DAILY PT POINTERS

7th August, 2024

HEADLINES OF THE DAY

The Hindu :_GS 2/Health–Page-5

Centre issues norms for organ transport in India

S. Vijay Kumar
CHENNAI

In a first, the Union Ministry of Health & Family Welfare has issued a set of guidelines for the transportation of live human organs.

The transport protocols aim to ensure the expeditious movement of life-saving organs from the point of harvest to their destination through effective use of available infrastructure.

The Transplantation of Human Organs and Tissues Act, 1994, allows harvesting of organs from living donors or brain-dead patients with the consent of family members. Such organs are transported from one hospital to another, sometimes far away, by air or road depending on the location of eligible recipients registered with their respective authorities.

The Standard Operating Procedure (SOP) issued on Monday will serve as a guiding document for healthcare institutions in States/Union Territories to transport organs by various modes of transport, including metro trains and over water. The instructions made it clear that human organs for transplant would be transported only within the territory of India and no organ shall be transported outside the country.

While transporting the organs by air (commercial/ non-commercial aircraft/ helicopter/ air ambulance etc., except drones), the Ministry recommended that the box containing the organ should be screened without opening it but passengers carrying it shall not be exempted from security checks.

Staff carrying/accompanying the organ box should be given priority in deboarding for which an in-flight announcement could be made by the Pilot-in-Command. Seating in front row seats, priority reservation, and provision for late check-ins for organ transport may be facilitated by the airline concerned. It would be the responsibility of the officials to define a green path (free from obstruction) and a trolley for the organ box from the ambulance to the aircraft at the point of origin and from the aircraft to an ambulance at the destination.

- In a first, the Union Ministry of Health & Family Welfare has issued a set of guidelines for the transportation of live human organs.
- The transport protocols aim to ensure the expeditious movement of life-saving organs from the point of harvest to their destination through effective use of available infrastructure.
- The Transplantation of Human Organs and Tissues Act, 1994, allows harvesting of organs from living donors or brain-dead patients with the consent of family members. Such organs are transported from one hospital to another, sometimes far away, by air or road depending on the location of eligible recipients registered with their respective authorities.

HEADLINES OF THE DAY

Indian Express-Governance(GSII)-Page 14

Government spent 14% of funds under Ayushman Bharat on those over 70 years

ANONNA DUTT
NEW DELHI, AUGUST 6

BENEFICIARIES AGED 70 years and more made up over 12 per cent of all admissions under the government's flagship Ayushman Bharat health insurance scheme, with their treatment costs accounting for nearly 14% of the total expenditure till January, according to data presented in Parliament by the Union Ministry of Health and Family Welfare.

The data shows that of the nearly 6.2 crore approved hospital admissions till January 2024, as many as 57.5 lakh were senior citizens aged 70 years and more. The government's expenditure for treatments under the scheme reached a staggering Rs 79,200 crore over the last six years till January 2024, of which Rs 9,878.5 crore was allocated to treat those who are 70 years and over.

TOP 5 STATES, FOR THE ELDERLY

State	Admissions in 70-plus age group	Proportion of total admissions	Hospitalisation cost in 70-plus age group	Proportion of total cost
Maharashtra	2.5 lakh	20.49%	844.8 cr	27.49 %
Kerala	10.2 lakh	18.75%	1101.1 cr	19.9 %
Haryana	1.9 lakh	18.13%	291.9 cr	19.8 %
Bihar	1.3 lakh	16.6%	138 cr	16.8 %
Himachal Pradesh	0.38 lakh	16.4%	48.6 cr	16.98 %

The costs and number of admissions frames the challenge for the BJP-led government with one of the party's key poll agenda being an ambitious expansion of Ayushman Bharat to include all individuals over 70, irrespective of their economic status. This move is set to add nearly 4 crore new beneficiaries to the program. At present, only the poor, who figure in the SECC data, are among those with access to the annual Rs 5 lakh coverage under the scheme.

