



A Study On Swasthya Sathi Health Scheme In West Bengal

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Abstract— Poverty is a very critical factor in India, where people struggle for survival and as a result, they cannot afford good quality healthcare. India spends about 2 percent of GDP spent only on public health. In case of illness, the families meet the expenses upfront from out of pocket expenditure (OOP). The inadequate health budget of India is a reason of an intensifying factor in poor quality health treatment and costly healthcare facilities. To cope up with this problem, many group health insurance schemes such as Rajiv Arogyasri Scheme 2007), Rashtriya Swasthya Bima Yojana (RSBY) (2008), CGHS(1954), West Bengal Health Scheme (2008), etc has been launched in different states of India to reach out the underprivileged people, for providing the highest quality health care services and support the very expensive treatment.

The State of West Bengal(WB) launched successfully the health scheme “Swasthya Sathi” in Dec’ 2016 and established a hope for all below poverty line (BPL)/low earning families as per SECC deprivation rules and contractual government employees, for cashless health coverage upto 5 lakhs at both private and public hospitals. Thus this health protection scheme could be a way forwards for removing the financial barriers and burden of the poor and middleclass and improving their access to a better quality healthcare by insulating them with financial protection against expensive medical procedures and negotiating with the providers for better quality care on time. The study is to compare the improved attitude and behavior of the poor patient to go to private hospitals for treatment on cashless basis.

The Swasthya Sathi scheme has already covered 128.44 lakh families of the State out of total 142.53 lakh-targeted families (i.e. 90% families covered). Total 8.15 lakh patients treated, amounting to Rs. 787.10 Crore since beginning of the scheme (30.12.2016) up to Dec-2019, have been provided to the beneficiaries under the Swasthya Sathi Scheme by network hospital.

Keywords— Health Scheme, Swasthya Sathi, Out of Pocket Expenditure, BPL, 5lakh coverage, West Bengal

I. INTRODUCTION

The West Bengal Government, accordingly has launched the noble and flagship health protection scheme “Swasthya Sathi Scheme” on 30th December, 2016 and established hopes for all below poverty line/low earning families as per SECC deprivation criteria of which the categories of beneficiaries are ICDS Workers & Helpers, Self Help Group Members(SHG), ASHA Karmee, Civil defense Volunteers, , Civic Volunteer Force and contractual employees from certain categories.

The scheme has a health coverage upto 5 lakhs for any diseases including all pre-existing diseases from the day one of the policy. The private and public both hospitals are empanelled and Graded as Grade-A, Grade-B, Grade-C and Grade-R through online portal under this scheme. There is no cap in family size along with a unique feature which is parents of both the spouses are included into the Swasthya Sathi scheme. All RSBY beneficiaries and families identified as per SECC deprivation criteria are covered under Swasthya Sathi also whereby total families covered under Swasthya Sathi are 150.86 Lakh families[1-3]. More than 1502 Hospitals (493 Govt and 1009 Private) are actively providing cashless services under the Scheme. The scheme is running entirely on IT platform from day one and getting all records in real time including e-Health Record of the beneficiaries. It has 100% online Pre-authorisation within turnaround time of 24 Hrs., instant alerts & SMS triggers to the beneficiaries at the time of blocking of card, Real-time uploading of medical record of the patents during discharge, claim disbursement to the hospital within TAT of 30 days otherwise interest are to be charged for the delayed payment, 24X7 toll free Call



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Centre (18003455384) with feedback option, How 'may I help you' option for any assistance, Find your name to get details of his/her eligibility/enrolled status, Online grievance monitoring & Trigger Mechanism and Android based Swasthya Sathi Mobile app for assistance to the beneficiaries etc. Online Data and MIS is available in SNA server on various claims, payment, disease profiling, hospital infrastructure and doctors details etc. The chip based Swasthya Sathi Smart Card is issued preferably in the name of eldest women family member as Head of family, to promote gender empowerment. The scheme is implemented by the Department of Health & Family Welfare under Swasthya Sathi Samiti in consultation with the Finance Department covering all the 23 districts of West Bengal[4-5]. The state level implementation committee headed by the Chief Secretary Government of West Bengal is the policy making body.

Initially public sector Insurance Companies only were allowed to participate and Government selected the United Health Insurance Company' and 'National Health Insurance Company for promoting the Insurance for those comes under the category of Swasthya Sathi Scheme in the Financial Year 2016-17. Further, a new approach to include private Insurance companies had also been taken due to which the L1(lowest) bidders are Bajaj Allianz General Insurance and

IFFCO Tokyo General Insurance Company for the financial year 2018-19 and 1920 (up to 15.01.2020), have been nominated to continue the scheme[6-8].

