Assessment of Ayushman Bharat- Pradhan Mantri Jan Arogya Yojana

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Introduction

- On March 2018, Indian Government approved Ayushman Bharat Pradhan Mantri Jan Arogya Yojana (AB-PMJAY) and the program is now considered as a notable step towards achieving UHC in India.

- The PMJAY is a publicly financed health insurance scheme for the socioeconomically deprived rural and selected occupational category of the urban population.

- The program consists of two initiatives which are-
  -Establishment of Health and Wellness Centers (HWCs)
  -Pradhan Mantri Jan Arogya Yojana (PMJAY)

Attributes of PMJAY

- World’s largest health insurance scheme
- 0ver 50 crore beneficiaries
- Provides a cover of ₹5 lakhs per family per year
- Cashless healthcare services
- No cap on family size, gender or age
- All pre-existing conditions are covered from day one
- The scheme is portable.

Highlights

- 32 States and UTs implementing the scheme
- 10.3 crore e-cards issued
- 46.5 lakh hospitals treatments
- ₹7,490 crore value treatments provided
- 18,236 hospitals empanelled
- 43,725 portability cases
- 45 lakh calls answered by NHA Call Centre
- 1.5 crore users on mera.pmjay.gov.in

Data Source: Annual Report 2018-19 PMJAY

Modes of Implementation

Source: https://www.pmjay.gov.in/sites/default/files/2018-09/Poster%2014x19inch_5.jpg

AIM: To assess Ayushman Bharat Yojana in Indian States and Union Territories.

OBJECTIVE: To know the State/UT wise status of Ayushman Bharat Yojana by analyzing the parameters like total number of hospital admissions, beneficiary families covered, total operational health and wellness centers, total percentage of target households etc.

Research methodology

- **Research Question**: How successful the Ayushman Bharat scheme has been in Indian States/Union territories so far?

- **Study Design**: Descriptive Study based on secondary data available from 2018 to 2022

- **Study Population:** All BPL (below poverty line) families, under privileged rural families and identified occupational category for urban families with five lakh coverage as per 2011 Socio-Economic Caste Census (SECC) data.

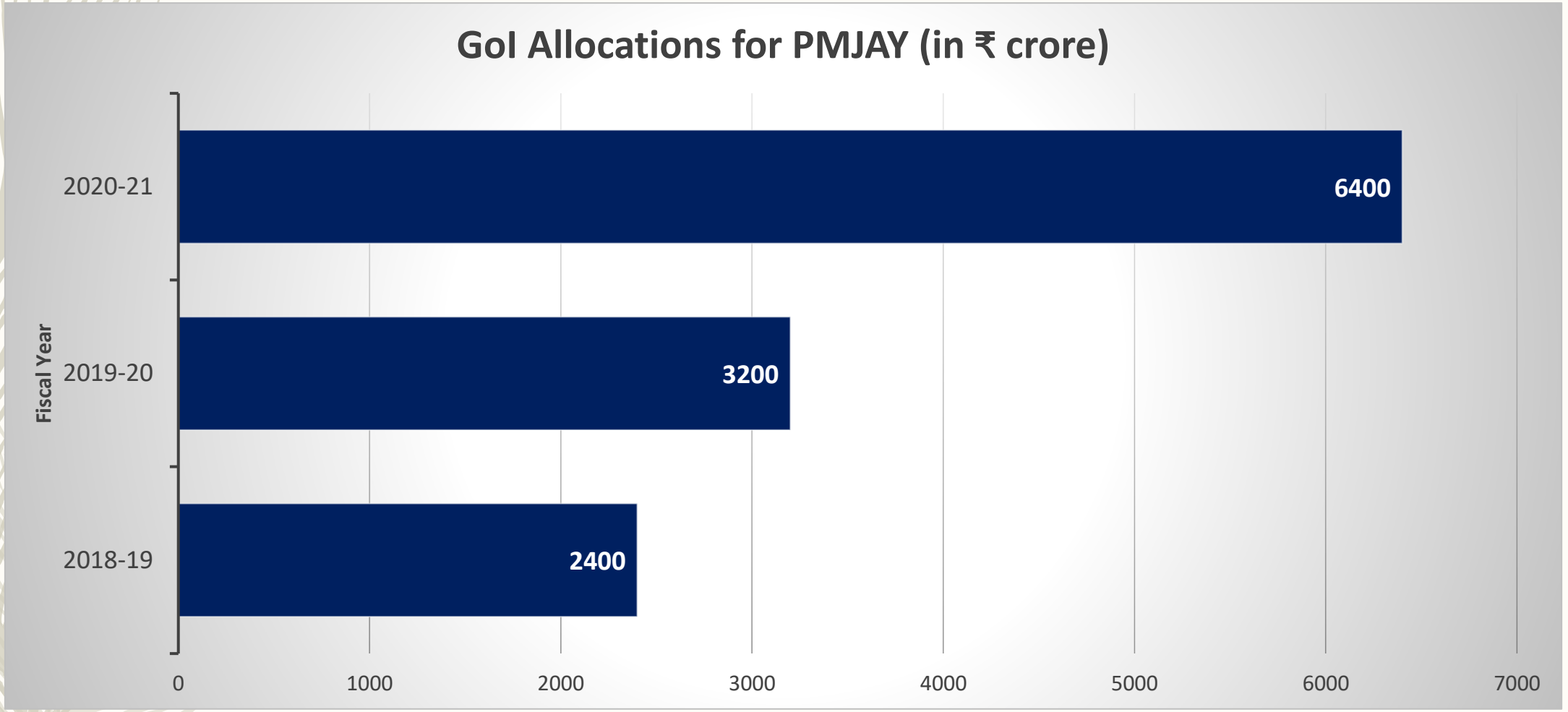
- **Duration of Study**: Three Months from March 2020 to May 2020.

- **Data Collection Type**: Secondary Data from open government data (OGD) platform and websites, reports based on the scheme.

- **Data Collection Procedure:** The data was collected through Government statistics and information from government agencies, journals, reports and articles.

