GOVERNMENT OF INDIA MINISTRY OF HEALTH AND FAMILY WELFARE DEPARTMENT OF HEALTH AND FAMILY WELFARE

LOK SABHA UNSTARRED QUESTION NO. 4420 TO BE ANSWERED ON 20TH MARCH, 2020

DISPARITY IN PROCEDURE RATES UNDER HEALTH PLANS

4420. SHRI SISIR KUMAR ADHIKARI:

Will the Minister of **HEALTH AND FAMILY WELFARE** be pleased to state:

(a) whether the Government has taken note of the fact that same procedure is having different rates under Central Government health plans, if so, the details thereof;

(b) whether is it also a fact that along with many procedures, one PTCA-single stent rate for CGHS is higher than the Ayushman Bharat Scheme, if so, the details thereof;

(c) whether it is also a fact that State-wise package rate of medical treatment also differs from the Central plan and in maximum cases State Government provides much lower rates than Central Government rates, if so, the details thereof; and

(d) whether the Government proposes to consult the State Governments for providing the best minimum 'one-treatment, one-package rate' for all therein?

ANSWER THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI ASHWINI KUMAR CHOUBEY)

(a) & (b): Central Government Health Scheme (CGHS) is a contributory scheme of 36 lakh Central Government employees and pensioners and is operational in 72 cities only, whereas Ayushman Bharat- Pradhan Mantri Jan Arogya Yojana (AB-PMJAY) is a pan-India scheme which provides free health assurance cover of upto Rs. 5 lakh per year per family on family floater basis to around 10.74 crore poor and vulnerable families. There is no element of co-payment in PMJAY and introduction of concept of co-payment in PMJAY might lead to moral hazards.

For the above reasons, package rates under CGHS and PMJAY may differ slightly in some cases, including PTCA-single stent.

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(c): CGHS covers only 36 lakh beneficiaries spread in 72 cities. CGHS package rates in other cities except Mumbai are limited to 90% of Delhi rates. In CGHS Mumbai, the earlier CGHS package rates are continuing as no tender process for revision of rates was held in 2014 due to a pending Court case.

PMJAY is a centrally sponsored scheme, where funding of the scheme is shared between Centre and States/ UTs in the ratio of 60:40 for all States/ UTs except North-eastern States and Himalayan States, where the ratio is 90:10 and UTs without legislature, where the central share is 100%. Under PMJAY, the States have the flexibility to decrease to any extent or increase upto 10% the package rates depending upon the state specific requirements. Also, hospitals are incentivized on certain parameters like NABH/JCI/NQAS accreditation, PG seats and location (metro urban areas or aspirational districts)

(d): No such proposal is pending before the Government at present.

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