



SUPREME AUDIT INSTITUTION OF INDIA
लोकहितार्थं सत्यनिष्ठा
Dedicated to Truth in Public Interest

**Report of the
Comptroller and Auditor General of India
on
Ayushman Bharat-Pradhan Mantri Jan Arogya
Yojana and Pradhan Mantri Awaas Yojana-Gramin**



**Government of Bihar
Report No. 4 of the year 2025
(Performance Audit-Civil)**

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Comptroller and Auditor General of India
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Yojana and Pradhan Mantri Awaas Yojana-Gramin**

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TABLE OF CONTENTS

DESCRIPTION	Reference to	
	Paragraph (s)	Page No.
Preface		v
Executive Summary		vii
CHAPTER- I		
Ayushman Bharat-Pradhan Mantri Jan Arogya Yojana (AB-PMJAY)		
Introduction	1.1	1
Organisational set-up	1.2	2
Audit Objectives	1.3	3
Audit Criteria	1.4	4
Audit scope, methodology and limitations	1.5	4
Financial management	1.6	6
Beneficiary identification and verification	1.7	10
Hospital empanelment and management	1.8	22
Claims Management	1.9	30
Monitoring and Evaluation	1.10	42
Beneficiary Survey	1.11	50
CHAPTER- II		
Pradhan Mantri Awaas Yojana-Gramin (PMAY-G)		
Introduction	2.1	51
Organisational set-up	2.2	52
Audit Objectives	2.3	53
Audit Criteria	2.4	53
Audit scope and methodology	2.5	54
Audit sampling	2.6	54
Previous audits	2.7	55
Limitations to this Performance Audit	2.8	55
Financial Management	2.9	55
Identification and selection of beneficiaries	2.10	65
Implementation of the Scheme	2.11	75
Convergence with other Government schemes	2.12	85
Monitoring and Evaluation	2.13	89

APPENDICES

Appendix No.	DESCRIPTION	Reference to	
		Paragraph (s)	Page No.
CHAPTER-I : Ayushman Bharat-Pradhan Mantri Jan Arogya Yojana (AB-PMJAY)			
1.1	Details of sampled 10 Districts and 63 Hospitals	1.5	99
1.2	Details of sampled 40 <i>Gram Panchayats</i> and 10 Urban Local Bodies (ULBs)	1.5	101
1.3	District-wise families/beneficiaries verified in Bihar up to 16 October 2023	1.7	102
1.4	Details of illustrative IEC activities in sampled 10 districts	1.7.3 (iii)	103
1.5	Irregular empanelment of hospitals under PMJAY	1.8.1	104
1.6	Status of Help Desk/PMAM Kiosk and deployment of PMAMs in sampled hospitals of sampled districts	1.8.4	106
1.7	Details of hospitals de-empanelled during April 2021 to March 2024 by the SHA	1.8.6	109
1.8	Details of claim payment made on non-existent PMJAY Cards under sampled hospital in sampled districts as on March 2024	1.9.8	111
1.9	Status of Utilising Claim amounts for the period 2018-24 (Payment of Incentive)	1.9.9 (i)	112
1.10	Status of Utilising Claim amounts for the period 2018-24 (Infrastructure development)	1.9.9 (ii)	114
1.11	Status of Utilising Claim amounts for the period 2018-24 (Purchase of drugs and consumables)	1.9.9 (iii)	116
1.12	Men-in-position in <i>Bihar Swasthya Suraksha Samiti</i> , Patna as on March 2024	1.10.1	118
1.13	Status of Public EHCP Claim Fund Utilisation for 2018-19 to 2024-25 (up to August 2024)	1.10.6	119

Appendix No.	DESCRIPTION	Reference to	
		Paragraph (s)	Page No.
CHAPTER-II: Pradhan Mantri Awaas Yojana-Gramin (PMAY-G)			
2.1	Details of Audit Sampling	2.6	120
2.2	Payments rejected by banks	2.9.8	121
2.3	Sanction of houses to beneficiaries already owning <i>pucca</i> houses	2.10.10	122
2.4	Non-adherence to priority numbers in sanction of houses	2.10.11	123
2.5	Payment of full assistance despite non-commencement of construction of houses	2.11.2	124
2.6	Provision of short person days in convergence with MGNREGS	2.12.1	125
2.7	Shortfall in providing basic amenities to Scheme beneficiaries	2.12.2	126
2.8	Beneficiary name mismatch in MGNREGS Job Cards, as per <i>AwaasSoft</i> and <i>NREGASoft</i>	2.12.3 (i)	127
2.9	Non-allocation of additional work under MGNREGS due to incorrect Job Cards in <i>NREGASoft</i>	2.12.3 (ii)	128
2.10	Irregular payment of wages under MGNREGS	2.12.4 (i)	130
2.11	Payment of MGNREGS wages to remanded beneficiaries	2.12.4 (ii)	131
2.12	Discrepancies in the geo-tagging of photographs	2.13.2	132
2.13	Details of non-maintenance of Scheme related records	2.13.7	134

Preface

This Performance Audit Report has been prepared for submission to the Governor of Bihar under Article 151 of the Constitution of India.

This Audit Report comprises of two Performance Audits: (i) Performance Audit on Ayushman Bharat-Pradhan Mantri Jan Arogya Yojana covering the period September 2018 to March 2024, and (ii) Performance Audit on Pradhan Mantri Awaas Yojana-Gramin covering the period 2017-24.

This Performance Audit Report contains significant results of the Performance Audit of the Departments of Health and Rural Development of the Government of Bihar.

The instances mentioned in this Report are those which came to notice in the course of test-audit, as well as those which came to notice in earlier years but could not be reported in the previous Audit Reports. Instances relating to the period subsequent to 2023-24 have also been included, wherever pertinent. The audit observations contained in this Report are based on a limited test-check.

The audit has been conducted in conformity with the Auditing Standards issued by the Comptroller and Auditor General of India.

A blue envelope icon with a white flap, centered on a light green background. The text "Executive Summary" is written in a bold, black, serif font on the white flap.

Executive Summary

Executive Summary

This Performance Audit Report of the Comptroller and Auditor General of India includes findings on two Performance Audits namely (i) '*Performance Audit on Ayushman Bharat-Pradhan Mantri Jan Arogya Yojana (AB-PMJAY)*', and (ii) '*Performance Audit on Pradhan Mantri Awaas Yojana-Gramin (PMAY-G)*'. A summary of the important audit findings is given below.

(i) Performance Audit on “Ayushman Bharat-Pradhan Mantri Jan Arogya Yojana (AB-PMJAY)”

About the Scheme

The *Ayushman Bharat- Pradhan Mantri Jan Arogya Yojana* (AB-PMJAY) aimed at providing health cover of ₹ five lakh per family per year to poor and vulnerable households for secondary and tertiary care hospitalisation. The Scheme was launched in September 2018, to achieve Universal Health Coverage.

The Performance Audit (PA) was conducted to assess the delivery of intended health care benefits of the Scheme to beneficiaries. As part of this, scheme implementation, financial aspect, beneficiary registration, process of empanelment of hospitals, reimbursement of claims and monitoring *etc.*, were examined. The PA covered the period 2018-19 (from September 2018) to 2023-24, through the test-check of records of the *Bihar Swasthya Suraksha Samiti* (the designated nodal agency), sampled 10 Districts and 63 sampled hospitals (23 Private and 40 Public Hospitals).

Key audit findings in each of the focus area of examination, are presented as under:

Financial management

Significant closing balances, ranging between ₹ 53.58 crore and ₹ 159.53 crore, were noted during financial years (FYs) 2018-19 to 2023-24. There was significantly less expenditure on Information, Education and Communication (IEC) activities and IT infrastructure, which affected awareness activities amongst beneficiaries and led to low level of verification of targeted beneficiaries.

Beneficiary identification and verification

As per the revised target (January 2022), in Bihar, 1.21 crore poor and vulnerable households including 6.18 crore beneficiaries were to be covered under the Scheme. However, only 2.56 crore beneficiaries (41 *per cent*) were verified in the State (March 2024). This was mainly attributable to non-execution of a contract by the State Health Agency (SHA) with the Implementation Support Agency (ISA), to cover all targeted beneficiaries of PMJAY, inadequate IEC activities and poor capacity building. SHA constituted IEC Cell in April 2022, after more than three and half years of the initiation of the Scheme. The IEC Officer was not appointed to work on the State level IEC strategy and thus, IEC activities were not carried out in a planned manner. Further, against the required confidence/match score of 70,

verification of a total of 218.28 lakh beneficiaries was approved, even though the confidence/match score was zero, one, or without fetching any match score (used for verifying the demographics of the beneficiaries), implying that beneficiaries had been verified/registered without sufficient identity documents.

Hospital empanelment and management

There were delays in empanelment of Private hospitals, ranging from one to more than 200 days. Out of 1,005 hospitals empanelled under the Scheme in the State, 226 hospitals (22 per cent) were shown as inactive, as they did not start pre-authorisations for treatment of the Scheme beneficiaries, during the last three months. Of these 226, 17 hospitals had not initiated any pre-authorisations since their empanelment. *Pradhan Mantri Aarogya Mitras* (PMAM) kiosks were not working 24x7 in 54 sampled Public and Private hospitals. In six sampled Public hospitals, no PMAM was deployed and training was not provided to PMAMs deployed in 12 sampled Public and Private hospitals.

Claims management

Out of 14,015 rejected pre-authorisations, 8,371 cases (60 per cent), amounting to ₹ 12.20 crore, were rejected by Pre-authorisation Panel Doctors (PPD) due to reasons such as delay in initiation of pre-authorisation, wrong selection of package and non-compliance with queries on the part of PMAM/ Medical Coordinator (MEDCO), resulting in denial of treatment benefits to beneficiaries under the Scheme. Further, there were delays in the approval of pre-authorisations, by PPD, ranging from one to 817 days. Besides, payments could not be made to the hospitals in 34,193 cases, due to rejection of claims by Claim Panel Doctors (CPD) on account of delays in the initiation of claims, wrong package selection, mandatory documents not being uploaded and non-submission of replies of queries, by MEDCOs/PMAMs of the hospitals. SHA admitted time barred 19,917 claims received from claimant empanelled hospitals and made inadmissible payments amounting to ₹ 33.44 crore, in these claims.

The SHA took one day to 1,821 days in processing of claims for ‘same state’ cases (*viz.*, beneficiary got treatment under the Scheme in his/her home state) cases, while for portability cases (*viz.*, beneficiary got treatment under the Scheme outside his/her home state) it took one day to 1,662 days in processing of claims, against the stipulated time of 15 days and 30 days, respectively. Further, 1.73 lakh, out of 8.10 lakh claims, were processed without mandatory *Aadhaar* based biometric authentication. SHA made claim payments in 2,186 cases amounting to ₹ 2.31 crore on disabled *Ayushman* cards. Besides, 139 *Ayushman* cards appearing in the Transaction Management System, against which payments of ₹25.25 lakh were made, did not exist either in the Beneficiary Identification System database provided by BSSS or in the data of beneficiaries available on the ‘Beneficiary portal’ of the Scheme.

Monitoring and evaluation

As of March 2024, 100 posts (55 per cent of sanctioned strength) under different categories, were vacant in BSSS. Weak monitoring was evident from shortfall in

meetings of the Governing Body/Executive Committee/State Grievance Redressal Committee, lack of medical audit of mortality cases and lack of necessary actions against triggered suspicious cases.

