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VIVEKANAND COLLEGE, KOLHAPUR

(Empowered Autonomous)

DEPARTMENT OF STATISTICS

A PROJECT REPORT ON

**“THE COVERAGE, UTILIZATION AND
IMPACT OF AYUSHMAN BHARAT SCHEME IN RURAL
AREA OF KOLHAPUR DISTRICT”**

Submitted by

**Miss. Mane Siddhi Bipinkumar
Miss. Patil Tejaswini Shahajirao
Miss. Mohite Srushti Pandharinath**

in partial fulfillment for the award of

the degree of

BACHELOR OF SCIENCE

in

STATISTICS

CERTIFICATE

This is to certify that,

Sr. No.	Name	Roll No.
1	Siddhi B Mane	8313
2	Srushti P Mohite	8315
3	Tejaswini S Patil	8320


Have satisfactorily completed the project work on **“The Coverage, Utilization and Impact of Ayushman Bharat Scheme in rural area of Kolhapur district”** as a part of skill enhancement course for **B. Sc. III**, prescribed by the Department of Statistics, **Vivekanand College, Kolhapur (Empowered Autonomous)** in the academic year **2023-24**.

This project has been completed under our guidance and supervision. To the best of our knowledge and belief, the matter presented in this project report is original and has not been submitted elsewhere for any other purpose.


Project Guide

(Ms. Pawar V. V.)


Examiner


Head
HEAD
DEPARTMENT OF STATISTICS
(Ms. Pawar V. V.)
VIVEKANAND COLLEGE, KOLHAPUR
(EMPOWERED AUTONOMOUS)

ACKNOWLEDGEMENT

We have immense pleasure in submitting this project report on **“The Coverage, Utilization and Impact of Ayushman Bharat Scheme in rural area of Kolhapur district”**. It is our foremost duty to express our deep sense of gratitude and respect to the supervisor **Ms V V Pawar** for their up-lifting tendency and inspiring us for making of this project work complete and successful. We are indebted to the library personal for offering all the help in completing the project work. Last but not the least we are thankful to our Head of Department (**Ms. V.V.Pawar**), teaching, non-teaching staff, friends and those helped us directly or indirectly throughout this project work.

Sincerely,
Project Team




DECLARATION

We hereby declare that the project report entitled “**The Coverage, Utilization and Impact of Ayushman Bharat Scheme in rural area of Kolhapur district**” written and submitted to **VivekanandCollege,Kolhapur(Empowered Autonomous)** partial fulfilment of B.Sc. III (Statistics) under the guidance of **Ms. V. V. Pawar** is our original work. The empirical results in this project are based on the data collected by ourselves.

We understand that any copying is liable to be published as the authorities deem fit.

Date: 18/04/2024

Place: Kolhapur

Name	Sign
Siddhi B Mane	
Srushti P Mohite	
Tejaswini S Patil	

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INTRODUCTION

The study was initiated to estimate the coverage, utilization, and impact of Ayushman Bharat Scheme in the rural field practice area of three villages in Kolhapur District.

India is a state of epidemiological health transition i.e. shifting from communicable to non-communicable diseases. The annually 3.2% Indians falling below the poverty line and three forth Indians spending their entire income on health care and purchasing drugs. **The government of India announced a Ayushman Bharat Yojana- National Health Protection Scheme (AB-NHPM) in the year 2018.** The aim of this programme is to provide health coverage upto **Rs 5 lakh** per family per year for secondary and tertiary care hospitalisation to poor and vulnerable families under **AYUSHMAN BHARAT-PRADHAN MANTRI JAN AROGYA YOJANA (AB-PMJAY)**

- Criteria –
1. Categories- SC/ST/Lower income group
 2. Family having at least one physically challenged member
 3. No adult member between ages 16 to 59
 4. Landless households deriving a major part of their income from manual casual labour
 5. Families living in one room makeshift houses with no proper walls or roof
 6. Manual scavenger families

As per current estimates, more than 15000+ hospitals are currently part of PMJAY scheme. Out of these, 50% of the empanelled AYUSHMAN hospitals are private hospitals where the beneficiaries can get cashless treatment. In Kolhapur, there are 41 private hospitals which are part of this scheme.

