

**Anyuta is the idea whose time has come.**

**India is on the cusp of change.**

Today we see Anyuta idea take shape in “The National Health Protection Scheme”. All it needs is the public-sector insurance companies sell it to the public on retail. In this regard we met with Mr. Alok Kumar and Dr. Dinesh Arora on February 20, 2018 at Nirman Bhavan, New Delhi and suggested that the “The National Health Protection Scheme” should be made available to anyone who wants to pay the full premium and buy. This will make it viable and take it pan India in one stroke.

**Anyuta Insurance TPA in Health Care is an IRDAI licensed TPA -17.**

Also told Mr. Alok Kumar and Dr. Dinesh Arora that the success of any Scheme is based on good administration by professionals who has the experience and clean image and background. Anyuta Insurance TPA in Health Care is an IRDAI licensed TPA -17 is one such organization that made SIPF Mediclaim a success.

**There is no free meal in this world.**

Poor do not want Charity just like the rich and famous.

- a. Poor want to be **Empowered** to pay for their Families Health Care needs.
- b. Poor want to be **Creditworthy** to excess small finance to expand their avenues of revenue generation and generate wealth for them and to the country.
- c. Poor want **Life and Family Group Insurance at low Premium high cover value, thus organize and secure them** to become Creditworthy, for the banks to lend money.

The governments get elected on these promises but really fulfil them, hence there are people without a single meal a day in India even after 70 years of independence.

**Anyuta is a beacon and not for a place in history**

We at Anyuta took our idea for India to the people in power and fame, people who matter. All of them appreciated and wanted us to reach it to the people. But then it requires people participation and the systems to work for the people. The health care laws are in place and so is the delivery and financing systems. But then there is corruption blocking the way. In our journey we met some great people. **India is in the cusp of change.**

**Dr. A.P.J. Kalam then the President of India**

I am happy to mention now that then the President of India, read a letter written to him and invited me to meet him to take it forward. When I met him at Bangalore, to my astonishment, realized that he was the common man`s President.

Subsequently I met Mr. C. K. Mishra, Secretary Health & Family Welfare, Ministry of Health & Family Welfare, Nirman Bhavan, New Delhi, on October 21, 2016, 9.30 am, at your Delhi office, Nirman Bhavan at the behest of the honorable Sushma Swaraj, (another brilliant person) to discuss about Anyuta Health Insurance Scheme and its implementation.

Since then things have changed in Indian Health Care financing and delivery system.

**i. Union government of India**

The government of India wants Health Insurance for all,irrespective of caste, creed or economic class. Hence the Union government has, on these lines, come out with a draft of the '**National Health Protection Scheme,**' wherein the poor will be given health assurance of up to Rs.1 lakh. This would work as a foundation for universal health coverage.

**ii. Action taken by the Government of India**

The Government of India has sought that Karnataka begin these projects in Mysuru and Raichur on a pilot basis. The scheme proposes secondary and tertiary care, wherein the state will bear 40% of the expenditure and the central government the rest”.

**iii. Action taken by the Government of Karnataka**

As per the Government of India the **Karnataka State** is merging all the existing health schemes to bring the beneficiaries under a single umbrella and to come out with Aadhaar card linked Single Unified Health Scheme.

We met Mrs. Shalini Rajneesh, principal secretary, department of health and family welfare, Karnataka State and discussed our project. She informed us that it would be discussed in the cabinet meeting. Things changed since.

Mrs. Shalini Rajneesh, principal secretary, department of health and family welfare, Karnataka State referred to the World Health Organization guidelines are to provide “**Universal Health Coverage**” to all, irrespective of caste, creed or economic class.

(The newspaper report “Aadhaar-linked cards for all under unified health scheme” Mrs. Reshma Ravishanker. DH News Service 12/02/2017.)

### Then came the Union Budget 2018 announcement

- a. **“The National Health Protection Scheme”** Premium at Rs. 1,082 per family per year for each health cover of Rs.5 lakh, for secondary and tertiary care hospitalization with an aim to cover 10 crore families, arrived at after informal discussions with actuaries.

