## GOVERNMENT OF INDIA MINISTRY OF HEALTH AND FAMILY WELFARE DEPARTMENT OF HEALTH AND FAMILY WELFARE

# RAJYA SABHA UNSTARRED QUESTION No-1712 TO BE ANSWERED ON 10.12.2024

#### PROMOTION OF AYUSHMAN BHARAT HEALTH ACCOUNTS

#### **1712 SHRI SHAKTISINH GOHIL:**

Will the Minister of **HEALTH and FAMILY WELFARE** be pleased to state:

(a) the total number of digital health accounts created under Ayushman Bharat Health Accounts (ABHA), and the manner in which this number has grown each year since inception;

(b) the details of the purpose and key achievements of the ABHA program;

(c) the reasons as to why ABHA is not yet widely utilized and made compulsory in

Government hospitals and for the treatment of Government/semi Government employees;

(d) the details of initiatives taken or proposed to encourage citizens to maintain Digital

Health Accounts, and the results observed so far; and

(e) the difference in the obligatory nature of ABHA vis-à-vis the countries abroad?

### ANSWER THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI PRATAPRAO JADHAV)

(a)to (e) ABHA is a unique identifier of an individual under the Ayushman Bharat Digital Mission (ABDM). Total Number of ABHAs created till Dec 5, 2024 is 70,12,43,146.

Financial Year	No. of ABHA
2020-21	97,64,770
2021-22	20,12,34,673
2022-23	15,44,65,134
2023-24	22,28,85,525
2024-25 (till Dec 5, 2024)	11,28,93,044
Total	70,12,43,146

The purpose of ABHA is to **uniquely identify a citizen and establish a trusted identity for the citizen** in the healthcare ecosystem. With ABHA, **citizens can securely easily access their medical records** (e.g., prescriptions, diagnostic reports, discharge summaries) and share them with healthcare providers. As on 5<sup>th</sup> December 2024, a total of 70,12,43,146 (~70.12 Cr) Ayushman Bharat Health Accounts (ABHAs) have been created, 3,53,149 (~3.53 Lac) health facilities have registered on HFR, 5,33,906 (~5.33 Lac) healthcare professionals

have registered on HPR and **45,77,30,932** (~**45.77** Cr) health records have been linked with ABHA.

Usage of ABHA is voluntary in nature. Any individual can create ABHA. For creating an ABHA, demographic details (such as name, gender, date of birth etc) of the user are required.

Multiple awareness campaigns and efforts are underway to raise awareness about the benefits of ABHA among the public, healthcare providers, and institutions along with capacity building support being extended to hospitals and health systems to integrate ABHA seamlessly into their workflows.

As implementing agency, National Health Authority (NHA) has initiated awareness campaigns in healthcare facilities through publicity materials. ABDM actively promotes awareness and citizen engagement through participation in public events such as trade fairs, marathons, medical conferences, technology events etc. encouraging the creation of ABHA and adoption of digital healthcare. States/UTs also undertake targeted IEC activities and capacity building to enhance local adoption.

So far, significant progress has been observed in the adoption of ABHA with over 70 crore ABHAs created. Integration with government schemes such as PM-JAY and initiatives such as QR based services for quick OPD registration and faster payments in hospitals AIIMS and various government hospitals, have enhanced the adoption of digital health accounts, particularly in AIIMS and government hospitals. Private healthcare providers are also increasingly adopting ABHA-integrated solutions.

ABHA is voluntary in nature. Sharing health records requires explicit and informed consent, ensuring privacy and control over personal data. This approach empowers citizens to access the benefits of a secure digital health ecosystem. In addition, under ABDM, there is no centralized repository of data. ABDM facilitates secure data exchange between the intended stakeholders on ABDM network after the patient's explicit and informed consent. Compared to obligatory systems in some countries, ABDM has been built keeping in mind, the aspects of citizen centricity and privacy.

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