

Ayushman Bharat - Govt. Schemes for UPSC

Ayushman Bharat Programme is an umbrella health scheme of the Government of India. It was launched in 2018 by Prime Minister Narendra Modi. Government schemes are an important part of the [UPSC syllabus](#) and every year, questions are asked on them in the UPSC exam. In this article, you will get all the information you need for the Ayushman Bharat Programme.

Ayushman Bharat Programme

The Ayushman Bharat programme was launched in 2018 to address health issues at all levels - primary, secondary and tertiary. It has two components:

1. Pradhan Mantri Jan Arogya Yojana (PM-JAY), earlier known as the National Health Protection Scheme (NHPS)
2. Health and Wellness Centres (HWCs)

Ayushman Bharat is an integrated approach comprising health insurance and primary, secondary and tertiary healthcare. The HWCs are aimed at improving access to cheap and quality healthcare services at the primary level. PM-JAY will cover the financial protection for availing healthcare services at the secondary and tertiary levels.

Ayushman Bharat is the largest government-funded healthcare programme in the world with over 50 crore beneficiaries. It has been dubbed 'Modicare'.

Need for Ayushman Bharat

- The 71st round of the National Sample Survey Office ([NSSO](#)) revealed many grim numbers about the country's healthcare system.
 - About 86% of rural households and 82% of urban households do not have access to healthcare insurance.
 - Over 17% of the country's population spend a minimum of 1/10th of their household budgets on availing health services.
 - Unexpected and serious healthcare problems often lead families to debt.
 - Over 19% and over 24% of the urban and rural households respectively meet their healthcare financial needs through borrowings.
- To address these grave concerns, the government, in accordance with the National Health Policy 2017, launched the Ayushman Bharat programme along with its two sub-missions, PMJAY and HWCs.

Pradhan Mantri Jan Arogya Yojana (PM-JAY)

PMJAY is one of India's most ambitious health sector schemes.

- It was launched as the National Health Protection Mission and renamed later.
- It is the largest government-funded health insurance scheme in the world.
- The scheme offers eligible families an insurance cover of Rs. 5 lakh per annum per family.
- This amount is intended to cover all secondary and most tertiary care expenditure incurred.
- There is no cap on family size and age under the scheme, to ensure that nobody is left behind.
- The cover will include pre and post hospitalisation expenses. It will also cover all pre-existing conditions.
 - 3 days of pre-hospitalisation and 15 days of post-hospitalisation like medicines and

diagnostics are covered.

- Components of treatment covered under the scheme:
 - Medical examination, consultation and treatment
 - Medical consumables and medicines
 - Intensive and non-intensive care services
 - Medical implant services
 - Lab and diagnostic investigations
 - Complications arising out of treatment
 - Accommodation benefits and food services
- The beneficiary will also receive a defined transport allowance per hospital.
- The beneficiaries can take cashless treatment from any empanelled hospital anywhere in the country. This includes both public and private hospitals. By default, all government hospitals in the states that are implementing the scheme will be empanelled.

PM-JAY Eligibility Criteria

PM-JAY is an entitlement-based scheme. The eligible families are fixed based on the deprivation criterion in the [Socio-Economic Caste Census \(SECC\)](#) database.

The detailed categories in both urban and rural areas are given below:

1. Families with only 1 room with kutcha roof and walls.
2. Families with no adult member between the ages of 16 and 59.
3. Households headed by females with no male adult members between the ages of 16 and 59.
4. Families with disabled member and no adult able-bodied member.
5. SC/ST households.
6. Landless households that derive a major chunk of their income from manual casual labour.
7. Rural area families with anyone of the following:
 1. Households with no shelter
 2. Destitutes
 3. Living on alms
 4. Manual scavenging
 5. Primitive tribal groups
 6. Legally released bonded labourer
8. In the urban areas, there are 11 occupational categories that are eligible for the scheme:
 1. Beggar/Ragpicker/Domestic worker
 2. Street vendor/hawker/cobbler/Other service provider working on the streets
 3. Construction worker/Plumber/Mason/Labourer
 4. Painter/Welder/Security guard
 5. Coolie and other head-load worker
 6. Sweeper/sanitation worker
 7. Mali/home-based worker
 8. Artisan/handicrafts worker/Tailor
 9. Transport worker/driver/conductor/helper to driver and conductor/Cart puller/rikshaw puller
 10. Shop worker/assistant/Peon in small establishment/Helper/delivery assistant/Attendant/waiter
 11. Electrician/Mechanic/assembler/repair worker/Washerman/Chowkidar
9. According to the data in the SECC 2011, certain beneficiaries are excluded. They include households with a motorised vehicle, fishing boat, that pay income tax/professional tax, with a refrigerator, landline phone, an earning member who earns more than Rs.10000 per month, owns land above a certain limit, government servants, etc.

