

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

**RAJYA SABHA  
UNSTARRED QUESTION NO. 738  
TO BE ANSWERED ON THE 08<sup>th</sup> FEBRUARY, 2022**

**COMPENSATION TO ASHA WORKERS AND OTHER FRONTLINE WORKERS**

**738: SHRI SUBHAS CHANDRA BOSE PILLI:**

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

- (a) whether ASHA workers have been adequately compensated for their frontline work during COVID-19, if so, the details thereof, State and UT-wise;
- (b) whether Government has taken steps to ensure physical and mental well being of the frontline COVID-19 workers, in particular NRHM workers and ASHA workers, if so, the steps taken and the data, State-wise, district-wise; and
- (c) whether Government has provided monetary support and benefits to ASHA workers to cover additional healthcare costs in the form of insurance cover or covering additional medical expenses in case of illness, if so, the details thereof?

**ANSWER  
THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND  
FAMILY WELFARE  
(DR. BHARATI PRAVIN PAWAR)**

(a) to (c) ASHAs are envisaged to be community health volunteer and are only entitled to task/activity based incentives. ASHAs receive a fixed monthly incentive of Rs. 2000 per month for routine and recurring activities. Additionally, she is provided performance-based incentives for a varied set of activities under various National Health Programmes is placed at **Annexure- I**. States/UTs in their programme implementation plans have also been given flexibility to provide a range of monetary incentives to the ASHAs and the same are placed at **Annexure-II**.

However, in view of the significant contribution towards the COVID-19 pandemic related work by ASHAs, States were advised to pay an additional incentive of Rs.1000/- per

month for those ASHAs engaged in COVID-19 related work using the resources of COVID-19 Health System Preparedness and Emergency Response Package.

After the launch of the Ayushman Bharat scheme with operationalisation of Ayushman Bharat- Health and Wellness Centres (AB-HWCs), ASHAs are now additionally eligible for Team Based Incentives (TBIs) along with ANMs based on monitored performance indicators (up to Rs. 1000 per month).

States were requested time to time to ensure that incentive for routine and recurrent activities was paid in full for all the ASHAs during the COVID-19 pandemic also.

As Public Health and Hospitals is a State subject, all the administrative and personnel matters of health human resources lies with the respective State/UT Governments. However, under National Health Mission (NHM), Government of India provides financial and technical support to States/UTs to strengthen their healthcare systems including support for activities requiring mental and physical wellbeing of health human resource based on the requirements posed by them in their Programme Implementation Plans (PIPs) within their overall resource envelope. With respect to safeguarding physical wellbeing of the NRHM & ASHA workers during the pandemic, States/UTs have also been asked to ensure provision of safety tools like masks, gloves, soaps and sanitizers etc and supplying adequate PPE and ensuring her protection.

The ASHA benefit package was introduced acknowledging significant contribution and commitment of ASHAs. The package providing coverage for:

- Pradhan Mantri Jeevan Jyoti Beema Yojana (PMJJBY) with a benefit Rs. 2.00 Lakh in case of death of the insured (annual premium of Rs. 330 contributed by GOI).
- Pradhan Mantri Suraksha Beema Yojana (PMSBY) with a benefit of Rs.2.00 lakh for accidental death or permanent disability; Rs. 1.00 lakh for partial disability (annual premium of Rs. 12 contributed by GOI).
- Pradhan Mantri Shram Yogi Maan Dhan (PM-SYM) with pension benefit of Rs. 3000 pm after age of 60 years (50% contribution of premium by GOI and 50% by beneficiaries).

The Government has also approved a cash award of Rs. 20,000/- and a citation to ASHAs who leave the programme after working as ASHAs for minimum of 10 years, as acknowledgement of their contribution.

Under the Pradhan Mantri Garib Kalyan Package, Insurance Scheme has been introduced for all health workers, including ASHAs. This insurance scheme provides an insurance cover of Rs. 50.00 Lakhs in-case of loss of life on account of COVID-19 related duty.

<b>Annexure-I</b>		
<b>Details of performance-based incentives for a varied set of activities under various National Health Programmes</b>		
	<b>Activities</b>	<b>Amount in Rs/case</b>
<b>I</b>	<b>Maternal Health</b>	
	<b>JSY financial package</b>	
	For ensuring antenatal care for the woman	Rs.300/Rs.200 (Rural/Urban areas)
	For facilitating institutional delivery	Rs. 300/Rs.200 (Rural/Urban areas)
	Reporting Death of women	Rs. 200 (reporting within 24 hours)
<b>II</b>	<b>Child Health</b>	
	Home Visit-care of the New Born and Post-Partum mother etc. / Young Child / follow up	Rs. 250 /Rs. 50 per visit / Rs.150 only after MUAC is equal to or more than 125mm
	<b>Intensified Diarrhoea Control Fortnight</b>	
	Week-1-ASHA incentive for prophylactic distribution of ORS to families with under-five children	Rs. 1 per ORS packet for 100 under five children
	Week-2- ASHA incentive for facilitating growth monitoring of all children in village	Rs. 100 per ASHA for completing at least 80% of household
	MAA (Mother's Absolute Affection) Programme	Rs. 100/ASHA/ Quarterly meeting
<b>III</b>	<b>Immunization</b>	
	Full immunization for a child under one year/ up-to two years age	Rs. 100 /Rs. 75
	Mobilizing children for OPV immunization / DPT Booster	Rs. 100 per day / Rs. 50
<b>IV</b>	<b>Family Planning</b>	
	Ensuring spacing of 2 years/ 3 years after birth of 1 <sup>st</sup> child / permanent limiting method after 2 children after marriage	Rs. 500 / Rs. 500 / Rs. 1000
	Counselling, motivating and follow up of the cases for Tubectomy	Rs. 200 in 11 with high fertility rates states, Rs.300 in 146 MPV districts, Rs. 150/Rs200 in remaining states
	Counselling, motivating and follow up of the cases for Vasectomy and NSV and Female Postpartum sterilization	Rs. 300 in 11 states with high fertility rates and Rs. 400 in 146 MPV districts and Rs. 200 in remaining states
<b>Mission ParivarVikas- In selected 146 districts in six states-(57 in UP, 37 in Bihar, 14 RJS, 9 in Jharkhand, 02 in Chhattisgarh and 2 in Assam)</b>		
	Injectable Contraceptive MPA (Antara Program) and a non-hormonal weekly centchroman pill (Chhaya) - Incentive to ASHA	Rs. 100 per dose
	Mission ParivarVikas Campaigns Block level activities	Rs. 150/ ASHA/round
	NayiPahel - an FP kit for newly weds	Rs. 100/ASHA/NayiPahel kit distribution

