

ASHA Incentive for Routine and Recurrent Activities

| SN | Activities | Amount in Rs. /Case |
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| 1 | Mobilizing and attending Village Health and Nutrition Days or Urban Health and Nutrition Days | Rs.200/session |
| 2 | Conveying and guiding monthly meetings of VHSNC/MAS | Rs. 150 |
| 3 | Attending monthly meetings at Block PHC/UPHC | Rs. 150 |
| 4 | a. Line listing of households done at beginning of the year and updated every six months | Rs. 300 |
| | b. Maintaining village health register and supporting universal registration of births and deaths to be updated on the monthly basis | Rs. 300 |
| | c. Preparation of due list of children to be immunized on monthly basis | Rs. 300 |
| | d. Preparation of list of ANC beneficiaries to be updated on monthly basis | Rs. 300 |
| | e. Preparation of list of eligible couple on monthly basis | Rs. 300 |
| ASHA Incentives under National Health Program | | |
| I | Maternal Health | |
| | JSY financial package | |
| 1 | a. For ensuring antenatal care for the woman | Rs.300 for Rural areas and Rs. 200 for Urban areas |
| | b. For facilitating institutional delivery | Rs. 300 for Rural areas and Rs. 200 for Urban areas |
| 2 | Reporting Death of women (15-49 years age group) by ASHA to PHC Medical Officer [1] | Rs. 200 for reporting within 24 hours of occurrence of death by phone |
| 3 | Mobilization under E-PMSMA | Rs 300 per ASHA to mobilize high risk pregnant woman to facility for follow up @Rs 100/- |

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| | | per visit for maximum up to 3 visits (Introduced in 2022) |
| 4 | Health Outcome under E-PMSMA | Rs 500 after ensuring survival of baby and mother duo after 42 days of Delivery. (Introduced in 2022) |
| 5 | ASHA incentive for identification of HRP during Post Natal Period | Rs 250 (Introduced in 2023) |
| II | Child Health | |
| 1 | <u>Home Visit for the newborn and post-Partum mother[2] -Six Visits in Case of Institutional Delivery (Days 3, 7, 14, 21, 28 & 42) -Seven visits in case of Home Deliveries (Days 1, 3, 7, 14, 21, 28 & 42)</u> | Rs. 250 |
| 2 | Home Visits of Young Child for Strengthening of Health & Nutrition of young child through Home Visits-(recommended schedule- 3, 6, 9, 12 and 15 months) -(Rs.50X5visits) | Rs. 50/visit with total Rs. 250/per child for making 05 visits |
| 3 | Revision of ASHA incentive for referral of SAM children to NRC and follow up of SAM children after discharge from facility/NRC or Severe Acute Malnutrition (SAM) management centre | Rs. 100/- per referring SAM child with medical complication to NRCs Rs. 150/- per follow up visits of SAM children discharged from NRC (Rs 50/visit for 1st and 4th visit and Rs 25 per visit for 2nd and 3rd visit) Rs. 50/- per SAM child in case child is declared free of SAM status after completion of all follow ups |

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| 4 | Ensuring quarterly follow up of low-birth-weight babies and newborns discharged after treatment from Specialized newborn Care Units[3] | Rs. 50/ Quarter-from the 3 rd month until 1 year of age |
| 5 | Child Death Review for reporting child death of children under 5 years of age | Rs. 50 |
| 6 | For mobilizing and ensuring every eligible child (1-19 years out-of-school and non-enrolled) is administered Albendazole. | Rs. 100/ ASHA/Bi-Annual |
| 7 | 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 |
| 8 | Week-2- ASHA incentive for facilitating growth monitoring of all children in village; screening and referral of undernourished children to Health centre; IYCF counselling to under-five children household | Rs. 100 per ASHA for completing at least 80% of household |
| 9 | MAA (Mother's Absolute Affection) Programme Promotion of Breastfeeding- Quarterly mother meeting | Rs. 100/ASHA/ Quarterly meeting |
| III | Immunization | |
| 1 | Full immunization for a child under one year | Rs. 100 |
| 2 | Complete immunization per child up-to two years age (all vaccination received between 1 st & 2 nd year of age after completing full immunization after one year | Rs. 75 |
| 3 | Mobilizing children for OPV immunization under Pulse polio Programme | Rs. 100/day |
| 4 | DPT Booster at 5-6years of age | Rs.50 |
| IV | Family Planning | |
| 1 | Ensuring spacing of 2 years after marriage [6] | Rs. 500 |
| 2 | Ensuring spacing of 3 years after birth of 1 st child | Rs. 500 |
| 3 | Ensuring a couple to opt for permanent limiting method after 2 children | Rs. 1000 |