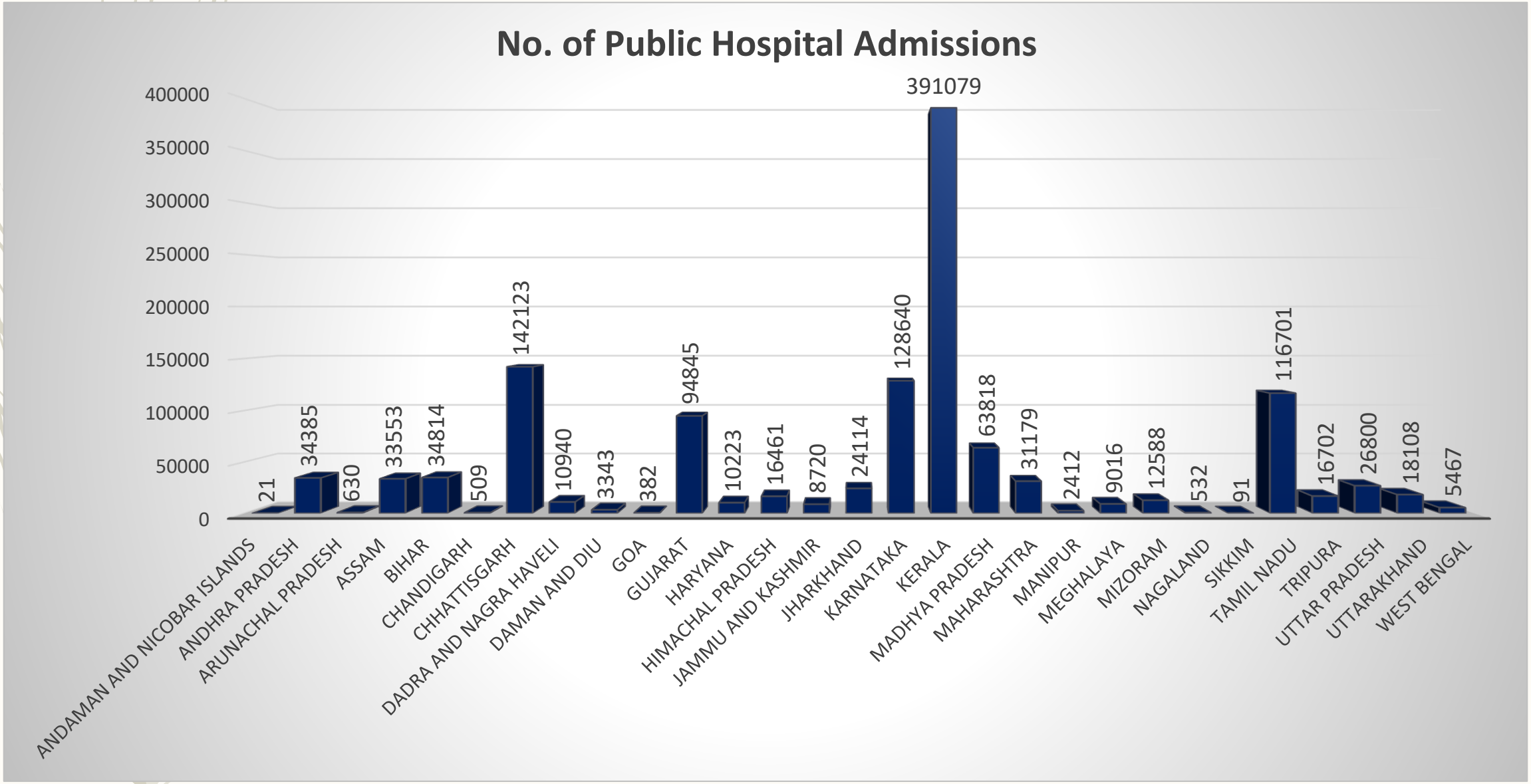
- **Data Analysis**: Data was analyzed using Descriptive Statistical Method.

Govt of India Allocations for PMJAY



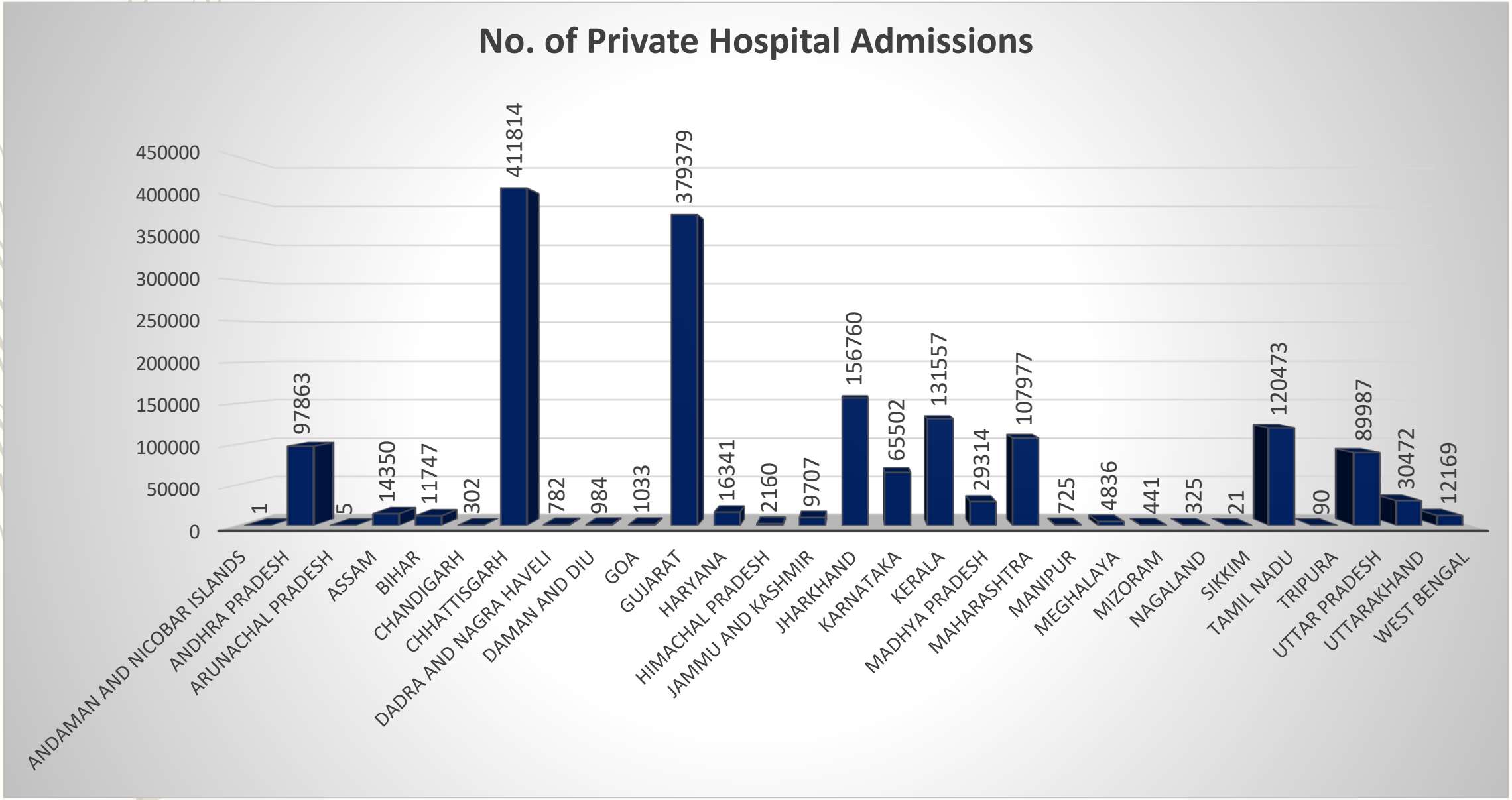
Source: Union expenditure budget, Volume 2, MoHFW, FY 2015-16 to FY 2020-21. Available online at: https://www.indiabudget.gov.in

