



International
Labour
Organization

Report launch & Panel discussion

Accessing health benefits under the ESI Scheme:

A demand-side perspective

18 April 2022, 3.00 PM – 4.30 PM [IST] | Online

Concept Note

The ILO project [“Technical support to Employees’ State Insurance Corporation of India for improving and expanding access to health care services in India – A transition to formality”](#) (ILO-ESIS project), supported by the Bill & Melinda Gates Foundation (BMGF), is organizing a panel discussion to launch its report on ‘Accessing Health Benefits Under the ESI Scheme: A Demand-side Perspective’ on 18 April 2022, 3.00 PM to 4.30 PM IST.

Background

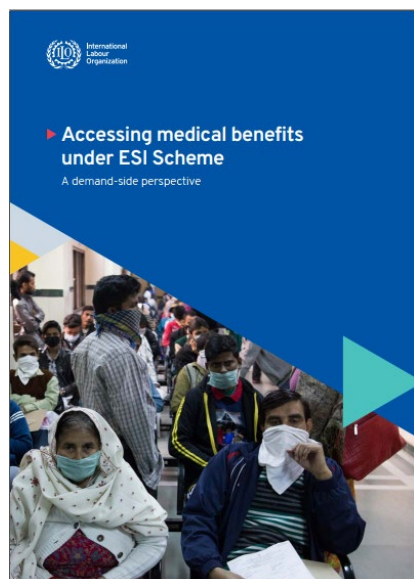
Employees’ State Insurance Scheme (ESIS)

India’s Employees State Insurance (ESI) Scheme is one of the oldest and the largest social health insurance (SHI) schemes for formal sector workers worldwide. Currently, the ESIS covers 35 states and union territories spanning 566 districts. It covers about 34 million employees, with a beneficiary population of over 132 million. Its comprehensive benefits include inpatient/outpatient and preventive services. Its other social security cash benefits include supporting maternity, sickness, disability, unemployment, etc. ESIS is implemented in non-seasonal units that employ 10 or more persons in factories and other service sectors including shops, hotels, restaurants, cinemas, etc. The monthly income of employees eligible to avail scheme benefits should be ≤ Rs. 21,000. Contributions are made by employers, employees, and state governments. The ESIC operates its own hospitals and dispensaries, besides purchasing curative care from private health facilities for hospitalization and outpatient services through the empanelled IMPs (Insurance Medical Practitioners).

Challenges in Accessing ESIS Benefits

The ESI Scheme has shown tremendous growth in coverage over the last decade. During the same time, the ESIC has been implementing a number of measures to improve the adequacy of benefits with the increased coverage. However, ESI stakeholders have reported several weaknesses and gaps that persist. The population coverage is lesser than the potential ESI Scheme holds. The service coverage is still inadequate in many areas leading to underutilization of its facilities, weak access to facilities, and unavailability of defined packages. Despite the Scheme’s wider scope of cost coverage, beneficiaries continue to spend out-of-pocket and receive far fewer cash benefits than their potential. In the past, the government’s audit reports, parliamentary committees, and other peer-reviewed articles have pointed to systemic weakness and poor performance of the system. Evidence from the field has largely corroborated the issues around the supply side, the evidence is scarce on the demand side. Some micro studies have described local level experience of beneficiaries in accessing ESI benefits. In this backdrop the present ILO report aims to offer substantive evidence and insights on demand-side factors that require attention to strengthen the ESI Scheme.

Report launch | Accessing health benefits under the ESI Scheme: A demand-side perspective



The ILO in India, through the ILO-ESIS project, has been providing technical support to the Employees’ State Insurance Corporation (ESIC) to strengthen its health services while increasing coverage and financial protection of working people in India. As part of this project, based on inputs from organizations of employers and workers, the ILO has carried out the present study titled, “Accessing Medical Benefits Under ESI Scheme: A Demand-side Perspective” in 2020-21. The present study brings together comprehensive primary evidence from four states of India, Jharkhand, Haryana, Tamil Nadu, and Rajasthan. It is supplemented by an analysis of relevant secondary data, to identify obstacles and incentives faced by beneficiaries in accessing ESIS services.


The evidence in this study captures the health-seeking behaviour of beneficiaries as well as awareness and attitude of the insured persons and employers registered with the ESIS. The findings of this study underscore differential experiences and perceptions of beneficiaries in diverse implementation context of four states of India. The study highlights that while the ESIS beneficiaries appreciate the extensive benefit package, especially the medical benefits, there is still substantial scope of strengthening the effectiveness of the service delivery. At the same time, the




beneficiaries themselves would gain from stronger awareness of their entitlements under ESIS. An important area of focus for increasing overall service utilization would be the provision of primary healthcare services. ESIS offers better financial protection than other similar schemes in India. However, it can contribute in a much larger way to India’s goal of Universal Health Coverage by increasing out-patient and in-patient healthcare service utilization at its facilities. One way to do this, as the study indicates, would be to actively track and improve the levels of beneficiary satisfaction.

The ILO will launch the full report containing details of the above findings and more, in this online event.

Panel discussion

Key findings of the ILO report will be discussed by a panel consisting of representatives of workers’ and employers’ organizations and the ESIC. The discussion is expected to throw light on the views of the direct stakeholders of the ESI Scheme, on the incentives and obstacles that presently hamper the Scheme’s effective reach. It will also be an opportunity to understand the ESIC’s recent initiatives on addressing the obstacles and incentives for the stakeholders.

Report Presentation		
	<p>Dr. Sakhivel Selvaraj <i>Director, Health Economics, Financing and Policy</i> Public Health Foundation of India (PHFI), New Delhi</p>	<p>The lead author of the report, Dr. Selvaraj is currently engaged in research, teaching and advocacy in the area of health systems, and in specific, health care financing and access to medicines. He was a Takemi Fellow (Post-Doctoral Fellow at Harvard School of Public Health, Boston, US) and a Fulbright Scholar during 2006-07. He has a Ph.D. in Health Economics (1996-2001) from Jawaharlal Nehru University, New Delhi.</p>

Panel Members			
	<p>Dr. R. K. Kataria <i>Medical Commissioner (Ayush)</i> ESIC Hqrs.</p>		
	<p>ILO Constituent <i>representing</i> Employers' Organizations</p>		<p>ILO Constituent <i>representing</i> Workers' Organizations</p>
<p>Moderator: Vaibhav Raaj, National Project Coordinator, ILO</p>			

Agenda

► Timing	► Agenda	► Contributors
3.00 – 3.05	Welcome Note	Dagmar Walter <i>Director, ILO</i>
3.05 – 3.10	Opening Remarks	Mukhmeet S. Bhatia <i>Director General, ESIC</i>
3.10 – 3.15	Introduction to the Report	Mariko Ouchi <i>Senior Technical Specialist on Social Protection, ILO</i>
3.15 – 3.20	Report Launch	
3.20 – 3.45	Presentation of key findings	Dr. Sakthivel Selvaraj, PHFI
3.45 – 3.55	ESIC views	Dr. R. K. Kataria, Medical Commissioner (Ayush), ESIC Hqrs.
3.55 – 4.05	Employers' views	ILO Constituent
4.05 – 4.25	Workers' views	ILO Constituents
4.25 – 4.30	Closing remarks	Mukhmeet S. Bhatia <i>Director General, ESIC</i> Mariko Ouchi <i>Senior Technical Specialist on Social Protection, ILO</i>

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