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# Arogya Karnataka: Private hospitals raise questions on bills beyond ₹1.5L

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**Bengaluru:** The universal health coverage scheme —Arogya Karnataka — has been launched but several questions remain unanswered. As per the government order, the state will bear costs up to Rs 1.5 lakh and an additional Rs 50,000 per family per annum, and the rest must be paid by the patient. However, the private sector has raised financial concerns and questioned the rider that accompanies the scheme.

"Patients' families will be left in the lurch as they can't be beneficiaries of Arogya Karnataka if they are availing any other scheme. If the bill exceeds Rs 1.5 lakh, the patient will end up paying from his/her pocket. How is it a cashless health-care facility," asked a doctor from the Private Hospital and Nursing Homes' Association (PHANA).

Though the scheme accommodates everyone, notwithstanding their financial status, it comes with

## What about Centre's ₹5L insurance scheme?

Doctors are also wondering how the state will incorporate the universal health insurance coverage of Rs 5 lakh per family/annum announced in the Union Budget 2018. "We welcome the state's move but are still don't know how the Centre's scheme and Arogya Karnataka will be integrated," said Dr Jayanna, president-elect, PHANA.

The state government has to contribute 40% financial support for the central scheme. "Is Karnataka taking

up both the schemes? Rs 5 lakh is thrice the amount offered by Arogya Karnataka," said a doctor.

N Tabassum Abroo, executive director, Suvarna Arogya Suraksha Trust which is implementing the scheme, said no communication has been received from the Centre on its insurance scheme. "As of now, it has only been announcement in the Union budget. When it is rolled out, we will take a call," said Abroo.



the rider that the patient has to first avail treatment at a government hospital and can be referred to a private-empanelled hospital only if the treatment is unavailable at the government facility.

Dr Nagendra Swamy S C, chief coordinator, Federation of Healthcare providers (FHP), feels the referral system will only add to the

chaos. "If all was well with government hospitals, why would people go to private ones? Getting a referral letter from government hospital authorities to shift the patient to an empanelled private hospital will be easier said than done and could lead to corruption," he said.

He added the scheme covers only surgical intervention whereas in

## LACKS REGULATION

The government order (GO) reads that empanelled hospitals can charge general patients (APL category) as per publicly disclosed rates. However, there is no mention of what penalty will be levied on hospitals if the charges are not as per the display. The 30% reimbursement for patients is only a bait to lure them to private hospitals. But the GO lacks regulation for the 70% of the bill amount the patient pays from her/his pocket

Dr Sylvia Karpagam | PUBLIC HEALTH EXPERT

many cases like dengue, treatment require only medical management. "The scheme will neither help patients nor hospitals," he said. Health-sector leaders said they will meet officials once the government communicates to private hospitals about the scheme. Health cards will be issued at 10 select government hospitals from Monday.



# Pvt hospitals to continue services under existing insurance schemes

**SURAKSHA P** @Bengaluru

A pivotal area of the universal health coverage scheme 'Arogya Karnataka' that will come into force on Monday is the transition to be made by existing private hospitals empanelled with Suvarna Arogya Suraksha Trust (the government organisation that will run the scheme).

What happens to patients who approach them from today? Will they continue providing services as per existing procedure rates till they apply for empanelment again under Arogya Karnataka?

Ajay Seth, Additional Chief Secretary, Department of Health and Family Welfare, told The New Indian Express, "For each of the existing schemes, a transition plan has been provided. All Rashtriya Swasthya Bima Yojana hospitals are available till March 31. All Yashasvini hospitals are available till June 30. All Vajpayee Arogyashree hospitals are available till May 31. Within those dates, fresh empanelment for Arogya Karnataka shall be taken up starting March 5."

Currently, there are 164 private hospitals empanelled with Vajpayee Arogyashree Scheme (VAS) meant for Below Poverty Line patients. There are only 20 government hospitals empanelled for VAS. This raised questions about bed strength.

Dr Madan Gaekwad, vice-president, Sagar Hospitals, said, "The price fixation committee has not been formed yet. There is no notification on who the members are and what the prices of procedures will be. Since a patient



has to go to a government hospital and only then referred to a private hospital, they can't come here directly. This will probably reduce the number of patients we get through insurance. Instead of saying there is no facility they can always say beds are full and that the capacity is full, and refer the patients here."

"We will continue to offer services under existing procedure rates. We expect the government to extend the MoU. If it is an emergency case, we will treat them; if it is an elective procedure we will ask for a referral letter from a government hospital," he added.

Dr Govindaiah Yatheesh, medical superintendent, Apollo Hospitals, said, "For everything it is not feasible to get a referral letter from government hospital. The Centre is offering a much higher coverage at ₹5 lakh per family as against these state's ₹1.5 lakh and it does not need referral letter from government hospital. We have to follow what the state prescribes under the rules though."