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**Short Communication** 

## Ayushman Bharat- India's answer to improve health problems among poor

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Abstract: Ayushman Bharat is a recently unveiled India's health protection scheme that aims to provide health benefits to 50 crore poor people. The article briefly discusses the schemes success and provides few directions to improve the existing scheme.

Keywords: India; Ayushman Bharat; Health; Insurance; Poor

## SHORT COMMUNICATION

Ayushman Bharat is a national health protection scheme that approximately covers 50 crore beneficiaries who are poor and vulnerable [1]. That is to say that it covers 40% of the Indian population [1]. It provides coverage of 5 lakh rupees per family per year with no restriction of family size. People covered under this scheme can avail cashless treatment from any public/ private empanelled hospitals across the country [1].

Lack of financial resources is a major barrier in availing health services among poor families in India. This scheme provides the poor an access to quality health and medication, with timely treatment leading to improvement in health and quality of life among these people [1]. It is 60% funded by the Centre and 40% from states and is on its way to become the World's largest free healthcare scheme within 5 months of its launch [2]. It is reported that within 200 days of the scheme implementation, 3.07 crore people were issued the scheme cards and 20.8 lakh poor were benefitted with free treatment worth RS 5000 crores [3].

In Mumbai, 492 hospitals come under this Ayushman Bharat scheme and 31,823 surgeries mainly for heart failure and kidney dysfunction were performed [4]. 33 out of 36 states and Union Territories of India have signed MoUs with National Health Authority (NHA), which is in charge of the rollout, implementation and management of Ayushman Bharat Scheme [5]. The scheme defines 1,350 medical packages covering surgery, medical and daycare treatments including medicines, diagnostics and transport [5]. According to data available, 60% treatment under the scheme was carried out in private hospitals and 40% were carried out in public hospitals [5]. In Uttar Pradesh (UP), 3 million people were issued Ayushman Bharat scheme cards and on average 1000 patients were getting treatment under this scheme on daily basis [6]. Under this scheme approximately 1 lakh patients have already availed free medical treatment from the empanelled 1415 hospitals throughout the UP state [6].

The ruling party BJP manifestoes for 2019 reveals that it plans to upgrade the Ayushman Bharat scheme by establishing 1.5 lakh health and wellness centres to provision telemedicine and diagnostic laboratory facilities by 2022, to ensure delivery of quality primary medical care to the poor [7]. Washington DC-based Centre for Global Development (CGD), based on the first year performance of Ayushman Bharat Scheme, has analyzed the schemes effort overall as positive, and suggested that better purchasing policies for medical supplies and drugs together with improving access to primary care, and an increased focus on vaccines would make the scheme sustainable and provide the required high quality health care service to Indians [8]. Director General of World Intellectual Property Organization Francis Gurry has also praised the scheme which emphasizes the importance of innovation to health and congratulated Prime Minister Narendra Modi on this incredible success [9]. It is to be noted that the finance minister of India while presenting the interim budget, has assured to expand the Ayushman Bharat schemes coverage and increased its allocation two and a half times from Rs 2,400 crore in 2018-19 to Rs 6,400 crore for 2019-20 [10]. Also, the government in its interim budget has announced significant hike of 16% in the overall health budget from previous Rs 54,302.50 crore to Rs 61,398 crore for

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the current 2019-2020 fiscal [11, 12]. According to latest available data, since its inception in September 2018, 26 lakh poor people have availed the benefits of this scheme [13].

The scheme will definitely be a huge success if its existing coverage is expanded and the list of procedures eligible increased, together with the ceiling associated with it. The scheme should also focus on delivering free health insurance with respect to primary health. Ayushman Bharat Scheme, if systematically financed and strictly monitored by the government, certainly gives millions of poor people in India a ray of hope to access the otherwise costlier health care system and lead a better life.

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