

# Awareness about the state health insurance scheme among rural population in Raigad district of Maharashtra

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## Abstract

Health systems are undergoing profound change in many countries. Various health insurance scheme have introduced to lessen the burden of out of pocket expenditure. Pre-payment of small amount by individuals can finance health care costs of enrolled members later if required. It minimizes the uncertainty of both illness and cost of treatment. There are various insurance schemes available in India. For example, ESIS, Central Government Health Scheme (CGHS), Rashtriya Swasthya Bima Yojna (RSBY), etc. All schemes have various benefits and different beneficiaries. Some States have also established local health insurance arrangements for people e.g. Rajiv Aarogyasri in Andhra Pradesh, Vajpayee Arogyashree in Karnataka. Like this, Rajiv Gandhi Jeevandayee Arogya Yojana (RGJAY) scheme is state health insurance scheme for poor which was implemented in 2012 by Government of Maharashtra. This study is aimed to assess the awareness about the scheme in the rural areas. In this study, 2 villages were selected as study area which is nearer to the hospital which is empanelled under Rajiv Gandhi Jeevandayee Arogya Yojana (RGJAY). Present Study shows that maximum participants were male. Only 37% people were aware about this scheme and media is the major source of awareness. The participants who were aware and have RGJAY card, those participants only taken benefit of scheme. When asked participants about willingness to enrol under scheme, about half of them ready for it. It showed that if people know about scheme, they will take maximum benefit of health insurance scheme.


**Key Words:** awareness, Rajiv Gandhi Jeevandayee Arogya Yojana (RGJAY), Maharashtra, health insurance scheme

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## INTRODUCTION

Illness is a threat for people which are living in below poverty line. When there is need to seek for a treatment, they ignore it often because of fear of loss of wages. Also there is lack of information and awareness about government schemes. They usually wait till problem become very serious. So that person becomes bedridden and seeks health care facilities at last stage when it is too late. It may lead to suffering and death. Even if they go

for treatment, most of the time they have to spend all their savings to get quality health care or has to sale their assets. Even in general, people above poverty line also faces burden of expenses occurred during period of illness. Health insurance is a better option for a people to cope with high expenses and to get quality health care.<sup>1</sup> Health insurance is in simple words 'an individual or group who is purchasing health care coverage in advance by paying a fee called premium'. It is an early arrangement to avoid payment out of pocket or to reduce cost when there is time occurred to seek health care facilities. In India, as far as the stage of development of health insurance is concerned, it is in embryonic stage. As the population of India are not much aware about health insurance schemes. So, very few people are taking advantages of it. There is need to take some steps and these shortcomings need to be addressed so that every poor or rich, urban or rural person should take advantages of health insurance scheme. On other hand, the people who are aware about health insurance scheme are not actively participating in it because of one or more reason

related to policies. So it makes difficult to bring health insurance in stage of expansion. Besides this, very few insurance companies are actively providing benefits to people especially private insurer and thereby making it difficult to build trust and belief in population and that also in low income group.<sup>2</sup> It is seen that health insurance can make health care more accessible and it help to reduce the huge expenditure on health.<sup>3</sup> Various studies also revealed free access to health care facilities reduces the out-of-pocket expenditure on health care delivery system.<sup>4,5,6</sup> A study of 59 countries found lack of health insurance to be one of the main causes for catastrophic payments, which defined as expenditure for health care exceeding some threshold proportion of an income measure.<sup>7,8</sup>

