

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

**RAJYA SABHA
STARRED QUESTION NO. 340*
TO BE ANSWERED ON THE 24th MARCH, 2026**

PERFORMANCE OF PM-JAY

***340 SHRI PRAMOD TIWARI:**

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

- (a) the latest assessment of the Pradhan Mantri Jan Arogya Yojana (PM-JAY) in improving access to quality healthcare;
- (b) whether in a number of States private hospitals empanelled under the Yojana have suspended services;
- (c) if so, the details thereof and the reasons therefor;
- (d) whether the Yojana has failed to reduce out-of-pocket expenditure; and
- (e) if so, the reasons therefor including steps taken to reduce cost of care and out-of-pocket expenditure?

**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. 340* FOR 24th MARCH, 2026**

(a) to (e) Ayushman Bharat - Pradhan Mantri-Jan Arogya Yojana (AB-PMJAY) follows standard treatment guidelines to standardize clinical practices and ensure quality and appropriate care for eligible beneficiaries. Under AB-PMJAY, a structured incentivisation framework has been incorporated to promote access to quality healthcare and strengthen service delivery. The scheme provides graded financial incentives on package rates to empanelled hospitals based on their quality certifications, including 5% for Bronze Quality Certification, 10% for NABH Entry Level and 15% for full NABH or NQAS accreditation, thereby encouraging hospitals to adopt and maintain recognized quality standards.

As regards access to quality healthcare, according to a study published by The Lancet, AB-PMJAY has significantly improved timely cancer treatment initiation, which reflects better access to quality healthcare and easing financial burden.

Under AB-PMJAY, hospital empanelment is a continuous process and is undertaken by the implementing States/UTs based on the requirements and availability of healthcare providers meeting the criteria within a given State/UT as per empanelment guidelines of National Health Authority. The empanelment of private hospitals under the scheme is entirely voluntary.

As on 28.02.2026, the number of hospitals empanelled under the scheme has increased significantly from 6,917 hospitals (including 3,904 private hospitals) in FY 2018–19 to 36,229 hospitals (including 16,746 private hospitals). All eligible beneficiaries under the scheme can avail treatment through a network of these 36,229 empanelled hospitals across the country.

AB-PMJAY provides health coverage of Rs. 5 lakh per family per year for secondary and tertiary care hospitalization to 12 crore families constituting bottom 40% of India's population. Additionally, in March 2024, approximately 37 lakh families of Accredited Social Health Activists (ASHA), Anganwadi Workers (AWW) and Anganwadi Helpers (AWH) were included under the scheme. The scheme was further expanded to cover 6 crore senior citizens of age 70 years and above belonging to 4.5 crore families irrespective of their socio-economic status.

The Economic Survey 2024-25 highlights AB-PMJAY's impact in reducing Out-of-Pocket Expenditure (OOPE) through increased social security and primary health spending, with recorded savings over Rs. 1.25 lakh crore. Further, as per the National Health Account Data for 2021-22, Government Health Expenditure has increased from 29% to 48%, while OOPE declined from 62.6% to 39.4%, between FY 2014-15 and FY 2021-22.

As on 28.02.2026, a total of 11.69 crore hospital admissions amounting to Rs. 1.73 lakh crore have been authorized under the scheme. The significant utilization of the scheme indicates that eligible beneficiaries are able to access healthcare services and thereby reduce their OOPE.
