Rapid Assessment of Knowledge and Awareness of Ayushman Bharat- Pradhan Mantri Jan Arogya Yojana

By

Ritika Chaudhary

Dissertation submitted in partial fulfillment of the requirements of the degree

MBA Hospital and Health Management

Academic year, 2017-2019

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IIHMR UNIVERSITY

TO WHOMSOEVER MAY CONCERN

This is to certify that **Ritika Chaudhary** student of MBA Hospital and Health Management from The IIHMR University, Jaipur has undergone internship training at National Health Mission, Gujarat from 04/02/2019 to 08/05/2019

The Candidate has successfully carried out the study assigned to her during internship training and her approach to the study has been sincere, scientific and analytical.
The Internship is in fulfilment of the course requirements.

I wish her all success in all her future endeavours.

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The certificate is awarded to

Ritika Chaudhary

In recognition of having successfully completed her
Internship in the department of

Ayushman Bharat (PMJAY)

And has successfully completed her Project on

Assessment of Knowledge and Awareness about Ayushman Bharat-Pradhan Mantri Jan Arogya Yojana in Amreli district of Gujarat

Feb - May

National Health Mission, Gujarat

She/he comes across as a committed, sincere & diligent person who has a strong drive and zeal for learning

We wish him/her all the best for future endeavors

(Dr. H .F. Patel)
Chief District Health Officer
District Panchayat- Amreli

CERTIFICATE BY SCHOLAR

This is to certify that the dissertation titled **Rapid Assessment of Knowledge and Awareness of Ayushman Bharat- Pradhan Mantri Jan Arogya Yojana in Amreli district, Gujarat** and submitted by **Ritika Chaudhary** Enrolment No- IIHMR-U/01/2017-19/0650 under the supervision of **Dr.Tanjul Saxena** for award of MBA in Hospital and Health Management of the University carried out during the period from February,2019 to May, 2019 embodies my original work and has not formed the basis for the award of any degree, diploma associate ship, fellowship, titles in this or any other institute or other similar institution of higher learning.

Signature

ACKNOWLEDGEMENT

I feel privileged in expressing my kindest gratitude to **Dr. H.F. PATEL (CDHO, AMRELI, GUJARAT)** under whose able guidance and supervision this study was conducted. The keen interest he evinced throughout this period and the graciousness with which he gave his valuable advice was his exclusive acumen.

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I express my gratitude to all the respondents who took time from their busy schedule and helped me to make this happen. I would like to grab this opportunity to thank the entire team of DPMU, Amreli, Gujarat, for supporting me whole heartedly in every phase of my study.

In the end I thank all those fellows and colleagues who have helped me in making this project a success and my apologies to anyone whose name I would have inadvertently forgotten to mention here.

Ritika Chaudhary

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LIST OF ABBREVIATIONS

NRHM	National Rural Health Mission
NUHM	National Urban Health Mission
NHM	National Health Mission
PHC	Primary Health Centre
CHC	Community Health Centre
SC	Sub Centre
UHC	Urban Health Centre
DH	District Hospital
SDH	Sub District Hospital
DPMU	District Program Management Unit
AB	Ayushman Bharat
PMJAY	Pradhan Mantri Jan Arogya Yojana
TMS	Transaction Management System
SECC	Socio-economic Caste Census
SHA	State Health Agency
ISA	Implementation Support Agency
ASHA	Accredited Social Health Activist

LIST OF FIGURES

ABSTRACT

Topic - RapidAssessment of Knowledge and Awareness of Ayushman Bharat- Pradhan Mantri Jan Arogya Yojana in district Amreli, Gujarat

Author – Ritika Chaudhary

Objective -To Assess the Knowledge and Awareness of Ayushman Bharat- Pradhan Mantri Jan Arogya Yojana among the population of Amreli district in Gujarat

Material and methods - a cross- sectional descriptive study was done during the month of February to May in district Amreli of Gujarat. Using Convenient random sampling a sample of 110 beneficiaries having AB-PMJAY card from 11 different taluka were interviewed by means of a close ended questionnaire and data was analysed

Results

- There was very less awareness and knowledge about the Programme,AB-PMJAY
- 76% of the respondents knew about Health Insurance, while 82% of the respondents knew health insurance schemes other than AB-PMJAY which were MA, MAV and RSBY
- Only 4% of the total respondents knew PMJAY the health insurance type.62% were aware that PMJAY card is valid nationally whereas 82% answered it is valid all over Gujarat,23% didn't know about the validity nationally and 11% didn't know about validity of card across Gujarat.
- 84% of the total respondents were correct about the insurance limit under PMJAY and 56% knew the amount is for individual and 44% didn't knew about the insurance amount coverage
- 74% of total respondents not aware of empaneled private hospitals under PMJAY. Out of the total respondents 56% are unaware of the transportation allowance given under PMJAY
- 65% of the total respondents were aware of the tollfree number for the any information or grievance related to AB-PMJAY

Suggestions

- Brief about the programme and its benefits at the time of providing PMJAY card and showing them toll free number written on the back of card along with other details on Card
- Utilizing mamta divas, ANC check-up days and other such events when beneficiary comes at public health facility for increasing awareness about the program
- Since the awareness and knowledge regarding the empaneled private hospitals is very low, effective IEC (hoardings, posters) at every public and private health facility in their regional language
- Regularly updating the health facilities staff about the empaneled private hospitals and the changes made in the guidelines to keep them up to date
- Keeping all the stakeholders involved and monitoring regularly at different intervals

➢ INTRODUCTION

Good health is an integral component of human wellbeing. As per the recommendations of BHORE committee in 1946 no Individual should fail to secure adequate medical care because of inability to pay it and should get all facility for diagnosis and treatment. India has achieved vital public health gains and enhancements in healthcare access and quality over the last three decades. The health sector is amongst the most important and fast-growing sectors, expected to succeed by 2020. At the identical time, India's health sector faces large challenges. It continues to be characterised by high out of pocket expenditure, low monetary, low insurance coverage amongst rural and concrete population.