The Rajiv Gandhi Jeevandayee Arogya Yojana (RGJAY) scheme offered by the Maharashtra government is a good health insurance option for poor families. In Maharashtra, state government launched the Rajiv Gandhi Jeevandayee Arogya Yojana (RGJAY) in 2nd July 2012. In this scheme, below poverty line and above poverty line categories and Antyodaya and Annapurna ration cards holders with annual income of less than Rs. 1 lakh families are covered. It is a cashless medical insurance scheme for the poor people, across the state. The Yojana, which is being run in a public private partnership (PPP) mode with the National Insurance Company. The Rajiv Gandhi Jeevandayee Arogya Yojana (RGJAY) would be implemented throughout the state of Maharashtra in phased manner for a period of 3 years.. The aim of the government is to provide quality care for low income families and still prevent them for getting impoverished on account of out of pocket spending on health. The objective of the Rajiv Gandhi Jeevandayee Arogya Yojana (RGJAY) is to improve access of Below Poverty Line (BPL) and Above Poverty Line (APL) families (excluding White Card Holders as defined by Civil Supplies Department) to quality medical care for identified specialty services requiring hospitalization for surgeries and therapies or consultations through an identified network of health care providers. Scheme would provide 972 surgeries/ therapies/ procedures along with 121 follow up packages in following 30 identified specialized categories.<sup>9</sup> This scheme could be a way of improving quality medical care and removing the financial barriers for the poor

## OBJECTIVES

To assess the awareness about Rajiv Gandhi Jeevandayee Arogya Yojana in rural community of Raigad district, Maharashtra.

## METHODOLOGY

This is cross sectional study conducted for a period of 6 months from January 2013 to June 2013. Permission to conduct the study and ethical clearance was obtained from the Institutional Ethics Committee. Study was conducted in 2 villages Kalamboli and Asudgaon which comes under the administrative body of Gram Panchayat of Kalamboli and Asudgaon respectively in Raigad District, Maharashtra.

These 2 villages are catchment area within 10 km circumference surrounding the MGM hospital. Total 200 households 100 from Kalamboli and 100 from Asudgaon was selected by systematic sampling method. A pre-tested questionnaire was filled up by taking interview of the elder member of the household who were available at the time of survey. This aims to assess the reach of RGJAY in the vicinity of the hospital. Participation in this study was voluntary. Data was analysed using SPSS 17.0. Further statistical analysis was performed with the help of statistical tests such as chi-square test. The level of significance was set at 5%. All p value less than 0.05 will be treated as significance.

**Exclusion criteria:** Household members who were not willing to participate in the study.

## RESULT

In this study, 75% responded were male of age group 40-60 years and only 25 % were female. Mean age was 43.22 years.

In Kalamboli village 52% people were aware about RGJAY scheme, whereas in Asudgaon village only 22% people were aware about RGJAY Scheme. Overall only 37% people were aware about this scheme.

**Table 1: Source of information (%)**

Media	21.0
Friends/Relatives	8.0
Anganwadi worker	5.0
Grampanchayat	3.0
Not aware	63.0
<b>Total</b>	<b>100.0</b>

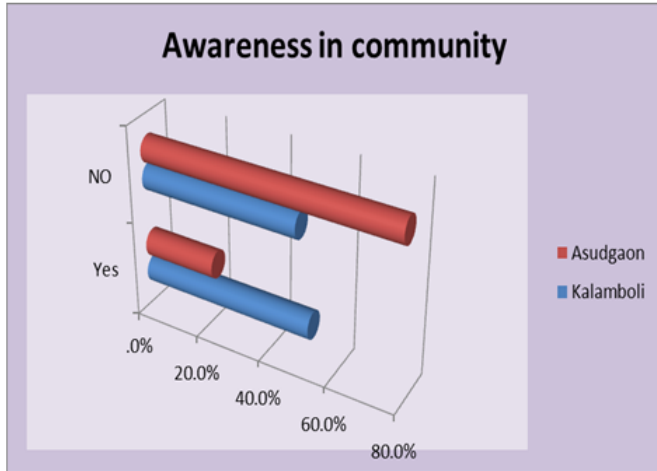
According to graph 2, In Kalamboli village 44% people had RGJAY card and in Asudgaon village 30% people had RGJAY card. Overall 37% people had RGJAY card.