Audit Recommendations:

In order to achieve the intended objectives of the Scheme, the State Government may:

- 1) *utilise the funds allocated in Escrow/Administrative expenses, as per the stipulations laid down under the Guidelines, especially expenditures on IEC activities;*
- 2) *adhere to the prescribed threshold limit during verification of beneficiaries and consider taking up additional IEC activities at the grass root levels of the Gram Panchayat, to promote awareness about entitlements, benefits cover of the Scheme in order to enhance its impact;*
- 3) *ensure processing of applications for empanelment of hospitals within the prescribed timeline and reasons for delay may be properly analysed to take corrective measures;*
- 4) *ensure that dedicated and trained PMAMs are deployed at empanelled hospitals on a 24x7 basis, to assist beneficiaries in completing the required formalities;*
- 5) *expedite claim payments, as per the stipulated turnaround time;*
- 6) *contemplate measures to further strengthen the IT system, to curb cases of claim payments without biometric authentication and payment of claims on disabled cards; and*
- 7) *improve the monitoring mechanism by strengthening the State Anti Fraud Unit, to prevent and detect frauds.*

(ii) Performance Audit on “Pradhan Mantri Awaas Yojana–Gramin (PMAY-G)”

About the Scheme

The Pradhan Mantri Awaas Yojana – Gramin (PMAY-G) was launched on 1 April 2016, to provide *pucca* houses, with basic amenities, to all houseless rural households, and households in *kutcha* and dilapidated houses in rural areas, by the year 2022. Government of India further extended (September 2022) the target of housing for all to be achieved by March 2024. Under this Scheme, a unit financial assistance of ₹ 1.20 lakh/₹1.30 lakh, was to be paid to the beneficiaries, in instalments linked to the progress of construction of the houses.

For the State of Bihar, 30.67 lakh houses were sanctioned during the financial years (FYs) 2017-18 to 2023-24, against which construction of 28.94 lakh houses had been completed.

The Performance Audit was conducted to assess, *inter alia*, the adequacy of the mechanism for coverage of all the eligible beneficiaries in the State and whether the

implementation of the scheme had been effective in ensuring timely achievement of the physical targets set. It also aimed at assessing whether the allocation and release of funds had been in compliance with the Scheme guidelines and whether the mechanism for monitoring and evaluation of the Scheme had been adequate and effective.

The Performance Audit, covering the period from FYs 2017-18 to 2023-24 was conducted through the test-check of records of the office of the Secretary, Rural Development Department (RDD); District Rural Development Agencies (DRDAs) at districts; and the Block Development Officers (BDOs) and Programme Officers, MGNREGA, at the block levels. Joint Physical Verification (JPV) and Survey of 1,454 Scheme beneficiaries was also conducted during audit.

Key audit findings in each of the focus area of examination are presented as under:

Financial Management

Expenditure against the available funds ranged between 25 and 82 *per cent*, during the FYs 2017-18 to 2023-24. In FYs 2017-18 to 2023-24, there was short release of funds in comparison to Budgetary provision ranging from ₹ 63.97 crore to ₹ 1,734.13 crore. Amounts released as Central share, by the GoI during FYs 2017-18 to 2023-24, had subsequently been transferred, by the State Government, to the State Nodal Account (SNA), with delays, ranging from 14 to 154 days, resulting in creation of interest liability for the State Government, amounting to ₹ 71.08 crore.

State share of ₹ 7,182 crore had been released by the State Government, with delays ranging between six and 180 days, during FYs 2017-18 to 2023-24.

Out of the total 1,454 test-checked cases, the first instalments had been released with delays in 1,248 (86 *per cent*) cases, during FYs 2017-18 to 2023-24. Audit noticed that in 74 and 27 cases the delays were between more than three to six months, and more than six months to one year, respectively. In four sampled districts, *Indira Awaas Yojana* (IAY) funds, amounting to ₹ 6.05 crore, were diverted towards the administrative heads of DRDAs, during January 2017 to March 2024. Further, there was blockage of IAY funds amounting to ₹ 7.72 crore for more than eight years. The Fund Transfer Orders (FTOs) of 195 beneficiaries, amounting to ₹ 0.80 crore, were pending from more than two years to more than six years with PFMS, as of January 2025. In 83 cases, an overall amount of ₹ 53 lakh was transferred to bank accounts other than those of the concerned beneficiary due to incorrect mapping of bank accounts, in five out of the 10 sampled districts.

Identification and selection of beneficiaries

The Annual Action Plans (AAPs) for the FYs 2017-18 to 2021-22 had not been prepared by five out of 10 selected districts, whereas at the State level, the Annual Action Plans for two years *viz.*, from FYs 2017-18 to 2018-19, had not been prepared. Annual Select Lists, based on the targets assigned, had also not been prepared in 16 blocks out of 28 selected blocks.

MoRD, GoI instructed (March 2018) the State to reserve five *per cent* sanctions, under the Scheme, for the Persons with Disabilities. The Department, however, had not taken sufficient steps to provide houses, to the extent required, to the Persons with Disabilities.

Out of 20,000 targeted landless beneficiaries, only 3,462 (17 *per cent*) beneficiaries had received assistance (at the rate of ₹60,000) for purchase of land under the *Mukhyamantri Vaas Sthal Kray Sahayata Yojana*, and houses for only 2,935 (15 *per cent*) beneficiaries had been sanctioned under PMAY-G. There were 1,635 beneficiaries, whose names were different in *AwaasSoft* and PFMS but received payments of ₹ 19.37 crore.

Implementation of the Scheme

As of March 2024, against the 30.67 lakh houses sanctioned, construction of 28.94 lakh houses (94 *per cent*) had been completed during FYs 2017-24. However, the percentage of completion of houses consistently declined from 97 *per cent* (in FY 2017-18) to 89 *per cent* (in FY 2021-22), primarily due to delays in release of funds. Audit noticed lack of coherence in data pertaining to completion of houses provided by the Department *vis-a-vis* *Awaassoft* and actually found variation during JPV.

During JPV of houses constructed under the Scheme, Audit observed that out of 1,454 houses, although 1,324 houses had been marked as having been ‘completed’ in *AwaasSoft*, roof casting had not been completed in 306 (23 *per cent*) of these houses. In 155 (11 *per cent*) houses, photographs of the houses other than verified during JPV had been geo-tagged. Audit observed that 390 beneficiaries (0.78 *per cent* of 49,796 cases in the sampled GPs), who had been paid ₹ 1.69 crore as the first instalment, had not started the work of house construction, even after a lapse of 34 to 93 months of payment of the first instalment.

Convergence with other Government Schemes

Convergence with other specified social sector schemes had not been ensured to the extent envisaged for providing the requisite amenities in all completed houses. Audit observed that in 127 cases the names of the beneficiaries, as reflected in *AwaasSoft*, differed from their names as reflected in their MGNREGS job cards in *NREGASoft*, and payment of wages, amounting to ₹ 16.91 lakh, had been made to these 127 beneficiaries. Further, 208 beneficiaries had been paid (as of February 2025) an excess amount of ₹ 22.33 lakh, towards MGNREGS, on account of sanctioning excess person-days, as against the provision of 28/30 person-days. In 14 sampled blocks, of seven districts, 180 persons, who had become ineligible under the Scheme, had been paid ₹ 22.28 lakh, for 10,689 person-days, under MGNREGS, during FYs 2017-18 to 2021-22.

During JPV it was noticed that out of the 961 completed houses, in 541 cases (56 *per cent*), toilets were not constructed. It was also observed that 157 houses did not have the basic amenities of drinking water, electricity/solar connection, LPG connection, bathing area, waste management facility, *etc.*

Monitoring and Evaluation

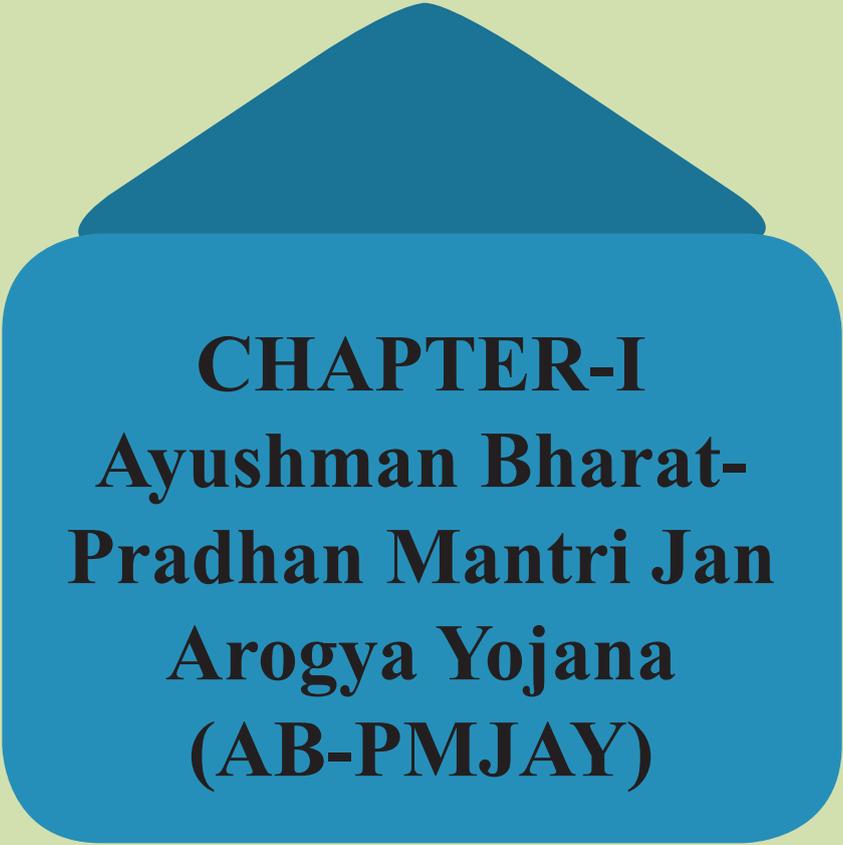
The monitoring mechanism in the PMAY-G was poor, as instances of geo-tagging of house locations were found at distant places outside the GP, districts, and even outside the State in 55 cases.

As against the 13,328 social audits required to have been carried out during FYs 2017-24, only 3,648 social audits (27 *per cent*) had been conducted in nine out of the 10 test-checked districts. Audit observed that during FYs 2017-18 to 2023-24 audit reports on the Scheme accounts were submitted with delays ranging from 16 to 109 days. As no records were found to be maintained regarding receipt and disposal of complaints, Audit could not ascertain whether the grievances received, with respect to the Scheme, were being disposed off properly.

Audit Recommendations:

In order to achieve the intended objectives of the Scheme, the State Government may:

- 1) *ensure proper verification of beneficiaries including IT application to detect incorrect and irregular payments of assistance and initiate system improvements to ensure that there are no delays in release of funds to beneficiaries;*
- 2) *ensure that the eligible beneficiaries are not deprived of the scheme benefit, landless beneficiaries are allotted land for construction of houses and the Persons with Disabilities, are given due priority, in the allotment of houses;*
- 3) *strive to achieve the targets set for construction of houses, Rural Mason Training programme and ensure timely release of payments so that construction of houses is carried out to achieve the goal of 'Housing for All';*
- 4) *ensure effective integration between NREGASoft and AwaasSoft and other schemes for better coordination and monitoring;*
- 5) *ensure adequate and effective convergence with the specified social sector schemes, as envisaged in the PMAY-G Guidelines, to ensure that all basic facilities are provided in the houses being constructed under the Scheme;*
- 6) *ensure geo-tagging of houses from their actual locations and monitor progress of house construction through evidence based, date and time-stamped and geo-referenced photographs; and*
- 7) *ensure conduct of social audits, to improve public accountability and address shortcomings in the implementation of the Scheme.*



CHAPTER-I
Ayushman Bharat-
Pradhan Mantri Jan
Arogya Yojana
(AB-PMJAY)

CHAPTER I

HEALTH DEPARTMENT

Ayushman Bharat-Pradhan Mantri Jan Arogya Yojana (AB-PMJAY)

1.1 Introduction

Ayushman Bharat, a flagship health Scheme of the Government of India (GoI), adopted a continuum of care approach, comprising two inter-related components- (i) Health and Wellness Centres (HWCs) and (ii) *Pradhan Mantri Jan Arogya Yojana* (PMJAY). The scope of this Performance Audit is limited to PMJAY (Scheme) which was launched (September 2018) to achieve Universal Health Coverage. The Scheme aims at providing a health cover of ₹ five lakh per family per year, to poor and vulnerable households, for secondary and tertiary care hospitalisation which included treatment, intensive care, diagnostic investigations, medical implants, medicines, medical consumables *etc.* Hospitalisation expenses were covered on a cashless basis, through a network of Empanelled Health Care Providers (EHCP)¹.