The Government of India is committed to making sure that its population has universal access to good quality healthcare services while not anyone having to face money hardship consequently. Under the scope of Ayushman Bharat, Pradhan Mantri Jan Arogya Yojana is to cut back the money burden on poor and vulnerable population arising out of catastrophic hospitalepisodes and guarantee their access to quality health services. PM-JAY seeks to accelerate India's progress towards accomplishment of Universal Health Coverage and Sustainable Development Goal 3.

It is a centrally sponsored scheme launched in 2018, underneath the Ayushman Bharat mission of MoFHW, the scheme aims at creating interventions in primary, secondary and tertiary care systems, to address health care holistically by covering both promotive and preventive health

<u>It includes two major components namely</u>:

1. National Health Protection Scheme or Pradhan Mantri Jan Arogya yojana (PMJAY) which is the Insurance part and
2. Health and Wellness Centres for Assurance of promotive and preventivehealth care services

<u>Key Features</u>:

- PM-JAY covers 10.74 crore poor, deprived rural families as well as identified occupational categories of urban workers/families as per the data of SECC-2011 which sums up to approx. 50 crore beneficiaries

- A health insurance benefit cover of Rs.500,000 per family per year (on a family floater basis) with all pre-existing diseases covered
- 1300+ defined medical packages covered under PM-JAY to cover medical and hospitalization charges for all secondary care and most of tertiary care procedures including medicines, diagnostics and transport
- Accessibility of services by the beneficiaries across India, with benefit of national portability
- To ensure that no-one is missed (especially girl child, women and elderly) there is no cap on family size and age. The services are cashless and paperless at public hospitals and empanelled private hospitals
- 24*7 helpline number for beneficiaries to reach out for any information and grievances, along with a comprehensible web portal to get the detailed information

AB -PMJAY KEY STRATERGIES

Alliance with the states	•Principle based, states flexibility wrt packages, procedures, scheme design and other guidelines ensuring portability benefit at national level •SHA can be set by the states to choose the modalities for implementation through an insurance company or through ISA or mixed approach
Home grown architecture, sate of the art IT	•IT system with inbuilt intelligence and data processing features for fraud detection •Online empanelment, complaint and grievance redressal mechanism •State continue to have option to host and customize existing platforms
Aiding with the state	•Quick cabinet approvals and MoU to be signed between SHA and State health Dept. •continous updation by SHA to evolve guidelines and documents

When totally enforced, the PM-JAY can become the world's largest government funded health protection scheme

➢ LITERATURE REVIEW

- Harsh et al (2018) conducted a study Ayushmanbharat initiative(1) what we stand to gain or lose and concluded that Success of the scheme will depend upon focusing on health and not merely sickness. Reducing disease burden through robust primary care, focus on allied determinants of health, quality outdoor and indoor services in public hospitals and incorporation of indigenous school of medicine and technology will all help in checking farcical and wasteful expenditure. Instead of shrinking its role in health-care provision, participation of government system has to be increased progressively

- Rohit et al (2018) conducted a study Ayushman Bharat Yojana(2) a memorable health initiative for Indians and concluded that Ayushman Bharat scheme will lead to timely treatments, improvements in health outcomes, patient satisfaction, improvement in productivity and efficiency, job creation thus, leading to an improvement in the quality of life

- Chandrakant Lahariya (2018)(3) conducted a study ayushmanbharat program and universal health coverage in India and concluded that Ayushman Bharat Program appears to be a balanced approach, which combines provision of comprehensive primary healthcare (through HWCs) and secondary and tertiary care hospitalization (through PM-RSSM). While ABP would help India make progress towards UHC, this program alone would not be enough and needs to be supplemented by rapid scale-up and convergence of ongoing schemes and programs and taking a few additional measures. The ABP can prove an initiative bigger than simply delivering health services and rather a platform to prepare India for making health coverage universal

- Blake et al (2019)(4)conducted a study the ayushmanbharat Pradhan mantri yojana and the path to universal health coverage in India: overcoming the challenges of stewardship and governance and concluded that The AB-PMJAY offers a unique

opportunity to improve the health of hundreds of millions of Indians and eliminate a major source of poverty afflicting the nation. There are, however, substantial challenges that need to be overcome to enable these benefits to be realised by the Indian population and ensure that the scheme makes a sustainable contribution to the progress of India towards UHC. Thus, whilst these weaknesses pose a threat to the ability of proposed reforms to meet their ambitious objectives, by providing the impetus for systemic reform, AB-PMJAY presents the nation with a chance to tackle long-term and embedded shortcomings in governance, quality control, and stewardship.

- Jishnu et al (2018) studies on Will ayushmanbharat work?(5) And concluded that the foundational pillars will still not ensure that patients receive the care they need, or even that they won't emerge in a worse condition than they were when they entered. Clearly, that should be the key focus of Ayushman Bharat. But we won't get there without first getting the institutional architecture right.

- Dr.Divyesh (2018)(6) studied Ayushmanbharat-India's National Health Protection mission and concluded that Implementation needs to be accompanied by analysis so that the solutions are found through policy analysis and research embedded into implementation. This calls for strengthening "evidence-to-policy" links. Overall, the effective implementation of AB-NHPM will largely depend on ensuring that the package of services prioritised under NHPS is based on community needs, evidence-based, well governed and inclusive.

