

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

**RAJYA SABHA  
STARRED QUESTION NO. 170  
TO BE ANSWERED ON THE 16<sup>TH</sup> DECEMBER, 2025**

**PRADHAN MANTRI SURAKSHIT MATRITVA ABHIYAN**

**170 # SMT. RAMILABEN BECHARBHAI BARA:**

Will the **MINISTER OF HEALTH AND FAMILY WELFARE** be pleased to state:

- (a) the latest details of antenatal check-ups provided to pregnant women so far under the Pradhan Mantri Surakshit Matritva Abhiyan (PMSMA), State/UT-wise;
- (b) the steps being taken to ensure timely coverage and follow-up care of high-risk pregnancy identified under PMSMA;
- (c) whether any challenges have been faced in ensuring regular PMSMA check-ups in aspirational districts, tribal areas and remote rural areas;
- (d) if so, the corrective efforts being undertaken to address them; and
- (e) whether Government intends to expand digital tools, availability of experts, Public-Private-Partnerships under PMSMA, if so, the details thereof?

**ANSWER  
THE MINISTER OF HEALTH AND FAMILY WELFARE  
(SHRI JAGAT PRAKASH NADDA)**

- (a) to (e) A Statement is laid on the Table of the House.

**STATEMENT REFERRED TO IN REPLY TO RAJYA SABHA  
STARRED QUESTION NO. 170 \* FOR 16<sup>TH</sup> DECEMBER, 2025**

(a) The State/UT-wise antenatal check-ups provided to the pregnant women under Pradhan Mantri Surakshit Matritva Abhiyan (PMSMA) since inception of the programme in 2016 is placed at Annexure.

(b) Under the National Health Mission (NHM), the Government of India has undertaken several measures to ensure comprehensive antenatal care, timely follow-up, and appropriate management of High-Risk Pregnancies (HRPs) identified under the Pradhan Mantri Surakshit Matritva Abhiyan (PMSMA). The key steps are as follows:

- PMSMA is based on a fixed day strategy, and it provides free of cost assured and quality antenatal check up by a Specialist/Medical Officer on the 9th day of every month.
- Early identification and clinical management of High-Risk Pregnancies (HRPs) through comprehensive antenatal check-ups.
- Name-based tracking of every identified High-Risk Pregnancy until 45 days after delivery, ensuring healthy outcome for both the mother and the new-born across all States/UTs.
- Provision of three additional antenatal check-ups for all HRPs, screened by medical officers /obstetricians to monitor maternal and foetal well-being.
- Automated SMS alerts to beneficiaries and ASHAs at the time of HRP registration, reminders for scheduled visits, and follow-up appointments.
- Linkage of HRPs to the nearest First Referral Units (FRUs) to ensure safe delivery and timely management of complications.
- Provision of incentives for High-Risk Pregnant Women towards free transportation to attend follow-up ANC visits.

(c) and (d) To address implementation challenges, including social and cultural barriers, and to ensure regular coverage under PMSMA, the Government of India (GoI) undertaken the following measures:

- Provision of additional PMSMA sessions beyond the fixed monthly sessions held on the 9th of every month, to ensure complete coverage and saturation of all beneficiaries.
- Capacity-building of Medical Officers at PHCs/CHCs in Basic Emergency Obstetric and Newborn Care (BEmONC) to strengthen clinical competencies and improve the quality of antenatal services during PMSMA sessions.
- Case-based ASHA incentives for mobilizing High-Risk Pregnant Women, along with transport incentives for beneficiaries, to facilitate attendance of scheduled follow-up ANC visits.
- Mobile Medical Units (MMUs) are operational in hard-to-reach and tribal areas to deliver essential services such as antenatal check-ups, postnatal care, screening and referral of high-risk pregnancy. In addition, alternative transport arrangements such as Palki, Boat Ambulance, and Bike Ambulance etc. are also in place to improve last-mile connectivity.
- Organization of outreach activities including Ayushman Arogya Shivirs, RCH camps, and monthly Village Health, Sanitation and Nutrition Days (VHSNDs) to reach marginalized

populations, enhance community mobilization, and ensure follow-up of high-risk pregnancies.

- Distribution of the Maternal and Child Protection (MCP) Card and Safe Motherhood Booklet, providing pregnant women with essential information on diet, rest, birth preparedness, danger signs, ANC/PNC schedules, and government benefit schemes.
- Intensified Information Education Communication (IEC) and Behaviour Change Communication (BCC) efforts through mass media, community-based campaigns, and interpersonal communication to raise awareness on the importance of regular PMSMA check-ups and institutional care.
- Active engagement of frontline workers, including Auxiliary Nurse Midwives (ANMs), Accredited Social Health Activists (ASHAs), and Community Health Officers (CHOs), to promote PMSMA services at the community level and ensure timely tracking and follow-up of pregnant women.

(e) The Government of India has developed a centralized PMSMA Portal to facilitate the engagement of private doctors and specialists as volunteers under the Pradhan Mantri Surakshit Matritva Abhiyan (PMSMA). After registering on the portal, their details are shared with the respective State and district authorities. The district PMSMA Nodal Officers subsequently coordinate and communicate the required follow-up actions to ensure effective service delivery.

**Annexure**

**State/UT-wise Pregnant women received antenatal care under PMSMA (Source-PMSMA Portal) since inception of the programme in 2016**

<b>S. No.</b>	<b>State/UT</b>	<b>Total No. of Pregnant Women who received antenatal care (ANC) under PMSMA</b>
	<b>India</b>	<b>6,87,70,846</b>
1	Andaman & Nicobar Islands	26,739
2	Andhra Pradesh	56,86,786
3	Arunachal Pradesh	32,960
4	Assam	6,98,723
5	Bihar	70,87,440
6	Chandigarh	84,428
7	Chhattisgarh	22,26,336
8	Delhi	6,50,583
9	Goa	89,289
10	Gujarat	33,67,359
11	Haryana	26,03,970
12	Himachal Pradesh	5,27,166
13	Jammu and Kashmir	5,03,536
14	Jharkhand	16,54,011
15	Karnataka	32,29,616
16	Kerala	49,000
17	Ladakh	17,012
18	Lakshadweep	7,357
19	Madhya Pradesh	54,95,367
20	Maharashtra	38,40,224
21	Manipur	91,395
22	Meghalaya	2,96,530
23	Mizoram	74,040
24	Nagaland	22,544
25	Odisha	22,35,677
26	Puducherry	36,550
27	Punjab	11,75,314
28	Rajasthan	45,56,844
29	Sikkim	11,784
30	Tamil Nadu	31,47,235
31	Telangana	20,82,700
32	The Dadra & Nagar Haveli and Daman & Diu	1,16,010
33	Tripura	1,44,114
34	Uttarakhand	1,90,092
35	Uttar Pradesh	1,48,59,143
36	West Bengal	18,52,972