rajasthan, Uttarakhand and Assam and all Union Territories except Delhi. In accordance with the said rules, the clinical establishments(where the said Act is applicable) are to 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. The National Council for Clinical Establishments has approved a standard list of medical procedures and a standard template for costing of medical procedures and the same have been shared with the States and Union Territories. The clinical establishments are also required to display the rates charged for each type of services provided and facilities available, at a conspicuous place in their premises both in the local language and English. However, implementation of the said Act and rules is with the State/UT Governments.

(d): At present, there is no proposal under consideration of the Government to bring legislation on Right to Health.