A STUDY ON OUT OF POCKET EXPENDITURE IN DHALAI DISTRICT, TRIPURA 2014-15



Regional Resource Centre for Northeastern States
(A branch of NHSRC)

Ministry of Health & Family Welfare,

Government of India

Guwahati, Assam - 781022

TEAM MEMBERS

Research Team:

Dr. A.C. Baishya

Mr. Bhaswat Kumar Das

Mr. Arindam Saha

Field Supervisor:

Mr. Parthajit Sintey

Mr. Sashi Bhusan

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Out of Pocket Expenditure study is valuable evidence for the planning process of Universal Health Coverage. UHC is a new concept with little precedence to cite, this evaluation process has been a learning process for all of us.

Dr A.C. Baishya Director, RRC-NE

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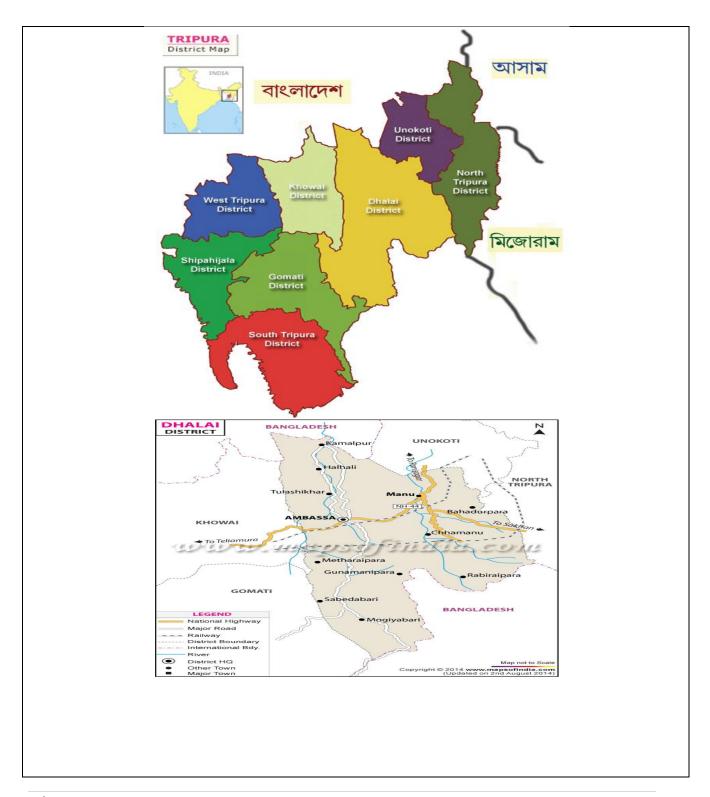
ANNEXURE 1 : Sample village list of Dhalai District

ABBREVIATION

Α							
ANC	Ante Natal Care						
ANM	Auxiliary Nurse Midwife						
ASHA	Accredited Social Health Activist						
AWC	Anganwadi Centre						
AWW	Anganwadi Worker						
В							
ВСС	Behaviour Change Communication						
BPL	Below Poverty Line						
BCG	Bacillus of Calmette and Guerin						
С							
CHC	Community Health centre						
CGHS	Central Government Health Scheme						
D							
DH	District Hospital						
E							
ESI	Employees State Insurance						
F							
FRU	First Referral Unit						
FSU	First Stage Stratum						
FW	Family Welfare						
G							
GNM	General Nurse Midwife						
Gol	Government of India						
Н							
H&FW	Health and Family Welfare						
HD	Home Delivery						
HH	Household						
HW	Health Worker						
I							
ID	Institutional Delivery						
IMR	Infant Mortality Rate						
J							
К							
L							
LHV	Lady Health Visitor						
М							
MO	Medical Officer						

N	
No.	Number
NPP	National Population Policy
NHM	National Health Mission
0	
OBC	Other Backward Class
ООР	Out of Pocket Expenditure
OPD	Out Patient Department
Р	
PC	Percentage
PH	Public Health
PHC	Primary Health Centre
PNC	Post Natal Check-up
Q	
R	
RSBY	Rashtriya Swasthya Bima Yojana
S	
SC	Sub Centre
SC	Scheduled Caste
SHG	Self Help Groups
SSS	Second Stage Stratification
ST	Scheduled Tribe
U	
UFS	Urban Frame Sample
W	
WHO	World Health Organization

State Profile of Tripura



Tripura is a state in North-East India which borders Bangladesh, Mizoram and Assam. It is surrounded by Bangladesh on its north, south and west: the length of its international border is 856 km (84 per cent of its total border). It shares a 53 km long border with Assam and a 109 km long border with Mizoram. The state is connected with the rest of India by only one road (NH-44) that runs through the hills to the border of Karimganj District in Assam and then winds through the states of Meghalaya, Assam and North Bengal to Calcutta.

For administrative convenience and decentralization of power Tripura which had once been a single district only is now divided into altogether eight districts, twenty three subdivisions and fifty eight rural development blocks. Besides, a special feature of the state is the vibrant existence of an Autonomous District Council (ADC) for tribal's based on 6th schedule of the Indian constitution. The ADC in Tripura encompasses 68.10% of the state's total geographical territory and is home to roughly one third of the state's population.

State Health indicators:

	SRS BULLETIN								
INDICATORS	Sep,	Sep, 13	Jan, 11	Oct, 09	Oct, 08	Oct, 07	Oct, 06	April' 06	
Birth rate	13.7	13.9	14.8	15.4	17.1	16.6	16	15	
Death rate	4.7	4.8	5.1	5.9	6.5	6.3	5.7	5.5	
Infant Mortality Rate	26	28	31	34	39	36	31	32	
TFR	2.22 (as per NFHS-3)								

State Demographic profile:

Nan	ne	TRIPURA	DHALAI
Popula	ation	3671032	377988
ST Popu	lation	1166813	210608
in 9	%	31.8	55.7
SC Popu	lation	654918	61688
in 9	%	17.8	16.3
Percentage Decadal	1991-01	16.03	18.48
Growth Rate	2001-11	14.75	12.5
Sex Ratio	2001	948	951
SEX Hadio	2011	961	964
Sex Ratio in the age 0-6	2011	953	942
Population Density	2001	305	512
per Sq. Km	2011	350	576
	Person	88	89
Literacy Rate 2011	Male	92	93
	Female	83	85

State Economic indicators:

Expenditure on Medical and Public Health and Family Welfare* – As Ratio to Aggregate Expenditure (STATE FINANCES A STUDY OF BUDGETS OF 2012-13, RBI January 2013)

												(Pe	er cent)
State	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012
	-01	-02	-03	-04	-05	-06	-07	-08	-09	-10	-11	-12	-13
												(RE)	(BE)
1	2	3	4	5	6	7	8	9	10	11	12	13	14
10.													
Tripur	4.0	3.7	3.8	3.4	3.5	4.7	5.1	5.0	4.8	4.8	4.4	5.8	3.9
а													
All	1.6	4.4	4.0	2.4	2.4	2.0	2.0	2.0	2.0	4.2	4.2	4.2	4.4
States	4.6	4.4	4.0	3.4	3.4	3.9	3.9	3.8	3.9	4.2	4.2	4.3	4.4
(India)													

RE: Revised Estimates. BE: Budget Estimates.

Source: Budget Documents of the State Governments, State Finance Accounts, CAG for 2010-11 in respect of Jammu and Kashmir.

Household access to safe drinking water, North Eastern State (Source: Economic Survey 2012-13)

	2011							
State	Total	Total Rural Urban						
Tripura	67.5	58.1	91.9					
India	85.5	82.7	91.4					

State wise: Population, GSDP, Per capita Income and Growth Rate, 2011-12

State wise: Population, GSDP, Per capita Income and Growth Rate, 2011-12							
		GSDP (Rs. In crores)		Per Capita Income (Rs.)		Growth	
State	Population	At current Prices	At constant Prices	At current Prices	At constant Prices	Rate of GDSP at (2004-05) prices (%)	
Tripura	3671032	19731	15463	50750	40411	8.87	
India	1210193422	8279976	5222027	60972	38005	6.88	

^{&#}x27;-': Not applicable/Not available.

^{*:} Revenue Expenditure and Capital Outlay.

Number and Percentage of below Poverty lines by States- 2011-12 (Tendulkar methodology)

Number and Percentage of below Poverty lines by States- 2011-12 (Tendulkar									
	Methodology)								
		Specific cy Lines	Rı	ural	Url	oan	To	otal	HDI*
Name Of State	for 20 Mont	11-12- hly per a (Rs.) Urban	%age of Person s	No. of Persons (lakhs)	%age of Person s	No. of Person s (lakhs)	%age of Person s	No. of Persons (lakhs)	2006
Tripura	798	920	16.53	4.49	7.42	0.75	14.05	5.24	0.663
India	816	1000	25.7	2166.58	13.7	531.25	21.92	2697.83	0.605

^{*}Human Development index in North Eastern State 2006 ((Source : Ministry of Woman and Child Development))

Infrastructure Details (RHS2014)

State	SC	PHC	CHC	SDH	DH
Tripura	972	84	18	13	3

CHAPTER I INTRODUCTION

Universal health coverage can be defined as providing financial protection from the costs of using health services for all people of a country as well as enabling them to obtain the health services that they need (of sufficient quality to be effective) (3). This definition embodies three specific policy goals

- Equity in the use of health services;
- Quality of care; and
- Financial protection.

Translating the broad concept of universal coverage into these specific goals is an important step in defining a health financing (and indeed, a wider health system) reform strategy. While no country in the world can fully achieve the three "UHC goals", all countries seek to make progress on them; hence, "moving towards UHC" is relevant to all and can be used to orient the direction in which reforms are intended to move the system. Further steps are needed to tailor these three (still broad) goals to country specificities. Supporting this tailoring process is one of the purposes of this guide. (Guidance on conducting a situation analysis of health financing for universal health coverage, WHO)

Because progress towards Universal Health Coverage (UHC) involves a range of complex technical challenges, it is easy to lose sight of the fact that moving toward UHC is a **political process** that involves negotiation between different interest groups in society over the allocation of health benefits and who should pay for these benefits. Over recent decades, civil society organizations (CSOs) have frequently played a crucial role in representing the views of the poor and the vulnerable in these negotiations, pushing for a more equitable distribution of both the responsibility for funding the system and the benefits received. CSOs have also played an important part in shaping health systems at the national level, increasing communities' involvement in the decision making process, and in creating accountability mechanisms.

CSOs have achieved most when they have been able to develop robust positions based on solid arguments and compelling examples. It is to support CSOs in their efforts to develop such positions that this document was written. Intended for those organizations involved in health financing policy debates, this tool articulates the pro-UHC arguments, and presents relevant evidence and examples. It is designed to support policies that promote equity, efficiency and effectiveness, and ensure that the rights of the most vulnerable are not forgotten. (Arguing for Universal Health Coverage, WHO)

Universal Health Coverage (UHC) is based on the World Health Organization constitution of 1948 that declared health as a fundamental right. The Health for All agenda set by the Alma-Ata declaration in 1978 further reinforced the emphasis on Universal Health Coverage. The UHC is a priority focus in global and national agendas of many countries. The Director-General of the World Health Organization, Margaret Chan stated in 2012 that Universal Health Coverage is "the single most powerful concept that public health has to offer". The Constitution of India also has provisions regarding the right to health. These are outlined in the Directive Principles of State Policy (Articles 42 and 47 in Chapter IV)¹, and are therefore non-justiciable.

India is the second largest populous country and tenth largest economy in the world. The country also accounts for 21 percent of the world's global burden of diseases and is losing more than six percent of its GDP annually due to premature deaths and preventable illnesses.² It has the highest burden of maternal and child mortality among the BRICS (Brazil, India, Russia, China and South Africa) countries. Although the country has made impressive progress in eradication of communicable diseases like polio, the rise in non-communicable diseases has been found to be responsible for 53 percent of total deaths (an increase from 40.4 percent in 1990 and expected to increase to 59 percent by 2015) ³. However India has also made appreciable efforts to improve the delivery of health care services across the country. A number of initiatives had been taken by the Government of India which include adoption of a National Health Policy (1983); the 73rd and 74th Constitutional Amendments and devolution of power to PRIs (1992), the National Nutrition Policy (1993); the National Health Policy (2002), the National Policy on Indian System of Medicine and Homeopathy (2002) and Drug Policy (2002); the Universal Health Insurance Scheme (2003), the mission based intervention in rural health viz. National Rural Health Mission (2005) and subsequent National health Mission have tried to bring about a change in the health care delivery services to the people at large. The expenditure on health as percentage of GDP in India is just four percent. Of the total expenditure 33 percent is met from public services while the out of pocket expenditure remains fairly high with a share of 57.6 percent in the country. Hospitalization or treatment for major sickness has continued to be the single most important factor responsible for impoverishment and indebtedness of many Householdss in the country. Despite the large scale intervention from NRHM, the country continues to grapple with the problem of high MMR and IMR. One of the reasons for the wide

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¹ Article 42 states: õProvision for just and humane conditions of work and maternity relief- The State shall make provision for securing just and humane conditions of work and for maternity reliefö and Article 47 states: õDuty of the State to raise the level of nutrition and the standard of living and to improve public health. The State shall regard the raising of he level of nutrition and the standard of living of its people and the improvement of public health as among its primary duties and, in particular, the State shall endeavour to bring about prohibition of the consumption, except for medicinal purposes, of intoxicating drinks and of drugs which are injurious to healthö

² World Health Organization, Country Cooperation Strategy, (CCS) India, 201262017

³ *Ibid*.

variations in health outcomes across the country is because health is a state subject in India and therefore health expenditures have wide variations across the states. In general, the variation in per capita expenditure across states has increased over the years and expenditure on health is positively correlated with income levels of the states. The states with low expenditures on health also have low per capita GSDP and some of the poorest health indicators and infrastructure in the country⁴.