The Scheme was rolled out for rural and urban areas, based on the deprivation² and occupational³ criteria, respectively, of the Socio-Economic Caste Census (SECC), 2011. Initially, the SECC, 2011 database was to be utilised for beneficiary identification purpose in this Scheme. Based on the SECC data, 1.08 crore poor and vulnerable households (approximately 5.56 crore beneficiaries) in Bihar, were to be covered under the Scheme.

The GoI, revised the beneficiary base of PMJAY in January 2022. Accordingly, for Bihar, the number of beneficiary families under the Scheme was enhanced from 1.08 crore to 1.21 crore. Resultantly, 1.21 crore families which included 6.18 crore beneficiaries were to be verified in the State, under this Scheme.

In April 2022, the Government of Bihar (GoB), decided to provide the benefits of health security to all the families covered under the National Food Security Act (NFSA). As per the decision, after covering first 1.21 crore beneficiary families under PMJAY, remaining families of NFSA database were to be covered under

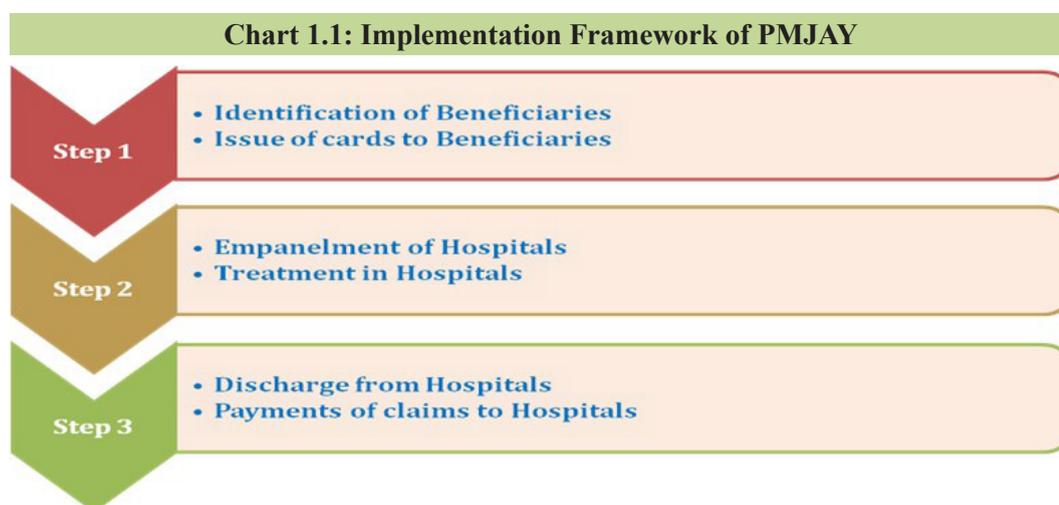
¹ *These are healthcare facilities, like hospitals, that are empanelled by the government to provide secondary, tertiary and day care procedures under the Scheme to eligible AB-PMJAY beneficiary families.*

² *Households (Rural) targeted under PMJAY belong to one of the six deprivation criteria – only one room with kutchha walls and kutchha roof; no adult member between age 16 to 59; female headed households with no adult male member between age 16 to 59; disabled member and no able-bodied adult member; SC/ST households; and landless households deriving major part of their income from manual casual labour. Besides, households without shelter; destitute/living on alms; manual scavenger families; primitive tribal groups; and legally released bonded labour, are automatically included.*

³ *Occupational categories of workers- rag picker; beggar; domestic worker; street vendor/cobbler/hawker/other service provider working on streets; construction worker/plumber/mason/labour/painter/welder/security guard/coolie and another head load worker; Sweeper/Sanitation worker/Mali; Home based worker/ artisan/ Handicrafts worker/Tailor; transport worker/ driver/ conductor/ helper to drivers and conductors/ cart puller/ rickshaw puller; shop worker/ assistant/ peon in small establishment/ Helper/ delivery assistant/ attendant/ waiter; and electrician/mechanic/assembler/repair worker; washer man/ chowkidar.*

Mukhya Mantri Jan Arogya Yojana (MMJAY)⁴. For this purpose, *Aadhaar* seeded database⁵ of the families covered under the NFSA, 2013, was integrated (February 2024) to the existing beneficiary database of the Scheme.

The PMJAY Scheme was being implemented in Bihar, under the Assurance/Trust mode⁶ *i.e.*, without intermediation of the insurance company. The financial risk of implementing the Scheme was borne by the Centre/ State Government in this model. The Central Government share was to be released to the nodal agency in three instalments of 50:25:25, in case of Trust mode. The actual cost incurred for treatment of beneficiary was to be shared in the ratio of 60:40, between the Central and the State Government. Implementation framework of PMJAY is shown in **Chart 1.1**.



(Source: Guidelines of PMJAY)

1.2 Organisational set-up

National Health Authority (NHA), headed by a Chief Executive Officer, is an Autonomous Body under the Ministry of Health & Family Welfare, responsible for implementing “*Ayushman Bharat-Pradhan Mantri Jan Arogya Yojana*”. Its functions included formulation of various operational guidelines related to PM-JAY, model documents and contracts to ensure standardisation and interoperability of the Scheme. Further, the State Government was to set up the State Health Agency (SHA) for effective implementation of the Scheme.

For implementation of the Scheme in Bihar, the SHA *i.e.* *Bihar Swasthya Suraksha Samiti* (BSSS), was the apex body. The role of SHA *inter alia* included data sharing, verification/ validation of families and members, policy formulation, awareness generation, empanelment of hospitals, capacity building, setting up of district level offices (District Implementation Units), monitoring of services, fraud control *etc.*

⁴ This Scheme was started by the State Government vide Health Department’s Resolution no. 10(7) dated 21.04.2022. This is a State Government Scheme which aims to provide health security to all the beneficiary families covered under NFSA, 2013.

⁵ Data base of Ration card holder families of Bihar covered under NFSA, 2013.

⁶ In the Trust Mode, the State Health Agency or similar body is appointed for the implementation of PMJAY in the State. In Bihar, the Bihar Swasthya Suraksha Samiti was the SHA.

The day-to-day functioning of SHA was overseen by the Chief Executive Officer⁷ (CEO).

In order to review the activities/programmes undertaken by the SHA and to provide it overall policy guidance for its efficient functioning, a Governing Body, under the chairmanship of the Development Commissioner, was set up (December 2018). The Governing Body was also required to: (i) consider the audited accounts for the previous year and Annual Reports; and (ii) make rules/regulations relating to the administration and management of the SHA.

Further, the affairs of the SHA viz. administrative, financial, academic, recruitment, were administered by an Executive Committee (EC), constituted under the chairmanship of the Principal Secretary, Health Department, GoB.

In order to support implementation of the Scheme in every district, District Implementation Units (DIUs)⁸ were set-up. The DIUs were to co-ordinate with the Implementation Support Agency (ISA)⁹ and the Network Hospitals (EHCP), to ensure effective implementation of the Scheme. The District Nodal Officer (Civil Surgeon-cum-Chief Medical Officer) of the DIU was responsible for the implementation of PMJAY in the district. The District Program Coordinator (DPC) was to supervise the operations at the district level, including overall administration of PMJAY in the district. The District Information Technology Manager (DITM) was responsible for helping the hospitals and ISA, regarding use of the information system.

1.3 Audit Objectives

The Performance Audit was conducted to examine whether:

- the initiation for implementation of the Scheme, including the financial aspect, was comprehensive;
- the beneficiary registration process was able to include all the eligible beneficiaries and filter any ineligible applicants;
- the controls in the process of empanelment of hospitals were implemented in practice;
- the process/controls for reimbursement of claims to empanelled hospitals were adequate and effective; and
- there existed an effective monitoring system, with anti-fraud and grievance redressal mechanism.

⁷ An officer of the rank of Special Secretary/Additional Secretary to the State Government.

⁸ The DIU was comprised of District Magistrate (DM), Civil Surgeon-cum-Chief Medical Officer (CMO), District Programme Coordinator (DPC) and District IT Manager (DITM).

⁹ An agency appointed by SHA to support it for implementation of the Scheme. Key roles of an Implementation Support Agency included identification of beneficiary, generation of Ayushman Cards, support hospital empanelment and claim payments.

1.4 Audit Criteria

Audit criteria were sourced from the followings:

- Operational Guidelines for implementation of PMJAY;
- Socio-Economic Caste Census, 2011, data and National Food Security Act, 2013, database;
- Relevant manuals, circulars, orders and notifications, issued by the Ministry of Health and Family Welfare, GoI and NHA/SHA/GoB;
- Provisions contained in the General Financial Rules (issued by Ministry of Finance, GoI) and Bihar Financial Rules *etc.*; and
- Physical and financial progress reported in the Management Information System (MIS) and information/data available on the website of PMJAY.

1.5 Audit scope, methodology and limitations

Audit Scope

The Performance Audit, for the period from September 2018 to March 2021, was conducted during July 2021 to February 2022 through test-check of records at the BSSS (the designated nodal agency), sampled 10 Districts (District Implementation Units) and 63 sampled¹⁰ hospitals (23 Private and 40 Public Hospitals), in the sampled 10 Districts as detailed in *Appendix 1.1* and *Image 1*.

Image 1: Sampled districts in Bihar



¹⁰ Using Probability Proportional to Size Sampling, 10 districts, across four regions of Bihar, were sampled. 63 Hospitals (25 per cent of the hospitals, with minimum of 2 and maximum of 8, in the sampled 10 districts) were sampled, using judgmental sampling, giving adequate representation to public and private hospitals, rural and urban hospitals, district hospitals, general hospitals and speciality hospitals.

Further, in order to update the audit findings¹¹ up to March 2024, audit was conducted during August 2024 to October 2024.

Audit Methodology

Audit methodology included test-check of records, obtaining responses to audit memos/questionnaires and analysis of various data pertaining to beneficiary identification, hospital empanelment and transaction management, as furnished by BSSS *i.e.* SHA. Besides, survey of 590 PMJAY beneficiaries, in the sampled 40 *Gram Panchayats* (GPs) and 10 Urban Local Bodies (ULBs) and 63 hospitals, was also conducted, to obtain their response about the Scheme (***Appendix 1.2***).

An Entry Conference was held (August 2021) with the Additional Chief Secretary, Health Department, GoB and the Chief Executive Officer, State Health Agency (SHA) to discuss audit objectives, criteria, scope and methodology. An Exit conference was held (April 2022) to elicit the views of the Department on the audit observations.

Limitations to this Performance Audit

There were several limitations to this Performance Audit conducted for the period September 2018 to March 2021. SHA did not provide the Login ID/password¹², or access to the Beneficiary Identification System (BIS)¹³ database of the PMJAY dashboard. Audit access to the Risk Assessment, Detection and Analytical Reporting (RADAR)¹⁴ System was limited to ‘view only’ access.

While updating the audit findings, the SHA provided (August-October 2024) data in regard to BIS, Transaction Management System (TMS)¹⁵ and Hospital Empanelment Management (HEM)¹⁶ *etc.* The SHA, however, again did not provide the Login ID/password, or access to the BIS database of the PMJAY dashboard, despite audit requisitions. Besides, certificate in regard to the completeness and consistency of data was also not provided by BSSS. As such, data analysis was limited to and based upon the data provided by SHA.