Currently all the public Insurance Companies, i.e. National Insurance Company, Oriental Insurance Company and United India Insurance Company from 16.01.2020 onwards continues the service. National Insurance Company in 6 Districts, Oriental Insurance Company in 9 Districts and United India Insurance Company in 8 Districts are selected as Insurance Partner [10-11].

The scheme acts as a lifeline of poor and deprived people from sever chronic diseases as well as any other diseases. The beneficiary is covered upto Rs.1.5 lakh under Insurance mode and over and above 1.5 lakh upto 5 lakh is covered under Assurance mode for any diseases. The Assurance mode is managed by the team of officers and staff headed by the State Nodal officer and Secretary, Health and Family Welfare, West Bengal[12-14].

Limitation:

- No OPD treatment is included under this scheme.

- The beneficiary can only avail treatment within the state of West Bengal.

II. OBJECTIVES OF THE STUDY

- a) To analyse the government sponsored health schemes presently being implementing in West Bengal.
- b) To analyse the health profile and expansion of the health schemes in the study area.
- c) To study the Socio-economic characteristics of the sample beneficiaries of health schemes.
- d) To understand the impact and implications on the beneficiaries.
- e) To compare the improved attitude and behavior of the poor patient to go to private hospitals for treatment on cashless basis
- f) To understand the limitations of the health schemes
- g) To discuss the management of health insurance schemes.
- h) To give some policy suggestions to effective implementation of the Scheme

III. DATA COLLECTION

A. Primary Data: (To generate secondary data)

- i. Personal Interview
- ii. Direct Observation
- iii. Questionnaires for beneficiaries

B. Secondary Data: (To generate secondary data)

- i. Various report & records maintained in the website of the scheme.
- ii. Comparative analysis of the various report related to health scheme.

C. Tools adopted

A survey instrument in the form of questionnaire was developed based on the objectives of the research. A structured questionnaire was used in order to identify the respondent's awareness level about Health Insurance schemes in West Bengal.

The Statistical Tool - Bar Graphs and Pie Charts. MS Excel

D. Sample

It consisting 25000 beneficiaries feedback were taken from either main beneficiaries or any member who report to any Swasthya Sathi empanelled hospitals.

Sample size: 25000 beneficiaries



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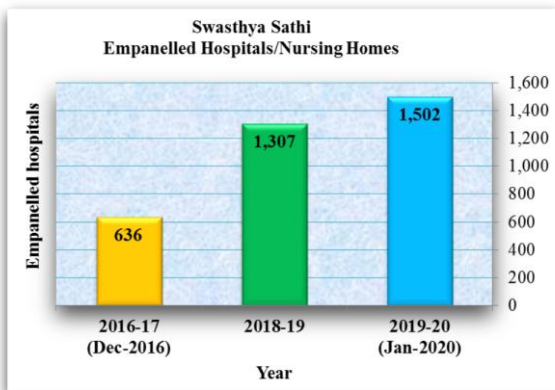
IV. DATA ANALYSIS.

Figure 1: Swasthya Sathi Enrolment performance yearwise



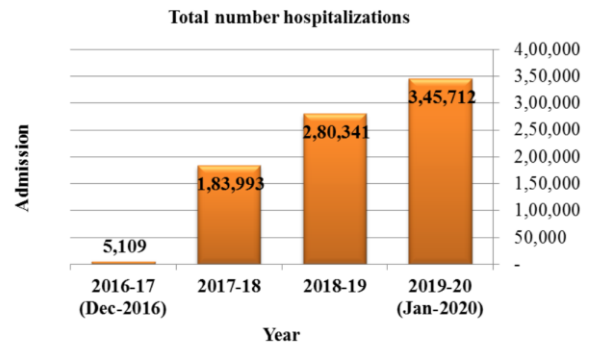
It is observed in the above diagram (Figure 1) that the families enrolled in the scheme, shows a gradual increase over the years. It seems that the target group/people has also increased over the time. It also shows that a large majority of public of West Bengal have shown keen interest to be enrolled into this scheme as they have been enormously benefited by this cashless scheme. The total number of families enrolled in the year FY-2016-17, FY-2017-18, FY-18-19 and FY-2019-20 respectively are 33.54 lakh, 45.78 lakh, 114.54 lakh and 128.44 [15-18].

