

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

**RAJYA SABHA
UNSTARRED QUESTION NO. 1874
TO BE ANSWERED ON 04TH AUGUST, 2026**

CASHLESS FACILITY UNDER AB-PMJAY

1874. # DR. JYOTI NAGNATH WAGHMARE:

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

- (a) the progress made so far in providing cashless health cover of up to 5 lakh rupees to the underprivileged families of the country under Ayushman Bharat-Pradhan Mantri Jan Arogya Yojana (AB-PMJAY), the details thereof, State-wise;
- (b) the positive socio-economic benefits derived from this scheme in saving poor families from the burden of heavy medical expenses and debt; and
- (c) the role this scheme played in strengthening medical infrastructure and tertiary health services in Tier-2 and Tier-3 cities?

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

(a) and (b): 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 economically vulnerable families, constituting the bottom 40% of India's population. In March 2024, the scheme was expanded to include approximately 37 lakh families of Accredited Social Health Activists, Anganwadi Workers, and Anganwadi Helpers. The scheme was further expanded in October 2024 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 State/UT-wise details of Ayushman cards created can be accessed at <https://dashboard.nha.gov.in/public/card>

AB-PMJAY has significantly contributed in reducing out-of-pocket expenditure. As on 30.06.2026, a total of 12.69 crore hospital admissions amounting to Rs.1.92 lakh crore have been authorized under the scheme through a network of 37,413 public and private hospitals.

According to the National Health Accounts Estimates 2022-23, out of pocket expenditure as a proportion of total health expenditure declined from 62.6% in 2014-15 to 43.4% in 2022-23. This substantial reduction indicates that households are incurring a considerably lower share

of healthcare costs directly from their own pockets, owing to increased public investment in health and the expansion of publicly financed health insurance schemes such as AB-PMJAY.

(c): National Health Authority (NHA) continuously engages with public and private hospitals to strengthen the empanelled hospital network under AB-PMJAY. Increased participation of private hospitals under the scheme has supported the establishment of new healthcare facilities and the expansion of existing tertiary care services in Tier-2 and Tier-3 cities.

Further, under AB-PMJAY, claims are settled by the respective State Health Agencies in accordance with the claim adjudication guidelines issued by NHA, and the claim amount is directly disbursed to the empanelled hospitals. The funds received through claim reimbursements are also utilized by empanelled hospitals to strengthen healthcare infrastructure, procure medical equipment, improve patient amenities, enhance the quality of healthcare services etc.
