Why Should Indian Pediatricians be Aware of the Niramaya Health Insurance Scheme?

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To the Editor: Niramaya Health Insurance Scheme (NHIS) was launched by the National Trust (NT) under the Government of India on March 26, 2008, on a pilot basis initially. Subsequently, it was extended to cover the entire country. NHIS intended solely to benefit children and adults, who have Cerebral Palsy (CP) or Autism related Spectrum Disorders (ASD) or Intellectual Disability (ID), or multiple disabilities (MD). The premium for NHIS is nominal, ranging from ‘nil’ to rupees 500 per annum based on monthly income limit.

A unique feature of NHIS is that it covers the expenditure for outpatient treatment, and up to Rs. 14,500/– per year would be reimbursed. A maximum of Rs. 70,000 would be reimbursed for hospitalization expenditure, Rs. 1000 for transportation and up to Rs. 4000 towards the cost for any alternate treatment [1]. Within one year of NHIS launch, 36,153 eligible persons with disabilities (PWD) beneficiaries were enrolled [2]. However, even after a decade, beneficiaries for this scheme are only 96,716 in the year 2018–19. A report by the National Trust indicates an expenditure of 8 Crores towards the claims by beneficiaries [3]. Census, 2011, enumerated 15 lakh population with ID, with about 30–40%, estimated to be less than 18 y of age [4]. The number of children having ID or CP or ASD or MD could be much higher as the census data is 9 year old, and persons with CP and ASD are not enumerated in that census. About one in thousand children are predicted to have autism-related disorders, which equates to more than one million at the population level [5]. Parents would first approach Pediatricians for their children’s developmental delays. Pediatricians’ acquaintance with NHIS coverage for ex-

penditure spent on outpatient (OP) consultations, diagnostic tests done on OP basis including genetic and chromosomal tests, spending for medications like stimulants for controlling hyperactivity, expenditure for speech therapy and physiotherapy, etc., will help them guide the family members. Perhaps, comprehensive knowledge about NHIS in Pediatricians can play a pivotal role in reducing the impact of disability in children.

Compliance with Ethical Standards

Conflict of Interest None.

References

1. The National Trust. Niramaya Health Insurance Scheme (Internet). Available at: <http://thenationaltrust.gov.in/content/scheme/niramaya.php>. Accessed April 30, 2020.
2. The National Trust for the Welfare of Persons with Autism, Cerebral Palsy, Mental Retardation and Multiple Disability, Ministry of Social Justice and Empowerment, Government of India. (Internet) National Trust Annual Report 2008–09 (p 41–42). Available at: <http://thenationaltrust.in/AnnualReport-2008-09.pdf>. Accessed April 30, 2020.
3. The National Trust for the Welfare of Persons with Autism, Cerebral Palsy, Mental Retardation and Multiple Disability, Ministry of Social Justice and Empowerment, Government of India. (Internet) National Trust Annual Report 2018–19 (p 16). Available at: https://www.thenationaltrust.gov.in/upload/uploadfiles/files/English_new_PASTING_compressed.pdf. Accessed April 30, 2020.
4. Health Insurance Scheme for the Disabled in India (July 13, 2011) (Internet). Available at: <https://enabled.in/wp/health-insurance-scheme-for-the-disabled-in-india/>. Accessed April 30, 2020.
5. Chauhan A, Sahu JK, Jaiswal N, et al. Prevalence of autism spectrum disorder in Indian children: a systematic review and meta-analysis. *Neurol India*. 2019;67:100–4.

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