Figure 2: Empanelled Hospitals in Swasthya Sathi



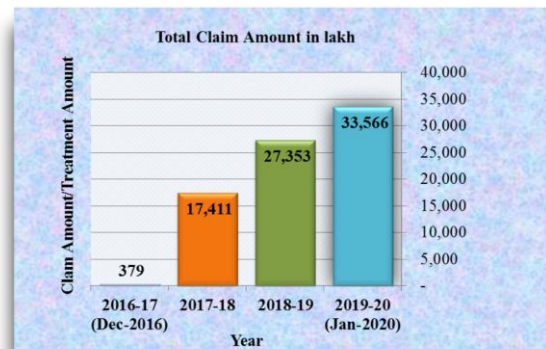
The above diagram (Figure 2) represents progress of the hospital empanelment under Swasthya Sathi. Every year more number of the hospitals have shown interest into this social security scheme to get empanelled. It is fact that hospital are very much motivated by this mass government sponsored health scheme or benefited with this scheme. Presently, more than 1500 hospitals providing services under this scheme. A part of income generated through this scheme is used by the government as well as private hospitals for development.

Figure 3: Total number of admissions over the Year



The hospitalization (number of patients admitted) over the years since inception of the scheme has very positively increased as observed in the diagram (Figure 3). This also means that the attitude and behavior of the poor patient to utilize hospital services has improved for their treatment on cashless basis. The total 8,15,155 number of admission is observed since Jan-2017 till Dec-2020 under Swasthya Sathi scheme.

Figure 4: Total Claim Amount in lakh over the Year



In the above diagram (Figure 4), every year the total claims amount has also increased. The total claim year wise from the year 2016-17, 2017-18, 2018-19 and 2019-20 amounts to Rs.379/- lakh, Rs.17,411/- lakh, Rs.27,353/- lakh, Rs.33,566/- lakh respectively. This also shows very positive increasing trend [19-21].



Figure 5.a: Call Centre-Number of call Addressed

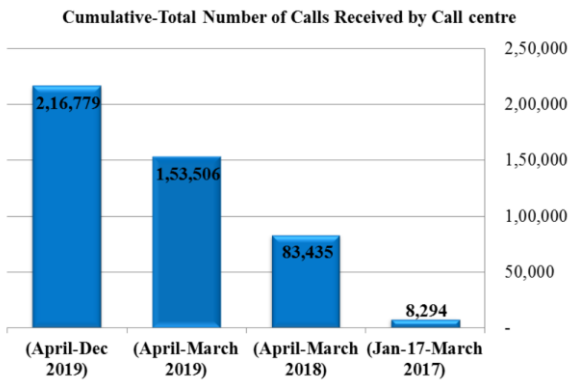


Figure 5.b: Swasthya Sathi smart card



Every call received from the beneficiaries as well as general public is addressed and the call is recorded for future reference and analysis.

From the above diagram and information (Figure 5.a), the number of calls received though call centre has shown an

Category of Complaints Calls	Cumulative since inception up to December 2019-20
SMART CARD	241
MONEY CHARGED (HOSP)	536
HOSPITAL SERVICES	1,564
HOSPITAL PRE AUTH	285
HOSPITAL DISCHARGE	675
HOSPITAL DENIAL	72
HOSPITAL ADMISSION	3,285
Total	6,658

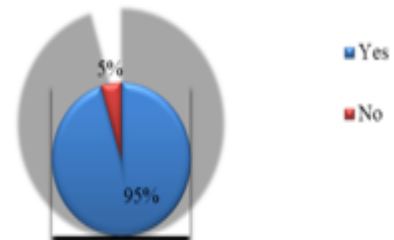
increasing trend over the years since inception which has a very much significant awareness impact for the people of

Awareness level	Frequency	Percentage
Yes	23,818	95%
No	1,182	5%
Total	25,000	100%

this Swasthya Sathi social security scheme in West Bengal. The 24X7 toll free Call Center (18003455384) for assistance is displayed on the back of Smart Card (Figure 5.b) [22]. The beneficiaries can also reach out through social media platform such as Facebook, Twitter, What's App or can even mail to the Nodal Agency, details of which can be found in the Swasthya Sathi web portal. Individual grievances can be lodged through Swasthya Sathi mobile App, which can be freely downloaded from Google play store as well as grievance portal online in the system. These all are innovative aspects and outreach of the scheme for the needy people.

