

## Bhamashah Swasthya Bima Yojana (BSBY) Roadmap to Ayushman Bharat



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### Background

Serious or chronic diseases that entail high expenditure push them into deep poverty—health-related expenses accounted for nearly seven percent of Indian households that fell below the poverty line between 2004 and 2014, this Brookings India research paper, based on National Sample Survey Office (NSSO) figures said.

**Keyword:** Bhamashah, Swasthya, Bima Yojana

### Introduction

As many as 52.5 million Indians were impoverished due to health costs in 2011 alone—almost half of the world's population impoverished annually – Fact Checker reported in December 2017.1

Receiving good health care is not a privilege; it is a fundamental right of every citizen. Every society must provide basic health care services to its citizens irrespective of their paying capacity. Believing in the notion, Government of Rajasthan under the leadership of Hon'ble

Chief Minister Vasundhara Raje launched Bhamashah Swasthya Bima Yojana (BSBY). The scheme is named after the Bhamashah a famous minister, financier and general who helped Maharana Pratap. A flagship healthcare scheme providing hassle-free cashless treatment. Bhamashah Swasthya Bima Yojana is a scheme aimed at offering IPD patients with access to cashless facility.

BSBY launched in December 2015 and renewed as phase –II in 13<sup>th</sup> December 2017 by Rajasthan government, with the

aim of providing cashless healthcare services to poor, ensures a cover, under the NFSA of up to Rs 3 lakh for people below and above poverty line. The scheme provides an annual cover of Rs 30,000 for not so critical illnesses and increases it to Rs 3 lakh for critical illness from the list of diseases specified under the yojana. These packages listed under BSBY for specific diseases fall under secondary and tertiary (more specialised and advanced) categories. 2

#### **Features of Bhamashah Swasthya Bima Yojana:**

- The main objective of the scheme is to improve health indicators.
- The scheme offered reduction in additional expenses whilst offering financial cover to customers against illnesses.
- BhamashahSwasthyaBimaYojana aims to reduce the financial risk of surplus expenditure on healthcare by making use of insurance as a solution.
- The scheme aims at squashing the government's vision of minimum government and maximum governance.
- The scheme aims at creating a large health database that can be used in the future during policy level decisions / changes.

- The scheme aims at bringing about a revolution in healthcare in rural regions by encouraging the private sector to start providing hospitalization services whilst lowering the rising concerns on government facilities. 3

#### **Ayushman Bharat:-**

Recognizing the imperative to protect India's poor and vulnerable, the central government announced Ayushman Bharat, a programme covering primary, secondary and tertiary healthcare, in February 2018.

The programme aims to provide free essential drugs and diagnostic services for illnesses that do not necessitate hospitalization (outpatient care) through 1,50,000 health & wellness centre's as well as an insurance cover of up to Rs. 5 lakh per year per beneficiary family for hospitalization (inpatient care), both secondary and tertiary care.

Ayushman Bharat is expected to take India towards universal health coverage, the situation when "all people obtain the health services they need without suffering financial hardship when paying for them", to quote the World Health Organization.

To cover more than 107 million poor and vulnerable families or about 40

percent of India's population, the government claims that Ayushman Bharat will be the world's largest government-funded health protection programme and will have "a major impact on reducing out-of-pocket expenditure on health".

How would Ayushman Bharat be different from previous government-funded health insurance schemes? Several such schemes have been launched since 2007, both at the state level—such as the Rajiv Aarogyasri Health Insurance Scheme in Andhra Pradesh and the Rajiv Gandhi Jeevandayee Arogya Yojana in Maharashtra—and at the Centre namely, the Rashtriya Swasthya Bima Yojana (RSBY).

None of these has significantly reduced out-of-pocket expenditure on health, this 2017 PLOS One study and this 2017 study published in the journal Social Science & Medicine show.<sup>4</sup>

#### **How does the Card Work for BSBY:-**

Abhamashah Card holder eligible under the National Food Security Act (NFSA) is covered under BSBY. If she is not eligible under NFSA, the name will not appear under BSBY on the portal.

#### **Cover:**

- Health Insurance Cover of Rs. 30,000/- for general illnesses and Rs. 3.00 lacs

for critical illnesses shall be given to a family on floater basis in one year for IPD procedures.