It is against this backdrop that a High Level Expert Group on Universal Health Coverage (UHC) was constituted by the Planning Commission of India in 2010 to develop a framework for UHC for the Twelfth Five Year Plan. The Committee submitted a detailed report in 2011 which *interalia* called for incorporation of the different dimensions of universal health assurance, i.e. health care which includes ensuring access to various preventive, curative and rehabilitative health services at different levels of care, coverage that is inclusive of all sections of the society without any discrimination and prejudice or biases. It also called for promotion of health care services through its social determinants and there services should be delivered at an affordable cost such that people are relieved from financial hardships in the pursuit of seeking health care services. It is a universal entitlement to comprehensive health security and an obligation on the part of the State to provide adequate food and nutrition, appropriate medical care, access to safe drinking water, proper sanitation, education, health-related information, and other contributors to good health. The creation of a robust and sustainable system of UHC is therefore necessary for ensuring overall well being and human development (OOP Assam study by OKDISD).

The present study on Out-of-pocket expenditure on health (OOPEH) is designed by the National Health System Resource Centre to estimate the household healthcare utilization and healthcare expenditures in a district to generate evidence on current breadth (population covered), depth (healthcare services covered) and height (financial protection) of healthcare coverage. The study was conducted in Dhalai district of Tripura. The selection of the district for UHC was done by the State Government.

1.1. Objective:

The basic objectives of the survey are:

- 1. To understand the household health status/episode of sickness or illness
- 2. To understand the healthcare utilization pattern among the sick.

⁴ M. Govinda Rao and Mita Choudhury, Health Care Financing Reforms in India, Working Paper No: 2012-100 March- 2012, National Institute of Public Finance and Policy

- 3. To understand the healthcare expenditure towards health insurance, payments related to health status/episode of sickness or illness as stated in objective 1
- 4. To analyze the healthcare related expenditures
- 5. To estimate the average medical and non-medical healthcare related expenditures, households facing catastrophic health expenditures and impoverishment.

1.2 Methodology:

The survey was planned as a district survey and household was the primary unit of data collection. The sample size for the survey was 1027 households across the selected district. Distribution of sample across the district was done by multi-stratified random sampling.

Step I. The sample frame of First Sample Units (FSUs) i.e. villages in rural areas and wards in urban areas were determined based on Primary Census Abstract (PCA) of Dhalai district, Census 2011.

Step II. Total number of FSUs to be selected was taken as 25 including rural and urban out of which no. of rural and urban FSUs was determined as per proportion to rural and urban population given by Census 2011 as given under.

Dhalai District

FSUs	Total Population, Census 2011	Percentage of Population	Sample FSUs
Rural	337731	89.29	23
Urban	40499	10.71	2

The four Second Stage Stratification (SSS) were made for the district as shown below:

SSS	Population Size
1	201 – 999
2	1000 – 1999
3	2000 – 4999
4	Above 5000

Accordingly, following strata were formed with the FSUs for:

SSS	No. of Sample Villages	No. of Sample Urban FSUs
1	1	
2	4	
3	15	
4	3	2
Total	23	2

Step IV. In the selected FSU, every household was listed. A house listing schedule was prepared using the following indicative categories of

- 1. Whether any hospitalization recorded in the household in last 365 days
- 2. Whether any chronic illness recorded in the household in last 30 days
- 3. Whether any illness recorded in the household in last 30 days
- 4. Number of children between 0-24 months in the household
- 5. None of the above categories

In large FSUs with a population more than 1200, clusters of approximately 300 households were created within such FSUs and listing was done within the clusters only. The total number of households listed from all the sub-sampling units in an FSU was not more than 300.

Step V. In each of the FSU the number of households to be surveyed was fixed within the range of 40 to 48 depending on population size of villages/ wards. If the probability of reported hospitalization in any of the sub sampling unit was below 10 per 1000, the lower range of 40 households per FSU was used. In cases where the households as per the criterion could not be found the number of sampled households was less.

Step VI. After allocating the Sample Units stratum wise, the sample households were selected from each of the four stratums (the indicative categories) mentioned above with the expected proportion of households for every 12 households to be surveyed in a village/ ward selected as follows:

- 1) Hospitalization in last 365 days: 0.4
- 2) chronic illness: 0.2

- 3) Illness in last 30 days: 0.2
- 4) Household with children (0-24) months: 0.2
- 5) None of the above categories: 0.2

The selection was done by simple random sampling based on 5-digit fixed random number table.

Step VII. The estimates for every indicator for district level was calculated using weights as per the number of households in each of the stratum in proportion to all the households listed and the actual population of the district.

CHAPTER II

Key observations

The study design does not permit to reveal the percentage of people suffered from chronic ailment, OPD cases or persons hospitalized to the total population. The analysis is based on randomly selected samples of these groups from the universe by using ratio method of the different categories. Total number of randomly selected persons suffering from chronic ailments is 349, suffering from an ailment in last 30 days is 567, hospitalized during last 365 days is 521 and those mothers who delivered a baby in last two years is 202.

2.1 Chronic ailments:

From the present study it is seen that 19 pc persons suffered from Bone/ Joint Pain followed by Blood pressure (mostly Hypertension) 18.3 pc, then Gastritis (15.5 pc) and 8 pc were diabetic patients. It is also interesting to see that male patients suffering from chronic ailments were nearly 70 pc.

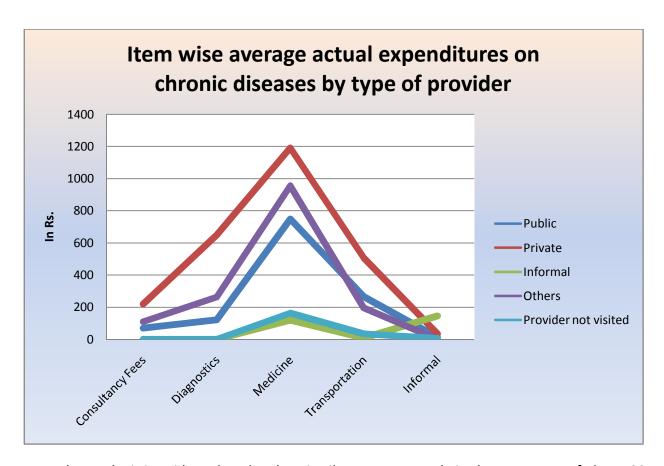
Age wise distribution of the chronic ailments shows that age group in the range of 30 to 50 years contributed the highest (40 pc) for chronic illness, followed by age group in the range of 50 to 65 years of age (32.4 pc).

The leading findings of the patients suffering from chronic ailments is that, only nearly 50 pc of the patients are taking daily medicines for their ailments.

The study also reveals that 40 pc of the people suffering with chronic ailments preferably visited the private doctors / clinic followed by Sub - district hospital (14 pc) and PHC (11.5 pc). In a nutshell majority of them (45 pc) went to the private sector, only 37.5 pc made visit to public sector and 8.3 pc of the patients did not visit to any of the provider in the last 30 days.

The study also shows that there is a huge amount of out of expenditure incurred by the patient. It is seen that on an average the expenditures incurred on medicine is nearly Rs. 900/-, which is the highest, followed by expenditure on diagnostic cost (Rs. 360/-), transportation cost of Rs. 341/- and lowest expenditure was on consultancy fess (Rs. 130/-) in last 30 days (Table 7). Further detail analysis on expenditures in medicines shows that out of 349 patients 21 pc of the

patients spent more than Rs. 1000/- in the last 30 days whereas 20 pc of them did not spent any money. (Table 6.c)



From the study, it is evident that the chronic ailments are mostly in the age group of above 30 years and children/ adolescent below 18 years of age are almost free from chronic ailments except skin diseases.

Average expenditure incurred on different chronic diseases shows that the highest expenditure on treatment of Liver diseases (Rs.8642/-) followed by Cancer & Tumor (Rs.4915/-). There were two patients on HIV AIDs and they were got free treatment. Less expenditure was observed on treatment of mental illness and hypertension were Rs. 425/- and Rs. 596/- respectively.

The study also analyzed the correlation between expenditures on different item with respect to provider and availability of insurance coverage (Table 7.c). Out of 349 patients suffering from chronic ailment, 114 had RSBY insurance, 24 had other insurance or reimbursement mechanism and 211 were without any insurance coverage. It is observed that regarding service fee Rs. 52/was spent by RSBY holder whereas Rs. 172/- was spent by those without insurance. Similarly, expenditure on diagnostics were Rs. 211/- and Rs. 403/- against RSBY card holder and without insurance coverage respectively. Same pattern of high expenditure was noted on medicine for

patient without insurance coverage; Rs. 625/- and Rs 1081/- for RSBY card holders and without insurance coverage respectively.

2.2 OPD Patients:

The study also studied about the ailments suffered by the population of Dhalai district of Tripura prior to 30 days at the time of field level data collection. It was found that majority of them, nearly 70 pc of the episode suffered from fever (including cold and cough). During the field level data collection it was also known that the malaria outbreak had happened during the summer season in 2014.

Like chronic ailments, here also majority of the patients (44 pc) were in the age group of 30 to 50 years. Children below 10 years were almost free from the diseases prior to 30 days of the data collection. While analyzing the health seeking behavior of the patients, it was seen that majority of them (47 pc) visited the public facilities for treatment and 31 pc did visit to private doctors / clinic etc. It was concerning to note that 12.3 pc of the patients did not visit to any of the provider during their illness. On the other hand, it was encouraging to find that for the OPD services 8 pc of the patients visited to the Sub Centres and 1.4 pc took help of ASHA from their respective villages.

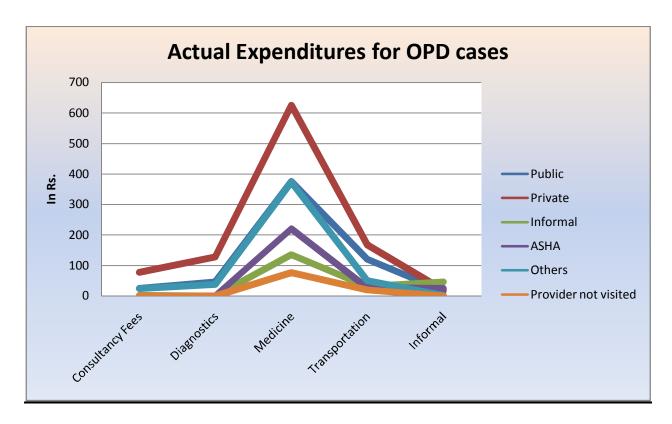
From the data it also learnt that ASHA of the Laban Chara village (the nearest health facility, which is located 16 K.M away from the village) gave the OPD services to the patients suffering from fever.

Similar to chronic ailments, Table 12 shows that, there was out of pocket expenditure incurred by patients even while availing OPD services. The total average expenditures incurred to avail OPD services is Rs. 634/- per patient, where highest expenditures was on medicine Rs. 404/-, transportation took nearly Rs. 110/- per patient and expenditure incurred on consultancy fees and diagnostic charges were Rs. 37/- and Rs. 62/- respectively. However, further analysis shows that nearly 70 pc patients did not spend any money on consultancy fee and 18 pc spent less than Rs 100/-.

Regarding expenditures on medicine, 28.7 pc patients who availed OPD services at public facilities did not spend any money and only 52 pc of the patients spent up to Rs 500/-. It is also noticed that 53 pc patients spent up to Rs 500/- on medicine who did not visit any provider (Table 11c).

The households revealed that non availability of medicines with the SC and PHC often compelled the patients to travel long distances to procure the prescribed medicines. Therefore, out of the total expenditure incurred, the expenditure on medicine has higher proportionate share.

The table 12.b shows that average expenditures on service fee, diagnostic and medicine cost on treatment cancer, Stomach problem and joint pain were above Rs. 1000/-. It is also observed that out of 567 patients 366 were suffered from fever and average expenditure was Rs. 367/-per patients. Other common disease was gastric problem where average expenditures was Rs. 317/- per patient.



The study also tried to analyze the relation between expenditures on OPD services on different items with respect to the providers and availability of insurance coverage (Table 12.c). Out of 567 patients suffering from any ailment, 320 had RSBY insurance, 30 had other insurance or reimbursement mechanism and 217 were without any insurance coverage. The table 12.b shows that regarding service fee Rs. 33/- was spent by RSBY holder whereas Rs. 37/- was spent by those who did not have insurance. Similarly, expenditure on diagnostics were Rs. 48/- and Rs. 62/- against patients having RSBY card and without insurance coverage respectively. The expenditure pattern in terms of medicine was also high for those without insurance coverage. It was Rs. 341/- and Rs 427/ for patient with RSBY card holder and without insurance coverage respectively. However, it was inferred that patients who were covered under other insurance or reimbursement mechanism spent higher amount on service fee, diagnostic and medicine cost compare to patients with RSBY card or without any insurance.

IPD Patients:

The survey also studied about the disease pattern and health care expenditure on hospitalized patients in last 365 days. Out of 521 inpatients, 22 pc suffered from common fever and 30pc from malaria, whereas all other causes were less than 10 pc of the total inpatients. Patients with stomach problem were 7.3 pc followed by Gastritis 4.8 pc and Hypertension 3.8 pc; other causes were 5.8 pc. Age wise distribution of the hospitalized patients also shows the same trend with patients suffering from chronic ailments and as OPD patients as 44 pc inpatients were in the age group 30 to 50 years. About the service taken by the inpatients, 94 pc availed the services in public facilities of which 37.4 pc was in Sub District Hospital and 23 pc was in Primary Health Centres.

Table 16b shows that 54 pc inpatients stayed in the hospital for 3 to 6 days duration, 22.5 pc stayed up to 2 days and 15.5 pc stayed for 7 to 10 days in the hospital.

The study also reveals that the average total expenditures per patients during hospitalization irrespective of the duration of stay was Rs. 3136/-. The total expenditures incurred by the patients by the type of place where the services were taken were Rs. 2128/- (94% patients), Rs. 20119/- (5.6% patients) and Rs. 3750/-(0.4% patients) per patients in Public facilities, Private facilities and informal service providers respectively.

