

**THE WEST BENGAL CLINICAL ESTABLISHMENT
REGULATORY COMMISSION.**

Present: Justice Ashim Kumar Roy, Chairperson.

Dr. Sukumar Mukherjee, Member.

Dr. Makhan Lal Saha, Member.

Dr. Madhusudan Banerjee, Member.

Dr. Maitrayee Banerjee, Member.

COMPLAINT ID: NPG/2017/000240.

Mr. Soumya ChakrabortyComplainant.

-versus-

Charnock Hospital Pvt. Ltd & other.....Respondents.

Date of judgment: 11th April, 2018.

J U D G M E N T.

The case of the complainant relates to overbilling towards the treatment of his wife Moutusi Paul at Charnock Hospital.

2. Upon receipt of the complaint, a notice was issued against the Clinical Establishment, Charnock Hospital calling for the medical file, bills and their reply.

3. The Clinical Establishment duly responded and submitted their reply together with medical file and bill details.

4. Now going through the medical file, we find that on November 20, 2017 at around 2:14pm, the wife of the complainant Ms. Moutusi Paul, aged about 31 years, was admitted at Charnock Hospital under Dr. Jayanta Sharma with viral exanthematous fever and then was discharged on 24.11.2017. The patient was initially admitted in general bed and then was shifted to deluxe cabin. On 20.11.2017 she was seen by Dr. Jayanta Sharma, who advised IV fluid and other drugs including injection sumol and few other investigations. On that day (i.e. on 20.11.2017) no chest x-ray was advised. However on 21.11.2017 urgent chest x-ray and USG of whole abdomen were advised. On that very day at around 10:45am, the patient was seen by a dermatologist. On 21.11.2017 by 10:30pm reports of all tests were obtained and the results were noted in the treatment sheet. Although, on 21.11.2017 at 4pm the USG findings Mild hepatomegaly with PCOD in both ovaries was noted in the treatment sheet, but not in any part of the treatment sheet related to 21.11.2017, the findings of chest x-ray was recorded. It appears from the clinical note recorded at 9:30am on 22.11.2017, the patient was afebrile (free from fever) and Dr. Jayanta Sharma advised for Measles IgG and IgM. In the treatment sheet, there is a note on 23.11.2017 "chase measles IgM and IgG", on the same day, Dr. Jayanta Sharma examined the patient and found she was improving. On 24.11.2017 at around 8:15am there is another note in the treatment sheet "Measles IgM and IgG"—chase report and doing well, no fever, omit iv drip, discharge CM and accordingly, on the same day, patient was discharged with the advice to stay in isolation at home. It appears that no report of IgG and IgM were made available to the patient party i.e. on 24.11.2017 and they got it three days after i.e. on 27.11.2017.

5. It was also the case of the complainant, in the same hospital for USG of whole abdomen Rs.1900/- is charged for a OPD patient. Whereas a sum of Rs.4100/- was charged from the patient party for the same test (USG whole abdomen) which is abnormally high in comparison to the charges of other hospitals. Besides that, Charnock Hospital charged the patient Rs.4850/- for IgG and IgM for Measles and those tests were done not at the in house pathological laboratory of the Clinical Establishment but at Dr Lal Path Laboratory. It is their further case that the Dr Lal Path Laboratory for such test charged Rs.2850/-. Therefore, the Charnock Hospital charged Rs.2000/- in excess.

6. Going through the Bed Head Ticket and considering the nature of treatment provided, tests advised, we find that the patient was treated as per standard guidelines.

7. However, going through the bills, we find quite a large number of irregularities in billing and those are as follows,

- a) The patient was charged Rs. 568/- for four (04) number of IV cannulas (Venflon) Rs. 132/- per cannula.

During the hearing, the patient Moutusi Paul was examined on oath and in her evidence she categorically claimed that two 'IV cannula (Venflon)' were used for her, one on 20.11.2017, and another on 22.11.2017. Her such evidence went unchallenged.

Therefore, it appears that the Clinical Establishment charged the patient for two (02) 'IV Cannulas (Venflon)' without at all using the same for her treatment. On this account the patient was charged an extra amount of Rs.264/-.

- b) Next, it was the unchallenged evidence of the service recipient (patient) that only one IV set was used for transfusion of saline during her four days treatment in the hospital but the patient was charged Rs.347/- for three number of IV set on 20.11.2017 itself.

Therefore, the patient had to pay prices for 2 IV set, Rs.232/- without the same being used for her treatment.

- c) Patient was prescribed Inj Sumol (Paracetamol) by her treating doctors. However, the hospital instead of Inj Sumol administered Inj Kabipara. While MRP of Inj Sumol is Rs.176/-, the MRP of Inj Kabipara is Rs.308/- per bottle. Consequently, the patient has to pay a total sum of Rs.2772/- for 9 bottles of Inj Kabipara and if the Inj Sumol had been administered that would have cost Rs.1584/- only. Thus the patient had to incur an excess amount of Rs.1188/-. According to the Clinical Establishment, since Inj Sumol was not available at their in house pharmacy and there was only a stock of Inj Kabipara they had to use it instead of inj sumol. Now what is striking, before using a costly brand medicine, the patient party was not offered to obtain such medicine from the open market that would have been cost them less, more particularly when, no case is made

out by the clinical establishment that Inj Sumol was not available in the open market and the total number of 9 Inj Sumol were not an emergency requirement.

- d) The patient has to pay Rs.550/- and Rs.700/- respectively for two number of Chest X-rays. According to the bill first X-ray was done on 20.11.2017 and the second one on 21.11.2017.

