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100 DAYS OF AYUSHMAAN BHARAT: ACHIEVEMENTS AND CHALLENGES AHEAD

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INTRODUCTION

The dawn of the year of 2019 saw the government's ambitious health insurance scheme, Ayushman Bharat Yojana, which also addressed as the Pradhan Mantri Jan Aarogya Yojana (AB-PMJAY) and ModiCare completing 100 days after its launch on 23rd September 2018.¹ This scheme falls directly under the supervision of the Ministry of Health and Family Welfare (MoHFW) and aims at making significant interventions in the existing primary, secondary and tertiary care systems by covering both promotion and prevention of health leading to a holistic approach to provision of health care among the underprivileged. The scheme/yojana is basically a broader term for two major health initiatives by the government: The Health and Wellness centres and the National Health Protection Scheme (NHPS).²

This scheme provides an Insurance Cover of up to 5 Lakh Indian rupees to its beneficiaries who comprise of all families falling under the Below Poverty Line (BPL) category living in India and whose name(s) appear on the (Socio Economic Caste Census)SECC 2011 list as per governmental records. To make matters more simple, the government has provided a link (<https://mera.pmjay.gov.in/search/login>) for beneficiaries to check the eligibility of the names to avail this scheme. The above mentioned link requires one to enter his/her mobile number to which an OTP will be sent; and once logged in, leading to a dashboard where the individual selects his name for eligibility through the criteria of "Search by Name", "Search by Mobile Number", "Search by Ration Card Number" & "Search by RSBY URN".³

Implementation Strategy⁴

To manage this scheme, the Ayushman Bharat National Health Protection Mission Agency (AB-NHPMA) has been put in place. The States/Union Territories would be advised to implement the scheme through a dedicated entity called State Health Agency (SHA) and can either use an existing Trust/ Society/ Not for Profit Company/ State Nodal Agency (SNA) or set up a new entity to implement the scheme as per their own policies.

Major Impact:⁴

The National Sample Survey Office (NSSO) in a 2014 report documented that approximately 85.9% of rural households and 82% of urban households did not have any healthcare insurance.⁵ Recent data has also shown that in-patient hospitalization expenditure in India has increased by a whopping 300% during last ten years (NSSO 2015) with more than 80% of the expenditure is met by the person/family itself. It was further stated that rural households primarily depended on their 'household income /

savings' (68%) and on 'borrowings' (25%). On an average, a rural household spent Rs.5636 for hospitalization based treatment in a public sector hospital and Rs.21726 for that in a private sector hospital. The urban households relied much more on their 'income / saving' (75%) and 18% borrowings to manage their expenditure for hospitalization. Hence, this scheme shall really help the beneficiaries to avail quality healthcare with no burden of borrowing money and they can invest their earnings to improve their quality of life.

SALIENT FEATURES:⁵

1. The individual can check for his/her eligibility online through a mobile generated One Time Password (OTP), making the process rather transparent, simple, hassle-free, paperless for all beneficiaries and empanelled centers providing treatment ensuring timely and efficient treatment.
2. One does not need to enroll anywhere to claim benefits under the scheme, which saves time and promotes universal coverage for all beneficiaries at all times.
3. To claim benefits under the scheme one can easily get oneself identified at the nearest empanelled hospital or Community Service Centre (CSC).
4. This policy has the benefit of having no cap on family size and age for the beneficiaries under this scheme
5. The policy Includes both pre and post-hospitalization expenses for the beneficiaries.
6. The policy shall cover all pre-existing conditions from the first day of the implementation of scheme along with the added benefit of a transport allowance(pre-defined) per hospitalization.
7. An efficient model to control costs by making the payments for treatment being done on a specified package rate(s), pre-defined by the government.
8. Benefits are portable throughout India and a beneficiary will be allowed to take cashless benefits from any empanelled (public/private) hospital, thus providing healthcare truly in the times of need, irrespective of the place a person is in.
9. The data generated during the implementation of the scheme will help in designing better and targeted health programmes in the future.

100 Days of Ayushman Bharat: Key Achievements

In this period of time, under AB-PMJAY, as per the information available on their website, the ministry of health and family welfare issued at least 41,45,727 e-cards to the beneficiaries of this scheme. Further data provided stated that as on 1st January 2019, over 6,95,310 patients were admitted in various empaneled private and public hospitals across India for treatment under this scheme. In the first 100 days, 6.85 lakh patients were provided hospital treatment and care.

