



A Utilitarian Audit of Pm-Jay: Examining the Gap between Utility and Dignity in Sikkim

Sofiya

M.A Public Policy, 2nd Semester, Jamia Hamdard University

DOI : <https://doi.org/10.5281/zenodo.20691936>

ARTICLE DETAILS

Research Paper

Accepted: 27-05-2026

Published: 10-06-2026

Keywords:

Ayushman Bharat, PM-JAY, state decision-making, utilitarianism, hedonic calculus, healthcare policy, dignity, agency, welfare state

ABSTRACT

Healthcare welfare schemes have become an important part of state policy, especially in addressing unequal access to medical services and reducing financial burden on vulnerable populations. This study examines Ayushman Bharat Pradhan Mantri Jan Arogya Yojana (PM-JAY) as a case of strategic state decision-making rather than simply evaluating its implementation outcomes. The main goal of the research is to understand how the state designs welfare policies to maximise social utility and whether these decisions also consider qualitative aspects of well-being such as dignity and agency. To analyse this, the study uses the utilitarian ideas of Jeremy Bentham and John Stuart Mill. Bentham's hedonic calculus is adapted into five dimensions—fecundity, duration, extent, certainty, and quality to evaluate the logic of policy design. The research is based on qualitative analysis of official policy documents, government reports, institutional frameworks, and audit records from 2018–2025. The findings show that PM-JAY demonstrates strong performance in scalability, long-term commitment, population coverage, and institutional reliability, reflecting a clear orientation towards maximising aggregate welfare through large-scale healthcare access and financial protection. However, the study also finds that dignity, autonomy, and user agency receive comparatively limited attention within the policy framework. The overall assessment gives PM-JAY a composite score of 3.8 out of 5, classifying the state as strategically strong but not fully sophisticated in terms of integrating qualitative well-



INTRODUCTION

The role of the state is best understood not merely through policy outcomes, but through the strategic decisions that shape their design. In conditions of constraint and competing priorities, the state acts as a rational decision-maker, selecting institutional arrangements to maximise welfare at scale. Importantly, this study distinguishes between policy outcomes and decision rationality, focusing specifically on how the state designs welfare policies rather than how they are implemented.

In sectors such as healthcare, this decision-making problem becomes particularly significant. The state must choose how to respond to structural challenges such as unequal access and financial vulnerability. One approach is to prioritise large-scale, standardized interventions that maximise aggregate welfare. However, such choices also raise a deeper question: whether decision-making is guided solely by measurable outcomes or also incorporates qualitative considerations such as dignity and agency.

From a decision-making perspective, the design of **Ayushman Bharat – Pradhan Mantri Jan Arogya Yojana (PM-JAY)** reflects a strategic choice by the state to maximise aggregate utility through large-scale coverage and financial risk protection. This indicates a clear orientation towards scalability and structured welfare expansion as guiding principles of decision-making.

To analyse this, the study draws on the utilitarian framework of Jeremy Bentham and John Stuart Mill. Bentham argues that decisions can be evaluated based on their consequences, offering a structured method for rational choice through the hedonic calculus. This includes dimensions such as duration, certainty, extent, and fecundity, where fecundity captures the capacity of a decision to generate sustained welfare over time. However, Bentham's framework remains primarily quantitative.

John Stuart Mill extends this analysis by introducing a qualitative dimension, arguing that not all forms of welfare are equal and that higher values such as dignity and autonomy must also be considered. This creates a distinction between decisions that maximise aggregate utility and those that enhance the quality of human experience.

Accordingly, this study conducts a utilitarian audit of PM-JAY at the level of state decision-making, examining whether the design reflects a rational strategy of utility maximisation and whether it adequately accounts for qualitative dimensions of well-being.



AIM AND OBJECTIVES

Aim: To examine how the state, through Ayushman Bharat PM-JAY, makes policy choices to maximize welfare, and whether these decisions also account for dignity and agency using a hedonic calculus framework.

