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Editorial

Ensure Not Insure....

The development of a nation was once measured by the per capita income. Its growth suggested that the country is progressing. The per capita income of a nation is calculated by dividing the Gross Domestic Product (GDP) of a country with population. But in a developing country like India where inequitable distribution of wealth is almost an axiom, the growth in GDP is only enjoyed by the meager percentage of the population. Thus the present school of economics has introduced the Quality of Life Index as the measure of wellbeing of all the citizens of a country from the capitalist to the proletariat class. The definition of the Physical Quality of Life Index (PQLI) is the measure of the quality of life or well-being of a country. The value is the average of three statistics: basic literacy rate, infant mortality rate, and life expectancy at age one. Now if we consider the QOL of various countries in the year 2021, Canada stands with 159.99. US stands with 166.98, Australia stands with 181.52 where as India stands with 104.52, a very discouraging and a staggering figure. The Niti Aayag Member (Health) has confessed that "India's overall spending on the health sector is low and the situation must be corrected"¹. Government in a democratic setup is for the people of the people and by the people. The statement however may seem to be a myth if we focus on the percentage of GDP spent by the government of India on health expenditure. India stands at 170 out of 188 countries in domestic general government health expenditure as a percentage of GDP, according to the Global Health Expenditure database 2016 of World Health Organization². The public expenditure on health as a percentage of GDP for 2017-18 was a mere 1.28 of GDP^{3,4}. (Fig-1) The government aims to raise the public health expenditure to 2.5 per cent of GDP at around 2025⁵. Let us compare the figure with the developed nations—According to the statistics presented on health care expenditure as part of GDP was for US 8.5 per cent, China 3.2 per cent, Germany 9.4 per cent⁶. This shows that even the targeted percentage in future falls far short of the expectations. The expenditure budget on medical research has not increased significantly over the past few years. The expenditure budget for research was Rs 1727 crore in financial year 2019, which has grown to Rs 2100 crore in financial year 2021, according to the Budget documents⁶.

My point of discussion however is not to lay down statistical facts and figures but to get into the shoes of the common man and Health Care Professional and feel their pulse of urgency and thereafter voice their needs of the time. As we are well aware, India is still dominated by the proletariat class whose meager income scarcely enable them to meet their two ends meet leave alone expenditure on health, thus their lives need more to be ensured and not insured. Insurance companies are mere business players trying to reap the maximum profit out of their investments then how could they be entrusted with the responsibility of massive development of health care in the secondary and tertiary health strata. Let me place before you a statistic which will certainly leave us petrified. In 2017, Indians

expended around sixty-two percent of their total health expenditure as out-of-pocket expenditure being paid directly to the service providers^{7,8}. (Fig-2) India ranks as one of the poorest in terms of this indicator and common people incurred heavy expenses as a reason of health care. Out of pocket expenditure on health is one of the biggest reasons for people falling into poverty in India. It is only the government which can intervene in this matter with the sole service motive to develop a healthy India in future where nobody is deprived of health services. To me, the government needs to take care of other avenues of development also as education, nutrition, clean potable drinking water, housing, sanitization, clean air et al. thus providing mere health cards is not enough.

If the resources of the government get diverted as payments in the form of insurance to the private health care then they would be left with less funds to develop the primary, secondary and tertiary health care networks. The recent pandemic has made us realize the importance of a super and actively functioning synchronized network of the primary secondary and tertiary network along with people's participation. Private Insurance companies have no role in here to set up such a network as they are mere business houses thriving on the failing health of their clients.

The nexus between private healthcare institutions and the insurance companies is also satanic. Following the PPN (Preferred Provider Network) model the tie up between the two is malicious. And Doctors have no role to play except to accept the burden. Under pressure of the Insurance Company and Private Health Care management to reduce the cost of treatment there is possibility of substandard care which is deterrent to the interest of the patients. Again the doctors are losing their medical autonomy to serve the patients ethically. Thus in spite of expending high out of pocket expenditure the patients are not getting best benefits at times when they need them the most. It can thus be inferred that doctors voice must be recorded at the time of creation of such understandings.

Again being driven solely by profit motives the insurance houses are least interested in setting up research and development wings for further advancement of medical care. This can only be achieved with active government intervention.

