

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

**RAJYA SABHA
UNSTARRED QUESTION NO. 2040
TO BE ANSWERED ON 10TH MARCH, 2026**

AB-PMJAY COVERAGE AND HOSPITAL EMPANELMENT

2040. SHRI SAJJAD AHMAD KICHLOO:

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

- (a) the present status of Ayushman Bharat - Pradhan Mantri Jan Arogya Yojana (ABPMJAY) in J&K, including district-wise data on cards issued, eligible but excluded families, empaneled Government and private hospitals and claims filed, settled and pending along with amounts released to hospitals;
- (b) the reason for issues of Aadhaar/SECC errors, delayed card generation, frequent claims rejections, low package rates, denial of cashless treatment and prolonged reimbursement delays to hospitals; and
- (c) whether the Ministry would outline a time bound plan to empanel all eligible private hospitals and ensure timely payments and universal coverage?

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

(a) to (c): As on 28.02.2026, a total of 87.91 lakh Ayushman cards have been created in Jammu and Kashmir under Ayushman Bharat - Pradhan Mantri Jan Arogya Yojana (AB-PMJAY). The district-wise details of number of Ayushman cards created in Jammu and Kashmir can be accessed at <https://dashboard.nha.gov.in/public/card>.

The details of number of public and private hospitals empanelled under the scheme in the UT can be accessed at <https://hem.nha.gov.in/search>

As on 28.02.2026, the number of claims submitted, paid and rejected under the scheme, in Jammu and Kashmir are as under:

Claims submitted	Claims paid	Number in lakh
		Claims rejected
19.45	16.21	1.29

Under the scheme, claims submitted by empanelled hospitals are scrutinized based on the clinical documents, investigation reports, and other supporting records, in accordance with the prescribed standard treatment guidelines.

Under AB-PMJAY, settlement of claims is a regular and continuous process and claims are settled by respective State Health Agencies as per claim adjudication guidelines issued by National Health Authority. As per these guidelines, the permissible turnaround time for settlement of claims to hospitals is within 15 days of claims submission for the intra-state hospitals (hospitals located within State) and within 30 days in case of portability claims (hospitals located outside State).

As per the empanelment guidelines under AB-PMJAY, the empanelled hospitals cannot deny treatment to eligible beneficiaries of the scheme. In case of denial of treatment by an empanelled hospital, beneficiaries can register their grievances through the Centralized Grievance Redressal Management System (CGRMS) or through a 24*7 toll-free helpline number 14555. Under AB-PMJAY, a three-tier grievance redressal system at District, State and National level has been created to resolve the issues faced by beneficiaries in utilizing healthcare services. At each level, there are designated nodal officers and Grievance Redressal Committees to address the grievances.

Aadhaar-based e-KYC is mandatory during enrolment as well as for availing treatment under the scheme. In case of any error in demographic details of beneficiary, re-do e-KYC functionality has been enabled in Ayushman App and the web portal. Through this process, beneficiaries can correct their demographic details on the Ayushman card in accordance with the details available in their Aadhaar.

In order to improve the participation of hospitals, a hospital-specific toll-free helpline 14413 has been set-up to address the concerns of hospitals on a real-time basis including concerns related to empanelment.
