

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

**LOK SABHA
UNSTARRED QUESTION NO. 3633
TO BE ANSWERED ON 21ST MARCH, 2025**

NEW HEALTH SCHEME FOR SENIOR CITIZENS

3633. 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, if so, the details thereof;
- (b) whether the Government proposes to enhance the insured amount, if so, the details thereof;
- (c) whether the Government has taken note of the rate fixed under the AYUSHMAN Card under Pradhan Mantri Jan Arogya Yojana (PMJAY) Scheme and if so, the details thereof;
- (d) whether the Government proposes to provide opportunity to the citizens to join PMJAY, if so, the details thereof;
- (e) the criteria fixed by the Government for joining in PMJAY and obtaining Ayushman Card;
- (f) whether the Government has taken note that in Kerala, it is not possible to join the said scheme, if so, the remedial action taken thereon; and
- (g) the details regarding the opening of website for joining of new members?

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

(a): On 29.10.2024, Government of India expanded Ayushman Bharat - Pradhan Mantri Jan Arogya Yojana (AB-PMJAY) to provide free treatment benefits of up to ₹5 lakh per year to all senior citizens aged 70 years and above, irrespective of their socio-economic status through Ayushman Vay Vandana card. The details of the scheme are at **Annexure**.

(b): AB-PMJAY currently provides free healthcare access up to Rs. 5 lakh per eligible beneficiary family per year for secondary and tertiary care hospitalization in 27 different medical specialties

corresponding to 1961 procedures. Regular updation such as inclusion of new procedures, empanelment of new hospitals, inclusion of new beneficiaries and other improvements are done in the scheme as per requirements from time to time.

(c): The cost of treatment is fixed by Health Benefit Package (HBP 2022) master, standardized across all hospitals empanelled under AB-PMJAY. Further, States/UTs have been provided the flexibility to further customize the HBP rates based on local factors such as provider expectations, resource availability and disease burden.

(d) and (e): 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.

The enrolment process for obtaining Ayushman card under the scheme is application-based, which is a continuous process allowing registration throughout the year. Enrollment may be done through mobile phone application (Ayushman App), web portal (beneficiary.nha.gov.in) or at the nearby empanelled hospital or Common Service Centre. The feature of self-registration is also available in the above mentioned application. In addition to this, beneficiaries may call National toll free helpline (14555) for any assistance/queries.

(f): AB-PMJAY is implemented in 33 States/UTs including Kerala. 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, including rural and underserved areas. At each level, there is a dedicated nodal officer and Grievance Redressal Committees to address the grievances.

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

(g): The enrolment process for obtaining Ayushman card under the scheme is application-based, which is a continuous process allowing registration throughout the year. Enrollment may be done through mobile phone application (Ayushman App), web portal (beneficiary.nha.gov.in) or at the nearby empanelled hospital or Common Service Centre. The feature of self-registration is also available in the above mentioned application. In addition to this, beneficiaries may call National toll free helpline (14555) for any assistance/queries.

The details of the Ayushman Vay Vandana scheme are as follows:

- i. The benefits of the AB-PMJAY shall be available to senior citizens of the age 70 years and above irrespective of their socio-economic status.
- ii. The only eligibility criteria is to attain the age of 70 years which shall be determined on the basis of age recorded in Aadhaar.
- iii. Aadhaar based e-KYC is mandatory for enrolment and issuance of Ayushman Vay Vandana card.
- iv. Beneficiaries with other Central and State government health insurance schemes are given a one-time option to choose between their current scheme and AB-PMJAY. Beneficiary holding active private health insurance and Employee State Insurance Scheme are also eligible to avail the benefits under the scheme.
- v. Enrolment of all eligible senior citizens aged 70 years and above is application-based, continuous process allowing registration throughout the year. Enrolment may be done through mobile phone application (Ayushman App), web portal (beneficiary.nha.gov.in) or at the nearby empaneled hospital or Common Service Centre. The feature of self-registration is also available in the above-mentioned application.
- vi. An annual health cover of Rs. 5 lakh per eligible beneficiary family per year for secondary and tertiary care hospitalizations corresponding to 1,961 treatment procedures across 27 specialties including General Medicine, General Surgery, Orthopaedics, Cardiology, Oncology etc. Among these, treatment of critical illness like Hemodialysis / Peritoneal Dialysis, Acute Ischemic Stroke, Accelerated hypertension, Total Hip Replacement, Total Knee Replacement, PTCA, inclusive of diagnostic angiogram, Single Chamber Permanent Pacemaker Implantation, Double Chamber Permanent Pacemaker Implantation etc., are available to eligible senior citizens. Further, States have been provided flexibility to further customize the Health Benefit Packages to local context.
- vii. All eligible beneficiaries under AB-PMJAY can avail treatment through a network of over 30,957 public and private empaneled healthcare providers.
- viii. A helpline number 1800-110-770 is available for the Ayushman Vay Vandana card beneficiaries where they may give a missed call or beneficiary may call to 24x7 call centre (14555) for any assistance/queries.