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| 4 | Counselling, motivating and follow up of the cases for Tubectomy | Rs. 200 in 11 states with high fertility rates (UP, Bihar, MP, Rajasthan, Chhattisgarh, Jharkhand, Odisha, Uttarakhand, Assam, Haryana, and Gujarat) Rs.300 in 146 MPV districts Rs. 150 in remaining states |
| 5 | Counselling, motivating and follow up of the cases for Vasectomy/ NSV | Rs. 300 in 11 states with high fertility rates (UP, Bihar, MP, Rajasthan, Chhattisgarh, Jharkhand, Odisha, Uttarakhand, Assam, Haryana, and Gujarat) and 400 in 146 MPV districts and Rs. 200 in remaining states |
| 6 | Female Postpartum sterilization | Rs. 300 in 11 states with high fertility rates (UP, Bihar, MP, Rajasthan, Chhattisgarh, Jharkhand, Odisha, Uttarakhand, Assam, Haryana, and Gujarat) and 400 in 146 MPV districts |
| 7 | Social marketing of contraceptives- as home delivery through ASHAs | Rs. 1 for a pack of 03 condoms, Rs. 1 for a cycle of OCP, Rs. 2 for a pack of ECPs |
| 8 | Escorting or facilitating beneficiary to the health facility for the PPIUCD insertion | Rs. 150/per case |
| 9 | Escorting or facilitating beneficiary to the health facility for the PAIUCD insertion | Rs. 150/case |
| Mission Parivar Vikas- 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) | | |

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| 10 | Injectable Contraceptive MPA (Antara Program) and a non-hormonal weekly centchroman pill (Chhaya) - Incentive to ASHA | Rs. 100 per dose |
| 11 | Mission Parivar Vikas Campaigns Block level activities- ASHA to be oriented on eligible couple survey for estimation of beneficiaries and will be expected to conduct eligible couple survey- maximum four rounds | Rs. 150/ ASHA/round |
| 12 | Nayi Pahel- an FP kit for newlyweds- a FP kit would be given to the newlywed couple by ASHA (In initial phase ASHA may be given 2 kits/ ASHA) | Rs. 100/ASHA/Nayi Pahel kit distribution |
| 13 | Saas Bahu Sammelan- mobilize Saas Bahu for the Sammelan- maximum four rounds | Rs. 100/ per meeting |
| 14 | Updating of EC survey before each MPV campaign- Note-updating of EC survey register incentive is already part of routine and recurring incentive | Rs.150/ASHA/Quarterly round |
| V | Adolescent Health | |
| 1 | Distributing sanitary napkins to adolescent girls | Rs. 1/ pack of 6 sanitary napkins |
| 2 | Organizing monthly meetings with adolescent girls pertaining to Menstrual Hygiene | Rs. 50/meeting |
| 3 | Incentive for support to Peer Educator (for facilitating selection process of peer educators) | Rs. 100/ Per PE |
| 4 | Incentive for mobilizing adolescents for Adolescent Health Day | Rs. 200/ Per AHD |
| VI | Participatory Learning and Action- (In selected 10 states that have low RMNCH+A indicators – Assam, Bihar, Chhattisgarh, Jharkhand, MP, Meghalaya, Odisha, Rajasthan, Uttarakhand and UP) | |
| 1 | Conducting PLA meetings- 2 meetings per month- Note-Incentive is also applicable for AFs @Rs.100/- per meeting for 10 meetings in a month | Rs. 100/ASHA/per meeting for 02 meetings in a month |
| VII | National Tuberculosis Elimination Programme (NTEP) | |
| | Honorarium and counselling charges for being a DOTS provider | |
| 1 | For Category I of TB patients (New cases of Tuberculosis) | Rs. 1000 for 42 contacts over six or seven months of treatment |