PM-JAY Benefits

PM-JAY is a visionary scheme that aims at the fulfilment of the concept of **Universal Health Coverage (UHC)**. It offers many benefits, which are discussed below.

- It will reduce medical expenditure for many families, which is currently, mostly out-of-the-pocket expense. Eligible families can avail of quality medical services without getting into debt.
- The insurance cover provided by this scheme includes items that are generally excluded from standard medi-claims (for example, pre-existing conditions, internal congenital diseases and mental health conditions).
- The scheme requires hospitals to maintain a certain minimum standard.
- Insurers and third-party administrators will have access to the large new market that opens up because of the scheme.
- The scheme has the potential to initiate wide reforms in India's healthcare system.
- After one year of the scheme's beginning, beneficiary families are said to have saved over Rs.13000 crores.
- Over 60% of the treatments have been done by private hospitals. The private sector has played an active role in this scheme and they have also benefitted from it. In many tier II and III cities, private hospitals have observed increased footfall.
- Economically weaker sections of society can have access to quality healthcare services without financial hardships.
- The scheme has also resulted in the creation of more jobs. In 2018, it generated more than 50000 jobs. This number is expected to increase as the government is planning to build 1.5 lakh HWCs by 2022.
 - 90% of the jobs are in the health sector and the remaining in allied sectors like insurance.
- The scheme is supported by a robust IT framework.
 - IT supports beneficiary identification, maintaining treatments records, processes claims, addresses grievances, etc.
 - There is a fraud detection, prevention and control system at both the central and state levels, which is critical for preventing frauds.

PM-JAY Criticisms

There are certain criticisms and challenges in the implementation of PM-JAY. They are briefly described below.

- There has been a criticism that while the allocation of funds for PM-JAY has increased exponentially, the fund for the [National Rural Health Mission \(NRHM\)](#) has gone up only by 2%. So, the scheme has been eating into the funds for NRHM.
- Under this scheme, the private sector has been given a large role in offering primary health care to the people. This has been protested by many people in various states, as regulation of the private sector is marginal.
- There is a shortfall of healthcare professionals and personnel needed to implement a vast scheme as this.
- There is also a problem of infrastructure as many primary healthcare centres run without even the basic facilities such as electricity, regular water supply, etc.
- The scheme excludes those economically weaker sections that fall under the organised sector and have no access to health insurance.

Health and Wellness Centres (HWCs)

HWCs are being created by converting the existing primary health centres and subcentres. They provide **comprehensive primary health care (CPHC)** including child and maternal health services, non-communicable diseases, and also diagnostic services and free essential drugs.

Services offered by HWCs:

1. Care in pregnancy and child-birth.
2. Neonatal and infant health care services.
3. Childhood and adolescent health care services.
4. Family planning, Contraceptive services and other Reproductive Health Care services.
5. Management of Communicable diseases including National Health Programmes.
6. Management of Common Communicable Diseases and Outpatient care for acute simple illnesses and minor ailments.
7. Screening, Prevention, Control and Management of Non-Communicable diseases.
8. Care for Common Ophthalmic and ENT problems.
9. Basic Oral health care.
10. Elderly and Palliative health care services.
11. Emergency Medical Services.
12. Screening and Basic management of Mental health ailments.

HWCs are important because they offer CPHC that is critical to enhancing health outcomes. Primary healthcare plays a vital role in preventing many disease conditions. Providing CPHC decreases morbidity and mortality at a lower cost and greatly reduces the requirement for secondary and tertiary care.

UPSC Questions related to Ayushman Bharat

What is Ayushman Bharat scheme?

Ayushman Bharat is an umbrella health scheme that has two sub-components: Pradhan Mantri Jan Arogya Yojana (PM-JAY) and Health and Wellness Centres (HWCs). It provides health insurance to eligible beneficiaries and also primary health care to people.

Is pregnancy covered under Ayushman Bharat?

Yes, it is covered.

Who is the CEO of PM-JAY?

Indu Bhushan is the CEO of PM-JAY.