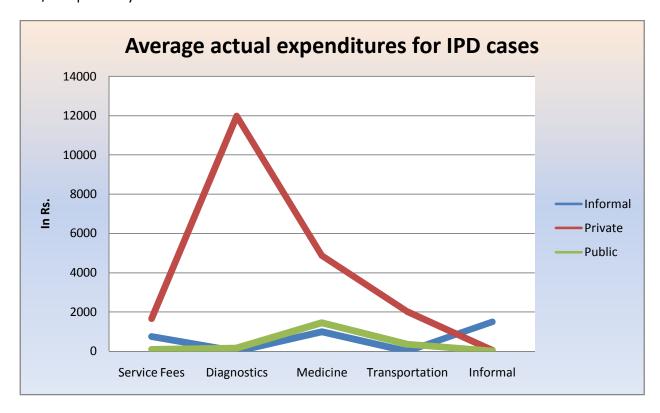
In public facilities most of the expenditures was on medicines which was nearly Rs. 1450/-per patient whereas in private facilities Rs. 11983/- was spent on diagnostics per patient.

It needs to be also mentioned that there are no private facilities in Dhalai District of Tripura; therefore the use of private hospitals in case of hospitalizations is very less as compared to public facilities. Detail analysis shows that those (5.6%) patients who availed IPD services at Pvt. Facilities had moved to either Agartala or outside of Tripura; therefore expenditures incurred for IPD cases including transportation were on higher side.

From the study it is evident that for short term morbidity cases people in Dhalai district usually went to private and government providers for treatment. However, in cases of hospitalizations, the people revealed their preferences for public service providers. For certain diseases like cancer, heart ailment, typhoid, and ophthalmological problems etc people preferably went to private service providers.

Average expenditure incurred on different diseases of hospitalized patients shows that the highest expenditure on treatment of Heart diseases (Rs.51908/-) followed by Cancer & Tumor (Rs.26000/-) and O&G problem (Rs.10331/-). Less expenditure was observed on treatment of TB and Leprosy were Rs. 674/- and Rs. 250/- respectively. It is also observed that the most

common diseases were common fever and malaria where expenditures were Rs. 1166/- and Rs. 840/- respectively



The study shows that out of 521 hospitalized patients, 247 had RSBY insurance, 19 had other insurance or reimbursement mechanism and 255 were without any insurance coverage. The table also shows about expenditures on different items. But it is interesting to see that RSBY card holder spent more amount as compare to without card holder regarding service fee and medicine cost. The service fee cost incurred by RSBY card holder was Rs. 251/- per patient whereas Rs. 114/- was spent as service fee by those without insurance. But regarding diagnostic cost RSBY card holder spent only Rs. 170 /- compare to Rs. 1781/- spent by patient without insurance card.

ANC, Delivery and PNC:

From the study, it is observed that expenditures during ANC and delivery per beneficiaries were found to be in higher side as compared with the other studies in other regions. Rs. 6283/- was spent by each mother during her pregnancy and delivery. Out of Rs. 6283/- spent by the mothers Rs. 2175/- was spent during ANC and Rs. 4108/- during delivery. From the analysis it is learnt that the average expenditure is high due to few sample mothers who had their ANC and

delivery at private facilities where average expenditures were above Rs. 20000/- per beneficiaries.

During ANC:

It is little bit difficult to recall the expenditures during ANC by type of providers by the mothers during ANC because as expected many beneficiaries availed both public and private clinics during different visits of ANC. Therefore, the study captured only expenditures on different items. Table 21 shows that out of 202 mothers, expenditures on service fee during ANC was nil for 122 (60%) pregnant mothers, 194 (96%) did not incurre expenditure for diagnostic and 59 (29%) did not pay for medicine cost. Expenditures above Rs. 5000/ for transportation and medicine during ANC were borne by 6 (3%) and 5 (2.5%) mothers respectively.

During Delivery & PNC:

The study also shows that 94 (46.5%) mothers did not pay any amount for service fee where 36.6 pc delivered in public facilities and 10 pc in home. It is also found that from the table 24.b 130 mothers (64.4%) did not spend any amount on diagnostic charges where 63% mothers delivered at home and public facilities.

The study reveals that expenditures on medicines are also highest during delivery and PNC. The detail analysis shows that only 41 mothers (20.3%) did not spend any amount on medicine where 17 pc mothers delivered at home. It also shows that nearly 78 (40%) mothers spent Rs. 1000/- to Rs. 5000/- on medicine where 69 (34.2%) delivered at public facilities. It is also observed that 6 mothers reported that they spent on medicines between Rs. 10000/- to Rs. 20000/- during delivery.

The higher average expenditure on institutional delivery has been mainly due to higher expenditure incurred at private health service providers.

Source of expenditure:

It was difficult for the respondents to segregate the source of funding on their health care expenditures. In spite of that, with best recall method the respondents gave an idea of the source of fund they spent on health care. More than 80 percent households met their expenditure from their current income and savings for outpatient treatment and chronic ailments. In respect of inpatient treatment, households borrowed from friends, relatives or professional money lenders or sold their assets besides spending from their past savings. Nearly 5 pc households had to sell their assets to meet the expenditure which shows the insecurity faced by households as far as health care expenditure is concerned.

CONCLUSION:

There are no any private health care facilities in the Dhalai district but private practices at clinic / pharmacy is going on and as such 95 pc of the hospitalized cases were at Government facilities but for OPD cases private provider's presence was observed.

The survey results showed that the overall health status of the children in the district was good and ninety eight percent of the children did not report of any short term morbidity. Cough/cold and fever were the common disease found among the children in the district.

It is also observed from the study that service charge is within a certain considerable limit of the patients but cost of medicine is little bit on higher side.

Non availability of medicines with the SC and PHC often compel the patients to travel long distances to procure the prescribed medicines. Therefore, out of the total expenditure incurred, the expenditure on medicine has higher proportionate share.

From the study it may be conclude that the common diseases were fever and expenditures on treatment on fever is under certain limit of Rs 1000/- for IPD patients and Rs. 400/- for OPD patients.

General Information

Table 1: Comprehensive overview of the study estimates

Variable	Estimates
Total Population	378230
Rural Population	337731
Urban Population (as a percentage of total population)	10.71
Sampled Households	1027
Persons in the sampled households	5147
Average Household Size	5.01
Number of persons reporting chronic ailment in the sample	349
Number of hospitalizations reported in the sample	
(reference period of last 365 days)	521
Number of persons reporting an ailment in the sample	
(reference period of last 30 days)	567
Number of women in the sample who delivered	
(reference period of last 2 years)	202
Number of women hospitalized during pregnancy/ delivery	Average-
(reference period of last 2 years)	148
	Median –
Out of Backet Evpanditure (in Bs) per outpatient visit	0
	Average-
	634 Average -
·	3136
(Telefelice period of last 303 days)	Median –
	1100
Out of Pocket Expenditure (in Rs) per chronic illness in a month	Average -
(reference period of last 30 days)	1745
	Median –
	600
	Average -
(reference period of last 2 years)	6283 Median –
	3141
	Rural Population Urban Population (as a percentage of total population) Sampled Households Persons in the sampled households Average Household Size Number of persons reporting chronic ailment in the sample Number of hospitalizations reported in the sample (reference period of last 365 days) Number of persons reporting an ailment in the sample (reference period of last 30 days) Number of women in the sample who delivered (reference period of last 2 years) Number of women hospitalized during pregnancy/ delivery (reference period of last 2 years) Out of Pocket Expenditure (in Rs) per outpatient visit (reference period of last 30 days) Out of Pocket Expenditure (in Rs) per hospitalization episode (reference period of last 365 days)

Household Information

Table 2a: Size of Households

S. No.	Size	Number	Percent
1	Up to 2	62	6.0
2	3 to 4	495	48.2
3	5 to 6	344	33.5
4	7 & above	126	12.3
_	Total	1027	100.0

Table 2b: Economic status of sample Households

S. No.	Economic Category	Number	Percent
1	BPL	573	55.8
2	Non BPL	446	43.4
3	No response	8	0.8
	Total	1027	100.0

Table 2c: Religion wise distribution of sample Households

S. No.	Religion	Number	Percent
1	Hinduism	732	71.3
2	Islam	12	1.2
3	Christianity	89	8.7
4	Sikhism	2	0.2
5	Jianism	1	0.1
6	Buddhism	191	18.6
	Total	1027	100.0

Table 2d: Social class wise Distribution of sample Households

S. No.	Social Class	Number	Percent
1	ST	607	59.1
2	SC	153	14.9
3	OBC	177	17.2
4	General	90	8.8
	Total	1027	100.0

Table 2e: Distribution of sample Households according to type of house

S. No.	House Type	Number	Percent
1	Pucca	33	3.2
2	Semi pucca	297	28.9
3	Kutcha	697	67.9
	Total	1027	100.0

Table 2f: Distribution of sample Households according to type of Latrine

S. No.	Latrine Type	Number	Percent
1	Service	71	6.9
2	Pit	771	75.1
3	Septic tank/ Flush	102	9.9
4	No Latrine	83	8.1
	Total	1027	100.0

Table 2g: Distribution of sample Households according to source of drinking water

S. No.	Source of Drinking water	Number	Percent
1	Bottled water	0	0
2	Тар	407	39.6
3	Tube Well/ Hand pump	229	22.3
4	Tankers	5	0.5
5	Pucca Well	52	5.1
6	Tank/ pond	53	5.2
7	River /	157	15.3
9	Others	124	12.1
	Total	1027	100.0

Table 2h: Distribution of sample Households according to type Source of energy for cooking

S. No.	Source of energy for cooking	Number	Valid Percent
1	Coke/ Coal	4	0.4
2	Firewood	911	88.7
3	LPG	100	9.7
4	Gobar Gas	2	0.2
5	Kerosene	6	0.6
6	Electricity	4	0.4
	Total	1027	100.0

Table 2i: Nearest functional health care provider from the household

S. No	Type of provider	mates	
		Number	Percent
	All Providers		
1	Formal -Public		
1.1	Sub Centre	573	55.8
1.2	Primary Health Centre	211	20.5
1.3	Community Health Centre	20	1.9
1.4	Sub district Hospital	221	21.5
1.5	District Hospital	2	0.2
1.6	Medical College Hospital		
2	Formal -Private		
2.1	Nursing home		
2.2	Private hospital		
2.4	Multi/Super specialty		
2.5	Medical college hospital		
	Total	1027	100.0

Table 2j: Distance of the nearest functional healthcare provider from the household

S. No	Type of provider	Estimates			
		Number	Percent		
1	Within 2 K.M.	551	53.7		
2	2 to 5 K.M.	274	26.7		
3	5 to 10K.M.	113	11.0		
4	10 K.M. & Above	89	8.7		
	Total	1027	100.0		

Table 2k: Distribution of patient by their enrolled f Health Insurance scheme

Enrolled for Health Insurance scheme									
Type of Insurance / Patients		ronic ments	OPD		IPD		Delivery		
,	No.	%	No.	%	No.	%	No.	%	
Community Health Insurance	9	2.6	15	2.6	11	2.1	2	1.0	
Micro finance institution	15	4.3	13	2.3	8	1.5	4	2.0	
ESI	-	ı	-	-	-	-	-	ı	
CGHS	-	-	-	-	-	-	-	-	
Pvt. Employer	-	-	-	-	-	-	-	-	
RSBY	108	30.9	217	38.3	247	47.4	72	35.6	
Govt Ins. under scheme	1	0.3	1	0.2	-	-	-	-	
Pvt. Health insurance	1	0.3	1	0.2	-	-	-	-	
No	215	61.6	320	56.4	255	48.9	124	61.4	
Total	349	100.0	567	100.0	521	100.0	202	100.0	

Chronic ailment

Table 3: Distribution of chronic ailments

Chronic ailment suffering								
	IV	lale	Fei	male	Total			
Ailments / Sex	No.	PC	No.	PC	No.	PC of total patients		
Tuberculosis	6	85.7	1	14.3	7	2.0		
Leprosy	1	100.0	-	-	1	0.3		
Hypertension	30	46.9	34	53.1	64	18.3		
Heart disease	14	82.4	3	17.6	17	4.9		
Diabetes	19	67.9	9	32.1	28	8.0		
Mental Illness	11	78.6	3	21.4	14	4.0		
Asthama	14	70.0	6	30.0	20	5.7		
HIV/AID	2	100.0	-	-	2	0.6		
Cancers/Tumor	5	100.0	-	-	5	1.4		
Paralysis of limbs	14	87.5	2	12.5	16	4.6		
Gastric	40	74.1	14	25.9	54	15.5		
Skin diseases	9	75.0	3	25.0	12	3.4		
Liver disease	4	66.7	2	33.3	6	1.7		
Bone /Joint disease	48	72.7	18	27.3	66	18.9		
Thoroid	4	50.0	4	50.0	8	2.3		
Others	21	72.4	8	27.6	29	8.3		
Total	242	69.3	107	30.7	349	100.0		
Total Persons surveyed	5147							

Table 3a: Distribution of chronic ailments by age group (in numbers)

Persons suffering from chronic ailment by age group (in numbers)									
Ailments / Age Group	0-2 years	2.1 -5 years	10.1-18 years	18.1- 30 years	30.1- 50 years	50.1- 65 years	Above 65.1 years	Total	
Tuberculosis	-	-	-	1	-	4	2	7	
Leprosy	-	-	_	-	-	1	-	1	
Hypertension	-	-	1	1	23	28	11	64	
Heart disease	-	-	_	3	7	3	4	17	
Diabetes	-	-	-	1	15	7	5	28	
Mental Illness	-	-	-	-	7	4	3	14	
Asthama	1	_	-	3	4	10	2	20	
HIV/AID	-	-	-	-	1	1	-	2	
Cancers/Tumor	-	-	-	2	1	1	1	5	
Paralysis of limbs	-	-	-	1	7	4	4	16	
Gastric	-	-	-	5	26	14	9	54	
Skin diseases	-	-	1	3	5	2	1	12	
Liver disease	-	-	_	-	3	1	2	6	
Bone /Joint disease	-	-	1	8	19	24	14	66	
Thairod	ı	-	-	ı	4	3	1	8	
Others	-	1	1	1	17	6	3	29	
Total	1	1	4	29	139	113	62	349	

Table 3b: Distribution of chronic ailments by age group (in %)

