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

LOK SABHA
STARRED QUESTION NO. 199
TO BE ANSWERED ON THE 29TH JULY, 2022

AYUSHMAN BHARAT DIGITAL MISSION

*199. SHRI SUNIL KUMAR SINGH:
MS. DIYA KUMARI:

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

(a) the details of steps taken by the Government towards infrastructure and administrative development to support the Ayushman Bharat Digital Mission in the country;

(b) the details of role played by States and the private players in furthering various initiatives under the scheme;

(c) the achievements made under the scheme till date, State/UT-wise particularly in Jharkhand;

(d) whether the Government has taken any steps to provide benefits of the scheme to the poor and those affected by digital divide, especially in areas of Jharkhand which lack internet connectivity; and

(e) if so, the details thereof?

ANSWER
THE MINISTER OF HEALTH AND FAMILY WELFARE
(DR MANSUKH MANDAVIYA)

(a) to (e) A Statement is laid on the Table of the House.

(a) to (e) Government of India has launched Ayushman Bharat Digital Mission (ABDM) which aims to create a platform enabling interoperability of health data within the health ecosystem to create longitudinal Electronic Health Record (EHR) of every citizen.

The infrastructure required for development of interoperable digital platform & certain modules under the National Digital Health Mission (now Ayushman Bharat Digital Mission) has broadly been assessed and identified in line with the objectives of ABDM.

For administrative support, various policy frameworks such as Health Data Management Policy, Sandbox Guidelines, Health Information Provider Guidelines etc. have been prepared and issued for smooth implementation of ABDM.

States/UTs are expected to play a crucial role in adoption of ABDM. ABDM being a centrally sponsored scheme, financial assistance is provided to States/UTs for Human resources, Information Education & Communication (IEC) and Capacity building. States/UTs administration will help in onboarding and handholding all the facilities/health professionals, integrating any state health programmes and state specific digital health solution(s) with ABDM and to collaborate with various stakeholders of digital ecosystem to increase the creation and seamless sharing of digital health records.

Both public and private sector IT solutions in health are integrated through various registries under ABDM to aid creation of longitudinal EHR across the country. Till 23rd July 2022, 47 entities (17 public and 30 private) have successfully integrated with ABDM eco system. More than 800 entities (government and private) are presently integrating with ABDM.

As on 23rd July 2022, a total 23,08,75,100 ABHA Numbers; 1,10,939 Health Facilities and 30,210 Healthcare Professionals have been registered (State/UT-wise details attached at Annexure - A).

District wise detail of ABHA numbers, Healthcare facility & Healthcare Professionals registered in Jharkhand are attached as Annexure - B.

Government has taken various steps to ensure that the benefits of the mission reach every citizen. Inclusion is one of the key principles of ABDM. The digital health ecosystem created by ABDM supports continuity of care across primary, secondary and tertiary healthcare in a seamless manner. It aids availability of health care services particularly in remote and rural areas through various technology interventions like telemedicine etc. The Mission has provisions for assisted mode in places where internet connectivity might be poor. For instance, Offline mode for creation of ABHA has been enabled wherever internet connectivity might be poor or there would be unavailability of hardware or both.

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States/UTs wise details of ABHA/HFR/HPR Status

(As on 23rd July 2022)

S. No.	Name of the States / UTs	ABHA Created*	Health Facilities Registered	Health Professionals Registered
1	Andhra Pradesh	3,25,89,804	26,824	14,508
2	Uttar Pradesh	1,93,56,779	13,349	3,018
3	Bihar	1,64,56,628	12,791	2,675
4	Madhya Pradesh	1,54,79,136	12,379	1,817
5	Maharashtra	1,48,25,017	11,977	1,787
6	Kerala	1,30,39,922	10,750	1,403
7	Chhattisgarh	1,27,14,061	8,593	978
8	West Bengal	1,11,60,466	5,961	542
9	Gujarat	1,04,38,163	1,841	482
10	Odisha	99,90,477	1,574	480
11	Rajasthan	70,00,827	627	477
12	Karnataka	67,46,527	543	363
13	Delhi	63,47,433	456	345
14	Punjab	50,36,024	441	262
15	Jharkhand	46,92,147	380	236
16	Jammu And Kashmir	44,03,448	372	169
17	Haryana	43,62,627	371	123
18	Telangana	40,68,573	311	88
19	Tamil Nadu	31,25,795	288	73
20	Uttarakhand	25,89,842	244	72
21	Himachal Pradesh	18,02,408	221	60
22	Assam	10,93,296	200	57
23	Puducherry	8,76,485	177	33
24	Chandigarh	5,33,750	143	32
25	DNHDD	5,20,506	49	29
26	Manipur	4,58,373	47	29
27	Andaman And Nicobar Islands	4,20,474	25	24
28	Tripura	3,65,228	5	13
29	Goa	3,35,327	0	12
30	Sikkim	3,10,551	0	9
31	Mizoram	2,99,561	0	5
32	Nagaland	2,66,408	0	2
33	Ladakh	2,60,266	0	2
34	Arunachal Pradesh	2,02,250	0	2
35	Meghalaya	1,34,960	0	2
36	Lakshadweep	72,003	0	1

*1,84,99,558 ABHA numbers were created through the CoWin portal. The details of the states against various ABHAs has not been populated as it is no mandatory field.

District wise details of ABHA/HFR/HPR Status in Jharkhand

(As on 23rd July 2022)

S. No.	Name of the Districts	ABHA Created*	Health Facilities Registered	Health Professionals Registered
1	East Singhbum	6,81,325	92	59
2	Ranchi	4,91,773	88	50
3	Dhanbad	3,54,100	60	25
4	Hazaribagh	3,03,652	60	24
5	Bokaro	2,82,332	40	22
6	Chatra	2.46.043	38	12
7	Giridih	2,26,947	31	11
8	Koderma	2,21,928	28	11
9	Jamtara	2,21,557	14	10
10	Deoghar	1,63,263	4	6
11	Dumka	1,57,542	1	4
12	SaraikelaKharsawan	1,50,664	0	4
13	Ramgarh	1,35,729	0	3
14	West Singhbhum	1,29,971	0	3
15	Pakur	1,24,347	0	3
16	Latehar	1,21,567	0	3
17	Simdega	1,09,147	0	3
18	Godda	1,07,262	0	3
19	Palamu	1,05,514	0	2
20	Lohardaga	87,159	0	2
21	Sahebganj	81,102	0	1
22	Gumla	79,880	0	1
23	Garhwa	44,586	0	0
24	Khunti	31,562	0	0

*33,195 ABHA numbers were created through the CoWin portal. The details of the states against various ABHAs has not been populated as it is no mandatory field.