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Rashtriya Swasthya Bima Yojna – Ajeevika: Most Important Topic for 2021 Competitive Exams

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Background

- The workers in the unorganized sector constitute about 93 % of the total work force in the country. The Government has been implementing some social security measures for certain occupational groups but the coverage is miniscule. Majority of the workers are still without any social security coverage. Recognizing the need for providing social security to these workers, the Central Government has introduced a Bill in the Parliament.
- One of the major insecurities for workers in the unorganized sector is the frequent incidences of illness and need for medical care & hospitalization of such workers & their family members.
- Despite the expansion in the health facilities, illness remains one of the most prevalent causes of human deprivation in India. It has been clearly recognized that health insurance is one way of providing protection to poor households against the risk of health spending leading to poverty.
- However, most efforts to provide health insurance in the past have faced difficulties in both design and implementation. The poor are unable or unwilling to take up health insurance because of its cost, or lack of perceived benefits. Organizing & administering health insurance, especially in rural areas, is also difficult.

Objective

- Recognizing the diversity with regard to public health infrastructure, socio -economic conditions & the administrative network, the health insurance scheme aims to facilitate launching of health insurance projects in all the districts of the States in a phased manner for BPL workers.

OBJECTIVES OF THE SCHEME

- To provide health insurance coverage to Unorganized Workers.
 - In Gujarat BPL-Rural & urban, NREGA workers, Railway porters, and BoC workers are covered
- Beneficiaries are entitled to get hospitalization coverage up to Rs. 30,000/-.
- Package rates for a large number of interventions (1090 Procedures) are fixed.
- Pre-existing conditions are covered.
- Five members of the family are covered.
- Newborn are covered as sixth member.
- Beneficiary pay Rs. 30/- as registration fee while Central (75%) & State (25%) Government pays the premium.
- Insurance Companies are selected through competitive bidding (e-tender).

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Salient Features

Funding Pattern

- Contribution by Government of India: 75 % of the estimated annual premium of ₹ 750, subject to a maximum of ₹ 565 per family per annum. The cost of smart card will be borne by the Central Government.
- Contribution by respective State Governments: 25 % of the annual premium, as well as any additional premium.
- The beneficiary would pay ₹ 30 per annum as registration/renewal fee.
- The administrative & other related cost of administering the scheme would be borne by the respective State Governments

Implementing Agency & Formulation of Projects

- The State Government while formulating the pilot project will determine the implementing agency on behalf of the State Government.

Eligibility

- Unorganized sector workers belonging to BPL category & their family members (a family unit of five) shall be the beneficiaries under the scheme.
- It will be the responsibility of the implementing agencies to verify the eligibility of the unorganized sector workers & his family members who are proposed to be benefited under the scheme.
- The beneficiaries will be issued smart cards for the purpose of identification.

Benefits

- The beneficiary shall be eligible for such in-patient health care insurance benefits as would be designed by the respective State Governments based on the requirement of the people/geographical area.
- However, the State Governments are advised to incorporate at least the following minimum benefits in the package/scheme:
 - The unorganized sector worker and his family (unit of five) will be covered. Total sum insured would be ₹ 30,000/- per family per annum on a family floater basis.
 - Cashless attendance to all covered ailments
 - Hospitalization expenses, taking care of most common illnesses with as little exclusion as possible
 - All pre- existing diseases to be covered
 - Transportation costs (actual with maximum limit of ₹ 100 per visit) within an overall limit of ₹ 1000.

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