

(c) the steps being taken by Government to spread awareness amongst the citizens of the country - towards organ donation, in future; and

(d) if so, the details thereof and if not, the reasons therefor?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI ASHWINI KUMAR CHOUBEY): (a) All the States in the country are yet to adopt the Transplantation of Human Organs (Amendment) Act, 2011, and are yet to link up with the National Registry which compiles the data of organ transplants in the country. Therefore, the decline in the number of organ donors cannot be established.

(b) to (d) The Government of India has taken a series of measures to spread awareness amongst the citizens of the country for organ donation. The National Organ and Tissue Transplant Organisation (NOTTO) disseminates relevant information to all concerned. A 24x7 callcentre with a toll free helpline number (1800114770) has been made operational. A number of activities, for generating awareness and for imparting training to all those associated with transplant activities including doctors and transplant coordinators, such as celebration of Indian Organ Donation Day every year, seminars, workshops, debates, sports events, walkathons, participation in marathons, nukkadNatak, etc. are organized at different places in the country. Audio-visual messages to promote cadaver organ donation are also telecast on Doordarshan and other television channels.

Beneficiaries of Ayushman Bharat Yojana

374. SHRI HARNATH SINGH YADAV:

SHRI VIJAY PAL SINGH TOMAR:

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

(a) whether the Ayushman Bharat Yojana has covered nearly half the population of the country, if so, the salient features and targets of the scheme;

(b) the amount for which applications have been received under the said Yojana till date and the quantum of amount released to beneficiaries. State-wise; and

(c) whether Government plans to include economically poor persons in addition to BPL Card holders under the said scheme and, if so, the details thereof along with the number of persons benefited under the said scheme till date, State/UT-wise?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI ASHWINI KUMAR CHOUBEY): (a) Facilities under Ayushman Bharat

- Health and Wellness Centres (AB-HWCs) are available to all. Salient features and targets of the AB- HWCs are given in Statement-I (*See* below).

Ayushman Bharat-Pradhan Mantri Jan Arogya Yojana (AB-PMJAY) provides health coverage to around 10.74 crore poor and vulnerable families as per Socio Economic Caste Census (SECC) data. The salient features of Ayushman Bharat- Pradhan Mantri Jan Arogya Yojana (AB-PMJAY) are given in Statement-II (*See* below).

(b) AB-PMJAY provides cashless treatment to the entitled beneficiaries at empanelled hospitals. No money is released to the beneficiary and payment is made directly to the hospitals by State Health Agency (SHA) in case of Trustmode, and by Insurance company incase of Insurance mode.

As on 18.06.2019, the total number of claims made are 23,26,520 and total claim amount submitted is ₹3077,51,38,624. State-wise details are given in Statement-III (*See* below).

(c) AB-PMJAY covers deprived families in rural areas and families of workers of identified occupational categories in urban areas, as per the Socio-Economic Caste Census (SECC) - 2011 data. All such beneficiary families under RSBY that do not feature in the targeted groups as per SECC data, are also covered under PMJAY. At present, there is no proposal to extend the coverage of PMJAY.

The State/UT-wise details of beneficiaries covered under AB-PMJAY is given in Statement-IV.

Statement-I

Salient Features and Targets of Ayushman Bharat - Health and Wellness Centres

1. Under AB-HWC, Comprehensive Primary Healthcare is being provided which includes promotive, preventive, curative, palliative and rehabilitative services.
2. The AB-HWCs are envisioned to provide an expanded range of services to include care for non - communicable diseases, palliative and rehabilitative care, Oral, Eye and ENT care, mental health and first level care for emergencies and trauma as well as Health promotion and wellness activities like Yoga apart from services already being provided for Maternal and Child Health including immunization and communicable diseases.

3. To provide comprehensive health coverage to the beneficiaries, free essential drugs and diagnostic services are also being provided through these AB-HWCs.
4. The roll out plan of Ayushman Bharat - HWCs is given as below:-
 - FY 2018-19 = 15,000
 - FY 2019-20 = 25,000 (Cumulative 40,000)
 - FY 2020-21 - 30,000 (Cumulative 70,000)
 - FY 2021 -2022 - 40,000 (Cumulative 1,10,000)
 - Till 31st December 2022 = 40,000 (Cumulative 1,50,000)

Statement-II

Salient Features of Pradhan Mantri Jan Arogya Yojana (PMJAY)

1. Government of India has launched Ayushman Bharat Pradhan Mantri Jan Arogya Yojana (PMJAY) on 23.09.2018. PMJAY is centrally sponsored scheme. It is entirely funded by Government and the funding is shared between Centre and State governments as per prevailing guidelines of Ministry of Finance.
2. PMJAY provides health coverage up to ₹ 5 lakh per family per year for secondary and tertiary hospitalization to around 10.74 crore poor and vulnerable families (approx. 50 crore beneficiaries).
3. PMJAY is an entitlement based scheme. This scheme covers poor and vulnerable families based on deprivation and occupational criteria as per SECC database.
4. PMJAY provides cashless and paperless access to services for the beneficiary at the point of service in any (both public and private) empanelled hospitals across India. In other words, a beneficiary from one State can avail benefits from an empanelled Hospital anywhere in the country.
5. Under PMJAY, the States are free to choose the modalities for implementation. They can implement the scheme through insurance company or directly through the Trust/ Society or mixed model.
6. There is no restriction on family size, ensuring all members of designated families specifically girl child and senior citizens get coverage.
7. A well-defined Complaint and Public Grievance Redressal Mechanism, has been put in place through which complaints/ grievances are registered, acknowledged, escalated for relevant action, resolved and monitored.