So, we are setting up a survey for getting the view of beneficiaries of Ayushman Bharat Scheme

AIM & OBJECTIVES

AIM:

Analysis of the coverage, utilization, and impact of Ayushman Bharat Scheme.

OBJECTIVES:

- To study number of households covered under the Ayushman Bharat Scheme out of selected households.
- To examine the utilization and impact of Ayushman Bharat Scheme on covered households under the scheme.
- To compare the awareness about Ayushman Bharat Scheme among three different villages in Kolhapur district.
- To check the proportion of utilization of Ayushman Bharat Scheme. (health card-yes and insurance-yes pairs)
- To study the preferences of people visiting private or govt hospital

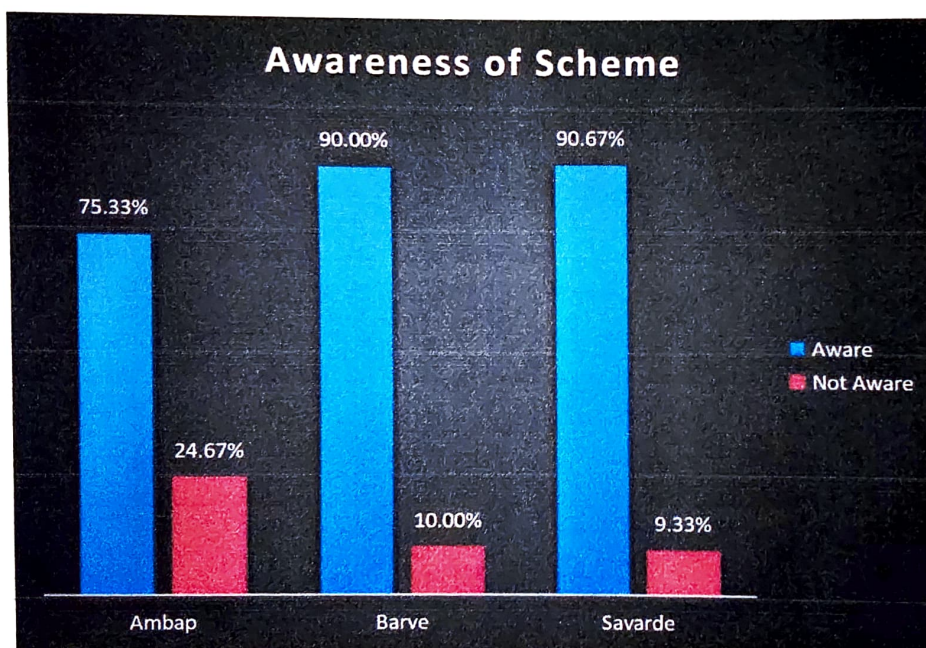
RESEARCH AND METHODOLOGY

The questionnaire were distributed among 150 households in three different villages in Kolhapur district. All of them filled the google form as of online survey.

For our project, first we created a set of questions and created a google form of it. Convenience sampling was used as a method for sampling. Then we sent it to households through WhatsApp, Mail and we also had live interaction with households to collect the data. After data collection we had taken data from google form to excel sheet, and in excel for representation of data we used pivot table as well as graphical representation methods and for conclusion we use statistical tools and cross tabulation analysis.

