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Ayushman Bharat PM-JAY SEHAT: J&K

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Why in News

Recently the Prime Minister has launched the **Ayushman Bharat Pradhan Mantri Jan Arogya Yojana (AB-PMJAY) Social Endeavour for Health and Telemedicine (SEHAT)** scheme via video-conferencing to extend **health insurance coverage** to all residents of **Jammu and Kashmir (J&K)**.

Key Points

- **AB-PMJAY SEHAT Scheme:**
 - The Scheme provides free of cost insurance cover. It provides financial cover upto **Rs. 5 lakh** per family on a floater basis to all residents of the UT of J&K.
Floater basis, means that it can be used by **one or all members** of the family. The whole family is insured under one plan.
 - The scheme **would work in convergence with Pradhan Mantri Jan Arogya Yojana (PMJAY)**.

- **Benefits:**
 - **Full coverage to residents of J&K:**

At present, about 6 lakh families of the UT are getting the benefit of the Ayushman Bharat Scheme. After the health plan, all **21 lakh families** will get the same benefit.
 - **Portability of treatment:**
 - Treatment will not be limited to government and private hospitals in Jammu and Kashmir only. Rather, various hospitals are connected under this scheme in the country.
 - The hospitals empanelled under PM-AY scheme shall provide services under this scheme as well.
 - **Universal Health Coverage:**

The scheme will ensure Universal Health Coverage and focus on providing financial risk protection and ensuring quality and affordable essential health services to all individuals and communities.

 - Universal Health Coverage (UHC) includes the full spectrum of **essential, quality health services, from health promotion to prevention, treatment, rehabilitation, and palliative care.**
 - UHC enables everyone to access the services, protecting people from the **financial consequences of paying for health services** out of their own pockets and reducing the risk that people will be pushed to poverty.
- **Ayushman Bharat PMJAY Yojana:**
 - The PMJAY, world's largest health insurance/assurance scheme **fully financed by the government**, provides a cover of **Rs. 5,00,000 per family per year** for **secondary and tertiary care hospitalisation across public and private empanelled hospitals** in India.
 - Pre-hospitalisation and Post-hospitalisation expenses such as diagnostics and medicines are also included in the scheme.

Source:PIB