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| 2 | For Category II of TB patients (previously treated TB cases) | Rs. 1500 for 57 contacts over eight to nine months of treatment including 24-36 injections in intensive phase |
| 3 | For treatment and support to drug resistant TB patients | Rs. 5000 for completed course of treatment (Rs. 2000 should be given at the end on intensive phase and Rs. 3000 at the end of consolidation phase) |
| 4 | For notification if suspect referred is diagnosed to be TB patient by MO/Lab | Rs.100 |
| 5 | Incentive to ASHA/Community Volunteers for ensuring seeding of bank account details of TB patients in Ni-kshay portal within 15 days of treatment initiation for enabling DBT Payments under NTEP | Rs. 50/per notified TB patient |
| 6 | Incentive to ASHA / Community Health Volunteer for supporting treatment adherence and completion of TB Preventive Treatment among eligible individuals | Rs. 250/- per individual for successful completion of TB Preventive Treatment |
| 7 | Mobilization of beneficiary through ASHA or other mobilizers for additional adult BCG beneficiaries | Rs 150 ((Introduced in 2023)- per session |
| 8 | ASHA incentive for due list preparation (For monthly updating of due list of beneficiaries for adult BCG Vaccination) | Rs 100*3 months (if mop-up is required) ((Introduced in 2023) |
| 9 | ASHA incentive for house-to-house survey, before the campaign. | Rs 100 once during the campaign (Introduced in 2023) |
| VIII | National Leprosy Eradication Programme | |
| 1 | Referral and ensuring compliance for complete treatment in pauci-bacillary cases of Leprosy - for 33 states (except Goa, Chandigarh & Puducherry). | Rs. 250 (for facilitating diagnosis of leprosy case) + Rs. 600 (for follow up on completion of treatment) |
| 2 | Referral and ensuring compliance for complete treatment in multi-bacillary cases of Leprosy- for 33 states (except Goa, Chandigarh & Puducherry). | Rs. 250 (for facilitating diagnosis of leprosy case) + Rs. 600 (for |

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| | | follow up on completion of treatment) |
| IX | National Vector Borne Disease Control Programme | |
| A) | National Malaria Control Program | |
| 1 | Preparing blood slides or testing through RDT | Rs. 15/slide or test |
| 2 | Providing complete treatment for RDT positive Pf cases | Rs. 200/- per confirmed case of Malaria for ensuring complete treatment |
| 3 | Providing complete radical treatment to positive Pf and Pv case detected by blood slide, as per drug regime | |
| 4 | For referring a case and ensuring complete treatment | Rs. 300 |
| B) | Lymphatic Filariasis | |
| 1 | For one timeline listing of lymphoedema and hydrocele cases in all areas of non-endemic and endemic districts | Rs. 200 |
| 2 | For annual Mass Drug Administration for cases of Lymphatic Filariasis | Rs. 200/day for maximum three days to cover 50 houses and 250 persons |
| C) | Acute Encephalitis Syndrome/Japanese Encephalitis | |
| 1 | Referral of AES/JE cases to the nearest CHC/DH/Medical College | Rs. 300 per case |
| D) | Kala Azar elimination | |
| 1 | Involvement of ASHAs during the spray rounds (IRS) for sensitizing the community to accept indoor spraying | Rs. 100/- per round during Indoor Residual Spray i.e. Rs 200 in total for two rounds |
| 2 | ASHA Incentive for referring a suspected case and ensuring complete treatment. | Rs. 500/per notified case |
| 3 | Incentive to ASHAs for referring Post Kala-Azar Dermal Leishmaniasis (PKDL) case | Rs. 500/- per case (Rs. 200/- at the time of diagnosis and Rs. 300/- after treatment completion) in all 4 Kala-azar endemic states |
| E) | Dengue and Chikungunya | |

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| 1 | Incentive for source reduction & IEC activities for prevention and control of Dengue and Chikungunya in 12 High endemic States (Andhra Pradesh, Assam, Gujarat, Karnataka, Kerala, Maharashtra, Odisha, Punjab, Rajasthan, Tamil Nadu, Telangana and West Bengal) | Rs. 200/- (1 Rupee /House for maximum 200 houses PM for 05 months- during peak transmission season). The incentive should not be exceed Rs. 1000/ASHA/Year |
| F) | National Iodine Deficiency Disorders Control Programme | |
| 1 | ASHA incentive for salt testing | Rs.25 a month for testing 50 salt samples |
| X | Anaemia Mukd Bharat | |
| 1 | ASHA incentive for mobilizing children 6-59 months, WRA and post-partum lactam women | Rs. 15/month/ASHA for covering at least 70% of the beneficiaries for IFA supplementation to two age groups: children 6-59 months & WRA. |
| XI | Incentives under Comprehensive Primary Health Care (CPHC) and Universal NCDs Screening | |
| 1 | Maintaining data validation and collection of additional information- per completed form/family for NHPM –under Ayushman Bharat | Rs. 5/form/family |
| 2 | Filling up of CBAC forms of every individual –onetime activity for enumeration of all individuals, filling CBAC for all individuals 30 or > 30 years of age | Rs. 10/per form/per individual as one time incentive |
| 3 | Follow up of patients diagnosed with Hypertension/Diabetes and three common cancers for ignition of treatment and ensuring compliance | Rs. 50/per case/Bi-Annual |
| 4 | Delivery of new service packages under CPHC component | Rs.1000/ASHA/PM (linked with activities) |
| XII | Drinking water and sanitation | |
| 1 | Motivating Households to construct toilet and promote the use of toilets. | Rs. 75 per household |
| 2 | Motivating Households to take individual tap connections | Rs. 75 per household |
| XIII | ASHA Certification | |
| 1 | | Rs. 5000/for each certification |

