



## Mukhyamantri Amrutam “MA” & “MA Vatsalya” Yojana

### **Introduction of the Programme: -**

For people who are living below poverty line & lower income group, an illness not only represents a permanent threat to their income and earning capacity, but in many cases it results in the family falling into a trap of debt. When need to get treatment arises for a poor family they often ignore it because of lack of resources, fearing loss of wages, or they wait till the last moment when it is too late. Health and poverty are interwoven. These families are pushed into a vicious debt poverty cycle due to excessive expenditures arising out of catastrophic health shocks.

To address this key vulnerability faced by the BPL population in the Gujarat, **Mukhyamantri Amrutam “MA” Yojana** was launched on 4<sup>th</sup> September, 2012 by Government of Gujarat.

When in the Lower middle class families, critical illness occur and when such families are not included in the definition of BPL so they cannot get free treatment, and they are not able to spend money for critical illness. So, Based on feedback from various stakeholders, the Scheme was extended to families of lower income group names as **Mukhyamantri Amrutam Vatsalya Yojana** in August 2014.

On 18/10/2017, the limit of income is been increased from Rs. 1.50 lakh to Rs. 2.50 lakh per annum for “MA Vatsalya” beneficiaries. **On 01/04/2018**, the limit of income is been again increased from **Rs. 2.50 lakh to Rs. 3.00 lakh per annum for “MA Vatsalya” beneficiaries.**

During year of 2016, U-win Card holders are also included under the scheme.

In Current Financial Year 2017-18, all urban & rural **ASHAs ([Accredited Social Health Activist](#))**, **Reporters** and **fix pay employees of class-3 & 4 appointed by state government** are included under “MA Vatsalya” Yojana.

**Senior citizens** of those families with **annual income up to Rs. 6 lakh** are included under “MA Vatsalya” scheme.

**Strategies & Programme Activities: -**

All beneficiaries can avail cashless quality medical and surgical treatment for catastrophic illnesses related to: Cardiovascular diseases, Renal diseases, Neurological diseases, Burns, Poly-Trauma, Cancer (Malignancies), Neo-natal (newborn) diseases, Knee & Hip Replacement & Kidney, Liver and Kidney + Pancrease Transplantation which cover **698 defined procedures** along with their follow ups.

The Sum assured is up to **Rs. 3,00,000/- per family** per annum on a family floater basis.

Kidney Transplant, Liver Transplant, Kidney + Pancrease Transplant procedures are covered with benefit up to Rs. 5,00,000/- under scheme.

Knee and Hip replacement procedures are covered with cap of Rs. 40,000/ - per one replacement. Additional cost will be borne by the beneficiary.

**Rs. 300/-** is paid to the beneficiary as transportation charges for every instance of availing treatment from the empanelled hospital.

To avail benefits every family has issued a **QR coded card (Quick Response Coded Card)**. This card contains the photograph of the head of the family/spouse, a unique registration number (URN), District name, Taluka name & Village name and the biometric thumb impressions of all the enrolled family members along with the details are stored on the central server which can be fetched online at the click of a button.

“MA Vatsalya” Card is compulsory for availing treatment. After availing Income Certificate, beneficiaries can get “MA Vatsalya” Card and for that the following officers have been appointed to give income certificate to the beneficiaries:

- District Collector, District Development Officer, Deputy Collector / Assistant Collector, Province Officer, Deputy District



**Mukhyamantri Amrutum**  
**મુખ્યમંત્રી અમૃતમ**

000000123456789010

Rameshbhai P Patel



Mayurnagar  
Halvad  
Surendranagar

Male  
101



**Government of Gujarat Initiative**

- મુખ્યમંત્રી અમૃતમ (પા) યોજનાનું હાર્દ રૂપે યોજના અંતર્ગત જોડાયેલ (નેટવર્ક) દવાખાનાઓમાં જ ચાલશે.
- દવાખાનામાં દાખલ થયા અગાઉ આ કાર્ડ યથાવત્તુ ફરજિયાત રહેશે.
- કાર્ડમાં નોંધાયેલ જાહેરના નામ, અંગૂઠાના નિશાન તેમજ શેડાની ખરાઈ થયા પછી જામ થવાની શકાશે.
- યોજનાનો ઉત્તમ ફાળ લેવા માટે આ કાર્ડ સાચવીને રાખજો.
- વધુ માહિતી મેળવવા સંપર્ક કરવો  
ટોલ ફ્રી : 1800-233-1022  
વેબસાઈટ: www.magujarat.com

નોંધ: આ કાર્ડ ગુજરાત રાજ્યના આરોગ્ય અને પરિવાર કલ્યાણ વિભાગની વિશ્લેષણ છે.

**Commissionerate of Health**  
Block 5 Jivaraj Mehta Bhavan,  
Gandhinagar, Gujarat

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**Mukhyamantri Amrutum Vatsalya**  
**મુખ્યમંત્રી અમૃતમ વાત્સલ્ય**

05000372800104191803

Anjumben U Khanushiya



Mangadh  
Idar  
Sabarkantha

Female  
401



Date of Issue : 12/09/2014

**Government of Gujarat Initiative**

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ટોલ ફ્રી : 1800-233-1022  
વેબસાઈટ : www.magujarat.com
- આ કાર્ડ દર વર્ષે રિન્યુ કરાવવાનું રહેશે.

