

Review Article

Innovative Approaches in Health Sector to Deliver Quality Healthcare: An Appraisal

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Abstract: At national and state level, government sector focuses on launching of innovative public health policies/schemes to improve health needs of people and ultimately achieve goal of health for all. Government of Rajasthan has recently launched two such innovative schemes in health sector. Complete information about these innovative health policies/schemes have obtained from Websites of Govt. of Rajasthan and national & state newspapers & discussion with state health authorities. In order to strengthen health services in rural areas, Rajasthan government has decided to run all 2,084 Primary Health Centres under Public-Private Partnership (PHC on PPP mode) mode in phase wise manner. The primary health centres (PHCs) which do not have adequate doctors and para-medical staff will be taken up on urgent basis. Under Bhamashaha Health Insurance Scheme poor and needy people will get benefit of the quality cashless health care facilities through private and public health care providers. Needy People will get opportunity of having treatment in those private hospitals which were out of their reach. Under this scheme, e-health cards will be issued under Arogya Rajasthan campaign and this card will help in providing quick and effective healthcare facilities. Initial results of these innovative policies and programmes are motivating and successful. If government works with same will-power these steps will prove to be milestones in public health. In effect, this would build the foundation for transforming the primary healthcare delivery system into an innovation-driven, efficient and cost effective model for the country.

Keywords: Public health, Innovative, Public-Private Partnership, Health Insurance

INTRODUCTION

At national and state level, government sector focuses on launching of innovative public health policies/schemes to improve health needs of people and ultimately achieve goal of health for all. Government of Rajasthan has recently launched two such innovative schemes (Bhamashah Swasthya Bima Yojana & Primary Health Centres on Public-Private Partnership mode) in health sector.

Partnership with the private sector has emerged as a new avenue of reforms, in part due to resource constraints in the public sector of governments across the world [1]. There is growing realisation that, given their respective strengths and weaknesses, neither the public sector nor the private sector alone can operate in the best interest of the health system. There is also a growing belief that public and private sectors in health can potentially gain from one another. Involvement of the private sector is, in part, linked to the wider belief that public sector bureaucracies are

inefficient and unresponsive and that market mechanisms will promote efficiency and ensure cost effective, good quality services [2-5].

Another perspective on this debate is linked to the notion that the public sector must reorient its dual role of financing and provision of services because of its increasing inability on both fronts. Under partnerships, public and private sectors can play innovative roles in financing and providing health care services.

In order to strengthen health services in rural areas, Rajasthan government has decided to run all 2,084 primary health centres under public-private partnership mode in phase wise manner.

Financial constraints are the major barriers for access to healthcare in India, particularly for marginalized sections of society where health care expenditure is a major cause of impoverishment.

Unequal distribution of health care facilities, socioeconomic conditions and existing social and gender norms all play an important role in significantly reduced access to health care especially by poor population. This scenario is exacerbated by reduction in governmental health spending and high cost for health care services in private sector. The inequality in health care services between public and private sector and economic constraints are found to affect health of the poor sector of population which constitutes majority of India [6].

Over the past decades many low-and-middle income countries have found it increasingly difficult to sustain sufficient financing for health care particularly for the poor and have been active in recommending a range of suitable measures.

In India, where around 28% of the total population lies below poverty line, it has been observed that health care expenditure is one of the most important reasons for indebtedness [7]. More than 80% of the expenditure on health in India is through out of pocket which one of the highest is in the world [7].

To improve upon this scenario, Government has in the past launched a number of health insurance schemes at both Central and State levels.

The Government of Rajasthan (GoR) is also one of the few in the country to launch a healthcare insurance scheme. Bhamashah Swasthya Bima Yojana is a health insurance scheme by government of Rajasthan. Under Bhamashah Swasthya Bima Yojana, poor and needy people will get benefit of the quality cashless health care facilities through private and public health care providers [8].

Bhamashah Swasthya Bima Yojana aims to provide hassle-free and quality medical, surgical treatment in empanelled private and public hospitals to the members of all eligible families covered under the National Food Security Act and Rashtriya Swasthya Bima Yojana (RSBY). Informally estimated, 4.5 crore people in the state, at least 67% of the population, shall be benefitted under this insurance scheme. The transaction would be on cashless basis through the Bhamashah Card or NFSA/RSBY identity proof.

Purpose of this study to find out, whether these two new approaches in health sector in Rajasthan improving quality healthcare?

Complete information about these innovative health policies/schemes have obtained from Websites of

Govt.of Rajasthan and national & state newspapers & discussion with state health authorities.