Table 1: **Awareness of Ayushman Bharat Scheme**

Villages	Yes	No
Ambap	113	37
Barve	135	15
Savarde	136	14

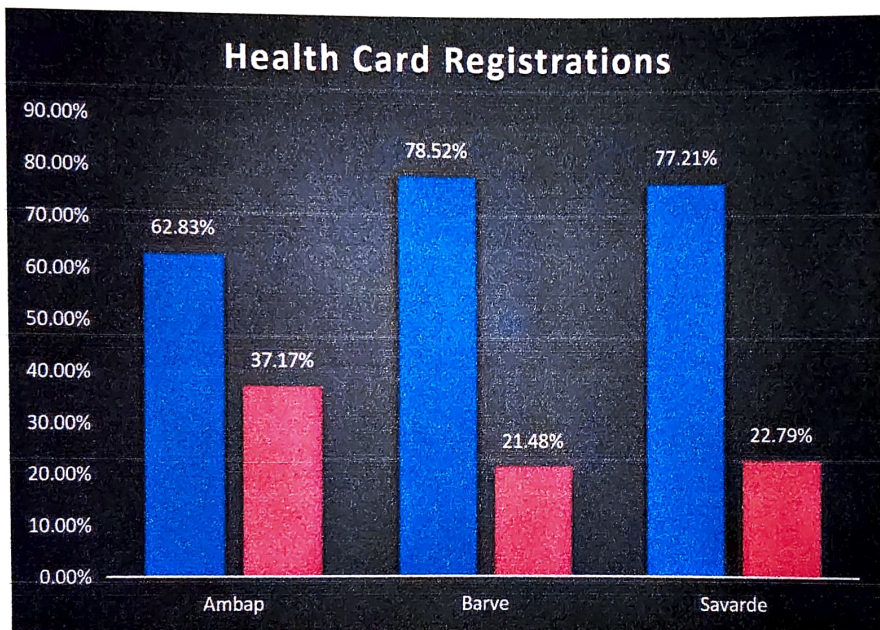


CONCLUSION:

- 85.3% people in rural area are aware about Ayushman Bharat Scheme
- It can be concluded that awareness among people in Savarde and Barve villages (above 90%) is more as compared to Ambap.

Table2: **Village wise health card registrations**

Villages	Registered	Not Registered
Ambap	71	79
Barve	106	44
Savarde	105	45

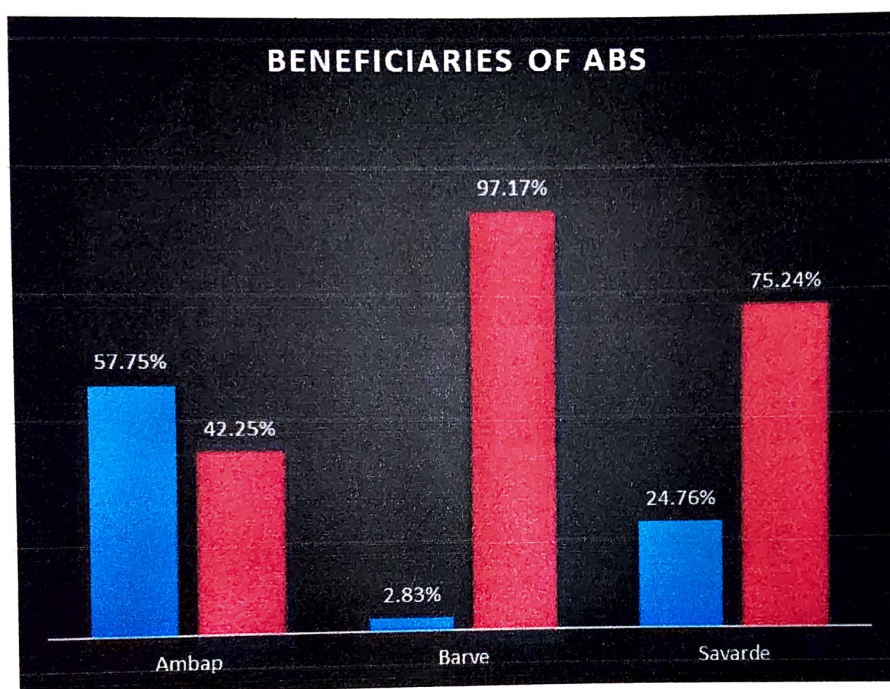


CONCLUSION:

- 63% of people have registered for health card
- It is observed that the percentage of health card registration is high (above 70%) in Barve and Savarde villages as compared to Ambap.