As a consequence of the liberalization and privatization of health care system, the health care expenses have also sky rocketed since the ending phase of the

20th century. Health expenditures have surged at 14% and this growth is higher for in-patient care. Here the government must step in as the savior.

The recommendation is to spend at least two third of Government's health expenditure on primary healthcare, in addition to setting a target to reduce the proportion of households facing catastrophic health expenditure from the current levels by 25 percent by 2025⁵. These efforts on behalf of the Government have enough reasons for us to be optimistic.

Now the certain policies of the government become questionable here. Do the citizens of India demand from the government only health coverage schemes to tide over financial challenges during health emergencies or do they look up to the government for better medical infrastructure and facilities and quality insurance packages from the public sector at affordable premiums? The doctor-population ratio in India is 1:1456 against the WHO recommendation of 1:1000. According to the data of 2018 there has been a short fall of doctors by 46% and specialists by 82%⁹. Poor working conditions, poor remuneration and procedural delay in recruitments are prime cause of shortfall in government run medical centres be it secondary or tertiary. Oodles of such data can be produced to show that lot remains to be done for up gradation of the health sector and mere insurance policies are not the solutions.

However, till now the public sector has major players in Insurance like the Life Insurance Corporation (LIC), The General Insurance Corporation of India which has four subsidiary companies as: National Insurance Company Limited (NIC); New India Assurance Company Limited (NIA); Oriental Insurance Company Limited (OIC); and United India Insurance Company Limited (UIIC). They have their wide array of policies to cover the potential health hazards. Why don't we revamp and widen the facilities of these

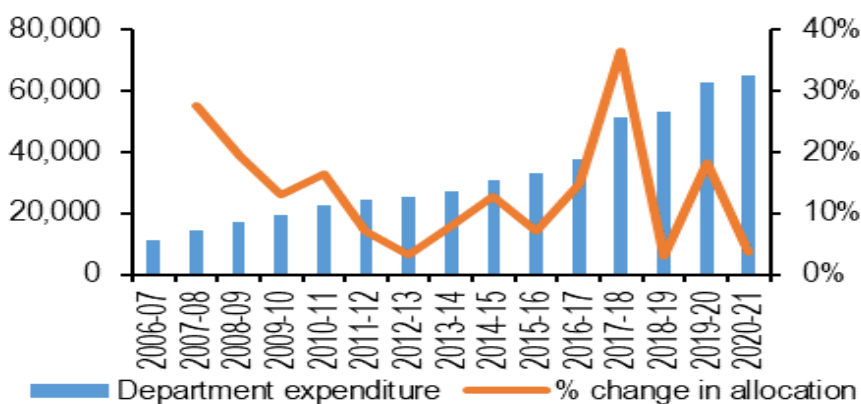


Fig 1 — Allocation to the Department of Health and Family Welfare (2006-20) (in Rs crore)

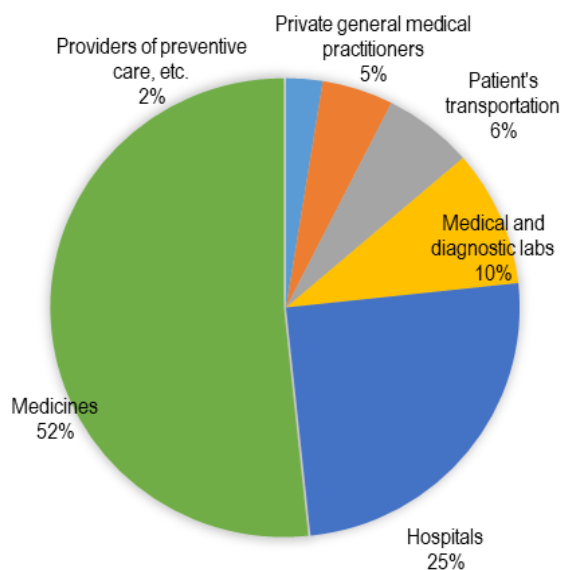


Fig 2 — Major heads for which out-of-pocket expenditure is made (2014)

sectors so that the common man finds solace in investing in these sectors. This, along with sustained strengthening of primary healthcare system and steady growth in medical infrastructure which includes better trained medical staffs in adequate numbers with

state of art technology will certainly bring about a health renaissance in India. Let us all hope that India will rapidly achieve this health revolution with a little bit more of cognitive and pragmatic efforts from the Health Policy makers.

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