**Table 2: Taken Benefit Under RGJAY (%)**

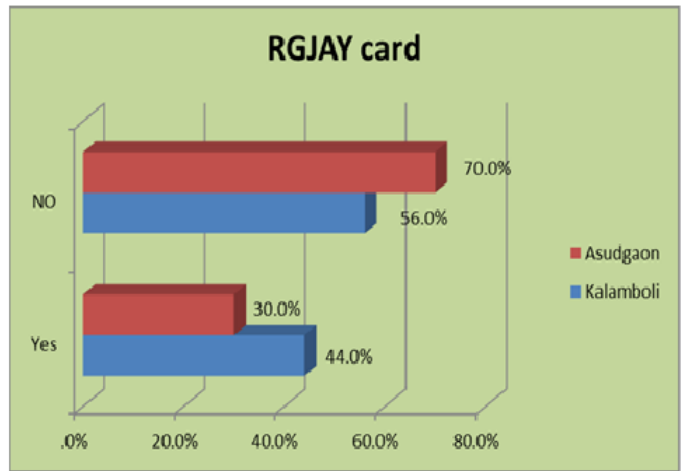
Yes	74 (37%)
No	126 (63%)
<b>Total</b>	<b>200</b>

**Table 3: Willing to Enrol for RGJAY card (%) (n=126)**

Yes	87.3%
No	12.7%



Graph 1: Awareness in the community



Graph 2: RGJAY card holder in the community

In graph 1, Out of them (n= 74), 58.33% received information about RGJAY from Media. 45 % people were aware that MGM hospital is empanelled for RGJAY. In graph 2, only 37% participants had taken benefit under RGJAY. Those people who do not have card 87.3% of them were willing to enrol for card.

## DISCUSSION

The financing of curative health services in Maharashtra is mixed. A major share goes from the out of pocket expenditure for the curative services. The expenditure on the preventive and public health activities is born by the publicly financed systems. Other than direct payments health insurance schemes, both public and private schemes are seen in Maharashtra. Maharashtra is also implementing various innovative mechanisms to finance curative health services like ESIS ( Employees State Insurance Scheme), Central Government Health Scheme (CGHS), Jeevandayee Arogya Yojana, RashtriyaSwasthyaBimaYojana, Rajeev Gandhi Jeevandayee Arogya Yojana (RGJAY) and Users fee in public Hospitals. RGJAY is currently a best option to BPL participants for curative services in Maharashtra. The purpose of this scheme to avail health facilities free of cost to poor people to improve the quality of care.

In this study, participants were mostly male (75%) and 25% female. Study of Bawa SK, also reported that majority of participants were male (78.30%) and 21.7% were female.<sup>2</sup> Study of Reshmi B *et al* showed 72.1% were male and 27.9% were female.<sup>10</sup>

Most of the participants were from age group 40-60 years, whereas in study of Bawa SK most of participants from the age group 30-40 years (37.3%)<sup>2</sup> and in study of Reshmi B *et al* were in the age group 20-29 (30.8%).<sup>10</sup> Overall in present study only 37% people were aware about this scheme. Similarly study done in coastal Karnataka revealed 38% participants were aware about health insurance scheme.<sup>10</sup> But in study of Jaipur, Rajasthan showed 43.4% were aware.<sup>11</sup>

Most of them who were aware about scheme received information about RGJAY from media. So the media plays important role to increase awareness in community. Like in other study carried out in Manglore, Karnataka revealed that 45% participants agreed that media is main source of information.<sup>10</sup>

In present study, 45% people were aware that MGM hospital which is nearest empanelled hospital for RGJAY. As the area where study conducted is the catchment area of Hospital, but still people not aware that the Hospital is empanelled for health insurance scheme. This shows that the government has to take vigorous effort to make people aware.

Overall 37% people had RGJAY card and they had taken benefit under RGJAY. It shows that the participants who were aware and have RGJAY card, those participants only taken benefit of scheme. This low awareness and enrolment shows that RGJAY still not reached in the community.

Those people who do not have card half of them were willing to enrol for card. Similarly, in Geena Mary S *et al* study 42% non-card user were willing to subscribe under hospital based health insurance scheme.<sup>12</sup>

## CONCLUSION

Present study revealed that people will take maximum benefit of scheme only when they will know about the scheme and benefits of scheme. For this, as a health person we have to do propaganda in the community through health camps, posters, advertisement, etc.

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