Experts estimate the cost of expanding the coverage to all persons over 70 years would be higher than that for covering the poorest 40 per cent across all age groups. "The cost to the exchequer is likely to increase when older people of means are also covered. First, health-seeking behaviour – accessing hospitals for care – is more in older people who are relatively affluent, meaning the number of people who utilise the policy is likely to be much higher. Second, the premiums too are likely to be higher for older individuals as they are more likely to need healthcare for chronic conditions and their complications," said Dr Indranil Mukhopadhyay, health economist and professor at the School of Government and Public Policy at O P Jindal University.

While the Ayushman Bharat insurance scheme was extended for the ASHA and Anganwadi workers during the government's interim budget in February, no mention of any further expansion was made while the full Budget was presented in July. The allocation for the insurance scheme was also flat; it increased by only Rs 100 crore to Rs 7,300 crore.

With an ageing population with inadequate health coverage, the expansion of the scheme for those over 70 years across all income groups is expected to have a significant impact. India's population over the age of 60 years is estimated to increase from 8.6 per cent in 2011 to 19.5 per cent by 2050, according to the Longitudinal Ageing Study in India (LASI). In terms of absolute numbers it means that the population over the age of 60 years is set to triple from 103 million in 2011 to 319 million in 2050.

Big spenders

The proportion of hospital admissions for older individuals exceeded 10 per cent – their projected share in the country's total population – in several states. Maharashtra led with 20.49 per cent, followed by Kerala (18.75 per cent), Haryana (18.13 per cent), Bihar (16.56 per cent), Himachal Pradesh (16.37 per cent), Uttarakhand (15.23 per cent), Telangana (11.53 per cent), Uttar Pradesh (10.99 per cent), Karnataka (10.92 per cent), Jharkhand (10.35 per cent), and Punjab (10.14 per cent).

FULL REPORT ON
www.indianexpress.com

- Beneficiaries aged 70 years and above made up over 12 per cent of all admissions under the government's flagship **Ayushman Bharat health insurance scheme**, with their treatment costs accounting for nearly 14 per cent of the total expenditure till January, according to data presented in Parliament by the Union Ministry of Health and Family Welfare.
- Ayushman Bharat Pradhan Mantri Jan Arogya Yojana (AB-PMJAY) was launched on 23rd September 2018.
- AB-PMJAY is the world's largest Government funded health assurance scheme.
- AB-PMJAY provides health assurance of up to Rs.5 Lakh per family per year for secondary and tertiary healthcare hospitalizations.
- There is no cap on family size, or age or gender.
- The beneficiary families under Ayushman Bharat – Pradhan Mantri Jan Arogya Yojana (AB-PMJAY) have been identified from the Socio Economic Caste Census (SECC) of 2011 on the basis of select deprivation and occupational criteria across rural and urban areas

HEADLINES OF THE DAY

Indian Express –Governance(GSII)-Page-25

Bill seeks to expand NDMA role, fails to strengthen its status

AMITABH SINHA
NEW DELHI, AUGUST 6

LAST WEEK, the government introduced a Bill in Parliament seeking to amend the Disaster Management Act, 2005. It proposes to make important changes in the Act, aimed mainly at improving the operational efficiencies in responding to a natural disaster.

The Bill seeks to significantly expand the role and responsibilities of the National Disaster Management Authority (NDMA), especially in guiding state governments and organs of the Centre in dealing with disasters.

However, it misses the opportunity to upgrade and strengthen the institutional status of NDMA. This would have empowered the body to coordinate better with state agencies, and provided it with more financial and human resources.

Significance of the DM Act

The DM Act was enacted in the aftermath of the devastating 2004 tsunami – the idea for such legislation was in the works at least since the 1998 Odisha super cyclone.

The Act led to the creation of the NDMA, SDMAs at the state level, a National Disaster Response Force (NDRF), and a National Institute of Disaster Management (NIDM) – an institute meant for disaster-related research, training, awareness, and capacity building. The Act was followed by a National Disaster Management Policy in 2009 and a National Disaster Management Plan in 2016.

