

**GOVERNMENT OF INDIA
MINISTRY OF HEALTH AND FAMILY WELFARE
DEPARTMENT OF HEALTH AND FAMILY WELFARE**

**RAJYA SABHA
UNSTARRED QUESTION NO. 3782
TO BE ANSWERED ON 5th APRIL, 2022**

STUDIES FOR ASSESSMENT OF ACCESS TO MEDICAL HEALTH CARE SERVICES

3782: SHRI DEREK O' BRIEN:

Will the Minister of **HEALTH AND FAMILY WELFARE** be pleased to state:

- (a) whether there are any studies that account for factors such as out of pocket expenditure, distance, time and costs to access medical services, assurance of medical aid in accessing medical services in the country;
- (b) the steps being taken to remove the psychological barriers in accessing health care; and
- (c) the amount of money disbursed for the same so far?

**ANSWER
THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND
FAMILY WELFARE
(DR. BHARATI PRAVIN PAWAR)**

(a) to (c): Estimate for out of pocket expenditure in the country is provided in the National Health Account (NHA) estimates for India which is based on the framework of National Health Accounts Guidelines for India, 2016 and adhere to System of Health Accounts 2011 (SHA 2011), a global standard framework for producing health accounts. With regard to assurance of medical aid, the NHA estimates provide an estimate on Social Security Expenditures which include finances allocated by the Government towards payment of premiums for Union and State Government financed health insurance schemes, employee benefit schemes, or any reimbursements made to Government employees for healthcare purposes and Social Health Insurance scheme expenditures.

As per the National Health Accounts (NHA) Estimates, the year-wise household's Out-of-Pocket Expenditure on health as percentage of Total Health Expenditure in the country are as under:

2015-16 – 60.6%
2016-17 – 58.7%
2017-18 – 48.8%

The National Health Policy, 2017 envisages attainment of the highest possible level of health and wellbeing for all at all ages as its goal, through a preventive and promotive health care orientation in all developmental policies, and universal access to good quality health care services without anyone having to face financial hardship as a consequence.

The Government has launched four mission mode projects, namely PM-Ayushman Bharat Health Infrastructure Mission (PM-ABHIM), Ayushman Bharat Health & Wellness Centres (ABHWCs), Pradhan Mantri Jan Arogya Yojana (PMJAY) and Ayushman Bharat Digital Mission (ABDM)

PM-ABHIM was launched as a mission to develop the capacities of primary, secondary, and tertiary health care systems, strengthen existing national institutions, and create new institutions, to cater to detection and cure of new and emerging diseases. PM-ABHIM is a Centrally Sponsored Scheme with some Central Sector Components, for implementation of the Atmanirbhar Bharat Package for health sector with an outlay of Rs 64,180 crore.

Under Ayushman Bharat Health & Wellness Centres(HWCs), Comprehensive Primary healthcare by strengthening Sub Health Centres (SHCs) and Primary Health Centres (PHCs) are facilitated. The HWCs are to provide preventive, promotive, rehabilitative and curative care for an expanded range of services encompassing Reproductive and child care services, Communicable diseases, Non-communicable diseases and all health issues.

Pradhan Mantri Jan ArogyaYojana (PMJAY), scheme provides health coverage of Rs.5.00 lakh per family per year to around 10.74 crore poor and vulnerable families for secondary and tertiary care as per Socio Economic Caste Census data 2011.

Ayushman Bharat Digital Mission (ABDM), aims at developing the backbone necessary to support the integrated digital health infrastructure of the country.

A new initiative of telemedicine application, National Telemedicine Service, eSanjeevani, provides doctor to doctor and patient to doctor consultations. Through this application, doctors including specialists can provide services to Health and Wellness Centers (HWCs) in rural areas. The application has also been integrated with 3.74 lakh Common Service Centers (CSCs) for facilitating healthcare in the remotest areas of the country.

Under National Health Mission (NHM), technical and financial support is provided to the States/UTs to upgrade capacity and enhance quality of the public healthcare system. Under the scheme, several initiatives have been taken for strengthening the health systems to provide healthcare services to people while addressing the known perceived barriers to uptake of health services (concerns around quality of services, longer waiting time, inadequate information regarding service provisioning at facilities, limited trust in public health facilities, etc).

ASHA program intends to achieve the goal of increasing community engagement with the health system to improve the health status through improved health care practices and behaviors, healthcare provisions and securing people's access to healthcare services. Institutional structures such as Jan Arogya Samitis, Self Help Groups and patients are constituted to enable community ownership and accountability of Ayushman Bharat-Health and Wellness Centre(AB-HWC) teams.

Under IEC, posters, flyers, leaflets, brochures, booklets, messages for health education sessions, radio broadcast or TV spots, etc. are printed / produced and circulated / broadcasted as a means of promoting desired & positive behaviors in the community (such as improved child survival and women's health i.e. breast feeding, adequate complementary feeding of the young child, spacing, age at marriage etc). All the Information, Education and Communication (IEC) materials are adequately displayed in the facilities as well as in the community, in vernacular languages, to address information asymmetry amongst the community towards health care services. IEC initiatives like Annual Health Calendar days, Health Melas, Fit India Campaigns, Eat Right campaigns etc., are taken up to penetrate into the remotest parts of the country, increasing the uptake of health services by community.
