



Affordable Healthcare in India

Description

India is considered an attractive option by medical tourists due to the low costs and relatively high quality private sector hospitals. The government always regards healthcare as a primary objective in the five year plans and promotes awareness and the country has definitely made remarkable improvement since independence. Â

But on studying the larger picture it can be found that this achievement is much beneath that of countries like Bangladesh or Nepal. For instance more than half of the Indian female population is anaemic or suffers from deficiencies at child-bearing age. Also there still exist vast differences in availability of healthcare facilities in urban and rural areas despite ambitious policies and decisions of the government. For instance the infant mortality rate in Kerala is incomparable to that in UP. This indicates the need for even further improvement by making basic healthcare facilities available universally.

With Artificial Intelligence gaining buzz in 2018, tech giants like Microsoft and Amazon aim to extend AI benefits to the healthcare sector by introducing AI backed Accessibility apps for disabled and India is among the first countries to adapt and add on to the existing healthcare services making it imperative to understand what the government is doing to improve the healthcare sector in India.

What the government is doing for affordable healthcare?

The government has always been committed to decreasing the financial burden and provide access to healthcare facilities to the poor and is executing new schemes and widening the scope of the existing schemes.

- Pradhan Mantri Bhartiya Janaushadhi Pariyojna (PMBJP) 2015 :

With the objective of making quality medicines available at affordable prices to all through exclusive outlets "Pradhan Mantri Bhartiya Janaushadhi Kendras", this scheme is an ambitious scheme to reduce the out of pocket medical expenses. The data shows that people are



saving largely on generic medicines, surgicals and other consumables under PMBJP. With more than 3600 Janaushadhi Kendras opened up in 34 UTs/states, the disadvantaged and middle class is being benefited.

- PM Jan Arogya Yojana (PMJAY) 2018 – “Ayushman Bharat:

The PMJAY or Ayushman Bharat Yojana is one of the largest state funded healthcare schemes in the world. It is an umbrella of two major health initiatives, namely Health and Wellness Centers and National Health Protection Scheme. Initially this scheme offers insurance cover of Rs 5 lakh to 10 crore poor families but in the later stages it also aims to benefit the lower and upper middle class by creation of jobs in the health sector. Mr. Indu Bhushan who is the CEO of the mission highlighted that within few weeks of its implementation 10,000 beneficiaries are being provided benefits and once the scheme is deeply rooted the number will extend to 30,000 beneficiaries per day. This is definitely a commendable achievement.

- National Nutrition Mission:

Announced on International Women’s Day on March 8, 2018 as an extension to Beti Bachao Beti Padhao programme, this scheme focuses on women and children. The main objective is ensuring nutritional status among children of age 0-6 years, adolescent and anaemic girls, pregnant women and lactating mothers in a timely manner.

- Mission Indradhanush:

Launched on 25 December 2014, this health mission aims to protect children upto 2 years of age and also pregnant women from diseases that can be cured by timely vaccination provided at low cost. The targeted diseases include tuberculosis, poliomyelitis, hepatitis B, diphtheria, pertussis, tetanus and measles.

The government has implemented **various other insurance schemes** which reimburse the medical expenses. Some of them are as follows:

- Rashtriya Swasthya Bima Yojana (RSBY): This scheme provides a cover of Rs 30000 as health expenses (mainly hospitalization expense) to families below that poverty line. The registration fee of Rs 30 is to be paid by the beneficiary whereas the State and Central Governments pay the premium to the insurance provider.
- Central Government Health Scheme (CGHS): This scheme basically provides comprehensive healthcare benefits to the employees of Central Government, the pensioners, and their dependents. The beneficiaries can consume Allopathic, Homeopathic, Yoga, Ayurveda, Sidha, and Unani system medicines from various wellness centers established under this scheme.
- Employment State Insurance Scheme (ESIS): The ESIS aims to insure the worker population along with their families from the medical expenses and also providing financial benefits. In case the employee suffers from any permanent or temporary injury which results in loss of earning capacity then he/she is entitled to receive cash benefits.
- Universal Health Insurance Scheme (UHS): UHS is a scheme mainly introduced for families below the poverty line. It provides Rs 30000 for medical expenses to a family along with a death cover of Rs 25000 and provides Rs 50 per given family upto 15 days for the



loss of the main earning member of the family.

Loopholes:

India was placed at 112th position out of 191 countries by the WHO report, which indicates a need to address the issues in the healthcare sector. Some of them are as follows:

- Inadequate expenditure outlay:

The Indian Government allocates only 17% of the expenditure on public healthcare which is much less as compared to China, Sri Lanka and United States. According to the National Health Profile 2018, the amount spend on public healthcare per capita is lesser than a single consultation at countries top private hospitals. This leads to low standards of healthcare in India.

- Lack of Infrastructure:

The prevailing health infrastructure in India is not promising; moreover the vast disparity in the availability of medical facilities in rural and urban areas makes the situation even worse. The WHO has prescribed the doctor patient ratio to be 1:1000 and this ratio is much lesser in India. Also the scarcity of doctors, nurses and dispensaryâ€™s adds to the inefficient infrastructure.

- Expensive healthcare services:

Allopathic services in India are quite costly which not only creates financial burden but also leads to delay in taking the treatment required. Also prices of various essential drugs have soar up which creates further complications.

- Preventive care:

Indian households give more importance to home remedies than medical services. The authenticity of such practices is not established, but people continue to follow them as they have been running in the family.

- Neglecting the rural:

Another major problem is the neglecting of rural Indian population. The doctors and other medical experts are generally unwilling to serve in rural states and thus these people are deprived of medical facilities.

Best Practices Worldwide:

- Healthcare system in Mexico:

By providing the advantage of affordability and quality Mexico has an excellent healthcare system. Every resident is provided National health insurance through two programs namely IMSS or Seguro Popular. Along with this the medicines are available at lower costs and doctors make calls after the treatment to enquire about the patientâ€™s health.



- Healthcare system in Malaysia:

In Malaysia there are various specialized doctors in hospitals, but unlike other countries patients do not have to keep on waiting. The process of taking an appointment and consultation are quick. Also if further testing is required it is done on the same day. This makes the entire system extremely efficient.

- Healthcare system in Columbia:

The WHO has ranked Columbia's healthcare system on the 22th place out of the 191 countries, which is above United States and Canada. Majority of the doctors in public and private hospitals speak in English and also there are well established translation departments so that patients are easily communicate.

Conclusion:

It is absolutely evident that the Indian healthcare sector has become the largest in respect of revenue and employment. But despite this growth this sector faces serious issues in serving to the people of the second largely populated country. Also it can be clearly observed that the current government has always kept public healthcare as its major objective, but there are still some loopholes that need to be addressed to make the government actions and schemes completely fruitful.

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