associated Hospitals are concerned, no complaints has been received till date and medicines contained in the hospitals OPD formulary are distributed free from the OPD Pharmacy. All medicines required for admitted patients are provided free.

Stopping of cashless facility by empanelled hospitals

- 2213. SHRI PARVEZ HASHMI: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:
- (a) whether Government has received complaints that certain CGHS empanelled hospitals have stopped providing cashless facility to the CGHS beneficiaries owing to their huge amount of bills pending for payment;
- (b) if so, the details thereof and the reasons for their pendency along with the action taken/being taken by Government for clearance of the bills at the earliest; and
- (c) the amount spent on major illnesses of CGHS patients during each of the last three years and the current year, State/ Union Territory-wise including Delhi?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) and (b) As per reports received from the field, Grant Medical Foundation, Pune has restricted the cashless facilities to serious/emergency cases only. Another hospital in Ranchi 'Shree Jagannath Hospital and Research Centre' which was empanelled recently on 17/11/2014 had earlier stopped this facility but has subsequently resumed it.

The reason for pendency of payment of hospital bills is insufficient balance of funds available with UTI-ITSL (Bill Clearing Agency). CGHS recoups funds to UTI-ITSL. There was delay in recoupment due to technical reasons. However, efforts are being made to recoup the funds to UTI-ITSL to avoid pendency.

(c) No record of disease wise expenditure is maintained.

Achieving of MDG targets

- 2214. SHRI DEVENDER GOUD T.: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:
- (a) the details of each of the Millennium Development Goals (MDGs) that India mandated to achieve before 2015;
 - (b) whether India is going to achieve all the MDGs by 2015; and

if so, the details of goals that are going to be achieved, likely to be achieved and those would be achieved to the extent of 90 per cent by 2015, goal-wise?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) The United Nations (UN) Millennium Development Goals are eight goals that the UN Members States have agreed to achieve by the year 2015. These are:

- Goal 1: Eradicate Extreme Poverty and Hunger
- Goal 2: Achieve Universal Primary Education
- Goal 3: Promote Gender Equality and Empower Women
- Goal 4: Reduce Child Mortality
- Goal 5: Improve Maternal Health
- Goal 6: Combat HIV/AIDS, Malaria and Other Diseases
- Goal 7: Ensure Environmental Sustainability
- Goal 8: Develop a Global Partnership for Development.

According to the information provided by the Ministry of Statistics and Programme Implementation, India follows the MDGs framework accepted by the Government of India based on 2003 United Nations Development Group guidelines. All the above eight goals, 12 out of the 18 Targets (Target 1 to Target 11 and Target 18) and related indicators constitute India's Statistical tracking instrument for the MDGs.

(b) and (c) According to the 'Millennium Development Goals, India Country Report-2015' brought out by the Ministry of Statistics and Programme Implementation, out of the 12 targets, India has already achieved 4 targets, and will be close to achieving another 5 targets by 2015. The report says that India is lagging behind in respect of 2 targets, and progress on one target is not statistically discernible. However with reference to one (target 6) of the two targets lagging behind, UN Inter Agency and Expert Group has revised the 1990 estimate of Maternal Mortality Ratio (MMR) of India to 560 from 437 estimated earlier and according to this, the country is on track for achieving the target. Goal and target wise achievement is given in Statement.

Statement

MDGs - Targets and Achievements

Goal 1: Eradicate extreme poverty and hunger				
Target 1: Halve, between 1990 and 2015, the proportion of people whose income is less than one dollar a day	On -track			
Target 2: Halve, between 1990 and 2015, the proportion of people who suffer from hunger	Slow or almost off-track			
MDG 2: Achieve universal primary education				
Target 3: Ensure that, by 2015, children everywhere, boys and girls alike, will be able to complete a full course of primary schooling	Moderately on-track			
MDG 3: Promote gender equality and empower we	omen			
Target 4: Eliminate gender disparity in primary and secondary education, preferably by 2005, and in all levels of education no later than 2015	On-track			
MDG 4: Reduce child mortality				
Target 5 : Reduce by two-thirds, between 1990 and 2015, the Under- Five Morality Rate	Moderately on – track			
MDG5 5: Improve maternal health				
Target 6 : Reduce by three quarters, between 1990 and 2015, the maternal mortality ratio	Slow or off-track #			
MDG 6: Combat HIV/AIDS, malaria and other dis	seases			
Target 7 : Have halted by 2015 and begun to reverse the spread of HIV/AIDS	On-track as trend reversal in HIV prevalence has been achieved			
Target 8: Have halted by 2015 and begun to reverse the incidence of malaria and other major diseases	Moderately on-track as trend reversal has been achieved for Annual Parasite Incidence of Malaria and for prevalence of TB			

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Target 9	9: In	tegra	ite t	he pr	inci	ple	of sus	taina	ıble
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MDG 7: Ensure environmental sustainability

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development into country policies and programmes and reverse the loss of environmental resources.

Moderately on-track

Target 10: Halve, by 2015, the proportion of people without sustainable access to safe drinking water and basic sanitation

On-track for the indicator of drinking water but slow for the indicator of Sanitation

Target 11: By 2020, to have achieved a significant improvement in the lives of at least 100 million slum dwellers

The pattern not statistically discernible

MDG 8: Develop a global partnership for development

Target 18: In cooperation with the private sector, make available the benefits of new technologies, especially information and communications

On-track

Drug Resistance Bacteria/Viruses

- 2215. SHRI MANSUKH L. MANDAVIYA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to refer to answer to Unstarred Question 1931 replied on 27th August, 2013 in the Rajya Sabha and state:
- (a) the updated list of bacteria/viruses found in the country that have shown signs of drug resistance in various studies carried out by ICMR or other agencies during the last three years alongwith the reasons coming into light for said resistance;
- (b) the action taken by Government in consultation with the State Governments and other entities to contain this rising trend;
- (c) whether Government intends to send advisory to MCI, IMA, State Governments etc. to curb the tendency of advising unnecessary strong antibiotics to patients thereby making them drug resistant; and

[#] The estimates of MMR in India have been reworked by UN Inter-Agency and Expert Group for the year 1990 and is estimated to be 560 per 100,000 live births. This translates to reducing the MMR from 560 in 1990 to 140 in 2015. Considering the latest estimates of MMR published by the Registrar General and Census Commissioner, India, the Country is on track for achieving target 6.