

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

**LOK SABHA
UNSTARRED QUESTION NO. 966
TO BE ANSWERED ON 08th DECEMBER, 2023**

HEALTH OUTCOMES OF MARGINALIZED GROUPS

966. DR. KALANIDHI VEERASWAMY:

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

- (a) whether the Government has taken cognizance of the report pointing growing socio-economic inequalities in India disproportionately affecting health outcomes of the marginalized groups;
- (b) if so, the details thereof along with the reasons for lack of accessibility regarding services for the marginalized groups;
- (c) the district-wise details of the number of healthcare seekers based on the social and economic categories;
- (d) whether there is a recent study which has estimated the total out-of-pocket expenditures on healthcare services segmented across social groups; and
- (e) if so, the details thereof during last four years, State/UT-wise?

ANSWER

**THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND
FAMILY WELFARE
(PROF. S. P. SINGH BAGHEL)**

(a) to (e) : The National Health Policy 2017 envisages to provide universal access to good quality health care services through increasing access, increasing affordability by lowering the cost of healthcare delivery and equity. The goal of the policy is to attain the highest possible level of health and wellbeing for all at all ages 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 Policy is centered on the key principles of Equity, Affordability, Universality, Patient Centered & Quality of care, accountability, Inclusive partnerships, Pluralism and Decentralization. One of the key policy principles is Universality i.e. prevention of exclusions on social, economic or on grounds of current health status.

The Government has launched four mission mode projects, namely PM-Ayushman Bharat Health Infrastructure Mission (PM-ABHIM), Ayushman Arogya Mandir (erstwhile ABHWCs), Pradhan Mantri Jan Arogya Yojana (PMJAY) and Ayushman Bharat Digital Mission (ABDM). Other notable initiatives are National Health Mission (NHM), setting up of new AIIMS, upgrading of Government medical colleges under the Pradhan Mantri Swasthya

Suraksha Yojna (PMSSY), support to States/UTs for setting up of new medical colleges as well as for increasing UG and PG medical seats, provision of free drugs and free diagnostic facilities at Primary Health Centres (PHC)/ Community Health Centres (CHC) and district hospital level, substantial increase in availability of government ambulances etc.

Under NHM, many important steps have been taken towards universal health coverage by supporting the State Government in providing accessible & affordable healthcare to people. Financial and technical support are provided to States/UTs to provide accessible, affordable and quality healthcare, especially to the poor and vulnerable sections of the population, in both urban and rural areas. The NHM provides support for improvement in health infrastructure, availability of adequate human resources etc to improve availability and accessibility to quality health care especially for the underserved and marginalized groups in rural areas. Major initiatives for which States are supported include Janani Shishu Suraksha Karyakram (JSSK), Rashtriya Bal Swasthya Karyakram (RBSK), Rashtriya Kishor Swasthya Karyakram (RKSK), PM National Dialysis Programme and implementation of National Quality Assurance Framework.

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 has an outlay of Rs 64,180 crore.

Under Ayushman Arogya Mandir (erstwhile ABHWCs), Comprehensive Primary Healthcare by strengthening Sub Health Centres (SHCs) and Primary Health Centres (PHCs) are facilitated. The HWCs 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. Around 1,60,479 HWCs are functional.

Ayushman Bharat Pradhan Mantri - Jan Arogya Yojana (AB PM-JAY) is the largest publicly funded health assurance scheme in the world which provides health cover of Rs. 5 lakhs per family per year for secondary and tertiary care hospitalization. Currently, 55 Crore individuals corresponding to 12 Crore families are covered under the scheme.

At the time of launching of the Ayushman Bharat PM-JAY, it was decided to cover a total of 10.74 crore families eligible as per 6 deprivation and 11 occupational criteria across rural and urban areas respectively. Further, left over RSBY families were also included. Together, they constituted the bottom 40% of India's population as per 2011 census. However, considering the decadal population growth of India, the Cabinet of the Government of India has approved the expansion of the beneficiary base from existing 10.74 Crore to 12 Crore beneficiary families in 2022. Further, many States/UTs implementing AB PM-JAY have expanded the beneficiary base under the scheme.

Further, in order to ensure that eligible beneficiaries get covered under the scheme, States which have not been able to identify eligible beneficiaries as per SECC database, have been provided flexibility to use non-SECC database to identify leftover (unverified) SECC beneficiaries. These databases have been integrated with NHA's IT system for card creation.

It is expected that this exercise would ensure inclusion of all eligible beneficiaries particularly poor and vulnerable families under the scheme by the States/UTs.

