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Dear Sir

Subject: - State run “Karnataka Self-funded Health Scheme” to cover all in Karnataka

The simplest way to fulfill the Health Care Needs of the People, ‘Right to Health’ & WHO guideline, without burdening the State Exchequer and the Poor is by professionally managing the Health Care funds, infrastructure and manpower.

State should neither run Hospitals nor the Health Care Schemes.
The State should develop health care infrastructure and allow Doctors admit and treat patients in them. The State should pay the Doctor’s for their services on “Pay for Service” basis. The Health Insurance Premium should be split and paid by the State and Central Governments with the families at 40:30:30 ratios.

“sabka-saath-sabka-vikas”
To make “Right to Health” a reality, the Health Insurance Premium should be just a DAY’S wage of a farm worker. We at Anyuta Trust have worked out such a Health Insurance Product based on our R&D and field trail and named it as “Anyuta Universal Health Service”. Here the Premium is Rs.1500 and the cover value is Rs.3 lakhs on floater, for a Family unit of 6 members. In this Policy there are no age band and exclusion clauses and the coverage is for all surgeries major or minor, all disease acute or chronic. The covered major surgeries are Heart Bypass surgery, Heart Valve Replacement, Total Knee & Hip Replacements, and Kidney Transplant. The Chronic Diseases covered are Cardiac, Respiratory, Liver, Spleen, kidney, Dialysis Bone and Joint, etc., and Cancer treatment. Make Public Sector Insurance Companies issue this Policy.

One India One Health Care
The "tipping point" will arrive when the State and Central Government share “Anyuta Universal Health Service” Premium of Rs.1500/- to cover all ailments with the Family at 40: 60: 40 ratios,
i.e. Rs.600: Rs.450: Rs.450 respectively. This Premium of Rs. 450 is the Farm worker’s DAY’s wage and covers a value of Rs.3 lakhs on floater without age band and exclusion clauses.

**Governments should Empower people to pay for their Family’s Health Care with pride.**
Just imagine that the Karnataka with 6 crore people (1 Crore Families) paying Rs.1500 as Premium is Rs.1500 Crores. With Rs.1500 Crores the state can provide quality care to rich or poor alike. For **“Anyuta Universal Health Service” Policy** the family contribution will be only Rs.450 per year.

**Benefits to the State**
This will put an end to people committing suicide because of the Health care issues and costs. There will be job, Health care infrastructures creations and every Hospital will generate marginal revenue surplus to self-sustain and Scale up.

**Indians prefer Private Health Care.**
In India the politicians, bureaucrats, government employees, about 80 per cent of the poor, and their family’s get treated in Private Sector or Corporate Hospitals. The reason being that there is no State of Art; NABH accredited well managed Hospitals providing quality Care in the Government Sector.

**Care Providers & Infrastructure Providers**
Health Care Industry has Doctors as “Care Providers” who come with knowledge and skills. It also has the Government, Private & Corporate Hospitals as “Infrastructure Providers.” Consumers are willing to buy Health Care Policy at a low Premium to cover high value. Government should not run Hospitals and Health Schemes.

**Putting Care before Costs**
Doctors come with Knowledge & Skill to help the people in pain and misery. Let Doctors run the Hospitals and Insurer provide Health Insurance and run it.

**Build State of Art Hospitals**
State Government should build State of Art Hospitals and allow Doctors to admit and treat patients. Provide soft loans to Doctors to upgrade their existing set ups to promote home and outpatient care. Pay Doctors and Hospitals separately for their services.

**Solution :**
Provide “Anyuta Universal Health Insurance Service”. This Policy is the replica of SIPF Mediclaim of Rajasthan State for the entire Government employees and their families at less than Rs.600 as a Premium!

**SIPF Mediclaim generated surplus revenue to the Hospitals and the Insurer**
SIPF Mediclaim covers all ailments with a Premium less than Rs.600 per Family. There is no age band & no Exclusion Clauses. SIPF coverage is for all ailments, major or minor, acute or chronic, like Heart Bypass surgery, Heart Valve Replacement, Total Knee & Hip Replacements, Kidney Transplant. Chronic Medical Conditions like Cardiac, Respiratory, Liver, Spleen, Bone and Joint diseases, etc. Cancer treatment is totally covered. The SIPF Mediclaim generated surplus revenue to the Hospitals and the Insurer while providing quality care.

**Good governance**
State should provide good governance. It should wean the people away from Government helps. Make them Creditworthy to access finance. Provide Student Scholarship.

**Karnataka State should Provide Health Care Infrastructure**
Karnataka State should build Health Care Infrastructure like Hospitals, Clinics, Day Care Centers etc., and not run them. It should allow people to select their Doctors and get treated in these Hospitals. State should pay the Doctors.