Objectives

- To examine the design of PM-JAY as a state decision aimed at maximizing healthcare access and financial protection.
- To apply the hedonic calculus framework to evaluate how the policy prioritizes utility across key dimensions.
- To analyse PM-JAY as a **strategic state decision**, focusing on how its design reflects choices about welfare distribution and prioritisation.

STATEMENT OF THE PROBLEM

The state increasingly adopts welfare policies like Ayushman Bharat PM-JAY to expand healthcare access and reduce financial risk. However, these decisions are largely guided by measurable outcomes. The core problem is whether such policy choices, while maximizing utility, also account for dignity and agency or remain limited to basic welfare gains.

RESEARCH QUESTIONS

- In what ways does the design of PM-JAY reflect strategic state decision-making aimed at maximizing aggregate utility?
- How does the state prioritize measurable outcomes such as coverage and financial protection in its policy design?
- To what extent does this utilitarian approach shape or limit attention to dignity and agency?

HYPOTHESIS

It is expected that the design of PM-JAY reflects a stronger emphasis on maximizing measurable utility, suggesting that state decision-making may prioritize quantitative outcomes over considerations of dignity and agency.



METHODOLOGY

Type of Study

This study adopts a **qualitative analytical approach**, supported by empirical policy evidence, to examine the strategic design of Ayushman Bharat PM-JAY. The focus is on understanding the logic underlying state decision-making rather than evaluating policy performance in practice. Accordingly, the study evaluates **decision design rather than implementation outcomes**, analysing how the state structures its choices to maximise welfare.

Sources of Data

The study relies primarily on **primary policy sources**, supplemented by supporting data, including:

- Official policy documents such as PM-JAY Operational Guidelines and institutional frameworks
- Government reports and official datasets (2018–2025)
- Audit and institutional reports providing structured policy-level evidence

These sources are used to analyse the **design, structure, and rationale** of the policy rather than its implementation performance.

Method of Analysis

The analysis is based on an adapted **hedonic calculus framework**, derived from Jeremy Bentham's concept of evaluating decisions through their anticipated consequences. The study focuses on key dimensions **fecundity, duration, extent, and certainty** to assess how the state structures its decisions in a systematic and rational manner.

Each dimension is examined at the level of **policy design**, focusing on how the state conceptualises welfare, prioritises coverage, and builds institutional frameworks for long-term impact. The analysis avoids outcome-based evaluation and instead interprets decision logic through the structure of the policy itself.

The findings are further interpreted through the perspective of **John Stuart Mill**, particularly his emphasis on dignity, autonomy, and the qualitative aspects of well-being. This allows the study to assess whether the state's decision-making framework goes beyond quantitative utility maximisation to incorporate broader considerations of human experience.



LITERATURE REVIEW

Jeremy Bentham: Utility and Policy Calculation

Jeremy Bentham, in *An Introduction to the Principles of Morals and Legislation*, argues that decisions are guided by pleasure and pain and should aim to maximise overall happiness. His hedonic calculus provides a structured framework to evaluate decisions through **fecundity, duration, certainty, and extent**. This makes policy analysis systematic and allows the state to design welfare policies aimed at maximising aggregate utility.

John Stuart Mill: Quality, Dignity, and Limits of Utility

John Stuart Mill, in *Utilitarianism*, extends Bentham's framework by introducing a qualitative dimension. He argues that not all forms of welfare are equal and emphasises **dignity, autonomy, and meaningful choice**. This highlights that policy design must consider not only the quantity of benefits but also the quality of human experience.

Policy Literature on PM-JAY: Policy documents on PM-JAY highlight its design as a large-scale welfare scheme focused on **financial protection, targeted inclusion, and institutionalised access**. The scheme reflects a strong emphasis on **scalability, standardisation, and measurable welfare expansion**, with comparatively less focus on dignity and agency as design priorities.

Gap in the Literature: Existing studies primarily evaluate welfare policies through measurable indicators such as coverage and financial protection. Limited attention is given to the **decision-making logic** of the state, particularly whether dignity and agency are embedded in policy design.

