

Rashtriya Swasthya Bima Yojana

What is the issue?

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2017-18 budget allocation has marginally increased the funding pattern for RSBY compared to last year's revised estimates, despite its lacklustre performance.

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Why RSBY is flawed?

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- RSBY, the world's largest publicly-funded health insurance (PFHI) scheme. $\slash n$
- Under the scheme, a Below Poverty Line (BPL) family of five is entitled to more than 700 treatments and procedures at government-set prices, for an annual enrolment fee of Rs. 30.
- However, even nine years after its implementation, it has failed to cover a large number of targeted families, almost three-fifths of them. \n
- Their exclusion has been due to factors like the prevalent discrimination against disadvantaged groups. \n
- Lack of mandate on insurance companies to achieve higher enrolment rates. $\ensuremath{\sc n}$
- And an **absence of oversight** by government agencies. $\ensuremath{\sc vn}$
- There has been a substantial increase in hospitalisation rates, but it is unclear if it has enabled people to access the genuinely needed, and hitherto unaffordable, inpatient care.
- \bullet Often, doctors and hospitals have performed unnecessary surgical procedures on patients to claim insurance money. $\nline{\$
- For instance, **hospitals have claimed reimbursements worth millions** of rupees for conducting hysterectomies on thousands of unsuspecting, poor women.

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- Indeed, in the absence of regulations and standards, perverse incentives are created for empanelled hospitals to conduct surgeries. \n
- Evidence on the financial protection front is conflicting as well. n
- There is near-consensus that the RSBY has resulted in higher out-of-pocket expenditures.
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- Though it is a cashless scheme, many users are exploited by unscrupulous hospital staff.
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- Even the card given specifically for the scheme is not accepted by many hospitals.

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- People availing the scheme was deeply affected by the attitude of the actors involved like doctors, local officials, neighbours and even relatives. \n
- This caused the failure of the scheme despite its holistic health care coverage. γ_n

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What is the way forward?

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- RSBY must move beyond the top down approach specifying budget allocation and administrative and technical efficiency. \n
- It needs to listen to the people to formulate the best insurance policy. $\ensuremath{\sc n}$

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- There is a need to bring the 'public' back into the discourse on public health. \n

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Source: The Hindu

