National Health Authority

Why in news?

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The NITI Aayog has recently proposed the creation of a new National Health Authority.

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What is the proposal?

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- National Health Authority(NHA) is proposed to administer the Pradhan Mantri Jan Arogya Yojana (PMJAY) and will be chaired by the Health Minister with the Aayog as its administrative body.
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- It is envisioned as an autonomous body that could initially be formed by an executive order.
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- This is because, with health and public health being state subjects, two or more state legislatures will need to pass resolutions before Parliament enacts a law for the constitution of the NHA. (Article 252)
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- The NHA will report directly to the Prime Minister’s office, making the Union Health Ministry to have little say in the PMJAY scheme.
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Why is there a demand for a separate authority?

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- PMJAY will target about 10.74 crore poor, deprived rural families and identified occupational category of urban workers' families as per the latest Socio-Economic Caste Census (SECC) data covering both rural and urban.
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- PMJAY is currently administered by the National Health Agency which is a

registered society under the Health Ministry.
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- While the Health Ministry is not responsible for the day to day running of the scheme, it does have a say in policy matters.
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- For example, the package rates were decided by the Directorate General of Health Services.
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- However, since PMJAY caters to around 40% of the population, setting the price for the targeted people could artificially inflate health costs for the remaining 60% who are not covered under the scheme.
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- Hence, there is an argument for a distinct authority, without government intervention, to administer the price modalities of the scheme.
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What will be its purpose?

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- The NHA will address the shortage of capacity in many states at the administrative level that could manage the extra monitoring and supervision involved.
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- Also, NHA could lay down uniform standards and access rules that could allow free movement between different jurisdictions without losing access to health care or to health information.
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- Internal migration from labour-surplus areas to those parts of the country where wages are higher is raising in India and hence NHA should ensure that they are not left out.
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- NHA will have penal powers and can issue orders to its state counterparts rather than mere advisories and it can also act against errant hospitals.
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- The NHA will also have full say over the package rates and the mandate to negotiate with the private sector for the strategic purchasing of services.
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- The NITI Aayog proposal also envisages the formation of an advisory board.
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What are the concerns?

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- The crucial determinants of any scheme’s success lie at the state government level.
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- The experience from previous centrally-sponsored schemes is that line ministries have often created too many requirements and required excessive standardisation.
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- These have meant that the administration of schemes is not as accountable or efficient as it would be otherwise.
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- This must not be repeated in the case of the NHPS.
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- Thus, NHA as an independent authority provides for the chance of less interference from the government.
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- But it should ensure that the NHPS does not turn into a purely central scheme with little involvement from the states.
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Source: Business Standard

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