	Persons su	iffering fron	n chronic a	ailment by	age grou	p (in %)		
Ailments / Age Group	0-2 years	2.1 -5 years	10.1-18 years	18.1-30 years	30.1- 50 years	50.1- 65 years	Above 65.1 years	Total
Tuberculosis	-	-	-	14.3	-	57.1	28.6	100.0
Leprosy	1	-	-	-	ı	100.0	-	100.0
Hypertension	-	-	1.6	1.6	35.9	43.8	17.2	100.0
Heart disease	-	_	-	17.6	41.2	17.6	23.5	100.0
Diabetes	-	-	-	3.6	53.6	25.0	17.9	100.0
Mental Illness	-	-	-	-	50.0	28.6	21.4	100.0
Asthma	5.0	-	-	15.0	20.0	50.0	10.0	100.0
HIV/AID	-	-	-	-	50.0	50.0	-	100.0
Cancers/Tumor	-	-	-	40.0	20.0	20.0	20.0	100.0
Paralysis of limbs	-	-	-	6.3	43.8	25.0	25.0	100.0
Gastric	-	-	-	9.3	48.1	25.9	16.7	100.0
Skin diseases	ı	-	8.3	25.0	41.7	16.7	8.3	100.0
Liver disease	-	-	-	-	50.0	16.7	33.3	100.0
Bone /Joint disease	-	-	1.5	12.1	28.8	36.4	21.2	100.0
Thyroid	ı	-	-	-	50.0	37.5	12.5	100.0
Others	-	3.4	3.4	3.4	58.6	20.7	10.3	100.0
Total	0.3	0.3	1.1	8.3	39.8	32.4	17.8	100.0

Table 4: Persons taking daily medication for chronic ailment

Persons taking daily medication for chronic ailment						
Number PC						
Yes	180	51.6				
No	152	43.6				
No response	17	4.9				
Total	349	100.0				

Table 5a: Distribution of individuals sought outpatient care for chronic ailments in last 30days according to type of provider by facility wise

Provider	d for Chronic ailn Number	PC
Sub center	3	0.9
Primary health centre	40	11.5
Community health centre	14	4.0
Sub district Hospital	49	14.0
District Hospital	16	4.6
Medical College Hospital	9	2.6
Doctor/Clinic	140	40.1
Nursing home	1	0.3
Charitable/Trust Hospital	11	3.2
Multi/Super specialty	1	0.3
Medical college hospital	1	0.3
RMP	2	0.6
Traditional Healer	11	3.2
Pharmacist	3	0.9
Others	19	5.4
Provider Not Visited	29	8.3
Total	349	100.0

Table 5b: Distribution of individuals sought outpatient care for chronic ailments in last 30days according to type of provider in broad groups

Type of provider for Chronic ailments						
Туре	Number	PC				
Public	131	37.5				
Private	157	45				
Informal	13	3.7				
Others	19	5.4				
Provider Not Visited	29	8.3				
Total	349	100				

Table 6a: Distribution of average consultation fee cost for patients with chronic disease by type of provider

		Consultation fee cost for patients with Chronic disease (In Rs.)											
Provider / Amount	r	Nil	Up t	o 100	_	1 to 00	201 50	l to 00	501 10		100 abo		Total patients
	No.	PC	No.	PC	No.	PC	No.	PC	No.	PC	No.	РС	, paratrio
Public	71	54.2	35	26.7	21	16	4	3.1	-	-	-	-	131
Private	48	30.6	33	21	67	42.7	4	2.5	4	2.5	1	0.6	157
Informal	13	100	-	-	-	-	-	_	-	-	-	-	13
Others	16	84.2	2	10.5	-	-	-	-	-	-	1	5.3	19
Provider Not Visited	29	100	-	-	-	-	-	-	-	-	-	-	29
Total	177	50.7	70	20.1	88	25.2	8	2.3	4	1.1	2	0.6	349

Table 6b: Distribution of average diagnostic tests cost for patients with chronic disease by type of provider

	Diagnostic tests cost for patients with Chronic disease (In Rs.								In Rs.)		
Provider / Amount	N	Jil	Up 20		201 1	to 500	500 100			01 & ove	Total
	No.	PC	No.	РС	No.	PC	No.	PC	No.	PC	patients
Public	108	82.4	7	5.3	11	8.4	3	2.3	2	1.5	131
Private	97	61.8	10	6.4	16	10.2	7	4.5	27	17.2	157
Informal	13	100	-	-	-	-	-	-	-	-	13
Others	18	94.7	-	-	-	-	-	-	1	5.3	19
Provider Not Visited	29	100	-	-	-	-	-	-	-	-	29
Total	265	75.9	17	4.9	27	7.7	10	2.9	30	8.6	349

Table 6c: Distribution of average medicines cost for patients with chronic disease by type of provider

		Medicines cost for patients with Chronic disease (In Rs.)									
	N	Jil	Up t	o 500	500 t	o 1000	1001 8	& above			
Provider / Amount	No.	PC	No.	PC	No.	PC	No.	PC	Total patients		
Public	25	19.1	62	47.3	22	16	22	17.6	131		
Private	16	10.2	68	43.3	24	15.3	49	31.2	157		
Informal	4	30.8	9	69.2		0		0	13		
Others	8	42.1	8	42.1	1	5.3	2	10.5	19		
Provider Not Visited	17	58.6	12	41.4		0		0	29		
Total	70	20.1	159	45.6	47	13.2	73	21.2	349		

Table 6d: Distribution of average transportation Cost for patients with chronic disease by type of provider

		Transpo	rtation	Cost for	patien	ts with	Chronic	disease	se (In Rs.)				
Provider / Amount	ľ	Nil	Up t	o 500	500 100		100 abo		Total				
	No.	PC	No.	PC	No.	PC	No.	PC	patients				
Public	32	24.4	86	65.6	5	3.8	8	6.1	131				
Private	48	30.6	75	47.8	12	7.6	22	14	157				
Informal	12	92.3	1	7.7	-	-	-	-	13				
Others	14	73.7	4	21.1	-	-	1	5.3	19				
Provider Not Visited	26	89.7	3	10.3	-	-	-	-	29				
Total	132	37.8	169	48.4	17	4.9	31	8.9	349				

Table 7a: Distribution of average actual expenditures for patients with chronic disease by type of provider

Item	Item wise average actual expenditures chronic disease by type of provider								
Services / Provider	Consultancy Fees	Diagnostic s	Medicine	Transportatio n	Informal	Total			
Public	69.2	121.3	749.8	265.9	12.2	1218			
Private	219.1	649.7	1191.1	506.8	34.7	2601			
Informal	0.0	0.0	119.2	7.7	146.2	273			
Others	110.5	263.2	956.8	195.8	0.0	1526.			
Provider not visited	0.0	0.0	164.5	33.4	6.9	205			
Total	130.6	360.2	887.5	341.5	26.2	1746			

Table 7b: Distribution of average actual expenditures on service fee, Medicine and diagnostic cost for patients with chronic disease by type of diseases

Ailments wise average expenditures	s on Service fee, Medicine ar	nd Diagnostics
Chronic ailment suffering from	Expenditures in Rs.	Total patients
Tuberculosis	1676	7
Leprosy	1200	1
Hypertension	596	64
Heart disease	2729	17
Diabetes	2976	28
Mental Illness	425	14
Asthma	1394	20
HIV/AID	0	2
Cancers/Tumor	4915	5
Paralysis of limbs	1309	16
Gastric	910	54
Skin diseases	750	12
Liver disease	8642	6
Bone /Joint disease	673	66
Thyroid	2819	8
Others	1512	29
Total	1378	349

Table 7c: Distribution of average actual expenditures for patients with chronic disease by type of provider & insurance coverage

Average expe	Average expenditures on Chronic ailments in last 30 days (in Rs.)							
Status of Insurance	Service provider	Service fees	Diagnostic cost	Medicines cost	Total patients with Chronic ailments			
	Informal	0	0	183	6			
	Others	9	0	164	11			
RSBY	Private	113	685	1102	31			
	Public	47	57	648	50			
	Not visited	0	0	113	16			
Sub -Total		52	211	625	114			
Other insurances /	Others	0	0	640	2			
reimbursement	Private	160	1107	522	15			
mechanism	Public	121	0	187	7			
Sub -Total		135	692	434	24			
	Informal	0	0	64	7			
	Others	333	833	2517	6			
No	Private	257	603	1323	111			
	Public	79	176	872	74			
	Not visited	0	0	82	13			
Sub -Total		172	403	1081	211			
Average total expen	diture	131	360	887	349			

OPD

Table 8a: Distribution of episodes of ailments in the last 30 days according to ailment categories

Ailment suffering in last 30 days						
Ailments	Number	PC				
Asthma	4	0.7				
Back pain	6	1.1				
Body pain	12	2.1				
ВР	15	2.6				
Cancer	4	0.7				
Chest	2	0.4				
Diarrhea	5	0.9				
Fever	366	64.6				
Gastric Problem	21	3.7				
GB stone	1	0.2				
Headache	10	1.8				
Joint pain	23	4.1				
Malaria	22	3.9				
Others	47	8.3				
Skin	6	1.1				
Stomach	5	0.9				
Stomach pain	18	3.2				
Total	567	100.0				

Table 8b: Distribution of episodes of ailments in the last 30 days according to ailment categories (in detail)

Ailment suffering in last 30 days (in broad groups)									
Ailments	Number	PC							
Accident	1	0.2							
Asthma	4	0.7							
Back pain	7	1.2							
Body pain	13	2.3							
ВР	15	2.6							