Table3: **Beneficiaries of ABS**

Villages	availed	not availed
Ambap	41	109
Barve	3	147
Savarde	26	124

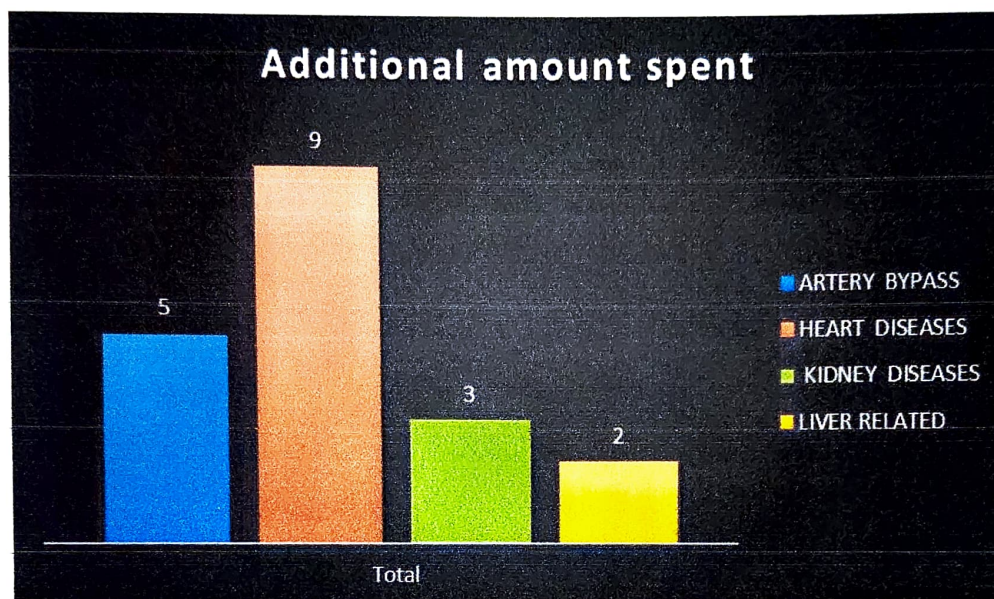


CONCLUSION:

- Though the awareness of scheme in Barve is very high but beneficiaries are very less.

Table4: **Additional amount spent**

ARTERY BYPASS	HEART DISEASES	LIVER RELATED	KIDNEY DISEASES
2	3	2	0
0	1	0	0
3	5	0	3

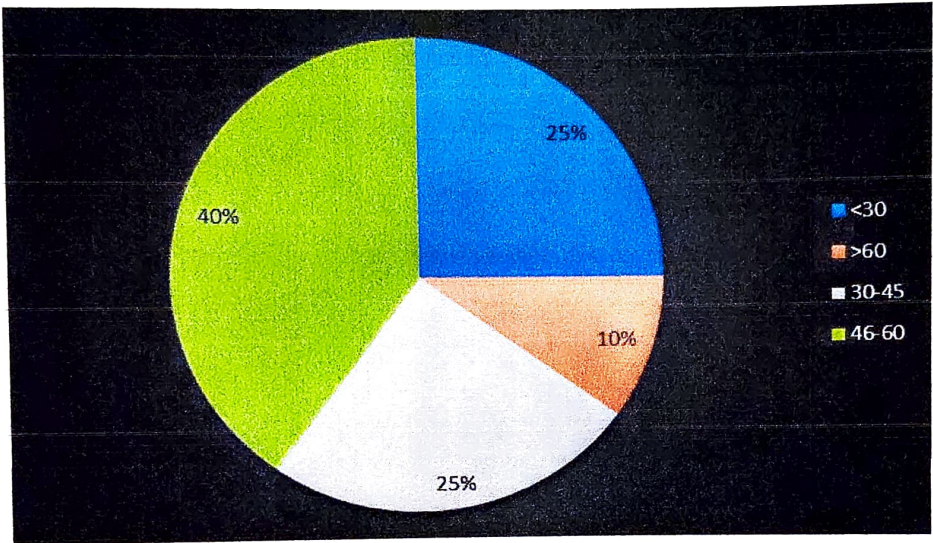


CONCLUSION:

- Among the people who have spent additional amount even after benefiting by Ayushman Bharat scheme were Cardiac patient.

