



CHAPTER-12

FACTORS AFFECTING ENROLLMENT OF BENEFICIARIES IN AYUSHMAN BHARAT: PRADHAN MANTRI JAN AROGYA YOJANA IN NARMADA DISTRICT, GUJARAT

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INTRODUCTION

Ayushman Bharat Yojana, also known as Pradhan Mantri Jan Arogya Yojana (PMJAY) or the National Health Protection Scheme, was launched in 2018 as a centrally sponsored scheme under the Ayushman Bharat Mission of the Ministry of Health and Family Welfare (MoHFW) in India. This initiative aims to bring about comprehensive improvements in primary, secondary, and tertiary healthcare systems, encompassing preventive and promotive health measures to address healthcare holistically. Ayushman Bharat serves as an umbrella for two major health initiatives: Health and Wellness Centres and the National Health Protection Scheme (NHPS) [1,2].

Ayushman Bharat represents a significant stride toward achieving universal health coverage for Indian citizens by enhancing healthcare facilities and extending care through health insurance. Primary health centers will be upgraded to Health and Wellness Centers, incorporating existing services along with six new services. Another facet involves providing health insurance coverage of Rs. 5 lakh per annum on a family floater basis, with no limit on family size. Beneficiaries are identified based on the socio-economic caste census of 2011, with 10.74 crore families identified to date, covering approximately 50 crore people. Despite widespread promotion and various health benefits associated with the scheme, the enrollment of beneficiaries appears to be relatively low. As the scheme is in its early stages, understanding the factors contributing to this lower enrollment will facilitate its acceleration, ensuring beneficiaries receive the intended benefits. Ayushman Bharat comprises two major components [3].

RESEARCH OBJECTIVES

1. To assess and contrast the anticipated and current enrollment status of beneficiaries.
2. To identify the factors influencing the enrollment of beneficiaries in Ayushman Bharat.

RESEARCH METHODOLOGY

The sampling technique employed in the past for the district of Narmada involved the selection of 25 enrolled and 25 non-enrolled beneficiaries from each of its 5 talukas through simple random sampling. At that time, the total count of beneficiaries in Narmada was 3,73,941. Data pertaining to beneficiaries was retrieved from the Beneficiary Identification System, serving as a source to assess the prevailing status of beneficiary enrollment in the Narmada district. The data collection process was executed using questionnaires. To the anticipated and current scenarios, relevant information was sourced from the Beneficiary Identification System. This portal presented district-wise figures of beneficiaries and other pertinent details. The progress rate functions embedded in this system facilitated a thorough examination of the beneficiary numbers in Narmada. Narmada had a total of 5 talukas, and in each taluka, a sample consisting of 25 enrolled and 25 non-enrolled beneficiaries was systematically chosen.

RESULTS & DISCUSSION

The research findings indicated that the level of awareness about Ayushman Bharat significantly influences the enrollment of beneficiaries, with only a small proportion having sufficient knowledge about the scheme. The complexity of the enrollment process also emerged as a substantial factor affecting participation. The non-Aadhaar procedure, requiring physical verification and the uploading of government ID proof and other details, was noted for its time-consuming nature.

Furthermore, the charges associated with enrollment were identified as a notable deterrent. Enrollment can be conducted at two locations—Common Service Centers (CSC) and e-gram. CSC charges 30 rupees and issues laminated cards, while e-gram charges 12 rupees and provides non-laminated cards in black and white. The perceived high cost at these enrollment centers is acknowledged as a factor influencing the enrollment of beneficiaries.

CONCLUSION

The study implied that factors such as knowledge, the intricate enrollment procedure, and the associated charges contribute to the enrollment of beneficiaries. It is recommended that the enrollment process, particularly the one involving manual KYC, should be simplified. Additionally, there should be improved Information, Education, and Communication (IEC) materials, ensuring that everyone is well-informed about the Ayushman Bharat scheme and its associated benefits. This, in turn, is anticipated to result in higher enrollment figures.

REFERENCES

1. Thakur, H. (2016). Study of awareness, enrollment, and utilization of Rashtriya Swasthya Bima Yojana (national health insurance scheme) in Maharashtra, India. *Frontiers in public health*, 3, 282.
2. Dror, D. M., & Vellakkal, S. (2012). Is RSBY India's platform to implementing universal hospital insurance?. *The Indian journal of medical research*, 135(1), 56.
3. Karan, A., Yip, W., & Mahal, A. (2017). Extending health insurance to the poor in India: An impact evaluation of Rashtriya Swasthya Bima Yojana on out of pocket spending for healthcare. *Social Science & Medicine*, 181, 83-92.