

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

**LOK SABHA  
UNSTARRED QUESTION NO. 4788  
TO BE ANSWERED ON 28<sup>TH</sup> MARCH, 2025**

**EXPANSION AND EFFECTIVENESS OF AB-PMJAY**

**4788. SMT. PRATIMA MONDAL:**

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

- (a) the details of the progress made in the expansion and effectiveness of the Ayushman Bharat - Pradhan Mantri Jan Arogya Yojana (AB-PMJAY) in providing universal health coverage;
- (b) the manner in which the Government plans to promote domestic pharmaceutical manufacturing and reducing dependency on imports; and
- (c) the policies being adopted to promote health-tech startups and innovations, ensuring the growth of India's digital healthcare ecosystem?

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

(a): Ayushman Bharat - Pradhan Mantri Jan Arogya Yojana (AB-PMJAY) is a flagship scheme of the Government which provides health cover of Rs. 5 lakh per family per year for secondary and tertiary care hospitalization.

In January 2022, Government of India revised the beneficiary base from earlier 10.74 crore families to 12 crore families. Further, 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 through Ayushman Vay Vandana card. Many of the States and Union Territories (UTs) implementing AB-PMJAY have further expanded the beneficiary base under the scheme using non-SECC data sources (including National Food Security Act, State specific datasets).

Under AB-PMJAY, as per the latest Health Benefit Package, treatment is provided for 1,961 procedures across 27 medical specialties to eligible beneficiaries through a network of 30,957 empanelled hospitals including 13,866 private hospitals and 17,091 public hospitals.

As on 01.03.2025, more than 8.9 crore hospital admissions worth ₹1.26 lakh crore have been authorized under the scheme.

(b): The Department of Pharmaceuticals has informed that the Government of India has taken number of steps to reduce dependence on imported pharmaceutical drugs including Active Pharmaceutical Ingredients (APIs) and promote domestic production. These include the following:

- i. Production Linked Incentive (PLI) Scheme for promotion of domestic manufacturing of critical Key Starting Materials (KSMs) / Drug Intermediates (DIs) and APIs in India ("PLI scheme for bulk drugs") has a financial outlay of ₹6,940 crore and the production tenure is from FY 2022-23 to FY 2028-29. The financial incentive is to be given for manufacturing of identified products. A total of 48 projects have been selected under the scheme, of which 34 projects have been commissioned for 25 bulk drugs. Against committed investment of ₹3,938.57 crore, investment worth ₹4,253.92 crore have been released under the scheme. As on December 2024, the cumulative sales made by the applicants under the scheme is ₹1,556.04 crore which includes exports worth ₹412.42 crore.
- ii. PLI Scheme for Pharmaceuticals, with a financial outlay ₹15,000 crore and the production tenure from FY 2022-23 to FY 2027-28, provides financial incentive to 55 selected applicants for manufacturing of products under three categories for a period of six years. Against committed investment of ₹17,275 crore, investment worth ₹34,770.57 crore have been released under the scheme. As of December 2024, the cumulative sales made by the applicants under the scheme is ₹2,34,569.27 crore which includes exports worth ₹1,49,419.68 crore.
- iii. Under the Scheme for Promotion of Bulk Drug Parks, three bulk drug parks have been approved for development, one each in Bharuch (Gujarat), Nakkapalli (Andhra Pradesh) and Una (Himachal Pradesh) districts. The objective is to bring down the cost of manufacturing of bulk drugs by creation of world class common infrastructure facilities. Government of India is supporting these projects with financial assistance to the tune of ₹1,000 crore per park. These parks are at different stages of development. Common infrastructure facilities supported under the projects include effluent treatment plant, sewerage treatment plant, steam generation and supply, treatment storage and disposal facilities, solvent recovery system, raw water supply, centre of excellence, etc.

(c): Government of India launched Ayushman Bharat Digital Mission (ABDM) in September 2021 with the aim of creating a national digital health ecosystem across the country. ABDM comprises of key registries which intended through building registries such as Ayushman Bharat Health Account (ABHA), healthcare professional registry (HPR), health facility registry (HFR) and drug registry. Private Hospital Management Information Systems (HMIS), Lab Management Information Systems (LMIS) and Personal Health Record (PHR) app companies can leverage the Digital Public Infrastructure of ABDM to offer value-added services and enhance healthcare accessibility and affordability. By integrating with ABDM, these companies can exchange health data, enabling secure storage, access and sharing of medical records with patient consent. As on date, 222 private digital health solutions are integrated with ABDM. In addition, a Digital Health Incentive Scheme (DHIS) has also been introduced on 01.01.2023 to provide financial incentives to private and public digital health companies and hospitals for creating interoperable digital health records.