

1	2	3	4	5
21.	Tripura	1	-	-
22.	Telangana	1	-	4
23.	Uttar Pradesh	3	2	2
24.	West Bengal	5	1	3
25.	Delhi	1	-	9
26.	Andaman and Nicobar Islands	1	-	-
27.	Puducherry	1	-	-
28.	Daman and Diu	-	-	1
TOTAL		72	11	68

* These Referral Food Laboratories work as appellate laboratories for the purpose of analysis of appeal samples of food lifted by the Food Safety Officers of the State/UTs and local bodies and the imported food samples.

Retirement age of faculty at AIIMS

2877. DR. CHANDAN MITRA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government has decided to increase the retirement age of the directors and teaching faculty of AIIMS from 65 years to 70 years;

(b) if so, the details thereof along with the precise reasons therefor; and

(c) the fresh steps taken by Government to meet the shortage of senior and experienced medical teaching faculty at the institutes in various parts of the country?

THE MINISTER OF HEALTH AND FAMILY WELFARE (DR. HARSH VARDHAN): (a) and (b) So far, no such decision has been taken by the Government.

(c) More posts of teaching faculty have been created and some of these posts have been filled up in recent past to meet the shortage of senior and experienced medical teaching faculty.

Regulation of medical treatment charges in private hospitals

2878. SHRI BHUBANESWAR KALITA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government has in its agenda to enact appropriate law for regulating

the various charges and fees charged by the private hospitals and nursing homes which are much higher and beyond the reach of the common people; and

(b) whether Government is contemplating to introduce and launch a Universal Health Care Insurance Scheme with a minimum annual premium payable by the insured person for treatment and hospitalization of common people having a maximum annual income of ₹ 5.00 lakhs per annum?

THE MINISTER OF HEALTH AND FAMILY WELFARE (DR. HARSH VARDHAN): (a) Though, health is a state subject, the Government of India has enacted Clinical Establishments (Registration and Regulation) Act, 2010 and notified Clinical Establishments (Central Government) Rules, 2012 for registration and regulation of the Clinical Establishments. Currently, the Act is applicable in the States of Sikkim, Mizoram, Arunachal Pradesh, Himachal Pradesh, U.P, Bihar, Jharkhand and Rajasthan and Union Territories except Delhi. Other States may adopt the Act under clause (1) of Article 252 of the Constitution.

Under the Clinical Establishments (Central Government) Rules 2012, the clinical establishments are required 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 clinical establishments are also required to display the rates charged for each type of services provided and facilities available, at a conspicuous place both in the local language and English. A subcommittee under the National Council for Clinical Establishments has been constituted for defining the range of rates of procedures and services.

(b) At present, there is no such proposal.

Pendency in issuing of CGHS cards

2879. SHRI C.M. RAMESH: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that there is huge pendency in the issuance of CGHS cards to the employees of Central Government, particularly in Delhi, where cards have not been issued despite their expiry way back in November, 2013; and

(b) if so, the reasons for delay and time by which all beneficiaries will be issued new card?

THE MINISTER OF HEALTH AND FAMILY WELFARE (DR. HARSH VARDHAN): (a) and (b) Yes, there is some pendency in issuing renewed CGHS Plastic Cards to the Central Government Employees.