Question No. *360

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To Provide Free Medical Facilities

- *360. SH. BALRAJ KUNDU, M.L.A.: Will the Health Minister be pleased to state:
 - a) Whether there is any proposal under consideration of the Government to authorize the health department for implementing the condition of free medical facilities to 25% poor patients in private hospitals of state; and
 - b) if so, the details thereof?

Sh. Anil Vij, Health Minister

No, Sir.

EXECUTIVE SUMMARY

- There is no policy regarding authorization of Health Department for implementing the condition of free medical facilities to 25% poor patients in private hospitals of the state.
- The State of Haryana has implemented the Ayushman Bharat Scheme i.e.
 Pradhan Mantri Jan Arogya Yojna (PM-JAY) to poor and vulnerable families as per Socio-Economic Caste Census 2011.
- It provides a cover of Rs. 5 lakhs per family per year for secondary and tertiary care hospitalization across public and private empanelled hospitals.
- Health Department Haryana launched Mukhyamantri Muft Ilaaj Yojana
 (MMIY) from 1st January 2014, which seeks to provide free treatment to all the residents of the state in the Government health institutions under Health Department and cover major components of health care.
- The vision of the MMIY scheme is to provide affordable, accessible, equitable quality health services for improving well being of all residents of State by reducing their out of pocket expenditure.
- The policy issued by Haryana Urban Development Authority (HUDA) now known as, Haryana Shahari Vikas Pradhikaran (HSVP), wherein, free treatment to poor patients is provided by private hospitals, which have been allotted land by State Government on subsidised rates, as per the terms and conditions of the land allotment.

NOTE FOR THE PAD

There is no policy regarding authorization of Health Department for implementing the condition of free medical facilities to 25% poor patients in private hospitals of the state.

However, the State of Haryana has implemented the following schemes:

Ayushman Bharat Scheme

Ayushman Bharat Scheme i.e. Pradhan Mantri Jan Arogya Yojna (PM-JAY) of Government of India, which is a health assurance scheme to provide **free** healthcare coverage at primary, secondary and tertiary care hospitalization to poor and vulnerable families that form the bottom 40% of the population. The households included are based on the deprivation and occupational criteria of Socio-Economic Caste Census 2011 (SECC 2011) for rural and urban areas respectively. It provides a cover of Rs. 5 lakhs per family per year for secondary and tertiary care hospitalization across public and private empanelled hospitals. PM-JAY is fully funded by the Government and cost of implementation is shared between the Central and State Governments. As per SECC 2011, the total no. of beneficiaries in the State is 75 lacs approximately and **2067743** Golden Cards have already been generated till date.

Mukhyamantri Muft Ilaaj Yojana

Health Department Haryana launched Mukhyamantri Muft Ilaaj Yojana (MMIY) from 1st January 2014, which seeks to provide free treatment to all the residents of the state in the Government health institution under Health Department and cover major components of health care. The **vision** of the scheme is to provide **affordable, accessible, equitable quality health services** for improving well being of all residents of state by **reducing their out of pocket expenditure**.

Various components under MMIY:

- 1. Surgeries under Surgery package program (For Haryana residents only).
- 2. Free Basic laboratories investigations, along with free X-Ray, ECG and USG (wherever available in the Govt. Health Institutions).
- 3. Free Indoor Services. (For all patients)
- 4. Free OPD Services (For all patients)
- 5. Free Drug Supply. (For all patients)
- 6. Free Referral transport/Ambulance services. (For all patients)
- 7. Free Dental treatment. (For all patients)

During the last few years the BPL patients availing services being provided under PPP are also been paid by the State Government from the MMIY funds.

Financial Mechanism of MMIY Scheme:

Prior to the launch of MMIY, user charges were collected by the health institutions from the patients for various services provided to them. Thereafter, with the implementation of Mukhymantri Muft Ilaaj Yojana (MMIY), most of the services are being provided free of cost to the patients and user charges collection were minimized. The funds for expenditures of the health institutes, which were being met from the user charges, have been provided by the budget under MMIY scheme. The budget under MMIY is released by DGHS to respective District Health & Family Welfare Society as Grant-in-Aid, in lieu of user charges.

During the last year, three new services have been started under PPP mode by the health department at district hospitals leading to higher utilization of the budget for the patient care services. The financial report of the scheme:

Name of Scheme	Year	Allotted (in Crore Rs.)	Utilized (in Crore Rs.)
MMIY	2014-15	53	27.38
	2015-16	35	28.6315
	2016-17	18	18
	2017-18	33	29.6
	2018-19	50	50
	2019-20	50	50 (in first three quarters)

HSVP Policy for providing free treatment to poor patients

There is a policy issued by Haryana Urban Development Authority (HUDA) now known as, Haryana Shahri Vikas Pradikaran (HSVP), wherein, free treatment to poor patients is provided by **private hospitals, which have been allotted land by State Government on subsidized rates**. The policy covers weaker section of the society i.e. BPL holders, Class IV employees of Haryana Government and others having income less than 5000/- per month. The private hospital shall provide free services to 20% of total Outdoor patients being attended by them, on first come first service basis. 10% of the beds shall be reserved for these beneficiaries. In addition to that, Super-Specialty hospitals shall charge subsidized rates i.e. 30% of normal charges for 20% of functional beds; **as per the terms and conditions of the land allotment.**