



सत्यमेव जयते

**national
health
authority**



MIL RAHA MUFT UPCHAAR BADH RAHA AYUSHMAN BHARAT PARIVAR

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ABOUT THE SCHEME

- Ayushman Bharat - Pradhan Mantri Jan Arogya Yojana (PM-JAY) provides cover of **₹ 5 lakhs per family per year**, for secondary and tertiary care hospitalization across public and private empanelled hospitals in India.
- **Over 10.74 Crore** poor and vulnerable entitled families (approximately 50 Crore beneficiaries) are eligible for these benefits.
- PM-JAY provides **cashless access to services for the beneficiary** at the point of service, that is, the hospital.
- PM-JAY will help reduce catastrophic expenditure for hospitalizations, which pushes 6 Crore people into poverty each year, and will help mitigate the financial risk arising out of catastrophic health episodes.
- Public hospitals are reimbursed for the healthcare services at par with the private hospitals.
- **PM-JAY is the world's largest health insurance/assurance scheme** fully financed by the government.

OBJECTIVES

- **Improve accessibility** – To enhance accessibility of quality medical care, particularly secondary and tertiary care for the beneficiaries across the country.
- **Improve affordability** – To enable the poorest 40 per cent of the population to afford quality secondary and tertiary care at public and private hospitals.
- **Improve quality of care** – To ensure quality of care and services through standard treatment protocols, quality linked incentives, close monitoring, beneficiary feedback and medical audits.

KEY FEATURES

- Health cover of ₹5 lakhs per family per year, for secondary and tertiary care hospitalization through a network of empanelled public and private providers.
- No restrictions on family size, age or gender.
- Cashless access to services for the beneficiary at the hospital.
- All pre-existing conditions are covered from day one.
- Covers up to 3 days of pre-hospitalization and post-hospitalization expenses such as diagnostics and medicines.
- Benefits of the scheme are portable across the country where a beneficiary can visit any empanelled public or private hospital for cashless treatment.
- Services include approximately 1,400 procedures covering all the costs related to treatment, including but not limited to drugs, supplies, diagnostic services, physician's fees, room charges, surgeon charges, OT and ICU charges, etc.

INSTITUTIONAL STRUCTURE

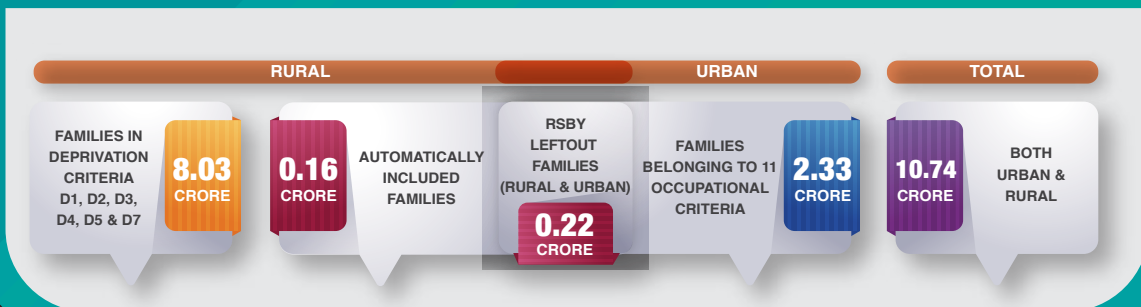
National Health Authority (NHA) has been set up to implement the PM-JAY at the national level. An attached office of the Ministry of Health and Family Welfare with full functional autonomy, NHA is governed by a Governing Board chaired by the Union Minister of Health and Family Welfare. Chief Executive Officer (CEO), an officer of the rank of Secretary to the Government of India manages its affairs. To implement the scheme in the State, State Health Agencies (SHAs) in the form of a society/trust have been set up by the States. SHAs have full operational control over implementation of the scheme in the State. Coverage & Beneficiary Identification.

COVERAGE & BENEFICIARY IDENTIFICATION

Over 10.74 Crore poor and vulnerable entitled families (approximately 50 Crore beneficiaries) are eligible for coverage under PM-JAY. These families have been identified based on Socio-Economic Caste Census (SECC) 2011 data related to the deprivation and occupation criteria for rural and urban areas respectively. In addition, such families as were already covered under Rashtriya Swasthya Bima Yojana (RSBY) but are not part of SECC are also covered.

Many States have expanded the coverage beyond SECC/RSBY numbers. They are providing benefits to a greater number of beneficiaries either based on their existing beneficiary identification criteria under State scheme or covering new beneficiaries. An eligible beneficiary undergoes the process of identification at the empanelled hospital before availing benefits under the scheme and is issued an e-card with a unique PM-JAY ID number.

