

The [Ayushman Bharat](#) Mission, apart from being a tertiary health care system, will also be a job-spinner.

Indu Bhushan, chief executive officer of the [Ayushman Bharat](#) — [National Health Protection Scheme](#) (NHPS), says 100,000 [jobs](#) will be created.

Experts say as hospitals start setting up infrastructure for the scheme, [employment](#) generation will be an adjunct of that.

Not just that, claim management support at trusts and insurance agencies will help create [jobs](#). Meanwhile, doctors and big hospitals are unhappy with the rates of treatment proposed in the scheme.

The [Indian Medical Association](#) (IMA) has criticised the scheme over the use of funds allocated to it and the reimbursement rates.

They say the package rates, set by the government, will not cover even 30 per cent of the cost of the procedure and hospitals will not be able to follow the procedure without “seriously compromising patient safety”, as mentioned in their statement.

India’s large private hospitals have raised concerns over the procedure rates under the scheme and asked the government to reconsider the treatment package rates, saying they would be unviable.

On the other hand, small private hospitals have shown an interest in participating in the NHPS at these rates, according to Bhushan.

The scheme aims to provide Rs 500,000 health protection cover to around 100 million poor families. The scheme will replace the [Rashtriya Swasthya Bima Yojana](#) (RSBY), which provides cover up to Rs 30,000.

While initially Aadhaar will not be compulsory for identification under the scheme, in its later phase it will be necessary. Families availing of the scheme need to make sure they have Aadhaar registration by the time of their second visit to health care facilities, according to Bhushan.

States can use the ration card, apart from the socio-economic caste census, or SECC, data, to identify beneficiaries.

Bhushan says in rural areas, 85 per cent of the beneficiaries could be identified using the [SECC](#) data while in urban areas 50-60 per cent have been identified.

Bhushan says states, not insurance companies, will enrol beneficiaries, unlike in the case of the [RSBY](#). He says this is one of the lessons the government has learnt from the [RSBY](#).

“Insurance companies were keen to enrol a person under the scheme but were reluctant to process claims. It was advantageous for them to enrol beneficiaries but disadvantageous to pay the claim. So now states will enrol people.”