Link to This Study: This study addresses this gap by analysing PM-JAY as a case of **state strategic decision-making**. Using an adapted hedonic framework, it examines how the state structures welfare to maximise utility while assessing whether qualitative dimensions such as dignity and agency are incorporated into policy design.

THEORETICAL BACKGROUND

(A) Jeremy Bentham: Utility and Hedonic Calculus

Jeremy Bentham argues that human behaviour is governed by pleasure and pain, which form the basis of moral judgment. He develops the principle of utility, according to which a decision is considered right if it promotes the greatest happiness for the greatest number. In the context of the state, this transforms



policy-making into a process of rational decision-making aimed at maximising aggregate welfare. To make this measurable, Bentham introduces the hedonic calculus, which evaluates decisions through dimensions such as **fecundity, duration, certainty, and extent**. In this study, fecundity is particularly significant, as it captures the capacity of a policy decision to generate sustained and expanding welfare over time. Together, these dimensions provide a structured framework for analysing how the state designs policies to maximise utility.

This reflects a predominantly **quantitative approach**, where the success of a policy is understood in terms of its ability to produce measurable and scalable welfare outcomes.

(B) John Stuart Mill: Quality, Dignity, and Agency

John Stuart Mill accepts the principle of utility but challenges Bentham’s purely quantitative approach. He argues that not all forms of happiness are equal and introduces a qualitative distinction between higher and lower pleasures. According to Mill, dignity, autonomy, and meaningful choice are essential components of well-being.

From a policy perspective, this means that decisions cannot be evaluated solely based on how much welfare they generate, but must also consider **the quality of human experience they enable**. Mill’s framework therefore brings attention to dignity and agency as critical elements that should be incorporated into policy design.

OPERATIONALIZATION OF HEDONIC CALCULUS

In order to make Jeremy Bentham’s hedonic calculus applicable to this study, its abstract dimensions are adapted into indicators for analysing **state decision-making**. The framework is operationalised here to assess the **rationality of state decisions using policy design evidence** from Ayushman Bharat PM-JAY in Sikkim.

The analysis focuses on **fecundity, duration, certainty, and extent** to examine how the state structures welfare decisions to maximise utility. It also incorporates John Stuart Mill’s emphasis on qualitative well-being by adding **quality** as a fifth dimension, reflecting dignity, autonomy, and agency within policy design.

Table: Operationalization of the Hedonic Framework

Factor	Conceptual Meaning	Operational Indicator
--------	--------------------	-----------------------

Fecundity	The capacity of a policy decision to generate sustained and expanding welfare over time	Design for scalability and long-term expansion (insurance-based model, integration with national health framework, scope for future coverage expansion)
Duration	The extent to which the state designs the policy as a long-term welfare commitment	Continuity of policy framework, institutional embedding, and long-term budgetary and structural commitment
Certainty	The degree to which the state ensures reliability through institutional design	Design of governance structures, claims architecture, and hospital empanelment framework to ensure predictable access
Extent	The scope of population the state chooses to include within the policy design	Targeting strategy (SECC-based identification), inclusion criteria, and scale of intended population coverage
Quality (Mill)	The extent to which policy design incorporates qualitative aspects of well-being	Inclusion of mechanisms for dignity, autonomy, patient choice, and grievance redressal within policy design

Source: Adapted by the author from Jeremy Bentham, *An Introduction to the Principles of Morals and Legislation* (1823) and John Stuart Mill, *Utilitarianism* (1863).

This framework evaluates the **rationality of state decision making** by focusing on how welfare is structured at the level of policy design. Rather than assessing implementation outcomes, it examines how the state prioritises scalability, coverage, and institutional design to maximise utility, while also identifying whether such decisions incorporate qualitative dimensions of well-being as emphasised by Mill.

