

# AIR Spotlight: Pradhan Mantri Jan Arogya Yojana

AIR Spotlight is an insightful program featured daily on the All India Radio Newsonair. In this program, many eminent panellists discuss issues of importance which can be quite helpful in IAS exam preparation. This article is about Pradhan Mantri Jan Arogya Yojana.

# **Participants:**

- Dr RS Sharma, CEO of the National Health Authority
- Aditi Tandon, Journalist

**Context:** Recently, the Union Ministry of Health & Family Welfare conducted "Arogya Manthan 2022" to celebrate four years of implementation of Ayushman Bharat Pradhan Mantri – Jan Arogya Yojana (AB PM-JAY).

#### **Introduction:**

- Ayushman Bharat is a flagship scheme of the Government of India, launched as recommended by the National Health Policy 2017, to achieve the vision of Universal Health Coverage (UHC).
  It has two interrelated components - Health and Wellness Centres (HWCs) and Pradhan Mantri Jan Arogya Yojana (PM-JAY).
- The scheme has proved to be the most successful and the world's largest free and cashless health delivery scheme as far as secondary and tertiary hospitalisation is concerned.
- The expansion of the program has also been comprehensive with the inclusion of many new categories of treatment.
- The program also recently included transgenders for a range of surgeries for which a package is already being finalised by the National Health Authority.

#### Performance of the program:

- The National Health Authority (NHA) under its flagship scheme of Ayushman Bharat Pradhan Mantri Jan Arogya Yojana (AB PM-JAY) released a revamped and dynamic public dashboard that provides a granular view of PM-JAY scheme implementation data in a comprehensive manner.
- As per the dashboard, the total number of Ayushman Bharath Health Accounts which was earlier known as health ID created is 22.1 crores, and over 1,66,000 healthcare professionals have been registered.
- There are 1,58,459 hospitals which are verified facilities on the health facility registry.
- The number of packages has been increased to about 2000 with revised rates.
- It is being implemented in all States and UTs barring West Bengal, NCT of Delhi and Odisha.



## **PMJAY and Transgenders:**

- Recently, the National Health Authority signed a landmark memorandum of understanding with the Union Ministry of Social Justice and Empowerment to include transgenders under the ambit of AB PM-JAY to help them with health cover of up to ₹5 lakh per transgender beneficiary per vear.
- A comprehensive master package is provided for transgenders, including existing AB PM-JAY packages and specific packages (Sex Reassignment Surgery (SRS) and treatment).
- Gender transformation procedures like male to female and female to male, hormonal therapy, laser procedures for hair removal, voice surgery, breast augmentation, etc. are being included in the list dedicatedly for surgery and treatment of transgender people under PM-JAY.
- NHA will also generate Ayushman Bharat TG Plus Card to ease the treatment process for all verified transgender beneficiaries.
- The scheme would cover all transgenders not receiving such benefits from other centres/state-sponsored schemes.

# **National Digital Health Mission (NDHM):**

- The National Digital Health Mission was launched in 2020.
- The NDHM is a complete digital health ecosystem with four key features health ID, personal health records, Digi Doctor and health facility registry.
- A health ID is a unique 14-digit identification number that will identify each citizen and act as a repository of their medical records.

# **Challenges ahead:**

- The uneven geographic distribution of poor families makes it difficult to find out the real targeted beneficiaries. In spite of many people having been treated under the scheme, many others remain unaware of the programme.
- The program lacks rational pricing and health insurance for all as it covers only a section of the population.
- The ill-equipped public sector health capacities call for necessary partnerships and coalitions with private sector providers.
- The National Health Authority has revised the Health Benefit Package (HBP) Master under the scheme. In the revised version of the Health Benefit Package (HBP 2.2), rates of some health packages have been increased by 20 percent to 400 percent.
- Private hospitals have expressed concerns with respect to rates of the packages under the scheme since they are are lesser than private packages.

#### Government steps to address the above issues:

• On the issue of violation of the privacy of Indian citizens regarding data of health ID being



stored with an external company, the union government has clarified that the data is stored in a federated architecture as described in the National Digital Health Blueprint released by the Government of India in 2019.

- There is no violation of the privacy of Indian citizens as NDHM enables appropriate use of the health data of each individual for his/her own healthcare with his/her consent only.
- The health benefit package construct is a consultative exercise with extensive discussions with all the stakeholders including private sector players.
- The government has created a fast-track channel called 'Green Channel Payment' (GCP) for insurance claims under Ayushman Bharat, aiming to reduce delays currently plaguing its flagship health insurance scheme.
  - Under GCP, a partial payment of 50% of the claim amount will be released automatically to hospitals through the system at the time of claim submission, while the balance will be released following the usual claim adjustment process.

### Way Forward:

- Utilising innovation and technology effectively can further lower the overall cost of healthcare. AI-powered mobile applications can offer superior, affordable, patient-centred, smart wellness solutions.
- This programme must be expanded while maintaining its quality and sustainability for all parties involved.
- The government must improve the delivery system, which entails growing the network of private providers, moving to organised care delivery, implementing innovations, and providing specialty, affordable, and value-based care.
- The government shall use creative finance strategies for long-term sustainability in addition to service and quality.