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

LOK SABHA UNSTARRED QUESTION NO. 967 TO BE ANSWERED ON 25TH JULY, 2025

IMPACT OF AB-PMJAY

†967. SHRI GYANESHWAR PATIL:
SHRI BHUMARE SANDIPANRAO ASARAM:
SMT. DELKAR KALABEN MOHANBHAI:
DR. SHIVAJI BANDAPPA KALGE:
DR. KALYAN VAIJINATHRAO KALE:

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

- (a) whether the impact of Ayushman Bharat-Pradhan Mantri Jan Aarogya Yojana (AB-PMJAY) has been assessed in the rural and tribal areas across the country particularly in Maharashtra, Madhya Pradesh and UT of Dadra and Nagar Haveli;
- (b) if so, the number of beneficiaries, empanelled hospitals and claims settled under the said scheme in Maharashtra particularly in Chhatrapati Sambhaji Nagar district, Madhya Pradesh and UT of Dadra and Nagar Haveli;
- (c) whether the Government proposes to address the shortage of health workers and infrastructure in Maharashtra and UT of Dadra and Nagar Haveli particularly in districts with poor health indicators, if so, the details thereof;
- (d) the various steps taken/proposed to be taken by the Government to improve the quality of health services in Maharashtra, Madhya Pradesh and UT of Dadra and Nagar Haveli under the National Health Mission (NHM);
- (e) whether the Government proposes to provide some special facilities to tribal and rural women of Maharashtra under AB-PMJAY; and
- (f) if so, the details thereof and if not, the reasons therefor?

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

(a) and (b): 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 to 12 crore families constituting economically vulnerable bottom 40% of India's population.

Further, in March 2024, the eligibility criteria were expanded to include 37 lakh Accredited Social Health Activists (ASHAs), Anganwadi Workers (AWWs), Anganwadi Helpers (AWHs), and their families. Recently, the scheme has been further extended to cover 6 crore senior citizens aged 70 years and above, representing 4.5 crore families, through Vay Vandana Card, irrespective of their socio-economic status.

The scheme is implemented in the State of Maharashtra, Madhya Pradesh and UT of Dadra and Nagar Haveli and Daman and Diu (DNH-DD) which includes rural areas of the States/UT as well. The details of number of beneficiaries, empanelled hospitals, hospital admissions and claims settled under the scheme are as below:

	Maharashtra	Madhya Pradesh	DNH-DD
Ayushman card created	3.17 crore	4.35 crore	4.45 lakh
Total hospitals empanelled	1,698	1,118	20
Number of hospital admissions	33.26 lakh	60.27 lakh	1.5 lakh
Claims paid amount (in Rupees)	4,215 crore	7,656 crore	92.69 crore

District	Ayushman cards created	Total hospitals empanelled	Number of hospital admissions	Claims paid amount (in Rupees)
Chhatrapati Sambhaji Nagar	8.87 lakh	88	2.30 lakh	158 crore

(c): National Health Mission (NHM) provides support for improvement in health infrastructure, availability of adequate human resources in health facilities, to improve availability and accessibility to quality health care especially for the underserved and marginalized groups in rural areas. The Ministry of Health and Family Welfare provides technical and financial support to the States/UTs to strengthen the public healthcare system, based on the proposals received in the form of Programme Implementation Plans (PIPs) under NHM. Government of India provides approval for the proposals in the form of Record of Proceedings (RoPs) as per norms & available resources.

The Government of India has taken number of initiatives in the form of incentives and honorarium to the medical professionals for encouraging better service delivery in rural and remote areas across the country including Maharashtra, which include:

- i. Hard Area Allowance to specialist doctors for serving in rural and remote areas.
- ii. States are allowed to offer negotiable salary to attract specialist including flexibility in strategies such as "You Quote We Pay".

- iii. Non-monetary incentives such as preferential admission in postgraduate courses for staff serving in difficult areas and improving accommodation arrangement in rural areas have also been introduced under NHM.
- iv. Multi-skilling of doctors is supported under NHM to overcome the shortage of specialists.

The following funds are sanctioned for Human Resource in UT of Dadra and Nagar Haveli:

- Under National Health Mission, for remuneration of NHM Human Resources, amount of funds approved is Rs. 31.18 crore for FY 2024-25 and Rs. 32.71 crore for FY 2025-26. Funds are also approved for the incentives for the healthcare staff, which is of Rs 11.36 lakh each for FY 2024-25 and FY 2025-26.
- For Infrastructure under Record of Proceeding (ROP) 2024-26, funds are approved of Rs. 3.60 lakh for each of FY 2024-25 and FY 2025-26.
- (d): With the aim of ensuring and enhancing the quality of healthcare services, National Quality Assurance Standards (NQAS) have been launched for all health facilities including Primary Health Centres (PHCs) and Community Health Centres (CHCs). Indian Public Health Standards (IPHS) has been laid down by the Government of India, which also aims towards an effort to improve the standard and quality of services and provide a uniform benchmark to assess the functionality of public health facilities. These standards include norms for services, infrastructure, human resources, diagnostics, equipment, medicines, etc.
- (e) and (f): AB-PMJAY 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. This includes several packages related to women like high-risk pregnancies, female specific cancers, etc. One of the key features introduced under BIS 2.0 is the offline mode of identification, designed specifically to support regions with poor or unstable internet connectivity.

Enrollment can also be done through mobile phone application (Ayushman App), and 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. Further, National toll-free helpline (14555) assists the beneficiaries for their queries.