This institutional framework has served India well in dealing with natural disasters. Over the years, it has saved thousands of lives, and provided relief, rescue and rehabilitation services. Growing incidents of natural disasters, exacerbated by climate change, have made agencies such as NDMA more important than ever, requiring the assignment of greater responsibilities and resources.

The proposed amendments

The amendment Bill acknowledges this fact and proposes to make a few important changes to make the Act more effective.

URBAN DISASTER MANAGEMENT AUTHORITIES: The institutional structure for disaster management extends to the district level, and district disaster management authorities are already functional. However, the Bill recognises the special requirements of large metropolitan cities that often comprise multiple districts. In such cities – all state capitals and cities with a municipal corporation – would now also have an Urban Disaster Management Authority, headed by the municipal commissioner. This can help in having a unified and coordinated approach towards city-level disasters such as urban flooding.

EXPLAINED POLICY

SDRF: Although most states have raised their disaster relief forces on the lines of NDRF over the years, an SDRF is not mandated in the 2005 Act. The size and capacity of the SDRFs in the states vary significantly. The Bill proposes to make it mandatory for every state to raise and maintain an SDRF.

NATIONAL CRISIS MANAGEMENT COMMITTEE: NCMC, headed by the Cabinet Secretary, is already functional for handling all kinds of national emergencies, including disasters. The Bill gives legal status to the NCMC, making it the nodal body to deal with disasters with "serious or national ramifications".

ENHANCED ROLE OF NDMA: The role and responsibilities of the NDMA are proposed to be significantly expanded. It has been asked to periodically take stock of the entire range of disaster risks to the country, including risks from emerging disasters.

DISASTER DATABASES: The NDMA is also being asked to create and maintain a national disaster database with information on the assessment of the disaster, fund allocation, expenditure, and preparedness and mitigation plans. The SDMAs will also need to create state-level disaster databases.

COMPENSATIONS: The Bill proposes that the NDMA should recommend guidelines for minimum standards of relief to be provided to people affected by disasters. This includes a recommendation on compensation amounts in case of loss of lives, damage to homes and property, and loss of livelihoods.

MAN-MADE DISASTERS: The Bill seeks to include an important clarification about the definition of disasters. The original Act defined disasters as any "catastrophe, mishap, calamity or grave occurrence in any area, arising from natural or man made causes...". The Bill says the phrase "man-made causes" does not include any law-and-order-related situation. Loss of lives, suffering, or property damage in a riot, for example, would not invoke provisions of this law.

ABSENCE OF VICE-CHAIRPERSON: The NDMA is headed by the Prime Minister as chairperson. A vice-chairperson, in the rank of a Cabinet Minister, is supposed to be responsible for day-to-day functioning. The post of vice-chairperson, however, has been vacant for about a decade. The amendment Bill legitimises this position by allowing for the day-to-day functioning to be carried out by any Member designated by the chairperson or the vice-chairperson.

Unaddressed issues in Bill

Considering its growing role and importance, it has been argued that NDMA be given more powers and elevated to the status of a government department, if not a full-fledged ministry in itself. The NDMA now remains active throughout the year, and has to regularly coordinate with state governments and their agencies. Currently, this is done through the Home Ministry, which is the nodal ministry for the NDMA.

Without a vice-chairperson, the NDMA has been deprived of not just leadership but also the political heft necessary to deal with states and other central government agencies.

The NDMA does not have any administrative financial powers. Routing every small decision through the Home Ministry is an inefficient and time-consuming process. The body is also severely short-staffed at the top, with just three members functioning. It used to once have six to seven members, each in charge of a specific type of disaster.

The amendment Bill ignores these deficiencies for the time being. Some of the other provisions are also likely to face opposition, particularly the ones that deal with changes at the state level.

