

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

**LOK SABHA
UNSTARRED QUESTION NO. 1011
TO BE ANSWERED ON 18TH SEPTEMBER, 2020**

COVID-19 TREATMENT UNDER AYUSHMANBHARAT YOJANA

**1011. SHRI RAKESH SINGH:
SHRI BALUBHAU ALIAS SURESH
NARAYAN DHANORKAR:
SHRI NATARAJAN P.R.:
SHRI BHARTRUHARI MAHTAB:**

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

- (a) whether rates for the treatment of Covid patients in private hospitals have been fixed under Ayushman Bharat Yojana;
- (b) if so, whether the Government is aware that arbitrary amount is being charged for the treatment of Corona patients by the private hospitals in the country;
- (c) whether the Government has taken any step to tackle the situation; if so, the details thereof;
- (d) the number of complaints received by the Government for denial of benefits of the said scheme to the eligible beneficiaries during COVID-19 pandemic across the country along with the action taken thereon, State/UT-wise;
- (e) whether cases of corruption in implementation of the said scheme have come to the notice of the Government during the said period; if so, the details thereof, State/UT-wise and the reasons therefor; and
- (f) the steps taken/being taken by the Government for effective implementation of the said scheme across the country?

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

(a) Under Ayushman Bharat – Pradhan Mantri Jan Arogya Yojana (AB-PMJAY), secondary and tertiary hospitalization care is provided to entitled beneficiaries through pre-defined Health benefit packages (HBPs).

To effectively cover AB-PMJAY beneficiaries for testing and treatment of COVID-19, packages for ‘Testing for COVID-19’ and ‘Treatment of COVID-19’ have been notified.

However, States/UTs have been given flexibility to modify the national HBPs related to COVID-19 based on the guidelines issued by National Health Authority.

(b) & (c) No such complaints have been received under AB-PMJAY. Hospitalization benefits under AB-PMJAY are provided to the entitled beneficiaries in a cashless manner. Further, claims are processed and paid based on specified package rates. A package consists of all the costs associated with the treatment, including pre and post hospitalisation expenses.

A Central Grievance Redressal Management System (CGRMS) has been developed under AB-PMJAY for addressing any issue related to denial of treatment or overcharging. A beneficiary can lodge grievance on the portal, through national call centre 14555 or through mail, letter, fax etc. which is acknowledged, recorded, escalated & resolved as per a well-defined process. Complaints regarding denial of treatment by an empaneled hospital received through any medium are immediately assigned to respective State Health Agency for action.

(d) 294 complaints related to denial of treatment for various ailments have been received from 1st April 2020 to 10th September 2020 at the CGRMS of AB-PMJAY and Centralized Public Grievance Redress and Monitoring System (CPGRAMS). Out of these, 208 grievances have been resolved and others are in process of resolution. The State/UT -wise numbers of complaints related to denial of benefits under the scheme are provided at Annexure.

During the same period more than 27.2 Lakh beneficiaries have taken treatment under the scheme.

(e) A dedicated fraud and abuse control unit has been set up at the National level which continuously tracks utilization data, generation of e-cards and instances of fraud/abuse through monitoring tools on real time basis across India. However, during the said period, no instances of corruption related to COVID-19 hospitalization have been reported.

(f) Government has set up National Health Authority to ensure the effective monitoring and implementation of the AB-PMJAY in collaboration with the State Health Agencies (SHA) set up by the implementing States/UTs. Additionally, District Implementation Units have been setup in the districts to direct the implementation at district.

The progress of AB-PMJAY is continuously assessed and monitored on a real time basis. The performance of the scheme is objectively evaluated in terms of e-cards issued, number of hospital admissions, quality of treatment provided, timely settlement of claims etc.

Additionally, review meetings are conducted with the stakeholders, including State Health Agencies, on a periodic basis. Necessary interventions based on the feedback regarding the scheme implementation are being made.

Other steps taken to ensure the effective implementation of the scheme are at the Annexure II.

Annexure I

State/UT wise details of grievances received related to denial of services under PMJAY from 1 st April to 10 th September 2020							
Sl. No	Name of the State/UT	Central Grievance Redressal & Management System- PM-JAY (CGRMS)			CPGRAMS		
		Total Number of Grievances received	Total Number of Grievance Resolved	No. of cases in Process	Total Number of Grievances received	Total Number of Grievance Resolved	No. of cases in Process
1	Andhra Pradesh	1	1	0			
2	Assam	1	1	0			
3	Bihar	29	12	17			
4	Chandigarh	2	2	0			
5	Chhattisgarh	4	0	4			
6	Gujarat	7	5	2			
7	Haryana	56	48	8	1	1	0
8	Himachal Pradesh	1	1	0			
9	UT of Jammu And Kashmir and UT of Ladakh	2	2	0			
10	Jharkhand	36	22	14	3	1	2
11	Karnataka	6	6	0	1	1	0
12	Kerala	2	1	1			
13	Madhya Pradesh	28	26	2	1	0	1
14	Maharashtra	3	2	1	2	2	0
15	Manipur	1	0	1			
16	Nagaland	1	1	0			
17	NHCP	1		1			
18	Punjab	3	2	1			
19	Rajasthan	2	2	0			
20	Tamil Nadu	3	3	0	3	2	1
21	Uttar Pradesh	71	47	24	3	1	1
22	Uttarakhand	17	13	4	3	2	1
	Total	277	198	79	17	10	7

Annexure II

Steps taken for effective implementation of the Ayushman Bharat – Pradhan Mantri Jan Arogya Yojana

- Drives of e-cards generation have been undertaken in States/UTs in a mission mode
- ‘Open BIS policy’ has been devised which enables States to engage services of different public or private entities in addition to the network of CSC VLEs and PMAM to facilitate the beneficiary identification process.
- Further, Government of India has directed all the Ministry and departments to empanel all public hospitals with AB-PMJAY.
- Based on the feedback received from various stakeholders, the Health Benefit Packages under the scheme have been rationalised to HBP 2.0
- States/UTs have been requested to empanel additional hospitals in their jurisdiction. This is in addition to the 23,323 hospitals that have already been empanelled under the AB-PMJAY.
- A comprehensive media and outreach strategy to spread awareness and empowering the beneficiaries about their entitlements and rights under the scheme has been followed.
- Further, social media platforms are also being utilised to reach out to the secondary and primary audiences including the intended beneficiaries and other stakeholders. Outreach programme like school contact program, activation programs at village level, van campaigns etc. are also being undertaken suitably in consultation with respective State Health Agencies.
- National Anti-Fraud Unit (NAFU) has been created at National Health Authority (NHA) for overall monitoring and implementation of anti-fraud framework supported by State Anti-Fraud Units (SAFU) at State level. The NAFU works in close coordination with SAFU to identify and act against errant entities.
- To ensure that disputes and grievances involving beneficiaries, healthcare provider and other stakeholders under AB-PMJAY are resolved in an efficient, transparent and time-bound manner, Grievance Redressal Guidelines have been developed and a Central Grievance Redressal Management System has been established.