1. Fecundity (Capacity for Welfare Expansion) Year-wise Decision Analysis

Table: Evolution of Design Capacity in PM-JAY (2018–2025)

Year	Design Continuity	Expansion Evidence	Decision	Decision-Level Interpretation
2018–19	Insurance-based model with ₹5 lakh coverage introduced	Initial coverage fixed at 10.74 crore families		Designed as scalable architecture rather than one-time intervention

2019–20	No structural change in design	Expansion occurs within same framework	Indicates that the initial design supports growth without redesign
2020–21	Policy structure remains stable	System continues under same institutional model	Reflects resilience and long-term orientation in design
2021–22	Institutional framework consolidated	Expansion continues without structural modification	Shows that scaling is embedded within original design
2022–23	Coverage expanded (~12 crore families)	Inclusion extended without redesigning core structure	Demonstrates deliberate expansion within fixed model
2023–24	No redesign in core policy	System reaches maturity phase	Indicates saturation within original decision logic
2024–25	Design remains unchanged	Continued extension within same structure	Confirms long-term scalability embedded in initial decision

Source: Government of India, PM-JAY Operational Guidelines (2018); National Health Authority Framework Documents; CAG Reports (2023). (Accessed on: 20 April 2026)

The policy demonstrates strong **fecundity**, as its design allows sustained expansion without requiring structural redesign. The consistency of the framework across years, combined with the ability to extend coverage within the same model, indicates that the state prioritised scalability and long-term welfare generation at the decision-making stage.

scale	1	2	3	4	5
				✓	

The state’s decision-making reflects a high degree of forward planning, as the policy was designed to expand within a stable institutional framework. The ability to extend coverage and maintain continuity over time indicates strong scalability. However, the absence of significant structural evolution or adaptive redesign limits the policy from achieving the highest level of dynamic decision-making.

2. Duration (Long-Term Commitment) Year-wise Decision Analysis

Table: Evolution of State Commitment in PM-JAY (2018–2025)

Year	Design Continuity	Commitment Evidence (Decision-Level)	Decision-Level Interpretation
-------------	--------------------------	---	--------------------------------------



2018–19	Policy introduced as national scheme	Initial allocation and institutional setup	Indicates intent to establish a long-term welfare framework rather than a temporary intervention
2019–20	No structural change in design	Continued funding and early integration efforts	Reflects early-stage commitment to sustain the policy beyond rollout
2020–21	Policy maintained during crisis (COVID-19)	Stable institutional support despite external pressure	Demonstrates resilience and priority in state decision-making
2021–22	Framework remains unchanged	Continued allocation within core health system	Indicates consolidation into mainstream policy structure
2022–23	No redesign in core structure	Increased central–state coordination	Shows strengthening of long-term governance commitment
2023–24	Stable policy architecture	Continued institutional embedding	Reflects deeper integration within national health strategy
2024–25	Design remains unchanged	Ongoing commitment (estimated)	Confirms sustained long-term orientation in policy design

Source: Ministry of Health & Family Welfare (MoHFW); National Health Authority (NHA); Union Budget Documents (compiled and interpreted). (Accessed on: 20 April 2026)

The policy demonstrates strong **duration**, not merely because it continues over time, but because the state consistently **chooses to maintain and embed the same design framework** across different phases. The absence of structural redesign, combined with sustained institutional and fiscal commitment—even during periods of crisis—indicates that continuity is not accidental but a deliberate feature of decision-making. This reflects a strategic orientation towards long-term welfare stabilisation rather than short-term intervention.

scale	1	2	3	4	5
				✓	

The state demonstrates a high level of long-term commitment, as reflected in its consistent decision to retain and sustain the policy framework across multiple phases. The ability to maintain continuity under



varying conditions suggests a deliberate strategy of institutional stabilisation. However, the policy remains dependent on ongoing fiscal and administrative support and does not exhibit complete structural irreversibility, which limits it from achieving the highest level of institutional permanence.

