

## **Record of Discussion (RoD)**

### **Review of Implementation of Ayushman Bharat Pradhan Mantri Jan Arogya Yojana (AB-PMJAY) in Union Territories**

**03:30pm, 03<sup>rd</sup> June, 2021; MHA, North Block, New Delhi**

A meeting to review the implementation of AB-PMJAY in Union Territories (UTs) of Andaman & Nicobar Islands (ANI), Chandigarh (CHD) and Puducherry (PUD) was held via video conference, under the chairmanship of Additional Secretary (UT) [AS (UT)], in the Ministry of Home Affairs (MHA), North Block, New Delhi. The list of participants is at **Annexure-I**.

2. At the outset, AS(UT) welcomed the participants and stated the agenda for the meeting. He thereafter invited Deputy CEO, National Health Authority (NHA) to make a brief presentation on the issues. A copy of the presentation is at **Annexure-II**. UT wise discussion is as below:

#### **Andaman & Nicobar Islands (ANI)**

##### **Deputy CEO, NHA**

- i. Utilization of the scheme is limited along with high claim overdue (27%) (as of 01.06.21)
- ii. UT needs to strengthen the State Health Agency (SHA) by deploying more resources.
- iii. Regarding Universal Health Coverage (UHC), UT may adopt NFSA database (1.10 lakh beneficiary families) wherein NHA shall pay on Pro rata basis for 21,399 families @ Rs 1052 per year per family. Budget sanctioned for ANISHI (Rs. 9 Crore for expenditure & Rs. 9.6 Crore for transportation & wage loss) may suffice.

##### **Chief Secretary, ANI**

- i. UT is onboard and will enhance SHA resources from 2 at present to 6.

#### **Chandigarh**

##### **Deputy CEO, NHA**

- i. SHA to empanel more private hospitals for increasing utilization of the scheme in the UT.

- ii. UT to continue *Aapke Dwar Ayushman* implementation to increase awareness & card generation.
- iii. For UHC, out of the total 1,02,778 families proposed, NHA will pay for 71,278 families. Additional budget of Rs. 5.4 Crore required for 31,550 NFSA priority families is in process at MHA.

## **Puducherry (PUD)**

### **Deputy CEO, NHA**

- i. Need to go for Mission mode Ayushman card generation; ~ 61% families (as of 01.06.21) are without cards. Currently, bulk generation of Ayushman cards by Ration card proposed by UT is not feasible due to lack of beneficiary photographs and phone numbers linked with Ration card. Instead it is recommended that UT should engage following stakeholders for ramping up Ayushman card generation for increased coverage:
  - a. NHA's empaneled agency for card generation along with IEC support
  - b. Involving grass root worker (ASHA, AWW etc.) for increased penetration
- ii. SHA should endeavor to empanel more hospitals under the scheme.
- iii. Decision on UT's request for UHC is awaited.
- iv. SHA has requested for 02 resources from NHA. UT is requested to identify suitable resources.
- v. Percentage of families having at least 01 Ayushman Card in Puducherry is only 39.2% which needs to improve.
- vi. For convergence, an additional budget of Rs. 16 Crore is required for 88,719 non-PMJAY BPL families and is in process at MHA level.

### **Chief Secretary, PUD**

- i. 1 lakh beneficiaries are from the SECC database of the total 1.7 lakh (approx.) BPL families.
- ii. Door to door visits are being made for enrollment, which is a time consuming process. This also requires capturing biometric details, however the system gets logged out frequently, creating additional delays.
- iii. There is a clear database of Ration Cards with 1.7 lakh families. Ration Cards are live cards and benefits are being given every month to beneficiaries. The card is linked to Aadhar.
- iv. It would be useful to generate the cards prior to making door to door visits.

- v. The UT would ramp up the performance and deploy the empaneled agency as suggested by NHA.

3. **After detailed deliberations, AS(UT) made the following key observations:**

- i. UTs may aspire to achieve 100% UHC.
- ii. Since, NFSA database is seen to be the most suitable database, NHA may explore the possibility of considering the same in all UTs. NHA to calculate the financial implication of adopting the NFSA database in all UTs, and share a comprehensive proposal with MHA.
- iii. NHA to support and handhold the UTs in the process.
- iv. ANI to use the NFSA beneficiary database instead of the islander card.
- v. Puducherry to focus on increasing the coverage of the scheme and improve its overall performance. Further, prior generation of Ayushman Cards by Ration Card as proposed by UT of Puducherry is not feasible. The UT is required to engage grassroot workers and run campaigns to ramp up the performance. A team from NHA may be sent to Puducherry to guide them as to the ways of increasing scheme coverage.

The meeting ended with a vote of thanks to the Chair.

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**List of Participants**

**Ministry of Home Affairs**

1. Shri Govind Mohan, Additional Secretary (UT)
2. Shri Kumar V Pratap, Joint Secretary (UT)
3. Shri Ravi Ranjan, Deputy Commandant

**In Chair**

**National Health Authority (through VC)**

1. Dr. Vipul Aggarwal, Deputy CEO
2. Sh. Rohit Deo Jha, Deputy Director
3. Ms Apoorva Mahajan, Consultant

**Union Territories (through VC)**

1. Shri Jitendra Narain, Chief Secretary, ANI
2. Shri Arun Kumar Gupta, Principal Secretary, Chandigarh
3. Shri Ashwani Kumar, Chief Secretary, Puducherry
4. Chief Executive Officer, State Health Agency, A&NI, Chandigarh and Puducherry.