

Concept Note on Chief Minister's Health Insurance Scheme (CMHIS)

Introduction:

As a step towards fulfilling the vision to prevent financial hardships or impoverishment due to healthcare expenditure or barrier to access healthcare because of unaffordability, the Government of Nagaland initiated the Chief Minister's Health Insurance Scheme (CMHIS) in 2022 to extend health insurance coverage to citizens who were not covered under AB PM-JAY and to further progress towards achieving Universal Health Coverage by covering all citizens of the state.

Further, the scheme will integrate the fragmented health protection landscape under a single umbrella with standardize & efficient scheme design covering all citizens of the State while promoting access to quality healthcare ensuring as well as ensuring maintenance of entitlement of benefits for different beneficiary group- unlimited benefit for Govt Employees, etc within the available financial resources.

As a UHC scheme, it is also envisaged that by providing Aadhar linked Card to each beneficiary individual, population database would be cleansed thereby by promoting better planning and designing as well as implementation of various schemes.

Through the schemes, public hospitals can leverage the claims amounts for hospital development and strengthening to enhance delivery of quality healthcare services. As CMHIS provides a competitive package rates as well as incentives for quality accreditations, many hospitals of repute across the country are on-board the scheme. Being a Universal Health Coverage state, many private players are now interested willing to partner with the government in contrast to earlier days.

Beneficiary groups

a.	State government employee Households:	72,125
b.	State government pensioner Households:	25,000
c.	Missing middle:	39,409
	Sub Total CMHIS:	1,36,538
d.	PM-JAY*:	2,59,468
	TOTAL**:	3,96,002

*Includes a section of the missing middle not covered earlier under PM-JAY, as part of the state CMHIS beneficiary base and BOCW beneficiaries.

**as per Census 2011 data

Scheme entitlements

Sl.	Household Category	Benefits
1	State Government Employee Households eligible for Medical Allowance	Rs 20 Lakh Health Insurance Cover per household per annum, and Medical Reimbursement beyond the Health Insurance Cover.
2	State Government Pensioner Households	Rs 20 Lakh Health Insurance Cover per household per annum.
3	Missing middle	Rs 5 Lakh Health Insurance Cover per household per annum.(same as PM-JAY)
4	PM-JAY	Rs 5 Lakh Health Insurance Cover per household per annum.

Insurance Premium per beneficiary

Current Policy period 01.05.2025 to 31.03.2026

Scheme	No. of Households	Sum Insured	Premium per BFU	Total Premium
PM-JAY	2,59,468	5 Lakhs	2,270.58	58,91,42,851.44
CMHIS Gen	20,000	5 Lakhs	2,270.58	4,54,11,600.00
CMHIS EP	97,125	20 Lakhs	8,864.17	86,09,32,511.25
Grand Total				1,49,54,86,962.69

Financing

The state government mobilized additional resources for sustainable financing of the intervention within the overall macro-fiscal constraints that the state is in. Additionally, 50% of the existing medical allowance for Government Employees and Pensioners to a Health Insurance Cover of 20 lakhs per year per family, and a 5 lakh Health Insurance cover to the uncovered general population.

Operational model

CMHIS is implemented in convergence with the national flagship scheme AB PM-JAY. All beneficiaries are issued with an Aadhaar verified Health Insurance Card which gives them access to Cashless Hospitalisation Treatment Service in empanelled Hospitals. Service is provided through a network of hospitals that are empanelled under the scheme specifically to provide cashless treatment services to the beneficiaries on production of valid Insurance Card, and with whom a two-party MoU is signed between the NHPS and the EHCP. Hospitals are reimbursed by the NHPS for treatment provided at agreed fixed package rates.