Table 5: Age wise distribution of Diseases Count

Age	Diseases Count
<30	5
30-45	5
46-60	8
>60	2

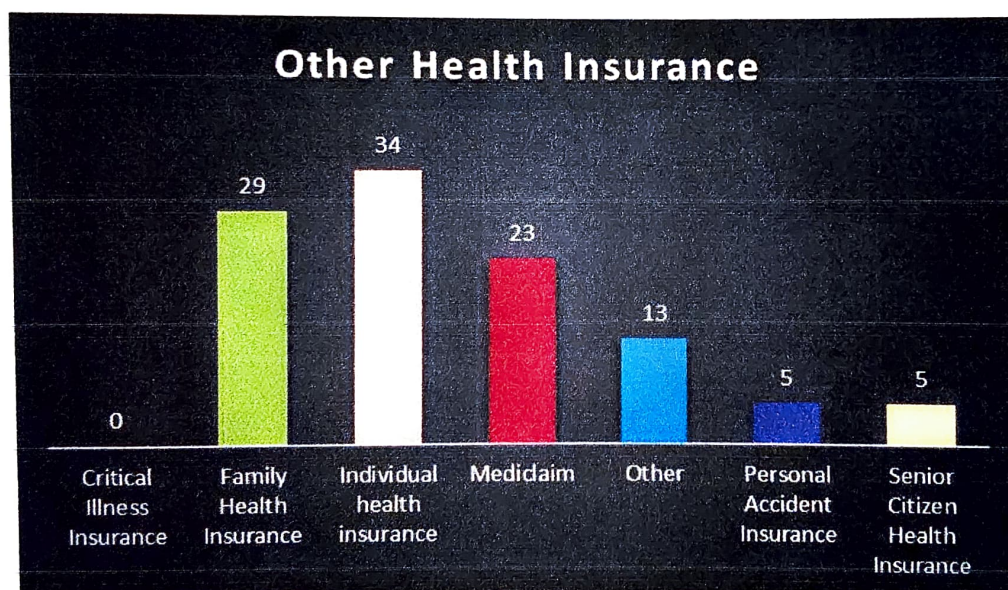


CONCLUSION:

Majority of diseases can be seen in the age group of 45-60

Table6: **People with other health insurance**

Insurance type	Ambap	Barve	Savarde
Critical Illness Insurance	0	0	0
Family Health Insurance	19	0	10
Individual health insurance	14	17	3
Mediclaim	13	0	10
Other	1	12	0
Personal Accident Insurance	2	1	2
Senior Citizen Health Insurance	2	1	2

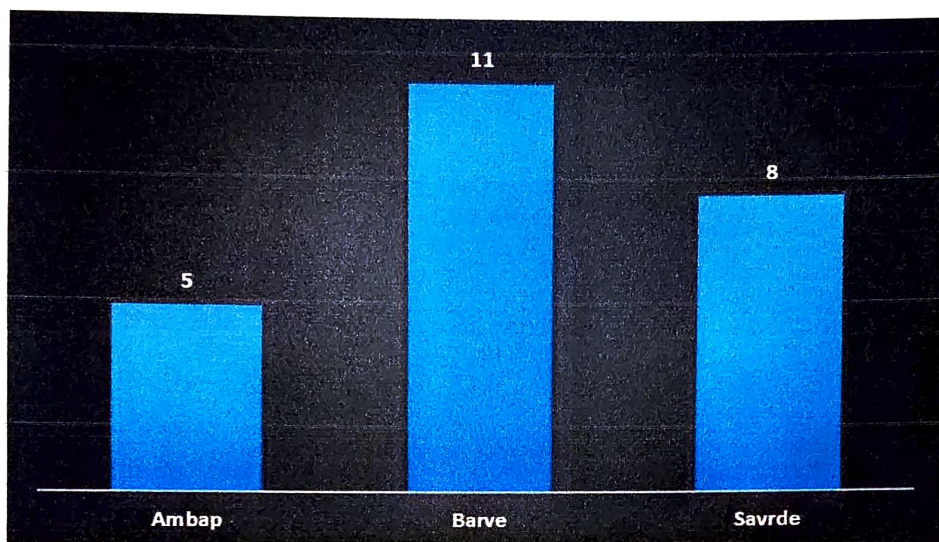


CONCLUSION:

