



Tuticorin 06.06.2018

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Tuticorin 628 002

Tamilnadu - India

# Acute Medicine Physician

### Chairman

#### **Commonwealth Medical Association Trust, UK**

Founder Chairman CHPA,UK
Past President CMA, UK
Past National President IMA, India
DR. B C Roy National Awardee
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www.healthy-india.net

To Shri.Narendra Modi Ji, Honourable Prime Minister, Government of India, India

Sub: Ayushman Bharat Health Scheme

Respected Sir,

Warm Season Greetings

I am happy to learn your keen interest to protect the Health of Indians especially below poverty line Citizen & also to curb the out of Pocket Healthcare Expenses.

The proposed National Health Protection Scheme will benefit nearly 50% of Indians, the largest scheme in the world.

Congratulations Sir.

As a Health Providing Physician over 42 years & an active leader of Indian Medical Association & Commonwealth Medical Association I very much welcome & support this NHPS.

My only anxiety is Sir, this Scheme should reach to the Middle class & Poor of our Nation is the real sense you are visualizing.

Upon analyzing the scheme I feel certain finetuning is needed to realize your vision as given below.

Healthcare in our country is provided by Corporate Tertiary Care Centers upto 10-20% only, that is the need. The 80% Healthcare is through Small & Medium size

Hospitals. They are the lifeliner of Healthcare & only they reach to Citizen in Tier two, three cities & in nearby villages.

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Achievement





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Small & Medium Hospitals interests should be safeguarded so that the NHPS will really prove to be the best in the World & Health Indices of India will certainly raise to equate those of Developed Nations.

Many of your thoughts on Healthcare expenditure are based on large spending in Corporate Hospitals. That is why you are upset with Health providers of India what I learnt from your statement in London in April 2018

To offer affordable & accessible Healthcare to the poor you are keen in linking Modern Medicine with AYUSH System by permitting AYUSH, Middle men & Health Services Staff to prescribe Modern Medicine Drugs through National Medical Commission Bill 2018. This will not serve the purpose rather go against by creating wrong drug exhibition, complications & Drug resistance.

We all agree Sir AYUSH is Indian's Pride. Let us grow Indigenous System & take it forward Globally. Let Modern Medicine & AYUSH grow parallelly but not tangentially. This will kill both systems & Health of the Nation. Sameway this Noble NHPS should not also go negative.

### **Issues & Suggestions:**

- 1. Package Costs of the Scheme offered to the Hospital & Nursing Homes:
- In any Procedure the following costs are involved:
- a) Surgeon / Obstetrician
- b) Anesthetist
- c) Staffs
- d) Operation theatre
- e) Equipments
- f) Drug, oxygen, Consumables, etc
- g) Room services with Nursing services, etc
- h) Diet

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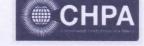






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In todays climate of Clinical Establishment Act & Minimal Wages Act, Quality Accreditation (NABH etc) & commercial, electrical & water charges cost to the Hospital is very tight like the fuel cost. Offering very low cost will kill this Scheme; lead to back door collection of charges will happen to increase the Negativity between Doctors, Patients & Governments.

Let us not do it. Let us do a cost working with expert team & offer the Health at affordable cost to the Hospital so that your Dream will really come true.

The costings performed by Tamilnadu & Telengana IMA Team may be a guideline. CGHS charges may be also the basis which has accepted all over India.

This Scheme must delink Hospitals & Professional Services from Drugs, consumables, implants which can be supplied by Government as per actual.

This NHPS Scheme must offer separate packages for complications during procedures, Revised surgeries, followup visits, etc

### 2. Administration of the Scheme

I am learning it will be done through Insurances to reduce the Administration Burden to the Government. But this will engulf 30% of this cost. By avoiding Insurances intermediaries the cost offered to Hospitals can be increased & make this NHPS successful.

Insurance model has to be superseded by a Charitable Trust Model.

Alternatively implementing Agency can be National Health Mission linking with Union & States Health Ministries as the funding is from Both sides.

Indian Medical Association through its Hospital Board of India & with its wings in all States of India can also offer support, Sir.

## 3. Approval & Disbursement of Funds to Healthcare Provider

Approval must be available 24 hrs with Helpline & Emergency immediate & Regular 24 hrs should be the timeline.

Disbursement must be within Two weeks of receiving all Documents. Every Process must be online.

Annual 20% Revision of the cost is mandatory.

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## 4. Hospital Empanelment

Small & Medium Hospitals must be enrolled based on minimum criteria with respect to Infrastructure, Manpower, etc.

Quality need not be compromised.

Indian Medical Association Hospital Board of India can support to Accredidate rather than NABH for Small & Medium Hospitals. NABH can be applied for larger Corporate Hospitals.

Indian Medical Association is ready to support at all levels including Empanelment, Package fixation, Accreditation & grievances redressal, etc.

## 5. Primary Care

As any other Scheme NHPS is also silent in Primary Care which is needed for 100% of the Population. Rural Primary Care you may take care of through wellness centers in Rural Areas. Urban Primary Care needs to be taken care of in NHPS.

6. NHPS should be considered under the category of services and must be exempted from Income Tax payments

Me, leaders of Indian Medical Association are always at your service to make this Himalayan Health Service task to reach to the Citizen of India & creating a Healthy Developed India.

Confident of your understanding & action, Sir.

Thanking you Sir,

Regards & Respects,

Prof.Dr.S. Arulrhaj

Cc: Shri JP Nadda, Honourable Health Minister

Vice Chairman, NITI Aayog National President, IMA Secretary General, IMA

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