Breathing 1 0.2 Burn Injury 1 0.2 Cancer 4 0.7 Chest 2 0.4 Dental 1 0.2 Diarrhea 5 0.9 Eye 2 0.4 Fever 361 63.7 Fracture 1 0.2 Gastric Problem 21 3.7 GB stone 1 0.2 Gland 1 0.2 Headache 10 1.8 Health Check up 1 0.2 Heart 1 0.2 Infection 2 0.4 Injury 2 0.4	_		
Cancer 4 0.7 Chest 2 0.4 Dental 1 0.2 Diarrhea 5 0.9 Eye 2 0.4 Fever 361 63.7 Fracture 1 0.2 Gastric Problem 21 3.7 GB stone 1 0.2 Gland 1 0.2 Headache 10 1.8 Health Check up 1 0.2 Heart 1 0.2 Infection 2 0.4 Injury 2 0.4 Inju	Breathing	1	
Chest 2 0.4 Dental 1 0.2 Diarrhea 5 0.9 Eye 2 0.4 Fever 361 63.7 Fracture 1 0.2 Gastric Problem 21 3.7 GB stone 1 0.2 Gland 1 0.2 Headache 10 1.8 Health Check up 1 0.2 Heart 1 0.2 Injury 2 0.4 Injury<	Burn Injury	1	0.2
Dental 1 0.2 Diarrhea 5 0.9 Eye 2 0.4 Fever 361 63.7 Fracture 1 0.2 Gastric Problem 21 3.7 GB stone 1 0.2 Gland 1 0.2 Headache 10 1.8 Health Check up 1 0.2 Heart 1 0.2 Infection 2 0.4 Injury 2 0.4 Inj	Cancer	4	0.7
Diarrhea 5 0.9 Eye 2 0.4 Fever 361 63.7 Fracture 1 0.2 Gastric Problem 21 3.7 GB stone 1 0.2 Gland 1 0.2 Headache 10 1.8 Health Check up 1 0.2 Heart 1 0.2 Infection 2 0.4 Injury 2 0.4 Inj	Chest	2	0.4
Eye 2 0.4 Fever 361 63.7 Fracture 1 0.2 Gastric Problem 21 3.7 GB stone 1 0.2 Gland 1 0.2 Headache 10 1.8 Health Check up 1 0.2 Heart 1 0.2 Infection 2 0.4 Injury 2 0.4 Malaria 2 0.4 Neck pain 1 0.2 Nerve 2 0.4 Others 5 0.9 Pain of hand 1 0.2 Skin 6 1.1 Stomach 5 0.9 <	Dental	1	0.2
Fever 361 63.7 Fracture 1 0.2 Gastric Problem 21 3.7 GB stone 1 0.2 Gland 1 0.2 Headache 10 1.8 Health Check up 1 0.2 Heart 1 0.2 Infection 2 0.4 Injury 2 0.4 Joint pain 23 4.1 Liver 1 0.2 Malaria 22 3.9 Mental 2 0.4 Neck pain 1 0.2 Nerve 2 0.4 Others 5 0.9 Pain of hand 1 0.2 Pox 2 0.4 Skin 6 1.1 Stomach pain 18 3.2 Sugar 3 0.5 Sinus 1 0.2 Teeth pain 1 0.2 <	Diarrhea	5	0.9
Fracture 1 0.2 Gastric Problem 21 3.7 GB stone 1 0.2 Gland 1 0.2 Headache 10 1.8 Health Check up 1 0.2 Heart 1 0.2 Infection 2 0.4 Injury 2 0.4 Joint pain 23 4.1 Liver 1 0.2 Malaria 22 3.9 Mental 2 0.4 Neck pain 1 0.2 Nerve 2 0.4 Others 5 0.9 Pain of hand 1 0.2 Pox 2 0.4 Skin 6 1.1 Stomach 5 0.9 Stomach pain 18 3.2 Sinus 1 0.2 TB 1 0.2 Teeth pain 1 0.2	Eye	2	0.4
Gastric Problem 21 3.7 GB stone 1 0.2 Gland 1 0.2 Headache 10 1.8 Health Check up 1 0.2 Heart 1 0.2 Infection 2 0.4 Injury 2 0.4 Joint pain 23 4.1 Liver 1 0.2 Malaria 22 3.9 Mental 2 0.4 Neck pain 1 0.2 Nerve 2 0.4 Others 5 0.9 Pain of hand 1 0.2 Pox 2 0.4 Skin 6 1.1 Stomach 5 0.9 Stomach pain 18 3.2 Sinus 1 0.2 TB 1 0.2 Teeth pain 1 0.2 Typhoid 5 0.9	Fever	361	63.7
GB stone 1 0.2 Gland 1 0.2 Headache 10 1.8 Health Check up 1 0.2 Heart 1 0.2 Infection 2 0.4 Injury 2 0.4 Joint pain 23 4.1 Liver 1 0.2 Malaria 22 3.9 Mental 2 0.4 Neck pain 1 0.2 Nerve 2 0.4 Others 5 0.9 Pain of hand 1 0.2 Pox 2 0.4 Skin 6 1.1 Stomach 5 0.9 Stomach pain 18 3.2 Sinus 1 0.2 TB 1 0.2 Teeth pain 1 0.2 Typhoid 5 0.9 Uric acid 1 0.2 Typhoid 5 0.9 Uric acid 1 0.2	Fracture	1	0.2
Gland 1 0.2 Headache 10 1.8 Health Check up 1 0.2 Heart 1 0.2 Infection 2 0.4 Injury 2 0.4 Joint pain 23 4.1 Liver 1 0.2 Malaria 22 3.9 Mental 2 0.4 Neck pain 1 0.2 Nerve 2 0.4 Others 5 0.9 Pain of hand 1 0.2 Pox 2 0.4 Skin 6 1.1 Stomach 5 0.9 Stomach pain 18 3.2 Sinus 1 0.2 TB 1 0.2 Teeth pain 1 0.2 Typhoid 5 0.9 Uric acid 1 0.2 Typhoid 5 0.9 Uric acid 1 0.2 Vomiting 2 0.4	Gastric Problem	21	3.7
Health Check up 1 0.2 Heart 1 0.2 Infection 2 0.4 Injury 2 0.4 Joint pain 23 4.1 Liver 1 0.2 Malaria 22 3.9 Mental 2 0.4 Neck pain 1 0.2 Nerve 2 0.4 Others 5 0.9 Pain of hand 1 0.2 Pox 2 0.4 Skin 6 1.1 Stomach 5 0.9 Stomach pain 18 3.2 Sinus 1 0.2 TB 1 0.2 Teeth pain 1 0.2 Typhoid 5 0.9 Uric acid 1 0.2 Typhoid 5 0.9 Uric acid 1 0.2 Vomiting 2 0.4 Weakness 4 0.7 Worm 1 0.2 <	GB stone	1	0.2
Health Check up 1 0.2 Heart 1 0.2 Infection 2 0.4 Injury 2 0.4 Joint pain 23 4.1 Liver 1 0.2 Malaria 22 3.9 Mental 2 0.4 Neck pain 1 0.2 Nerve 2 0.4 Others 5 0.9 Pain of hand 1 0.2 Pox 2 0.4 Skin 6 1.1 Stomach pain 18 3.2 Stomach pain 18 3.2 Sinus 1 0.2 TB 1 0.2 Teeth pain 1 0.2 Typhoid 5 0.9 Uric acid 1 0.2 Vomiting 2 0.4 Weakness 4 0.7 Worm 1 0.2	Gland	1	0.2
Heart 1 0.2 Infection 2 0.4 Injury 2 0.4 Joint pain 23 4.1 Liver 1 0.2 Malaria 22 3.9 Mental 2 0.4 Neck pain 1 0.2 Nerve 2 0.4 Others 5 0.9 Pain of hand 1 0.2 Pox 2 0.4 Skin 6 1.1 Stomach pain 18 3.2 Stomach pain 18 3.2 Sinus 1 0.2 TB 1 0.2 Teeth pain 1 0.2 Tumor 2 0.4 Typhoid 5 0.9 Uric acid 1 0.2 Vomiting 2 0.4 Weakness 4 0.7 Worm 1 0.2	Headache	10	1.8
Infection 2 0.4 Injury 2 0.4 Joint pain 23 4.1 Liver 1 0.2 Malaria 22 3.9 Mental 2 0.4 Neck pain 1 0.2 Nerve 2 0.4 Others 5 0.9 Pain of hand 1 0.2 Pox 2 0.4 Skin 6 1.1 Stomach 5 0.9 Stomach pain 18 3.2 Sugar 3 0.5 Sinus 1 0.2 TB 1 0.2 Teeth pain 1 0.2 Tumor 2 0.4 Typhoid 5 0.9 Uric acid 1 0.2 Vomiting 2 0.4 Weakness 4 0.7 Worm 1 0.2	Health Check up	1	0.2
Injury 2 0.4 Joint pain 23 4.1 Liver 1 0.2 Malaria 22 3.9 Mental 2 0.4 Neck pain 1 0.2 Nerve 2 0.4 Others 5 0.9 Pain of hand 1 0.2 Pox 2 0.4 Skin 6 1.1 Stomach 5 0.9 Stomach pain 18 3.2 Sugar 3 0.5 Sinus 1 0.2 TB 1 0.2 Teeth pain 1 0.2 Typhoid 1 0.2 Typhoid 5 0.9 Uric acid 1 0.2 Vomiting 2 0.4 Weakness 4 0.7 Worm 1 0.2	Heart	1	0.2
Joint pain 23 4.1 Liver 1 0.2 Malaria 22 3.9 Mental 2 0.4 Neck pain 1 0.2 Nerve 2 0.4 Others 5 0.9 Pain of hand 1 0.2 Pox 2 0.4 Skin 6 1.1 Stomach 5 0.9 Stomach pain 18 3.2 Sinus 1 0.2 TB 1 0.2 Teeth pain 1 0.2 Typroid 1 0.2 Typhoid 5 0.9 Uric acid 1 0.2 Vomiting 2 0.4 Weakness 4 0.7 Worm 1 0.2	Infection	2	0.4
Liver 1 0.2 Malaria 22 3.9 Mental 2 0.4 Neck pain 1 0.2 Nerve 2 0.4 Others 5 0.9 Pain of hand 1 0.2 Pox 2 0.4 Skin 6 1.1 Stomach 5 0.9 Stomach pain 18 3.2 Sinus 1 0.2 TB 1 0.2 Teeth pain 1 0.2 Typroid 1 0.2 Typhoid 5 0.9 Uric acid 1 0.2 Vomiting 2 0.4 Weakness 4 0.7 Worm 1 0.2	Injury	2	0.4
Malaria 22 3.9 Mental 2 0.4 Neck pain 1 0.2 Nerve 2 0.4 Others 5 0.9 Pain of hand 1 0.2 Pox 2 0.4 Skin 6 1.1 Stomach 5 0.9 Stomach pain 18 3.2 Sinus 1 0.2 TB 1 0.2 Teeth pain 1 0.2 Thyroid 1 0.2 Typhoid 5 0.9 Uric acid 1 0.2 Vomiting 2 0.4 Weakness 4 0.7 Worm 1 0.2	Joint pain	23	4.1
Mental 2 0.4 Neck pain 1 0.2 Nerve 2 0.4 Others 5 0.9 Pain of hand 1 0.2 Pox 2 0.4 Skin 6 1.1 Stomach 5 0.9 Stomach pain 18 3.2 Sinus 1 0.2 TB 1 0.2 Teeth pain 1 0.2 Thyroid 1 0.2 Typhoid 5 0.9 Uric acid 1 0.2 Vomiting 2 0.4 Weakness 4 0.7 Worm 1 0.2	Liver	1	0.2
Neck pain 1 0.2 Nerve 2 0.4 Others 5 0.9 Pain of hand 1 0.2 Pox 2 0.4 Skin 6 1.1 Stomach 5 0.9 Stomach pain 18 3.2 Sugar 3 0.5 Sinus 1 0.2 TB 1 0.2 Teeth pain 1 0.2 Thyroid 1 0.2 Typhoid 5 0.9 Uric acid 1 0.2 Vomiting 2 0.4 Weakness 4 0.7 Worm 1 0.2	Malaria	22	3.9
Nerve 2 0.4 Others 5 0.9 Pain of hand 1 0.2 Pox 2 0.4 Skin 6 1.1 Stomach 5 0.9 Stomach pain 18 3.2 Sugar 3 0.5 Sinus 1 0.2 TB 1 0.2 Teeth pain 1 0.2 Thyroid 1 0.2 Tumor 2 0.4 Typhoid 5 0.9 Uric acid 1 0.2 Vomiting 2 0.4 Weakness 4 0.7 Worm 1 0.2	Mental	2	0.4
Others 5 0.9 Pain of hand 1 0.2 Pox 2 0.4 Skin 6 1.1 Stomach 5 0.9 Stomach pain 18 3.2 Sugar 3 0.5 Sinus 1 0.2 TB 1 0.2 Teeth pain 1 0.2 Tumor 2 0.4 Typhoid 5 0.9 Uric acid 1 0.2 Vomiting 2 0.4 Weakness 4 0.7 Worm 1 0.2	Neck pain	1	0.2
Pain of hand 1 0.2 Pox 2 0.4 Skin 6 1.1 Stomach 5 0.9 Stomach pain 18 3.2 Sugar 3 0.5 Sinus 1 0.2 TB 1 0.2 Teeth pain 1 0.2 Tumor 2 0.4 Typhoid 5 0.9 Uric acid 1 0.2 Vomiting 2 0.4 Weakness 4 0.7 Worm 1 0.2	Nerve	2	0.4
Pox 2 0.4 Skin 6 1.1 Stomach 5 0.9 Stomach pain 18 3.2 Sugar 3 0.5 Sinus 1 0.2 TB 1 0.2 Teeth pain 1 0.2 Thyroid 1 0.2 Tumor 2 0.4 Typhoid 5 0.9 Uric acid 1 0.2 Vomiting 2 0.4 Weakness 4 0.7 Worm 1 0.2	Others	5	0.9
Skin 6 1.1 Stomach 5 0.9 Stomach pain 18 3.2 Sugar 3 0.5 Sinus 1 0.2 TB 1 0.2 Teeth pain 1 0.2 Thyroid 1 0.2 Tumor 2 0.4 Typhoid 5 0.9 Uric acid 1 0.2 Vomiting 2 0.4 Weakness 4 0.7 Worm 1 0.2	Pain of hand	1	0.2
Stomach 5 0.9 Stomach pain 18 3.2 Sugar 3 0.5 Sinus 1 0.2 TB 1 0.2 Teeth pain 1 0.2 Thyroid 1 0.2 Tumor 2 0.4 Typhoid 5 0.9 Uric acid 1 0.2 Vomiting 2 0.4 Weakness 4 0.7 Worm 1 0.2	Pox	2	0.4
Stomach pain 18 3.2 Sugar 3 0.5 Sinus 1 0.2 TB 1 0.2 Teeth pain 1 0.2 Thyroid 1 0.2 Tumor 2 0.4 Typhoid 5 0.9 Uric acid 1 0.2 Vomiting 2 0.4 Weakness 4 0.7 Worm 1 0.2	Skin	6	1.1
Sugar 3 0.5 Sinus 1 0.2 TB 1 0.2 Teeth pain 1 0.2 Thyroid 1 0.2 Tumor 2 0.4 Typhoid 5 0.9 Uric acid 1 0.2 Vomiting 2 0.4 Weakness 4 0.7 Worm 1 0.2	Stomach	5	0.9
Sinus 1 0.2 TB 1 0.2 Teeth pain 1 0.2 Thyroid 1 0.2 Tumor 2 0.4 Typhoid 5 0.9 Uric acid 1 0.2 Vomiting 2 0.4 Weakness 4 0.7 Worm 1 0.2	Stomach pain	18	3.2
TB 1 0.2 Teeth pain 1 0.2 Thyroid 1 0.2 Tumor 2 0.4 Typhoid 5 0.9 Uric acid 1 0.2 Vomiting 2 0.4 Weakness 4 0.7 Worm 1 0.2	Sugar	3	0.5
Teeth pain 1 0.2 Thyroid 1 0.2 Tumor 2 0.4 Typhoid 5 0.9 Uric acid 1 0.2 Vomiting 2 0.4 Weakness 4 0.7 Worm 1 0.2	Sinus	1	0.2
Thyroid 1 0.2 Tumor 2 0.4 Typhoid 5 0.9 Uric acid 1 0.2 Vomiting 2 0.4 Weakness 4 0.7 Worm 1 0.2	ТВ	1	0.2
Tumor 2 0.4 Typhoid 5 0.9 Uric acid 1 0.2 Vomiting 2 0.4 Weakness 4 0.7 Worm 1 0.2	Teeth pain	1	0.2
Typhoid 5 0.9 Uric acid 1 0.2 Vomiting 2 0.4 Weakness 4 0.7 Worm 1 0.2	Thyroid	1	0.2
Uric acid 1 0.2 Vomiting 2 0.4 Weakness 4 0.7 Worm 1 0.2	Tumor	2	0.4
Vomiting 2 0.4 Weakness 4 0.7 Worm 1 0.2	Typhoid	5	0.9
Weakness 4 0.7 Worm 1 0.2		1	0.2
Worm 1 0.2	Vomiting	2	0.4
	Weakness	4	0.7
Total 567 100.0	Worm	1	0.2
	Total	567	100.0

Table 9a: Distribution of ailments in the last 30 days by age group (in numbers)

	Perso	ons suffe	red any	illness dı	ıring last	: 30 days	by age g	group	Total
Ailments / Age Group	0-2 years	2.1 -5 years	5.1 - 10 years	10.1- 18 years	18.1- 30 years	30.1- 50 years	50.1- 65 years	Abov e 65.1 years	persons suffere d
Asthma	-	-	-	-	1	1	-	2	4
Back pain	-	-	-	-	-	3	2	1	6
Body pain	-	-	-	-	1	6	2	3	12
ВР	-	-	-	1	1	5	5	3	15
Cancer	-	-	-	-	-	-	3	1	4
Chest	-	-	-	-	1	-	1	-	2
Dyrrohea	-	-	-	-	1	1	3	-	5
Fever	3	2	4	2	81	169	83	22	366
Gastric Problem	-	-	-	-	1	9	6	5	21
GB stone	-	-	-	-	-	1	-	-	1
Headache	-	-	-	-	1	5	4	-	10
Joint pain	-	-	-	-	2	9	9	3	23
Malaria	-	-	-	-	10	7	4	1	22
Others	-	-	-	1	8	19	12	7	47
Skin	-	-	-	-	1	3	1	1	6
Stomach	-	-	-	-	-	2	3	-	5
Stomach pain	-	-	-	1	1	8	2	6	18
Total	3	2	4	5	110	248	140	55	567

Table 9b: Distribution of ailments in the last 30 days by age group (in %)

