

## 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.
- 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.
- Their exclusion has been due to factors like the **prevalent discrimination against disadvantaged groups**.
- Lack of mandate on insurance companies to achieve higher enrolment rates.
- And an **absence of oversight** by government agencies.
- 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.
- Often, doctors and hospitals have performed unnecessary surgical procedures on patients to claim insurance money.
- 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.

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- Evidence on the financial protection front is conflicting as well.

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- 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.

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- This caused the failure of the scheme despite its holistic health care coverage.

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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.

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- It needs to listen to the people to formulate the best insurance policy.

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

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**Source: The Hindu**

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