¹¹ *Except audit findings in respect of beneficiary survey of 590 PMJAY beneficiaries, as discussed in Paragraph 1.11 of this Performance Audit.*

¹² *The PMJAY Dashboard allows for an aggregated and drill down view on various datasets [Beneficiary Identification System (BIS), Hospital Empanelment System (HEM), Transaction Management System (TMS) etc.], integrated into the PMJAY Data warehouse (BIS, HEM, TMS etc. are separate databases within the PMJAY system). The PMJAY Dashboard is used for real time reporting of transactions, evaluating performance and understanding utilisation trends.*

¹³ *The BIS Module under PMJAY assists in searching beneficiaries, authenticating them from the database and creating beneficiary registrations.*

¹⁴ *Module to monitor and analyse the utilisation pattern under the Scheme.*

¹⁵ *The TMS Module allows for capturing of in-patient data, on admission, treatment and discharge and onwards, to hospital claims and financial settlement.*

¹⁶ *Module for registration and approval of hospitals for empanelment.*

Audit Findings**1.6 Financial management**

As per the Scheme guidelines, expenses under PMJAY were to be shared between the Central and State Governments in the sharing ratio of 60:40. The Central & State Governments were required to open a separate designated Escrow Account to administer Grants-in-Aid and Administrative Expenses, through which the payment of premium *i.e.* State and Central Government's Share of Premium was to be released. The State was to upfront release its share, along with its administrative expense share, into the separate designated escrow account of SHA.

1.6.1 Financial overview

Funds, received as Central and State shares and expenditure incurred there against during the Financial Years (FYs) 2018-19 to 2023-24 under the Administrative Account and the Escrow Account¹⁷ of PMJAY are detailed in **Table 1.1**.

Table 1.1: Financial overview of the Scheme during FYs 2018-19 to 2023-24*(Amount ₹ in crore)*

Financial Year	Account	Opening Balance	Central Share	State Share	Total available funds	Expenditure incurred	Closing Balance
2018-19	Administrative	0	16.34	0	16.34	2.40	13.94
	Escrow	0	71.93	50	121.93	2.47	119.46
	Total	0	88.27	50	138.27	4.87	133.40
2019-20	Administrative	13.94	4.42	15.89	34.25	12.34	21.91
	Escrow	119.46	78.07	47.95	245.48	107.86	137.62
	Total	133.40	82.49	63.84	279.73	120.20	159.53
2020-21	Administrative	21.91	0.00	0.00	21.91	14.01	7.90
	Escrow	137.62	0.00	0.00	137.62	70.47	67.15
	Total	159.53	0.00	0.00	159.53	84.48	75.05
2021-22	Administrative	7.90	3.81	19.68	31.39	29.36	2.03
	Escrow	67.15	55.95	80.00	203.10	111.75	91.35
	Total	75.05	59.76	99.68	234.49	141.11	93.38
2022-23	Administrative	2.03	23.69	9.43	35.15	9.91	25.24
	Escrow	91.35	121.82	55.57	268.74	215.49	53.25
	Total	93.38	145.51	65.00	303.89	225.40	78.49
2023-24 [#]	Administrative	25.24	0.00	10.00	35.24	14.87	20.37
	Escrow	53.25	172.50	100.00	325.75	292.54	33.21
	Total	78.49	172.50	110.00	360.99	307.41	53.58

(Source: BSSS)

**Due to heavy closing balance amounting to ₹ 159.53 crore at the end of FY 2019-20, the Central and State share was not released during FY 2020-21. [#]Provisional (as accounts for 2023-24 were yet to be finalised)*

¹⁷ **Administrative Account:** pertains to expenses for Human resources, office expenses, IT infrastructure, IEC activities, contingencies etc. **Escrow Account:** pertains to expenses for treatment costs.

It is evident from the **Table 1.1** that there were significant closing balances ranging from ₹ 53.58 crore (15 per cent of total available funds) to ₹ 159.53 crore (57 per cent of total available funds) during 2018-19 to 2023-24. Significant closing balances under Administrative Account during 2018-19, 2019-20, 2022-23 and 2023-24 and under Escrow Account during 2018-19 to 2023-24, was indicative of poor financial management for implementation of the Scheme. Less than the anticipated expenditure was also because of: (i) delayed and poor verification of beneficiaries (only 2.56 crore *i.e.*, 41 per cent of the total 6.18 crore beneficiaries) as of 31 March 2024 (ii) availing of the Scheme benefits by only 4.89 lakh beneficiaries (1.91 per cent) of 2.56 crore verified beneficiaries (**Paragraph 1.7**) who received payments of ₹ 911.54 crore against 8.10 lakh claims during FYs 2018-19 to 2023-24 (**Paragraph 1.9**) and (iii) less expenditure on Information, Education and Communication (IEC) activities (**Paragraph 1.7.3**) and capacity building (**Paragraph 1.7.4**) under the Scheme, as discussed in the succeeding paragraphs.

CEO, BSSS, replied (November 2024) that for PMJAY, the sharing ratio between the Central Government and the State Government was 60:40. Funds were received time to time from the State Government and accordingly, proportional amount was received from NHA.

The reply of the State, was not in consonance with the Audit observation.

1.6.2 Non-transfer of interest earned on Rashtriya Swasthya Bima Yojana (RSBY) funds to the NHA

As per the Scheme Guidelines, in case any interest is earned on the Central Share due to funds lying unspent in the accounts designated for receiving the Grants-in-Aid, the Central Government will have the first right of claim on such interest earned and it shall be transferred back to the NHA.

As per the correspondence (December 2018) between the NHA and SHA, unspent balance of the *Rashtriya Swasthya Bima Yojana* (RSBY)¹⁸ was considered as a part of the funds available for implementation of PMJAY. Accordingly, interest earned on RSBY funds was to be transferred to NHA.

Audit observed that interest, amounting to ₹ 30.33 crore, had been earned (March 2024) on RSBY funds. Although the apportionment of this amount, between the Central and State shares, was not made available to Audit, it was observed that BSSS did not transfer the interest earned on Central share of RSBY funds, to NHA.

CEO, BSSS, replied (November 2024) that necessary guidance had been sought (June 2020/March 2022/October 2024) from GoI regarding RSBY funds.

¹⁸ A Centrally Sponsored Scheme launched (2008) by GoI, for providing cashless health insurance coverage of ₹30,000 per annum per family (for five members) to the workers of unorganised sector and Below Poverty Line population.

1.6.3 Non-utilisation of funds for administrative expenses, as per Guidelines

As per PMJAY Guidelines, funds for administrative expenses were to be utilised on Human Resources (15 per cent), Office Expenses (20 per cent), IT Infrastructure (25 per cent), IEC activities (25 per cent) and Contingencies (15 per cent).

Audit observed that BSSS did not utilise the funds allocated for administrative expenses, in terms of the stipulations laid down under the Guidelines, as shown in **Table 1.2**.

Table 1.2: Non-Utilisation of funds relating to administrative expenses as per guidelines during FYs 2018-19 to 2023-24

Particulars	Percentage of expenditure to be incurred	Actual expenditure incurred (out of available* funds for administrative expenses) (Amount ₹ in lakh and expenditure percentage in bracket)					
		2018-19	2019-20	2020-21	2021-22	2022-23	2023-24 [#]
Human Resources	15	70 (4.28)	303.46 (8.86)	560.93 (25.60)	593.87 (18.92)	722.53 (20.56)	1,055.11 (29.94)
Office Expenses	20	170.03 (10.41)	848.33 (24.77)	317.16 (14.48)	122.59 (3.91)	99.55 (2.83)	69.45 (1.97)
IT Infrastructure	25	0	0	48.41 (2.21)	100.08 (3.19)	30.39 (0.86)	3.97 (0.11)
IEC	25	0.16 (0.01)	82.11 (2.40)	333.57 (15.22)	171.00 (5.45)	138.89 (3.95)	36.51 (1.04)
Contingencies	15	0	0	140.83 (6.43)	1,948.58 (62.08)	0	321.00 (9.11)

(Source: BSSS and Guidelines of PMJAY)

*Funds available (excluding interest amount) for the tabulated heads during the FY 2018-19, 2019-20, 2020-21, 2021-22, 2022-23 & 2023-24 were ₹ 16.34 crore, ₹ 34.25 crore, ₹ 21.91 crore, ₹ 31.39 crore, ₹ 35.15 crore and ₹ 35.24 crore respectively.

[#] Provisional (as accounts for FY 2023-24 were yet to be finalised)

From **Table 1.2**, it can be seen that 25 per cent of the Administrative Expenses was to be incurred on IEC activities and IT infrastructure each. Audit noted that there was significantly less expenditure, ranging from 0.01 to 5.45 per cent on IEC activities (except 15.22 per cent expenditure during FY 2020-21) and zero to 3.19 per cent on IT infrastructure, incurred during FYs 2018-19 to 2023-24, which affected awareness activities among the beneficiaries (**Paragraph 1.7.3**).

CEO, BSSS, replied (January 2025) that: (i) the expenditure had been incurred on all the components as per provisions made by NHA (ii) less expenditure in some components was due to the COVID-19 pandemic and expenditure was as per actual requirement of the Scheme (iii) NHA had issued detailed guidelines on expenditure of administrative funds only in August 2020 and (iv) expenditure incurred was within the limits set by NHA and requirement of the Scheme.

The reply was not acceptable since there was significant less expenditure on crucial aspect like IEC activities (from 0.01 per cent to 15.22 per cent) and IT infrastructure (from zero to 3.19 per cent) during FYs 2018-19 to 2023-24 which impacted the implementation of the Scheme

1.6.4 Diversion of PMJAY funds for implementation of Mukhya Mantri Jan Arogya Yojana (MMJAY)

In order to comply with the decision of GoI (January 2022) to increase the beneficiary families up to 1.21 crore in Bihar, the State Government decided (April 2022) to use *Aadhaar* seeded data of families covered under NFSA, 2013 (as discussed in **Paragraph 1.1**). As per the decision, after covering first 1.21 crore beneficiary families under PMJAY, remaining families of NFSA database were to be covered under *Mukhya Mantri Jan Arogya Yojana* (MMJAY), a State sponsored Scheme launched in April 2022. It was also decided that MMJAY would be implemented through the existing IT platform of PMJAY.

As per the records (February 2024) of the State Government, total 1.79 crore families were covered under NFSA, 2013. After covering first 1.21 crore beneficiary families under PMJAY, remaining 0.58 crore families were to be covered under MMJAY. As per information provided (October 2024) by BSSS, 1.21 crore beneficiary families were verified under PMJAY till 15 May 2024. However, as per data available (on 2 September 2024) on PMJAY dashboard (dashboard.pmjay.gov.in), against 1.21 crore beneficiary families to be verified under the Scheme, 1.55 crore beneficiary families had been verified in the State, implying that 0.34 crore beneficiary families were verified under MMJAY.

Meanwhile, BSSS decided (July 2022) to utilise PMJAY funds available under its Administrative and plan heads, as loan for implementation of MMJAY and to adjust the amount spent after receipt of funds from the State Government share. As per directives of NHA, funds allotted for PMJAY were to be utilised for implementation of this Scheme only and were not to be utilised for any other Scheme. Therefore, the decision of the BSSS was in violation of the NHA directives.

Audit further observed that GoB had not released funds for implementation of MMJAY till October 2024. Instead, BSSS incurred expenditure on verification of beneficiaries and claimed payment in respect of MMJAY beneficiaries from PMJAY funds resulting in diversion of PMJAY funds for the implementation of MMJAY. However, the details of number of families verified, amount of expenditure incurred on verification of beneficiaries and payment of claims in respect of MMJAY were not provided to Audit. In absence of these details, quantum of PMJAY funds diverted towards MMJAY could not be ascertained.

CEO, BSSS, replied (November 2024) that: (i) data of number of beneficiaries and treatment taken under MMJAY was being segregated by BSSS. After the final calculation by BSSS and its verification from NHA, amount used under MMJAY would be transferred to the PMJAY account (ii) BSSS had requested NHA to provide separate tagging of cases/beneficiaries in TMS portal to maintain separate account for payments made under MMJAY, which was yet to be provided (iii) No claim payment had been made for MMJAY, so far (iv) Health Department, GOB had granted ₹ 25 crore for MMJAY in November 2024. After the calculation/assessment of number of treatments availed under MMJAY, amount involved therein and payments already made to the concerned hospitals, adjustment/

transfers of funds would be made from the funds received under MMJAY to PMJAY account.