State/UT wise total number of Public hospital admissions under PMJAY



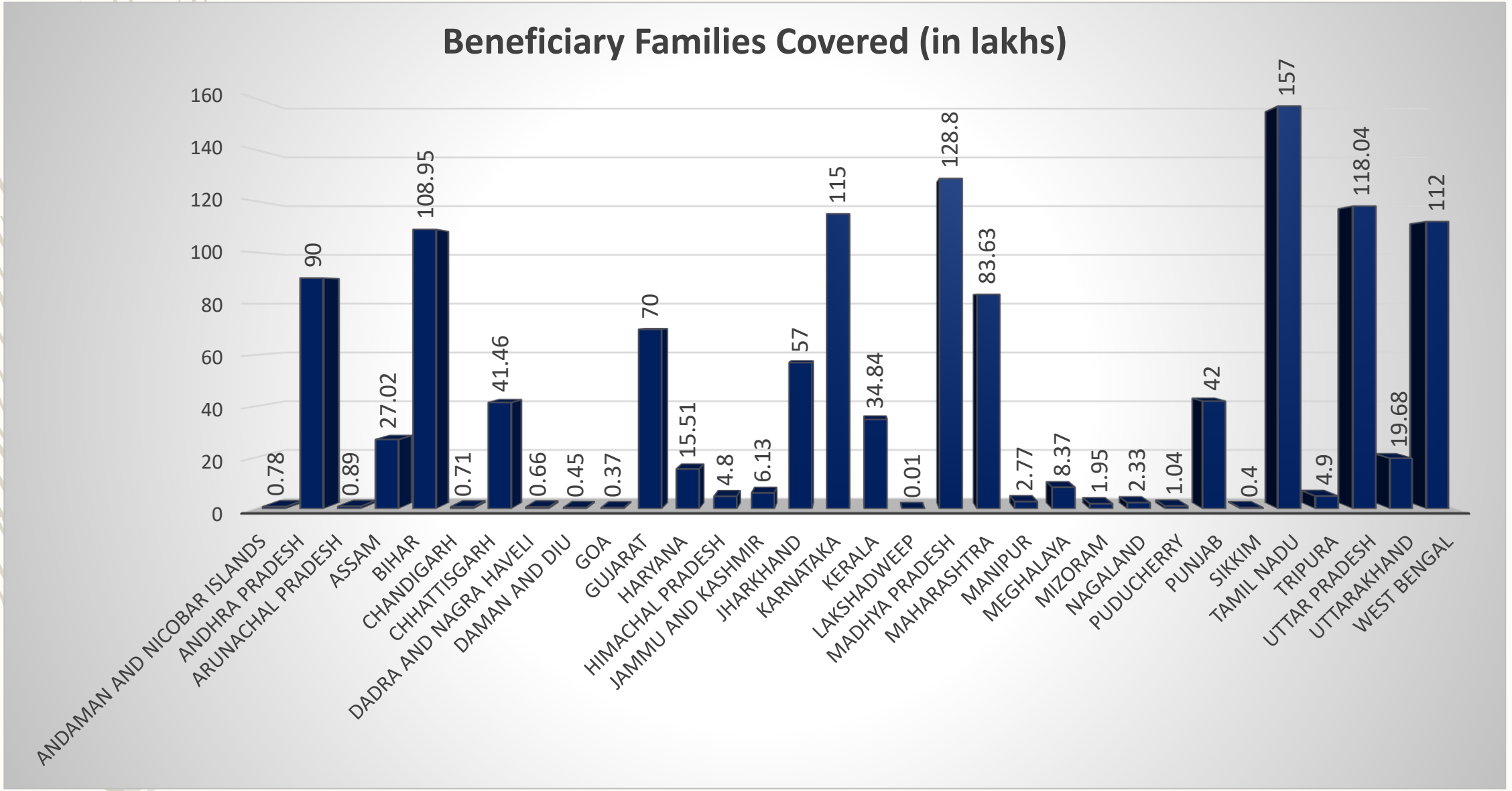
Data Source: https://data.gov.in/search/site?query=ayushman+bharat