3. Extent (Population Inclusion)

Table: Evolution of Coverage Design in PM-JAY (2018–2025)

Year	Coverage Design (Eligible Families)	Decision-Level Interpretation
2018–19	10.74 crore families (SECC-based targeting)	State adopts targeted inclusion rather than universal coverage
2019–20	No change in eligibility design	Indicates deliberate stability in inclusion criteria
2020–21	Coverage framework maintained	Reflects continued reliance on targeted welfare logic
2021–22	No structural expansion in eligibility	Shows prioritisation of controlled inclusion
2022–23	Expanded to ~12 crore families	Indicates strategic widening of inclusion without full universalisation
2023–24	Coverage base maintained	Reflects consolidation of expanded inclusion
2024–25	No further expansion (estimated)	Suggests stabilisation within defined target group

Source: Government of India, PM-JAY Operational Guidelines (2018); National Health Authority Data (compiled and interpreted). (Accessed on: 20 April 2026)

The extent of PM-JAY reflects a **deliberate state decision to adopt targeted rather than universal welfare**. The use of SECC-based identification indicates that the state prioritises maximising coverage within a defined vulnerable population, rather than extending benefits universally. The later expansion of coverage suggests a controlled widening of inclusion, but within the same targeted framework.

scale	1	2	3	4	5
				✓	

The state demonstrates a strong orientation towards maximising population coverage within a structured framework. The decision to expand eligibility from 10.74 to approximately 12 crore families reflects an

effort to broaden inclusion. However, the continued reliance on targeted criteria rather than universal access indicates that the state prioritises controlled expansion over full inclusivity, which limits it from achieving the highest level of coverage design.

4. Certainty (Reliability by Design)

Table: Logic of Reliability in PM-JAY (2018–2025)

Year	Design Choice	Reliability Strategy	Decision-Level Interpretation
2018–19	Centralised architecture introduced (NHA)	Standardised rules for claims and empanelment	State prioritises uniformity over flexibility to ensure predictable access
2019–20	No change in core structure	Expansion within same rule-based framework	Indicates reliance on standardisation rather than adaptive redesign
2020–21	Design retained during crisis	Continued use of centralised system	Reflects decision to maintain consistency even under stress
2021–22	No decentralisation introduced	Same governance model applied nationwide	Shows preference for uniform reliability over local variation
2022–23	Framework remains unchanged	Strengthening within existing structure	Indicates commitment to stability rather than experimentation
2023–24	Design unchanged	System scaled under same institutional rules	Suggests reliance on fixed design logic for predictability
2024–25	No structural shift	Continued use of standardised system	Confirms long-term preference for stability over adaptability

Source: PM-JAY Operational Guidelines (2018); National Health Authority Framework; CAG Reports (interpreted at decision level). (Accessed on: 20 April 2026)

Certainty in PM-JAY is not simply a function of institutional presence, but of the **state's decision to prioritise standardization and centralisation as the primary mechanisms of reliability**. The



consistent use of uniform rules, central governance, and fixed operational structures indicates that the state values predictability through stability rather than adaptability. This suggests a deliberate trade-off, where reliability is achieved through uniform design, even at the cost of flexibility across diverse contexts.

The state demonstrates a strong commitment to ensuring reliability through a standardised and centralised design. However, this approach relies heavily on uniform rules and does not sufficiently incorporate adaptive mechanisms to account for variation across regions. As a result, certainty is structurally strong but not fully responsive, limiting it from achieving the highest level of decision sophistication.

scale	1	2	3	4	5
				✓	

The state demonstrates a strong commitment to ensuring reliability through a standardised and centralised design. However, this approach relies heavily on uniform rules and does not sufficiently incorporate adaptive mechanisms to account for variation across regions. As a result, certainty is structurally strong but not fully responsive, limiting it from achieving the highest level of decision sophistication.’

5. Quality (Dignity & Agency – Mill)

Table: Dignity in PM-JAY (2018–2025)

Year	Design Focus	Dignity Mechanism (Decision-Level)	Decision-Level Interpretation
2018–19	Financial protection prioritised	Insurance coverage model (₹5 lakh)	State prioritises access over deeper autonomy or choice
2019–20	Expansion within same framework	Continued focus on coverage design	Indicates that dignity is not central to decision logic
2020–21	No structural shift in design	Retention of same welfare model	Reflects stability of quantitative approach
2021–22	Consolidation of policy structure	Limited inclusion of user-centric features	Suggests partial attention to agency
2022–23	Expansion without redesign	No major addition of dignity-based mechanisms	Indicates continued focus on utility over experience