RAPID ASSESSMENT OF KNOWLEDGE AND AWARENESS OF AYUSHMAN BHARAT-
PRADHAN MANTRI JAN AROGYA YOJANA

➢ METHODOLOGY

❖ RESEARCH QUESTION

- Does the population of Amreli district in Gujarat have Knowledge and Awareness about the Ayushman Bharat- Pradhan Mantri Jan Arogya Yojana?

❖ OBJECTIVE

- To Assess the Knowledge and Awareness of Ayushman Bharat- Pradhan Mantri Jan Arogya Yojana among the population of Amreli district in Gujarat

❖ MATERIAL AND METHODS

- **Study Design:** Cross sectional Descriptive study
- **Setting:** in Amreli district of Gujarat
- **Study population:**
    - Inclusion criteria- identified beneficiaries as per the data provided by the government for PMJAY and have received the AB-PMJAY Card
    - Exclusion criteria- Population not under the data provided by the government for PMJAY and have not received the AB-PMJAY card
- **Study tool**- data will be collected using Questionnaire
- **Duration of study:** 3 months
- **Sample size:** 110
- **Sample technique:** Non-probability, Convenient Sampling
- **Data collection procedure:** face to face interview of the beneficiaries
- **Data analysis plan:** Data obtained from the questionnaire analysed using MS excel/SPSS
- **Ethical Consideration:** Consent was taken before conducting a detailed interview

➢ FINDINGS

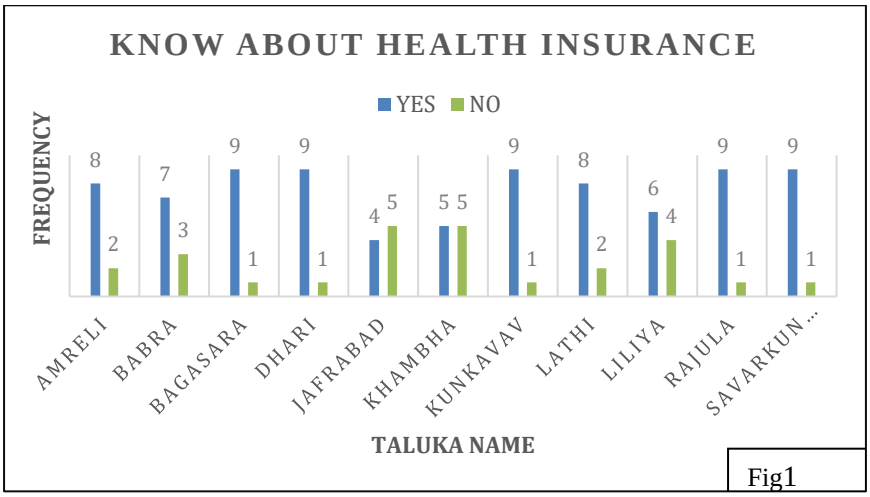

Fig1

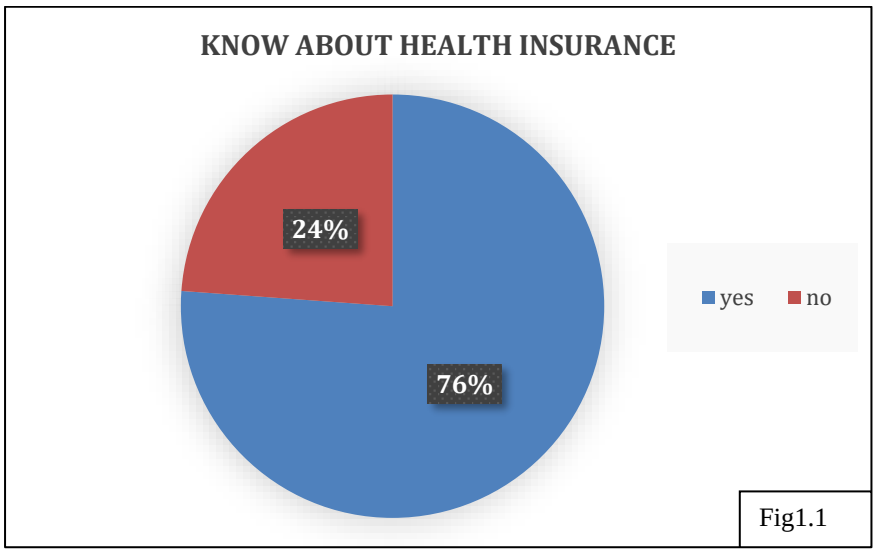

Fig1.1

Fig.1& fig1.1

shows that 76% of the respondents knew about Health Insurance, out of 11 taluka 3 taluka (Jafrabad, Khambha and Liliya) didn't have much knowledge about health insurance

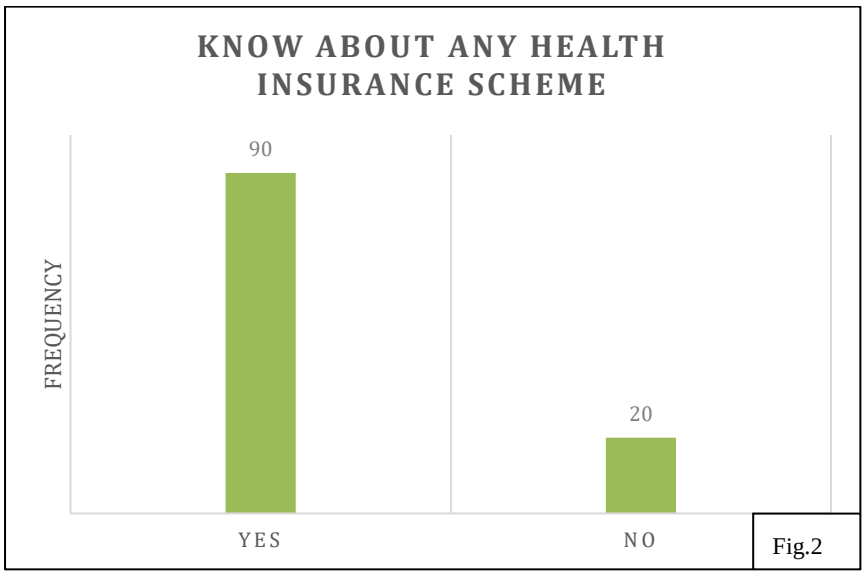

Fig.2

Fig.2 & 2.1

Shows that the 82% of the respondents knew health insurance schemes other than AB-PMJAY which were MA, MAV and RSBY