The reply corroborated the audit findings. Besides, not raising of claim for payments for MMJAY was not acceptable as BSSS, has requested NHA to provide separate tagging of cases/beneficiaries in TMS portal to ascertain the actual claim amount paid under MMJAY. Hence, it was obvious that BSSS was unable to segregate data in respect of MMJAY without its tagging in TMS Portal. Further, although the State announced MMJAY (April 2022), no fund was provided for this Scheme till October 2024.

Recommendation 1: The State Government may utilise the funds allocated in Escrow/Administrative expenses, as per the stipulations laid down under the Guidelines, especially expenditures on IEC activities.

1.7 Beneficiary identification and verification

PMJAY covered beneficiaries identified under SECC, 2011, based on the deprivation and occupation criteria. Detailed guidelines for the identification and verification of these beneficiaries was provided by NHA while the actual verification/validation was to be carried out by SHAs. Different stages of beneficiary identification and registration process are summarised as below:

- a. Searching of the beneficiary data (Name and location, Ration card or Mobile number) through 'Beneficiary Identification System (BIS)',
- b. Verification of individual/family through prescribed documents, and
- c. Generation of the *Ayushman* Card after approval.

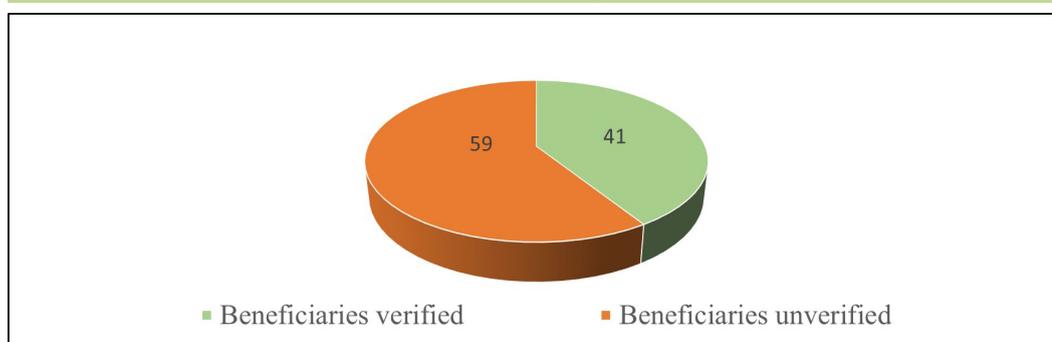
Initially the primary reference database for issue of *Ayushman* Cards was the SECC database. Subsequently (February 2022)¹⁹, States/UTs were provided flexibility to tag beneficiaries from non-SECC databases also in cases where eligible beneficiaries were unidentifiable/ non-traceable in SECC, 2011. However, while carrying out this verification from non-SECC databases, States/UTs were to ensure the following:

- i. Socio-economic profile of the beneficiary matches with that of eligible SECC beneficiaries.
- ii. Geographic spread and district parity at par with original SECC beneficiaries' database.
- iii. Beneficiaries database shared should be *Aadhaar* authenticated,
- iv. While using multiple beneficiary databases, de-duplication of beneficiaries at family and individual levels must be done.
- v. Non-verified cases to be removed from the beneficiary database.

State level verification: Against the decision of GoI (January 2022) to cover 1.21 crore beneficiary families including 6.18 crore beneficiaries in the State under the Scheme, 1.18 crore families (97 *per cent*) and 2.56 crore beneficiaries (41 *per cent*) were verified as of 31 March 2024, as depicted in **Chart 1.2**.

¹⁹ *Vide OM No. S-12012/183/2022-NHA (Pt. I) dated 01.02.2022.*

Chart 1.2: Beneficiaries verified (in per cent) as of March 2024



(Source: BSSS)

Out of total verified families/beneficiaries, 4.61 lakh²⁰ families (3.91 per cent) and 4.89 lakh beneficiaries (1.91 per cent) availed benefits of the Scheme, as of 31 March 2024.

District level verification: The data/information regarding district-wise target of families and beneficiaries to be verified and actually verified under the Scheme as of March 2024 was not provided by BSSS to Audit. However, as per the data available on Insight portal²¹ of the Scheme, as on 16 October 2023²², verification of beneficiaries was significantly lower in some districts. Verification remained below 10 per cent of the total identified beneficiaries in Araria (7.77 per cent), Katihar (9.07 per cent), Khagaria (9.58 per cent), East Champaran (9.93 per cent) (*Appendix 1.3*). Thus, even after about six years of implementation, 59 per cent beneficiaries of the Scheme were yet to be verified, as of March 2024, indicating beneficiaries being verified with delays and in low numbers.

This was mainly attributable to the fact that: IEC activities, which were crucial for generating awareness among beneficiaries about the Scheme were inadequate; and poor capacity building of personnel involved in Scheme implementation. Further, it was noticed that Implementation Support Agencies/Agency was to be appointed by the State to provide support to cover all 1.08 crore PMJAY beneficiary families. However, the contract executed between the BSSS and the ISA provided for processing and approval of beneficiary identity verification requests received at the Empanelled hospitals only and did not include verification requests of other eligible beneficiaries, leading to low verification numbers (as detailed in *Paragraph 1.7.1*).

CEO, BSSS, replied (November 2024) that in view of the challenges of SECC data and to reach the goal of expanding the beneficiary coverage, State Government had decided to adopt the NFSA database in February 2024. Now, 100 per cent coverage of PMJAY beneficiary families had since been achieved in Bihar.

²⁰ Calculated from the data of Transaction Management System (TMS) module of PMJAY.

²¹ A portal developed by NHA to monitor/evaluate overall operations and performance of PMJAY (www.insights.pmjay.gov.in).

²² Data regarding verification of beneficiaries after 16.10.2023 was not available on the portal.

The reply was silent about the verification and was not acceptable as only 41 *per cent* of the total beneficiaries were verified as of 31 March 2024 (as per BIS data).

1.7.1 Non-coverage of the entire set of targeted PMJAY beneficiaries

BSSS (*i.e.*, the SHA), was to select an Implementation Support Agency (ISA) for the implementation of the Scheme in the State. Accordingly, the BSSS invited (July 2018) a tender to select the ISA for supporting the implementation of the Scheme. As per the purpose and scope of the tender document, the ISA was to provide support to cover all 1.08 crore PMJAY beneficiary family units in the State.

BSSS, after finalising the bid, executed (October 2018) a contract with “Medsave Health Insurance TPA Limited (Agency)” for a period of two years which was later extended up to February 2021. However, scrutiny of the contract documents disclosed that, contrary to the tender, the contract was executed with the agency for processing and approval of beneficiary identity verification requests received only from *Ayushman Mitras/ Pradhan Mantri Aarogya Mitras (PMAMs)* at the Hospitals. Hence, as per the terms of the contract executed, it was not obligatory for the ISA to process non-hospital-based requests of other eligible beneficiaries. No reason(s) for this deviation in the contract was available on records. Resultantly, only 13 *per cent* beneficiaries in the State could be verified as of January 2022, which increased to 41 *per cent*, as of March 2024.

CEO, BSSS, replied (February 2022) that: (i) as per the model tender document, the selected ISA was to be responsible for processing and approval of beneficiary identity verification requests received from *Ayushman Mitras* at the Hospitals as per the process defined in the Scheme (ii) the contract with the selected ISA was, therefore, made in consistency with the tender conditions and work was allocated, accordingly. The CEO further replied (April 2022) that the tender document had been floated for hiring of an Implementation Support Agency and not for hiring of a Beneficiary Identification Agency and the purpose and scope of this tender document did not mention any work related to the Beneficiary Identification System.

The reply was not acceptable, since as per the tender document (Clause 2-Instruction to Bidders-Volume I) for selection of ISA, the purpose and scope of the work was to provide support to cover all eligible PMJAY beneficiaries in the State.

1.7.2 Irregular award of work and avoidable payment to the Implementation Support Agency

BSSS decided (July 2022) to select cluster-wise Implementation Support Agencies (by dividing the State into two clusters *viz.* Cluster I and II) for the implementation of the Scheme. The scope of work for the Agencies to be selected included processing of pre-authorisation requests, claim management, fraud detection *etc.* Accordingly, the BSSS prepared and forwarded (September 2022)

a draft Request for Proposal (RFP) to the NHA, for their approval. In response, NHA forwarded (December 2022), following inputs/instructions to BSSS:

- Any bidder selected for Cluster-I should not be considered for selection under Cluster-II.
- Further, to ensure that both clusters are not allotted to the same bidder, the SHA could invite a single financial bid, wherein the bidders would have the option to bid for either one of the clusters and if any bidder/s wanted to bid for both the clusters, then preference of cluster might be indicated. In such a scenario, L-1 would be allotted the Cluster opted by him and L-2 could be allotted the other Cluster, subject to willingness, with the condition to match the financial bid of L-1, to ensure parity of rates for both the Clusters.

BSSS invited tenders (March 2023) for the implementation of PMJAY and other State Sponsored Health Assurance Schemes for Clusters-I and II in the State.

Audit observed that contrary to the inputs/instructions of NHA, BSSS selected a single agency (Family Health Plan Insurance TPA Ltd.) for both the Clusters at different rates (for Cluster-I ₹1.95 per family per year and for Cluster-II ₹1.68 per family per year) and contracts for both the Clusters were executed (August 2023) with the agency. Audit noted that by allotting similar work (related to Scheme implementation), of both the Clusters to one agency at different rates, BSSS did not ensure parity of rates. It paid ₹1.19 crore (including TDS for GST and IT) to the Agency (up to September 2024) for both the Clusters. This act of BSSS resulted in irregular award of work and avoidable payment of ₹8.80²³ lakh to the ISA.

CEO, BSSS, replied (November 2024) that: (i) even in case of acceptance of NHA's suggestion, the willingness of L-2 bidder was to be sought for working at L-1 rate, which was considered as negotiation, and was not recommended under the Bihar Financial Rules and (ii) parity of rates could not be ensured as human resource requirements for both Clusters were different due to different number of districts in the Clusters.

The reply was not acceptable as the number of beneficiary families to be covered under Cluster-I (61.37 lakh) and Cluster-II (62.64 lakh), was almost same and the nature of work was also same for both the Clusters. Further, BSSS did not adhere to the instructions of NHA of not allotting both the works to the same agency and ensuring parity of rates for the both the Clusters, leading to irregular award of work as well as avoidable payment to ISA.

²³ $(\text{₹}1.95 - \text{₹}1.68) = \text{₹}0.27$; Avoidable payment- $61,37,146$ (no. of beneficiary families in Cluster I) x $\text{₹}0.27/2$ (no. of quarters for which payment was made) = $\text{₹}8,28,514$. Less 10 per cent deducted (due to penalty) = $\text{₹}82,851$. Total Avoidable payment = $\text{₹}7,45,663$ ($\text{₹}8,28,514 - \text{₹}82,851$) x 1.18 (GST at the rate of 18 per cent) = $\text{₹}8,79,882$.

1.7.3 Inadequate Information, Education and Communication activities

As per the PMJAY Beneficiary Identification Guidelines, the State was responsible for carrying out Information, Education and Communication (IEC) activities amongst targeted families, so that they were aware of their entitlement, benefit cover, empanelled hospitals and the process of availing services under PMJAY.

The role of IEC activities was to increase awareness and educate the targeted audience about the Scheme, by disseminating accurate information, developing communication based on key insights, creating user friendly IEC material, selecting relevant communication channels and rolling out messages, at appropriate times, to maximise reach and impact amongst the target audiences. The SHA was required to: (i) constitute an IEC Cell at the State Level (ii) recruit/assign required IEC staff (iii) appoint one IEC Manager and one IEC Officer, to work on the design and implementation aspects of the State level IEC strategy (iv) lay down the IEC objectives (v) design a comprehensive IEC plan and (vi) identify relevant targeted audiences to promote PMJAY.

