



# ***“Improving the State of Private Hospitals in Delhi”***

**Collective inputs from over 25,000 Delhi Citizens in**

**“Citizen Oriented Healthcare in Delhi”**

***(Current state, Issues, Root Causes and Proposed Solutions)***

***June 05, 2015***

## Private Hospitals in Delhi

### Executive Summary

Delhi has more than 50 private super-specialty hospitals. Doctors say the practice of setting financial targets for various specialties, for example cardiology, orthopaedics and transplant centers, is common in most big corporate-run hospitals. Although these hospitals have excellent facilities, much is left to be desired in terms of transparency and accountability to citizens.

The 25,000 strong “Citizen Oriented Healthcare In Delhi” online community has come together to collectively identify the key issues, root causes and solutions for Improving the State of Private Hospitals in Delhi and the community expects that the Government will work towards implementing the identified solutions.

### Issues Identified:

1. Private hospitals charge exorbitantly
2. The grievance cells in private hospitals are terrible
3. Customer complaints are not addressed properly
4. The private hospitals in Delhi lack transparency
5. Patients are asked to get admitted even if they don't really need admission and room
6. Patients stay in the hospital is unnecessarily prolonged for additional revenue
7. Unnecessary tests are ordered just to increase revenue
8. Consultation fees in private hospitals is high and now 1000-1500
9. Room rent in private hospitals is steep
10. The rates of tests are also very high in private hospitals compared to the outside labs
11. They take a long time to admit emergency accident cases
12. Patients with insurance are charged more compared to the others
13. Patients from EWS section entitled to treatment are discouraged by making them buy expensive medicines/paperwork
14. Doctors operate by invoking a sense of fear in the patient
15. CGHS billing by private hospitals lacks transparency
16. Charitable trust mechanism used by private hospitals gives them discounted land and income tax breaks while no charity is done.

## Root Causes Identified:

1. Private hospitals are run like business houses with profit being the main focus
2. Focus is more on sales rather than customer service
3. Private hospitals use many unethical ways of working and try to keep it hidden from the patients
4. Doctors are given revenue generation targets by the hospital and their compensation is linked to it.
5. Private hospitals have a corrupt nexus with insurance companies
6. Lack of Government regulations to control the fees charged by the doctors in private hospitals
7. Private hospitals invest heavily on ambiance and hence charge accordingly
8. Patients treat doctors as god and keep following what they say
9. No cap on the room rent charged by private hospitals
10. There has been conflict of interest for Government administrators and their ownership/interest in private hospitals.

## Solutions Identified:

1. Health Ministry should set up a bench to overlook the workings of private hospitals
2. Grievance redressal cells should be made stronger and more effective
3. A turn-around-time should be fixed for all grievances
4. Private hospitals should bring more transparency in their working so that the patients could trust them more
5. Hospital caught indulging in unfair means like unnecessarily prolonging patient stay, ordering non-required tests etc. should be heavily penalised
6. Government should put a cap on the maximum consultation fees a doctor in a private hospital can charge
7. Patients should be able to choose a doctor as well as a hospital facility where he would like to be treated. The doctor and hospital might not be linked with each other
8. The compensation of the Doctor at private hospitals must be completely de-linked from the revenue that is generated by the Doctor for the hospital
9. Private hospitals should make rooms at different price ranges for different classes of patients
10. The emergency accident victims should be attended without any questions or delay
11. The nexus between private hospitals and insurance companies should be broken

12. The linkage between charitable trust and their conversion to private hospitals must be investigated to ensure it is not a mechanism to acquire land at zero or concessional prices
13. Since hospitals get land at a concessional rate, they should be forced to adhere to the EWS policy
14. It should be made mandatory for the private hospitals to disclose how many free beds are allocated and how many patients have been treated from economic weaker sections on a monthly basis
15. All private hospitals must pay full income taxes like other private businesses
16. Government should monitor EWS category scheme closely.

### **Improving Private Hospitals in Delhi – a few citizen posts and comments:**

1. In the private hospitals for a normal delivery- charges comes to Rs. 60 to 70 thousand ( Govt. should make the policy or affordable packages in the economy wards) if patient wish to go for higher category of rooms let the hospitals charges according to their policy – **Tara Phulara**
2. Govt. should monitor EWS category scheme closely, they should depute volunteers in the govt. hospitals and can coordinate with these hospitals and send the EWS patients to private hospitals – **Tara Phulara**
3. Some authorized Guides with Name Plates, needs to be deployed at AIIMS in and out, from whom a patient/attendant can take help etc. etc. i.e. whereabouts of Lab./Doctor/blood bank/canteen/pharmacy etc. etc. I have seen many of patients /attendants are asking either other patients/attendant or Staff/Doctors/Nurses to guide them about the ways, going to concerned lab./bank/canteen etc. etc. and half of their time is wasted for searching concerned windows, Doctors, places, they wish to go for consultations/treatment/tests – **Ramesh Bhardwaj**
4. The main concern for me when I go to a private hospital is that they will overcharge me by prescribing unnecessary tests and high canonisations fees. This should be tackled firmly. Secondly the nexus between pharma companies and doctors/hospital should be done away with as costly and unnecessary drugs are prescribed in lieu of gifts etc. – **Praveen Sundriyal**
5. The business of private hospital is indeed purely profit oriented and though they fill a big gap between non availability and non-existent, over crowded, Govt. facilities and that of exorbitantly charged private facilities- which too are overcrowded - yet one cannot and should not expect that doctors and hospital should provide affordable, cheap rates for an average middle class or poor patients, because any one who invests money in creating these facilities, does so for profit – **Yogender Sharma**

6. There are ways of regulating the private hospitals, especially since most of these got lands at concessional rates. There is a provision for free treatment for needy patients. However, this is confined mainly to consultation, and bed availability if at all, and not to provision of tests/treatment etc. Therein lays the rub. This has been a struggle for many years, with private hospitals refusing to admit free treatment/path tests etc. However better enforcement on a regular basis of the regulations of the private hospitals is definitely called for – **Narayan Balachandran**