

## MUKHYA MANTRI CHIRANJEEVI SWASTHYA BIMA YOJANA IN JAIPUR DISTRICT, RAJASTHAN: SPECIAL REFERENCE WITH COVID-19 PANDEMIC

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### ABSTRACT

*The Chiranjeevi Swasthya Bima Yojana was established in Rajasthan in the year 2021 with the purpose of providing health insurance for critical diseases and for managing the pandemic crisis with covid-19. The purpose of this research was to determine how aware individuals in the Jaipur district are of this plan as well as their perceptions about it. Methodology: The type of the research study is descriptive. Primary data were gathered using structured questionnaires and telephone interviews, while secondary data were gathered from the website of the Rajasthan Government. Both primary and secondary data were used to compile the findings of the research. The approach is often used for the examination of data. According to the findings of the research study, the largest proportion of the people in the Jaipur district of Rajasthan is familiar with the Chiranjeevi Swasthya Bima Yojana. Only a very small percentage of participants in this yojana consider themselves to have benefited from it.*

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**Keywords:** Covid-19, Mukhya Mantri Chiranjeevi Swasthya Bima Yojana, Awareness, Observation.

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### Introduction

Mukhya Mantri Chiranjeevi Swasthya Bima Yojana is the name given to the universal health insurance programme that has been implemented by the government of Rajasthan in order to achieve the aim of "health for all." This programme provides cashless insurance for those who participate in the universal health insurance programme. As part of the Rajasthan State Budget 2021-22, the Chief Minister Health Insurance Scheme was introduced to the general public with the goal of improving access to medical care for the population. This programme began on April 1, 2021, with the primary objective of providing health insurance to people of all social groups for the treatment of major illnesses, such as the Covid-19 pandemic, at hospitals run by the government as well as those run privately. On the first of May 2021, which was celebrated as International Workers' Day, the programme officially began its operations with the goal of improving everyone's health.

During the pandemic, this Yojana is expected to provide patients with the necessary security measures to protect them. The cashless insurance and coverage of Rs. 5 lac are provided to each household in the state through the plan that costs Rs. 3,500 crore. This approach would assist provide social security for disadvantaged parts of society and narrow the gap between rich and poor. According to this theory, all members of society have the legal right to maintain their own health. Free medical care of up to 5 lacs will be provided by this yojana to patients at all government and licenced private hospitals in the state. The following is a list of the objectives and advantages of the Mukhyamantri Chiranjeevi Swasthya Bima Yojana:

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- If you participate in this program, the state government of Rajasthan will provide you Rs 50,000 in the event of a general illness and Rs 4.50 lacs in the event of a hazardous condition. Both of these benefits are free of charge. The general population is going to reap the benefits of around 1576 medical examinations thanks to this plan.
- This plan will not only pay for the medical treatment that is given by the hospital, but it will also pay for the medical care that is provided to patients in the five days leading up to their hospitalization and in the 15 days after they have been released from the hospital. People who have already enrolled for the Mahatma Gandhi Aayushman Bharat Swasthya Bima Yojana are not need to do so again for the Mukhya Mantri Chiranjeevi Swasthya Bima Yojana.
- Not only are registration camps held at gramme panchayats, but they are also held at the ward level in the urban centres of these cities.
- Participants may register for the programme at no cost at any e-Mitra, and the state government of Rajasthan will reimburse all fees associated with the process.
- To reduce the amount of money that families who qualify will have to pay out of pocket for their health care.
- To ensure that eligible families get high-quality, specialised medical care via the yojana's network of government and private facilities.
- To provide free medical care for illnesses that are connected to the package that is described in the program for state families that qualify for it.

Criteria for participation in the Mukhya Mantri Chiranjeevi Swasthya Bima Yojana are as follows:

- Families who qualify under the federal Food Security Act.
- Families that are eligible for the 2011 Socio Economic Census.
- Workers employed under contract by the different state agencies.
- Beneficiaries of this insurance program might include agriculturists working on a small or marginal scale.