	Persons suffered any illness during last 30 days by age group (in %)											
Ailments / Age Group	0-2 years	2.1 -5 years	5.1 - 10 years	10.1- 18 years	18.1- 30 years	30.1- 50 years	50.1- 65 years	Above 65.1 years	Total persons suffered			
Asthma	-	-	-	-	25.0	25.0	-	5.0	100.0			
Back pain	-	-	-	-	-	5.0	33.3	16.7	100.0			
Body pain	-	-	-	-	8.3	5.0	16.7	25.0	100.0			
ВР	-	-	-	6.7	6.7	33.3	33.3	2.0	100.0			
Cancer	-	-	-	-	-	-	75.0	25.0	100.0			
Chest	-	-	-	-	5.0	-	5.0	-	100.0			
Diarrhea	-	-	-	-	2.0	2.0	6.0	-	100.0			
Fever	0.8	0.5	1.9	0.5	22.1	46.2	22.7	6.2	100.0			
Gastric Problem	-	-	-	-	4.8	42.9	28.6	23.9	100.0			
GB stone	-	-	-	-	-	1.0	-	-	100.0			
Headache	-	-	-	-	1.0	5.0	4.0	-	100.0			
Joint pain	-	-	-	-	8.7	39.1	39.1	13.4	100.0			
Malaria	-	-	-	-	45.5	31.8	18.2	4.5	100.0			
Others	-	-	=	2.1	17.2	4.4	25.5	14.9	100.0			
Skin	-	-	-	-	16.7	5.0	16.7	16.7	100.0			
Stomach	-	-	-	-	-	4.0	6.0	-	100.0			
Stomach pain	-	-	-	5.6	5.6	44.4	11.1	33.3	100.0			
Total	0.5	0.4	0.8	0.9	19.4	43.7	24.7	9.7	100.0			

Table 10a: Distribution of individuals sought outpatient care for chronic ailments in last 30days according to type of provider by facility wise

Provider visi	ted for OPD cases	s
Provider	Number	PC
Sub center	46	8.1
Primary health centre	72	12.7
Community health centre	17	3.0
Sub district Hospital	106	18.7
District Hospital	20	3.5
Medical College Hospital	1	0.2
Doctor/Clinic	175	30.9
Private Hospital	1	0.2
Charitable/Trust Hospital	2	0.4
RMP	4	0.7
Traditional Healer	20	3.5
ASHA	8	1.4
Others	25	4.4
Provider Not Visited	70	12.3
Total	567	100.0

Table 10b: Distribution of individuals sought outpatient care for chronic ailments in last 30days according to type of provider

Provider visit	Provider visited for OPD cases										
Туре	Number	PC									
ASHA	8	1.4									
Others	22	3.9									
Private	178	31.4									
Provider not visited	70	12.3									
Public	265	46.7									
Informal	24	4.2									
Total	567	100.0									

Table 11a: Distribution of Consultation fee cost for OPD cases by type of provider

				Cons	ultatio	on fee co	ost for	OPD (cases (I	n Rs.)			
Provider / Amount	,	Nil	Un te	o 100	101	to 300	301 50		501 10		100 abo		Total
Amount													patients
	No.	PC	No.	PC	No.	PC	No.	PC	No.	PC	No.	PC	
Public	203	76.6	44	16.6	18	6.8	-	-	-	-	-	-	265
Private	84	47.2	56	31.5	35	19.7	1	0.6	1	0.6	1	0.6	178
ASHA	8	100.0	ı	-	-	ı	-	-	1	-	ı	-	8
Informal	23	95.8	1	4.2	ı	ı	-	-	1	ı	ı	-	24
Others	17	77.3	4	18.2	1	4.5	-	-	-	-	-	-	22
Provider not visited	70	100.0	-	-	-	-	-	-	-	-	-	-	70
Total Inpatients	405	71.4	105	18.5	54	9.5	1	0.2	1	0.2	1	0.2	567

Table 11b: Distribution of Diagnostic tests cost for OPD cases by type of provider

			Diag	nostic	tests co	st for C)PD ca	ses (Ir	n Rs.)		
Provider / Amount	Nil		Up to	200	201 t	o 500) to 00	100 abo		Total
	No.	PC	No.	PC	No.	PC	No.	PC	No.	PC	patients
Public	222	83.8	23	8.7	17	6.4	1	0.4	2	0.8	265
Private	135	75.8	24	13.5	12	6.7	3	1.7	4	2.2	178
ASHA	8	100.0	-	-	-	-	-	-	-	-	8
Informal	24	100.0	-	-	-	-	-	-	-	-	24
Others	18	81.8	2	9.1	2	9.1	-	-	-	-	22
Provider not visited	70	100.0	-	-	-	_	-	-	-	-	70
Total Inpatients	477	84.1	49	8.6	31	5.5	4	0.7	6	1.1	567

Table 11c: Distribution of Medicines cost for OPD cases by type of provider

	Medicines cost for OPD cases (In Rs.)												
Provider / Amount	Nil		Up t	o 500	500 t	o 1000	1001 8	& above	Total				
	No.	PC	No.	PC	No.	PC	No.	PC	patients				
Public	76	28.7	137	51.7	34	12.8	18	6.8	265				
Private	9	5.1	124	69.7	26	14.6	19	10.7	178				
ASHA	4	50.0	3	37.5	-	-	1	12.5	8				
Informal	8	33.3	16	66.7	-	-	-	-	24				
Others	5	22.7	11	50.0	3	13.6	3	13.6	22				
Provider not visited	31	44.3	37	52.9	2	2.9	-	-	70				
Total Inpatients	133	23.5	328	57.8	65	11.5	41	7.2	567				

Table 11d: Distribution of Transportation cost for OPD cases by type of provider

			Transp	ortation	Cost fo	or OPD	cases (I	n Rs.)		
Provider / Amount	Nil		Up t	o 500	500 100		100 abo		Total	
	No.	PC	No.	PC	No.	PC	No.	PC	patients	
Public	171	64.5	91	34.3	3	1.1	-	-	265	
Private	104	58.4	67	37.6	3	1.7	4	2.2	178	
ASHA	6	75.0	2	25.0	-	-	-	-	8	
Informal	22	91.7	2	8.3	-	-	-	-	24	
Others	15	68.2	7	31.8	-	-	-	-	22	
Provider not visited	58	82.9	12	17.1	-	-	-	-	70	
Total Inpatients	376	66.3	181	31.9	6	1.1	4	0.7	567	

Table 11e: Distribution of Informal payments for OPD cases by type of provider

		In	formal	paymer	nts for	OPD c	ases (In	Rs.)		
Provider / Amount	Nil		Upt	o 200	200 50		501 abo		Total	
	No.	PC	No.	PC	No.	PC	No.	PC	patients	
Public	239	90.2	22	8.3	2	0.8	2	0.8	265	
Private	166	93.3	8	4.5	2	1.1	2	1.1	178	
ASHA	7	87.5	1	12.5	-	-	-	-	8	
Informal	17	70.8	5	20.8	2	8.3	-	-	24	
Others	19	90.5	2	9.5	-	-	-	-	21	
Provider not visited	71	100.0	1	-	-	-	-	-	71	
Total Inpatients	519	91.5	38	6.7	6	1.1	4	0.7	567	

Table 12a: Distribution of average actual expenditures for patients for OPD cases by type of provider

	Actual Expenditures for OPD cases												
Provider / Amount	Consultancy Fees	Diagnostics	Medicine	Transportation	Informal	Total							
Public	24.6	45.1	375	120	16	580.7							
Private	77.2	127	625.3	167.5	19.3	1016.4							
Informal	2.1	0	135.4	31.7	45.8	215							
ASHA	0	0	220	27.5	25	272.5							
Others	23.8	37.7	373.4	50.5	1.8	486.1							
Provider not visited	0	0	76.3	19.4	0	95.7							
Total	36.7	62.4	404.3	114.7	15.9	634.1							

Table 12b: Distribution of average actual expenditures for patients for OPD cases on service fee, diagnostic cost and medicine by type of diseases

Ailments wise average expenditures on Service fee, Medicine and Diagnostics for OPD								
patients								

-		1		
Chronic ailment suffering from	Expenditures in Rs.	Total patients		
Asthma	325	4		
Back pain	157	6		
Body pain	327	12		
ВР	355	15		
Cancer	1938	4		
Chest	475	2		
Diarrhea	220	5		
Fever	367	366		
Gastric Problem	317	21		
Headache	403	10		
Joint pain	1525	23		
Malaria	954	22		
Others	600	47		
Skin	645	6		
Stomach	1200	5		
Stomach pain	1380	19		
Grand Total	503	567		
	_ t			

Table 12c: Distribution of actual expenditures for patients for OPD cases by type of provider and insurance cover

Expenditures on per OPD patients in last 30 days (in Rs.)											
Status of Insurance	Service provider	Service fees	Diagnostic cost	Medicines cost	Total episodes of OPD cases						
	Others	11	8	286	33						
	Private	83	90	580	110						
RSBY	Provider not visited	0	0	60	38						
	Public	16	42	280	139						
	Sub Total	33	48	341	320						
	Others	0	0	200	2						
Oth - n :	Private	190	1040	2580	5						
Other insurances / reimbursement mechanism	Provider not visited	0	0	225	6						
mechanism	Public	44	5	226	17						
	Total	57	176	617	30						
	Others	11	21	224	19						
	Private	69	107	562	63						
No	Provider not visited	0	0	64	26						
	Public	29	53	468	109						
	Total	37	62	427	217						
Average total expenditure		37	62	404	567						

<u>IPD</u>

Table 13: Hospitalization during last 365 days according to ailment

			Ailment for	· IPD in la	st 365 days		
SI	Ailments	M	ale	Fe	male	Total	PC of total IPD patients
		No.	PC	No.	PC	No.	PC
1	Accident	14	82.4	3	17.6	17	3.3
2	Asthma	7	87.5	1	12.5	8	1.5
3	BP	14	70.0	6	30.0	20	3.8
4	Burn Injury	1	100.0	-	-	1	0.2
5	Cancer	3	100.0	-	-	3	0.6
6	Dyrrohea	9	60.0	6	40.0	15	2.9
7	Eye	2	66.7	1	33.3	3	0.6
8	Eye	-	-	1	100.0	1	0.2
9	Fever	83	73.5	30	26.5	113	21.7
10	Fracture	3	75.0	1	25.0	4	0.8
11	Gastric	19	76.0	6	24.0	25	4.8
12	GB stone	4	100.0	-	-	4	0.8
13	Heart	5	83.3	1	16.7	6	1.2
14	Joint Pain	9	64.3	5	35.7	14	2.7
15	Jaundice	3	100.0	-	-	3	0.6
16	Leprosy	1	50.0	1	50.0	2	0.4
17	Liver Disease	5	83.3	1	16.7	6	1.2
18	Lungs	1	100.0	-	-	1	0.2
19	Malaria	114	73.1	42	26.9	156	29.9
20	O&G	7	87.5	1	12.5	8	1.5
21	Others	21	70.0	9	30.0	30	5.8
22	Pain	3	100.0	-	-	3	0.6
23	Paralysis	9	90.0	1	10.0	10	1.9
24	Skin	-	-	2	100.0	2	0.4
25	Stomach	32	84.2	6	15.8	38	7.3
26	Sugar	9	90.0	1	10.0	10	1.9
27	ТВ	3	60.0	2	40.0	5	1.0
28	Typhoid	6	85.7	1	14.3	7	1.3
29	Urinary	3	100.0	-	-	3	0.6
30	Vomiting	3	100.0	-	-	3	0.6
	Total	393	75.4	128	24.6	521	100.0

Table 14a: Distribution of diseases for hospitalized cases during last 365 days by age group (in no.)

		Person	s hospita	alized du	iring last	: 365 day	s by age	group (in no.s)	Tatal
SI.	Ailments /	0-2	2.1 -5	5.1 -	10.1-	18.1-	30.1-	50.1-	Above	Total persons
٥١.	Age Group	years	years	10	18	30	50	65	65.1	hospitalized
		years	years	years	years	years	years	years	years	nospitanzea
1	Accident	-	-	-	-	1	14	2	-	17
2	Asthma	-	-	-	-	-	1	4	3	8
3	BP	-	-	-	-	-	12	3	5	20
4	Burn Injury	-	-	-	1	ı	-	ı	-	1
5	Cancer	-	-	-	-	-	1	1	1	3
6	Diarrhea	ı	-	ı	ı	4	6	3	2	15
7	Eye	-	-	-	-	ı	1	-	2	3
8	Eye	ı	-	ı	ı	ı	Ī	1	-	1
9	Fever	1	-	-	-	27	45	28	12	113
10	Fracture	-	-	-	-	-	2	1	1	4
11	Gastric	-	-	-	1	2	11	5	6	25
12	GB stone	-	-	-	-	-	2	2	-	4
13	Heart	-	-	-	-	-	2	3	1	6
14	Joint Pain	-	-	-	-	2	4	5	3	14
15	Jaundice	-	-	-	-	-	1	2	-	3
16	Leprosy	-	-	-	-	-	2	-	-	2
17	Liver Disease	-	-	-	-	-	2	1	3	6
18	Lungs	-	-	-	-	-	-	-	1	1
19	Malaria	1	4	5	9	41	63	18	15	156
20	O&G	-	-	-	-	1	3	3	1	8
21	Others	1	-	-	-	6	15	8	-	30
22	Pain	-	-	-	-	1	1	-	1	3
23	Paralysis	-	-	-	-	2	4	3	1	10
24	Skin	-	-	-	-	1	1	-	-	2
25	Stomach	2	-	-	1	5	22	8	-	38
26	Sugar	-	-	-	-	2	5	1	2	10
27	ТВ	-	-	-	-	1	1	2	1	5
28	Typhoid	-	-	-	-	-	3	3	1	7
29	Urinary	-	-	-	-	-	3	-	-	3
30	Vomiting	-	-	-	-	1	1	-	1	3
	Total	5	4	5	12	97	228	107	63	521

Table 14b: Table 9b: Distribution of ailments for hospitalized cases during last 365 days by age group (in %)

