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

RAJYA SABHA
UNSTARRED QUESTION NO. 293
TO BE ANSWERED ON 21ST JULY, 2026

AYUSHMAN BHARAT AND UNIVERSAL HEALTH COVERAGE

293. # SHRI MITHLESH KUMAR:
SHRI NARESH BANSAL:
SHRI RYAGA KRISHNAIAH:
SHRI BABURAM NISHAD:
SHRI KESRIDEVSINH JHALA:
SHRI MAYANKKUMAR NAYAK:
DR. KALPANA SAINI:
SHRI UJJWAL DEORAO NIKAM:

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

(a) the progress made under Ayushman Bharat Pradhan Mantri Jan Arogya Yojana AB-PMJAY) in terms of number of beneficiaries covered and hospital admissions;

(b) the steps taken to expand health insurance coverage and strengthen primary healthcare through Ayushman Arogya Mandirs, including the State of Maharashtra;

(c) the measures implemented for expansion of digital health initiatives such as Ayushman Bharat Health Account (ABHA) under Ayushman Bharat Digital Mission and integration with other schemes; and

(d) the impact of AB- PMJAY on reducing out-of-pocket expenditure and moving towards Universal Health Coverage?

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) was launched in September 2018 to provide health coverage of Rs. 5 lakh per family per year for secondary and tertiary care hospitalization. Initially, the scheme covered 10.74 crore families identified under the Socio-Economic Caste Census, 2011, constituting the bottom 40% of India's population. In January 2023, the beneficiary base was revised from 10.74 crore to 12 crore families to account for India's decadal population growth. In March 2024, approximately 37 lakh additional 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 30.06.2026, a total of 12.69 crore hospital admissions, amounting to over Rs. 1.92 lakh crore, have been authorized under the scheme.

Through 1.86 lakh Ayushman Arogya Mandirs (AAMs) in the country, including 13,457 AAMs in Maharashtra, comprehensive primary healthcare is provided by strengthening Sub Health Centres (SHCs) and Primary Health Centres (PHCs).

(c): The Ayushman Bharat Digital Mission (ABDM) was launched by the Government of India in September 2021 to support the development of an integrated, citizen-centric national digital health ecosystem and the government is progressively integrating central and state level health programs with ABDM. Several national health programme platforms, including AB-PMJAY, Nikshay, RCH and NCD are integrated with ABDM. In addition, various government and private Hospital Management Information System (HMIS) have also been integrated with ABDM, as a result of which 2.7 lakh health facilities are now using ABDM enabled software, enabling these systems to create Ayushman Bharat Health Account (ABHA), create & share digital health records for seamless interoperability across the ecosystem.

The government has taken several initiatives to enhance ABDM adoption. These include development of use cases for quick registration, easy payments, the ‘Model Facility’ initiative to develop selected public and private healthcare facilities across India for end-to-end adoption of ABDM and incentives to health facilities and digital solution companies to create digital health records. In addition, National Health Authority (NHA) has entered into an MoU with CDAC and developed an affordable ABDM enabled HMIS specifically for small healthcare facilities. Further, NHA actively promotes awareness and citizen engagement through participation in public events such as trade fairs, marathons, medical conferences, and technology events, encouraging the creation of ABHA and the adoption of digital healthcare. NHA, States and Union Territories also undertake targeted Information, Education & Communication (IEC) activities and capacity-building initiatives to further strengthen ABDM adoption.

(d): 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.

Further, many states have expanded the beneficiary base beyond the centrally targeted beneficiary numbers by converging their state specific schemes with AB-PMJAY. The expansion of the beneficiary base under AB-PMJAY, coupled with the integration of various state health insurance schemes, has significantly enhanced the scheme's outreach among vulnerable populations across the country.

These initiatives have broadened the coverage of the scheme, contributing towards the Government's vision of achieving Universal Health Coverage.

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