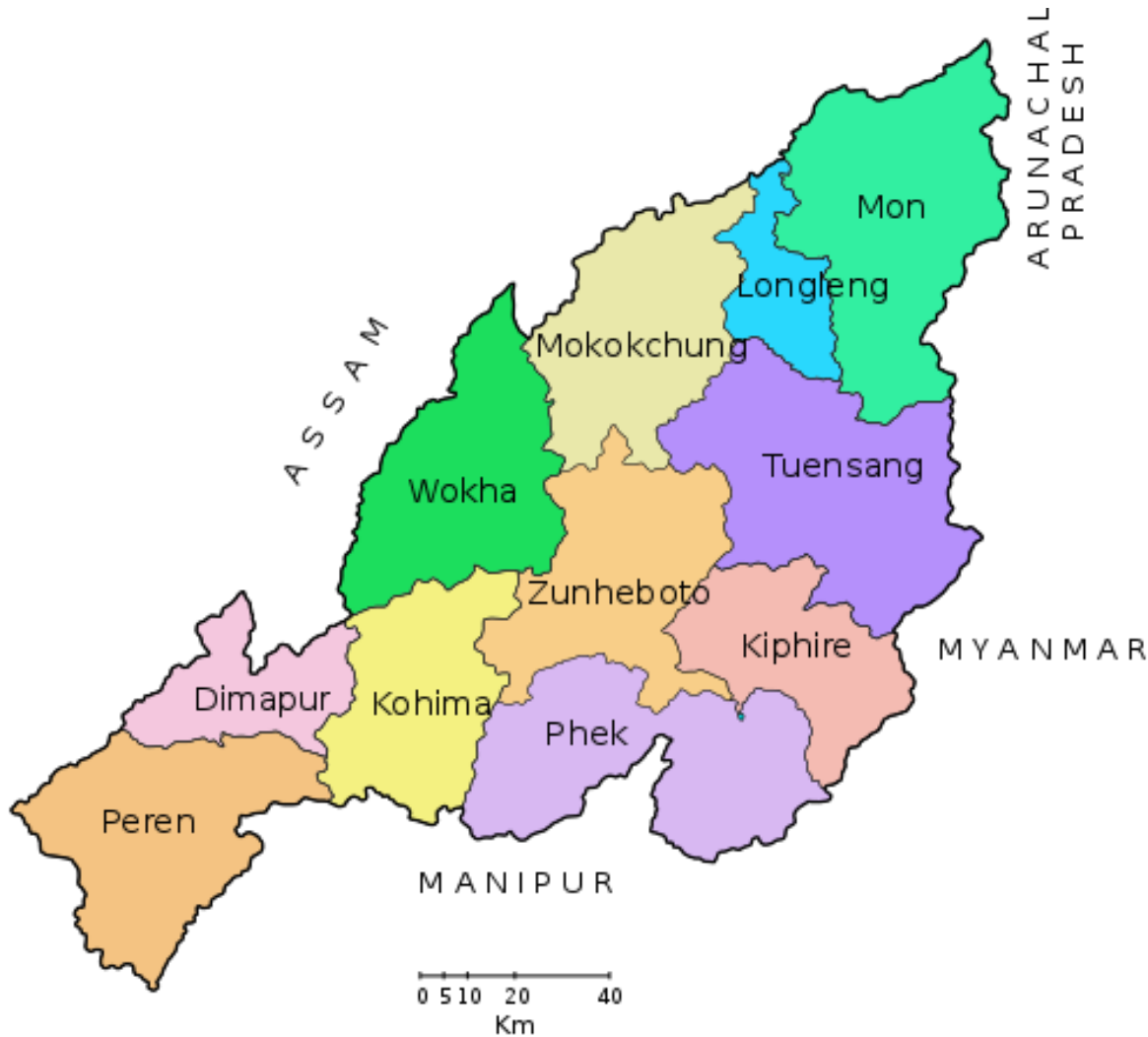


Universal Health Coverage and Health Benefit Package: **Nagaland State**

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At a glance: Nagaland



Population	19,78,502
Density of Population	119/km
Rural Population	71.14%
Sex Ratio	931
ST population	86.48%
Literacy Rate	80%
HDI	0.770 (high)
Life Expectancy	F: 74.5 yrs M: 69.1 yrs

Key Health Indicators

Indicators	Nagaland	India
Infant Mortality Rate (SRS 2016)	12	34
Maternal Mortality Ratio (SRS 2016)	115	167
Under 5 Mortality Rate (Census 2011)	84	80
Child Sex Ratio (Census 2011)	943	918
Total Fertility Rate (<i>NFHS 4</i>)	2.7	2.2
Fully Immunized Children of age 12-23 months (<i>NFHS 4</i>)	35.7	62.0
Total Unmet Need (%) (<i>NFHS 4</i>)	22.2	12.2
Mothers who had full antenatal care (%) (<i>NFHS 4</i>)	15	51.2
Institutional births (%) (<i>NFHS 4</i>)	32.8	78.9