In context Audit observed the following:

(i) Non- constitution of IEC Cell as per guidelines

Audit noted that the IEC Manager was appointed by the BSSS in March 2020, *i.e.* after one and a half years of implementation of the Scheme. Further, the IEC Manager was also looking after Capacity Building activities, and hence, was not fully available for the work related to IEC activities. Besides, the IEC Cell was constituted in April 2022 *i.e.*, after more than three and a half years of the initiation of the Scheme. It was also noted that an IEC Officer to work on the campaigns and related works had not been appointed as of September 2024.

CEO, BSSS, replied (December 2024) that Capacity Building and IEC Manager was appointed in March 2020. During the initial one and a half years, IEC activities were carried out by NHA, SHSB, and the Programme Management Unit and other consultants under BSSS. Thus, the absence of the IEC cell did not impede the PMJAY IEC related work and activities. SHAs were given the liberty to form the IEC Cell based on their requirements. To prevent financial strain, the post of an IEC officer was not created.

The reply was not acceptable as the IEC activities were important for making beneficiaries aware of the Scheme and their entitlement, benefit cover, empanelled hospitals and the process of availing services under the Scheme. Hence, the BSSS was required to incur adequate expenditure to ensure proper IEC activities.

(ii) Non-preparation of an IEC plan

As per the IEC activities Guidebook for SHAs, the SHA was required to design a comprehensive IEC plan, to reach the intended target audiences. In order to co-ordinate and implement the IEC plan at the district level, the SHA was to

work with the District Nodal Officer and his team, including District Programme Coordinator and District Grievance Manager.

Audit observed that the BSSS did not prepare IEC plans for the FYs 2018-19 and 2019-20. Although certain IEC activities, viz. print and radio advertisements, exhibition stalls *etc.*, were undertaken during this period, these were sporadic and not implemented in a planned or organised manner to ensure maximum coverage of the targeted audience.

The IEC plans for the FYs 2020-21 to 2023-24 were prepared and approved by the BSSS. However, certain activities were not carried out as per these approved IEC plans. For example, 'Puppet show (2020-21)', 'Nukkad Natak (2020-21 and 2021-22)', 'Publishing of pocket books (2020-21)', 'Awareness workshops & meetings (2022-23)', 'State level workshop on Behaviour Change Communication (BCC) (2021-22)', 'IEC & capacity building with SPMU/DIU Teams (2021-22)', 'Printing of newsletter/booklets' and 'Sports league (2023-24)' *etc.*, were not carried out during implementation of these IEC plans.

Thus, IEC activities were not carried out in a planned manner. Also, any impact study to judge the effectiveness of the IEC activities was not carried out, so that necessary changes in IEC Plan could be made, as required.

CEO, BSSS, replied (April 2022) that: (i) although a detailed IEC Plan could not be prepared for the initial period of 2018-2020, the IEC related work was not hampered (ii) detailed instructions, for carrying out IEC activities, at the state and district levels, as also for their monitoring, were given on a regular basis (iii) in the approved Annual Work Plan 2020-21 which included IEC plan, some of the IEC activities were planned to be conducted by the specialised agencies to be hired for the purpose. However, due to the COVID-19 pandemic, some of the planned activities could not be implemented.

The reply was not acceptable since the Annual Work Plan included various activities, such as conducting a State level workshop, hiring of an agency for IEC development, block level training of ASHA workers *etc.* However, only one (*i.e.* hiring of an agency by BSSS) of the activities, included in the Annual Work Plan pertained to IEC development (as per the IEC Guidebook), while other activities were related to capacity building (as per the Capacity Building Guidelines).

(iii) Inadequate IEC activities to cover the targeted beneficiaries

As per the Scheme guidelines, 25 *per cent* of the overall administrative expenses was to be spent on the IEC activities related to promotion of PMJAY. Further, as per the IEC guidebook for SHAs, such IEC activities were to be carried out by the SHAs under six components (Print material, Communication at empanelled hospitals, Out of home advertising, Media coverage, Public engagement activities and Other medium).

(A) Audit, however, observed that:

(i) during FYs 2018-19 to 2023-24, BSSS's expenditure on IEC activities, ranged between ₹ 0.16 lakh (0.01 per cent) to ₹ 333.57 lakh (15.22 per cent) of the administrative expenditure (**Table 1.2**), which was much below the target of 25 per cent, as per the Scheme guidelines. Further, although expenditure on IEC activities was on an increasing trend during FYs 2018-19 (0.01 per cent) to 2020-21 (15.22 per cent), it was still much below the Scheme provisions. This was especially relevant since these being initial years of the Scheme, more should have been spent on IEC activities to widely disseminate information about the Scheme and its benefits. The expenditure on IEC again reduced during FYs 2021-22 (5.45 per cent) to 2023-24 (1.04 per cent).

(ii) IEC Guidebook prescribed an illustrative list of IEC activities for being carried out by the SHA. However, in comparison very limited IEC activities had actually been carried out (24 of 36 prescribed activities were carried out, as detailed in **Appendix 1.4**).

Thus, IEC activities, carried out by the SHA, were inadequate, in terms of the illustrative list prescribed in IEC guidebook. Further, expenditure incurred on these activities was also lower than what was prescribed in the Scheme guidelines.

(B) Further, in case of the 10 test-checked districts, Audit observed the following with respect to the IEC activities:

(i) during the initial period (FY 2018-19) of the Scheme funds were not made available to seven of the 10 sampled DIUs for IEC activities and expenditure incurred on IEC activities was not as per the Scheme guidelines, as it ranged from nil to 24 per cent (i.e., below the prescribed percentage) and 28 per cent to 68 per cent (i.e., above the prescribed percentage), during FYs 2018-19 to 2023-24. Details of expenditure incurred in the sampled district on IEC activities during FYs 2018-19 to 2023-24 are given in **Table 1.3**.

Table 1.3: Expenditure incurred on IEC activities, in sampled districts, during FYs 2018-19 to 2023-24

(Amount ₹ in lakh)

FY	2018-19		2019-20		2020-21		2021-22		2022-23		2023-24	
	Funds available for Admin. Exp.	Exp. on IEC activities (per cent)	Funds available for Admin. Exp.	Exp. on IEC activities (per cent)	Funds available for Admin. Exp.	Exp. on IEC activities (per cent)	Funds available for Admin. Exp.	Exp. on IEC activities (per cent)	Funds available for Admin. Exp.	Exp. on IEC activities (per cent)	Funds available for Admin. Exp.	Exp. on IEC activities (per cent)
Bhagalpur	Funds not made available	Funds not made available	10.00	0 (0)	14.74	4.97 (33.72)	50.65	0 (0)	45.97	21.67 (47.14)	29.06	11.77 (40.50)
Bhojpur	Funds not made available	Funds not made available	10.00	0.48 (4.80)	18.11	3.71 (20.49)	53.71	6.11 (11.38)	41.97	24.08 (57.37)	17.47	11.86 (67.89)
Darbhangha	Funds not made available	Funds not made available	10.00	0.55 (5.50)	15.29	1.52 (9.94)	63.14	11.39 (18.04)	46.22	23.48 (50.80)	21.96	2.08 (9.47)
Katihar	5.00	0.82 (16.40)	10.53	1.99 (18.90)	20.17	0.85 (4.21)	60.45	4.37 (7.23)	60.78	6.06 (9.97)	61.78	15.12 (24.47)

FY	2018-19		2019-20		2020-21		2021-22		2022-23		2023-24	
Name of DIU	Funds available for Admin. Exp.	Exp. on IEC activities (per cent)	Funds available for Admin. Exp.	Exp. on IEC activities (per cent)	Funds available for Admin. Exp.	Exp. on IEC activities (per cent)	Funds available for Admin. Exp.	Exp. on IEC activities (per cent)	Funds available for Admin. Exp.	Exp. on IEC activities (per cent)	Funds available for Admin. Exp.	Exp. on IEC activities (per cent)
Muzaffarpur	Funds not made available	Funds not made available	10.09	2.13 (21.11)	21.09	0.40 (1.90)	85.57	15.91 (18.59)	61.10	23.47 (38.41)	38.21	19.38 (50.72)
Nalanda	5.00	0.00 (0)	10.00	1.59 (15.90)	17.00	3.20 (18.82)	55.92	10.16 (18.17)	38.84	17.60 (45.31)	23.75	7.67 (32.29)
Patna	Funds not made available	Funds not made available	10.00	0 (0)	17.58	0.93 (5.29)	69.80	2.36 (3.38)	62.08	4.49 (7.23)	61.33	3.99 (6.51)
Purnea	Funds not made available	Funds not made available	10.00	0 (0)	19.23	3.11 (16.17)	56.85	7.41 (13.03)	44.10	20.08 (45.53)	25.54	2.83 (11.08)
Saran	5.00	0.00 (0)	10.00	0.69 (6.90)	9.77	0 (0)	64.76	1.10 (1.70)	59.50	10.81 (18.17)	43.56	NA [#]
Sitamarhi	Funds not made available	Funds not made available	10.00	0.80 (8.00)	14.44	4.07 (28.19)	61.25	4.14 (6.76)	52.44	1.28 (2.44)	51.10	16.53 (32.35)

(Source: Respective DIUs) * Figures in parentheses denote percentage [#]Information was not made available

(ii) Expenditure on IEC activities had not been incurred on many components covered in the illustrative list of IEC activities prescribed in the IEC Guidebook. No activity was carried out under two components (Communication at empanelled hospitals and Public engagement activity) in three districts, under two components (Out of Home Advertising and Other medium) in one district and under component 'Media coverage' in all sampled districts, as detailed in **Appendix 1.4**.

(iii) *Ayushman Pakhwara* were organised in the sampled districts during the period of FYs 2019-20 (16 September 2019 to 2 October 2019), 2020-21 (17 February 2021 to 3 March 2021) and 2022-23 (15 September to 30 September 2022) for the purpose of conducting the IEC activities and creation and distribution of *Ayushman Cards*. It was noted that some necessary IEC activities, such as micro planning, wall paintings, wall writing on *Panchayat Bhawan*, distribution of *Ayushman Bharat e-cards etc.* were not carried out in all the sampled districts.

Hence, adequate awareness among the targeted beneficiaries, could not be ensured, which was possibly one of the reasons which led to only 41 *per cent* verification of beneficiaries in the State (as of March 2024).

CEO, BSSS, replied (February/April 2022) that expenditure incurred on IEC activities in 2018 and 2019, excluded the expenditure of the State Health Society Bihar (SHSB)²⁴. Taking this into consideration, the total IEC expenditure, during FYs 2018-19, 2019-20, and 2020-21, came to ₹ 55.59 lakh (18 *per cent*), ₹ 98.52 lakh (7 *per cent*) and ₹ 333.57 lakh (19 *per cent*), respectively, which indicated considerable improvement. Further, IEC activities continued in FY 2023-24 with a focus on left out NFSA beneficiaries. A notable initiative, *Ayushman Card Nirman Vishesh Abhiyan* (Special Drive for *Ayushman Card* Creation), was conducted in March 2024 to enhance *Ayushman Card* coverage in Bihar.

²⁴ SHSB (a Society under Health Department) was working as SHA, prior to the setting up of BSSS in Bihar.

The reply was not acceptable, as the expenditure of ₹ 70.12 lakh incurred on IEC activities by SHSB during 2018 and 2019, also included expenditure (₹ 14.69 lakh) on recruitment of staff, which was not an IEC activity. Besides, BSSS did not furnish other/additional supporting vouchers, in regard of the expenditure stated to had been incurred by SHSB. The expenditure on IEC activities was still inadequate in terms of the prescribed norm (25 per cent), even after considering the expenditure stated to had been incurred on IEC activities, by the SHSB. Moreover, supporting documents in respect of the activities carried out during 2023-24 were not provided to Audit.