- the government introduced a Bill in Parliament seeking to amend the Disaster Management Act, 2005. It proposes to make important changes in the Act, aimed mainly at improving the operational efficiencies in responding to a natural disaster.
- The Bill seeks to significantly expand the role and responsibilities of the National Disaster Management Authority (NDMA), especially in guiding state governments and organs of the Centre in dealing with disasters. The amendment Bill acknowledges this fact and proposes to make a few important changes to make the Act more effective. Urban Disaster Management Authorities: The institutional structure for disaster management extends to the district level, and district disaster management authorities are already functional.
- However, the Bill recognises the special requirements of large metropolitan cities that often comprise multiple districts. In such cities — all state capitals and cities with a municipal corporation — would now also have an Urban Disaster Management Authority, headed by the municipal commissioner.

HEADLINES OF THE DAY

Indian Express –Governance(GSII)-Page 25

GST on health insurance

The opposition, and sections of govt, want 18% tax removed. Insurers have hiked premiums up to 50-60% this year. Along with medical inflation, the GST burden is making health insurance unaffordable for many

GEORGE MATHEW
MUMBAI, AUGUST 6

INSURANCE COMPANIES have jacked up premiums on health and life insurance policies this year which, together with the 18% Goods and Services Tax (GST), has made insurance less affordable for many sections of the country's population.

Opposition leaders including Leader of Opposition in Lok Sabha Rahul Gandhi protested at Parliament's Makar Dwar on Tuesday, demanding the withdrawal of GST on life insurance and health insurance premiums. Trinamool Congress MP Derek O'Brien had raised the issue in Rajya Sabha on Monday, and his party chief Mamata Banerjee had threatened to "hit the streets" last week to protest against the "anti-people" tax.

Earlier on July 28, Union Minister of Road Transport and Highways Nitin Gadkari wrote to Finance Minister Nirmala Sitharaman, saying GST on life and medical insurance premiums amounted to taxing the "uncertainties of life". The tax was also "restricting the growth of the industry", Gadkari said.

What is the GST on health and life insurance premiums?

GST replaced all indirect taxes like service tax and cess from July 1, 2017. Currently, GST on health and life insurance policies is

Rahul Gandhi and Sharad Pawar with other opposition MPs demand removal of 18% GST on health/ medical insurance outside Parliament on Tuesday. PTI

GST: HEALTH INSURANCE

Years	Insurance premium	Reinsurance premium
2021-22	5,354.28	825.95
2022-23	7,638.33	963.28
2023-24	8,262.94	1,484.36

lar tax-saving deductions, particularly on life insurance premiums, are Sections 80C and 80D of the Income Tax Act, 1961. Under Section 80C, a customer can avail deductions of up to Rs 1.5 lakh on the overall insurance premium, including the GST applicable on them. If customers opt for a medical rider with their life insurance policies, Section 80D provides for additional deductions on the premium.

Sceptics doubt whether reducing GST

The confederation has pointed out that the GST on insurance in India is the highest in the world – and that the situation needs to be addressed in order to attain insurance regulator IRDAI's goal of "Insurance for All by 2047", which was endorsed by the Standing Committee on Finance in its 66th report submitted to Parliament in February 2024.

This report had recommended rationalisation of the GST rate on insurance products, especially health and term insurance. The high rate of GST results in a high premium burden, which acts as a deterrent to getting insurance policies, it had said.

"The Committee, with a view to make insurance more affordable, recommend that GST rates applicable to health insurance products, particularly retail policies for senior citizens and microinsurance policies (up to limits prescribed under PMJAY, presently Rs 5 lakh), and term policies may be reduced," the report said.

The CEO of a private sector insurer said: "In markets like Singapore and Hong Kong, there is no GST or VAT on insurance. It is a difficult product to sell. People don't want to buy insurance. On that also, whatever insurance they take, you (the government) put an 18% tax... Ideally, you should reduce it..."

How big are the markets for life and health insurance in the country?