	SaasBahuSammelan- mobilize SaasBahu for the Sammelan- maximum four rounds	Rs. 100/ per meeting
	Updating of EC survey before each MPV campaign	Rs.150/ASHA/Quarterly round
<b>V</b>	<b>Adolescent Health</b>	
	Sanitary napkins to adolescent girls	Rs. 1/ pack of 6 sanitary napkins
	Organizing monthly meeting with adolescent girls pertaining to Menstrual Hygiene	Rs. 50/meeting
	Conducting PLA meetings- 2 meetings per month	Rs. 100/ASHA/per meeting
<b>VI</b>	<b>Revised National Tuberculosis Control Programme</b>	
	For Category I/Category II of TB patients (New cases/ previously treated of Tuberculosis)	Rs. 1000 for 42 contacts / Rs. 1500 for 57 contacts
	For treatment and support to drug resistant TB patients	Rs. 5000 for completed course of treatment
	For notification if suspect referred is diagnosed to be TB patient by MO/Lab	Rs.100
<b>VII</b>	<b>National Leprosy Eradication Programme</b>	
	Treatment in pauci-bacillary cases /multi-bacillary cases of Leprosy - for 33 states (except Goa, Chandigarh & Puducherry).	Rs. 250 (for diagnosis) + Rs. 400/Rs.600 (for follow up)
<b>VIII</b>	<b>National Vector Borne Disease Control Programme</b>	
<b>A)</b>	<b>Malaria</b> –Preparing Blood Slides/complete treatment for RDT or radical treatment of positive Pf cases	Rs. 15 per slide/ Rs. 75 per positive cases
<b>B)</b>	<b>Lymphatic Filariasis</b> -Listing of cases	Rs. 200
<b>C)</b>	<b>Acute Encephalitis Syndrome/Japanese Encephalitis</b>	
	Referral of AES/JE cases to the nearest CHC/DH/Medical College	Rs. 300 per case
<b>D)</b>	<b>Kala Azar elimination</b>	
	Involvement of ASHAs during the spray rounds (IRS) / for referring a suspected case	Rs. 100/- per round / Rs. 500/per notified case
<b>E)</b>	<b>Dengue and Chikungunya</b>	
	Incentive for source reduction & IEC activities for prevention and control of Dengue and Chikungunya in 12 High endemic States.	Rs. 200/- (1 Rupee /House for maximum 200 houses PM for 05 months- during peak season).
<b>F)</b>	<b>National Iodine Deficiency Disorders Control Programme</b>	
	ASHA incentive for salt testing	Rs.25/ month (for 50 salt samples)
<b>IX</b>	<b>Incentives under (CPHC) and Universal NCDs Screening</b>	
	Maintaining data validation and collection of additional information	Rs. 5/form/family
	Filling up of CBAC forms of every individual	Rs. 10/per form/per individual
	Follow up of patients	Rs. 50/per case/Bi-Annual
	Delivery of new service packages under CPHC	Rs.1000/ASHA/PM
<b>X</b>	<b>Drinking water and sanitation</b>	
	Motivating Households to construct toilet and promote the use of toilets and for individual tap connections	Rs. 75 per household

**State-wise details of monetary incentives provided to the ASHAs**

1. Andhra Pradesh provides balance amount to match the total incentive of Rs.10,000/month;
2. Arunachal Pradesh-provides 100% top up;
3. Bihar- Rs.1000/- per ASHA per month linked with functionality of five specified 06 activities (started in FY 2019-20);
4. Chhattisgarh-75% of matching amount of the incentives over and above the incentives earned by an ASHA as a top up on an annual basis;
5. Delhi- Rs. 3000/- PM for functional ASHA (against the 12 core activities perform by ASHA);
6. Gujarat provides 50% top up;
7. Haryana- Rs. 4000/month from June-2018 and 50% top-up;
8. Himachal Pradesh- Rs. 2000/month;
9. Karnataka-Rs. 4000/month – recently introduced replacing the top up incentive;
10. Kerala-Rs.5000/month in FY 2020-21;
11. Odisha-Rs. 1000 /month from state fund launched on April 1st, 2018;
12. Rajasthan- Rs. 2700/month through ICDS;
13. Sikkim -Rs. 6000/month;
14. Telangana provides balance amount to match the total incentive of Rs. 6000/- pm;
15. Tripura provides 100% top up against 08 specified activities and 33% top-up based on other activities;
16. Uttarakhand- Rs.5000/year and Rs. 1000/month;
17. Uttar Pradesh- Rs.750/- per ASHA per month linked with functionality of five specified activities (started from March 2019); and
18. West Bengal-Rs. 3000/month.