		Persor	s hospit	alized dı	uring last	365 day	ys by ag	e group	(in %)	Total
CI	Ailments /	0.0	24.5	5.1 -	10.1-	18.1-	30.1-	50.1-	Above	persons
SI.	Age Group	0-2	2.1 -5	10	18	30	50	65	65.1	hospitalized
		years	years	years	years	years	years	years	years	
1	Accident	-	-	-	-	_	12.5	5.0	37.5	100.0
2	Asthma	1	-	Ī	-	-	6.0	15.0	25.0	100.0
3	ВР	1	-	Ī	1.0	-	-	Ī	-	100.0
4	Burn Injury	ı	-	ı	=	=	33.3	33.3	33.3	100.0
5	Cancer	ı	-	-	=	26.7	4.0	2.0	13.3	100.0
6	Diarrhea	1	-	Ī	-	-	33.3	Ī	66.7	100.0
7	Eye	1	-	Ī	-	-	-	1.0	-	100.0
8	Eye	0.9	-	ı	-	23.9	39.8	24.8	1.6	100.0
9	Fever	1	-	Ī	-	-	5.0	25.0	25.0	100.0
10	Fracture	-	-	-	4.0	8.0	44.0	2.0	24.0	100.0
11	Gastric	-	-	-	-	-	5.0	5.0	-	100.0
12	GB stone	I	-	ı	-	-	33.3	5.0	16.7	100.0
13	Heart	-	-	-	-	14.3	28.6	35.7	21.4	100.0
14	Joint Pain	-	-	-	-	-	33.3	66.7	-	100.0
15	Jaundice	1	-	Ī	-	-	1.0	Ī	-	100.0
16	Leprosy	-	-	-	-	-	33.3	16.7	5.0	100.0
17	Liver Disease	I	-	ı	-	-	-	ı	1.0	100.0
18	Lungs	0.6	2.6	3.3	5.8	26.3	4.4	11.5	9.6	100.0
19	Malaria	1	-	Ī	-	12.5	37.5	37.5	12.5	100.0
20	O&G	3.3	-	Ī	-	2.0	5.0	26.7	-	100.0
21	Others	I	-	ı	-	33.3	33.3	ı	33.3	100.0
22	Pain	-	-	-	-	2.0	4.0	3.0	1.0	100.0
23	Paralysis	-	-	-	-	5.0	5.0	-	-	100.0
24	Skin	5.3	-	ı	2.6	13.2	57.9	21.5	-	100.0
25	Stomach	-			-	2.0	5.0	1.0	2.0	100.0
26	Sugar	ı	-	-	-	2.0	2.0	4.0	2.0	100.0
27	ТВ	-	-	-	-	-	42.9	42.9	14.3	100.0
28	Typhoid	-	-	-	-	-	1.0	-	-	100.0
29	Urinary	ı	-	-	-	33.3	33.3	-	33.3	100.0
30	Vomiting	1.0	0.8	1.0	2.3	18.6	43.8	2.5	12.9	100.0
	Total	1.0	0.8	1.0	2.3	18.6	43.8	2.5	12.9	100.0

Table 15a: Distribution of individuals hospitalized during last 365 days according to type of provider by facility wise

Provider visited for IPD cases									
Provider	Number	PC							
Primary health centre	119	22.8							
Community health centre	86	16.5							
Sub district Hospital	195	37.4							
District Hospital	65	12.5							
Medical College Hospital	25	4.8							
Doctor/Clinic	13	2.5							
Private Nursing Home	3	0.6							
Private Hospital	8	1.5							
Charitable/Trust Hospital	4	0.8							
Prvt. Super specialty Hospital	1	0.2							
RMP	2	0.4							
Total	521	100.0							

Table 15a: Distribution of individuals hospitalized during last 365 days according to type of provider

Provider visited for IPD cases									
Туре	Number	PC							
Informal	2	0.4							
Private	29	5.6							
Public	490	94.0							
Total	521	100.0							

Table 16a: Distribution of individuals hospitalized during last 365 days by duration (in no.s)

	Ailments /			Duration	of hospitali	zation (in d	ays)	
SI.	duration of stay	Up to 2	3 to 6	7 to 10	11 to 20	21 to 30	30 & above	Grand Total
1	Accident	5	6	4	2	-	-	17
2	Asthma	1	3	4	-	-	-	8
3	ВР	4	12	4	-	-	-	20
4	Burn Injury	-	-	-	1	-	-	1
5	Cancer	-	-	1	1	-	1	3
6	Diarrhea	5	9	-	1	-	-	15
7	Eye	1	2	-	-	-	-	3
8	Eye	1	-	-	-	-	-	1
9	Fever	39	55	12	6	1	-	113
10	Fracture	1	1	-	1	1	-	4
11	Gastric	5	14	6	-	-	-	25
12	GB stone	1	1	1	1	-	-	4
13	Heart	3	1	1	-	-	1	6
14	Joint Pain	3	9	2	-	-	-	14
15	Jaundice	-	2	-	-	-	1	3
16	Leprosy	2	-	-	-	-	-	2
17	Liver Disease	2	1	2	1	-	-	6
18	Lungs	-	1	-	-	-	-	1
19	Malaria	16	110	27	3	-	-	156
20	O&G	1	3	1	2	1	-	8
21	Others	6	14	5	4	1	-	30
22	Pain	1	2	-	-	-	-	3
23	Paralysis	1	3	1	2	1	2	10
24	Skin	1	-	1	-	-	-	2
25	Stomach	12	20	6	-	-	-	38
26	Sugar	1	7	-	1	-	1	10
27	ТВ	3	1	1	-	-	-	5
28	Typhoid	-	4	2	1	-	-	7
29	Urinary	-	-	-	2	1	-	3
30	Vomiting	2	-	-	1	-	-	3
	Total	117	281	81	30	6	6	521

Table 16b: Distribution of individuals hospitalized during last 365 days by duration (in %)

	Ailments /		Dui	ration of h	ospitalizat	ion (in days	s) (in %)	
No.	duration of stay	Up to 2	3 to 6	7 to 10	11 to 20	21 to 30	30 & above	Total
1	Accident	29.4	35.3	23.5	11.8	-	-	100.0
2	Asthma	12.5	37.5	5.0	-	-	-	100.0
3	ВР	20.0	6.0	2.0	-	-	-	100.0
4	Burn Injury	0.0	-	-	1.0	-	-	100.0
5	Cancer	0.0	-	33.3	33.3	=	33.3	100.0
6	Diarrhea	33.3	6.0	-	6.7	-	-	100.0
7	Eye	33.3	66.7	-	-	-	-	100.0
8	Eye	100.0	-	-	-	=	ı	100.0
9	Fever	34.5	48.7	1.6	5.4	0.9	-	100.0
10	Fracture	25.0	25.0	-	25.0	25.0	-	100.0
11	Gastric	20.0	56.0	24.0	-	-	-	100.0
12	GB stone	25.0	25.0	25.0	25.0	-	-	100.0
13	Heart	50.0	16.7	16.7	-	=	16.7	100.0
14	Joint Pain	21.4	64.3	14.3	-	-	-	100.0
15	Jaundice	0.0	66.7	-	-	-	33.3	100.0
16	Leprosy	100.0	-	-	-	=	-	100.0
17	Liver Disease	33.3	16.7	33.3	16.7	=	-	100.0
18	Lungs	0.0	1.0	-	-	=	ı	100.0
19	Malaria	10.3	7.5	17.4	1.9	-	-	100.0
20	O&G	12.5	37.5	12.5	25.0	12.5	Ī	100.0
21	Others	20.0	46.7	16.7	13.3	3.3	ı	100.0
22	Pain	33.3	66.7	-	-	=	ı	100.0
23	Paralysis	10.0	3.0	1.0	2.0	1.0	2.0	100.0
24	Skin	50.0	-	5.0	-	-	-	100.0
25	Stomach	31.6	52.6	15.8	-	-	-	100.0
26	Sugar	10.0	7.0	-	1.0	-	1.0	100.0
27	ТВ	60.0	2.0	2.0	-	-	-	100.0
28	Typhoid	0.0	57.1	28.6	14.3	-	-	100.0
29	Urinary	0.0	-	-	66.7	33.3	-	100.0
30	Vomiting	66.7	-	-	33.3	-	=	100.0
	Total	22.5	53.9	15.5	5.8	1.2	1.2	100.0

Table 17a: Distribution of expenditures for service during hospitalization by type of provider

		Expenditure for service during hospitalization (In Rs.)																															
	Nil		Nil		Nil		Nil		Nil		Nil		Nil		Nil		Nil		Nil		Nil		Unt	o 100		1 to 00	501 10)1 to)00	500 abo		Total
Provider /																																	
Amount	No.	PC	No.	PC	No.	PC	No.	PC	No.	PC	No.	PC	patients																				
Public	414	84.5	42	8.6	30	6.1	1	0.2	2	0.4	1	0.2	490																				
Private	10	34.5	4	13.8	6	20.7	1	3.4	6	20.7	2	6.9	29																				
Informal	1	50	-	-	ı	-	ı	-	1	50	1	-	2																				
Total	425	81.6	46	8.8	36	6.9	2	0.4	9	1.7	3	0.6	521																				

Table 17b: Distribution of expenditures for diagnostic done inside hospital during hospitalization by type of provider

	Expenditure for diagnostic done inside hospital during hospitalization (In Rs.)											
	Nil		Up to 200			201 to 500		501 to 1001		1 to 00	Total	
Provider / Amount	No.	PC	No.	PC	No.	PC	No.	PC	No.	PC	patients	
Public	471	96.1	11	2.2	3	0.6	2	0.4	3	0.6	490	
Private	26	89.7	-	-	1	3.4	-	-	2	6.9	29	
Informal	2	100	ı	-	ı	-	-	-	-	-	2	
Total	499	95.8	11	2.1	4	0.8	2	0.4	5	1	521	

Table 17c: Distribution of expenditures for diagnostic done outside hospital during hospitalization by type of provider

	Ехр	enditu	re for	diagno	stic do		utside h Rs.)	nospita	al duri	ng hosp	italization
Provider	N	Jil	Upt	o 200	201 50		501 100			01 to 000	Total
/ Amount	No.	PC	No.	PC	No.	PC	No.	PC	No.	PC	patients
Public	378	77.1	54	11	38	7.8	8	1.6	12	2.4	490
Private	13	44.8	7	24.1		0	2	6.9	7	24.1	29
Informal	2	100		0		0		0		0	2
											521

Table 17d: Distribution of expenditures for diagnostic services during hospitalization by type of provider

			Exper	nditure	for to	otal d	iagnos	tic du	ring h	ospitali	zation	(In Rs.)	
Provider	N	lil	Upt	o 200	201 50		501 10			01 to 000	_	00 & ove	Total
/ Amount	No.	PC	No.	PC	No.	PC	No.	PC	No.	PC	No.	PC	patients
Public	362	73.9	63	12.9	41	8.4	10	2	13	2.7	1	0.2	490
Private	10	34.5	7	24.1	1	3.4	2	6.9	5	17.2	4	13.8	29
Informal	2	100		0		0		0		0		0	2
Total	374	71.8	70	13.4	42	8.1	12	2.3	18	3.5	5	1	521

Table 17e: Distribution of expenditures for medicine purchased from hospital during hospitalization by type of provider

	Expe	nditure f	or Med	icine p		d from Rs.)	hospital (during h	ospitalization
	١	Nil	Up to	500	501 to	1000	1001 to	5000	Total
Provider / Amount	No.	PC	No.	PC	No.	PC	No.	PC	patients
Public	473	96.5	9	1.8	4	0.8	4	0.8	490
Private	27	93.1		0		0	2	6.9	29
Informal	2	100		0		0		0	2
Total	502	96.4	9	1.7	4	0.8	6	1.2	521

Table 17f: Distribution of expenditures for medicine purchased from outside during hospitalization by type of provider

	Ex	kpendi	ture f	or Med	licine	purcha	sed fi	rom ou	tside c	luring h	ospital	lization	(In Rs.)
Provider	N	lil	Up t	o 500		1 to 000		1 to 000		01 to 000		00 & ove	Total
/ Amount	No.	PC	No.	PC	No.	PC	No.	PC	No.	PC	No.	PC	patients
Public	104	21.2	113	23.1	94	19.2	160	32.7	14	2.9	5	1	490
Private	8	27.6	4	13.8	2	6.9	7	24.1	3	10.3	5	17.2	29
Informal	1	50		0		0	1	50		0		0	2
Total	113	21.7	117	22.5	96	18.4	168	32.2	17	3.3	10	1.9	521

Table 17g: Distribution of expenditures for medicine purchased during hospitalization by type of provider

			Ехр	enditu	re for	Total N	/ledici	ne duri	ng hos	pitaliza	tion (In	Rs.)	
					503	1 to	100	1 to	500	1 to	100	00 &	
Provider	N	lil	Up t	o 500	10	00	50	000	10	000	ab	ove	Total
/													
Amount	No.	PC	No.	PC	No.	PC	No.	PC	No.	PC	No.	PC	patients
Public	95	19.4	113	23.1	100	20.4	163	33.3	14	2.9	5	1	490
Private	6	20.7	4	13.8	2	6.9	9	31	3	10.3	5	17.2	29
Informal	1	50		0		0	1	50		0		0	2
Total	102	19.6	117	22.5	102	19.6	173	33.2	17	3.3	10	1.9	521

Table 17h: Distribution of expenditures for lodging during hospitalization by type of provider

			Е	xpend	iture f	or Lod	ging d	luring h	nospita	lizatior	ı (In Rs.)	
Provider	N	Jil	Up t	o 500		1 to 000		01 to 000	5002 100		1000 abo		Total
/													
Amount	No.	PC	No.	PC	No.	PC	No.	PC	No.	PC	No.	PC	patients
Public	228	46.5	193	39.4	40	8.2	27	5.5		0	2	0.4	490
Private	13	44.8	5	17.2	3	10.3	5	17.2	2	6.9	1	3.4	29
Informal	2	100											2
Total	243	46.6	198	38	43	8.3	32	6.1	2	0.4	3	0.6	521

Table 17i: Distribution of expenditures for informal payments during hospitalization by type of provider

			E	xpend	liture f	or inf	ormal p	ayme	nts (In R	ks.)	
	N	Vil	Up 50		501 10		1001 500		5001 100		Total
Provider											
/ Amount	No.	PC	No.	PC	No.	PC	No.	PC	No.	PC	patients
Public	470	95.9	9	1.8	10	2		0	1	0.2	490
Private	26	89.7	2	6.9		0	1	3.4		0	29
Informal	1	50		0		0		0	1	50	2
Total	497	95.4	11	2.1	10	1.9	1	0.2	2	0.4	521