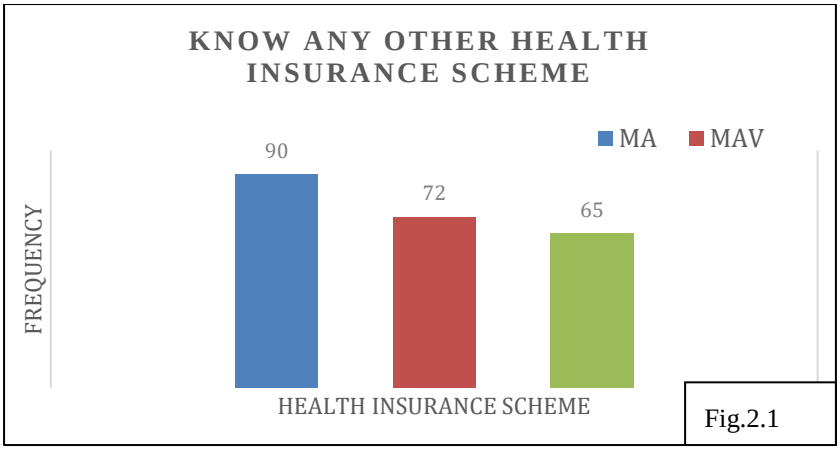

Fig.2.1

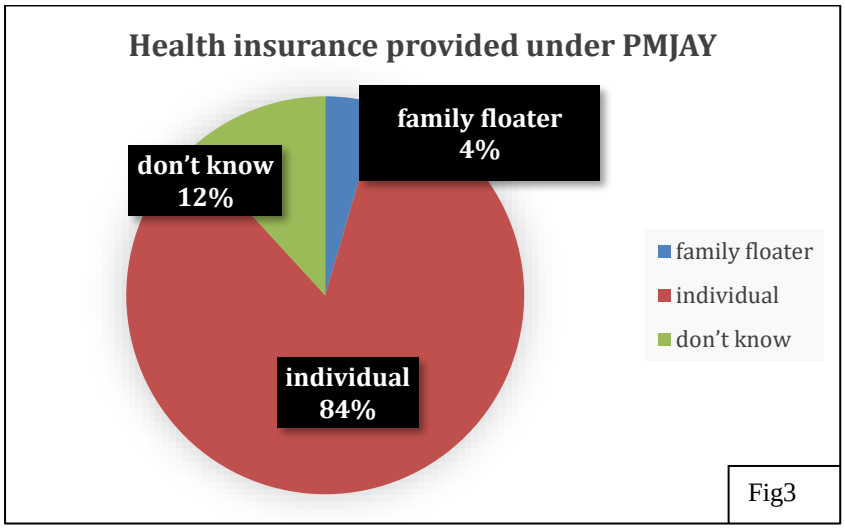

Fig3

Fig3
shows that only 84% of the total respondents responded health insurance provided under PMJAY as Individual, 4% as Family floater and 12% didn't knew abouthe insurance type.

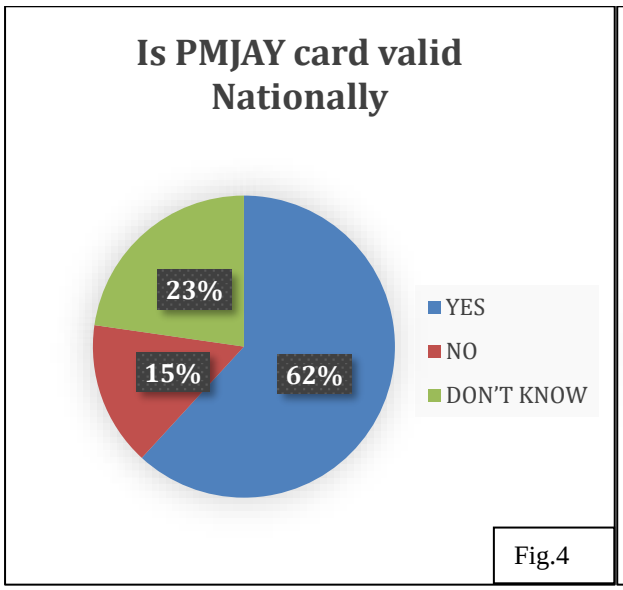

Fig.4

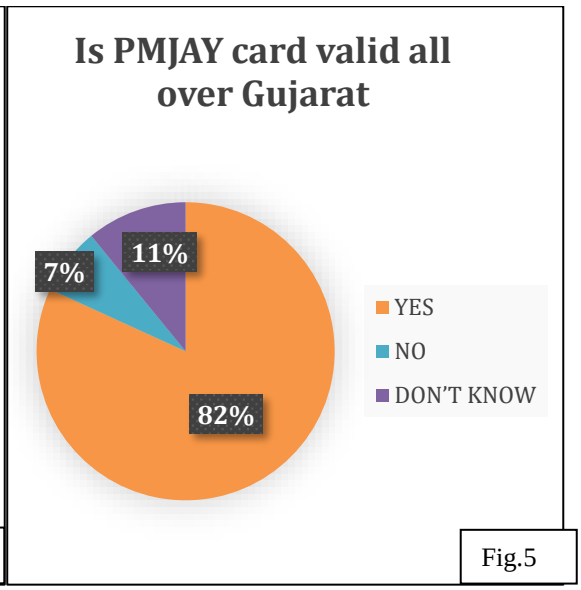

Fig.5

Above fig.4 and fig.5 shows that 62% were aware that PMJAY card is valid nationally whereas 82% answered it is valid all over Gujarat,23% didn't know about the validity nationally and 11% didn't know about validity of card across Gujarat.