Health Infrastructure

DH	CHC	PHC	SHC	BD	SC	TB&CDH	SMHI	Total
11	25	138	1	2	559	2	1	739

State Health Financing

- Nagaland spent 5.59% of its total state expenditure on health.
- State Government's health expenditure per capita stood at Rs. 2450/- as compare to National Average of Rs. 1112/-

Source: National Health Profile 2018

Out of Pocket Expenditures on Healthcare (OOPE) :

Avg OOPE per Delivery in PHI

Nagaland	India
Rs. 5834.00	Rs. 3189.00

Source: NFHS IV

Hospitalization Expenditure (excluding child birth) (In Rs.)

Nagaland		India	
Rural	Urban	Rural	Urban
4392	15618	14473	21985

Source: NSSO 71st Round, 2015

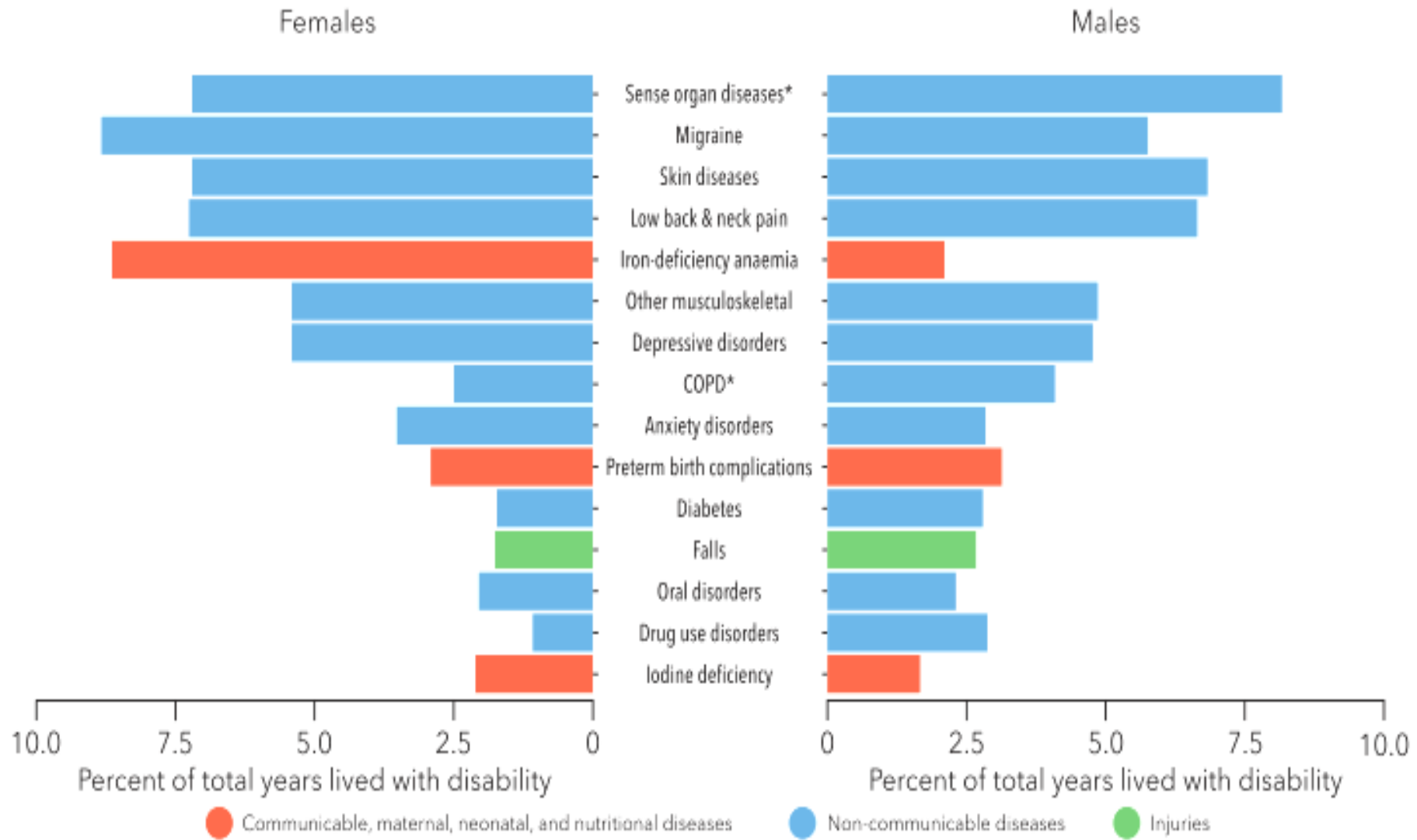
Catastrophic OOPE

Nagaland	India
6.3%	18%

What caused the most years lived with disability, by sex, in 2016?

