Registration and Clinical Test Fee

 ★62. SHRIBRIJBHUSHAN SHARAN SINGH: SHRIMATI VASUNDHARA RAJE.

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state

(a) whether the Government have decided to charge fees for registration and other clinical investigations in Government hospitals;

(b) if so, the details thereof,

(c) whether several representations have been received against this decision,

(d) if so, the details thereof, and

(e) the decision taken by the Government thereon?

[English]

THE DEPUTY MINISTER IN THE MINIS-TRY OF HEALTH AND FAMILY WELFARE (SHRI PABAN SINGH GHATOWAR)(a) to (e). A statement is laid on the table of the House.

(a) and (b) Government have recently introduced/rationalised fees for some selected costly and sophisticated tests/investigations in Central Government Hospitals. However, no fees for registration are being charged. The revised fees are mush lower than the commercial rates charged by private hospitals. Government have introduced/revised fees with the ultimate objective of improving the quality of patient care by more rational use and better management of the facilities. Suitable provision has been kept for waiver of charges in case of poor and needy patients. The revised charges as compared to the rates of the private hospitals are given in the Annexure

(c) and (d) A few representations have been received, demanding withdrawal/revocation of the Government order

(e) It has been decided that General ward patients shall be charged only 50% of the revised rates and no charges shall be levied for patients in the Casualty

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Name of the Test	Central Govt. Rate	· Batra Hosptl.	Escorts	Sir Gangaram Hospital NH GOP	Hospital GOPD
Untrasound	150/-	Upper ABD - 400 Lower ABD-350 Pregnancy- 350 Whole ABD 550	750/-	Upper ABD- 500 Lower ABD- 350 Pregnancy- 350 Whole ABD- 650	275 175 175 330
IVP (Test for kidney Ureter etc)	150/-		1050/-	1	
BARIUM MEAL (G.I. TRACT)	150/-	800/-	1050/-	-/006	550/-
ECCHO Cardiography (Heart Function)	250/-	-/00/-		-/006	450/-
TMT (Stress test for heart)	150/-	850/-	-/006	1400/-	-/00/
HOLTER (Ambulatory Mobile ECG)	250/-	1000/-	1200/-	-/008	400/-
Urodynamics Kidney Functions	500/-	400/-		375/-	190/-
Endoscopy Upper & Lower GI	100 /- each	Upper GI- 800		ľ	1
Endoscopy, Bronchoscopy,		Lower GI- 800			

Name of the Test	Central Govt Rate	Batra Hosptl	Escorts	Sır Gangaram Hospital NH GOP	spital ^{EL} GOPD
Cystoscopy (U Bladder)		(a) Colono 800			
		(b) Sigmoid500			
		(c) Bronchoscopy1400 Fiber optic)			
		(d) Cystoscopy 800			
Haemodialysis (Kidney)	500/-	300/-	ļ	400/-	400/- 400/-
EEG for Brain	200/-	400/-		350/-	125/-
LIPID Profile (Blood Test)	100/-	325/-		375/-	190/-
Elisa Test (TB/AIDS)	25/				
Intravenous Urography (Test Kidney Urtelite)	150/	1000/		1000	700
Micturating Cystourethrogram (Test for kidney ureter etc)	150	006	ļ	1000	Oral Answ 00 2 .
RETROGRADE PYELOGRAPHY (Lower Urinary Tract)	150	800		1200	08 14

Name of the Test	Central Govt Rate	Batra Hosptl	Escorts	Sır Gangaram Hospital NH GOPI	ospital GOPD	15 Or
INFUSION PYELOGRAPHY (Lower Urinary Tract)	150	1250				alAnswer
NEPHROCYSTOGRAM (Lower Urinary Tract)	150			800	500	5
BARIUM SWALLOW (Upper GI Tract)	150	450		500	350	
BARIUM MEAL (Upper GI Tract)	150	800		750	500	JUI
BARIUM MEAL (Follow through)	150	1000	1250	1500	950	LY 29, ⁻
BARIUM ENEMA for Rectum Colon & Intestine	150	800	1250	1000	650	1993
ORAL CHOLECYSTOGRAPH (Gall Bladder)	150	006		200	450	
INTRAVENOUS CHOLANGIOGRAPHY (Gail Bladder)	150			1500	950	
HYSTEROGRAPHY (Uterus)	150	650				Oral An
MYELOGRAPHY SPINAL CORD	150	1200		1800	400	swers
						16