This article is a review of these innovative health policies/schemes, its initial impact, limitations and future scope.

PRIMARY HEALTH CENTRES (PHC) ON PUBLIC-PRIVATE PARTNERSHIP (PPP) MODE [8]

In order to strengthen health services in rural areas, Rajasthan government has decided to run all 2,084 primary health centres under public-private partnership mode in phase wise manner. The primary health centres (PHCs) which do not have adequate doctors and para-medical staff will be taken up on urgent basis. All the facilities presently being given by state government will continue in the similar fashion. The PHC management will have to ensure adequate doctors, para- medical staff, 24 hour emergency facility, free outpatient department, six-bed inpatient department and other basic requirements.

Initial Results

Outdoor has increased 74% and institutional delivery increased 25% in first 5 month of duration in those 17 primary health centres which started working under public-private partnership mode.

BHAMASHAH SWASTHYA BIMA YOJANA [9, 10]

Background

Under this scheme poor and needy people will get benefit of the quality cashless health care facilities through private and public health care providers. Needy People will get opportunity of having treatment in those private hospitals which were out of their reach. Under this scheme, e-health cards will be issued under Arogya Rajasthan campaign and this card will help in providing quick and effective healthcare facilities. The insurance cover for general illness has been set as Rs 30,000, while Rs 3 lakh has been set for critical illness. The Health Insurance Scheme is designed to cover 1,718 ailments, which are highest in the country.

Aim of the Scheme

Basic aim of scheme is Improvement in health indicators; however, some other expectations are:

- Reduction in 'out of pocket' expenses and providing financial security to the poor against illnesses.
- To hedge the financial risk of excess expenditure on healthcare by using Insurance as a tool.

- To successfully roll out Government's vision of maximum Governance and minimum Government
- Create a wide health database, which may be used in making policy level changes/decisions in future.
- Bring a revolution in healthcare in rural area – by providing stimulus to Private Sector to open hospitals in rural areas and reducing the increasing burden on Government facilities.

Beneficiaries

- The scheme envisages benefits for the NFSS (National Food Security Scheme) beneficiaries and RSBY (Rashtriya Swasthya Bima Yojana) beneficiaries (as RSBY is proposed to be taken over by Health Department from Oct., 15).
- Implementation of the scheme shall be done through Bhamashah Cards, but till the time Bhamashah cards are issued, identity related to NFSS and RSBY shall also be honored.

Cover

- Health Insurance Cover of Rs. 30,000/- for general illnesses and Rs. 3.00 lacs for critical illnesses shall be given to a family on floater basis in one year for IPD procedures.
- 7-day pre-hospitalisation and 15 days post hospitalization is covered under the scheme.
- Transport allowance of Rs. 100 to Rs. 500 for cardiac and polytrauma cases.
- Patients shall be benefitted for 1045 packages under General Illnesses, 500 packages under Critical Illnesses, and 170 packages reserved for Govt. Hospitals.

Service Delivery Through

These benefits shall be cashless for the beneficiaries and services shall be provided through public health institutions and empanelled private health institutions.

Monitoring and Control

- In-house claims processing software and transparent and standardized grading criteria for hospitals
- Mobile app monitoring for all government officials upto district level
- Well defined and verified medical protocols – maximum in any scheme
- Unique profit refund clause
 - Insurers do not over charge the government
 - Do not try to reject genuine claims

- Strong monitoring mechanism and removal of Third Party Administrator (TPA) in order to prevent leakages and cost escalation

Future Prospects

- Lessened workload on Government Health Institutions immediately.
- Financial Strengthening of Medicare Relief Societies of Govt. Health Institutions.
- Poor person will be provided with an opportunity to get health services in private Health Institutions.
- A wide health database will be generated which shall be used for making policy level decisions in future.
- It will attract Private Sector to open hospitals in rural areas and reducing the increasing burden on government facilities.

Initial Results

Bhamashah Swasthya Bima Yojana has registered a constant increase in the number of beneficiaries. Since the inception of the scheme till November 2016, more than 6 lakh claims have been forwarded by hospitals to the insurance company.

Against the sanctioned claims to the hospitals, the Insurance Company has made available over Rs 234 crore for the claims.

CONCLUSION

Initial results of these innovative policies and programmes are motivating and successful. If government works with same will-power these steps will prove to be milestones in public health. In effect, this would build the foundation for transforming the primary healthcare delivery system into an innovation-driven, efficient and cost effective model for the country

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