

MAKING NHPM WORK: ON AYUSHMAN BHARAT

Relevant for: Health, Education & Human Resources | Topic: Health & Sanitation and related issues

Prime Minister Narendra Modi's announcement on Independence Day that Ayushman Bharat, or the National Health Protection Mission, will be launched formally on September 25 sends out the signal that the government is finally recognising the linkages between health care and economic development. Political parties have not yet made the right to health a campaign issue, and the National Health Policy does not recommend such a right since it cannot be fulfilled. But there is increasing awareness that it is unsustainable for a country of 1.3 billion people to rely on household savings to pay for health care. The NHPM is an ambitious initiative, providing a coverage of 5 lakh per family a year to 10 crore families chosen through the Socio-Economic Caste Census, mainly rural poor and identified urban workers. State governments, which will administer it through their own agency, will have to purchase care from a variety of players, including in the private sector, at pre-determined rates. Reaching a consensus on treatment costs through a transparent consultative process is vital for a smooth and steady rollout. A large-scale Information Technology network for cashless treatment should be set up and validated. Since a majority of the families will be rural, and the secondary and tertiary public hospital infrastructure suffers from severe efficiency and accountability problems, State governments should upgrade the administrative systems.

National schemes on health provide an overarching framework, but the responsibility of executing them falls on the State governments. It is widely recognised that there are "nations with the nation" in India, given the population sizes, disease burdens and the development levels of different regions. Clearly, the NHPM has a problem with the distribution of hospitals, the capacity of human resources, and the finances available for cost-sharing. Addressing these through the planned increase in public health spending to touch 2.5% of GDP, and 8% of State budgets, is the immediate challenge. With steady economic growth, meeting that policy commitment through higher investments will be a test of political will. Yet, it is also an opportunity to tap into a large labour pool for the new jobs that will be created, and to raise skill levels. Reducing the cost of universal health coverage is imperative, and it requires parallel investments in the neglected public sector. Private insurance can only be a short-term option, and it clearly has limitations. Less ethical institutions have been found ordering unnecessary treatments to claim insurance compensation. An ombudsman to deal with complaints from NHPM users should, therefore, be a priority. The Centre should extend the scheme to all children and senior citizens, and cover out-patient consultation and essential drugs to sharply reduce out-of-pocket spending.

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