1.7.4 Poor conduct of capacity building activities by the State Health Agency

The objective of capacity building, under PMJAY, was to create sustainable and robust institutions, which would augment and sustain the product and process knowledge of PMJAY stakeholders, thereby enabling them to perform their roles and responsibilities effectively. As per the capacity building guidelines, SHA was required to prepare and approve an Annual Training Plan (ATP), which would include the training load, internal resources available for training and tentative training level (State, District) with batch size.

Audit observed that BSSS did not prepare ATP for the year 2018-19 and 2019-20. Further, it also did not carry out activities related to: (i) periodic monitoring, based on predefined indicators²⁵ (ii) preparation of structured documentation and (iii) impact study, relating to the benefit/impact of training programmes, including the percentage of decrease in out-of-pocket expenditure.

Audit further noticed (September 2024) that ATP for the year 2020-21 to 2023-24 which was prepared and approved by BSSS, did not include many necessary components like training status at DIUs; details of the training resource teams available for the State; the State capacity building plan, as per the profile of the participants; head-wise budget estimates; batch-wise training planner; and hospital-wise training status. This was despite the fact that these components were required to be included in the ATP, under the Capacity Building Guidelines.

As per the Annual reports of BSSS for the years 2021-23²⁶, it conducted various capacity building related activities. However, it did not provide details of training events organised, hospital capacity building activities carried out, impact studies etc., to Audit. Therefore, Audit could not ascertain whether capacity building activities were actually conducted during FYs 2020-21 to 2022-23.

Due to lack of proper training to the staff, instances of rejection of pre-authorisation and non-payment of claims due to lapses on the part of *Pradhan Mantri Arogya*

²⁵ Such as the number of resource persons; proportion of resource material available against the agreed topics; number and percentage of individuals who satisfactorily completed the training sessions etc.

²⁶ Annual Report of BSSS for FY 2023-24 was not prepared (as of September 2024).

Mitras (PMAMs)²⁷/ Medical Coordinators (MEDCOs)²⁸ of empanelled hospitals were noticed (**Paragraph 1.9.1 and 1.9.4**).

CEO, BSSS, replied (April 2022 and December 2024) that: (i) the ATP for FY 2018-19 and 2019-20 had not been prepared (ii) comprehensive capacity-building plans for the years 2020-21, 2021-22, 2022-23, and 2023-24 were meticulously prepared for approval from the Executive Body (iii) training programmes for various stakeholders had been also organised as per the needs of the organisation.

While BSSS agreed that ATPs for the years, 2018-19 & 2019-20 were not prepared, it was noted that ATP for FYs 2020-21 to 2022-23 did not include necessary components required under the Capacity Building Guidelines. Moreover, supporting documents in respect of reply was not provided to Audit.

1.7.5 Non-issuance of Ayushman Cards in 595 villages

The PMJAY Scheme aimed to provide health cover to all the targeted 1.21 crore beneficiary families of the State.

Audit noted that data in respect of villages where no *Ayushman* Cards had been issued, was not available on <https://dashboard.pmjay.gov> (portal) and the updated status in this regard was also not provided by BSSS to Audit. However, Audit examined the data available (on 05 September 2024) in the ‘Village Penetration Dashboard’ of ‘Insights-PMJAY’ portal.

As per data available on this portal, Audit noticed that out of total 44,559 villages in the State, there were 595 such villages (1.34 *per cent*) which although had eligible PMJAY beneficiaries no *Ayushman* Cards had been issued to them. As a result, there were no *Ayushman* Card holders in these 595 villages, of which 112 villages pertained to the 10 sampled districts.

Thus, targeted beneficiaries under these 595 villages were deprived of the intended benefits of the Scheme, which was indicative of poor IEC activities and monitoring mechanism under the Scheme.

BSSS did not provide (December 2024) the latest status of *Ayushman* Cards issued in these 595 villages and reply to the audit observation.

1.7.6 Use of uncleaned database for identification of beneficiaries of the Scheme

The Beneficiary Empowerment Guidebook for the Scheme provided that NHA and SHAs were to ensure that beneficiaries had access to accurate, complete and timely information, so that they could fully avail of their rightful entitlements under the Scheme. The beneficiaries for PMJAY were initially selected from the SECC 2011 database. However, later on the data of families covered under NFSA was

²⁷ *The Pradhan Mantri Arogya Mitras (PMAM's) are the first contact person in the hospitals empanelled under the Scheme. PMAMs assist the patients and coordinates with beneficiaries and the hospital. They are trained in software use, patient registration and interaction with beneficiaries and hospital staff.*

²⁸ *The MEDCO, i.e. the Network Hospital Doctor, initiates the pre-authorisation process, by submitting all mandatory information (such as details of the illness and the proposed surgery), as per the specific package.*

integrated (February 2024) to the existing BIS database of the Scheme. As such, data in BIS was sourced from both the SECC & NFSA database, for the purpose of identification of the targeted beneficiaries. Further, the name of a person was the basic search criteria, if he/she wanted to check his/her eligibility for the Scheme.

The administrative/database operator at an empanelled hospital/Common Service Centre (CSC) had to search through the PMJAY list to determine if the person was covered under the Scheme. This search was to be performed by Name and Location or Ration Card No. or mobile number (collected during data drive) or the ID printed on the letter sent to family.

As per BIS database, 266.08 lakh PMJAY cards were generated in the State till March 2024. In this regard, during analysis of BIS database pertaining to identification of beneficiaries under the Scheme, it was observed that:

- field pertaining to name of 11,502 beneficiaries in the BIS database, was blank;
- the fields pertaining to 'father's name' and 'mother's name', were also blank, in cases of 88,582 beneficiaries and 1,83,67,907 beneficiaries, respectively; and
- there were 2,900 beneficiaries wherein beneficiary names contained special characters such as '&', '#', '&#' and '%'.

Thus, use of the uncleaned databases could potentially result in the presence of invalid beneficiaries in the PMJAY ecosystem.

CEO, BSSS, while accepting the audit observation replied (November 2024) that: (i) in view of the challenges of SECC data and to reach the goal of expanding the beneficiary coverage, GoB adopted NFSA database (ii) any update in the NFSA data would be updated in the BIS database through the Application Programming Interface (API) and the API integration was in progress.

1.7.7 Addition of members to existing households without ensuring their eligibility

Scheme guidelines allowed for addition of new members to a PMJAY eligible household, if they became part of the household, either by marriage, or by birth, or by adoption. As per the 'Beneficiary Identification Guidelines' (Addendum-II) (July 2020) issued by NHA, in Bihar, only a female member of PMJAY eligible family, married into a non-PMJAY eligible household, would continue to avail the benefits of PMJAY. Member addition was permitted to an existing PMJAY eligible household only if the date of birth/date of adoption/date of marriage registration was on or after 01 April 2011 (the SECC database was as of 01 April 2011).

Subsequently, 'Beneficiary Identification Guidelines' (Addendum-III) (December 2022) of the Scheme allowed for addition of new members to eligible families on the basis of relationships of: (a) Son (b) Daughter (c) Daughter-in-law (d) Wife and (e) Mother and father of a son who was originally listed in SECC database on

the basis of birth certificate/ marriage certificate/ adoption certificate, establishing relationship with an existing member.

Analysis of BIS data, furnished by BSSS, as on 31 March 2024, disclosed the following, which were contrary to the Scheme guidelines:

- the IT system permitted addition of new members to any existing household of SECC, on the basis of a document that was not allowed for this purpose under the Scheme guidelines, viz. 'ration card'. A total of 2,325 members were found to have been added in the database on the basis of ration cards. New members should have been added only based on valid documents like birth/adoption certificate, marriage certificate *etc.*
- in respect of the data as on 30 December 2022, as per 'year of birth' column of beneficiaries (in cases where 'birth certificate' was furnished as the base document for establishing eligibility), 1,650 beneficiaries had actually been born before the year 2011. Therefore, these 1,650 beneficiaries were not eligible to be included as an 'added member' in the existing household as per the Beneficiary Identification Guidelines but were nevertheless found added to the database.
- though the Beneficiary Identification Guidelines, did not permit addition of male members as Scheme beneficiaries on the basis of marriage certificate, 40 out of 837 beneficiaries added on the basis of marriage certificates, were male.

Thus, the IT system did not trigger the requisite alerts, in cases of addition of beneficiaries on the basis of inadmissible documents.

CEO, BSSS, replied (November 2024) that SHA works on the application/platform developed and maintained by NHA. The BIS module did not have a feature that triggered alert while adding a new member.

The reply was not acceptable, as BSSS was responsible for verification of beneficiaries. Further, the reply was not specific to the audit finding.

1.7.8 Matching of demographics during verification of PMJAY beneficiaries

The Beneficiary Identification Guidelines stipulated that the State was to appoint an agency (ISA)²⁹ to carry out verification of the data of identified beneficiaries. Beneficiary Identity Document and PMJAY database, were to be checked by the ISA functionaries, side by side, for validation along with the confidence score³⁰. For approval of verification of beneficiary, threshold confidence/match score of 70 was required.

Analysis of data furnished by BSSS, as on 31 March 2024, relating to the BIS, disclosed that out of 2,66,07,647 beneficiaries:

²⁹ According to the Beneficiary Identification Guidelines, a State could appoint either an Insurance Company or a Trust, to carry out verification of the data of identified beneficiaries.

³⁰ It is a score determined by the BIS on the basis of closeness of name, location, family member between the PMJAY records and documents provided for verification.

- verification of 19,93,110 beneficiaries (seven *per cent*), was approved even though the confidence/match score was zero. Further, verification of 1,77,05,268 beneficiaries (67 *per cent*), was approved, even though the confidence/match score was 1. This implied that beneficiaries had been verified/registered without sufficient identity documents.
- verifications of 21,30,381 beneficiaries (eight *per cent*) had been carried out by the Agency without fetching any match score.

Audit further observed that out of 52,491 disabled cards, 16,736 (32 *per cent*), consisted of those verifications where the system failed to generate any match score, indicating a possibility of error/malfeasance.

Thus, the Agency did not carry out the necessary scrutiny, before verification of beneficiaries, which was indicative of poor monitoring of BIS activities by the BSSS.

CEO, BSSS, replied (November 2024) that: (i) there was no guidelines related to Threshold Score for approving the beneficiary (ii) generation of matching/confidence score is a system driven process, which is provided by NHA and (iii) sometimes application does not generate any match score even in case of matching of beneficiary details with source data.

The reply, in regard to the threshold limit, was not acceptable, since, as per the information provided by NHA, the threshold limit for the State of Bihar was 70. Moreover, verification of beneficiaries had been approved even at 0, 01 or without any match scores.

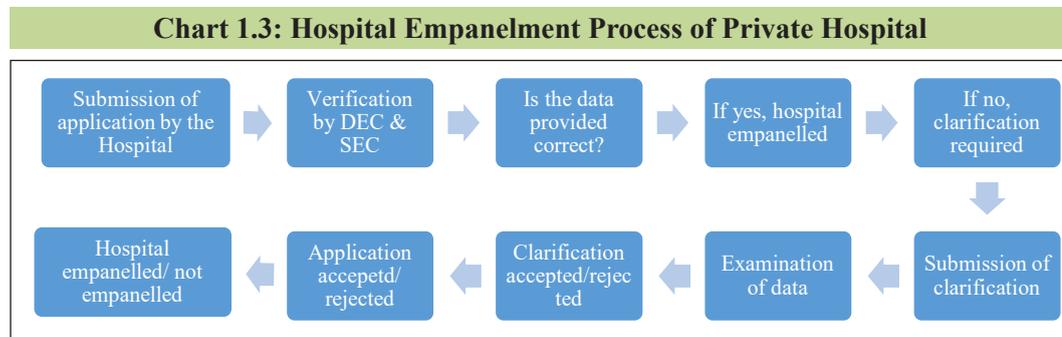
Thus, against the objective of covering 1.21 crore families and 6.18 crore beneficiaries to achieve Universal Health Coverage under PMJAY, only 2.56 crore beneficiaries (41 *per cent*) were verified as of March 2024 in the State. Also, irregular award of work and avoidable payments to ISA were observed. Apart from this, non-constitution of an IEC Cell, non-preparation of IEC plans, inadequate IEC activities and poor capacity building by BSSS, led to poor coverage of beneficiaries in the State. Besides, usage of unclean databases; addition of members to existing households without ensuring their eligibility; verification of beneficiaries by the ISA without ensuring the required match score were indicative of poor identification in and implementation of the Scheme.