2023–24	Stable policy architecture	No structural incorporation of autonomy or choice	Shows absence of qualitative redesign
2024–25	Design unchanged	No shift towards dignity-centred framework	Confirms that qualitative dimensions remain secondary

Source: PM-JAY Operational Guidelines (2018); National Health Authority Framework; NITI Aayog Reports (interpreted at decision level). (Accessed on: 20 April 2026)

The design of PM-JAY reflects a limited incorporation of **qualitative dimensions of well-being**. The state’s decision-making primarily prioritises financial protection and access, while aspects such as autonomy, patient choice, and agency are not structurally embedded within the policy framework. This indicates that dignity is not a central design principle but remains secondary to quantitative welfare expansion. The policy reflects a clear utilitarian orientation towards **maximising utility**, but does not fully integrate **Mill’s conception of dignity and higher-order well-being** into its design logic.

scale	1	2	3	4	5
			✓		

The state demonstrates only a **partial consideration of dignity**, as the policy is primarily structured around financial protection and access rather than autonomy or user agency. While some elements indirectly support dignity, these are not central to the design. As a result, the policy reflects a quantitative utilitarian approach with limited qualitative integration.

COMPOSITE HEDONIC ASSESSMENT AND STATE CLASSIFICATION

Scoring Scale: To ensure consistency in evaluation, each dimension of the hedonic calculus is assessed on a scale of **1 to 5**, where:

Scale	1	2	3	4	5
Interpretation	Very Low (weak performance, major gaps)	Low (limited outcomes, significant issues)	Moderate (average performance with noticeable gaps)	High (strong performance with minor limitations)	Very High (excellent performance with minimal gaps)

Evaluation (2018–2025) Table: Evolution of State Design Choices in PM-JAY

Decision	Initial Design	Strategic Adjustment	Decision-Level Interpretation
----------	----------------	----------------------	-------------------------------



Dimension	(2018)	(Over Time)	
Extent (Coverage Design)	Coverage fixed at 10.74 crore families (SECC-based targeting)	Expanded to ~12 crore families	Reflects a deliberate state decision to broaden inclusion while retaining targeted welfare logic
Fecundity (Expansion Capacity)	Insurance-based scalable model introduced	Continuous expansion in coverage and institutional integration	Indicates that the policy was designed for long-term expansion rather than one-time intervention
Certainty (Institutional Design)	Creation of National Health Authority and empanelment framework	Expansion of hospital network and governance structure	Shows state emphasis on building a structured system to ensure predictable access
Duration (Policy Commitment)	Launched as flagship national scheme	Continued integration into broader health policy framework	Suggests long-term commitment rather than short-term welfare provision
Quality (Design for Dignity)	Focus on financial protection and access	Limited evolution in patient choice and agency mechanisms	Indicates that qualitative dimensions were not central to initial design priorities

Source: Adapted from Government of India, PM-JAY Operational Guidelines (2018); National Health Authority Framework Documents; CAG Reports (2023). (Accessed on: 20 April 2026)

This table interprets available data as evidence of **state decision making patterns**, focusing on how the policy was structured, expanded, and institutionally embedded over time. The analysis highlights that the state consistently prioritised scalability, coverage, and system expansion, indicating a rational strategy aimed at maximising aggregate utility, while comparatively less emphasis was placed on qualitative dimensions such as dignity and agency.

Composite Hedonic Score of PM-JAY

Dimension	Score (1–5)	Decision-Level Interpretation
Fecundity	4.0	Strong scalability and long-term expansion capacity



Duration	4.0	Clear long-term commitment and policy continuity
Extent	4.0	Broad but targeted population inclusion
Certainty	4.0	Reliable but standardised, with limited adaptability
Quality (Mill)	3.0	Partial incorporation of dignity and agency

Overall Score: 3.8 / 5

State Classification Scale

Score	Meaning	Nature of State
1	Very Low	Survivalist State
2	Low	Weak State
3	Moderate	Transitional State
4	High	Strategically Strong State
5	Very High	Sophisticated State

Nature of the State: Strategically Strong but Not Sophisticated

SCALE	1	2	3	4	5
				✓	

Based on the composite hedonic score of **3.8 out of 5**, rounded to **4**, the state can be classified as a **Strategically Strong State**. This means that the state demonstrates a high level of rationality in structuring welfare decisions, especially through scalability, coverage, institutional continuity, and financial protection.