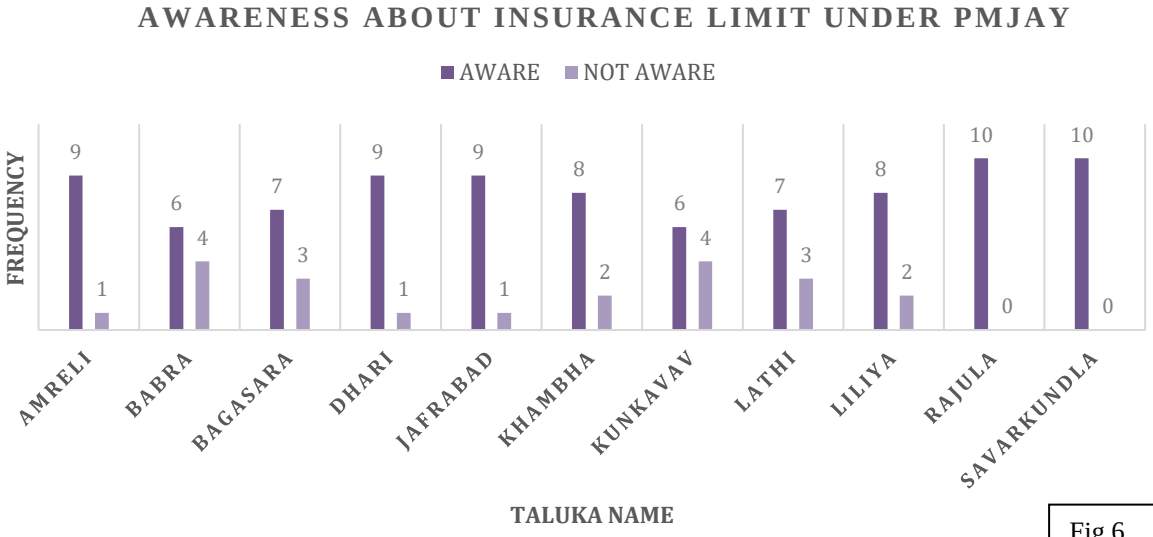

Fig.6

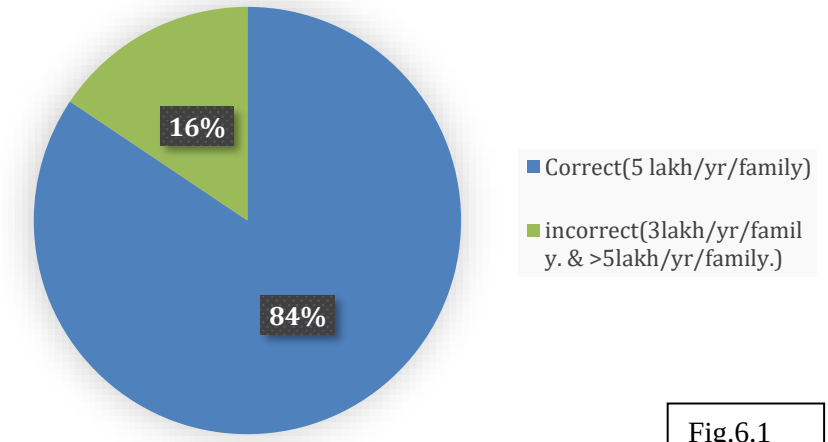

Fig.6.1

Fig.6
shows that out of 11 taluka respondents two taluka scored highest for the awareness regarding the insurance limit

Fig.6.1
Shows that 84% of the total respondents were correct about the insurance limit under PMJAY