Table 17j: Distribution of total expenditures during hospitalization by type of provider

						Total	Expend	diture (I	n Rs.)				
Provider	N	Jil	•	p to									
/ Amount	No.	PC	No.	PC	No.	PC	No.	PC	No.	PC	No.	PC	Grand Total
Public	16	3.3	217	44.3	217	44.3	27	5.5	13	2.7			490
Private	3	10.3	6	20.7	6	20.7	3	10.3	10	34.5	1	3.4	29
Informal					2	100							2
Total	19	3.6	223	42.8	225	43.2	30	5.8	23	4.4	1	0.2	521

Table 18a: Distribution of average actual expenditures during hospitalization by type of provider

Expenditure head / Type of provider	Informal	Private	Public	Total
Service	750.0	1655.9	88.8	178.6
Expenditure for diagnostic done inside hospital	0.0	581.0	20.1	51.3
Expenditure for diagnostic done outside hospital	0.0	11402.4	140.2	766.5
Expenditure for total diagnostic	0.0	11983.4	160.3	817.8
Expenditure for Medicine purchased from hospital	0.0	93.1	32.9	36.1
Expenditure for Medicine purchased from outside	1000.0	4784.5	1414.5	1600.5
Expenditure for Total Medicine	1000.0	4877.6	1447.4	1636.6
Expenditure for Lodging	0.0	2012.1	359.3	449.9
Expenditure for informal payments	1500.0	44.8	13.7	21.2
Total Expenditure	3750.0	20119.0	2128.2	3135.9

Table 18b: Distribution of average actual expenditures on Service fee, Medicine and Diagnostics during hospitalization by type of diseases

Ailments wise average expend	litures on Service fee, Medicine	and Diagnostics
Diseases	Expenditures in Rs.	Total patients
Accident	5981	17
Asthma	2501	8
BP	1119	20
Burn Injury	1000	1
Cancer	26000	3
Diarrhea	687	15
Eye	5667	3
Eye	0	1
Fever	1166	113
Fracture	3625	4
Gastric	1343	25
GB stone	1120	4
Heart	51908	6
Joint Pain	3164	14
Jaundice	3867	3
Leprosy	250	2
Liver Disease	6678	6
Lungs	1950	1
Malaria	840	156
O&G	10331	8
Others	3808	30
Pain	1517	3
Paralysis	5290	10
Skin	900	2
Stomach	1689	38
Sugar	2196	10
ТВ	674	5
Typhoid	1897	7
Urinary	9287	3
Vomiting	3133	3
Total	2633	521

Table 18c: Distribution of actual expenditures during hospitalization by type of provider and insurance cover

Expenditur	es on per pa	tients in IP[) in last 365 day	ys (in Rs.)	
Status of Insurance	Service provider	Service fees	Diagnostic cost	Medicines cost	Total patients
	Informal	0	0	2000	1
RSBY	Private	2538	2329	5608	12
NSDI	Public	134	60	1281	234
	Sub -Total	251	170	1494	247
	Private	150	0	700	2
Others	Public	109	159	1659	17
	Sub -Total	113	143	1558	19
	Informal	1500	0	0	1
No	Private	1151	21305	4850	15
INU	Public	43	259	1595	239
	Sub -Total	114	1496	1781	255
Average total expenditure		179	818	1637	521

Expenditures during pregnancy, delivery and PNC

Table 20a: Distribution of expenditures during ANC, Delivery & PNC

Ave	rage Expenditures per women during	pregnancy and delivery
Period	Services	Amount (in Rs.)
	Service fee	247.3
	Diagnostic charges	54.2
ANC	Transportation cost	885.4
	Medicines cost	909.7
	Inf. Pay ANC	78.2
	Total	2174.8
	Service fee	621.5
	Diagnostic charges	348.6
Delivery	Transportation cost	1006.6
	Medicines cost	1917.9
	Inf. Pay ANC	213.8
	Total	4108.3
	Service fee	868.8
	Diagnostic charges	402.8
Total	Transportation cost	1892.0
	Medicines cost	2827.6
	Inf. Pay ANC	292.0
	Total	6283.2

Table 20a: Distribution of expenditures during Delivery & PNC by insurance coverage

	Ехр	enditures	during Deliv	ery & PNC (in	n Rs.)	
Status of Insurance	Service provider	Service fees	Diagnostic cost	Medicines cost	Transportation cost	Total mothers
	Home	487	50	195	85	32
DCDV	Private	5100	160	1800	3100	7
RSBY	Public	261	298	2712	1216	80
	Total	451	224	1969	942	119
	Private	3673	1850	3300	7600	1
Others	Public	530	1240	3340	2440	5
	Total	1054	1342	3333	3300	6
	Home	285	111	733	168	22
No	Private	6771	2650	6871	6133	2
INU	Public	349	288	1803	784	53
	Total	710	379	1813	933	77
_	Average total expenditure		349	1918	1007	202

Table 21: Distribution of expenditures during ANC by different categories of amount

	Expenditures during ANC											
Amount (in Rs.)/ Services	Serv	vice fee	Diagnostic charges		Transportation cost		Medicines cost		Inf. Pay ANC			
Scrvices	No.	%	No.	%	No.	%	No.	%	No.	%		
Nil	122	60.4	194	96.0	73	36.1	59	29.2	154	76.2		
UP to 100	29	14.4	-	-	3	1.5	2	1.0	7	3.5		
101 to 500	29	14.4	1	0.5	68	33.7	49	24.3	38	18.8		
501 to 1000	8	4.0	4	2.0	32	15.8	38	18.8	3	1.5		
1001 to 5000	14	6.9	3	1.5	20	9.9	49	24.3	-	-		
5001 to 10000	-	-	-	-	4	2.0	5	2.5	-	-		
10000 & above	-	1	-	1	2	1.0	-	-	-	-		
Total	202	100.0	202	100.0	202	100.0	202	100.0	202	100.0		

Table 22: Distribution of expenditures during delivery & PNC by different categories of amount

	Expenditures during Delivery & PNC											
Amount (in Rs.)/ Services	Serv	rice fee	Diagnostic charges		c Transportation cost		Medicines cost		Inf. Pay ANC			
	No.	%	No.	%	No.	%	No.	%	No.	%		
Nil	94	46.5	130	64.4	42	20.8	41	20.3	154	76.2		
UP to 500	67	33.2	19	9.4	56	27.7	33	16.3	28	13.9		
501 to 1000	17	8.4	35	17.3	62	30.7	28	13.9	6	3.0		
1001 to 5000	17	8.4	17	8.4	33	16.3	78	38.6	14	6.9		
5001 to 10000	5	2.5	1	0.5	9	4.5	16	7.9	-	-		
10000 to 20000	2	1.0	-	-	-	-	6	3.0	-	-		
Total	202	100.0	202	100.0	202	100.0	202	100.0	202	100.0		

Table 22: Distribution of total expenditures during ANC, delivery & PNC by different categories of amount

	To	tal Exper	nditure	s during	ANC, De	elivery & Pl	NC			
Amount (in Pc.)/	Serv	Service tee				portation cost		dicines cost	Inf. Pay ANC	
Amount (in Rs.)/ Services	No.	%	No.	%	No.	%	No.	%	No.	%
Nil	92	45.5	130	64.4	42	20.8	41	20.3	152	75.2
UP to 500	50	24.8	19	9.4	31	15.3	14	6.9	9	4.5
501 to 1000	32	15.8	33	16.3	35	17.3	22	10.9	22	10.9
1001 to 5000	20	9.9	19	9.4	73	36.1	89	44.1	19	9.4
5001 to 10000	3	1.5	1	0.5	12	5.9	24	11.9	-	-
10000 to 20000	5	2.5	-	-	7	3.5	12	5.9	-	-
20000 & above	-	-	-	-	2	1.0	-	-	-	-
Total	202	100.0	202	100.0	202	100.0	202	100.0	202	100.0

Table 23: Distribution of service fee during delivery & PNC by type of provider

Service fee		Expenditures during delivery & PNC by place of delivery										
Service ree	Home		Private		Public		Total					
	No. %		No.	%	No. %		No.	%				
Nil	20	9.9	-	-	74	36.6	94	46.5				
UP to 500	24	11.9	-	-	43	21.3	67	33.2				
501 to 1000	5	2.5	-	-	12	5.9	17	8.4				
1001 to 5000	5	2.5	5	2.5	7	3.5	17	8.4				
5001 to 10000	-	-	3	1.5	2	1.0	5	2.5				
10000 to 20000	ı	1	2	-	-	1	2	1.0				
Total	54	26.7	10	5.0	138	68.3	202	100.0				

Table 23a: Distribution of service fee during delivery & PNC by type of provider

Diagnostic	Expenditures during delivery & PNC by place of delivery										
charges	Home		Private		Public		Total				
	No.	%	No.	%	No.	%	No.	%			
Nil	48	23.8	3	1.5	79	39.1	130	64.4			
UP to 500	2	1.0	1	0.5	16	7.9	19	9.4			
501 to 1000	3	1.5	1	0.5	31	15.3	35	17.3			
1001 to 5000	1	0.5	4	2.0	12	5.9	17	8.4			
5001 to 10000	-	-	1	0.5	-	-	1	0.5			
Total	54	26.7	10	5.0	138	68.3	202	100.0			

Table 23b: Distribution of diagnostic charges during delivery & PNC by type of provider

Transportation	Expenditures during delivery & PNC by place of delivery										
cost	Home		Private		Public		Total				
	No.	%	No.	%	No.	%	No.	%			
Nil	32	15.8	-	-	10	5.0	42	20.8			
UP to 500	20	9.9	-	-	36	17.8	56	27.7			
501 to 1000	1	0.5	-	-	61	30.2	62	30.7			
1001 to 5000	1	0.5	5	2.5	27	13.4	33	16.3			
5001 to 10000	-	-	5	2.5	4	2.0	9	4.5			
Total	54	26.7	10	5.0	138	68.3	202	100.0			

Table 23c: Distribution of diagnostic charges during delivery & PNC by type of provider

Medicines		Expenditures during delivery & PNC by place of delivery										
cost	Home		Private		Public		-	Гotal				
	No.	%	No.	%	No.	%	No.	%				
Nil	34	16.8	-	-	7	3.5	41	20.3				
UP to 500	9	4.5	1	0.5	23	11.4	33	16.3				
501 to 1000	5	2.5	-	-	23	11.4	28	13.9				
1001 to 5000	4	2.0	5	2.5	69	34.2	78	38.6				
5001 to 10000	2	1.0	2	1.0	12	5.9	16	7.9				
10000 to 20000	-	-	2	1.0	4	2.0	6	3.0				
Total	54	26.7	10	5.0	138	68.3	202	100.0				

Table 23d: Distribution of medicines cost during delivery & PNC by type of provider

Inf Day ANG		Expenditures during delivery & PNC by place of delivery										
Inf. Pay ANC	Home		Private		Public		Total					
	No.	%	No.	%	No.	%	No.	%				
Nil	48	23.8	7	3.5	99	49.0	154	76.2				
UP to 500	3	1.5	2	1.0	23	11.4	28	13.9				
501 to 1000	2	1.0	-	-	4	2.0	6	3.0				
1001 to 5000	1	0.5	1	0.5	12	5.9	14	6.9				
Total	54	26.7	10	5.0	138	68.3	202	100.0				

Table 23e: Distribution of medicines cost during delivery & PNC by type of provider

Total	Ex	penditur	es durir	g deliv	ery & P	NC by pla	ce of de	elivery
iotai	Home		Private		Pu	blic	Total	
	No.	No. %		%	No. %		No.	%
Nil	8	4.0	-	1	1	0.5	9	4.5
UP to 500	18	8.9	-		8	4.0	26	12.9
501 to 1000	14	6.9	-	-	13	6.4	27	13.4
1001 to 5000	12	5.9	-	-	80	39.6	92	45.5
5001 to								
10000	1	0.5	2	1.0	24	11.9	27	13.4
10000 to								
20000	1	0.5	3	1.5	10	5.0	14	6.9
Above 20000	1	-	5	2.5	2	1.0	7	3.5
Total	54	26.7	10	5.0	138	68.3	202	100.0

ANNEXURE 1: Sample village list of Dhalai District

SI.	Block Name	Name of GP/Village	Туре	Population	From different Strata	Sample Villages
1	Ambassa	Paschim Balaram	GP	995	1	1
2	Durga Chowmuhani	Shibbari	ADC	1557	2	1
3	Ambassa	Paschim Lalchari	GP	1498	2	2
4	Ambassa	Jagannathpur	ADC	1821	2	3
5	Chamanu	Purba Chawmanu	ADC	1537	2	4
6	Salema	Paschim Dalucherra	GP	2034	3	1
7	Salema	Dakshin Kachucherra	ADC	2887	3	2
8	Durga Chowmuhani	Bamancherra	GP	4186	3	3
9	Durga Chowmuhani	Halahali	GP	4225	3	4
10	Durga Chowmuhani	Mahabir	GP	2447	З	5
11	Durga Chowmuhani	Baligaon	GP	3051	3	6
12	Ambassa	Lalchhari	ADC	2162	3	7
13	Manu	Dakshin Dhumacherra	ADC	3639	3	8

14	Manu	Labancherra	ADC	3275	3	9
15	Manu	Pur.Karamcherra	ADC	2710	3	10
16	Chamanu	Devacherra	ADC	2266	3	11
17	Chamanu	Rajdhar	ADC	3160	3	12
18	Dumburnagar	Kalajhari	ADC	3420	3	13
19	Dumburnagar	Sarma	ADC	4864	3	14
20	Raishyabari	Tuichakma	ADC	4509	3	15
21	Manu	Lalcherra	ADC	6245	4	16
22	Dumburnagar	Gandacherra	ADC	10097	4	17
23	Manu	Jamircherra	ADC	6006	4	1
24	Kamalpur NP	Ward-VI	NP	992	1	1
25	Kamalpur NP	Ward-V	NP	1002	2	1