However, the state does not reach the level of a **Sophisticated State**, because dignity, autonomy, and user agency are not fully integrated into the core design of PM-JAY. Therefore, the state can be described as **strategically strong but normatively limited**: effective in maximising utility at scale, but incomplete in addressing qualitative well-being.

CONCLUSION

The analysis shows that Ayushman Bharat PM-JAY is best understood as a product of **strategic state decision-making**, where welfare is structured through choices prioritising scalability, coverage, and financial protection. The design reflects a strong alignment with Bentham’s principle of utility, as the state adopts a rational approach to maximise aggregate welfare at scale. However, from Mill’s perspective, a limitation remains within the **design itself**. Dignity, autonomy, and agency are not central



decision priorities, indicating that qualitative dimensions of well-being are secondary to measurable outcomes. This reveals a gap between utility maximisation and holistic welfare design.

Overall, the composite score of **3.8** ($\approx 4/5$) classifies the state as **strategically strong but not fully sophisticated** effective in expanding welfare, but normatively limited in integrating qualitative well-being.

The study therefore highlights that **state decision-making determines whether welfare remains quantitative or becomes meaningful.**

BIBLIOGRAPHY

Government Documents & Policy Reports

- Government of India. *Ayushman Bharat – Pradhan Mantri Jan Arogya Yojana (PM-JAY): Operational Guidelines*. New Delhi: Ministry of Health and Family Welfare, 2018.
- Government of India. *Ayushman Bharat PM-JAY Overview Document*. New Delhi: Ministry of Health and Family Welfare, 2018.
- Government of India. *PM-JAY Operational Guidelines: Beneficiary Identification, Hospital Empanelment and Claims Management Sections*. New Delhi, 2018.
- National Health Authority (NHA). *PM-JAY Operational Manual*. New Delhi: Government of India, 2018–2025.
- National Health Authority (NHA). *PM-JAY Health Benefit Packages Document*. New Delhi.
- National Health Authority (NHA). *PM-JAY Overview and Official Documents (2018–2025)*.
- National Health Authority (NHA). *PM-JAY Dashboard / State-Level Data (Sikkim), 2018–2022*.

Audit & Institutional Reports

- Comptroller and Auditor General of India (CAG). *Performance Audit Report on Ayushman Bharat – PM-JAY*. Report No. 11 of 2023. New Delhi: CAG of India.

Books & Classical Texts (Theoretical Framework)

- Bentham, Jeremy. *An Introduction to the Principles of Morals and Legislation*. London: 1823.



- Mill, John Stuart. *Utilitarianism*. London: 1863.

Academic / Interpretative Works

- Abel, C. and Uket, E. *A Critical Exposition of Jeremy Bentham's Hedonistic Philosophy*. 2016.

DATA & STATISTICAL SOURCES

- National Health Authority (NHA). *State-Level Utilization Data (Sikkim), 2018–2022*.
- Government of India. *Socio-Economic Caste Census (SECC), 2011 Data for PM-JAY Targeting*.

References:

1. ¹ Government of India, *Ayushman Bharat – Pradhan Mantri Jan Arogya Yojana (PM-JAY) Operational Guidelines* (New Delhi: Ministry of Health and Family Welfare, 2018); National Health Authority, *PM-JAY Overview Documents*.
2. ¹ Jeremy Bentham, *An Introduction to the Principles of Morals and Legislation* (London: 1823), Chapter I
3. ¹ John Stuart Mill, *Utilitarianism* (London: 1863), Chapter II.
4. ¹ Jeremy Bentham, *An Introduction to the Principles of Morals and Legislation* (1823), Chapter I.
5. ¹ John Stuart Mill, *Utilitarianism* (1863), Chapter II.