Participants who fall into any of the aforementioned categories may take part in the program without having to pay any additional fees or making any further financial commitments. Families who do not fall into these four categories but are qualified according to Union and State Government rules for Mediciam may join by paying half of the premium, or 850 rupees per year, in return for cashless treatment of up to 5 lakh rupees worth of medical. Families that do not fall into any of these four categories but are eligible according to the guidelines established by the Union and State Governments for Mediciam can participate in the program. Families who do not fall into any of these four categories but nevertheless meet the requirements outlined by the federal and state governments for participation in the Mediciam program are welcome to take part in the initiative. To far, around 1.31 crore households have enrolled in the ambitious Chief Minister Chiranjeevi Health Insurance Scheme that is being offered by the state government of Rajasthan. This scheme would make it possible for every family to get free medical care. You will be able to obtain treatment without having to pay out of pocket at any of the hospitals that are participating in this programme. In light of the recent developments, the number of services included in the package has been raised from two to three, and the price has been raised from five thousand dollars per day to nine thousand and nine hundred dollars per day. The plan addresses a wide range of disorders. Additionally, it includes coverage for COVID-19 and hemodialysis for those with modest incomes. OPD facilities have been made cashless in Rajasthan, making it the first state to do so. Under the aegis of this programme, a grand total of 5.86 crore rupees has been contributed. This programme has so far enrolled 1.32 crore families and has been beneficial to more than 20,000 homes already. The government employees are not eligible to participate in this programme. They would be eligible for cashless insurance that is quite similar to that which is subsidised by the federal government, and the state government is working on getting it ready to roll out as part of the Rajasthan Government health system.

### Review of Literature

**Deepak Varshney (2020)** The Garib Kalyan Yojana Mitigate COVID-19 shocks in the agriculture sector were the primary focus of the research. According to the findings of the research, 95% of small holders were able to obtain support from at least one of the PMGKY scheme's components.

**Sanjay Kumar Kulshreshtha & V K Tiwari (2018)** The Bhamashah Swasthya Bima Yojana served as the basis for this investigation. The information obtained from this research was analysed, and the findings comprised both quantitative and qualitative pieces of information. One hundred different patients made up the sample. According to the findings of the study, the approach and methods that were used to fulfil the prerequisites of universal healthcare were sufficient.

**Rasida Begum & G. Albin Joseph (2017)** Investigate how the Janani Suraksha Yojana affects the well-being of expectant mothers in the Karimganj area. The research had a descriptive character, and the data collection was done using primary and secondary sources. The study included a total of 373 respondents as its sample size. For the analysis of the data, SPSS was used. The results of the research showed that there was a positive association between the weight of the respondents and the weight of the infants that were born in the respondents' most recent pregnancies.

**Richa Tibrewal (2017)** a study of the Swasth Seva Yojana and a discussion on how the combination of information technology with health systems can provide us with a stronger basis for efficient administration by citing the efforts that are now being made in the state of Rajasthan in India. According to the conclusions of the research, there is an ongoing need to improve unfavourable health outcomes through expanding access to the healthcare system.

**Vijay Laxmi Gupta (2015)** The health situation in Rajasthan, which is an important part of the state's overall development, has been the primary focus of this research, which relied on secondary sources for its findings. According to the findings of the research, a healthy population is associated with higher levels of economic growth.

**Dr. Neelam Kalla (2015)** investigated the factors that lead people to use the services offered by the family welfare and healthcare programmes offered by the Government of Rajasthan. The gathering of information is accomplished using primary as well as secondary sources, and the number of respondents sampled using the approach of purposive sampling is set at 250. For the purpose of data analysis, SPSS16 and descriptive statistics were used. People have taken advantage of the services provided by the government, but there are a number of factors that have been identified as obstacles. These factors include illiteracy, a lack of awareness, and psychographic barriers, all of which have prevented people from taking advantage of government initiatives.

#### **Objectives**

- To investigate the level of Mukhya Mantri Chiranjeevi Swasthya Bima Yojana awareness in the Jaipur district
- To learn how the Jaipur district's residents feel about the Yojana

#### **Significance of the Study**

This study will add to the little amount of previous research that has been done. The general community will also have the opportunity to improve their health care and get educated about the advantages of the programme thanks to the research. The results of the research provide residents of Rajasthan with information on whether or not choosing to participate in the plan is beneficial.

#### **Methodology**

- **Research Design and Procedure:** The exploratory element of the research design is first followed by a transition into a more descriptive mode as the investigation moves forward.
- **Sources of Data Collection:** The study included primary and secondary sources. Primary data comprises a structured questionnaire with multiple-choice questions, a telephone interview, and secondary data from websites, published material, newspapers, articles, and research publications. Primary data collection comprises a multiple-choice questions questionnaire.
- **Sampling Unit and Sample Size:** Primary and secondary sources were explored for this study. Primary data collection includes a structured questionnaire with multiple choice questions, a telephone interview, and secondary data from websites, published material, newspapers, articles, and research publications. Collecting primary data. Main data collection will comprise a multiple-choice questionnaire.
- **Sampling Technique:** In this particular research, a sample method known as convenience sampling was used.

