



Ayushman Bharat Yojana

Ayushman Bharat Yojna, also known as the Pradhan Mantri Jan Arogya Yojana (PM-JAY), is one of the world's largest government-funded healthcare programs, launched by the Government of India in September 2018. The scheme aims to address the healthcare needs of economically disadvantaged sections of society, providing them with access to quality health services.

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.

Here is a detailed explanation of the scheme:

Objectives

The primary objectives of Ayushman Bharat Yojna are:

1. **Universal Health Coverage:** To move towards universal health coverage, providing quality healthcare services to all citizens, especially the poor and vulnerable sections.
2. **Financial Protection:** To protect poor families from the financial burden of hospitalization and medical treatment.
3. **Access to Services:** To improve access to quality healthcare services across the country, including rural and remote areas.

Key Features

1. **Health Coverage:**

- Each beneficiary family receives annual health coverage of up to Rs. 5 lakh for secondary and tertiary care hospitalization.
 - The coverage includes expenses related to hospitalization, surgeries, pre- and post-hospitalization, and diagnostic services.
2. **Beneficiaries:**
 - The scheme targets more than 10 crore poor and vulnerable families (approximately 50 crore individuals), identified based on the Socio-Economic Caste Census (SECC) 2011 data.
 - There is no cap on the family size or age, ensuring comprehensive coverage for all members of the eligible families.
 3. **Cashless and Paperless Services:**
 - Beneficiaries can avail of cashless and paperless services at the point of service in any of the empaneled public and private hospitals across India.
 4. **Portability:**
 - The scheme provides nationwide portability, allowing beneficiaries to access healthcare services at any empaneled hospital in the country.
 5. **Empaneled Hospitals:**
 - Hospitals are empaneled based on their ability to meet specific criteria and standards set by the government.
 - Both public and private hospitals can participate, increasing the availability of healthcare facilities for beneficiaries.
 6. **Health and Wellness Centers (HWCs):**
 - Ayushman Bharat also focuses on establishing 1.5 lakh Health and Wellness Centers (HWCs) to provide comprehensive primary healthcare services.
 - HWCs offer services such as maternal and child health care, non-communicable diseases care, essential drugs, and diagnostic services.
 7. **Prevention and Wellness:**
 - The scheme promotes preventive healthcare and wellness through HWCs, encouraging healthy living and early detection of diseases.
 8. **Fraud Control Mechanisms:**
 - Robust mechanisms for fraud detection, prevention, and control are in place to ensure the integrity of the scheme and that benefits reach the intended beneficiaries.
 9. **Digital Platform:**
 - The implementation of PM-JAY is supported by a strong IT infrastructure, facilitating smooth operation, monitoring, and management of the scheme.
 - A dedicated portal and mobile app are available for beneficiaries to access information and services.
 10. **Funding and Administration:**
 - PM-JAY is fully funded by the Government of India, with the costs shared between the central and state governments.
 - The National Health Authority (NHA) is responsible for the implementation and administration of the scheme at the national level, while State Health Agencies (SHAs) oversee the implementation at the state level.

Benefits

- Financial Protection: Reduces out-of-pocket healthcare expenses for poor families, preventing them from falling into poverty due to medical costs.
- Improved Access: Enhances access to quality healthcare services, including specialized treatments and surgeries.
- Quality Care: Encourages hospitals to improve their facilities and services to meet the standards required for empanelment.
- Health Outcomes: Contributes to improved health outcomes by providing timely and necessary medical care.

Challenges and Future Directions

- Awareness: Increasing awareness among eligible beneficiaries to ensure they are informed about their entitlements and how to avail of the services.
- Capacity Building: Enhancing the capacity of healthcare facilities to handle the increased patient load and deliver quality services.
- Sustainability: Ensuring the financial sustainability of the scheme given the large number of beneficiaries.
- Monitoring and Evaluation: Strengthening monitoring and evaluation mechanisms to track the scheme's performance and impact.

Ayushman Bharat Yojna represents a significant step towards achieving Universal Health Coverage (UHC) in India, aligning with the Sustainable Development Goals (SDGs) related to health and well-being. The scheme aims to create a healthier and more equitable society by ensuring that the most vulnerable sections of the population have access to necessary medical care.