State/UT- wise total number of Private hospital admissions under PMJAY



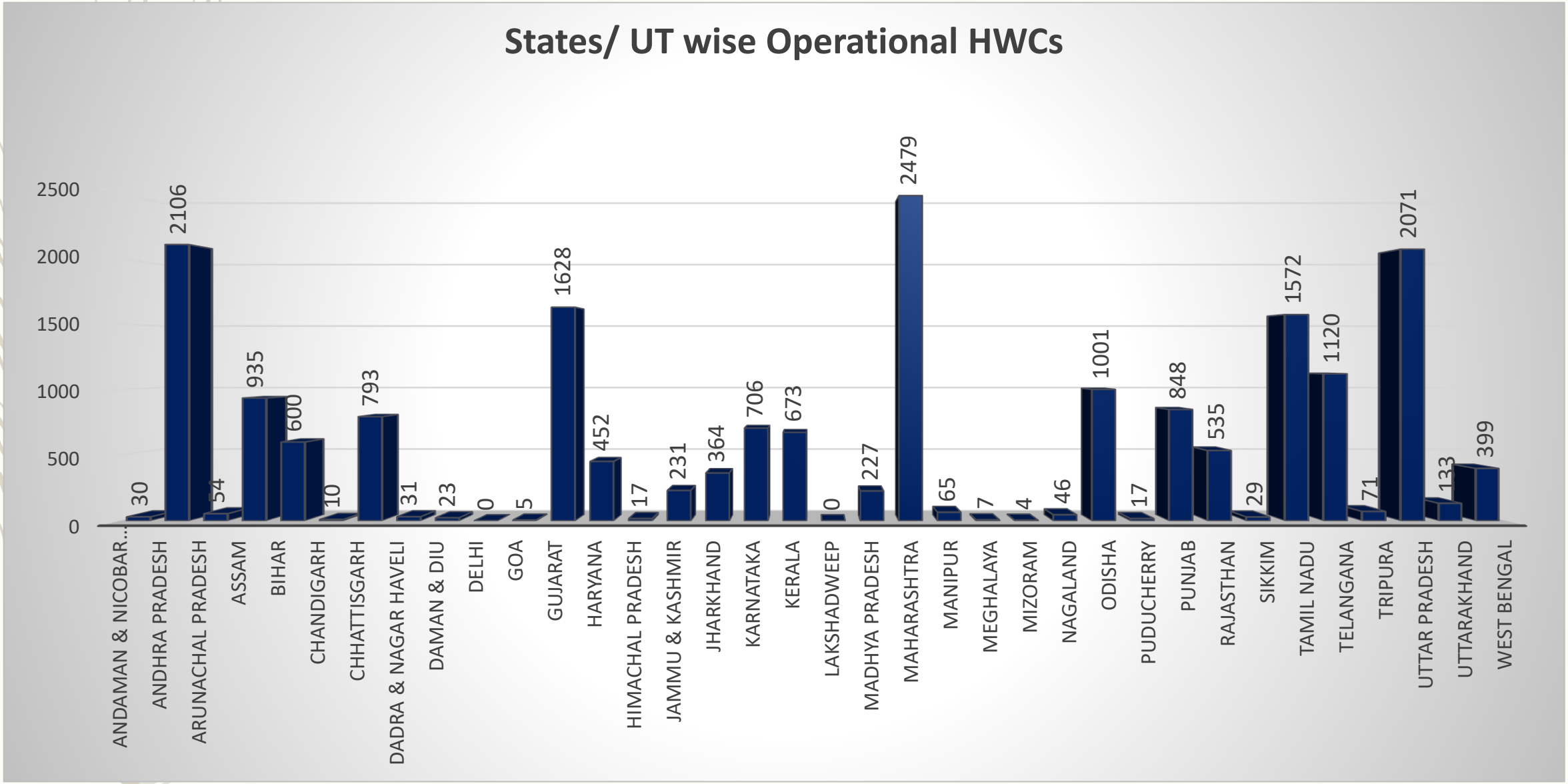
Data Source: https://data.gov.in/search/site?query=ayushman+bharat

State/UT Beneficiary Families covered under PMJAY as on July 2019 (from MoHFW)



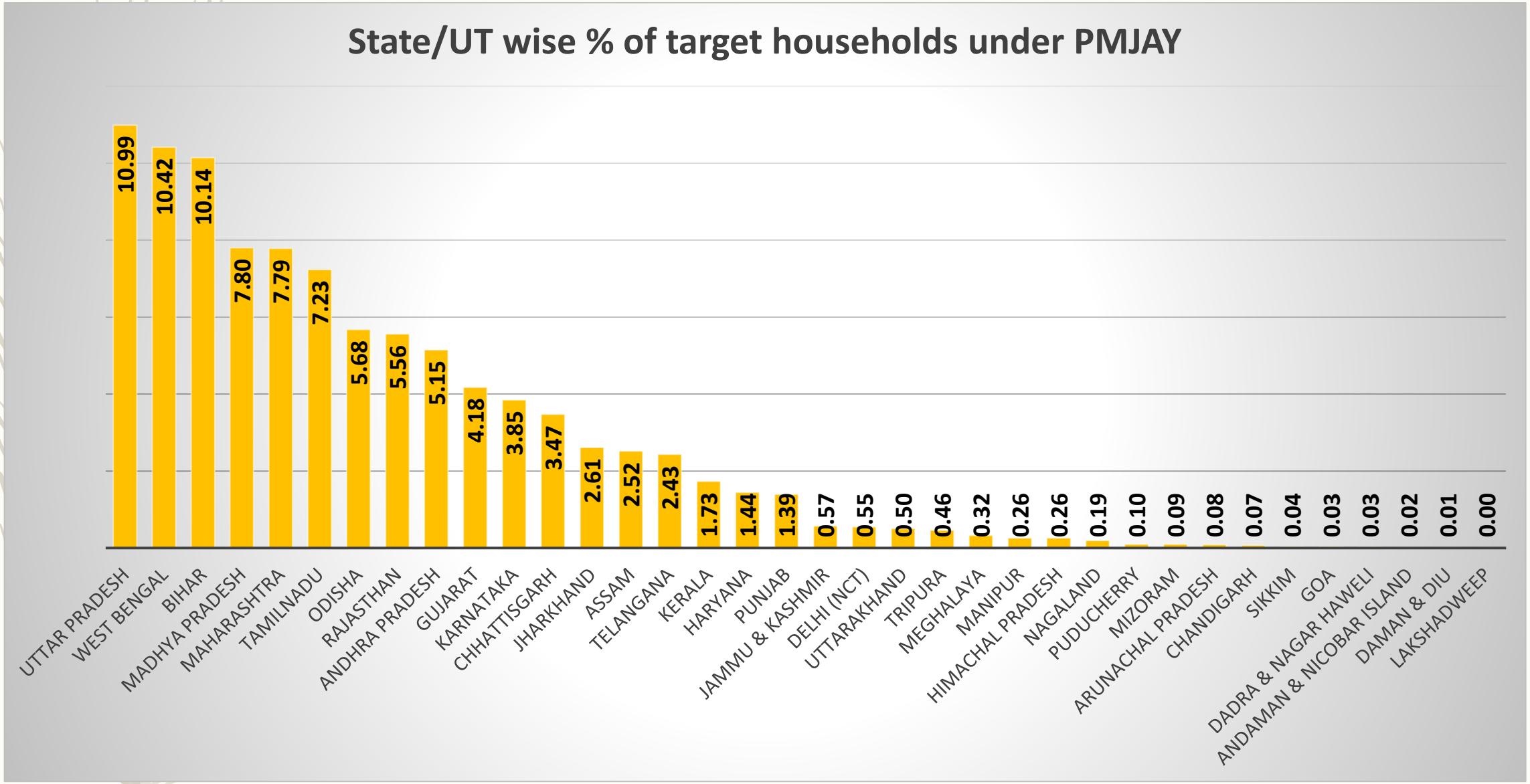
Data Source: https://data.gov.in/search/site?query=ayushman+bharat