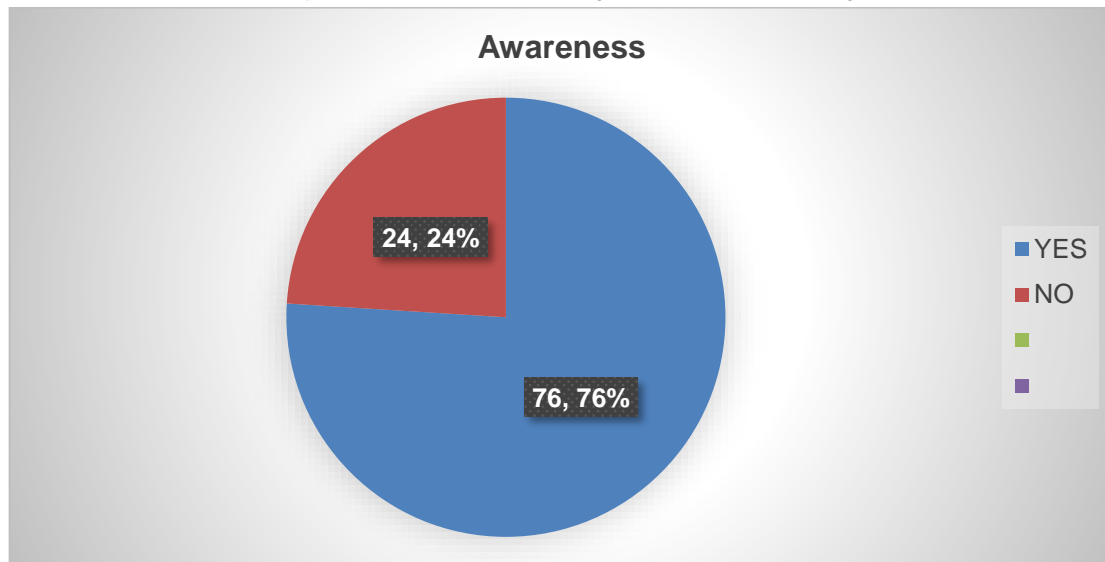
### Data Interpretation and Result

Following the completion of the data collection stage, it is necessary to analyze and interpret the information gleaned from the various respondents' questionnaires. The analysis of the primary data included utilizing the percentage technique and looking at the information presented in diagrams like pie diagrams and bar graphs. The following aspects are investigated: -

**Table 1: Profile of the Respondents' Demographics**

S. No.	Gender	Frequency	Percentage
1	Female	52	42%
2	Male	73	58%
	Total	125	100%
	<b>Age</b>		
3	18-25	34	27%
4	26-50	83	66%
5	50 Above	8	7%
	Total	125	100%
	<b>Awareness</b>		
6	Yes	92	74%
7	No	33	26%
	Total	125	100%

Table 1 shows the factors that responders evaluate are described. It has also been done to further divide the group into three parts. According to the data's interpretation, people between the ages of 26 and 50 have the greatest awareness levels, while those beyond 50 have the lowest levels. A total of 125 respondents were surveyed, with 42% of them being women and 58% being men.

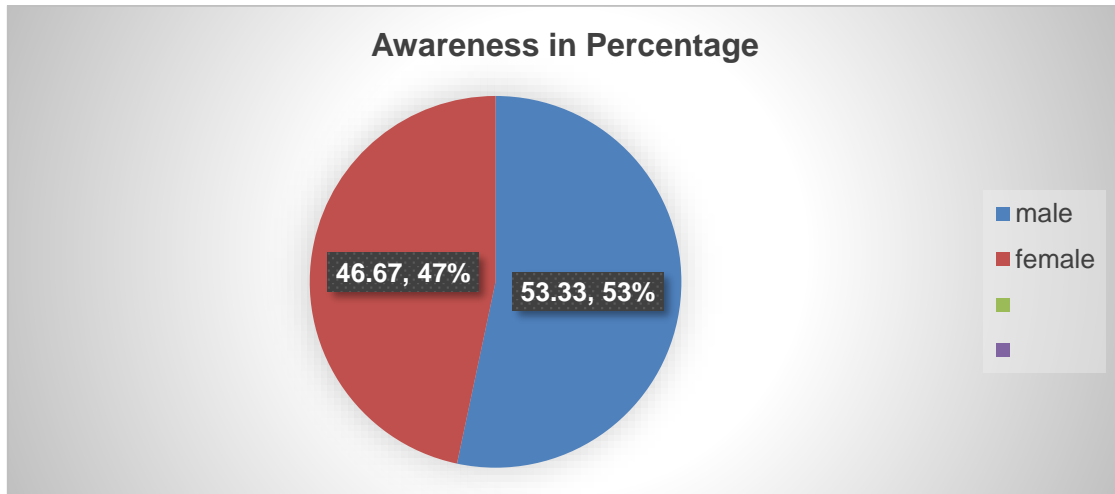


**Figure 1: Awareness**

According to the figure 1 that was just presented, the total number of responders can be broken down into two distinct groups: Yes, No. In the Jaipur district, 76 percent of people are aware of the scheme out of the total respondent population, while the remaining individuals are not aware of the scheme.

