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Universal Health Scheme For 1.4 Cr Eligible Households In Karnataka

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Under the scheme, all facilities will be provided through 'Aadhar linked Universal Health Card' to beneficiaries categorized into A and B sections, Parliamentary Affairs Minister T B Jayachandra told reporters after a cabinet meeting.

Category A, with no contribution, include about 105 lakh priority households like-farmer households, teachers from aided schools, Anganwadi workers, hot mid-day meal workers, categories of unorganized labor, SC/ST; animal bite victims, media persons, members of co-operative societies and public servants.

The remaining households would be enrolled online with Aadhar details with Rs 300 contribution per person for rural areas and Rs 700 for urban areas, he said.

The scheme will be operational from November 1, 2017.

Jayachandra said the scheme calls for universal health care by way of primary health care, drugs and diagnostics, primary, secondary and tertiary health procedure in government hospitals, medical colleges, centers of excellence and private empaneled hospitals as per packaged rates.

Stating that all seven different health programs of the government would be clubbed into one, he said merger of these programs amounts to a total Rs 869.4 crore.

As doubts have been expressed over the scheme, the Health Minister has been directed to speak to departments concerned, including Finance, before issuing the order, he said.

Noting that in emergencies defined for both accidents, and medical/surgical emergencies, treatment can be provided at the nearest facility available, irrespective of Government or Private to ensure "Treatment first and Payment next", he said the rates would be applicable as per defined packages.

Further after stabilization of 48 hours the patient can be transferred to government/private hospital with required facilities for continued treatment.

The average expenditure is Rs 25,000, the minister added.

He also said that in addition 108, 104 helpline would support further free diagnostics; free drugs and dialysis, free blood units, platelets and components will be provided in government hospitals.