State/UT wise Operational Ayushman Bharat- Health and Wellness Centre as on June 2019



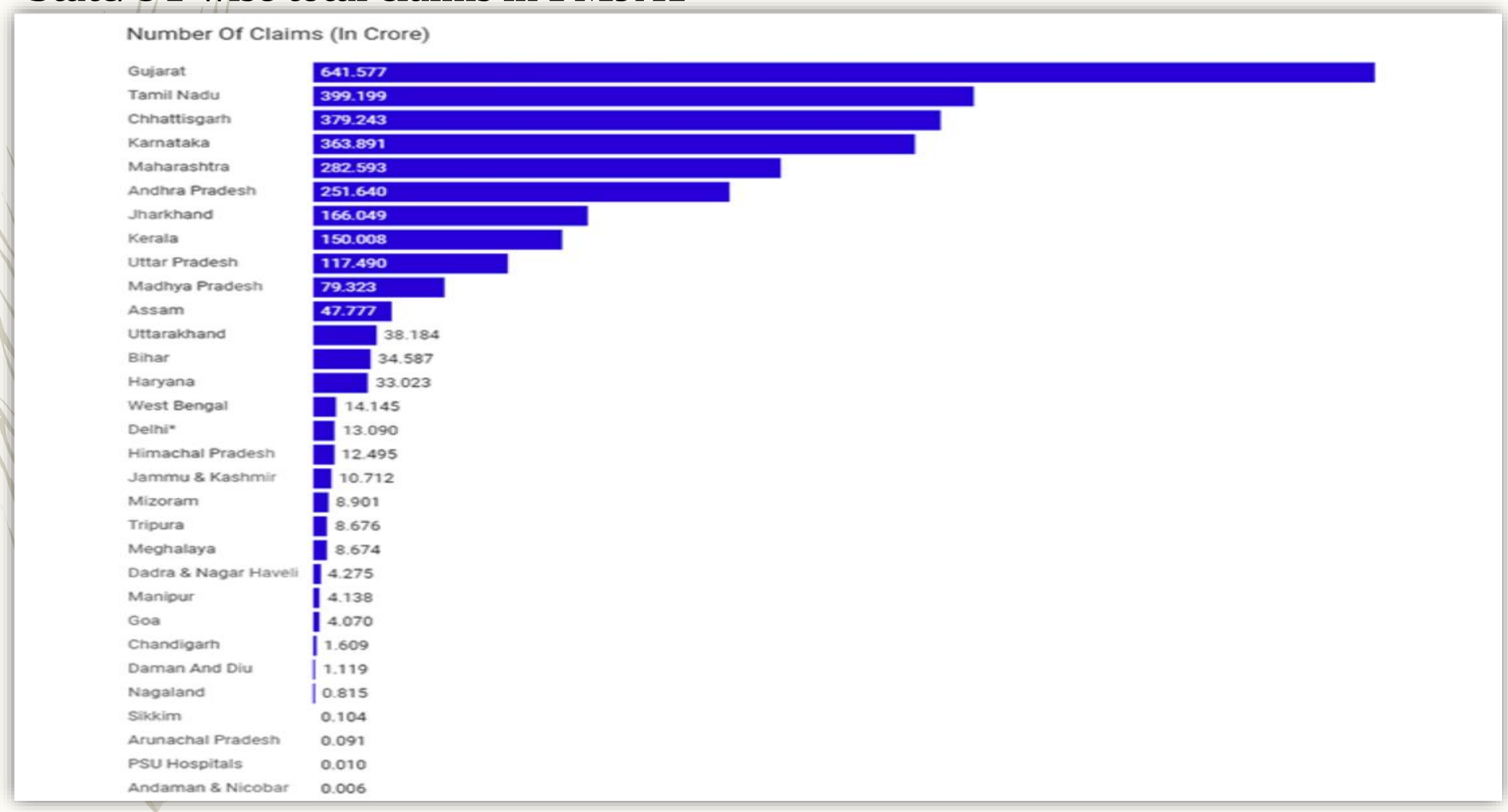
Data Source: https://data.gov.in/search/site?query=ayushman+bharat

State/ UT wise target household under PMJAY as on July 2018



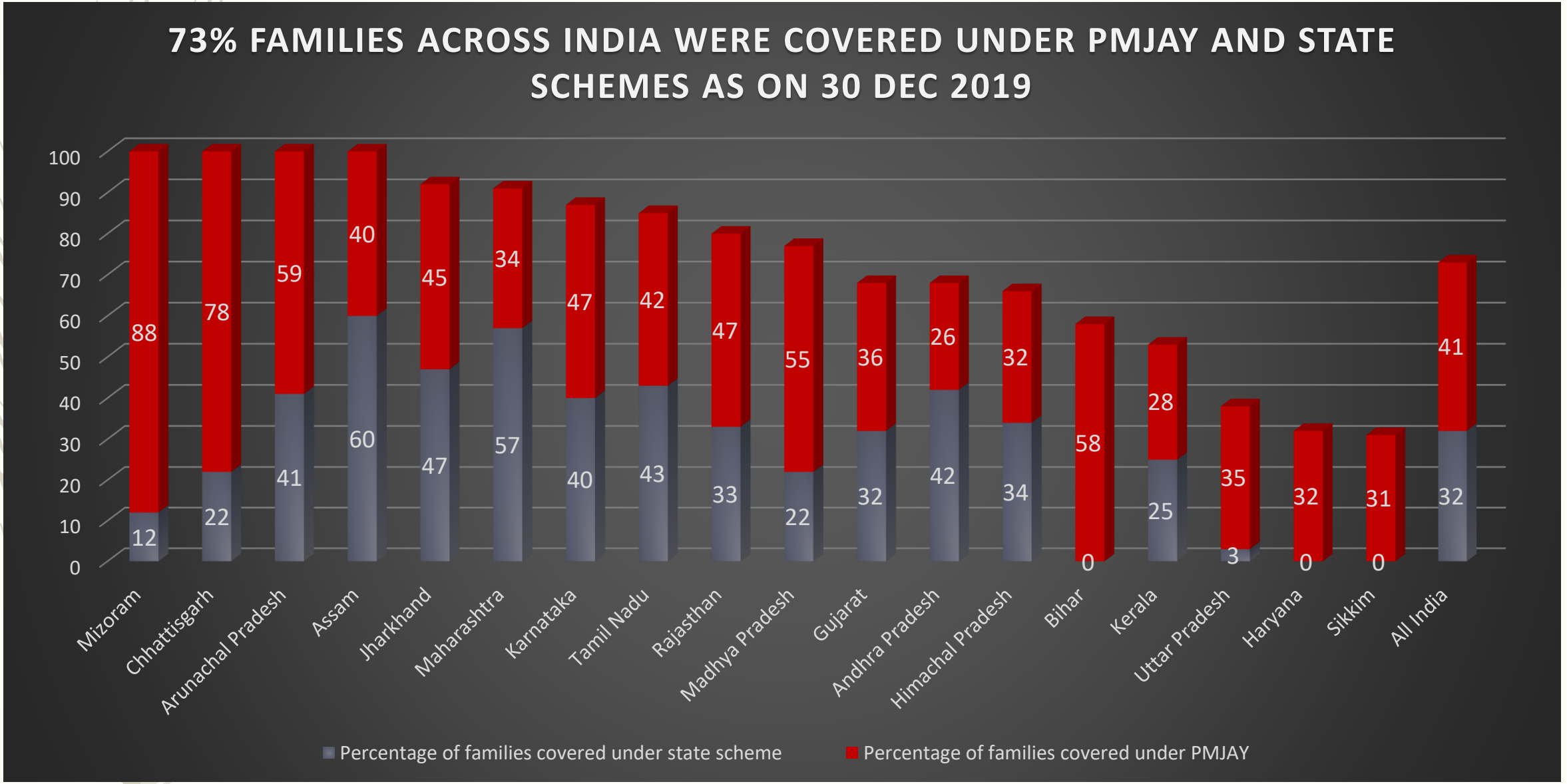
Data Source: https://data.gov.in/search/site?query=ayushman+bharat

