

Health scheme far from comprehensive



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THE much-advertised National Health Protection Scheme (NHPS) — Ayushman Bharat — is set to be rolled out on September 25. It is said to be the biggest health insurance scheme in the world. Much expectation has been raised from it. But it is important that the scheme be reviewed to see whether it will give universal comprehensive healthcare to the citizens of India.

NHPS not universal

It will cover 10 crore families — that is 50 crore people — with a coverage of Rs 5 lakh for secondary and tertiary hospitalisation care. With India's population hovering around 130 crore, it means nearly 80 crore people will be left out of any coverage benefit. The scheme is said to be for the BPL category. But very few of the uncovered 80 crore population have resources enough to effectively support their healthcare needs. Since the scheme will cover only the hospitalised patients and not those in outpatient care or preventive healthcare, it does nowhere meet the criteria of comprehensive universal healthcare.

Eighty per cent of the time, the out-of-pocket expenditure of patients is on outpatient care which is not covered under the NHPS. It is not clear whether post-hospitalisation expenses will be met with by the insurance companies or by the patient. In many diseases, post-hospitalisation care is very expensive and lifelong.



NOT ENOUGH: Most expenditure is on OPD care which is not covered under NHPS.

Elderly most vulnerable

Senior citizens are the most vulnerable population who need continuous care and empathy. Most of the diseases that occur at this age are chronic, which demand repeated visits to doctors. At a time when the earnings have come down substantially or have become nil, it becomes difficult for the senior citizens to bear the cost. In the absence of coverage of OPD care, even those enrolled in the NHPS will not benefit much. The elderly have special nutritional needs which need to be fulfilled. Ayushman Bharat makes no mention of these requirements.

Social determinants not integrated

The social determinants of health, like the supply of clean drinking

water, adequate sanitation, proper housing, nutrition and sufficient wages to meet day-to-day needs and health education, are the primary factors related to healthcare. However, these determinants are not integrated in government's policy-making in practice.

Toilets: The making of a toilet sounds good, but it has to be monitored. Since in rural areas, most of the toilets are not connected to the sewer lines, holes have to be dug to collect the excreta. This needs maintenance in a scientific manner. Just putting the seat one time may not serve the purpose. In 'kutchra' dug-up holes, there is seepage of soiled water, which pollutes the drinking water in the vicinity. Many such toilets are not

being put to the desired use; some are being used as storehouses. The government gives Rs 4,000 for the construction of a toilet. But this amount is too low. The minimum cost to build a toilet of the size of 5 x 5 feet is Rs 12,000. To construct it, a minimum of 800 bricks are needed at the rate of Rs 5 per brick. If Rs 8,000 has to be contributed by the person himself, it is unlikely that each and every family will build a toilet.

Nutrition: Nutrition plays the most important part in health. A well-nourished person is less likely to be taken ill compared to the one with poor nourishment. For proper nourishment, a balanced intake of proteins, carbohydrates, fats, vitamins and minerals etc is needed. All this comes from the daily intake of staple food like wheat, rice, vegetables, meat, eggs, milk, fruits etc.

A daily intake of 2,100 calories through a balanced diet for an adult costs around Rs 90 per day at the present rates of prices. For a family of five persons, Rs 13,500 per month is required for food only. With falling wages, insecure and contractual jobs, all this is a pipedream for the vast majority. Thus, most of our population remains undernourished.

Housing: Housing is another major determinant of the health of a person. The longevity of a person much depends on the environmental conditions he lives in. With a large number of people living in shanties, it would be naïve to expect them to be healthy.

Insurance cos' motive is money

It is well known that the insurance companies' primary motive is to earn profit. It is presumed that since the number of insured in the NHPS will be very large and as at any given time very few people are hospitalised, this will give enough scope to the companies to reap profits. But if at any stage, the companies find it to be unviable, they would not hesitate to pull out on one excuse or the other. If the premium is low, many of them may not join the scheme.

Those not covered under the scheme will be left to the mercy of insurance companies whose coverage is premium-based. More the premium, more the coverage. The premiums have become very high and out of reach of most of the people. For example, a family of five with three senior citizens has to shell out around Rs 1 lakh annually as premium to get a coverage of Rs 5 lakh in insurance companies. This is impossible for most of those uncovered under the NHPS.

Much more needs to be done to ensure healthcare for all. The social determinants have to be taken care of. For this, public spending on health which is a meagre 1.04 per cent of the GDP at present has to be increased to at least 5 per cent. Sufficient funds have to be released towards the schemes to meet the requirements for nutrition, housing, water supply, sanitation and health education.