

EXPERIENCES AND EXPECTATIONS: A QUALITATIVE STUDY TO UNDERSTAND THE PERCEPTION OF KEY STAKEHOLDERS ON THE AYUSHMAN BHARAT SCHEME

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Abstract

Introduction: Government of India launched Ayushman Bharat Yojna in September 2018, this is also known as Pradhan Mantri Jan Arogya Yojana (PM- JAY) and National Health Protection Scheme (NHPS), which provide a coverage of five lakhs per household for taking health care services during hospitalization. This scheme expands its coverage with time and a step towards universal health coverage. **Aim:** A Qualitative Study to understand the perception of key stakeholders on the Ayushman Bharat Scheme. **Methodology:** The study was conducted in Vadodara- Gujarat. In-depth interviews with 16 key stakeholders were conducted. **Results:** Thematic analysis of interviews revealed five key themes: Knowledge about the Ayushman Bharat scheme and various components of Ayushman Bharat scheme, Perception regarding the Ayushman Bharat (PM- JAY), Practice if someone in the family become ill, Gaps, barriers & suggestions by key stakeholders for Ayushman Bharat. **Conclusion:** The study highlights the need to increase awareness and coverage of Ayushman Bharat scheme. Accessibility and affordability of treatment increases for those who have Ayushman Bharat card.

Keywords: Ayushman Bharat Scheme, Pradhan Mantri Jan Arogya Yojana (PMJAY), Health Insurance. Health Care Expenditure.

INTRODUCTION

Ayushman Bharat, an ambitious healthcare initiative launched by the Government of India in 2018, aims to provide accessible and affordable healthcare to the country's economically vulnerable populations. The program comprises two key components: the Pradhan Mantri Jan Arogya Yojana (PM-JAY), which offers health insurance coverage, and Health and Wellness Centers (HWCs), which focus on primary healthcare services (1).

The main objective of ABP is "to provide services with continuum across three levels of care bring back the attention on delivery of entire range of preventive, promotive, curative, diagnostic, rehabilitative and palliative care services (2). The main objective of ABP is "to provide services with continuum across three levels of care bring back the attention on delivery of entire range of preventive, promotive, curative, diagnostic, rehabilitative and palliative care services (2). Ayushman Bharat is designed in such a way to provide universal health coverage by providing continuum of care by Comprehensive Primary Health Care (CPHC) at village level and secondary & tertiary care at block and district level by Ayushman Bharat Pradhan Mantri Jan Arogya Yojana (3).