State/UT wise total claims in PMJAY



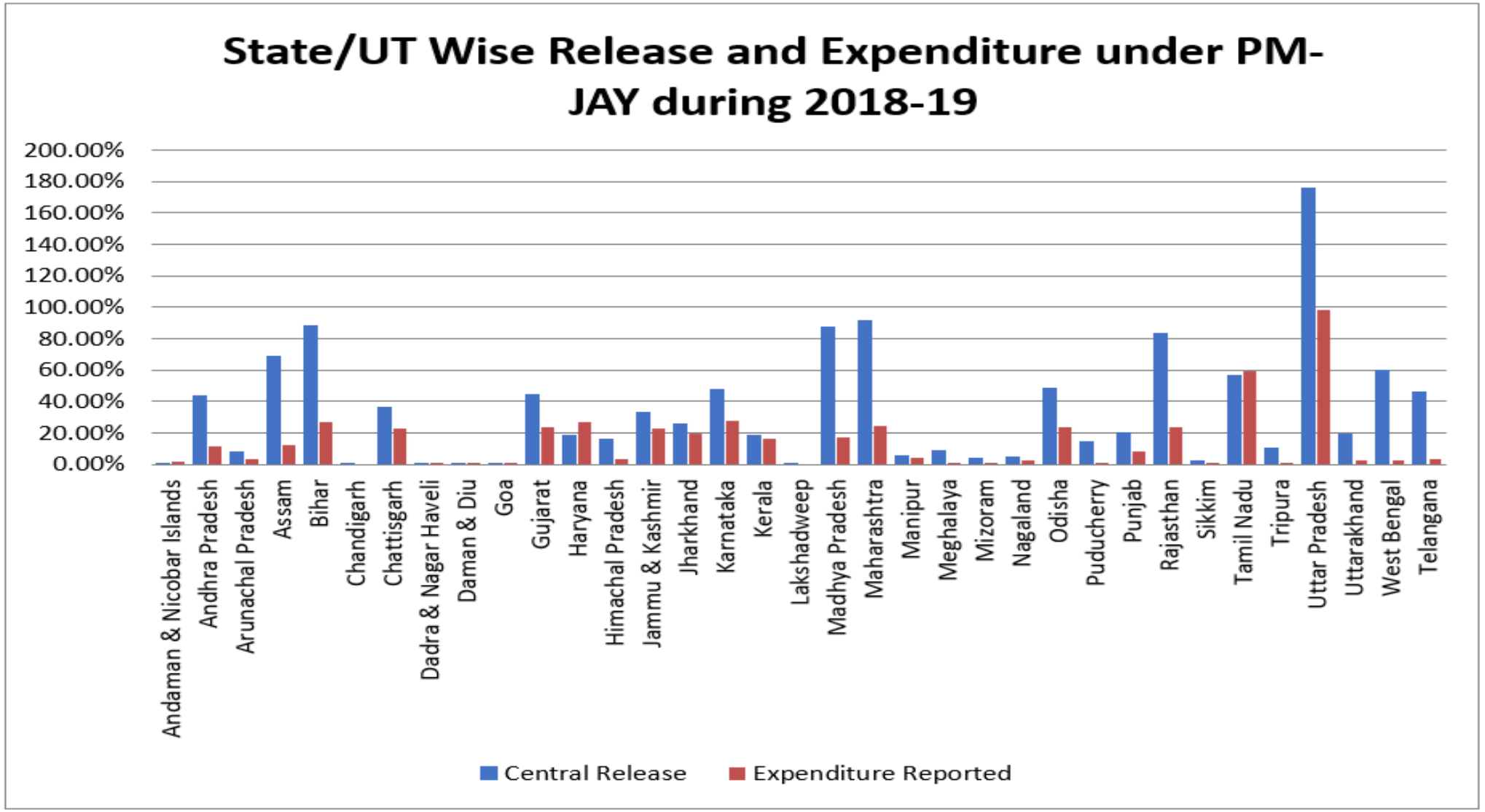
Source: Government of India, In Lok Sabha

