



Original Research Article

UTILIZATION AND CHALLENGES OF AYUSHMAN BHARAT SCHEME FROM STAKEHOLDERS' PERSPECTIVE: A CROSS-SECTIONAL STUDY

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ABSTRACT

Background: The Ayushman Bharat–Pradhan Mantri Jan Arogya Yojana (AB-PMJAY) is India's flagship publicly funded health insurance scheme aimed at reducing catastrophic health expenditures by providing cashless secondary and tertiary care coverage. Despite extensive implementation, gaps persist in awareness, utilization, and operational challenges among beneficiaries and stakeholders. **Objectives:** To assess awareness and utilization of AB-PMJAY among beneficiaries and to describe satisfaction levels and implementation challenges faced by stakeholders in a tertiary care hospital Setting.

Materials and Methods: A descriptive cross-sectional study was conducted among 150 beneficiaries, 111 healthcare workers, and 9 data operators using a structured questionnaire. Composite scores for awareness, satisfaction, and challenges were generated using median cut-offs. Descriptive statistics were used to present frequencies and percentages.

Results: Adequate awareness regarding AB-PMJAY was observed in 74.7% of beneficiaries. Among those adequately aware, 75% utilized scheme services, with hospitalization being the most commonly used package. Overall, 66.7% beneficiaries reported satisfaction. Moderate to high administrative challenges were reported by 71.2% healthcare workers and 55.6% data operators reported high technical difficulties.

Conclusion: While awareness and utilization of AB-PMJAY were satisfactory, operational challenges among stakeholders persist. Strengthening awareness campaigns, reducing administrative burden, and enhancing digital infrastructure are essential for improving implementation effectiveness.

Keywords: AB-PMJAY, Healthcare Utilization, Stakeholder Perspective, Cross-Sectional Study.

INTRODUCTION

Universal Health Coverage (UHC) is a key global health priority aimed at ensuring that all individuals receive quality health services without suffering financial hardship. In India, high out-of-pocket expenditure has historically been a major contributor to impoverishment, particularly among vulnerable populations. To address this challenge and strengthen financial risk protection, the Government of India launched the Ayushman Bharat Programme in 2018, one of the world's largest publicly funded health

insurance initiatives. The programme comprises two components: Health and Wellness Centres and Ayushman Bharat–Pradhan Mantri Jan Arogya Yojana (AB-PMJAY), which provides cashless secondary and tertiary healthcare coverage of up to ₹5 lakh per family per year for eligible beneficiaries.^[1,2]

Despite its wide coverage and ambitious objectives, the effectiveness of AB-PMJAY depends largely on beneficiaries' awareness, actual utilization of services, and the efficiency of implementation at healthcare facilities. Previous studies across different

states of India have reported high awareness levels; however, utilization remains disproportionately low, indicating the presence of systemic and operational barriers.^[3-5] Inadequate knowledge about entitlements, delays in approval processes, documentation

requirements, and technological issues related to the digital platform have been identified as key challenges affecting optimal utilization of the scheme.^[6,7]

Chhattisgarh, a state with a substantial rural and socioeconomically disadvantaged population, has been an active implementer of AB-PMJAY. However, limited evidence is available from tertiary care settings assessing the scheme from both beneficiary and stakeholder perspectives. The present study was therefore undertaken to assess awareness, utilization, satisfaction, and implementation-related challenges of AB-PMJAY in a tertiary care hospital of Chhattisgarh, contributing evidence toward strengthening health system performance and progress toward UHC.^[9] Most of the studies done on Healthcare workers and patients but Data operators were not included so we included all these three Stakeholders to our study.

Aim & Objectives

Aim

To assess the utilization of Ayushman Bharat–Pradhan Mantri Jan Arogya Yojana and challenges faced by stakeholders in a tertiary care hospital of Chhattisgarh.

Objectives

1. To assess awareness and utilization of Ayushman Bharat–PMJAY among beneficiaries.
2. To assess satisfaction of beneficiaries with services received under the scheme.
3. To describe administrative challenges faced by healthcare workers and technical difficulties experienced by data operators in the implementation of AB-PMJAY.