**Table 2: Awareness among Female and Male**

Awareness	Yes	Percentage
Male	56	53.33%
Female	49	46.67%
Total	105	100%

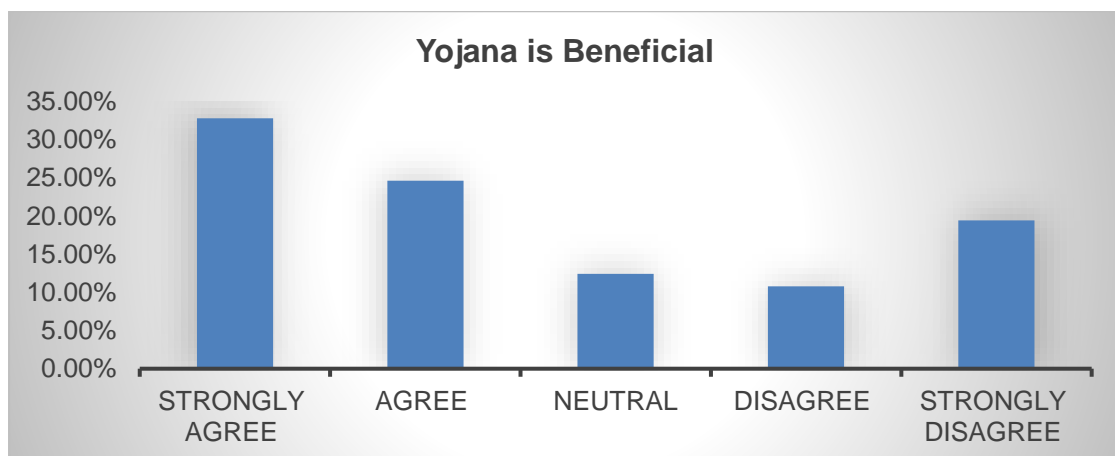


**Figure 2: Awareness in Percentage (%)**

Table 2 and Figure 2 show the percentage of men who are aware of the plan is 53.33 percent, whereas the percentage of total females who are aware of the programme is 46.67 percent. Therefore, it is abundantly obvious that men, in comparison to females, have a far greater awareness of the plan.

**Table 3: CSBY is Beneficial**

Yojana is Beneficial	Percentage
Strongly Agree	32.8%
Agree	24.6%
Neutral	12.4%
Disagree	10.8%
Strongly Disagree	19.4%



**Figure 3: Yojana is Beneficial**

Table 3 and Figure 3 describe how about 19.4 percent of people are adamant in their view that this yojana will not be helpful to them, while approximately 32.8 percent of people are adamant in their belief that this yojana will be advantageous to them.

**Findings**

- Only a tiny portion of the total population does not understand the concept behind the system.
- Despite knowing about the initiative, just a small fraction of responders have signed up.

- According to the results, just around 32 percent of respondents think that this method is helpful to them, while about 19.4 percent of respondents disagree. Describe how roughly 19.4% of people are certain that this yojana will not be helpful to them, while approximately 32.8 percent of people are certain that this yojana will be good to them.
- According to the previous view, men in general have a higher level of awareness than women do.
- During the course of the phone discussion, respondents who wished to maintain their anonymity said that large private hospitals do not genuinely communicate with their patients. The Chief Minister Chiranjeevi Swasthya Bima Yojana card would not even be recognized as a result of this development.

### Conclusion

Although anecdotal evidence suggests that the majority of the people is aware of the Mukhya Mantri Chiranjeevi Swasthya Bima Yojana, the programme has not been successful in providing the level of health coverage that was promised. In this setup, men have a higher level of awareness than females do. The majority of large private hospitals are not showing any signs of collaboration with the initiative. The government need to conduct an investigation into the matter and then set stringent regulations on hospitals. This is essential to guarantee that the repercussions of the programme are comprehended in order for the general public to reap the benefits of the plan.

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