Title: Assessing surgical care equity among disadvantaged populations in India under Pradhan Mantri Jan Arogya Yojana

Authors: Himanshu Iyer MBBS¹, Siddhesh Zadey BSMS MSc-GH¹²

Affiliations:
¹ Association for Socially Applicable Research (ASAR), Pune, Maharashtra, India
² Department of Surgery, Duke University School of Medicine, Durham, North Carolina, United States

Background: Pradhan Mantri Jan Arogya Yojana (PMJAY), globally the largest publicly-funded health insurance scheme with over 500 million beneficiaries, was formulated to provide financial risk protection against health expenditures among the socioeconomically bottom 40% of Indian population.

Study Objective: To understand equity in surgical care provision for PMJAY beneficiaries.

Methods: We reviewed data from 7 policy briefs and 6 working papers by the National Health Authority on early implementation years of PMJAY relevant to surgery under 5 dimensions: public-private health sectors, gender, age, surgical specialty, and geographical distribution.

Findings: As of 2021, 12863 of the 27000 hospitals empanelled under PMJAY provide surgical care. Of these, 6737 are private while 5794 are publicly owned. Of the total 1393 packages offered, 1083 are surgical. 26,73,251 (51.5%) submitted claims were for males while 25,17,899 (48.5%) were for females. Most claims for cataract, oncology and cardiac procedures were from 40-65, 45-55, and 51-70 ages, respectively. 12% of the total surgical claims came from general surgery vs. 1% from hysterectomy packages. Cardiovascular thoracic surgical packages are the most expensive costing 3225 crore INR (424 million USD) for 480,000 beneficiaries. As of August 2019, the 115 aspirational districts from 30 states had fewer specialized surgical hospitals than other districts.

Conclusions: While the scale-up of overall surgical care is necessary, equity cannot be sidelined. Programs to provide surgical care among people from poor & rural regions are arguably the most important. PMJAY needs to cater to the needs of young populations from economically backward districts.
Assessing Surgical care equity among disadvantaged populations in India under Pradhan Mantri Jan Arogya Yojana (PMJAY)

Background

The role of affordable healthcare is to ensure equitable access to essential surgical care. The Pradhan Mantri Jan Arogya Yojana (PMJAY) is a government-sponsored scheme to provide financial protection to individuals and families to seek hospital-based surgical care.

Methods

We analyzed the data from the National Health Mission (NHM) to evaluate the accessibility and equity in surgical care provided under PMJAY.

Findings

Public vs. Private sector

- In 2019-20, 40% of the 11.26 million procedures conducted under NHM were in public sector hospitals, while 60% were in private sector hospitals.

Gender Differences

- Women were more likely to undergo surgical procedures than men, especially for non-communicable diseases.

Figure 1: Proportion of procedures conducted in public vs. private sector hospitals.

Conclusion

While the uptake of surgical care is increasing steadily, more work is needed to provide equitable access across social strata and regions. The equity and accessibility of PMJAY should be monitored to ensure its implementation.

References

- [Link to PMJAY implementation details]
- [National Health Mission report]

Figure 2: Proportion of surgical procedures by gender.