- 10 days post hospitalization is covered under the scheme.
- Day care treatment for selected cases. Admission through Emergency mode within 72 hour.
- Patients is benefitted for 1401 packages under the scheme, 663 packages under tertiary care, 738 packages under secondary care, 46 packages reserved for Govt. Hospitals and 14 packages reserved for private Hospitals .

#### **Service Delivery Through**

These benefits are cashless for the beneficiaries and services are provided through public health institutions and empanelled private health institutions.

#### **Insurer and its Selection**

Insurer for the scheme has been selected through open competitive two stage bidding process and public sector insurance company. The New India Assurance Company has been finalized at the most competitive rate across India for the scheme having most comprehensive features.

**Monitoring and Control**

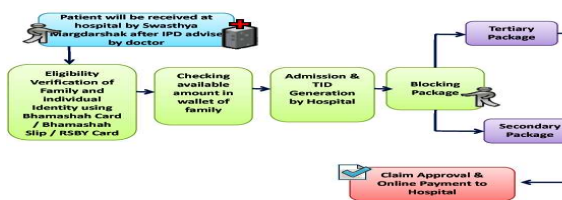
- In-house claims processing software is transparent and standardized grading criteria for hospitals.
- Mobile app monitoring for all government officials up to district level.
- Well defined and verified medical protocols – maximum in any scheme.
- Unique profit refund clause -
  - Insurers do not over charge the government.
  - Do not try to reject genuine claims.
- Strong monitoring mechanism and removal of Third Party Administrator (TPA) in order to prevent leakages and cost escalation.

- Poor person is provided with an opportunity to get health services in private Health Institutions.
- A wide health database is generating which shall be used for making policy level decisions in future.
- It attracts Private Sector to open hospitals in rural areas and reducing the increasing burden on government facilities.

**Conclusion**

Like all other health insurance schemes, the basic aim of BSBY is to reduce out-of-pocket expenses in times of illness to the poor and provide them financial security. A distinguishing factor from schemes in other states was the inclusion of secondary care, apart from tertiary care. Also post hospitalizations and transport were thoughtfully covered. The state went for the insurance agency model with the public-sector company, The New India Assurance Company, roped in after a bidding process. In fact, they removed the concept of a third party administrator in order to reduce costs.

**Process Flow under BSBY**



**Future Prospects:**

- Lessened workload on Government Health Institutions immediately.
- Financial Strengthening of Medicare Relief Societies of Govt. Health Institutions.

As per a paper uploaded on phmindia (People’s Health Movement – India/Jan SwasthyaAbhiyan or JSA), there were several inefficiencies in the BSBY



scheme that there are several hardships in availing the scheme because of the complicated eligibility criteria and how they were being misled by private healthcare centers to cough up funds despite the insurance cover.<sup>8</sup> Also the poor quality of services being delivered and the lack of a mechanism to monitor that.

#### References:-

01. CharuBahri, Lesson from Rajasthan: State's BSBY scheme can provide blueprint for effective implementation of Ayushman Bharat, India Spend, Jan 06, 2018 available on <https://www.firstpost.com>
02. Nayarajasthan, BSBY – Changed Face of Health Insurance in Rajasthan, nayarajasthan.wordpress.com, January 10, 2018 available on <https://nayarajasthan>
03. <http://www.rkgovthospitalrajsamand.in/bhamashah-swasthya-bima-yojana/retrievedon14-10-2018>.
04. Vijay Rajani, Branch Manager at The Oriental Insurance, What is BhamashahSwasthyaBimaYojana?, Sep 30, 2017 on quora.com
05. <http://vasundraraje.in/rajasthan-reform/bhamshah-swasthya-bima-yojanaretrievedon22-10-2018>.
06. State Institute of Health & Family Welfare State Institute of Health & Family Welfare, Jaipur, Schemes of Government of Schemes of Government of Rajasthan in Health available on <http://www.sihfwrajasthan.com>.
07. <https://www.google.co.in/search?q=BSBY+IMAGES&tbm=isch&tbo=u&source=univ&sa=X&ved=2ahUKEwjJm5PplabeAhVaeisKHTaHAD8QsAR6BAgGEAE&biw=1366&bih=626#imgrc=7egaqUcIQJ3x1M>: retrieved on 22-10-2018.