However, patient in her evidence on oath categorically claimed, he underwent only one chest X-ray on 21.11.2017 and same went unchallenged. In addition to above in the bed head ticket, there is no note that on 20.11.2017, there was any advice for Chest X ray to be done which supports the case of the complainant.

Although, the clinical establishment in their affidavit claimed that two x-rays were done, one on 20.11.2017, while she was in general bed and another on 21.11.2017 while she was in deluxe cabin, ultimately, however, Dr. Utpal Chatterjee in his evidence admitted that only one x-ray was done and by mistake the patient party was charged for two. The Counsel representing the clinical establishment also admitted only one chest X ray was done.

Furthermore, the variation of cost of same X-ray, merely because the nature of accommodation, one for ward and another for deluxe cabin is not at all justified.

- e) The Patient underwent USG for whole abdomen on 21.11.2017 as an indoor patient, for which she was charged Rs.4100/-. Dr. Utpal Chatterjee in his evidence admitted that in case of a OPD patient the charge for the same USG is Rs. 1900/-.

The representative of the Clinical Establishment has no satisfactory explanation for this huge difference except submitting that this is their policy to charge more for indoor patient and further to charge extra for a patient in deluxe cabin. This explanation is not at all justifiable.

- f) The patient was charged Rs. 4850/- for blood test of Measles IgG and IgM on 22-11-2017. Those tests were not done at the in house pathological lab of Charnock Hospital but the same was done at Dr Lal Pathology Laboratory. In the complaint, the complainant claimed the rate of such tests at Dr Lal Pathology Laboratory is Rs. 2850/-.

According to the representative of the Clinical Establishment that their concern has a MOU with Dr Lal Pathology Laboratory and according to the same there is an arrangement for collection of blood sample from indoor patient by the staff of the Dr Lal Pathology Laboratory directly and it was their duty to deliver such report at the Clinical Establishment. According to the said MOU against each test the Clinical Establishment shall get 30% discount over the rate on which those tests are done for the public.

Therefore, the Clinical Establishment has charged Rs. 2000/- extra from the patient party for blood test besides having enjoyed 30% discount on the actual rate of Rs. 2850/- from Dr Lal Path Laboratory. The patient party paid extra of Rs. 2000/-.

g) During the course of her treatment, she underwent a number of tests.

We find the patient was charged Rs.550/- on 20.11.2017 for complete blood count, which includes TLC (W.B.C and R.B.C count), Differential leucocyte count and Platelet count. Whereas on the next day i.e. on 21.11.2017, while at deluxe cabin, she was charged Rs.550/- only for platelet count.

This huge rise of charge for blood test, merely because of change of accommodation, is not at all justified.

8. The above facts clearly depicts that there are gross irregularity in billing, like,

i) Charging Rs.264/- for two IV Cannulas (Venflon) without at all the same being used for the treatment of the patient.

ii) Charging Rs.232/- for two IV set, without at all the same being used for the treatment of the patient.

iii) Although treating doctor advised Inj Sumol but Inj Kabipara was used for the treatment of the patient, which was supplied from the in house pharmacy of the hospital. The difference of price of two injections were quite high and on this account, the patient had to bear an extra cost of Rs.1188/-.

It is pertinent to note although a costly medicine was used but before using such medicine, the patient party was not offered to procure it from the open market and when that was not an

emergency requirement and when there was no material before us that such medicine was not available in the open market.

iv) Admittedly only one X-ray was done but patient was charged for two X-rays.

More over different charge of same X-ray, for a patient at general bed and higher charge for a patient at deluxe cabin is wholly unjustified.

v) Similarly, difference in charges for USG for whole abdomen for a patient at general ward and that of a patient at deluxe cabin is also wholly unjustified.

vi) It may be that the clinical establishment not having their own in house pathological laboratory, might have an MOU with any particular outsourced pathological laboratory for different tests for their indoor patient and in such circumstances, it may not be unjustified for the clinical establishment to enjoy a discount on base price from such outsourced pathological laboratory but it is wholly unjustified to charge the patient more than the standard tariff for that particular test from the outsourced pathological laboratory.

vii) The patient was charged Rs.550/- for complete blood count while at general ward but for test for blood platelet count while at deluxe cabin is same. We are of the opinion that this practice is highly unjustified.

9. From the facts as above, it is abundantly clear that due to overbilling, the Clinical Establishment has knowingly gained an unfair advantage of Rs.6000/- (approximately) and none else other than the Clinical Establishment is beneficiary thereof. This is an instance of unfair trade practice on the part of the Clinical Establishment. However, neither there is any allegation forthcoming from the side of the complainant about deficiency in patient care service on the part of the clinical establishment nor we find any such case on meticulous consideration of the medical file of the patient.

In view of the above, we are of the opinion that this is a fit case for awarding compensation.

Now, considering the quantum of overbilling, the unnecessary hardship faced by the complainant for having to approach this Commission and bear the litigation and cost incurred, we are of the opinion it would be commensurate with the provisions of Sections 32 of the West

Bengal Clinical Establishment (Registration, Regulation & Transparency) Act, 2017 an amount of the Rs.30,000/- be awarded as compensation.

The Clinical Establishment is directed to pay the compensation amount to the complainant through an account payee banker's cheque within 15 days from date of passing of this order.

Sd/-

Justice Ashim Kumar Roy
Chairperson.

Sd/-

Dr. Sukumar Mukherjee, Member.

Sd/-

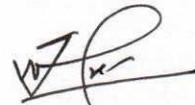
Dr. Makhan Lal Saha, Member.

Sd/-

Dr. Madhusudan Banerjee, Member.

Sd/-

Dr. Maitrayee Banerjee, Member.

Authenticated


Secretary
West Bengal Clinical Establishment
Regulatory Commission