**Medical Negligence**
The State government run Hospitals should meet all safety standards as is in KPME Act to avoid Medical Negligence. In the first such case, the public health department in Bombay paid a compensation of Rs 2 lakh to the husband of a tribal woman who died after a tubectomy operation in 2011. Prafulla.Marpakwar @timesgroup.com Times of India Monday 8, 2018.

**“Karnataka Self-Funded Health Scheme”**
The aim of this Self-funded Health Scheme should be to bring the State`s population under 24/7 Medical Surveillance and to provide them with total health care cover for surgeries major or minor, disease acute or chronic, like Heart Bypass surgery, Heart Valve Replacement, Total Knee & Hip Replacements, and Kidney Transplant. The Chronic Diseases covered are Cardiac, Respiratory, Liver, Spleen, kidney, Dialysis Bone and Joint, etc., and total Cancer treatment.

**Karnatakahas adequate funds to provide quality Health Care to all.**
The State has realized Rs. 869.4 crores realized by merging 7 government Schemes. With this money the state can provide Cashless Health Care to every family in Karnataka State irrespective of their financial status.
With this money the state can bring its entire population under 24/7 Medical Surveillance and to provide them with total health care cover for surgeries major or minor, disease acute or chronic, like Heart Bypass surgery, Heart Valve Replacement, Total Knee & Hip Replacements, and Kidney Transplant. The Chronic Diseases covered are Cardiac, Respiratory, Liver, Spleen, kidney, Dialysis Bone and Joint, etc., and Cancer treatment.

The SIPF Mediclaim Policy has set the standards
In the State of Rajasthan, the SIPF Mediclaim Policy covers all the government employees and their families for just Rs.580 as Premium and provides the above-mentioned health cover and still generates profits. We at Anyuta TPA have serviced this policy for 5 years.

In Karnataka there is no shortage of Doctors and Hospitals
The state failed to use the existing Health Care infrastructure and manpower to its advantage. State failed to upgrade its Hospitals to world standards. State failed to create State of Art Hospitals and allow Doctors to operate as is done in Private sector. Developed countries do it.

The State is busy running substandard hospitals and Health Care Schemes. It never thought of changing the people mindset and making them utilize its infrastructure and thus set the Care standards and the costs. Instead the State wants to control Private Sector Hospitals and their costs by introducing KPME Act while letting them free of it. The State never allowed the market forces to act and correct costs.

Use the existing Health Care Infrastructure and manpower cleverly
It is time to integrate the services of the Government, Private and Public-sector Health Care Delivery System and maximize its utility by allowing free movement of Doctors. Allow the patients to choose their Doctors and Hospitals to get treated amongst the above Health Care Provider group. Make separate payments to the Doctors as Care Providers and Hospitals as Infrastructure Providers with the money that is realized. Then the care quality and the costs will be the same and affordable to all.

Care costs will fall with increase in infrastructures
State has more than 52 Medical colleges with Hospitals with unused beds, equal number of charitable hospitals and multiple government hospitals. Provide soft loans to Doctors to build new infrastructures and improve the existing infrastructure. But set the standards.

People want to pay and buy Quality Health Care
People want to pay and buy Quality Health Care. They know quality has costs and that is why they prefer private Doctors and Hospitals. People know that there is no free meal and they also know that Rs. 869.4 crores realized is their money. They want to wean away from government helps. They do not like you to categorize them as APL and BPL for they know it well that you are responsible for they are being BPL all these 70 years.

The Constitution of India
The Indian Constitution under article - 47, incorporates provisions guaranteeing everyone’s right to the highest attainable standard of physical and mental health.

Directive principles of state policy
The government hospitals run by the Principle Secretary Health for the State, and the medical officers employed therein, are duty-bound to extend medical assistance for preserving human life. Failure on the part of a government hospital to provide timely medical treatment to a person in need of such treatment results in violation of his right to life guaranteed under Article 21 of Constitution.

Supreme Court
The Supreme Court held in its judgment that the lack of financial resources cannot be a reason for the State to shy away from its constitutional obligation.

Let us do it in Karnataka
Let us provide quality health care to every family in Karnataka. There is no need to empanel hospitals and provide funds but there is a need to manage it meticulously. Anyuta will help you to implement this Scheme since we have the total knowledge and experience in making SIPF a success.

Question
As the Additional Chief Secretary, Health & Family Welfare Services, you have accepted to provide quality Care to the people of Karnataka. We want to know why KPME Act in place of a uniform Health care Act to cover the Government and Private Sector Health Care Delivery System. Why exempt Government Sector from Medical Negligence? Why run Government Sector without NABH Certification?

Regards,

Dr. Ravi Shetty
Orthopedic Surgeon