

(d) Setting up of AIIMS is being taken up in a phased manner having regard to the resources, the timely identification of site(s), fulfilment of the mandatory requirements/criteria and receipt of various due approvals.

**Non-utilization of funds by CGHS**

118. SHRI RAM KUMAR KASHYAP: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether during 2012 to 2015, CGHS could not utilized funds efficiently and miserably failed in expansion of facilities under CGHS and the precious funds allocated for the purpose were surrendered, if so, the details thereof;

(b) the reasons for not utilizing the funds and measures taken to ensure utilization of funds efficiently by CGHS;

(c) the reasons for not issuing medicines prescribed by the doctors of CGHS empanelled private hospitals to the CGHS beneficiary by CGHS dispensaries; and

(d) the steps taken to ensure that medicines prescribed by the doctors of CGHS empanelled private hospitals are issued to CGHS beneficiaries by CGHS dispensaries?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) During 2012-13 and 2013-14 the allocations under Non-Plan Budget were fully utilized. In 2014-15 approximately ₹ 32 crores could not be utilized under Salary Head.

Under Plan Head budget ₹ 19.89 crores in 2012-13, ₹ 46.47 crores in 2013-14 and ₹ 41.18 crores in 2014-15 could not be utilized mainly under Capital Head and Supplies and Materials.

(b) The funds in the Non-Plan Budget were not fully utilized during the FY 2014-15 due to non-filling of vacant posts of GDMOs by UPSC.

In the Plan budget funds could not be utilized due to under-utilisation largely under Capital Head due to delay in requisite approvals and failure on the part of CPWD to execute the work.

Efforts have been made to rationalize the sanctions under Capital works.

(c) OPD consultation and issue of medicines prescribed by doctors of the private empanelled hospitals is not permitted except in post-operative follow-up cases of Neurosurgery, Cardiac surgery (including Coronary Angioplasty and implants), Cancer treatment, Kidney transplantation, Hip/Knee Joint Replacement and Accidents where prior permission has been obtained for follow-up treatment.

In addition OPD consultation is also permitted in satellite cities of NCR, viz., Faridabad, Noida, Gurgaon and Ghaziabad.

(d) Medicines prescribed by doctors of CGHS empanelled hospitals in above cases are issued by the concerned wellness centres as per the available Generic or Brand name.

#### **Cut in expenditure for NHM**

119. SHRI A. K. SELVARAJ: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that the States will have to take up more responsibility for adequately resourcing and effective delivery of health services, if so, the details thereof; and

(b) whether it is also a fact that the expenditure on National Health Mission (NHM) which supports a network of accredited doctors and health activists providing basic services is down by 20 percent, if so, the details thereof?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) In view of the acceptance of the recommendation of the Fourteenth Finance Commission, it has been decided by Government to devolve significantly higher share of the net tax receipts to the States. Since health is State subject, the State Governments would now be in a much better position to provide the requisite outlay from their part. At the same time, adequate budgetary resources have been provided by the Centre for the schemes to ensure that there is no problem in delivery of health care services.

(b) The Budget Estimates of ₹ 18295.00 crore for financial year 2015-16 in respect of National Health Mission (NHM) are more or less equal to the actual expenditure of 2014-15 (The actual expenditure in respect of NHM during the financial year 2014-15 was ₹ 18039.35 crore).

#### **Social impact of expensive healthcare costs**

120. SHRIMATI JHARNA DAS BAIDYA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government is aware that 40 per cent Indians have to either sell their property or borrow money for meeting their hospital expenses for treating illness and 25 per cent people admitted to hospitals slide to below poverty line due to expenses involved in health care; and

(b) if so, the steps taken by Government in this regard till now and the achievement thereof?