### Karnataka State Budget 2018

- b. ‘Arogya Karnataka Yojana’ Universal Health coverage in line with the Union Budget 2018 The scheme will provide primary, secondary and tertiary health treatments to all the people of the state. Under the scheme, over 9,000 health and wellness centers would be set up by upgrading existing sub-centers for every 5,000 people in rural areas during the next seven years. A total budgetary allocation of Rs 6,645 crore was made for the health and family welfare department.

### Tipping point

The "tipping point" will arrive only when the State and Central Governments share the Premium of Rs.1500/- with the Family of 6 members at 40: 60: 40 ratios, resulting in Rs.600: Rs.450: Rs.450 respectively. This Premium of Rs.450 is a DAY`'s wage of a Farm worker and is certainly affordable. Then **you need Anyuta TPA – IRDAI -17 to lead to success.**

### Simply implement Anyuta Trust Proposal

Make the Insurance Companies to come out with a Family Group Health Insurance and call its **“Sabka Saath, Sabka Vikas”** health Policy, fix the Premium at Rs.1500 per family per year to cover Rs.5 lakhs on Floater and allow the people buy it. This will cover the middles and upper-class families without any burden on the State Exchequers.

### Reach every rupee`'s worth to the target group

As we all know that it is not the money that is allotted for the **“Social Security Schemes”** that brings joy to people`'s lives but it`'s hassle free execution to benefit them that matters. The fool proof methods, inbuilt checks and balances, transparency and accountability will reach every rupee`'s worth to the target group. The system should be totally digitized, and all financial transactions should be through the banking instruments to reach the benefits to every Indian rich or poor without pilferage and bureaucratic interference.

### Need Role models



For this to happen, one needs to have role models to lead them to it. We need dedicated people with integrity, immense knowledge and experience in the field to lead **“Social Security Schemes”** to success. **These people should act like the beacon and not for a place in history.**

### **Rich and famous, syphon country`s wealth with men in high places, power and influence**

As you are aware, the rich and the famous, syphon the system with the support of the men in high places with power and influence. India has seen the rich and famous like Mr. Mallya, Mr. Lalit Modi, Mr. Nirav Modi colluding with the men in high places with power and influence to syphon crores of public funds from the Banks with ease and when it come to light the Regulators and the Institutions brush it aside labeling it as the system failure.

### **Insurance segment and banks**

Things are not different in the Insurance segment. The systems have failed many times; there are many irregular payouts to bleed the institutions which resulted in steps to merge three Public Sector Insurance Companies into one. Huge Premiums were collected by the insurer year on year basis, but then show over Rs.10000 crores in losses. Where has the money gone? The insurer say that the hospitals have cheated but then the insurer has paid!

### **Make people Creditworthy by opening the avenues of revenue generation**

We have repeatedly written to the people who matter that poverty alleviation is only possible by making people creditworthy and secure for the banks to lend money and the Insurer can them Creditworthy and secure by organizing the unorganized sector, grouping them by providing Group Insurance.

During my meeting explained how we made SIPF Medclaim Policy of Rajasthan generate profits while providing quality care to the entire Government employees and their families at a Premium less than Rs.600 per year for 5 years. The Anyuta Universal Health Insurance Policy is a derivative of successful SIPF Medclaim Policy, time tested and managed by Anyuta TPA.

### **Reinventing the wheel?**

There is no point in reinventing the wheel. Just roll out SIPF Medclaim through Insurance Companies for anyone to buy paying the full Premium. Let the State or Central government pay for the rest. Important thing is it should be managed by Anyuta TPA which is licensed by IRDAI to produce the desired result. **Start at Karnataka right away and see the result.** Let the State have its own Schemes and the Center its own.



In Anyuta Scheme there is no burden on the State Exchequer and the poor. Win-win situation for all and is a game changer Health care bigger than green revolution. Insurance companies are ready to start and have written to me but need a group. All it needs is to sell Anyuta Policy on retail., they will have a huge volume. We will help you as Doctors, the TPA company owners with immense knowledge in building hospital, running them, networking hospitals, providing quality care to people, claim processing and settling them.