

100 days of Aayushman Bharat

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HAPPY NEW YEAR

The Aayushman Bharat Scheme, which was launched on 23rd September, 2018 has completed 100 days. These 100 days have witnessed the most significant steps in improving healthcare for the poor ever since independence.

The state of Healthcare in India

India's healthcare system was always lacking. Besides inadequacy of healthcare institutions proportionate to India's population, there were many other challenges. Besides important State supported institutions, the private institutions have now been established mainly around large metropolitan towns or Tier-I or Tier-II cities. Many public and private hospitals are of global quality. Their charges, if we compare to the cost elsewhere in the world, are extremely competitive, but for a large part of India's population, these are considered beyond reach. The Government employees and those in other public institutions are generally supported by governmental healthcare programmes. Those in the armed forces are supported by the healthcare provided in those institutions. Some private sector corporates have a healthcare provision as part of their service conditions. Still, 62.58% of the Indian population has to pay their healthcare bills themselves. Most find it unaffordable. Low healthcare insurance penetration, low financial protection and high out of pocket expenses pose major challenges.

The Ayushman coverage

Born out of this necessity is the Government's scheme of Aayushman Bharat/Pradhan Mantri Jan Aarogya Yojana (PMJAY). The Yojana was launched on 23rd September, 2018. It has completed 100 days today. This Yojana covers 10.74 crore poor families, i.e., over 50 crore people. 40% of India's population is covered by this scheme. These weaker sections can avail of a medical scheme which covers hospitalisation charges spread over 1350 hospitalisation packages for a sum of Rs. 5 lakh per year for the whole family. Thus, if any member of the family requires to be hospitalised, his charges upto Rs. 5 lakh will be picked up by the financial management under Aayushman Bharat. The scheme is paperless and cashless.

Launch of the scheme and its implementation has been relatively problem free.

Post Ayushman Bharat situation

In the first 100 days, 6.85 lakh patients have been provided hospital treatment. 5.1 lakh claims have availed of the scheme, for which payment has been released. This averages 5000 claims per day for the first 100 days. No patient have had to pay a single Rupee. Thus, once awareness of the scheme increases, It is anticipated that in the next few years, almost 1 crore

plus families will benefit each year. The total number of hospitals covered by this scheme are both Government hospitals and private hospitals presently numbering 16,000 and increasing steadily. More than 50% of the implementing hospitals are in the private sector. Thus, a patient can enroll himself in empanelled hospital and get himself hospitalised upto charges of Rs. 5 lakh in a totally cashless and paperless manner.

This scheme is a game changer in healthcare. Many people from the weaker sections avoided hospital treatment in order to avoid the burden of an unbearable payment. Today 40% of India's poorest are assured of a treatment in a hospital at the cost of public expenditure. This scheme also supports the hospitals as an institution by ensuring patients for them. This will lead to more hospitals (especially in Tier II and III cities), and those with better equipment. Health sector jobs are set to increase. PMJAY will help create an accountable health system because beneficiary feedback is an integral part of its implementation.

From infrastructure creation, to rural roads, to building houses for the poor, providing them with electricity, toilets, gas connection and now healthcare has only been possible after initiatives taken by the Prime Minister and the Government have resulted in a higher tax base and greater revenue collection.