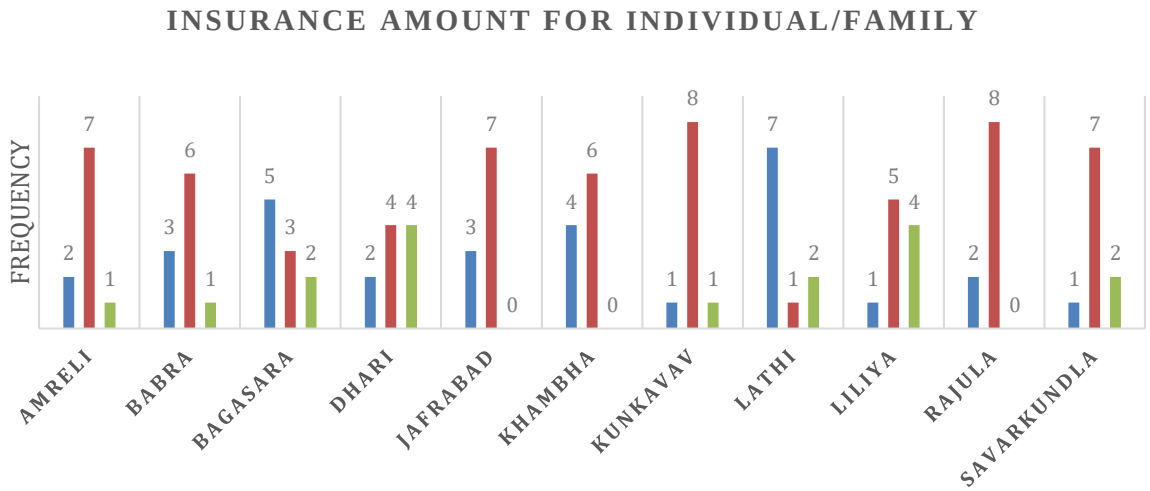

Fig.7

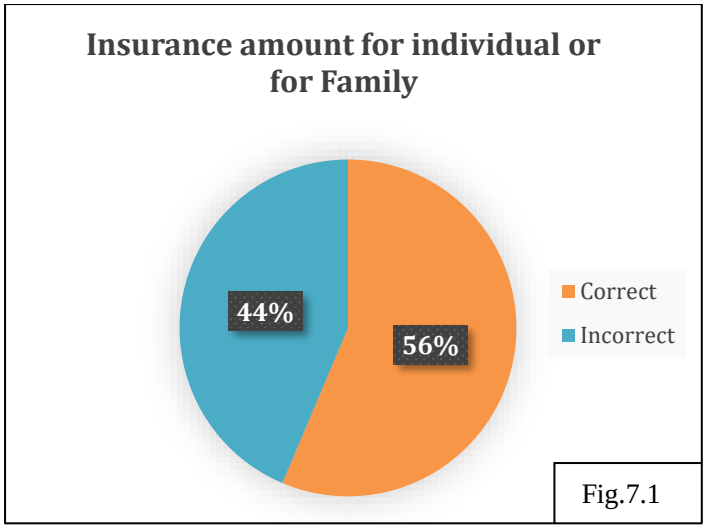

Fig.7.1

Fig.7
Shows awareness of the respondents for insurance amount in different taluka of district Amreli

Fig.7.1
Shows that 56% knew the amount is for individual and 44% didn't knew about the insurance amount coverage

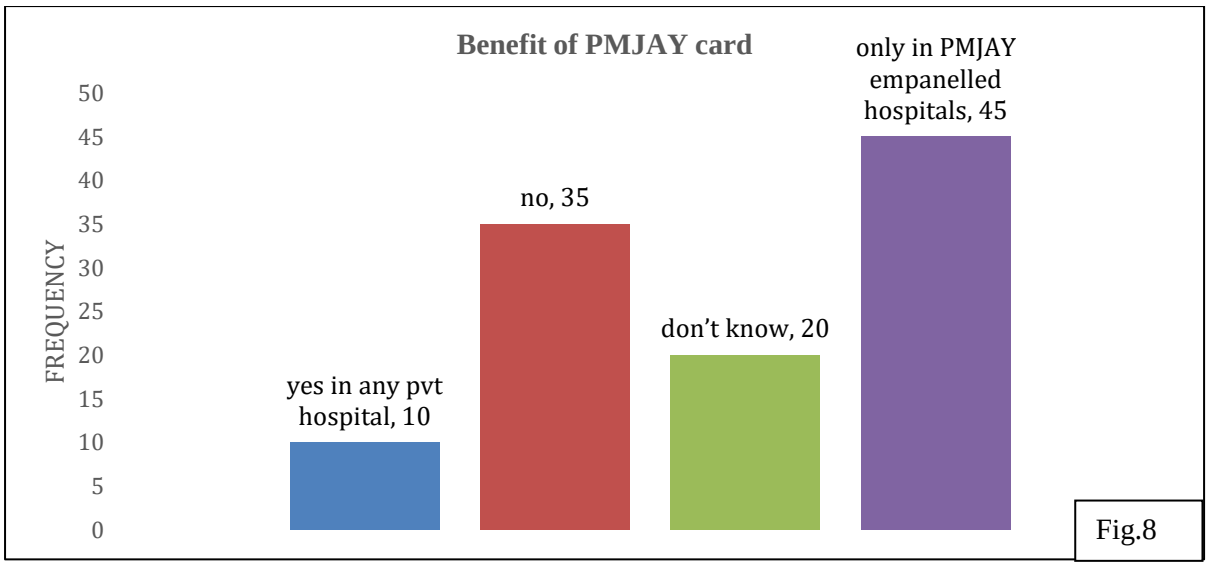

Fig.8

Fig.8 shows that out of total respondents 45 knew that benefit of PMJAY can be availed in Empanelled hospitals and 20 didn't knew about the same

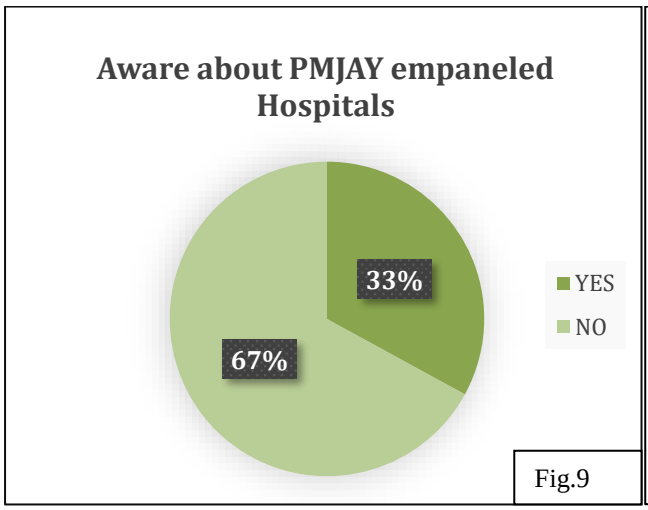

Fig.9

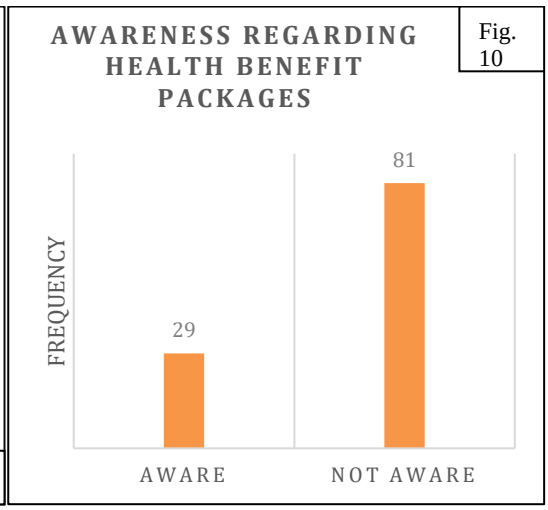

Fig. 10

Fig9 shows that 33% of the total respondents are aware of hospitals empaneled under PMJAY

