

GOVERNMENT OF INDIA  
MINISTRY OF SOCIAL JUSTICE & EMPOWERMENT  
**RAJYA SABHA**  
**UNSTARRED QUESTION NO - 2222**  
ANSWERED ON – 11/03/2026

**SOCIAL PROTECTION MEASURES FOR SENIOR CITIZENS**

2222. SHRI SUBHASISH KHUNTIA

Will the Minister of SOCIAL JUSTICE AND EMPOWERMENT be pleased to state:-

- (a) whether Government has reviewed the current status of social protection and concessionary benefits available to senior citizens across key sectors such as railways, civil aviation, health insurance and social security schemes;
- (b) if so, the details thereof and if not, the reasons therefor;
- (c) whether Government proposes to introduce or restore sector-wide senior citizen support measures, including travel concessions, insurance safeguards and social assistance and;
- (d) if so, the timeline and modalities for implementation; and
- (e) if not, the reasons therefor?

**ANSWER**

THE MINISTER OF STATE FOR SOCIAL JUSTICE AND EMPOWERMENT

(SHRI B.L.VERMA)

(a) & (b) The Government implements various schemes for the welfare of senior citizens. These schemes are reviewed from time to time to ensure their effective implementation and wider outreach. Mandatory third-party evaluation of these schemes is also undertaken before the commencement of a new financial cycle.

(c) to (e) The Government is already implementing various schemes through which several facilities and concessions are provided to senior citizens.

The Ministry of Social Justice and Empowerment is implementing an umbrella scheme, namely Atal Vayo Abhyuday Yojana (AVYAY), for the welfare of senior citizens across the country. The details of the scheme are given in **Annexure-I**.

The Ministry of Railways provides various facilities to senior citizens, including the provision for allotment of lower berths and wheelchair facilities at railway stations. The details of these facilities are given in **Annexure-II**.

The Ministry of Health and Family Welfare, in October 2024, expanded Ayushman Bharat – Pradhan Mantri Jan Arogya Yojana (AB-PMJAY) to provide free health cover of ₹5 lakh per year to all senior citizens aged 70 years and above, irrespective of their socio-economic status. The Ministry is also implementing the National Programme for Health Care of the Elderly (NPHCE) to address various health-related issues of elderly persons. The details of NPHCE are given in **Annexure-III**.

The Ministry of Rural Development implements the National Social Assistance Programme (NSAP), under which financial assistance is provided to eligible senior citizens. The details of NSAP are given in **Annexure-IV**.

The Department of Financial Services is implementing the Atal Pension Yojana (APY). Under the scheme, subscribers aged 18–40 years receive a guaranteed monthly pension after attaining the age of 60 years, depending on the level of contribution chosen, which continues for life. The details of APY are given in **Annexure-V**.

**Annexure referred to in reply to part (c) to (e) of the Rajya Sabha Unstarred Question No. 2222 for answer on 11.03.2026, raised by Shri Subhasish Khuntia.**

Details of components under AVYAY scheme are as follows-

- i. **IPSRc(Integrated Programme for Senior Citizens)-** Under IPSrC, grant-in-aid is provided to the organisations for maintenance of senior citizen homes (Sr.CH), continuous care homes (CCH), mobile medicare units (MMU) and physiotherapy clinics. The objective of the scheme is to improve the quality of life of the Senior Citizens, especially indigent senior citizens by providing basic amenities like shelter, food, medical care and entertainment opportunities and by encouraging productive and active ageing. The Department have also formulated minimum standards for Senior Citizen Homes which provides accessible infrastructure across all Senior Citizen Homes throughout the country
- ii. **SAPSRc (State Action Plan for Senior Citizens)-** The Government of India perceives a major and critical role of all the States/ UTs Governments in welfare of senior citizens. Each State/UT is expected to plan taking into account their local considerations and frame their own State Action Plans for the welfare of their senior citizens. Under SAPSRc, the Ministry releases funds to the States/UTs for implementation of their action plans. SAPSRc is being implemented since FY 2019-20.
- iii. **RVY (Rashtriya Vayoshri Yojana)-** The scheme aims for providing Physical Aids and Assisted Living Devices for Senior Citizens below poverty line and with the family income not exceed to Rs. 15,000/-per month. The scheme is being implemented since 2017.
- iv. **Elderline-** The National Helpline for Sr Citizens (14567) is to generate awareness about the Act, schemes & programmes being executed by different Central & State Governments and to provide platform to redress grievances of Sr Citizens across the country.
- v. **System of Providing Elder Care (In House) and Assisted Living (PM-SPECIAL)** - The main objective is to bridge the gap in supply and increasing demand in the field of geriatric caregivers so as to provide more professional services to the senior citizens and also to create a cadre of professional care givers in the field of geriatrics.
- vi. **Other Initiatives for Senior Citizens-** In order to solve the problems of healthy and productive ageing, several initiatives are being done across the country. The proposed initiatives are aimed at involving the elders in building up knowledge which can be useful for the society as a whole.
- vii. **Seniorcare Ageing Growth Engine (SAGE)-** The main objective is to promote out-of-the-box and innovative solutions for the commonly faced problems, innovative start-ups would be identified and encouraged for developing products, processes and services for the welfare of the elderly.

