

(b) if so, the details thereof; and

(c) if not, the reasons therefor?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI A. RAJA): (a) to (c) as per the existing procedure, CGHS beneficiaries (both serving and pensioners) have the option of availing general/specialized treatment and diagnostic procedure at private hospitals/diagnostic centres recognised under CGHS after obtaining the recommendation regarding line of treatment from the specialist of CGHS/ Govt. hospital/CMO In-charge of the dispensary and prior permission from the concerned office/Department in the case of serving employees and from the CMO In-charge of CGHS dispensaries in the case of pensioner beneficiaries. In the case of emergency, the CGHS beneficiaries can go to any Govt./Private hospital directly without being referred to by the CGHS dispensaries and thereafter prefer claim for reimbursement of medical expenses to the Government.

There is no proposal at present to deviate from the above procedure and allow the retired-class-I Officers to go direct for medical treatment in private hospitals recognised under CGHS.

High Infant Mortality Rate

1233. SHRI URKHAO GWARA BRAHMA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) the reasons for high Infant mortality rate of seventy per cent in Ind'ra after so much of achievements in the field of medical science; and

(b) Governrterft's plan to reduce the IMR in the country particularly in Assam?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI A. RAJA): (a) and (b) As per the Samle Registration System the infant mortality rate has declined from 110 per thousand live births in 1980 to 66 per thousand live births in 2000. Major reasons for infant mortality include pre-mature Wrths, acute respiratory infections and vaccine preventable diseases like measles. Factors the contribute to high infant mortality include low literacy , and other social development indicators.

Under the Reproductive and Child Health (RCH) Programme under implementation all over the country including Assam, immunization, facilities for prevention of deaths due to acute respiratory infections and dehydration due to diarrhoea and essential newborn care are being provided. Towards improving the nutritional status of infants and children, promotion of exclusive breastfeeding and appropriate complementary feeding practices is being undertaken. Programmes for prophylaxis against Vitamin 'A' deficiency and iron deficiency anaemia are under implementation. To improve outreach of these services, several schemes including organization of RCH Campus, RCH Outreach Scheme, Dia Training Programme are under implementation.

CGHS Dispensaries in Orissa

1234. SHRIRAMACHANDRA KHUNTIA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that CGHS cardholders are not getting proper treatment as there are not adequate dispensaries and recognized hospitals in all States;

(b) the total number of cardholders, dispensaries and recognized hospitals in Orissa; and

(c) whether the Kalinga Hospital, Bhubaneswar, ESI Hospitals namely, Bhubaneswar, Chourda, Rourkeha. Rajgach, Brjanagar are also included in CGHS list of recognized hospitals?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI A. RAJA): (a) The CGHS cardholders get proper treatment in all the CGHS covered cities where primary health care facilities are provided through the CGHS dispensaries and CGHS laboratories. The secondary and tertiary health care facilities are provided to the beneficiaries through State/Central Government hospitals. Further, in most of the CGHS covered cities, private hospitals/diagnostic centres have been recognised under CGHS to enable the beneficiaries avail their services keeping in view the long waiting list in Government hospitals.

(b) and (c) Bhubaneswar is the only city in Orissa where CGHS facilities exist. There is one allopathic CGHS dispensary in Bhubaneswar which caters exclusively to the employees of AG's Office. The dispensary has 2113 card holders and the number of beneficiaries total 9427.