

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

**RAJYA SABHA
UNSTARRED QUESTION NO. 2846
TO BE ANSWERED ON 17TH MARCH, 2026**

**EFFECTIVENESS OF AB-PMJAY IN REDUCING OUT-OF-POCKET HEALTH
EXPENDITURE**

2846. SHRI KAPIL SIBAL:

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

- (a) the trends in out-of-pocket expenditure on healthcare by beneficiaries under Ayushman Bharat Pradhan Mantri Jan Arogya Yojana (AB-PMJAY) in the last two years;
- (b) the number of hospitals empanelled and claims settled in rural vs, urban areas as of January 2026; and
- (c) any plans to address gaps in coverage for chronic illnesses?

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

(a) to (c): Ayushman Bharat - Pradhan Mantri Jan Arogya Yojana (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. In March 2024, approximately 37 lakh families of Accredited Social Health Activists, Anganwadi Workers and Anganwadi Helpers 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.

As on 28.02.2026, a total of 43.52 crore Ayushman Cards have been created, including 1.14 crore cards created under the Ayushman Vay Vandana category for senior citizens aged 70 years and above.

As on 28.02.2026, a total of 36,229 hospitals have been empanelled under the scheme across the country, of which 19,483 are public and 16,746 are private hospitals.

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. Out of these, 4.40 crore hospital admissions amounting to Rs. 68,302.23 crore were authorized during the last two years (FY 2023-24 to FY 2024-25). The significant utilization of the scheme indicates that eligible beneficiaries are able to access healthcare services and thereby reduce their out-of-pocket expenditure.

Since the launch of the scheme, the Health Benefit Packages have been revised five times. Initially, the scheme included 1391 packages, but the latest Health Benefit Package 2022, now comprises 1,961 packages across 27 specialties. This includes packages for chronic illnesses like Cancer, Diabetes, Heart Disease and other non-communicable diseases.