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**Details of facilities extended from time to time to Senior citizens by M/o Railways:**

- i. In the computerized Passenger Reservation System (PRS) there is a provision to allot lower berths to Senior Citizens, Female passengers of 45 years and above automatically, even if no choice is given, subject to availability of accommodation at the time of booking.
- ii. A combined quota of six to seven lower berths per coach in Sleeper class, four to five lower berths per coach each in Air Conditioned 3 tier (3AC) and three to four lower berths per coach in Air Conditioned 2 tier (2AC) classes (depending on the number of coaches of that class in the train) has been earmarked for senior citizens, female passengers 45 years of age and above and pregnant women.
- iii. Instructions have been issued for earmarking a minimum of 07 seats for senior citizens in 1<sup>st</sup> and last 2<sup>nd</sup> class general compartment for entire period of local train services on suburban sections of all zonal Railways.
- iv. Wheelchairs are provided by Railways and given to attendants of the Persons with Disabilities (Divyangjans), old aged passengers etc absolutely free of cost to escort them from and to the trains.
- v. Battery Operated Vehicles (BOVs) are provided at major railway stations to passengers on 'first come first served' basis with due preference to Persons with Disabilities (Divyangjans), Senior Citizens, Sick passengers and Pregnant women. This facility is provided 'free of cost' through Corporate Social Responsibility (CSR) and publicity route as well as on chargeable basis.
- vi. After departure of the train, if there are vacant lower berths available in the train and if any person with disability booked on the authority of handicapped concession or a senior citizen or a pregnant woman, who has been allotted upper/middle berth, approaches for allotment of vacant lower berths, the on board Ticket Checking Staff has been authorized to allot the vacant lower berth to them making necessary entries in the chart.
- vii. Separate counters are earmarked at various Passenger Reservation System (PRS) centers for dealing with the reservation requisitions received from ladies, persons with disability, Senior Citizens, Ex. MPs, MLAs, accredited journalists and freedom fighters, if the average demand per shift not less than 120 tickets. In case there is no justification for earmarking of an exclusive counter for any of these categories of persons including ladies, persons with disability or senior citizens, one or two counters depending upon the total demand are earmarked for dealing with the reservation requests for all these categories of persons.

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The NPHCE is an articulation of the International and national commitments of the Government as envisaged under the UN Convention on the Rights of Persons with Disabilities (UNCRPD), National Policy on Older Persons (NPOP) adopted by the Government of India in 1999 & Section 20 of “The Maintenance and Welfare of Parents and Senior Citizens Act, 2007” dealing with provisions for medical care of Senior Citizens. The objective of NPHCE is to provide accessible, affordable, and high-quality long-term, comprehensive and dedicated healthcare services to the elderly.

**Components of the Program:**

1. National Health Mission (NHM) Component: Primary & Secondary care service delivery through District Hospitals (DH), Community Health Centres (CHC), Primary Health Centres (PHC), Sub-Centre/Health & Wellness Centres.
2. Tertiary Component: (‘Rashtriya Varisth Jan Swasthya Yojana’) These services are being provided through Regional Geriatric Centres (RGCs) located at 17 Medical colleges and two National Centres of Aging (NCAs) one in AIIMS, Ansari Nagar, New Delhi and another in Madras Medical College, Chennai.
3. Research: A Longitudinal Ageing Study in India (LASI) project:-The LASI is a nationally representative survey of older persons in India is being undertaken through International Institute of Population Sciences (IIPS), Mumbai.

