## GOVERNMENT OF INDIA MINISTRY OF HEALTH AND FAMILY WELFARE DEPARTMENT OF HEALTH & FAMILY WELFARE

# LOK SABHA UNSTARRED QUESTION NO. 2207 TO BE ANSWERED ON 10<sup>th</sup> DECEMBER 2021

#### **REGULATOR FOR HOSPITALS**

#### 2207. SHRI GURJEET SINGH AUJLA:

### Will the **MINISTER OF HEALTH& FAMILY WELFARE** be pleased to state:

- (a) whether the Government has any plan to set up regulator for Hospitals in view of treatment becoming unaffordable for common man;
- (b) if not, the reasons therefor;
- (c) whether the Government is aware that private hospitals have charged exorbitantly during Covid pandemic; and
- (d) if so, the reasons for not conducting forensic audit of big chain of hospitals by the Government?

### **ANSWER**

# THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (DR. BHARATI PRAVIN PAWAR)

(a) to (d) Health is a State subject and it is the responsibility of the State Government to provide affordable treatment to the common man and to take cognizance of instances of unreasonable charges by the private hospitals and to set up such regulators to take action to prevent and control such practices. However, the Government of India has enacted the Clinical Establishments (Registration and Regulation) Act, 2010 (CE Act, 2010) and notified Clinical Establishments (Central Government) Rules, 2012 thereunder to provide for registration and regulation of Government (except those of Armed Forces) as well as private clinical establishments belonging to recognized systems of medicine. The States / Union Territories (UTs) which have adopted CE Act, 2010, are primarily responsible for regulating their hospitals including private hospitals as per provisions of the Act and rules thereunder to ensure provision of affordable and quality healthcare to patients. As per the Act, the clinical establishments are required to fulfill the conditions of minimum standards of facilities and services, minimum requirement of personnel, maintenance of records & reports and other conditions including ensuring compliance to Standard Treatment Guidelines (STGs) issued by the Central / State Government and display of

rates charged by them at a conspicuous place. As on date, the CE act, 2010 has been adopted by 11 States and 6 UTs. Another 17 States and 1 UT have their own Act.

Further, National Council of Clinical Establishments has approved a standard list of medical procedures and standard template for costing which has been shared with all States and UTs, which have adopted the CE Act, 2010 for appropriate action. Implementation and monitoring of provisions of the CE Act, 2010 as well as audit of hospitals are within the remit of respective State / UT Government.