- People with Individual Health Insurance are more as compared to other health insurance

Table7: **Utilization of Ayushman Bharat Scheme**

Villages	Peoples having health card and other health insurance
Ambap	5
Barve	11
Savrde	8



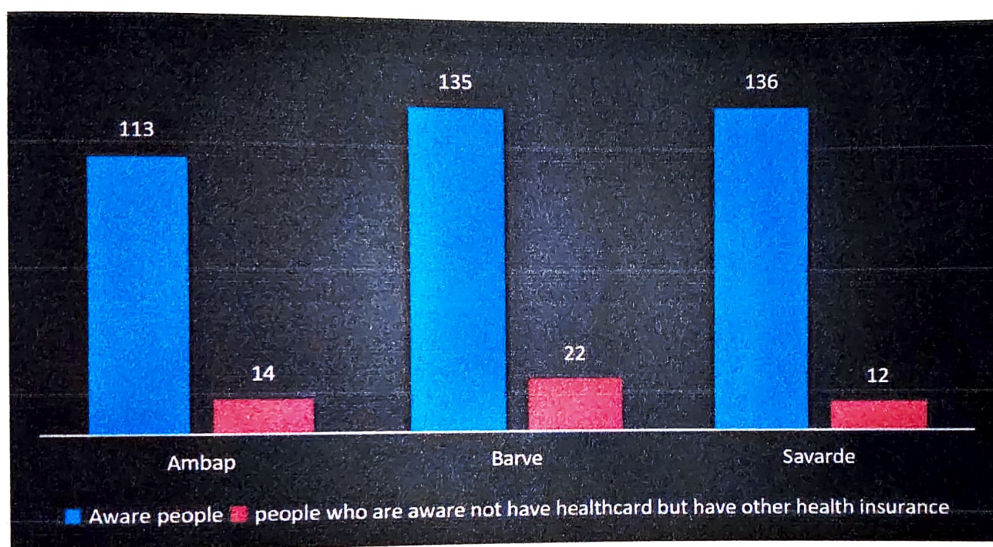
The proportion of utilization of ABS in Ambap 10% , Barve 35% and Savarde 30%

CONCLUSION:

- Persons in Ambap having insurance are less interested to utilize Ayushman Bharat Scheme.

Table8: **Aware people with other health insurance not having health card**

Villages	Aware people	people who are aware not have health card but have other health insurance
Ambap	113	14
Barve	135	22
Savarde	136	12

