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

LOK SABHA UNSTARRED QUESTION NO. 3027 TO BE ANSWERED ON 13TH DECEMBER, 2024

AB-PMJAY IN JHARKHAND AND HARYANA

3027. SHRI CHANDRA PRAKASH CHOUDHARY: SHRI SATPAL BRAHAMCHARI:

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

(a) the total amount of funds allocated, released and utilized under Ayushman Bharat-Pradhan Mantri Jan Arogya Yojana (AB-PMJAY) in Jharkhand particularly in Giridih Lok Sabha Constituency and Haryana particularly in Sonipat Lok Sabha Constituency during the last three years;

(b) whether the Government proposes to include cosmetic surgery, expenses of OPD, fertility treatment and also organ transplant under the said scheme; and

(c) 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) to (c): The funding of Ayushman Bharat Pradhan Mantri Jan Arogya Yojana (AB-PMJAY) is entirely demand driven. Funds are released to the States/UTs on the basis of the actual demand received from them. There is no State/UT–wise allocation of funds. Further, as the funds are released to the States/UTs, data regarding fund allocation as per Lok Sabha constituency is not maintained. As per the defined process, States/UTs are required to furnish the Utilization Certificate of previously received funds prior to every new fund release.

The details of central share of funds released to the State of Haryana and Jharkhand under the scheme during the last three years are as under:

			(in crore of Rupees)
State	FY 2021-22	FY 2022-23	FY 2023-24
Haryana	89.95	143.50	95.17
Jharkhand	7.98	0.00	83.55

The details of central share of funds utilized by the State of Haryana and Jharkhand under the scheme during the last three years is as under:

			(in crore of Rupees)
State	FY 2021-22	FY 2022-23	FY 2023-24
Haryana	89.95	143.50	95.17
Jharkhand	7.98	0.00	83.55

As per the exclusion policy of AB-PMJAY, the conditions that do not require hospitalization and can be treated under out-patient care, are not covered under the scheme. These exclusion criteria include cosmetic surgeries, OPD expenses, infertility related procedures. With regards to organ transplant procedures, packages related to the treatment of renal transplant, bone marrow transplant, corneal transplant and procedure cost of cochlear transplant are already covered under the scheme.
