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

RAJYA SABHA UNSTARRED QUESTION NO. 3761 TO BE ANSWERED ON 05TH APRIL, 2022

CORRUPTION IN AYUSHMAN BHARAT SCHEME

3761. SHRI JAWHAR SIRCAR:

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

- (a) how many cases of corruption have been unearthed so far in the Ayushman Bharat Scheme;
- (b) how many investigations have been carried out and in how many hospitals;
- (c) the total penalty levied on them and how many hospitals have been delisted from the scheme; and
- (d) the civil and criminal actions that have been taken on the corruption cases?

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

(a) to (d): Ayushman Bharat –Pradhan Mantri Jan Arogya Yojana (AB-PMJAY) is governed on a zero-tolerance approach to any kind of fraud viz. suspect/non-genuine medical treatment claims, impersonation and up-coding of treatment packages/procedures etc. National Health Authority -the implementing agency of AB-PMJAY has issued a comprehensive set of antifraud guidelines. Anti-fraud advisories are issued to States/UTs. National Anti-Fraud Unit (NAFU) is created at NHA for overall monitoring and implementation of anti-fraud framework supported by State Anti-Fraud Units (SAFUs) at State level. All claims require mandatory supporting documents along-with on-bed patient photo before approval and payment. The feature of Aadhar-based biometric verification of beneficiary at the time of admission and discharge is launched at all private hospitals. Use of artificial intelligence and machine learning is made for a comprehensive fraud analytics solution to detect fraud proactively, develop algorithms that can be used on large volume of data to identify suspect transactions and entities and risk scoring of hospitals and claims.

Suitable penal action in terms of anti-fraud guidelines was taken against hospitals in respect of non-genuine 18,606 hospital transactions. Penalty amounting to Rs. 29.72 crore was levied on erring hospitals. Further, 144 hospitals are de-empanelled from the scheme based on confirmed fraudulent behaviour.