The general insurance industry collected

- Insurance companies have jacked up premiums on health and life insurance policies this year which, together with the 18% Goods and Services Tax (GST), has made insurance less affordable for many sections of the country's population.
- Opposition leaders including Leader of Opposition in Lok Sabha Rahul Gandhi protested at Parliament's Makar Dwar on Tuesday, demanding the withdrawal of GST on life insurance and health insurance premiums.

What is the GST on health and life insurance premiums?

- GST replaced all indirect taxes like service tax and cess from July 1, 2017. Currently, GST on health and life insurance policies is fixed at 18%. Since GST encapsulates service tax, which applies to the insurance industry, its introduction has resulted in an increase in premium amounts. Prior to GST, life insurance premiums were subject to 15% service taxes, comprising Basic Service Tax, Swachh Bharat cess, and Krishi Kalyan cess.

HEADLINES OF THE DAY

PIB –IR(GSII)

President's Secretariat

PRESIDENT OF INDIA IN FIJI; HOLDS BILATERAL MEETINGS WITH PRESIDENT AND PRIME MINISTER OF FIJI

FIJI CONFERS ITS HIGHEST CIVILIAN AWARD - COMPANION OF THE ORDER OF FIJI ON PRESIDENT DROUPADI MURMU

ADDRESSES FIJIAN PARLIAMENT; SAID INDIA WILL CONTINUE TO STAND SHOULDER-TO-SHOULDER WITH FIJI AND OTHER OCEAN STATES FOR CLIMATE JUSTICE

ADDRESSES INDIAN COMMUNITY IN FIJI; SAID WE SEE OUR OVERSEAS INDIAN COMMUNITY ACROSS THE WORLD AS IMPORTANT PARTNERS AND STAKEHOLDERS IN THE JOURNEY OF BUILDING THE INDIA OF OUR DREAMS

Posted On: 06 AUG 2024 3:07PM by PIB Delhi

- The Republic of the Fiji Islands, in the southern Pacific Ocean, is located approximately 3 100 km northeast of Sydney, Australia, and approximately 5 000 km southwest of Honolulu, Hawaii.
- It is made up of about 330 islands and about 500 more tiny atolls, islets, and reefs.

HEADLINES OF THE DAY

PIB–Environment(GSIII)

Ministry of Jal Shakti

Four major projects worth Rs. 920 crores operationalized in Uttar Pradesh and Bihar under Namami Gange Mission 2.0

Projects to augment sewage treatment capacity by 145 MLD

Posted On: 06 AUG 2024 5:07PM by PIB Delhi

Four major projects worth Rs. 920 crores operationalized in Uttar Pradesh and Bihar under Namami Gange Mission 2.0

Namami Gange Programme', is an Integrated Conservation Mission, approved as 'Flagship Programme' by the Union Government in June 2014 with budget outlay of Rs.20,000 Crore to accomplish the twin objectives of effective abatement of pollution, conservation and rejuvenation of National River Ganga

★ **Main pillars of the Namami Gange Programme are:-**


Sewerage Treatment Infrastructure


River-Front Development


River-Surface Cleaning


Bio-Diversity


Afforestation


Public Awareness


Industrial Effluent Monitoring


Ganga Gram

HEADLINES OF THE DAY

Air–Economy(GSIII)

RBI Asks Banks To Provide Short Term Crop Loans To Farmers

- In view of the continuation of the Modified Interest Subvention Scheme by the Centre, the Reserve Bank has asked banks to provide short term crop loans and short term loans for allied activities including animal husbandry, dairy, fisheries, beekeeping etc. upto an overall limit of 3 lakh rupees to farmers at an interest rate of 7 percent.
- In a notification, RBI said that the rate of interest subvention to lending institutions will be 1.5 percent for 2024-25.
- RBI has said that an additional interest subvention of 3 percent should be provided to farmers who repay loans in time. RBI has added that Aadhaar linkage would be mandatory for availing the short-term loans.