Fig.10 shows that 74% of total respondents not aware of empaneled private hospitals under PMJAY

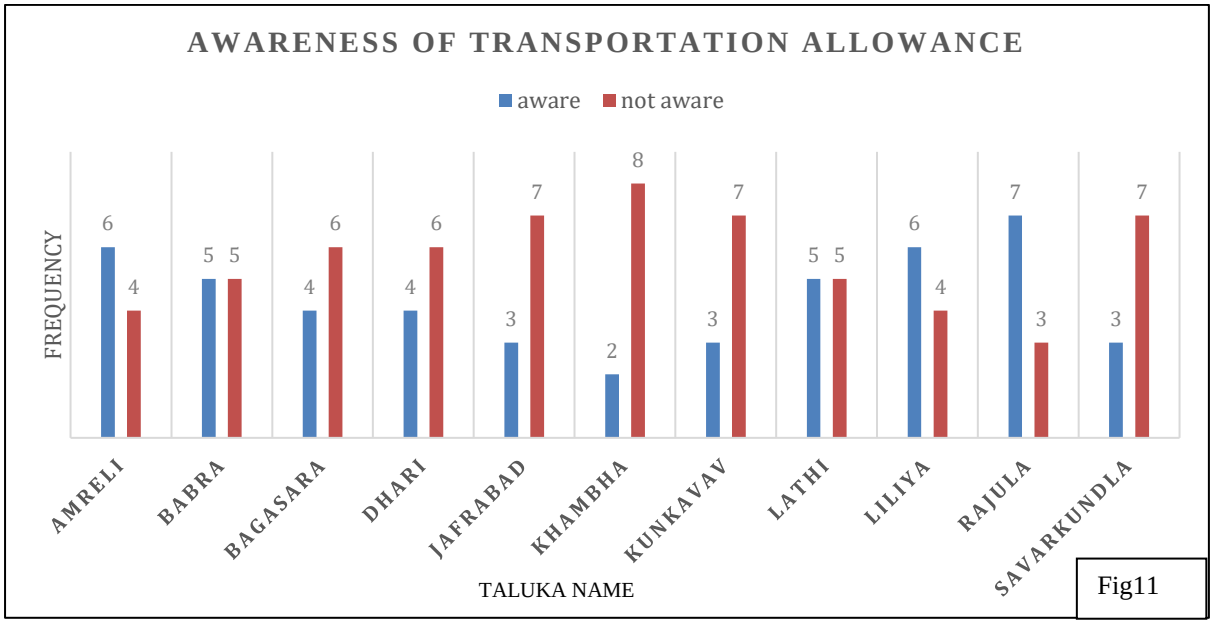

Fig11

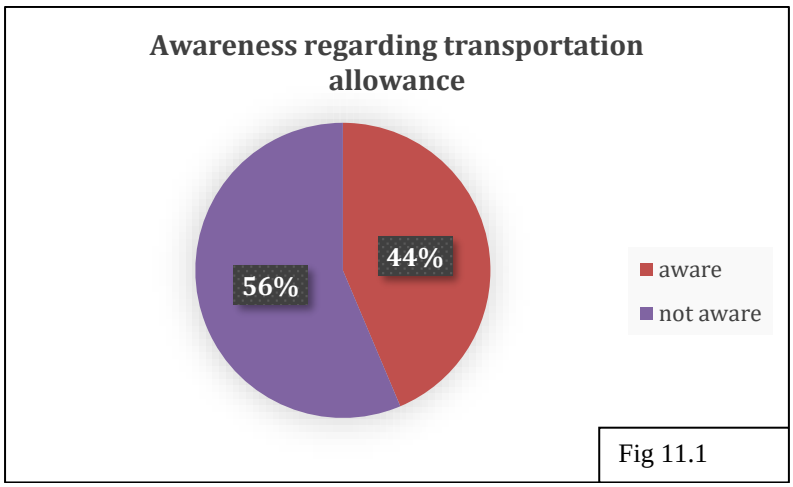

Fig 11.1

Fig.11
shows respondents awareness regarding transportation allowance in 11taluka

Fig 11.1
shows that out of the total respondents 56% are unaware of the transportation allowance given under PMJAY

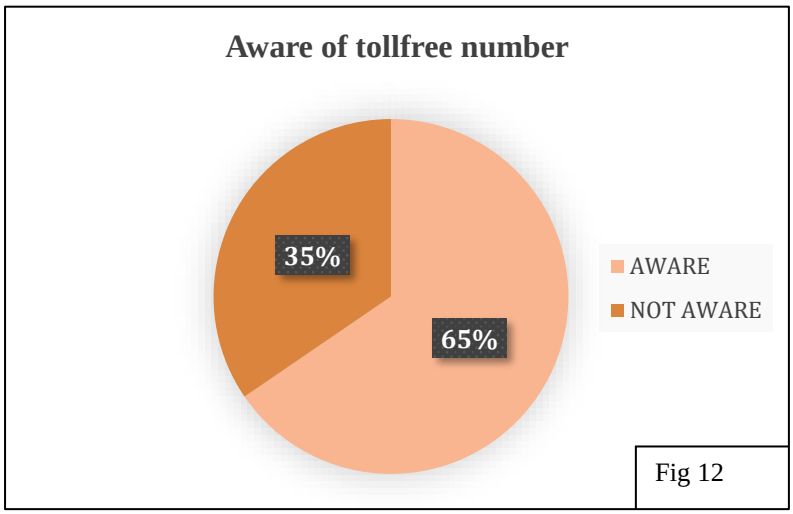

Fig 12

Fig.12
shows that 65% of the total respondents were aware of the tollfree number for the any information or grievance related to AB-PMJAY