During the period between FY 2019-20 and FY 2022-23, a total of 4.65 crore hospital admissions worth Rs. 56,726.90 crore have been authorized under the scheme. The State-wise details of authorized hospital admission during the period is at **Annexure-1**.

Ayushman Bharat Digital Mission (ABDM) has been launched with aim to develop the backbone necessary for support for integrated digital health infrastructure of the country.

The quality generic medicines are made available at affordable prices to all under Pradhan Mantri Bhartiya Janaushadhi Pariyojana (PMBJP) in collaboration with the State Governments. Affordable Medicines and Reliable Implants for Treatment (AMRIT) Pharmacy stores have been set up in some hospitals/institutions.

As per National Health Account (NHA) estimates 2019-20, there is declining trend in Out of Pocket Expenditure (OOPE) as percentage of Total Health Expenditure (THE). During 2013-14 to 2019-20, OOPE as a percentage of THE has declined from 64.2% to 47.1%. During the same period, Government Health Expenditure (GHE) as a percentage of THE has increased from 28.6% to 41.4%. As per National Health Account (NHA) estimates, State-wise OOPE as percentage of State THE is at **Annexure-II**.

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State wise details of Authorized hospital admissions

State / UT	Authorized Hospital Admission Count	Authorized Hospital Admission Amount (In Rs.)
Andaman And Nicobar Islands	1,950	5,91,11,221
Andhra Pradesh	40,36,484	93,71,55,00,000
Arunachal Pradesh	2,554	4,36,53,855
Assam	5,91,116	9,12,13,27,210
Bihar	5,62,765	5,78,95,41,655
Chandigarh	26,819	20,31,06,139
Chhattisgarh	33,00,090	35,23,36,65,580
DNH and DD	92,431	60,95,58,446
Goa	1,087	2,52,39,450
Gujarat	34,28,904	70,60,08,80,941
Haryana	6,97,764	9,35,86,79,746
Himachal Pradesh	1,82,173	2,26,09,43,577
Jammu And Kashmir	7,54,863	12,34,96,71,760
Jharkhand	14,25,276	16,06,64,93,310
Karnataka	45,29,792	40,88,58,80,146
Kerala	49,29,266	47,07,60,95,206
Ladakh	5,691	9,06,35,465
Lakshadweep	466	1,36,60,950
Madhya Pradesh	24,90,207	39,79,09,62,111
Maharashtra	7,93,452	20,20,09,18,405
Manipur	91,773	1,20,05,29,633
Meghalaya	5,78,374	4,78,87,29,794
Mizoram	81,712	95,51,34,277
Nagaland	35,546	62,53,22,913
Puducherry	40,434	29,87,29,402
Punjab	14,35,224	17,30,86,88,659
Rajasthan	42,19,095	33,42,15,94,612
Sikkim	10,687	9,38,56,145
Tamil Nadu	86,24,478	48,56,69,78,344
Telangana	8,30,459	17,84,47,27,985
Tripura	2,03,439	1,73,38,02,097
Uttar Pradesh	19,12,429	24,19,50,02,841
Uttarakhand	6,76,618	12,74,06,07,809
Total	4,65,93,418	5,67,26,92,29,684

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State-wise Out of Pocket Expenditure percentage of State Total Health Expenditure.

(In percentage)

S.No	State	2016-17	2017-18	2018-19	2019-20
1	Assam	53.8	35.9	36.7	34.9
2	Andhra Pradesh	72.2	67.0	63.2	63.6
3	Bihar	77.6	58.2	53.5	54.3
4	Chhattisgarh	55.9	38.8	38.3	36.7
5	Gujarat	48.1	43.9	40.7	40.8
6	Haryana	56.6	50.4	47.2	45.5
7	Jammu and Kashmir	58.5	42.8	44.9	46.6
8	Jharkhand	66.0	68.0	63.9	64.7
9	Karnataka	49.2	34.2	33.3	31.8
10	Kerala	67.0	68.7	68.6	67.9
11	Madhya Pradesh	68.9	56.3	55.7	53.0
12	Maharashtra	56.7	49.1	48.4	44.1
13	Odisha	68.9	55.9	53.2	53.4
14	Punjab	77.3	69.4	65.5	64.7
15	Rajasthan	56.7	49.6	44.9	47.4
16	Tamilnadu	62.1	45.9	44.3	44.2
17	Uttar Pradesh	74.8	72.6	71.3	71.8
18	Uttarakhand	62.1	41.7	35.5	35.8
19	West Bengal	74.1	69.8	68.7	67.1
20	Telangana	-	49.7	48.0	41.6
21	Himachal Pradesh	46.4	49.2	45.8	46.0

Source: National Health Accounts Estimates for India