## Action Balaji Hospital, Pashchim Vihar, Delhi

Removed from CGHS panel as the hospital opted not to continue empanelment on completion of two years of empanelment- w.e.f. 05.04.2013.

[13 AUG., 2013]

## St. Stephen Hospital, Tis Hazari, New Delhi

- Removed from CGHS panel as the hospital opted not to continue empanelment on completion of two years of empanelment- w.e.f. 05.04.2013
- (c) and (d) Government has revived continuous empanelment scheme vide Office Memorandum No: S.11011/23/2009-CGHS D.II/Hospital Cell (Part IX) dated 14.2.2013 for empanelment of eligible private hospitals interested for empanelment under CGHS. As a result, in Delhi NCR 3 Super-specialty hospitals, 17 General purpose hospitals, 51 Eye centres, 15 Dental clinics and 16 diagnostic centres have been empanelled under CGHS under the continuous empanelment scheme till date, in addition to already empanelled health care institutions under CGHS.

## Tax relief on treatment of serious diseases

†883. SHRI RASHEED MASOOD: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

- whether Government has formulated a policy for giving tax relaxation on the expenditure incurred in the treatment of cancer and other serious diseases;
  - (b) if so, the details thereof; and
  - by when this policy will be implemented?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI GHULAM NABI AZAD): (a) Yes.

(b) Under the provisions of section 80DDB of the Income-tax Act, 1961 (the "Act"), a deduction upto Rs.40,000/-, on account of medical treatment of specified diseases is allowed from the total income of the assessee. The limit is increased to Rs.60,000/- if the amount is paid on the treatment of a person who is of the age is 60 years or more. The diseases specified in the Rule 11DD of the Incometax Rules, 1962 (the "Rules") include malignant cancers and expenditure on its

<sup>†</sup>Original notice of the question was received in Hindi.

treatment is eligible for deduction under section 80 DDB. Further, for the salaried class, as *per section* 17(2) of the Act, any amount paid by the employer in respect of any expenditure incurred by the employee on his medical treatment or treatment of any member of his family in respect of prescribed diseases is not treated as perquisite in the hands of the employee. The diseases prescribed under Rule 3A (2) of the Rules include cancer.

(c) Does not arise in view of (a) and (b) above.

## Treatment of kidney diseases

884. SHRI MOHAMMED ADEEB: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

- (a) whether it is a fact that 17 per cent of urban Indians have kidney diseases;
- (b) if so, the details thereof and the reasons therefor, and
- (c) the arrangements in place to treat kidney diseases and the extra efforts being made to tackle it on priority basis?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI GHULAM NABI AZAD): (a) and (b) The exact burden of Chronic Kidney Disease (CKD) in India population has not been studied. However, in some of the small population based studies it was found 0.79% in North India and 0.16% in South India.

- (c) Health being a State subject, the State Governments are expected to plan for and provide such facilities in the Government Hospitals. However, Government of India has taken the following steps to prevent and manage the chronic kidney diseases:
  - (i) Dialysis facility is available with the Central Government Referral Hospitals under the Ministry of Health and Family Welfare like All India Institute of Medical Sciences (AIIMS) New Delhi; Dr. Ram Manohar Lohia Hospital, New Delhi; Safdarjung Hospital, New Delhi; Jawaharlal Nehru Institute of Post Graduate Medical Education and Research (JIPMER), Puducherry; Post Graduate Institute of Medical Education and Research (PGIMER), Chandigarh.

The cardio-vascular diseases and diabetes are the leading causes of chronic kidney diseases. National Programme for Prevention and Control of Cancer,