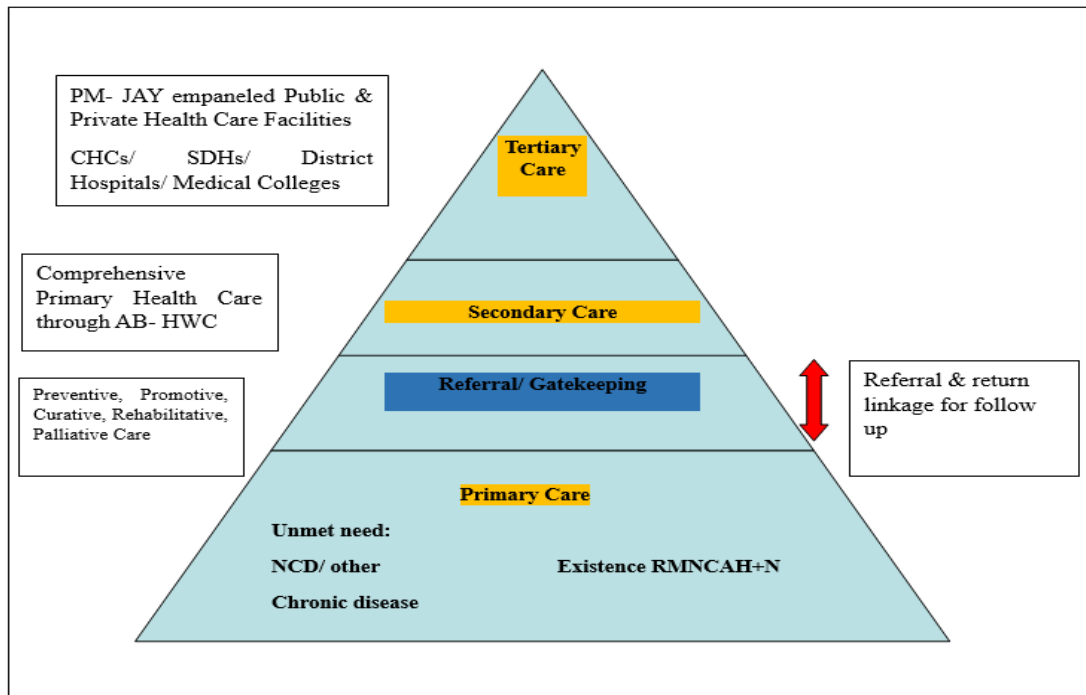


Figure 1: Continuum of Care under Ayushman Bharat (3)

Second component of scheme is National Health Protection Scheme, also known as Ayushman Bharat National Health Protection Scheme (AB-NHPS) or Pradhan Mantri Rashtriya Suraksha Swasthya Mission (PM-RSSM). NHPS has been referred as ‘the world’s largest government funded healthcare program (4).

Aim:

A Qualitative study to understand the perception of key stakeholders on the Ayushman Bharat Scheme.

Objectives:

- Knowledge about the Ayushman Bharat scheme.
- To assess the perception of the key stake holders towards Ayushman Bharat.
- To assess the gaps & barriers in accessing the services of Ayushman Bharat.

METHODOLOGY

Study Design: Qualitative research method using phenomenology design.

Study area & population:

The study was conducted in Vadodara district of Gujarat. All the stakeholders like Ayushman Bharat card holders, beneficiaries of Ayushman Bharat scheme, service provider & Government Officials.

Inclusion Criteria:

- Key stakeholders related to Ayushman Bharat scheme.
- Those who was able to understand Hindi, Gujarati or English.
- Those who were willing to give informed consent.

Study Duration:

The study was conducted between December 2022 to June 2023.

Sample size: Total 16 in-depth interviews were conducted for the study.

Table 1: showing the total number of in-depth interviews conducted of stakeholders:

S. No.	Key Stakeholder	Number
1.	District Health Officials	03
2.	Block Health Officials	03
3.	Empaneled Hospitals	03
4.	Ayushman Mitra	02
5.	Patients (those who vailed services)	05

Data Collection: Data collection was done by using in-depth interview guide which was pre tested prior to use.

Ethical clearance and informed consent:

Ethical clearance was granted by Parul University Institutional Ethical Committee for Human Research- Vadodara, Gujarat. Informed consent was obtained from all the study participants after explaining them about the study.

RESULT

The qualitative research was conducted in Vadodara district of Gujarat comprised interviews with 16 key stakeholders of Ayushman Bharat. The study revealed five key themes: Knowledge about the Ayushman Bharat scheme and various components of Ayushman Bharat scheme, Perception regarding the Ayushman Bharat (PM- JAY), Practice if someone in the family become ill, Gaps & barriers as per the stakeholders & Suggestions by key stakeholders for Ayushman Bharat. The study highlights the need to increase awareness and coverage of Ayushman Bharat scheme. Accessibility and affordability of treatment increases for those who have Ayushman Bharat card.

Theme 1: Knowledge about the Ayushman Bharat and various components of Ayushman Bharat

The knowledge level of respondents about Ayushman Bharat was satisfactory but few of them were not sure about the scheme and on asking about Ayushman Bharat (PM- JAY) gave a reply that they have never heard about Ayushman Bharat.

“Don’t know the names of Ayushman Bharat exactly. I have never heard about Ayushman Bharat.” – (patient, district Vadodara- Gujarat).

The knowledge about Ayushman Bharat was otherwise good across all other interviews. Health officials, empaneled hospitals, Ayushman Mitra knew about the Ayushman Bharat, a national health protection scheme that provides free hospitalization up to 5 lakhs. The Doctors were aware about the scheme.

“I have heard about Ayushman Bharat. It provides free of cost treatment to beneficiaries.”- (Ayushman Mitra, district Vadodara).