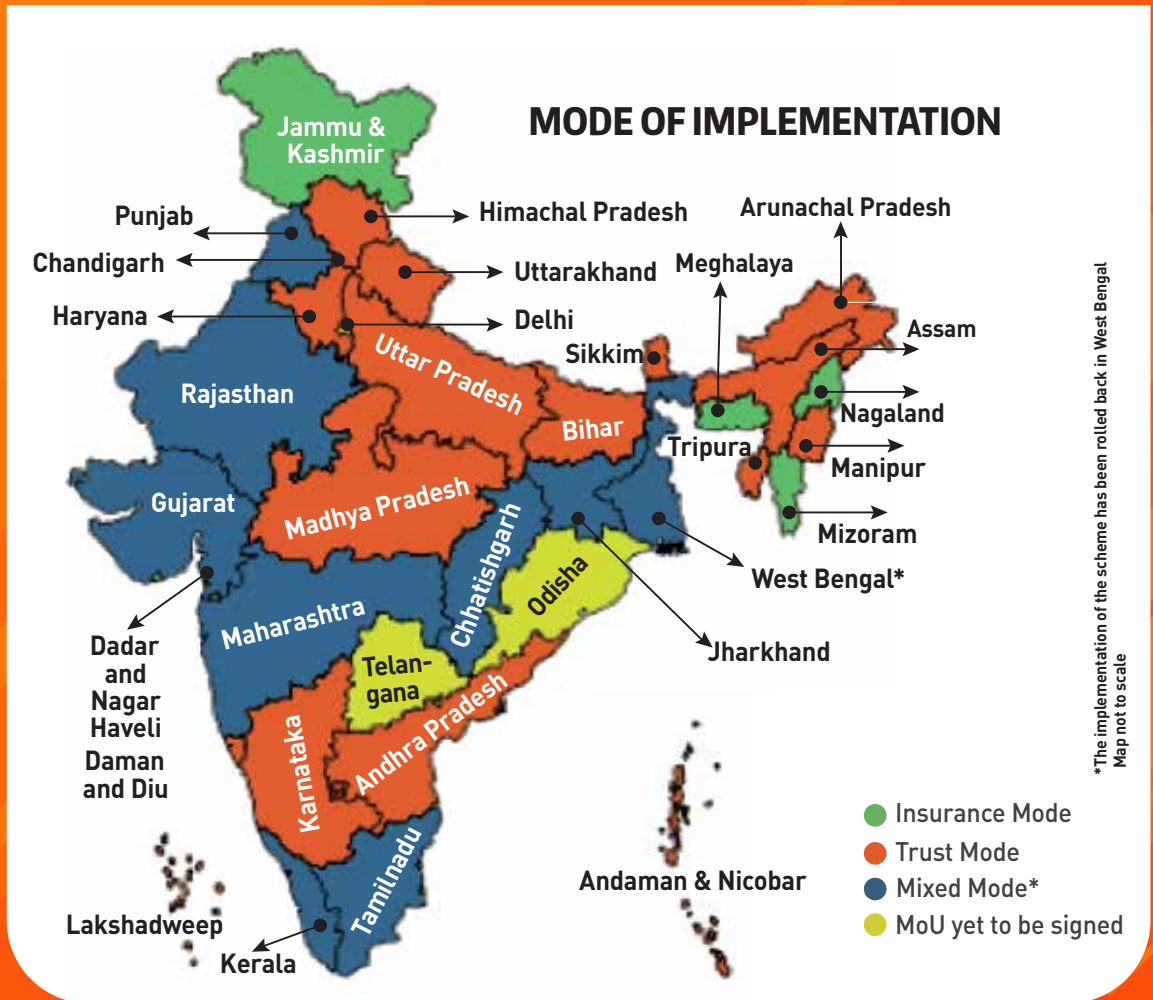
To spread greater awareness among beneficiaries and help them obtain e-card before actual need for utilization, NHA has signed MoU with Common Service Centres (CSCs) under Ministry of Electronics & Information Technology for beneficiary identification and is utilizing the services of over 3 lakh Village Level Entrepreneurs for identifying beneficiaries and issuing e-cards. More than 37 million beneficiary e-cards have been generated through the CSCs, and by Pradhan Mantri Arogya Mitras at empanelled hospitals as on June 2019. Personalized beneficiary identification letters with family card have been sent by Hon'ble Prime Minister to all the identified families in villages and towns across the country. This has helped drive up awareness among the beneficiaries and further ease the identification process when they visit hospitals or CSC centres.



MODE OF IMPLEMENTATION

States have been provided flexibility to choose mode of implementation. They can implement PM-JAY through insurance mode (by insurance companies), assurance mode (directly through Society/Trust) or hybrid mode (partly through insurance and partly through assurance).

As on June 2019, 33 States/UTs have signed the MoU with NHA. Only Delhi, Odisha and Telangana are yet to sign the MoU. While the scheme is operational in 30 States, it is going to be shortly launched in States of Punjab & Rajasthan. The status of mode of implementation and MoU signed are as under:



HOSPITAL EMPANELMENT

Ensuring the supply of quality services through a wide healthcare provider network is very crucial. States are continuously growing their network through empanelment of more hospitals. Empanelment criteria has been finalised in consultation with the States and industry. The criteria for empanelment is divided into two broad categories:

- Category 1, General Criteria: All the hospitals empanelled under PM-JAY for providing general care need to meet the minimum criteria established under the scheme such as at least 10 in-patient beds with adequate spacing and supporting staff as per norms, adequate and qualified medical and nursing staff (2 doctors & 3 nurses), fully equipped and engaged in providing medical and surgical services, commensurate with the scope of service/available specialties and number of beds, amongst others.
- Category 2, Specialty Criteria: Hospitals would need to be empanelled separately for certain tertiary care packages authorized for one or more specialties (like Cardiology, Oncology, Neurosurgery, etc.). Only those hospitals eligible under general criteria can apply for empanelment under this category.