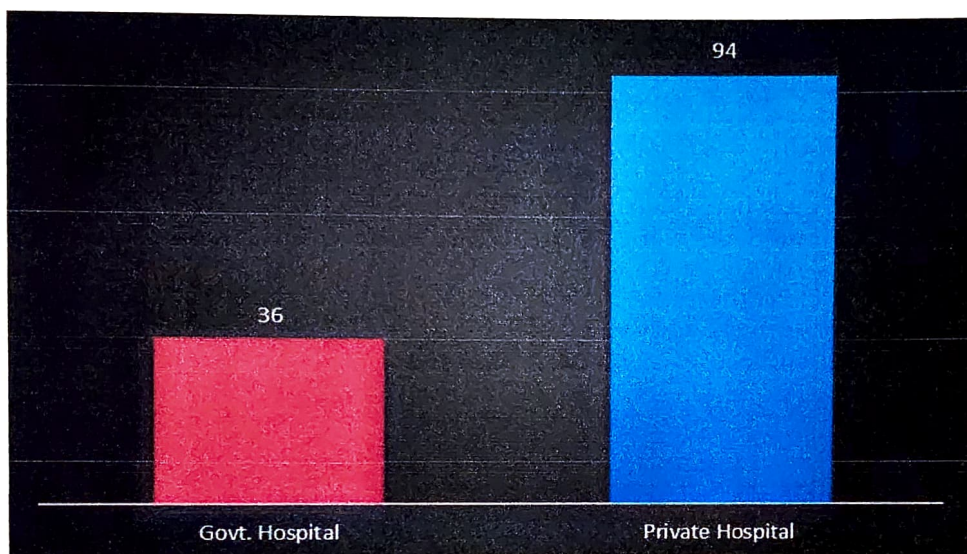


CONCLUSION:

This graph shows number of people who are aware but do not have health card because they have other health insurance.

Table9: **Beneficiaries getting the benefits from Private vs Govt. hospital**

Villages	Private Hospital	Govt Hospital
Ambap	32	9
Barve	2	1
Savarde	13	8



CONCLUSION :

- From the people who have benefited the scheme, most of them have opted for private hospitals.

CONCLUSION

- The awareness among people in Savarde and Barve villages (above 90%) is more as compared to Ambap.
- It is observed that the percentage of health card registration is high (above 70%) in Barve and Savarde villages as compared to Ambap
- Among the people who have spent additional amount even after benefiting by Ayushman Bharat scheme were Cardiac patient.
- Majority of diseases can be seen in the age group of 45-60
- People with Individual Health Insurance are more as compared to other health insurance
- Persons in Ambap having insurance are less interested to utilize Ayushman Bharat Scheme.
- People prefer visiting private hospitals than government for diagnosis and treatment.

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- ◆ https://www.researchgate.net/publication/326567367_Ayushman_Bharat_Yojana_a_memorable_health_initiative_for_Indians
- ◆ <https://www.mha.gov.in/MHA1/Par2017/pdfs/par2022-pdfs/RS30032022/3115.pdf>

Questionnaire:

Q.1 AGE GROUP:

1. <30
2. 30-45
3. 45-60
4. >60

Q.2 GENDER:

Q.3 CATEGORY:

1. GENERAL
2. OBC
3. SC
4. ST
5. OTHER

Q.4 NUMBER OF MEMBERS IN FAMILY:

MALE:

FEMALE:

Q.5 OCCUPATION:

1. GOVERNMENT EMPLOYEE
2. NON GOVERNMENT EMPLOYEE
3. AGRICULTURE
4. SELF EMPLOYED OTHER THAN AGRICULTURE
5. STUDENT
6. HOMEMAKER
7. RETIRED
8. UNEMPLOYED
9. OTHER

Q.6 ARE YOU AWARE ABOUT AYUSHMAN BHARAT SCHEME?

1. YES
2. NO

Q.7 DO YOU HAVE AYUSHMAN BHARAT HEALTH CARD?

1. YES
2. NO

Q.8 HOW MANY MEMBERS IN YOUR FAMILY HAVE AYUSHMAN BHARAT HEALTH CARD?

Q.9 HAVE YOU OR ANYONE IN YOUR FAMILY EVER AVAILED BENEFITS UNDER THE AYUSHMAN BHARAT SCHEME?

1. YES 2. NO

Q.10 IF YES THEN, GOT THE BENEFIT OF ABOVE MENTIONED SCHEME FROM WHICH HOSPITAL?

1. PRIVATE
2. GOVT

Q.11 IF YOU HAVE GOT THE BENEFIT FROM ABOVE SCHEME THEN THE CONDITION WAS

1. MEDICAL
2. SURGICAL
3. BOTH

Q.12 DID YOU FACE ANY CHALLENGES OR DIFFICULTIES WHILE AVAILING BENEFITS UNDER THE SCHEME?

1. YES
2. NO

Q.13 IF YES THEN, WHICH DIFFICULTIES DID YOU FACE?

