

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

**LOK SABHA
UNSTARRED QUESTION NO. 825
TO BE ANSWERED ON 26TH JULY, 2024**

NEW HEALTH SCHEMES FOR SENIOR CITIZENS UNDER PMJAY

825. SHRI N K PREMACHANDRAN:

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

- (a) whether the Government proposes to introduce new health scheme for senior citizens and enhance the insured amount, if so, the details thereof;
- (b) whether it is true that the Government has fixed the rate under the AYUSHMAN Card under PMJAY scheme, if so, the details thereof;
- (c) whether the Government proposes to provide opportunity to the citizens to join PMJAY, if so, the details thereof;
- (d) the criteria fixed by the Government for joining PMJAY and obtain Ayushman Card;
- (e) whether the Government is aware that in Kerala it is not possible to join in the said scheme, if so, the action taken/proposed to be taken in this regard; and
- (f) the details regarding the opening of website for joining new members?

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

(a) to (f): Ayushman Bharat – Pradhan Mantri Jan Arogya Yojana (AB-PMJAY) is the world's largest publicly funded health assurance scheme which provides health cover of Rs. 5 lakh per family per year for secondary and tertiary care hospitalization to 55 crore individuals corresponding to 12.34 crore families. All members of the eligible families irrespective of age are covered under the scheme.

The scheme is being implemented in 33 States/UTs except NCT of Delhi, West Bengal and Odisha.

Currently, there is no proposal to open the scheme beyond existing beneficiary base on contribution of premium.

Initially, 10.74 crore beneficiary families under AB PM-JAY were identified on the basis of the Socio-economic Caste Census (SECC) of 2011 using select deprivation and occupational criteria separately for rural and urban areas. In January 2022, the beneficiary base was expanded to 12.34 crore families and States/UTs have been given the flexibility to use other digitized databases of similar socio-economic conditions for identification of beneficiaries under the scheme. Accordingly, States/UTs have provided Aadhaar-seeded databases of poor and vulnerable families for verification under the scheme. The beneficiary may directly visit any empaneled hospital (public or private) across the country to avail cashless treatment benefits. Based on the diagnosis done by the hospital, eligible beneficiaries are provided treatment free of cost. Post treatment, beneficiary is discharged and hospital submits the claim for reimbursement.

A total of 23,97,610 families in the State of Kerala are eligible for healthcare benefits under the scheme and a total of 76.7 lakh Ayushman cards have been created for beneficiaries in the State.