નોંધ: આ કાર્ડ ગુજરાત રાજ્યના આરોગ્ય અને પરિવાર કલ્યાણ વિભાગની વિશ્લેષણ છે.

**આરોગ્ય કમિશ્નરની કચેરી**  
બ્લોક નં.૫, ડૉ. જીવરાજ મેહતા ભવન,  
ગાંધીનગર, ગુજરાત

Development Officer, Taluka Mamlatdar,  
Taluka Development Officer, Deputy  
Mamlatdar

Benefits to a unit of **five members of the family** (Head of family, spouse, and three dependents). A newborn is covered as 6th member of the family during that financial year.

There is **no Insurance** and hence there is no scope for any intermediary to make profits under “MA”.

There are zero direct costs incurred by the beneficiaries of MA Yojana as all costs of treatment, medicines, follow-up and transportation etc are borne by the State.

For beneficiaries enrolment, **Taluka kiosks** and **Civic Centre kiosks** have been established at the Taluka and City civic center Kiosk where beneficiaries can enroll themselves, can get his/her card split, can addition/deletion of family members, and can get a new card in case of lost card. **Mobile kiosks** are also provided at each district for growingly enrollment.

Private hospitals, Government hospitals and Standalone dialysis centers are empanelled to avail benefits under the scheme.

Payment against approved claims is released directly through RTGS by the State Government. No intermediary agency is involved in the process.

For encouraging Quality services, Hospitals accreditation by NABH / JCI (Joint Commission International)/ ACHS (Australia) or by any other accreditation body approved by International Society for Quality in Healthcare (ISQua) are given **Quality Incentives** of 10% extra package change over and above the package rates.

IEC activities are also carried out. Under this, **Mega Health Camps** are conducted in every district in which participation of empanelled hospitals, both private and govt. is necessary. In addition to Mega Health Camps, **General Health Camps** are also conducted by the empanelled hospitals every month. Radio and Print advertisements are given in local radio channels and newspapers to generate awareness about the scheme in the targeted population. **Rs.100 per BPL family is given to ASHA** to accompany BPL family for enrollments at their respective Kiosk. Enrollment through Mobile Kiosk, incentive of **Rs. 2/-** per registration of “MA” & “MA Vatsalya” family is given to ASHA.

### **Scheme Features: -**

- This is a **100 % State funded scheme** where the fund directly goes to the service providers.
- To have healthy competition and not to replace public institutions consciously, it was decided to **empanel both private and public/trust/Grant-In-Aid hospitals** to render their services under 'MA'.
- **Package rates** selected under 'MA' are derived from the market through competitive bidding process via e-tendering. Unlike from other states which went by the recommendation by Advisory Committee members in this Scheme.
- **Implementation support agency (ISA):** SNA is assisted in scheme management by an Implementation Support Agency (ISA) which is contracted to MD India Pvt. Ltd. through a competitive bidding process. ISA provides pre-authorization of all cases, and perform claim processing task. ISA maintains a call centre for grievance redressal, and does initial screening of hospitals for empanelment. ISA also hires Regional Coordinator, District Coordinator and Arogya Mitras (at hospital level) to manage the scheme.
- A dedicated state owned data centre and server is established with a storage capacity of 5 TB to deal with the voluminous data being generated. The **IT Support Agency**, (n) Code Solutions, is responsible for the development of software, enrollment of beneficiaries, setting up of Taluka kiosks etc.

### **Key Takeaways:-**

- ✓ Paperless Claim Processing for early claim settlement.
- ✓ It's protecting beneficiaries from high, unexpected catastrophic health expenditure and from falling into debt.
- ✓ Encouraging quality services by increasing 10 % extra over and above the package rates to Hospitals accreditation by NABH / JCI / ACHS or by any other accreditation body approved by International Society for Quality in Healthcare.

- ✓ For smooth & transparent financial transaction of hospital claim, payments through RTGS directly by the state Government.
- ✓ Enrollment of beneficiary throughout the year.
- ✓ Rs. 6/- per km as transportation allowances for hospital in case of death patient to take the dead body from the hospital to his/her hometown.

**Achievements: -**

- Mukhyamantri Amrutam Yojana has been awarded by the prestigious **SKOCH Awards for Smart Governance 2014 on 20<sup>th</sup> September, 2014.**
- Mukhyamantri Amrutam (MA) Yojana has been awarded by the prestigious **CSI-Nihilent e-Governance Awards 2013-14 on 13<sup>th</sup> December, 2014.**
- Mukhyamantri Amrutam (MA) Yojana has been awarded for **Best Affordable Healthcare Initiative** in Healthcare summit 2016 at Jaipur.
- Mukhyamantri Amrutam (MA) Yojana has been awarded for **“Gems of Digital” India Award** for the innovation, impactful and sustainable E-governance initiatives on 7<sup>th</sup> June, 2017.
- Mukhyamantri Amrutam (MA) Yojana has been awarded by ELETS for **“Best Accessible Healthcare Initiative”** on 26th March, 2018 in New Delhi.

MA website is [www.magujarat.com](http://www.magujarat.com) & Toll free number is 1800-233-1022.