

The Deputy Minister of Irrigation and Power (Shri Hathi): (a) The Hirakud Dam Project will be transferred to the Government of Orissa, for maintenance and operation purposes as soon as they are in a position to take it over.

(b) and (c). No terms and conditions are contemplated in this regard.

Shri Panigrahi: May I know whether it is proposed that when the transfer will take place, the present Hirakud Control Board will be abolished?

Shri Hathi: This Control Board was really meant for the expeditious execution of the project. Because the Orissa State had not adequate machinery, the Central Government took up the execution of the project. Once it is ready, it will be handed over to the State Government. There may not be necessity for a Control Board then.

Shri Panigrahi: May I know whether this transfer will be given effect to before or after the completion of the second stage of the Hirakud project?

Shri Hathi: The idea is to give it before the completion of the second stage. The Orissa Government is only waiting for the full completion of the first stage so that some of the officers and machinery could be utilised for maintenance and operation.

Shri C. D. Fande: May I know if the Government have come to any definite decision or principle that as soon as a big project is completed it will be transferred to the State Government? If so, may I know how far it will be compatible with the financial commitments of the Government of India?

Shri Hathi: Generally, it is the State Governments that are executing almost all projects with the exception of Hirakud. The Hirakud project is the only one which was being executed by the Central Government. All other projects are being executed

by the State Governments. So, the question of transferring the projects to the State Governments would not arise.

सरकारी कर्मचारियों को चिकित्सा:
सम्बन्धी सहायता

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*१७२३. { श्री क० भे० मालवीय :
श्री साहोवालाला :

क्या स्वास्थ्य मंत्री यह बताने की कृपा करेंगे कि :

(क) क्या सरकार सरकारी नौकरों को निःशुल्क चिकित्सा सुविधायें देती है ;

(ख) क्या यह सच है कि ये सुविधायें सरकारी नौकरों को सेवा-निवृत्त होने पर नहीं दी जातीं ; और

(ग) यदि हां तो इसके क्या कारण हैं ?

स्वास्थ्य मंत्री (श्री करमरकर) : (क) विभिन्न चिकित्सा लागू नियमों के मुताबिक केन्द्रीय सरकारी नौकरों को निःशुल्क चिकित्सा दी जाती है। ग्रंथदायी स्वास्थ्य सेवा योजना के अधीन इस योजना के खर्च की पूर्ति के लिये सरकारी नौकर अपने वेतन के मुताबिक ५० नये पैसे से १२ रुपये मासिक तक का भ्रंशदान देते हैं।

(ख) जी हां।

(ग) चिकित्सा सुविधायें सरकारी नौकरों को सेवा रियायत के रूप में दी जाती हैं। जब एक सरकारी नौकर सेवा-निवृत्त हो जाता है तो वह सरकारी नौकर नहीं रह जाता और इस प्रकार इस रियायत का अधिकारी नहीं रहता।

An Hon. Member: English.

Mr. Speaker: The English answer may also be read.

Shri Karmarkar: I take the liberty of saying that the Hindi reply that I read was the translation of an earlier

reply and does not contain something that has been added in the English version. I shall submit to the Lok Sabha in due course a revised answer in Hindi in regard to this addition.

Shri S. M. Banerjee: May I know whether the hon. Minister is aware that a hospital stoppage of Re. 1 for the employee and Rs. 3 for the members of his family is charged, because, the definition of 'family', according to the British rule, was, wife and legitimate children. So, the other members of the family are not given free medical aid. That is what I am saying. The hospital stoppage is there: Re. 1 and Rs. 3. For widowed mother, it is Rs. 8 a day. So, may I know from the hon. Minister whether any decision is likely to be taken in regard to the extension of the definition of the family so as to include a widowed mother and others?

Shri Karmarkar: I am afraid that my hon. friend is referring to some past history.

Shri S. M. Banerjee: Not past history, but recent history.

Shri Karmarkar: The present position is this. As I said, the subscriptions are ranging from 50 naya paise to Rs. 12 per month. The definition of family has been extended to father and mother of the person contributing.

Shri S. M. Banerjee: There are certain Central Government undertakings, for instance, in the Defence Department where the Central Government Contributory Health Service Scheme is not applicable. They have got their own hospital where patients are admitted. They have to pay hospital stoppage fee for father, or widowed mother or unmarried sister. It is Rs. 8 per day—Rs. 3 for hospital stoppage and Rs. 5 as doctor's fee. Will the Government kindly consider this matter which is a very serious one?

Mr. Speaker: The hon. Members might send their suggestions to the

Ministers and not use the Question Hour for making such suggestions.

Dr. Sushila Nayar: May I know if there is any scheme for health insurance including the Government servants, so that after the Government servants retire, the only difference will be that the contribution paid by the Government will also be paid by them—50 per cent. by Government and 50 per cent. by the employees—and after they retire, full contribution will be made by the Government servant? May I know whether Government has any such scheme under consideration, in view of the acute distress that is being caused at present to the Government servants after they retire?

Shri Karmarkar: In the first place, there does not seem to be any reason for the feeling that there is acute distress after their retire. The present arrangement contemplates only those who are in Government service and for one month later, we are not taking, at the present moment, of extending the same facilities to people after they retire.

SHORT NOTICE QUESTION AND ANSWER

Article in 'New Age'

S.N.Q. No. 15. Shri Shree Narayan Das: Will the Minister of Rehabilitation and Minority Affairs be pleased to state:

(a) whether his attention has been drawn to an article published in the "New Age" weekly dated the 13th April, 1958, published from New Delhi, in which some allegations have been made against him; and

(b) if so, what are the facts of the case?

The Minister of Rehabilitation and Minority Affairs (Shri Mehr Chand Khanna): (a) and (b). Yes. It was in 1950 that applications were invited under the Displaced Persons Claims