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

RAJYA SABHA
UNSTARRED QUESTION NO. 1078
TO BE ANSWERED ON 09TH DECEMBER, 2025

ANTI-FRAUD MEASURES UNDER AB-PMJAY

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1078. # SHRI BRIJ LAL:
      DR. DINESH SHARMA:
      SHRI SUBHASH BARALA:
      SHRI SHAMBHU SHARAN PATEL:
      SHRI SADANAND MHALU SHET TANAVADE:
      SHRI NARAYANA KORAGAPPA:
      SHRI NARHARI AMIN:
      DR. PARMAR JASHVANTSINH SALAMSINH:

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

(a) the measures adopted by the National Health Authority (NHA) to strengthen the anti-fraud framework under Ayushman Bharat - Pradhan Mantri Jan Arogya Yojana (AB-PMJAY);

(b) the manner in which the National Anti-Fraud Unit (NAFU) and State Anti-Fraud Units (SAFUs) coordinate and conduct investigations into irregularities or misuse;

(c) the number of hospitals penalized for violations since the scheme began and the nature of such actions;

(d) whether States and UTs have been provided access to real-time dashboards for improved monitoring and accountability, if so, the the details thereof; and

(e) the manner in which digital tools are being used to enhance transparency and improve implementation of AB-PMJAY?

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

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(a): Ayushman Bharat - Pradhan Mantri Jan Arogya Yojana (AB-PMJAY) is governed on a zero-tolerance approach towards fraud. National Anti-Fraud Unit (NAFU) established at National Health Authority (NHA), uses AI/ML-based automated triggers within the Transaction Management System (TMS) to automatically flag unusual claim patterns such as duplicate entries, inflated procedures, or misuse of patient identity. Regular capacity-building

workshops and field-level training sessions are conducted to strengthen the overall anti-fraud framework.

(b): NAFU works in close coordination with the State Anti-Fraud Units (SAFU) to investigate and take action on cases of fraud. Cases flagged as suspicious by the automated triggers are routed to the respective State Health Authorities (SHAs) for verification. Appropriate action including suspension, issue of show cause notices, warning letter, de-empanelment of hospitals, de-activation of e-cards, levying penalty on errant hospitals and lodging of FIRs, are taken against fraudulent entities. The final determination of whether a claim is fraud, is made only after detailed investigation by the State.

(c): As on 15.11.2025, 1184 hospitals have been de-empanelled, penalties amounting to Rs. 231.88 crore have been levied against fraudulent entities and 411 hospitals have been suspended by the States/UTs.

(d): A real-time dedicated dashboard has been developed by NAFU to enable enhanced monitoring and oversight at the State level. The dashboard facilitates continuous tracking of key fraud-related indicators, support timely decision-making and strengthens the overall management and implementation of the scheme.

(e): Under AB-PMJAY, a robust end-to-end digital ecosystem has been established to ensure transparency and real-time monitoring across all States/UTs. Several key initiatives have been implemented like revamped Beneficiary Identification System (BIS 2.0) which allows self-verification thereby eliminating unnecessary intermediaries. Ayushman Mobile Application enables on-the-go beneficiary verification and card creation using face-auth technology. The Transaction Management System (TMS 2.0) ensures efficient claims settlement for hospitals. The User Management Portal provides a unified login system for seamless access to PMJAY applications. Additionally, a comprehensive dashboard is developed for real-time monitoring of the scheme implementation.

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