Name of the Test	Central Govt Rate	vt Batra Hosptl	1	Escorts	Sir Gangaram Hospital NH GOP	r Hospital GOPD	17 Oi
T TUBE CHOLANGIOGRAPHY (Gall Bladder/Bile Duct)	150	800			700	450	ral Answer:
VENOGRAPHY (veins)	150				1000	650	S
PERIPHERAL ARTERIOGRAPHY (Blood Vessels)	150				1000	650	SR
SINOGRAM (Nose & Sinuses)	25	450			600	350	AVAN
SIALOGRAPHY (salivary glands)	50	006			006	550	A7 19
DACRO CYSTO RHINOGRAPHY (tear glands)	150				500	350	915 (SAK/
NURSING HOME Ordinary New N H	250	Single Room 700	Ordinary	1700	Ordinary	450	4)
Delux Old N H	500	Double Room 390	Delux	2000	Delux	750	С
		VIP Suits 1250)ral Ansi
Please Note 1 Indicates facility not available	ot available						wers

17 Oral Answers

SRAVANA7 1915 (SAKA)

Oral Answers 18

	Central Govt	Batra Hosptl	Escorts	Sir Gangaram Hospital	lospital
	Rate			HN	
2 Rates effective from					
Central Government	1 6 1993				
	1 7 1993				
	1 4 1993				
Hospital	1992				

[Translation]

SHRIBBIJBHUSHAN SHABAN SINGH Mr. Speaker, Sir, in his reply the Minister has submitted that the powers to relax the fees to be charged from the poor and the needy persons have been given to the Superintendent Recently, an ex-serviceman Shri Radhey Shayam Shukla tried to meet superintendent Mr. Raito get some tests carried in Safdarjang Hospital What I mean to say is that you have given the powers to give concessions in charges to the Superintendent Butyou have provided powers through which he can give concessions to his relatives etc through backdoors I would like to know whether this backdoor arrangement would go on or the Government is trying to fix any norms for defining the term 'poor and needy'?

[English]

SHRI PABAN SINGH GHATOWAR Sir we have authonsed the Medical Superintendent of this Hospital to give relief to the poor patients who are coming to his hospital. There is a clear instruction to the medical Super intending. I do hon Memberhas mentioned about one case but there are many cases where there are long waiting list. So for that reason-may be I do not know exactly there may be the complaint. If the hon. Member passes that complaint on to us definitely we will examine that

MR SPEAKER The question was whether you have decided about the criteria to decide who is poor?

THE MINISTER OF HEALTH AND FAM-ILY WELFARE (SHRI B SHANKARANAND) Mr Speaker Sir there are a large number of patients every day, attending to the hospitals There are about 150 tests which are done individually for all those things. The House may appreciate that out of 150 tests only 30 tests have been chosen for levying the charges as perour decision. The House may kindly appreciate that these tests are usually cornered by these people who can influence the hospital authori ties And the hon Member is right I do not disagree with him But it is not always the case We want to take money from those people who are able to pay and not from those who cannot pay Forthis purpose who is the person who can decide as to who is poor and who is not poor? If we can see on the very face of the patients, it is very easy to decide whether he is poor or not poor so, it is not I, who can decide it But, usually what happens is that the people who are related to the hospital employees the people who are related to the officers the people who are related to the higher ups are taking on these facilities We want that these fellows should pay and not the poor That is why we have done

[Translation]

SHRI NITISH KUMAR Even the richest person of my area does not appear to be affluent and looks like a labourer

SHRI BRIJBHUSHAN SHARAN SINGH Mr Speaker Sir the comparative statement presented by the hon Minister is before me Rates of clinical tests of Batra Escorts and sir Ganga Ram Hospitals have been compared with the charges of other government hospitals Has the Government pondered over whether the farmers also go to Batra hospital? Even the farmers of to Batra and Escorts hospitals | would like to know whether the interests of the slum dwellers labourers and farmers have also been taken care of by the Government? I would like to submit not to compare with the financial/ economic condition of the poor farmers and labourers I would like to know whether in view of the economic condition of these people the Government proposes to reduce the difference in the charges? It will be nice if this is done away with (Interruptions)

[Translation]

AN HON MEMBER Mr Speaker Sir again same sort of reply

MR SPEAKER Who is affluent will be

24

23 Oral Answers

decided and not who is poor The hon Minister has also stated that only the rich will be charged and not the poor

[English]

SHRIMATI VASUNDHARA RAJE Sir I gather from the Mantriji that the question does not seem to be great importance to him because he seems to be miring the reply in whole lot of contradictions. He definitely seems to be agreeing with us that very many poor people are not going to be able to get suvidha that he is talking about. But, at the same time, he is the able to tell us clearly what he intends to do about it

From my colleague s question I would just like to follow up. The Minister in his answer that the revised fees are lower than the commercial rates charged by the private hospitals. In the schedule that he has presented to us I would like to take up just two points. The kidney function test in a Government hospital is Rs 500 In a non-Government hospital it is Rs 400 Haemodialysis in a Government hospital is Rs 500 In a non-Government private-hospital it is Rs 300 I mean there alone you can see the contradiction ljustwanttoaskhim how will the needy patient manage to get to the Medical Super intendent to get this suvidha? In this situation why does not the Government delegate the powers of waiver to over competent doctors in the various departments?