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| | Incentive award in cash for ASHAs and ASHA Facilitators who have certified in two independent certificates: 1- RMNCHA+N 2- Expanded Service Package from NCDs to Palliative Care | |
| XIV | Facilitating creation and seeding of ABHA ID in various IT Portals | |
| 1 | Incentive for ASHAs for each ABHA account created and seeded in various IT portals of MoHFW | Rs. 10/-for each ABHA account created and seeded in various IT portals of MoHFW |

State-Specific Incentives for **ASHA from State Funds**

| S. No | State/UT | State specific fixed/top up incentive to ASHAs from State Fund |
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| 1 | A & NI | Rs. 500 (As per the policy of Andaman & Nicobar Administration, an incentive of Rs. 500/- per month is being provided to every ASHA for the betterment of villagers as per the guidelines) |
| 2 | Andhra pradesh | Provides balance amount to match the total incentive of Rs.10, 000/PM/ASHA |
| 3 | Arunachal Pradesh | Rs. 2000 Per Month (100% top-up, frequency of disbursement quarterly) |
| 4 | Bihar | Additional performance based incentives of Rs. 1000/- (One Thousand) per month from the State Fund for Immunization ,Child Health, Maternal Health and Family planning, attending meetings etc. ASHA Facilitators also receives Rs. 1000/- per month from state fund if 50 % of ASHAs in their Coverage Areas. |
| 5 | Chhattisgarh | 75% of matching amount of incentives from state fund over the incentives earned by ASHA. |
| 6 | Delhi | Core incentives is Rs. 3000/- per month for functional ASHA plus certain state specific activity incentives. |
| 7 | Gujarat | 50% TOP UP/ per month over total GOI incentive and Rs. 2500/month fix Incentive |
| 8 | Haryana | Rs.4000/PM/ASHA and 50% top-up (Excluding Routine recurring incentive) and Rs. 450/- additional linked with performance of 05 Major RCH activities |
| 9 | Himachal Pradesh | Rs. 4700/- (State incentive has been increased by Rs. 500/-, therefore, total incentive payable w.e.f. April, 2023 is Rs. 5200/-) |
| 10 | Jharkhand | Top up of Rs. 1000/- on performance based incentive of 14 key indicator |
| 11 | Karnataka | The State Govt is providing Rs.5000 per month as Monthly fixed honararium to ASHAs |
| 12 | Kerala | Rs. 6000 per month as ASHA Honorarium from state government fund |
| 13 | Maharashtra | Rs. 3500/month/ASHA |

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| 14 | Manipur | Rs. 1000/- per ASHA/month. |
| 15 | Meghalaya | State Fixed Incentive – Rs. 2000/month and State Covid Incentive – Rs. 1000/- pm |
| 16 | Madhya Pradesh | 100% against 07 specified activities (JSY, HBNC, LBW & SNCU Follow-ups, Iron Sucrose follow-ups of anaemic PW, Early Registration of PW, Full Immunization and Complete Immunization) |
| 17 | Odisha | 1000/- per month as conditional assured incentive |
| 18 | Puducherry | Fixed amount of Rs.3000/ASHA |
| 19 | Punjab | 2500 Per Month Per ASHA/ASHA Facilitator |
| 20 | Rajasthan | Rs. 1650/ASHA/Month from State Govt Fund |
| 21 | Sikkim | Monthly fixed honorarium of Rs 6000/- disburse from State Fund, recently Government of Sikkim announce hike in fixed honorarium from Rs 6000/- to Rs 10000/- |
| 22 | Tamil Nadu | NCD incentive – Rs.500 |
| 23 | Telangana | Rs. 6750/month |
| 24 | Tripura | Top up @ 100 % on 8 specific work and 33.33% on NHM work from State exchequer and @ Rs.1000/ fixed for each ASHA and AF. |
| 25 | Uttar Pradesh | Rs. 1500 per month (State Budget Incentive linked with Incentive for Routine Activity) |
| 26 | Uttarakhand | Rs. 3000/month state incentive |
| 27 | West Bengal | Monthly Fixed Honorarium of Rs. 4500 for all functional rural ASHAs |