

[4 August, 2003]

RAJYA SABHA

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRIMATI SUSHMA SWARAJ): (a) to (c) Adequate measures are taken to prevent baby swapping in Central Government Hospitals.

As Health is a state subject, such matters fall within the purview of the respective State Governments.

Treatment of CGHS beneficiaries in private hospitals

1540. SHRI JANARDHANA POOJARY: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that CGHS beneficiaries can avail the services of private designated laboratories and clinics/hospitals;

(b) if so, the details of such designated laboratories and clinics/hospitals;

(c) whether it is a fact that medicines prescribed by CGHS Dispensaries and designated clinics/hospitals are compulsorily to be obtained from the concerned CGHS Dispensary, where they are mostly not available;

(d) whether it is a fact that private designated laboratories/clinics are refusing to entertain CGHS beneficiaries for inordinate delay in remittance of their service charges by Government; and

(e) if so, the details thereof and the measures taken to rectify the deficiencies?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRIMATI SUSHMA SWARAJ): (a) Yes, Sir. With due permission of the designated authority.

(b) A list of private hospitals/diagnostic centres recognised in various CGHS covered cities is at Annexure-I (See Appendix 199, Annexure No. 9).

(c) Medicines prescribed by CGHS dispensaries/recognised private hospitals are required to be obtained from concerned dispensaries only. Medicines not available in the dispensaries are procured through local purchase and supplied to the beneficiaries.

(d) No such complaints have been received in this regard.

(e) In view of (d) above, the question does not arise.

Central assistance under PMGY

1541. SHRI SATISH PRADHAN: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) the amount of additional Central assistance provided to various States particularly Maharashtra for funding various health schemes under PMGY during the last three years;

(b) the details of utilization of the funds by various State Governments health scheme-wise;

(c) the guidelines for utilization of the PMGY funds for procurement of drugs and medical equipments; and

(d) the details of the increased contribution of the Central Government and the State Government of Maharashtra and utilization thereof in the State, scheme-wise?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRIMATI SUSHMA SWARAJ): (a) and (b) The details of allocation/releases and utilisation of funds by various State Governments including Maharashtra under PMGY during the last three years is at Annexure. However, the utilisation details for the year 2002-03 are in the process of being sent by most of the States.

(c) The guidelines for utilization of PMGY funds for procurement of drugs and medical equipment stipulate that 50% of the funds under Primary Health Sector should go to procurement of drugs other than those supplied under the National Programme/Externally Aided Projects (EAPs) and consumables including reagents/X-ray films etc. for diagnostic and therapeutic procedures and repair of essential equipment. Remaining 50% is utilised for strengthening, repair and maintenance of the infrastructure in the PHC/CHC.

(d) Due to sectoral priorities and overall financial constraints, the Centre could not effect the increase in its total health sector outlay envisaged in the National Health Policy, 2002 during the year