MATERIALS AND METHODS

A hospital-based descriptive cross-sectional study was conducted in a tertiary care hospital of Chhattisgarh over a period of three months. The study population included beneficiaries enrolled under AB-

PMJAY who attended or were admitted to the hospital during the study period, as well as healthcare workers and data operators involved in the implementation of the scheme.

A total of 270 participants were included using a complete enumeration approach, comprising 150 beneficiaries, 111 healthcare workers, and 9 data operators. Beneficiaries aged 18 years and above who were eligible for AB-PMJAY services and consented to participate were included in the study. Healthcare workers and data operators directly involved in PMJAY-related administrative and technical processes were also included.

Data were collected using a predesigned, pretested, semi-structured questionnaire developed based on AB-PMJAY operational guidelines.^[10] The questionnaire captured information on sociodemographic characteristics, awareness regarding AB-PMJAY and ABHA ID, utilization of services, pattern of services availed, out-of-pocket expenditure, beneficiary satisfaction, and challenges faced by stakeholders. Socioeconomic status of beneficiaries was assessed using the Modified BG Prasad classification (2024 update).^[11]

Awareness scores were generated by assigning codes to correct responses related to scheme knowledge, with cumulative scores categorized as adequate or inadequate awareness. Utilization was assessed based on self-reported availing of any AB-PMJAY service. Satisfaction and challenges were measured using structured response options and categorized into low, moderate, and high levels. Data were entered into Microsoft Excel and analyzed using SPSS version 26.0. Descriptive statistics such as frequency and percentage were used to summarize the data. Informed written consent was taken from all participants prior to data collection.

RESULTS

A total of 270 participants were enrolled in the study, including 150 beneficiaries, 111 healthcare workers, and 9 data operators. Among beneficiaries, the majority belonged to the 41–60 years age group, were male, resided in rural areas, and belonged to middle and lower-middle socioeconomic classes as per Modified BG Prasad classification. The Distribution of beneficiaries is shown in Table 1.

Table 1: Sociodemographic profile of beneficiaries (n = 150)

Variable	Frequency (n)	Percentage (%)
Age (years)		
18–40	42	28
41–60	67	44.7
>60	41	27.3
Gender		
Male	82	54.7
Female	68	45.3
Residence		
Rural	96	64
Urban	54	36
Socioeconomic class (Modified BG Prasad)		
Class I	10	6.7

Class II	26	17.3
Class III	58	38.7
Class IV	34	22.7
Class V	22	14.6

Adequate awareness regarding Ayushman Bharat–PMJAY was observed among nearly three-fourths of beneficiaries, while awareness regarding ABHA ID was comparatively lower, with only about half of the participants reporting awareness. Among beneficiaries who were adequately aware of AB-PMJAY, three-fourths had utilized scheme services, whereas a quarter had not availed any benefit despite being aware of the scheme.

Hospitalization was the most common pattern of service utilization under AB-PMJAY, followed by surgical and day-care procedures. A small proportion of beneficiaries reported out-of-pocket expenditure despite availing services under the scheme. Overall utilization of AB-PMJAY services was observed in approximately two-thirds of beneficiaries.

Table 2: Awareness of Ayushman Bharat–PMJAY among Beneficiaries (n = 150)

Variable	Frequency (n)	Percentage (%)
Adequate awareness of PMJAY	112	74.7
Inadequate awareness	38	25.3
Awareness of ABHA ID	79	52.7
Not aware of ABHA ID	71	47.3

Table 3: Utilization Pattern and Satisfaction under AB-PMJAY (n = 150)

Variable	Frequency	Percentage (%)
Overall Utilization		
Utilized PMJAY services	104	69.3
Not utilized	46	30.7
Type of Service Availed (n=104)		
Hospitalization	60	57.7
Surgical procedure	27	26
Day-care procedure	17	16.3
Out-of-Pocket Expenditure		
Yes	16	10.7
No	134	89.3
Satisfaction Level		
Satisfied	100	66.7
Not satisfied	50	33.3

Regarding satisfaction, about two-thirds of beneficiaries reported being satisfied with the services received under AB-PMJAY, while a smaller proportion expressed dissatisfaction. Among healthcare workers, nearly half reported experiencing moderate administrative challenges, and about one-fourth reported high levels of challenge. More than half of the data operators reported high technical difficulties related to documentation and digital platform operation.

