

The National Water Policy, 2002, *inter alia*, asks all State Governments to formulate State Water Policy backed with an operational action plan to achieve the desired objectives.

Frequent outbreaks of vector-borne diseases

*547. SHRI S. THANGAVELU : Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

- (a) whether Government is concerned over the frequent outbreaks of vector-borne diseases, including malaria, dengue, chikungunya and Japanese encephalitis;
- (b) If so, whether Government has asked the State Governments to undertake effective control activities during the inter-epidemic period; and
- (c) if so, the details thereof and the steps being taken by Government to prevent large scale outbreak of these diseases?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI GHULAM NABIAZAD) : (a) to (c) Vector-borne diseases like Malaria, Dengue, Chikungunya and Japanese Encephalitis are reported from different parts of the country, particularly during monsoon and post-monsoon period, due to ecological, climatic and man-made factors. The Government of India, with active support of State/UT Governments, implements measures for prevention and control of vector-borne diseases under National Vector-Borne Disease Control Programme (NVBDCP) within the overall framework of National Rural Health Mission (NRHM). With a view to improving preparedness for effective prevention and control of vector-borne diseases before the onset of the monsoon, the Government of India issued an advisory to all the States/UTs in March, 2012 emphasizing on intensified vector and disease surveillance, and vector control measures like source reduction of breeding sites, indoor residual spray and distribution and use of Long Lasting Insecticidal Nets (LLINs). The State/UT Governments have intensified surveillance, prevention and control activities, and have prepared area-specific action plans for vector-borne diseases as part of the disease control component of Programme Implementation Plan (PIP) for their respective States/UTs under NRHM.

Health insurance for senior citizens

†*548. SHRI RAM JETHMALANI : Will the Minister of FINANCE be pleased to state:

- (a) whether it is a fact that K.S. Shastri Committee had been appointed to consider provisioning of health insurance for people above the age of sixty years in the country;

† Original notice of the question was received in Hindi.

- (b) if so, the details thereof and the responsibilities entrusted to the Committee;
- (c) whether the Committee has submitted its report; and
- (d) if so, the details of action taken so far on the basis of the report?

THE MINISTER OF FINANCE (SHRI PRANAB MUKHERJEE) : (a) to (c) Yes, Sir. The Insurance Regulatory and Development Authority (IRDA) had constituted a Committee on “Health Insurance for Senior Citizens” under the chairmanship of Shri K. S. Sastry, Ex Chairman, National Housing Bank. The Committee was entrusted, *inter-alia*, with the task of identifying the problems in extending health insurance to the senior citizens without any age limit and at affordable cost. This Committee submitted its report to the IRDA in November, 2007.

(d) On the basis of the recommendations of the Committee the IRDA has issued the following directions:

- i. All insurance companies to have an entry age at least up to 65 years and no exit age limit for renewal of all new health insurance products;
- ii. The health insurance policies shall be ordinarily renewable except on the grounds such as fraud, misrepresentation, etc. and renewal cannot be denied on arbitrary grounds;
- iii. The insurers to devise a mechanism to reward policy holders for early entry and continued renewals;
- iv. Premium charged for health insurance from senior citizens should be fair, justified, transparent and duly disclosed upfront;
- v. Any denial of proposal for health insurance for senior citizens, on any ground should be made in writing with proper justification;
- vi. The insurers to establish a separate grievance channel to address health insurance complaints from senior citizens; and
- vii. To allow portability of health policies to enable the policyholders to switch from one insurer to another without losing the past credit of waiting periods for pre-existing disease with the previous insurer.

Revival of sick PSUs

*549. SHRI BHUPENDER YADAV : Will the Minister of HEAVY INDUSTRIES AND PUBLIC ENTERPRISES be pleased to state:-

(a) whether a number of sick Public Sector Undertakings (PSUs) have either been closed down or are on verge of closure;