**Package of Services:** The program has two components for provision of geriatric health care services i.e: district/ sub-district level component and tertiary level component. The package of services provided to elderly people at both levels is as given below.

**Sub Centre:**

- a. **Health Education** related to healthy ageing, environmental modifications, nutritional requirements, life styles and behavioural changes.
- b. **Special attention to home bound / bedridden** elderly persons and provide training to the family health care providers in looking after the disabled elderly persons.

**Primary Health Centre: Weekly geriatric clinic** by a trained Medical Officer (MO). Services would include: conducting **health assessment** of the elderly persons and simple investigation including blood sugar, etc.

**Community Health Centre**

- a. **Biweekly geriatric Clinic and Rehabilitation services** to be arranged by trained staff and rehabilitation worker at CHCs.
- b. **Domiciliary visits** by the rehabilitation worker will be undertaken for bed-ridden elderly and counseling to family members for care such patients.

### **District Hospitals:**

- a. Dedicated Geriatric OPD services, In-door admissions through 10 bedded geriatric ward, laboratory investigations and rehabilitation services.
- b. Provide services for the elderly patients referred by the CHCs/PHCs etc. and refer severe cases to tertiary level hospitals.

### **Tertiary Level**

#### **(A) Regional Geriatric Centers:**

- a. Provide **tertiary level services for complicated/serious Geriatric Cases** referred from Medical Colleges, District Hospitals and below.
- b. Conduct **post graduate courses in Geriatric Medicine**. Each RGC to produce 2 post graduates (MD geriatrics) every year.
- c. Providing **training** to the trainers of identified District hospitals and medical colleges
- d. Developing/and updating Training modules, guidelines and **IEC materials**.
- e. **Research** on specific elderly diseases.

#### **(B) National Center of Ageing**

- a. High level tertiary care with **multidisciplinary clinical services** involving medical and surgical disciplines.
- b. **Specialised OPD care** in various clinical disciplines. Special clinics like memory clinic, fall and syncope clinic, frail elderly clinic, aids and appliances clinic, implants and cosmetic clinic.
- c. **Day care centre for:** Investigations, rehabilitation, respite care, dementia care ,continence care
- d. **In patient care for:** Intensive care, acute rehabilitation, diagnostic and therapeutic services, long term rehabilitation service.
- e. **Human resources development in all sub-specialties of Geriatric Medicine**
- f. Developing **evidence based treatment protocols** for Geriatric diseases prevalent in the country.

**Annexure-IV**

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Under the NSAP programme, the old aged, widows, and disabled persons belonging to Below Poverty Line (BPL) and fulfilling eligibility criteria prescribed in the NSAP guidelines, are provided financial assistance, in form of pension, ranging from Rs.200/- to Rs.500/- p.m. and in the case of death of the breadwinner of such family, lump sum assistance of Rs. 20,000/- is given to the bereaved family. One of the components under the scheme is Indira Gandhi National Old Age Pension Scheme under which assistance of ₹ 200/- per month to persons in the age group of 60-79 years is provided and ₹ 500/- per month to persons of 80 years and above is provided.

**Annexure-V**

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The Department of Financial Services is implementing the Atal Pension Yojana (APY) which was launched on 09.05.2015 with the objective of creating a universal social security system for all Indians, especially the poor, the under-privileged and the workers in the unorganized sector. It is open to all citizens of India between 18-40 years of age having a savings bank account in a bank or post-office. For better targeting of guaranteed pension to unorganized sector workers, an income tax payer shall not be eligible to join APY from 01.10.2022. The subscriber under APY is required to make a monthly/quarterly/six monthly contribution of an amount determined by the amount of pension chosen and the age of joining the scheme. The subscriber shall receive a government guaranteed minimum pension of Rs. 1000 per month, Rs. 2000 per month, Rs. 3000 per month, Rs. 4000 per month or Rs. 5000 per month, after the age of 60 years until death, depending on the contribution chosen. The spouse of the subscriber shall be entitled to receive the same pension amount as that of the subscriber after the death of the subscriber. After the death of both subscriber and the spouse, the nominee of the subscriber shall be entitled to receive the pension wealth, as accumulated till age 60 of the subscriber. As per the scheme, subscriber will receive pension benefit on attaining the age of 60 years.

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