Table 4: Challenges faced by Stakeholders under AB-PMJAY

	Frequency (n)	Percentage (%)
Level of Administrative Challenges faced by Healthcare workers (n=111)		
Low	32	28.8
Moderate	50	45.1
High	29	26.1
Level of Technical difficulties faced by Data operators (n=9)		
Moderate	4	44.4
High	5	55.6

DISCUSSION

The present study highlights a relatively high level of awareness regarding AB-PMJAY among beneficiaries; however, awareness did not uniformly translate into utilization, consistent with findings from studies conducted in other parts of India.^[3-5] The observed gap between awareness and utilization underscores the importance of addressing operational and access-related barriers that prevent eligible beneficiaries from availing services.

Hospitalization emerged as the predominant mode of utilization, which aligns with the core objective of AB-PMJAY to provide financial protection for secondary and tertiary care. Similar utilization patterns have been reported in earlier studies, where inpatient services accounted for the majority of claims.^[4] The presence of out-of-pocket expenditure among a subset of beneficiaries, despite scheme coverage, remains a concern and has also been documented in previous research.^[13] Beneficiary satisfaction in the present study was moderate to high, reflecting acceptable service

delivery in the tertiary care setting. Comparable levels of satisfaction have been reported in other studies, suggesting that while the scheme provides financial protection, improvements in service processes and communication are still needed.^[8] From the stakeholder perspective, healthcare workers and data operators reported moderate to high administrative and technical challenges. Issues related to documentation, workload, and digital platform functionality have been widely reported and may adversely affect scheme efficiency if not addressed.^[6,7,12] Strengthening digital infrastructure, capacity building, and simplification of administrative procedures are essential for improving implementation effectiveness.

Overall, the findings suggest that while AB-PMJAY has made significant progress toward improving access to healthcare services, targeted interventions are required to enhance utilization, reduce out-of-pocket expenditure, and address operational challenges, particularly in resource-constrained settings like Chhattisgarh.

Public financing of healthcare in India has improved over the past decade; however, challenges related to equitable access, service quality, and efficient implementation persist, particularly in resource-constrained settings.^[15] Publicly funded health insurance schemes, including PMJAY, have demonstrated potential in improving healthcare utilization among economically vulnerable populations, though regional variations remain.^[16]

CONCLUSION

The study demonstrates that awareness of Ayushman Bharat-PMJAY among beneficiaries in a tertiary care hospital of Chhattisgarh is relatively high; however, utilization does not fully correspond to awareness levels. Hospitalization remains the primary mode of service utilization, with limited use of day-care procedures. Although the majority of beneficiaries reported satisfaction with services, the persistence of out-of-pocket expenditure indicates gaps in financial protection.

Administrative and technical challenges reported by healthcare workers and data operators highlight critical areas requiring system strengthening. Addressing these challenges through improved digital infrastructure, streamlined administrative processes, and continuous capacity building is essential for optimizing scheme performance. Strengthening awareness initiatives, particularly regarding ABHA ID, and enhancing beneficiary support mechanisms may further improve utilization and satisfaction. Overall, AB-PMJAY holds substantial potential to advance Universal Health

Coverage, but sustained efforts are needed to maximize its impact at the ground level.

Limitations

The study was conducted in a single tertiary care hospital, which may limit the generalizability of findings to other healthcare settings. Self-reported data may be subject to recall and social desirability bias. Additionally, the descriptive study design limits causal inference. Future multicentric and longitudinal studies are recommended to assess long-term outcomes and impact of AB-PMJAY across different levels of healthcare.

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