State Governments have the flexibility to revise/relax the empanelment criteria, barring minimum requirements, depending on their local context, availability of providers and the need to balance quality and access with prior approval from National Health Authority.

At national level, NHA has directly empanelled National Institutes of Excellence like AIIMS, Safdarjung Hospital, etc. and is also in the process of empanelling more such hospitals including those from PSUs and other organisations. NHA has collaborated with Indian Railways for extending the health care services to PM-JAY beneficiaries in select Railway Hospitals. Similar collaborations with several leading healthcare providers are in pipeline.

INCENTIVES FOR HOSPITALS TO IMPROVE QUALITY

NHA has developed a performance-linked payment system that has been designed to incentivize hospitals to continuously improve quality of care and patient safety, based on successive milestones.

- Hospitals qualifying for NABH entry-level accreditation will receive an additional 10%.
- For hospitals with full NABH accreditation, they will get 15%.
- To promote equity in access, hospitals providing services in aspirational districts will receive an additional 10%.
- Teaching Hospitals running Post Graduate/Diplomate of National Board (DNB) courses will receive an additional 10% rate.
- Hospitals situated in metro cities also receive an additional 10%.



PACKAGE RATES

The Scheme reimburses hospitals on a fixed package, all-inclusive rate. For surgical conditions, hospitals package rate includes all the costs associated with the surgery. For medical conditions, a fixed rate per day room/ICU charges is provided. For maximum coverage of all conditions and corresponding treatment, NHA has developed a list of 1,393 packages across 24 specialties and finalised the rates following a rigorous consultative process. States have further flexibility to add packages, modify the rates within a reasonable limit. Furthermore, States that were previously implementing their own health insurance/assurance scheme, can continue with their existing package rates.

IT SYSTEM

NHA has developed a robust IT system for implementation of complete paperless operations and real time transaction monitoring. The IT system has following key components linking the entire chain of service delivery:

- Am I Eligible page (mera.pmjay.gov.in): to help beneficiaries/people check their eligibility status.
- Hospital Empanelment Module (HEM): to facilitate hospitals to submit their application online for empanelment under the scheme. So far more than 15,750 hospitals have been empanelled.
- Beneficiary Identification System (BIS): to identify and verify the beneficiaries at point of health care service delivery and at Common Service Centres (CSC). Beneficiaries are issue verified e-cards.
- Transaction Management System (TMS): to facilitate transactions and delivery of healthcare services at the hospitals including initiating pre-authorization requests and claims submission, approval and payment of claims.
- Information Security and Data Privacy: NHA has developed a rigorous security and data privacy policy that outlines how NHA and its ecosystem partners collect, process, securely handle and store personal data of beneficiaries and other sensitive personal data of individuals in compliance with Aadhaar Act 2016, IT Act 2000 and Right to Information (RTI) Act and rules and regulations there under.
- Monitoring Dashboard: An integrated dashboard has been developed to aid to monitoring and for real time analysis of performance of the scheme across the country.



TOLL FREE CALL CENTRE

A 24x7x365 call centre has been set-up with Toll-Free Helpline No. 14555/1800 111 565 to answer a range of queries around PM-JAY including queries on eligibility, location of empanelled hospitals, benefits under the scheme, hospital empanelment process, seek help for availing benefits or any issue faced at point of care, report grievance, provide feedback and other related areas. NHA call centres are integrated with the State call centres.

GRIEVANCE REDRESSAL

Institutional arrangements for grievance management are high focus areas within overall PM-JAY implementation.

- Grievance department is managed by dedicated resources to address the grievances as per the instructions of the NHA.
- The district authorities act as a front line for the redressal of beneficiaries/providers/other stakeholders' grievances and solve the grievance at their end.
- The PM-JAY grievance portal–Central Grievance Redressal Management System (CGRMS) at national level is operational.

FRAUD PREVENTION, DETECTION AND CONTROL

PM-JAY is based on a zero-tolerance approach to any kind of fraud/abuse and aims at developing an anti-fraud culture permeating all aspects of the scheme's governance. This approach is based on five founding principles of transparency, accountability, responsibility, independence and reasonability. PM-JAY has developed Anti-Fraud Guidelines covering prevention, detection, and deterrence of various kinds of fraud that could occur in PM-JAY at different stages of its implementation.

Advanced analytics, fraud investigation and medical audit guidelines have been developed to assist SHAs in identifying suspect transactions/entities, investigating fraud, carrying out audits and necessary action once suspected cases are flagged by anti-fraud triggers or by processing teams.



PM-JAY MILESTONES



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