



# Government-Sponsored Health Insurance in India: Are You Covered? (Directions in Development)

*Gerard La Forgia, Somil Nagpal*

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## **Government-Sponsored Health Insurance in India: Are You Covered? (Directions in Development)**

Gerard La Forgia, Somil Nagpal

This book presents research findings on India's major central and state government-sponsored health insurance schemes (GSHISs). The analysis centers on the GSHISs launched since 2007. These schemes targeted poor populations, aiming to provide financial protection against catastrophic health shocks, defined in terms of inpatient care.

Focus is on two lines of inquiry. The first involves institutional and "operational" opportunities and challenges regarding schemes' design features, governance arrangements, financial flows, cost-containment mechanisms, underlying stakeholder incentives, information asymmetries, and potential for impact on financial protection and on access to care and use by targeted beneficiaries. The second entails "big picture" questions on the future configuration of India's health financing and delivery systems that have surfaced, due in part to the appearance of a new wave of GSHISs.

In addition to gains in population coverage, reaching about 185 million low-income beneficiaries by 2010, the new crop of schemes introduced a demand-side approach to public financing while embracing several innovation features, at least for the Indian context. These include: defined entitlements, separation of purchasing from financing, patient choice of providers, impressive use of information and communication technology and engagement with the private sector in the areas of insurance, administration and provision. Strong political interest in the schemes is also evident, especially at the state level and is a driver of increased public expenditures for health.

The schemes face a number of operational challenges that have emerged during implementation and are examined in the book. They will need to strengthen institutional and governance arrangements, purchasing and contracting capacities, monitoring systems, and cost containment mechanisms. They need to use their financial leverage to improve the quality of network providers. Beneficiaries also appear to have insufficient information on enrolment, benefits and providers. The book recommends a series of corrective measures to address these shortcomings.

The book outlines a "pragmatic pathway" toward achieving universal coverage that takes as a starting point the current configuration of health financing and delivery arrangements in India, recent trends in government health financing as well as innovations and lessons from the recent GSHISs analyzed in this book. The book concludes with a review of issues for further research.

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