

1	2	3	4	5
11.	Tamil Nadu	Water Resources Consolidation Project	40.00	20.00
12.	Uttar Pradesh	Rajghat Dam	6.00	3.00
		Sharda Sahayak	20.00	10.00
		Upper Ganga Modernisation including Madhya Ganga.	20.00	10.00
		Sarju Nahar	18.00	9.00
13.	West Bengal	Teesta	5.00	2.50

(b) No Special Central Assistance has been given to the Government of Kerala by the Union Government for Muvattupuzha Valley Irrigation Project.

(c) Irrigation is a State subject and the funds for implementation of Irrigation Schemes are provided by the States in their annual budget. Central assistance is in form of block grants and loans not tied to any sector of development or project. No information about diversion or temporary withdrawal of funds from the project by the Government of Kerala is available at the Centre.

(d) The Government of Kerala has proposed inclusion of the project for Central Loan Assistance under Accelerated Irrigation Benefits Programme (AIBP). No funds are proposed for this project under AIBP during 1996-97.

[Translation]

Polio Patients

*247. SHRIMATI BHAVNA BEN DEVRAJ BHA: CHIKHALIA : Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state :

(a) the estimated number of the polio patients in the country at present;

(b) the reasons for increase in the number of the polio patients;

(c) the measures taken to check the increase in the number of polio patients; and

(d) the schemes proposed to be launched by the Union Government for the purpose?

THE MINISTER OF STATE OF THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI SALEEM IQBAL SHERVANI) : (a) 779 cases of poliomyelitis have been reported by the districts till 30.10.1996 for the year 1996.

(b) The number of reported cases has come down from 28343 in 1987 to 8675 in 1995 (provisional data, source Central Bureau of Health Intelligence).

(c) and (d). There has been no increase in polio cases. However, during 1995-96 the Government of

India have launched the Pulse Polio Immunization programme with the objective of eradication of Poliomyelitis.

[English]

SPDA in Assam

*248. SHRI DWARAKA NATH DAS : Will the Minister of HUMAN RESOURCE DEVELOPMENT be pleased to state :

(a) the number of Sports Project Development Areas (SPDA) set up in Assam and the other States, location-wise;

(b) whether there is any SPDA in southern Assam also; and

(c) if not, the reasons therefor?

THE MINISTER OF HUMAN RESOURCE DEVELOPMENT (SHRI S.R. BOMMAI) : (a) Only one Sports Project Development Area (SPDA) has been set up in Assam at Golaghat.

The details of the SPDA Centres set up in other States, location-wise are given in the statement attached.

(b) and (c). No, Sir. No proposal has been received for any SPDA in southern Assam.

STATEMENT

Details of SPDA Centres which are functional

S.No.	Name of State	Location of SPDA Centre
1	2	3
1.	Andhra Pradesh	1. Eluru 2. Nizamabad
2.	Assam	1. Golaghat
3.	Gujarat	1. Rajkot 2. Devgarh Baria
4.	Haryana	1. Kurukshetra
5.	Himachal Pradesh	1. Dharamshala

1	2	3
6. Karnataka		1. Medicary 2. Dharwad
7. Kerala		1. Kollam 2. Thissur
8. Madhya Pradesh		1. Bhopal 2. Jabalpur
9. Maharashtra		1. Burdana
10. Meghalaya		1. Shillong
11. Orissa		1. Dhenkanol
12. Punjab		1. Ludhiana 2. Patiala
13. Rajasthan		1. Ajmer 2. Jodhpur
14. Tamil Nadu		1. Salem
15. Uttar Pradesh		1. Safai 2. Rai-Bareilly
16. West Bengal		1. Lebong 2. Burdwan

Private Hospitals attached with CGHS

*249. SHRI PRAMOD MAHAJAN :
SHRI TARIQ ANWAR :

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

(a) whether the Government have issued any instructions to the effect that Government servants and all others entitled to avail themselves of CGHS facilities can get their treatment in private hospitals;

(b) if so, the details of facilities/specialised treatment allowed and the names of private hospitals, where such treatment has been permitted;

(c) the details of the procedure for approaching private hospitals by CGHS beneficiaries and how the expenses on treatment will be met;

(d) whether the CGHS beneficiaries will be left at the mercy of the hospital doctors, who are authorised to refer their cases to private hospitals;

(e) if so, the reasons therefor and the steps being contemplated to ensure that CGHS beneficiaries may be able to get deserving treatment from competent private hospital without any undue interference by doctors of Government hospitals; and

(f) the manner in which this procedure will reduce the pressure on Government hospitals?

THE MINISTER OF STATE OF THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI SALEEM IQBAL SHERVANI) : (a) to (c). With the objective of augmenting the facilities under CGHS, Government have recognized

several private hospitals and diagnostic centres in Pune, Calcutta, Hyderabad and Delhi.

With effect from 21-6-96, CGHS beneficiaries have the option of availing of specialized treatment either in the Government hospitals extending CGHS cover or at a CGHS - recognized private hospital, after obtaining the recommendation of the CGHS specialist or the Government hospital as the case may be. A list of such hospitals is enclosed as statement along with the type of medical procedure for which each of the hospitals has been recognized under CGHS.

In case of serving employees, permission would be accorded by the official's parent Department/office, while for pensioners, M.Ps, former Governors, etc., permission would be accorded by the Chief Medical Officer in-charge of the concerned CGHS dispensary.

The expenditure to be reimbursed would be restricted to the package deal rates/rates approved by the Government from time to time.

The case the beneficiary desires to avail of treatment in a city other than where his token card stands issued, permission for the treatment can be given by Director/Addl. Director (CGHS) of the city but no TD/DA would be admissible unless the specialised facility does not exist in the city where he is covered under CGHS.

Medical facilities can be availed of by CGHS beneficiaries only from the private hospitals recognized by CGHS and after obtaining the prior permission of the competent authority.

(d) to (e). No Sir. In fact, Government have simplified the procedure for referral to private hospitals. The beneficiaries now have the option of availing specialized treatment at a CGHS recognized hospital of their choice, after due recommendation by a specialist of CGHS/government hospital. Even the necessity for obtaining "No Bed" certificate from a government hospital has now been done away with.

(f) Since CGHS beneficiaries now have the option of going to private recognized hospitals and diagnostic centres of their choice, the burden on Government hospitals would be reduced to that extent.

STATEMENT

Pune

1. Sharda Clinic
408/1, Ghorpade Pet, Pune - 042.
- Orthopaedic only.
2. Hardikar Hospital
Ganeshkind Road, Pune, 005.
- Orthopaedic only.
3. Pune Medical Foundation (Ruby Hall Clinic)
40, Sansoon Road, Pune - 001.
- All purpose.