

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

**LOK SABHA  
UNSTARRED QUESTION NO. 1113  
TO BE ANSWERED ON 22<sup>ND</sup> JULY, 2022**

**COVERAGE UNDER AB-PMJAY SCHEME**

**1113. SHRI GOPAL JEE THAKUR:**

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

- (a) whether the Government has intensified the exercise of registering citizens under Ayushman Bharat Yojana to provide free access to health insurance coverage to low income earners in the country and if so, the details thereof;
- (b) whether the Government has taken note of the fact that many deserving and eligible families/persons are deprived of benefits under AB-PMJAY for not being covered thereunder;
- (c) if so, the details thereof along with necessary steps taken in this regard;
- (d) whether the Government proposes to make necessary amendments to the Scheme so as to cover each eligible person as per the 2011 Census;
- (e) if so, the details thereof along with necessary steps taken in this regard;
- (f) whether the Government is aware of the fact that a large number of eligible persons have not been included in the scheme due to their names not figuring in the 2011 census; and
- (g) if so, the efforts being made by the Government to include all such persons under the scheme?

**ANSWER**

**THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND  
FAMILY WELFARE  
(DR. BHARATI PRAVIN PAWAR)**

(a) to (g): Ayushman Bharat–Pradhan Mantri Jan Arogya Yojana (AB-PMJAY) is an entitlement-based scheme. Eligible beneficiaries can directly visit any empanelled public or private hospital to avail cashless treatment. Ayushman cards are issued to the beneficiaries to create awareness about the scheme. National Health Authority in association with State Health Agencies has fast-tracked the process of issuance of cards to the beneficiaries across the country.

Healthcare services including primary, secondary and tertiary are provided free to all citizens of the country in Central/State Government hospitals. PMJAY's beneficiary database is defined.

10.74 crore poor and vulnerable families (bottom 40 percent population) identified on the basis of SECC 2011 data are entitled to receive free treatment under the scheme. Further, States/UTs have the flexibility to run their own health protection schemes in alliance with AB-PMJAY at their own cost. Accordingly, States/UTs have expanded the scheme coverage to 14.75 crore beneficiary families at their own cost.

To cover each eligible person as per the 2011 Census under the scheme, guidelines are issued to States/UTs to identify beneficiaries as per deprivation/occupational criteria of SECC and to meet the shortfall in terms of number of eligible beneficiary households vis-à-vis those already identified/verified using their own datasets.

Details of steps taken to improve registrations under the scheme are as under:

- Leveraging grassroots network of healthcare workers (HCWs), frontline workers (FLWs), Panchayati Raj institutions (PRIs), village level entrepreneurs (VLEs) / agents from CSC and UTIITSL to mobilize and verify beneficiaries under “Aapke Dwar Ayushman” (ADA) initiative.
- Leveraging the updated databases of welfare schemes of Central Government Ministries/Departments for better targeting of PMJAY beneficiaries to reach out to eligible individuals from this list to issue Ayushman cards to them.
- Four additional agencies on-boarded, along the lines of CSC and UTIITSL for the generation of Ayushman cards across the country.
- Eight additional agencies on-boarded to ensure immediate approval of Ayushman card requests.
- An enhanced location hierarchy based search option enabled in SECC database to access village level beneficiary data.
- A revamped “Self BIS” system launched for self / assisted verification.
- Crowd sourced approval functionality enabled for beneficiary record approval.

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