Also, has the Government taken into account the fact that by charging these clinical test fees the Government doctors will be drawn into the net of the Consumer Protection Act? This will have terrible consequences because they will refuse to examine a number of patients which is normally done. The will also be a tendency to over-investigate the cases. In that situation how will you protect the patients' interests?

Lagree with my colleague completely L think that tests of this sort, considering that they are going to have a bearing on the poor persons, need definitely to be cancelled. If you agree that It is only the richer people and people with influence who have access, who are going to be able to get these tests done, what is the point in having the fees?

I suggest that you should stand up on the floor of the House and tell us that these fees will be cancelled so that the poor people will gain from this decision

SHRIB SHANKARANAND Sir first of all I want to dispel the fear of the House as it all the rests are being charged from every patient It is not so About 75 to 80 percent tests are made even today (Interruptions) We have reviewed this. Whateverfeewe are charging, we have reduced by 50 per cent Recently, a decision has been taken on the representations made by various bodies Fifty percent charges will be for general ward patients whereas the special ward patients-usually who can pay-are in the special wards (Interruptions) This is reason that these tests are being charged. The hon-lady Member is correct that in two cases, the charges levied by us are very much above. We propose to reduce those charges

The suggestion made by the hon lady is that about the facilities to be provided the waiver authority should be given to the heads of departments

We will consider this suggestion

SHRIMATI VAS UNDHARA RAJE Sir what about consumer protection then? Since you have agreed that the poor person

SHRI B SHANKARANAND I think this fear of yours has no bais

DR VASANT NIWRUTTI PAWAR Mr Speaker Sir hon Ministerhas stated in his reply that the rates are rationalised for investigations like Banum Meal, Oral Cholecystograph, Intravenous Pilography Echo Cardiography, Ultrasond and others My question is if the patient comes as an accident case or an emer SRAVANA7 1915 (SAKA)

gency case or a medico-legal case will the Government treat that patient free of cost?

SHRIB SHANKARANAND We have al ready taken decision in this regard

[Translation]

DR G L KANAUJIA Mr Speaker Sir I would like to subject to the hon. Minister that for the last 37 years I have been observing that the poor are not being benefited by the scheme of waiving the fees Formany a reason the poor are not getting the benefits Acquaintances of the workers and paramedical staff get all the ben efits Therefore I would like to suggest that these benefits would be given on the basis of produc tion of income certificate Though it is being claimed that registration fees are not being charged yet the factual position is otherwise. I ontradict this claim. In Batra, Escorts and other hospitals charges vary between Rs 1500 to Bs 2000 as has been shown in the statement and even the fees charged by the Central Govern ment hospitals is not more than the fees charged by other private hospitals. This list is not correct I would like to know whether the fee list shown scorrect and if not the reasons therefor?

Translation

Bomb Blasts in Bombay

BHAVNA

·**%**63 SHRIMATI CHIKHALIA SHRIBOLLA BULLI RAMAIAH

Will the Minister of HOME AFFAIRS be pleased to state

(a) the number of persons arrested in con nection with the bomb blasts in Bombay

(b) the number of cases registered and number of persons charge sheeted

(c) the number of persons released

(d) the number of alleged accused yet to be arrested

(e) whether the Government have ordered an inquiry by the Central Bureau of Investigation (CBI) into the incidents

(f) if so, the details thereof

(g) if not the reasons therefor and

(h) the time by which the investigations are likely to be completed?

THE DEPUTY MINISTER IN THE MINIS TRY OF HOME AFFAIRS (SHRI RAM LAL RAHI)(a) to (h). A statement is laid on the Table of the House

STATEMENT

(a) 142

(b) 23 cases have been registered the charge sheets are yet to be filed

(c) 7 persons have been released on bail under Court orders

(d) 24

(e)to(g), A Task Force comprising senior officers of CBI and Central Intelligence Agen cies has been set up to assist the ongoing investigations by Bombay Police The CBI shall take over the cases after the cases have been charge sheeted

(h) Maharashtra Government have reported that the investigations are likely to be completed by the third week of August 1993

SHRIMATI BHAVNA CHIKH LIA Mr Speaker Sir it is a matter of grave concern that explosives and arms are being smuggled into the country on a large made and infiltration of trained extremists from across the border is also taking place to destabilise the country