In the 100 days of this scheme, it has been documented that there were approximately 5.1 lakh claims (averaging around 5000 claims/day), for which the government already approved a claim amount of 537 crore (no money was paid by the beneficiaries).¹ To serve the beneficiaries, there are currently 15,972 empaneled hospitals (as the time of writing this manuscript) and at least 59,219 hospitals have applied for empanelment under the scheme. Experts have predicted that as awareness of this scheme increases almost 1 crore plus families shall reap the benefit of this scheme each year and thus, reducing the global burden of disease (both communicable and non-communicable) in India.

Current Focus: Covering "Green Field states"

The government has said that it shall now shift its focus to cover beneficiaries under "Greenfield States" which are said to be those states, where there was no health insurance scheme earlier (Uttar Pradesh (UP), Bihar, Haryana, (Madhya Pradesh (MP), Himachal Pradesh (HP), Jammu & Kashmir and Jharkhand). Co-operation between the states and the centre shall be a key factor here and efforts are on full swing to smoothly implement the schemes in these states as soon as possible.¹

The road ahead: Challenges Faced⁸⁻¹⁰

The Ayushman Bharat scheme, through its various benefits, can help the Indian government achieve Universal Health Coverage for its people and bring about a positive change for its beneficiaries in terms of their health. However, this scheme, since only 100 days old, has a lot of ground to cover and the challenges faced by it are as below:

1. Need to upgrade the infrastructure to provide benefits of this scheme, which is quite poor in certain states.
2. Appropriate measures will have to be taken to stop the leakages and ensure an effective delivery mechanism of payments and care. While about 1,350 treatments and surgical procedures have been identified for coverage, the government is yet to finalize the package rates for them.
3. There is an urgent need to rework the package rates as the Indian Medical Association (IMA) has contended that the rates are too low.
4. Much of this will rest on active collaboration with State governments and private healthcare. In order to make the mega health insurance scheme a success, India has to increase capacity utilization of existing primary and community health centers (CHC).
5. To ensure fraud and abuse can be minimized and reduced to zero.
6. Maintaining and ensuring the quality of service provided to the beneficiaries

Current Updates: 1st February, 2019¹¹

As per the latest press release by the Press Information Bureau, Ministry of Finance, the Government of India announced "Ayushman Bharat for a new India -2022" through two major initiatives in health sector, as part of Ayushman Bharat programme for the beneficiaries as a part of the General Budget 2018-19, which were:

1. Health and Wellness Centre:- As per the National Health Policy, 2017 which had envisioned Health and Wellness Centres as

the foundation of India's health system, an allocation Rs.1200 crores for this flagship programme has been done along with a possibility of contribution of private sector through CSR and philanthropic institutions by adopting these centres in the future. This shall benefit 1.5 lakh centres that shall help bring the health care system closer to the people in need by providing comprehensive health care, which shall include non-communicable diseases and maternal and child health services and provide free essential drugs and diagnostic services.

2. National Health Protection Scheme:- The second flagship programme under Ayushman Bharat, the National Health Protection Scheme shall cover over 10 crore poor and vulnerable families (an estimated 50 crore beneficiaries) by providing coverage upto 5 lakh rupees per family per year for secondary and tertiary care hospitalization. The government has said that this shall be the world's largest government funded health care programme and the provision of adequate funds shall be provided for smooth implementation of this programme.

In addition, the finance minister while presenting the budget of 2019 added that in order to further improve accessibility of the quality of medical education and health care, the decision to set up a total of 24 new Government Medical Colleges and Hospitals by up-grading existing district hospitals shall ensure that there is at least 1 Medical College to every 3 Parliamentary Constituencies and a minimum of at least 1 Government Medical College in each State of India.¹¹

CONCLUSION

While the efforts of the government should be lauded to provide health coverage to the BPL families and as per statistics, the initial 100 days show promising results. However, there is still a lot that needs to be done to plug the gaps in the healthcare sector and there is an urgent need to strengthen the existing infrastructure so that the beneficiaries as well as the government gain maximum benefit from the scheme.

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