Top 15 causes of YLDs, ranked by percent for both sexes combined, 2016

Source:
India: Health of the Nation's States, 2017



*COPD is chronic obstructive pulmonary disease.

*Sense organ diseases includes mainly hearing and vision loss.

How have the leading causes of death and disability combined changed from 1990 to 2016?

Change in top 15 causes of DALYs, both sexes, ranked by number of DALYs, 1990-2016

● Communicable, maternal, neonatal, and nutritional diseases
 ● Non-communicable diseases
 ● Injuries
 — same or increase
 decrease

Leading causes of DALYs 1990

- 1 Lower respiratory infections [11.3%]
- 2 Diarrhoeal diseases [7.9%]
- 3 Tuberculosis [4.8%]
- 4 Preterm birth complications [4.1%]
- 5 Measles [3.7%]
- 6 Intestinal infectious diseases [2.9%]
- 7 Hepatitis [2.6%]
- 8 Stroke [2.5%]
- 9 Ischaemic heart disease [2.5%]
- 10 Malaria [2.4%]
- 11 Neonatal encephalopathy [2.4%]
- 12 Tetanus [2.4%]
- 13 Neonatal haemolytic disease [1.9%]
- 14 COPD[†] [1.8%]
- 15 Other neonatal disorders [1.7%]
- 16 Road injuries [1.7%]
- 17 Sense organ diseases[‡] [1.6%]
- 21 Skin diseases [1.5%]
- 22 Low back & neck pain [1.5%]
- 24 Migraine [1.4%]
- 26 Iron-deficiency anaemia [1.2%]
- 34 HIV/AIDS [0.1%]

Leading causes of DALYs 2016

- 1 Ischaemic heart disease [4.6%]
- 2 Lower respiratory infections [4.3%]
- 3 Stroke [3.9%]
- 4 HIV/AIDS [3.1%]
- 5 Sense organ diseases[‡] [3.0%]
- 6 Tuberculosis [3.0%]
- 7 Preterm birth complications [2.9%]*
- 8 Skin diseases [2.9%]
- 9 Migraine [2.8%]
- 10 Road injuries [2.8%]
- 11 Low back & neck pain [2.7%]
- 12 COPD[†] [2.6%]
- 13 Iron-deficiency anaemia [2.1%]
- 14 Intestinal infectious diseases [2.1%]
- 15 Diarrhoeal diseases [2.1%]
- 21 Hepatitis [1.5%]
- 22 Neonatal encephalopathy [1.4%]*
- 24 Malaria [1.3%]*
- 31 Other neonatal disorders [1.0%]*
- 44 Neonatal haemolytic disease [0.6%]
- 57 Measles [0.5%]
- 68 Tetanus [0.1%]

Source:

India: Health of the Nation's States, 2017

AB-PMJAY

- Nagaland launched the PMJAY programme in the state on the *23rd of September 2018*, along with the rest of the country.
- Nagaland has opted to implement PMJAY in *Insurance* mode, partnering with Apollo Munich Health Insurance Pvt Ltd.
- The Premium is at **Rs. 444.00**
- Total Targeted beneficiary households about **2.33** Lakh based on SECC 2011 database and existing RSBY beneficiaries.
- The state does not have any other separate publicly funded insurance scheme for the general population.

AB-PMJAY: EHCPs

- For effective implementation of the Mission, all public hospitals with inpatient facilities from Community Health Centre (CHC) are being empanelled.
- In order to take the facility closer to the people thereby reducing the burden of travelling to distant health facilities, and to avoid congestion of the higher hospitals, the empanelment is being extended to functional PHCs in phase manner.
- **59** hospitals have been empanelled till date: **54** public hospitals including **21** PHCs and **5** private hospitals.

AB-PMJAY: Packages

- Packages Notified NHA : **1393**
- Packages Notified State: **141**
- Total: **1534**
- No Package is Reserved.
- Performance Linked Incentive for Private EHCP within State: 10% above Base Package Rate.

Speciality Code	Speciality Name	No of Packages Notified by NHA	No of Packages Notified by SHA	Total No of Packages
M1	General Medicine	42	73	115
S1	General Surgery	55	253	308
S3	Ophthalmology	5	42	47
S4	Obstetrics & Gynaecology	16	79	95
S5	Orthopaedics	23	101	124
Total		141	548	689

Thank You