8. PMJAY has created a robust IT system for implementation and role of real time transaction data.
9. At National level, National Health Authority (NHA) has been set up as an attached office to Ministry of Health and Family Welfare to manage the implementation of the scheme.
10. The details of package, operational guidelines and key features are available at www.pmjay.gov.in

Statement-III

*State-wise details for claim number and claim amount under
AB-PMJAY (As on 18.06.2019)*

Sl. No.	State	Claim Number	Claim Amount
1.	Chhattisgarh	5,07,707	37924,31,567
2.	Gujarat	3,94,995	64157,73,230
3.	Kerala	2,74,298	15000,79,006
4.	Tamil Nadu	2,11,075	39919,88,871
5.	Jharkhand	1,68,490	16604,91,355
6.	Karnataka	1,41,238	36389,05,339
7.	Maharashtra	1,13,830	28259,27,073
8.	Uttar Pradesh	1,05,255	11748,97,586
9.	Andhra Pradesh	92,982	25164,00,245
10.	Madhya Pradesh	70,898	7932,28,923
11.	Bihar	39,943	3458,68,103
12.	Uttarakhand	38,515	3818,39,891
13.	Assam	36,577	4777,70,292
14.	Haryana	23,588	3302,30,981
15.	Tripura	16,607	867,64,966

Sl. No.	State	Claim Number	Claim Amount
16.	Jammu and Kashmir	16,337	1071,24,523
17.	West Bengal	14,777	1414,52,393
18.	Himachal Pradesh	12,619	1249,46,595
19.	Meghalaya	11,861	867,35,930
20.	Mizoram	11,630	890,12,855
21.	Dadra and Nagar Haveli	11,140	427,46,501
22.	Daman and Diu	3,234	111,94,100
23.	NHCP	3,082	1308.99,614
24.	Manipur	2,361	413,75,658
25.	Chandigarh	1,450	160,90,105
26.	Goa	1,249	407,02,384
27.	Nagaland	628	81,51,821
28.	Sikkim	83	10,39,930
29.	Arunachal Pradesh	53	9,09,600
30.	Andaman and Nicobar Islands	14	58,200
31.	PSU	4	1,00,980
TOTAL		23,26,520	307751,38,624

Statement-IV

*State-wise details for beneficiary families covered under AB-PMJAY
(as on 18.06.2019)*

Sl. No.	State	Beneficiary families covered (in lakhs)
1	2	3
1.	Andaman and Nicobar Islands*	0.78
2.	Andhra Pradesh*	90
3.	Arunachal Pradesh	0.89

1	2	3
4.	Assam	27.02
5.	Bihar	108.95
6.	Chandigarh	0.71
7.	Chhattisgarh	41.46
8.	Dadra and Nagar Haveli*	0.66
9.	Daman and Diu*	0.45
10.	Goa	0.37
11.	Gujarat*	70
12.	Haryana	15.51
13.	Himachal Pradesh	4.8
14.	Jammu and Kashmir	6.13
15.	Jharkhand*	57
16.	Karnataka*	115
17.	Kerala	34.84
18.	Lakshadweep	0.01
19.	Madhya Pradesh*	128.8
20.	Maharashtra	83.63
21.	Manipur	2.77
22.	Meghalaya*	8.37
23.	Mizoram	1.95
24.	Nagaland	2.33
25.	Puducherry	1.04
26.	Punjab*	42
27.	Sikkim	0.4
28.	Tamil Nadu*	157

1	2	3
29.	Tripura	4.9
30.	Uttar Pradesh	1 18.04
31.	Uttarakhand*	19.68
32.	West Bengal	112
TOTAL		1,257 [#]

* Includes State extensions of PM-JAY

[#] Includes 10.74 crore identified families entitled for PMJAY as per SECC database

Problems faced in implementation of Ayushman Bharat

375. SHRI HARNATH SINGH YADAV:

SHRI VIJAY PAL SINGH TOMAR:

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

(a) the details of steps taken by Government to ensure availability of decent medical facilities in remote regions of the country;

(b) the current status of the Ayushman Bharat Scheme;

(c) whether Government is aware of the problems in the scheme being faced due to its complex software and, if so, the remedial steps taken in this regard; and

(d) whether Ayushman Bharat health protection scheme covers the lodging and boarding charges required for the attendant accompanying the patient during the treatment period of the beneficiary and, if not, the reasons therefor?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI ASHWINI KUMAR CHOUBEY): (a) 'Public Health and Hospital' being a State subject, the primary responsibility of providing medical facilities all over the country including remote regions lies with the State Governments.

However, to supplement the efforts and address the healthcare challenges, National Health Mission (NHM) supports State/UT Governments to provide accessible, affordable and quality healthcare to all those who access public health facilities. Support under NHM includes provision of a host of free services such as maternal health, child health,