

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

**LOK SABHA
UNSTARRED QUESTION NO. 3479
TO BE ANSWERED ON 21ST MARCH, 2025**

AB PM-JAY IN MAHARASHTRA

**3479. SHRI OMPRAKASH BHUPALSINH ALIAS PAVAN RAJENIMBALKAR:
SHRI SANJAY UTTAMRAO DESHMUKH:
SHRI SANJAY HARIBHAU JADHAV:**

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

- (a) the number of cards issued under the Ayushman Bharat Pradhan Mantri Jan Arogya Yojana (AB PM-JAY), State/UT-wise including Maharashtra particularly in Parbhani and Osmanabad Parliamentary Constituency during the last five years, till date;
- (b) the eligibility criteria fixed for availing benefits under AB PM-JAY;
- (c) the amount released to beneficiaries under AB PM-JAY during the last five years State/UT-wise particularly Maharashtra including Yavatmal-Washim Parliamentary Constituency;
- (d) whether it is a fact that people are not able to get the benefits of the said scheme due to the indifference of private hospitals, if so, the details thereof along with the necessary steps taken in this regard; and
- (e) the details of appropriate steps taken/proposed to be taken by the Government to strengthen the healthcare services and empanel more private hospitals under the said scheme?

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

(a): State/UT - wise number of Ayushman Cards created during last five year, till date under Ayushman Bharat - Pradhan Mantri Jan Arogya Yojana (AB-PMJAY) are at **Annexure-I**.

Constituency-wise data is not captured in the scheme, instead, district-wise data is available. As on 17.03.2025, the number of Ayushman Cards created in the last five years in Parbhani and Osmanabad District is 5.77 lakhs and 5.62 lakhs respectively.

(b): Under AB-PMJAY, the eligibility criteria for the beneficiary families were initially identified from the Socio-Economic Caste Census (SECC) of 2011 on the basis of 6 deprivation and 11 occupational criteria across rural and urban areas respectively. Further, in January 2022, on the basis of decadal growth rate of 11.7%, Government of India revised the beneficiary base to 12 crore families and provided the flexibility to States/UTs to use other databases (of similar socioeconomic profile) for verification of beneficiaries against such SECC beneficiaries who could not be identified and verified. Many of the States and Union Territories (UTs) implementing AB-PMJAY have further expanded the beneficiary base at their own cost under the scheme using non-SECC data sources (including National Food Security Act, State specific datasets).

In March 2024, the eligibility criteria under the scheme were expanded to include 37 lakh Accredited Social Health Activists (ASHAs), Anganwadi Workers (AWWs), Anganwadi Helpers (AWHs) and their families. Further, on 29.10.2024, the government expanded AB-PMJAY to provide free treatment benefits of up to ₹5 lakh per year to approximately 6 crore senior citizens aged 70 years and above, belonging to 4.5 crore families, irrespective of their socio-economic status.

(c): States/UT - wise amount incurred in the hospital admission of beneficiaries in the last five years is at **Annexure-II**.

Constituency-wise data is not captured under the scheme, instead, district-wise data is available. The details of the amount incurred in the hospital admission of beneficiaries in the last five years in Yavatmal and Washim District is 78.64 crore and 53.82 crore respectively.

(d): Under Ayushman Bharat – Pradhan Mantri Jan Arogya Yojana (AB-PMJAY), as per the terms and conditions of empanelment, hospitals cannot deny treatment to eligible beneficiaries of the scheme. In case of denial of treatment by the empaneled hospital, beneficiaries can lodge grievances. Under AB-PMJAY, a three-tier grievance redressal system at District, State and National level has been created to resolve the issues faced by beneficiaries in utilizing healthcare services. At each level, there is a dedicated nodal officer and Grievance Redressal Committees to address the grievances.

Beneficiaries can file their grievances using different mediums including web-based portal Centralized Grievance Redressal Management System (CGRMS), Central & State call centers (14555), email, letter to State Health Agencies (SHAs) etc. Based on the nature of grievance, necessary action including providing of support to the beneficiaries in availing treatment under the scheme, is taken.

(e): All Government hospitals with in-patient services are deemed empanelled under AB-PMJAY. Further, public hospitals are reimbursed for the services provided under the scheme at par with private hospitals. The funds released to public hospitals are expected to be used for the purpose of upgrading the health infrastructure and providing better amenities to the beneficiaries.

In order to improve the participation of more private hospitals, following actions have been taken:

- i. NHA has released a revised HBP with increased number of procedures (1961). Further, rates have been increased for 350 packages and new packages have been added.
- ii. Claim settlement is monitored at the highest level and it is ensured that claim is settled within defined turnaround time.
- iii. NHA has launched an improved version of the Hospital Engagement Module (HEM 2.0) for enhancing the empanelment process of the hospitals.
- iv. Virtual and physical capacity building of hospitals are undertaken.
- v. A hospital-specific call center (14413) has been set-up to address their concern on a real-time basis.
- vi. District Implementation Units (DIUs) have been set-up to regularly visit empaneled hospitals to understand the issues faced by beneficiaries and hospitals.

Annexure-I

State/UT-wise number of Ayushman Cards created during last five years (2019-20 to 2024-25)

States/UT	Number of Ayushman Card Created
Andaman And Nicobar Islands	73,341
Andhra Pradesh	1,56,14,094
Arunachal Pradesh	1,57,953
Assam	1,80,06,000
Bihar	3,60,98,668
Chandigarh	2,36,048
Chhattisgarh	2,28,61,288
DNH & DD	1,41,764
Goa	82,782
Gujarat	2,29,29,581
Haryana	1,23,19,730
Himachal Pradesh	8,84,766
Jammu And Kashmir	77,08,585
Jharkhand	94,77,798
Karnataka	1,90,03,049
Kerala	83,07,597
Ladakh	1,58,234
Lakshadweep	39,691
Madhya Pradesh	3,43,49,382
Maharashtra	2,89,61,437
Manipur	6,09,853
Meghalaya	18,26,372
Mizoram	4,45,906
Nagaland	7,50,194
Puducherry	5,31,744
Punjab	92,45,674
Rajasthan	2,32,37,180
Sikkim	79,506
Tamil Nadu	79,14,708
Telangana	82,65,374
Tripura	17,18,577
Uttar Pradesh	4,97,54,747
Uttarakhand	31,22,972

Note: Data as on date 18.03.2025

Annexure-II

States/UT-wise amount incurred in the hospital admission of beneficiaries in the last five years

States/UT	Amount of Hospital Admission (in crore of rupees)
Andaman And Nicobar Islands	8.49
Andhra Pradesh	13,568.71
Arunachal Pradesh	4.99
Assam	1,698.66
Bihar	1,036.55
Chandigarh	39.76
Chhattisgarh	6,055.36
DNH & DD	88.96
Goa	3.11
Gujarat	10,723.33
Haryana	1,859.87
Himachal Pradesh	328.22
Jammu And Kashmir	2,106.41
Jharkhand	2,224.09
Karnataka	6,516.21
Kerala	6,467.88
Ladakh	19.64
Lakshadweep	2.82
Madhya Pradesh	6,007.62
Maharashtra	3,447.02
Manipur	191.42
Meghalaya	708.15
Mizoram	136.54
Nagaland	127.27
Puducherry	64.02
Punjab	2,490.36
Rajasthan	5,273.96
Sikkim	16.89
Tamil Nadu	6,212.16
Telangana	3,148.74
Tripura	286.65
Uttar Pradesh	5,530.83
Uttarakhand	2,105.21