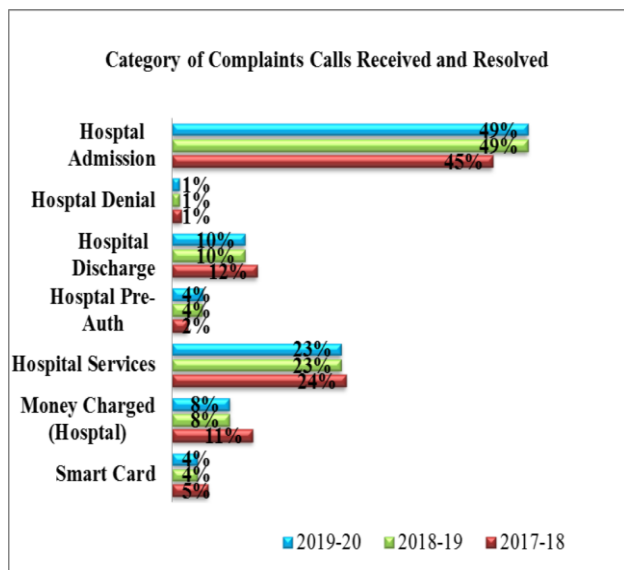
Figure 6: Awareness Level of Swasthya Sathi Beneficiaries during Feedback Calls

Awareness Level of the Swasthya Sathi Beneficiaries



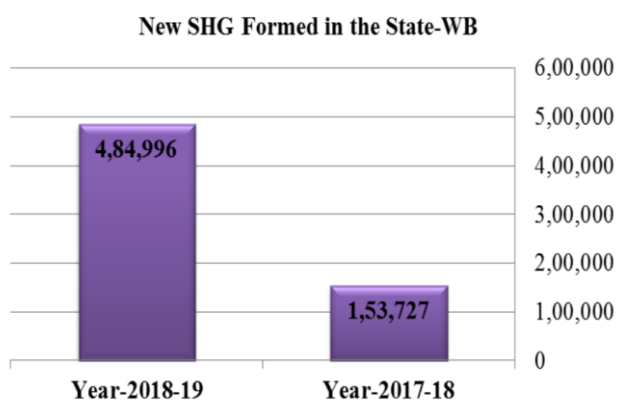
In the above table and diagram (Figure 6), we can see that a large majority of the respondent i.e. 95 % are aware whereas 5% are not aware about Swasthya Sathi health insurance schemes with 23,818 and 1182 in number. Therefore, it proves that the scheme is becoming very popular over the years.

Figure 7: Complaints calls Category wise received and resolved



From the above table and diagram (Figure 7), it is observed that hospitals admission has increased over the years and denial or refusal to admit the Swasthya Sathi beneficiaries has decreased over the year. Further, the grievances related to the procedures of admission treatment and discharge of the patients has also decreased over the years.

Figure 8: Represents the impact on Self Help Group (SGH)



In the above diagram(figure 8), it is seen that in year 2017-2018 the number of self help group functioning in West Bengal was - 1,53,727. In the year 2018-19, the number of self help functioning is 4,84,996 [23-30].

This shows that this scheme has helped in woman empowerment and many women have come forward to stand on their foot.

V. RECOGNITION AND REPLICATION

The Swasthya Sathi health scheme of West Bengal has been recognized as one of the leading social security health schemes or self-sustainable income-generating scheme successfully implemented in India. The Swasthya Sathi Scheme has the potential for replicating as a project as it is mostly based on IT platform thereby minimizing human intervention. This enables near perfect claim management, Grievance management, and real time monitoring of the Scheme.

The Swasthya Sathi scheme of West Bengal has won the SKOTCH Award, India for year 2018. This Award was confirmed in February 2019.

VI. CONCLUSION

The Swasthya Sathi scheme as well the erstwhile RSBY scheme are mass health scheme which provides cashless medical benefits to the poor, needy and low income group and socially economically deprived group. Both the schemes were implemented seriously and efficiently. The scheme so monitored on a regular and any grievances arising was addressed promptly. This is the reason while after rolling out both schemes there was gradual and sustains increase beneficiaries enrolment, hospital empanelment and hospitalization & claims amount.

The objective of the scheme has been increased the treatment seeking behavior of the poor and needy from registered and qualified trend and reputed hospitals both the government as well as the private.

This objective has been largely achieved in West Bengal. Previously the poor and the needy were afraid to go to reputed hospital and qualified doctors due to lack of money and resources. They used to go to quacks and untrained doctors and used to adopt unscientific method of treatment of their own and their kith and kin thinking leading increasing morbidity and mortality.

Now, as they smart health card with Rs.5 lakh coverage for cashless so that they are confident enough to attend reputed hospital for their treatment for complicated diseases as cancer, organ transplant, trauma, neurological and craniological operation etc.

With view of the above, it is observed that the popularity of health schemes in India, specially this Swasthya Sathi in West Bengal has become very popular and is well accepted by the people.

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