Percentage of Families covered under PMJAY and State Schemes as on Dec 2019



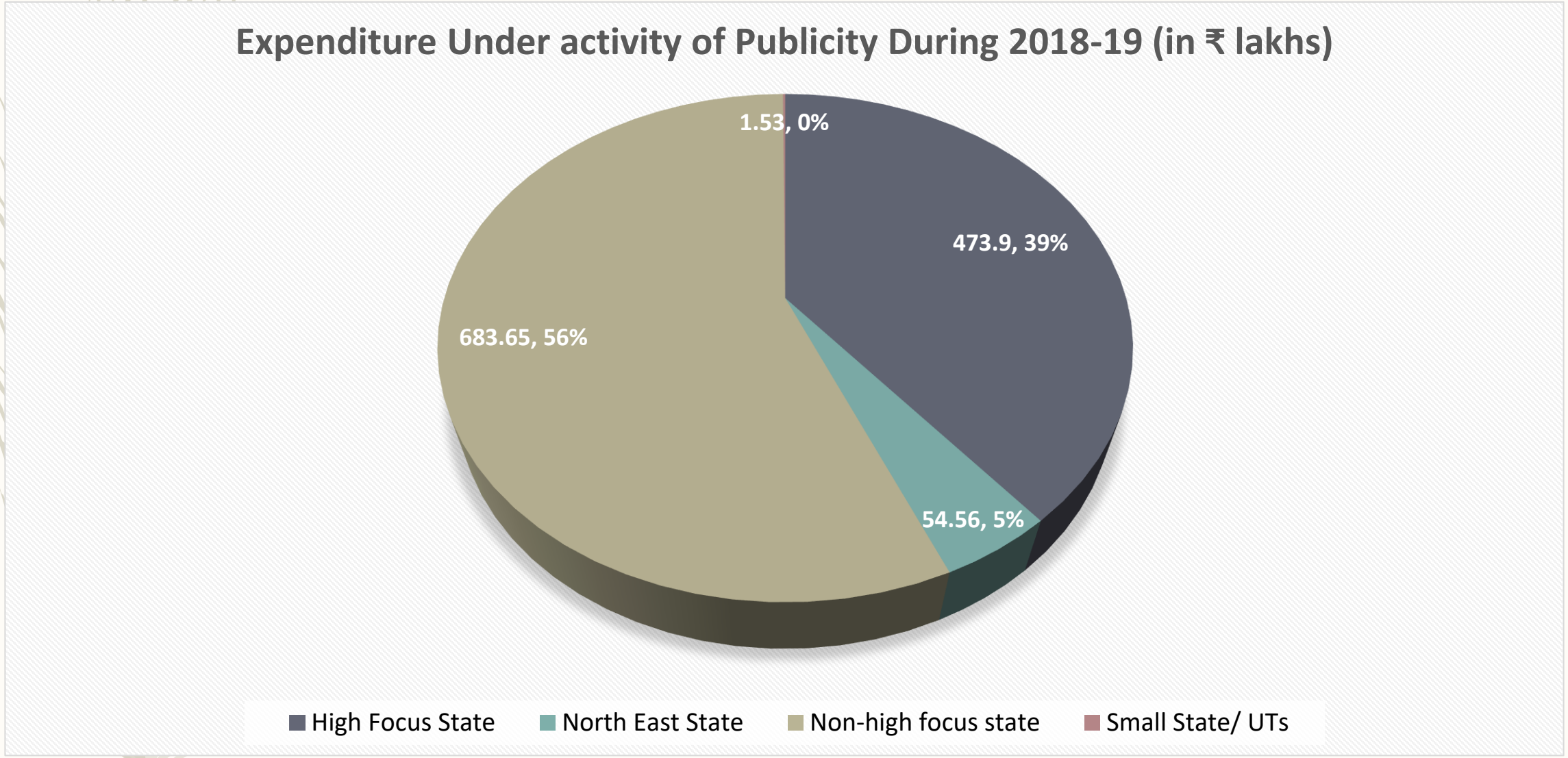
Source: State factsheets from PMJAY website. Available online at: https://www.pmjay.gov.in/node/810

State/UT wise release and expenditure under PMJAY during 2018-19 (from MoHFW)



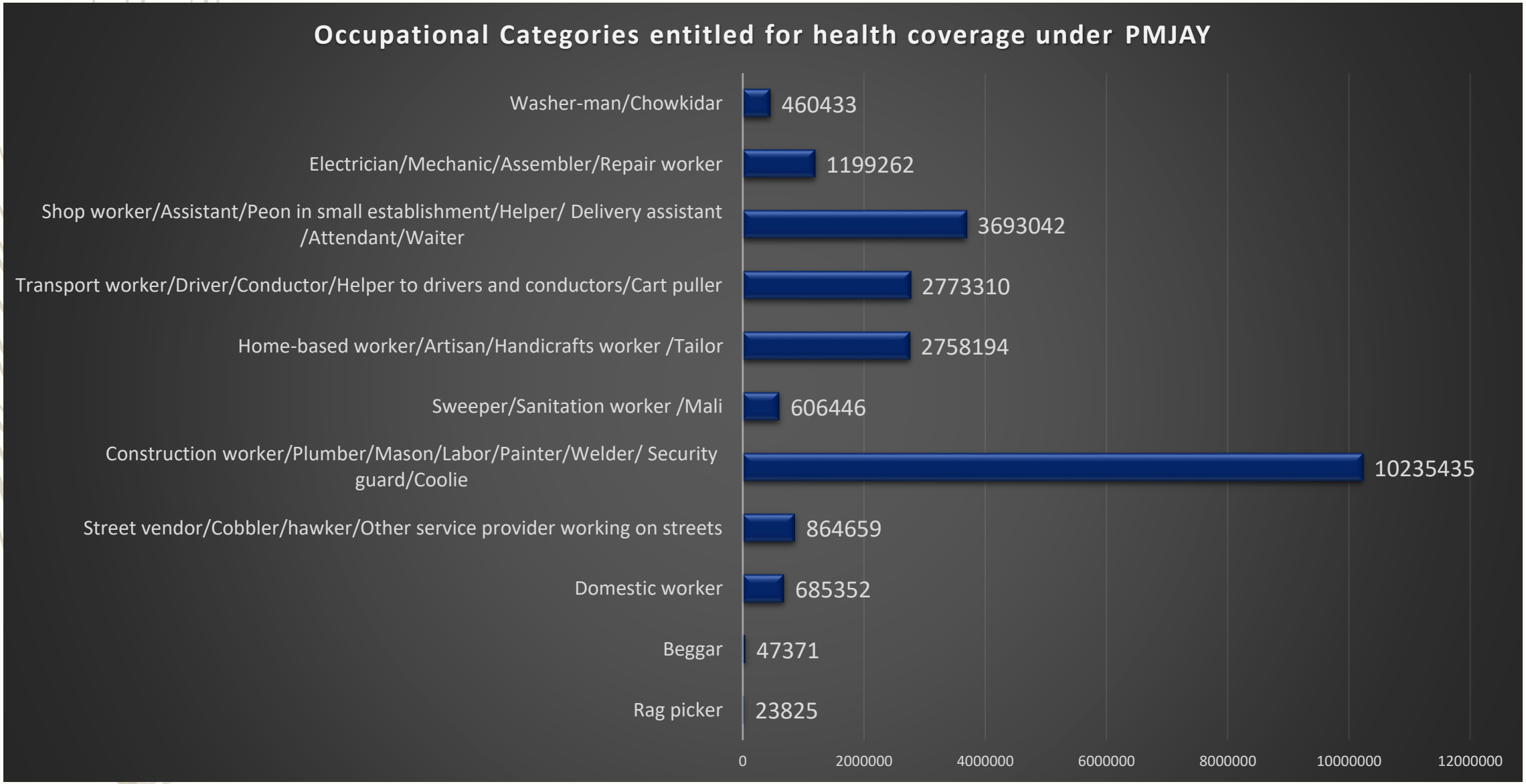
Data Source: https://data.gov.in/search/site?query=ayushman+bharat