1. HOSPITAL DID NOT RESPECT PATIENT HAVING CARD BELIEVING THAT THEY WERE AVAILING MEDICAL CARE FREE OF COST
2. NOT BEING ELIGIBLE FOR HEALTH COVER
3. SERVICES SUCH AS COSMETIC SURGERY , FERTILITY TREATMENTS, ORGAN TRANSPLANT ARE EXCLUDED FROM THE SCHEME
4. DIFFICULTIES IN UNDERSTANDING THE BASIC FACT OF CARD AND OPT FOR SEEKING MEDICAL CARE WITHOUT THE CARD
5. OTHER

Q.14 ADDITIONAL AMOUNT SPENT EVEN AFTER AVAILING AYUSHMAN BHARAT SCHEME

1. YES 2. NO

Q.15 IF YES THEN SPECIFY THE DISEASES OR ILLNESS

1. CATARACT SURGERY
2. HEART DISEASES
3. ARTERY BYPASS
4. KIDNEY DISEASES
5. LIVER RELATED
6. OTHER

Q.16 DO YOU HAVE OTHER HEALTH INSURANCE?

1. YES 2. NO

Q.17 SELECT OTHER HEALTH INSURANCE YOU HAVE

1. INDIVIDUAL HEALTH INSURANCE
2. FAMILY HEALTH INSURANCE
3. CRITICAL ILLNESS INSURANCE
4. SENIOR CITIZEN HEALTH INSURANCE
5. PERSONAL ACCIDENT INSURANCE
6. MEDICLAIM
7. OTHER

Q.18 HOW SATISFIED ARE YOU WITH OVERALL PERFORMANCE OF AYUSHMAN BHARAT SCHEME?

1. VERY SATISFIED
2. SATISFIED
3. NEUTRAL
4. DISSATISFIED
5. VERY DISSATISFIED

Q.19 HOW LIKELY ARE YOU TO RECOMMEND THIS SCHEME TO OTHERS?

1. VERY LIKELY
2. SOMEWHAT LIKELY
3. NEUTRAL
4. VERY UNLIKELY

Q.20 IS THERE ANY REQUIREMENT FOR IMPROVEMENT IN THE IMPLEMENTATION OF THE SCHEME?

1. YES 2.NO

Q.21 IF YES, WHAT IMPROVEMENTS DO YOU SUGGEST?

1. QUALITY ASSURANCE
2. IMPROVE AFFORDABILITY AND ACCESSIBILITY
3. ESTABLISH A ROBUST GRIEVANCE REDRESSAL SYSTEM AND A CALL CENTER FOR BENEFICIARY EMPOWERMENT AND FEEDBACK
4. CONNECT PATIENT MANAGEMENT SYSTEM AND ROBUST IT SYSTEM
5. CREATE AWARENESS
6. OTHER

WAY FORWARD

The effort put into the early phase between the original idea to launch a nationwide health insurance scheme that would change the game for India's millions who live without affordable, quality healthcare was a primary reason for the immediate success of PM-JAY. Many experiences had challenges and opportunities within that effort, so it was a journey with several stories to tell. The PMJAY as a scheme was designed and rolled out based on the convergence between centre and state. This was a factor that contributed to the scheme's success in terms of state-level acceptability, uptake and utilisation over the last few years between 2018 and 2023.

It is well-understood and acknowledged that PM-JAY takes India forward in its journey towards UHC, but there is little doubt that much else needs to be done. But the path chosen to design and launch PM-JAY holds the promise of becoming a global benchmark. Even the creation of the NHA has been seen as in line with global standard practice, and this could be a major aspect of India's ongoing public health system reform and the drive for UHC. This is why this narrative is critical for key stakeholders throughout the world. Also, continued knowledge exchange and management between countries around the world can significantly contribute to the growth of this pan-Indian health insurance scheme. Establishing a global knowledge repository of health insurance experiences could be of great value.

With the last few years, India has been presented with a massive window of opportunity to tangibly shift the goalpost in terms of healthcare service delivery in India and address the health burden millions of Indians carry each day.