➢ DISCUSSION

This study has been done to assess the awareness and knowledge about AB-PMJAY in the district Amreli and suggest interventions to bring the awareness. According to this study, the number of respondents who knew about health insurance were 76% i.e. they have basic knowledge about the concepts of health insurance. Out of 11 taluka respondents of Jafrabad, Khambha and Liliya have lesser knowledge about the same. When asked about health insurance schemes other than PMJAY the responses were MA, MV and RSBY. Among these MA and MV are the state specific schemes which are functional only in Gujarat. Consequently, most of the respondents knew about MA and MV schemes.

When asked about PMJAY starting with which type of insurance scheme is only 4% knew that it is a family floater rather than individual health scheme and 12% have no idea about the same. Questions were asked for assessing knowledge about the portability of the schemein which 82% knew that the scheme and PMJAY card is valid across gujarat,62% knew that it is valid Nationally too.84% of the total population gave appropriate answer when asked about the insurance limit i.e. Awareness among the respondents for amount of insurance was 84% however only 56% replied correct amount of the health insurance.one of the most important question was the awareness and knowledge regarding the PMJAY card acceptability in the health facilities in which almost half of the respondents answered that the card is acceptable only in empanelled private hospitals but on the other hand only 33% of the total knew the empanelled private hospitals in their respective taluka or in the Amreli district which a big concern since it can cause great inconvenience to the beneficiaries when in emergency.

Regarding the health benefit packages under PMJAY only 26% knew the packages and that too in very broader terms not the specific.44% of the total respondents knew about the transportation allowance which is given at the time of discharge. Number of respondents of Amreli and Rajulawere more aware of the transportation allowance since civil hospital is situated in Amreli and Rajula has SDH Savarkundlaalong with tertiary care hospitals in the taluka and nearby. 65% of the total respondents were aware about the tollfree number for getting any kind of information regarding the program or for the grievance redressal.

➢ SUGGESTIONS

- Brief about the programme and its benefits at the time of providing PMJAY card and showing them toll free number written on the back of card along with other details on Card
- Utilizing mamta divas, ANC check-up days and other such events when beneficiary comes at public health facility for increasing awareness about the program
- Since the awareness and knowledge regarding the empanelled private hospitals is very low, effective IEC (hoardings, posters) at every public and private health facility in their regional language
- Regularly updating the health facilities staff about the empanelled private hospitals and the changes made in the guidelines to keep them up to date
- Keeping all the stakeholders involved and monitoring regularly at different intervals

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- ANNEXURE I

QUESTIONNAIRE

I. AWARENESS& KNOWLEDGE-

1. Do you know about Health Insurance?
   A) Yes B) No
2. Do you know about any Health Insurance Scheme? If yes which?
3. Have you visited any health facility after getting PMJAY card?
   A) yes B) no
4. Which type of health insurance is provided under PMJAY?
   A) Family floater B) individual C) senior citizen E) don't know
5. Is PMJAY card valid nationally?
   A) yes B) no C) don't know
6. Is PMJAY card valid all over Gujarat?
   A) yes B) no C) don't know
7. Are you aware of the insurance limit under PMJAY?
   A) yes B) no, if yes
8. What is the insurance limit under PMJAY?
   A) 3lakh/yr./person B) 5lakh/yr./person C) > 5lakh/yr./person D) other
9. Is the insurance amount for individual or for whole family?
   a) Individual b) whole family c) don't know
10. Are you aware of the hospitals Empanelled under PMJAY?
    A) aware B) no
11. Can you take benefit of PMJAY card in any hospital?
    A) Yes B) No C) don't know D) only in PMJAY empanelled hospitals
12. Are you aware of the health benefit packages which are covered under PMJAY?
    A) Aware b) not aware
13. Are you aware of the transportation allowance given in the PMJAY after discharge?
14. What is the amount of transportation allowance given?
15. Are you aware of tollfree number for any query regarding PMJAY?

ANNEXURE II

CONSENT FORM

I, _____ (participant's name), understand that I am being asked to participate in a questionnaire activity. It is my understanding that this survey/questionnaire has been designed to gather information about the following subject:ASSESSMENT OF KNOWLEDGE AND AWARENESS OF AYUSHMAN BHARAT- PRADHAN MANTRI JAN AROGYA YOJANAI have been given some general information about the types of questions I can expect to answer. I understand that the questionnaire will be conducted in person and that it will take approximately 15-20 min of my time to complete.

I understand that my participation in this project is completely voluntary and that I am free to decline to participate, without consequence, at any time prior to or at any point during the activity. I understand that any information I provide will be kept confidential, used only for the purposes of completing this assignment, and will not be used in any way that can identify me. All questionnaire responses, records will be kept in a secured environment. I understand that the results of this activity will be used exclusively in NATIONAL HEALTH MISSION, AMRELI.

I also understand that there are no risks involved in participating in this activity, beyond those risks experienced in everyday life.

I have read the information above. By signing below and returning this form, I am consenting to participate in this questionnaire project.

Signature of the interviewee: _____

Signature of the interviewer: _____