State/UT wise expenditure under activity of publicity for the programme for PMJAY during 2018-19 (from MoHFW)



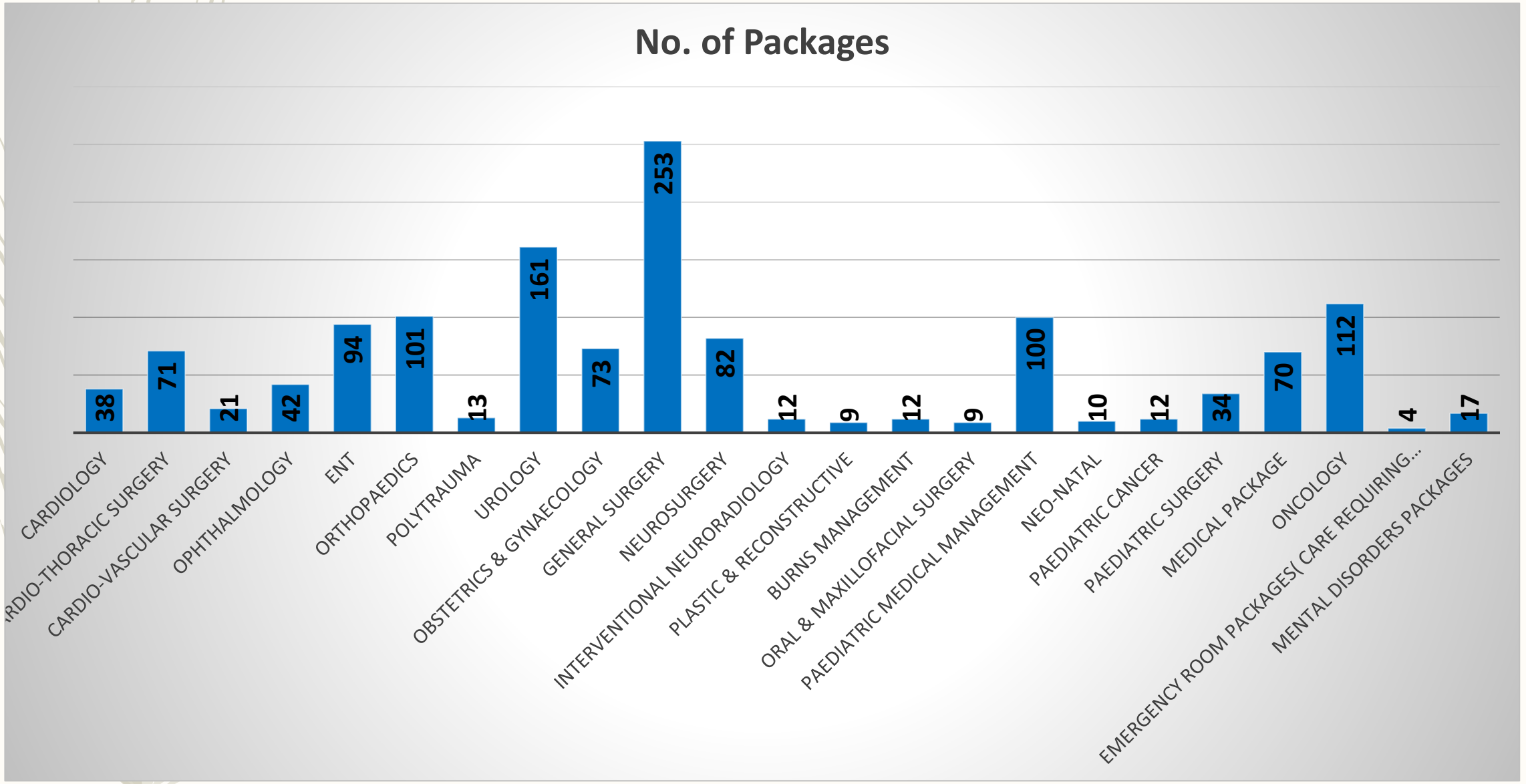
Data Source: https://data.gov.in/search/site?query=ayushman+bharat

Occupational categories entitled for health coverage under the scheme PMJAY as on Dec 2018



Data Source: https://data.gov.in/search/site?query=ayushman+bharat

Details of 23 Medical Specialty covered under PMJAY on July 2018



Data Source: https://data.gov.in/search/site?query=ayushman+bharat

Conclusion

- Without a doubt Ayushman Bharat is a well-intentioned scheme moving in the direction of achieving Universal Health Coverage.
- Proper implementation of PMJAY will result in timely treatment, satisfaction of patients, improvement in health outcomes, improvement in efficiency and productivity leading to improvement in quality of life.
- There might be a scenario where the scheme has given fruitful results in one region but not be suitable for other regions.

- So, there would be need of the hour to understand the state specific challenges due to geopolitical diversity, cultural settings and states should adapt innovative models for working on the desirable solutions.

- To make this scheme a success, it would require cautious checking of the implementation of the program to track progress against key budgetary, administration, and money related assurance measures and guard against unintended results.

Suggestions

- Out of 32 States/UTs empanelled under PMJAY, 11 states have not shown expenditure on IEC activities and printing activities for Health & Wellness centre (HWC) to create awareness among people regarding the scheme, so these states need to work for publicity on IEC activities.

- As per the study except for few states like Chhattisgarh in context of claims, most top performers were richer states. So, government should pay attention to make sure that benefits are distributed equally amongst well-off and poorer states.

- It does not cover treatment like bone marrow transplant which is becoming a hurdle in availing treatment for poor patients for fatal disease like aplastic anaemia apart from being entitled under PMJAY.

- Also, package covers Pacemaker but its battery which needs to be replaced in 5-15 years depending upon the type of device is not covered under PMJAY. So, addition of few more packages should be considered.

- According to this scheme it was seen that treatment starts after hospitalization of patient but of the high OOP payment by patients, the bulk is spent on out-patient treatment so, OPD expenses under PMJAY should also be taken into consideration.

Thankyou