Theme 2: Perception regarding the Ayushman Bharat (PM- JAY)

Except for a few respondents, others knew that hospitalization is free for those who have Ayushman Bharat card, the ceiling of which is 5 lakhs. All the patients thought

that the awareness is less amongst them, and they require more information about Ayushman Bharat.

“We don’t have any idea about how the cards to be made, whether our name is in beneficiary list or not”. (Patients who are not having cards- Vadodara)

The district officials and doctors who were interviewed thought that it is a good scheme for the poor community.

“As a doctor of empaneled hospital, most of the patients were unable to afford the treatment before the scheme but now those who are having Ayushman Bharat cards need not to bother about the cost of treatment.”- (Doctor, empaneled hospital- Vadodara).

Theme 3: Awareness & willingness to make the card of Ayushman Bharat

Most of the respondents were active and had knowledge about Ayushman Bharat except a few patients. Few patients are willing to make the card but not aware how and from where?

The doctors confirmed that they also facilitate the patients for making Ayushman Bharat card and link them with the department.

“Ayushman Bharat is good scheme providing free treatment up to 5 Lakhs on hospitalization, but it is very difficult to make the card, I am eligible and tried but unable to get it” (patient in Vadodara district).

“We are very optimistic to provide treatment to poor those who are having Ayushman Bharat card” (Doctor- Vadodara district).

Theme 4: Gaps & barriers as per the stakeholders

Almost all the stakeholders are having some or other gaps in Ayushman Bharat scheme, few of them availed the services and few of them are providing the services under the scheme.

“The treatment package is on the lower side, it would be much better if Government rethink on it and work on it” (Empanelled Hospital Doctor- Vadodara district).

“OPD and day care services are not included in Ayushman Bharat scheme, if it would be there then everybody can access the health facility easily for any kind of illness” (Patient- Vadodara district).

“I am so poor and not having Ayushman Bharat card and no-one is going to help us. I am an adivasi but not having Ayushman card. I sold my farms to get treatment of my wife” (Patient- Vadodara district).

“Payment process of Ayushman Bharat is very slow, sometimes it will take six months and more to clear the payment, in such conditions our interest in providing services to Ayushman Bharat patients goes down as compared to other insurance patients” (Empanelled Hospital Doctor- Vadodara district).

Theme 5: Suggestions by key stakeholders for Ayushman Bharat

All the opinion of the stakeholders suggests that awareness about the Ayushman Bharat scheme need to be increased, also coverage of the scheme will reach to 100% of beneficiaries. Government should provide the benefits of this scheme to every citizen of India irrespective of their caste or income category.

“Every citizen of India should be covered under this scheme” (Empanelled Hospital Doctor, Patient, Ayushman Mitra- Vadodara district).

“Ceiling of Ayushman Bharat should be increased, so that complex surgeries can be done under the scheme” (Empanelled Hospital Doctor- Vadodara district).

CONCLUSION

The study investigated the level of awareness, perception and knowledge of PMJAY amongst the key stakeholders in urban and rural areas of Gujarat. The level of awareness, perception and knowledge of PMJAY is not high among rural stakeholders. The study also shed light on the unmet needs of beneficiaries of the scheme. Another area of concern is the low level of awareness regarding the name in the beneficiary list or how to make a card, duration of the insurance coverage.

Strengths:

Geographic area: Study considers stakeholders from both rural and urban areas.

Stakeholder type: Study considers stakeholders like Ayushman Bharat staff, Government health staff (District and Taluka level), Private empaneled hospital and beneficiaries of Ayushman Bharat card.

Gender balance: Study consider a mix of male and female respondents.

Limitations:

The study provides valuable insights but there are limitations to consider. Limitation pertains to qualitative studies. The research is based on a relatively smaller sample size, and the findings may not be fully representative for the whole country. Purposive sampling may have led to the omission of key stakeholders. Additionally, the qualitative nature of the interviews may introduce subjectivity. Future studies are needed to explore other factors influencing the eligibility, availability, access to health care services and financial risk protection to those who availed the services.

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Conflict of interest: None

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