

**GOVERNMENT OF INDIA
MINISTRY OF HEALTH AND FAMILY WELFARE
DEPARTMENT OF HEALTH AND FAMILY WELFARE**

**LOK SABHA
UNSTARRED QUESTION NO. 1146
TO BE ANSWERED ON 24TH JULY, 2026**

REJECTING OF CLAIMS BY PRIVATE HEALTH INSURANCE COMPANIES

†1146. SHRI DEVESH SHAKYA:

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

- (a) whether the Government is aware that private health insurance companies are rejecting claims for hospital admissions advised by specialist doctors, citing grounds such as 'non-medical necessity' or 'exclusion' thereby adversely affecting the treatment of patients and if so, the details thereof;
- (b) whether any national standard guidelines or a medical audit system are proposed to prevent insurance companies from interfering with clinical/medical discretion, if so, the details thereof;
- (c) whether the Government in coordination with the Insurance Regulatory and Development Authority of India (IRDAI) and health sector regulators is considering a mandatory policy to give overriding priority to the clinical judgment of the attending doctor to their, if so, the details thereof; and
- (d) the details of the medical claim applications received and claims rejected on the grounds of the said 'non-medical necessity' or 'exclusion' during the last three years, company-wise?

**ANSWER
THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND
FAMILY WELFARE
(SHRI PRATAPRAO JADHAV)**

(a) to (d): Insurance Regulatory and Development Authority of India (IRDAI) has informed that the insurers assess claims on the basis of policy conditions and merits of each individual case, taking into consideration the clinical records, the treating medical practitioner's assessment, applicable medical standards, Standard Treatment Protocols, wherever available, and the terms and conditions of the policy, for determining their contractual liability under the health insurance policy. Further, no proposal is under consideration with IRDAI to accord overriding precedence to the clinical opinion of the treating doctor for determining insurance claim liability.

IRDAI captures data relating to the overall repudiation of health insurance claims of insurers, and at present does not capture claim repudiation data segregated on specific grounds such as "non-medical necessity", or "exclusion". Accordingly, insurer-wise data on repudiations attributable to these specific reasons is not available.