Recommendation 2: The State Government may adhere to the prescribed threshold limit during verification of beneficiaries and consider taking up additional IEC activities at the grass root levels of the Gram Panchayat, to promote awareness about entitlements, benefits cover of the Scheme in order to enhance its impact.

1.8 Hospital empanelment and management

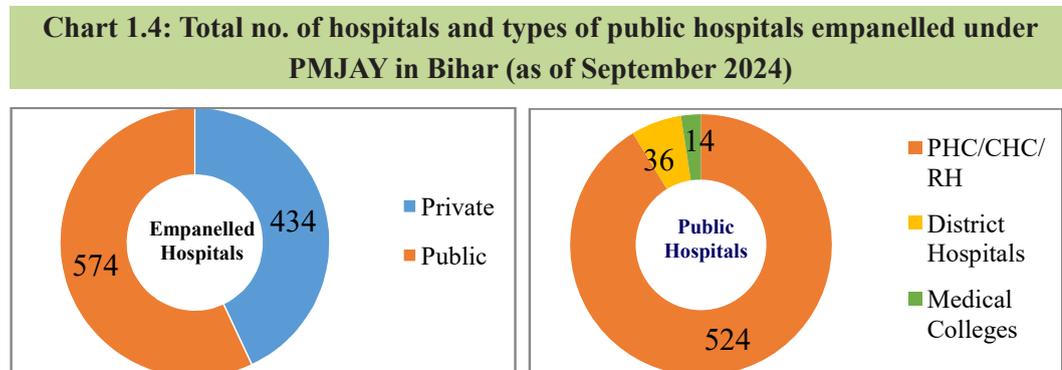
As per the PMJAY 'Guidelines for hospital empanelment and de-empanelment (June 2020)', the SHA, through the State Empanelment Committee (SEC) was empowered to empanel private and public health care service providers in the

State, for providing the benefits of the Scheme. The State was to decide on the mode of verification of empanelment applications & conduct physical verification through District Empanelment Committee (DEC). Under the Scheme, a hospital would be empanelled as a network private hospital, with the approval of the respective State Health Authority, if it adheres to the specified minimum/advanced criteria. A web-based platform, namely the ‘Hospital Empanelment Management (HEM)’ was developed, for registration of healthcare providers under the Scheme. At first, the empanelment application of a private hospital was to be scrutinised by the DEC. After verification of documents, the DEC was to physically inspect the premises of the hospital and verify the presence of details entered into the empanelment application. Thereafter, the DEC was to submit a report to the SEC, in a prescribed format, through the online portal, along with supporting pictures/videos/documents. SEC was to consider, among other things, the reports submitted by the DEC and approve or deny or return the empanelment request. The final decision on the application for empanelment had to be completed within 30 days of receipt of the application. The process *ibid* is depicted in **Chart 1.3**.



(Source: Guidelines of PMJAY)

All public hospitals with in-patient services were deemed empanelled. As per information available on the ‘Hospital Empanelment Dashboard’ of ‘Insights-PMJAY’ portal, 946 hospitals (Public Hospitals: 573 and Private Hospitals: 373) were empanelled as of March 2024. This number increased to 1,008 (by seven *per cent*) (Public Hospitals: 574 and Private Hospitals: 434), by September 2024 (shown in **Chart 1.4**).



(Source: Insight, PMJAY)

1.8.1 Irregular empanelment of hospitals under the Scheme

Test-check of records of the BSSS, relating to 23 empanelled private hospitals, in 10 sampled districts, disclosed the following deficiencies, which existed at the time of agreement and were contrary to the hospital empanelment guidelines:

- Physical verification reports of DECAs, regarding 23 hospitals disclosed that these hospitals did not fulfil the minimum essential criteria pertaining to adequate space, staff, surgical services, round-the-clock ambulance, 24 x 7 emergency services *etc.* Further, as per the physical verification report, one hospital namely Prashant Memorial Charitable, Muzaffarpur, a specialised nephrology hospital, did not fulfil the advanced criteria relating to well-equipped operation theatre, endoscopy investigation support *etc.*, prescribed under the Guidelines.
- Out of 23 hospitals, physical verification reports in regard to five hospitals had not been signed by any member of the team. Further, in five other cases, the reports had been signed by only one member of the DEC.
- Fire Safety Certificates had not been obtained from four hospitals before execution of contracts with them (*Appendix 1.5*).
- Clinical Establishment Certificates had not been obtained from three hospitals before execution of contracts with them (*Appendix 1.5*).

Thus, the DECAs did not ensure: (i) necessary scrutiny of original documents (ii) verification of physical presence of the facilities, as per the details entered in the empanelment application and (iii) inspection of the premises of the hospital, in all cases, prior to submitting their recommendations for empanelment of hospitals.

Further, the SEC also did not ensure fulfilment of the minimum criteria, prior to empanelment, which led to irregular empanelment of hospitals.

CEO, BSSS, replied (April 2022) that: (i) out of 23 hospitals, most of the hospitals had been empanelled during the nascent stage of the Scheme. Hence, lack of adequate manpower and proper training had led to a few procedural lapses (ii) Mahavir Cancer Institute & Research Centre, Patna, which had not submitted the fire safety certificate at the time of the contract, has uploaded the updated fire certificate on HEM Portal. Further, Jahnvi Eye Care & Research Centre, Nalanda, which had not submitted the clinical certificate and bio-waste certificate at the time of the contract, has submitted the same later on (iii) BSSS has reminded the DECAs about obtaining the signature of the competent authorities on the Physical Verification Reports (PVRs) and this is now being complied with.

However, BSSS did not furnish supporting documents and specific replies with regard to not obtaining fire safety certificate and/or clinical establishment certificates; non-fulfilment of minimum/essential criteria; and not obtaining the signature of competent authorities on the physical verification reports, prior to the execution of the contracts for hospital empanelment.

1.8.2 Empanelment of hospitals with expired certificates

Audit scrutinised (September 2024) updated documents related to 23 sampled private hospitals empanelled as of March 2021, provided by 10 test-checked DIUs. It revealed that the Clinical Establishment certificate of seven³¹ empanelled hospitals, Bio Medical Waste Management certificates of three³² empanelled hospitals and Fire Safety certificate of seven³³ empanelled hospitals had expired. Further, two³⁴, out of these 23 sampled empanelled hospitals were found inactive³⁵ (August 2024). This indicated that these hospitals did not conform to the quality standards and criteria prescribed under the Guidelines and also reflected poor quality assurance at these hospitals.

CEO, BSSS, replied (December 2024) that the BSSS had adhered strictly to the guidelines for hospital empanelment and de-empanelment. However, the reason for irregular empanelment of the test-checked hospitals was not provided.

1.8.3 Delay in empanelment of Hospitals

As per the PMJAY Guidelines, after a hospital files its empanelment request, the application was to be scrutinised by the DEC and the process was to be completed within 15 days of receipt of the application. Further, the SHA was to take a final decision on the request of a hospital for empanelment within 30 days of receiving such an application.

Data analysis, carried out on the HEM data (as on 22 August 2024), made available by BSSS to Audit, disclosed the following:

- Out of 1,431 applications received from Private Hospitals for empanelment, 389 were approved. Out of these, 383 (98 *per cent*) were empanelled with delays, as detailed in **Table 1.4**.

Table 1.4: Delay range for empanelment of Hospitals

Delay	1 to 99 days	100 to 199 days	200 days or more
No. of hospitals	132	92	159

(Source: HEM Data provided by BSSS)

- Out of the remaining 1,042 hospitals: (i) 124 hospitals were either de-empanelled/suspended or inactive (ii) empanelment applications of 573 hospitals were rejected (iii) eight hospitals withdrew their application for empanelment (iv) empanelment applications of 131 hospitals were pending for less than 30 days (*i.e.*, no delays in these cases) and (v) empanelment

³¹ Akhand Jyoti Eye Hospital, Satyabhama Netralaya, Jahnvi Eye care and Research Centre, Drishti Eye Hospital, Mahavir Vatsalya Aspatal, Sri Sai Lions Netralaya and Mahavir Cancer Institute & Research Center.

³² I B Smriti Arogya Sadan, Drishti Eye Hospital and Mahavir Vatsalya Aspatal.

³³ Uro Stone Research Center Pvt. Ltd., I B Smriti Arogya Sadan, Swami Vivekanand Cancer Aspatal, Navjivan Multispeciality Hospital & Research Centre Pvt. Ltd., Drishti Eye Hospital, Shanti Memorial Hospital and Dropadi Netrayalay Pvt. Ltd.

³⁴ Mehta Seva Sadan Hospital and Sidhartha Multispeciality Hospital Pvt. Ltd.

³⁵ As per HEM of Insight portal, hospitals which did not initiate pre-authorisation during the last three months, were marked as inactive.

applications of 206 hospitals were pending for approval, with delays of one to 873 days.

Pendency of applications, related to hospital empanelment, indicated that necessary steps for ensuring empanelment of hospitals, in order to provide adequate health coverage under the Scheme, were not being taken within the prescribed timeline.

Similarly, in the 10 sampled districts, Audit observed that there were delays in the empanelment of 188 hospitals, during FYs 2018-19 to 2023-24, at the levels of DEC and SEC, as detailed in **Table 1.5**.

Table 1.5: Delay in empanelment of hospitals at DEC/SEC level (as of March 2024)

Name of district	Delay at the level of DEC (No. of hospitals)	Range of delay (in days)	Delay at the level of SEC (No. of hospitals)	Range of delay (in days)
Muzaffarpur	27	22-507	22	2-565
Nalanda	9	56-192	10	5-190
Purnea	7	38-71	7	3-1,170
Patna	77	5-496	61	3-953
Sitamarhi	6	45-483	5	4-55
Bhojpur	8	21-431	6	4-108
Saran	5	49-243	1	62
Bhagalpur	17	11-143	22	12-362
Darbhanga	25	5-332	18	1-410
Katihar	7	83-314	4	21-189
Total	188		156	

(Source: HEM Data provided by BSSS)

As can be seen from the **Table 1.5**, there were delays of five to 507 days in the empanelment of 188 hospitals by the DEC and delays in empanelment of 156 hospitals ranging between one to 1,170 days at the SEC level.

Delay in empanelment of these hospitals led to denial of health services to the PMJAY beneficiaries in these hospitals during this period and affected the implementation of the Scheme.

CEO, BSSS, replied (December 2024) that delay was mainly on the part of hospitals, due to incomplete online applications and delay in responding to the queries raised or in submitting documents.

The reply was not acceptable as 24 *per cent* hospitals were empanelled with delays of 100 to 199 days and 42 *per cent* hospitals were empanelled with delays of more than 200 days, which was far beyond the prescribed time for empanelment. Further, documentary evidences with regard to delays on the part of hospitals, due to incomplete online applications and delay in responding to the queries raised or in submitting documents were not provided to Audit.

Besides this, efforts can also be made by the Department/SHA to make the hospitals clearly aware of documentary requirements while submitting applications,

establishing a helpdesk mechanism, have a set of FAQ *etc.*, so that issues related to incomplete submissions/queries may be minimised.

1.8.4 Non-setting up of PMAM Kiosks and non-deployment of PMAMs in Hospitals

As per Scheme guidelines for *Pradhan Mantri Arogya Mitras* (PMAMs), a help desk/ kiosk/*Arogya Mitra Sahayta Kendra* was to be mandatorily set up by each EHCP *i.e.* empanelled hospital, to assist beneficiaries in completing the required formalities and undergoing treatment. The EHCP was required to establish this help desk/ kiosk near the reception of the hospital for easy access of the beneficiaries. A standard uniform was also to be provided to the PMAMs, so that they could be easily identified by the beneficiaries in the hospital. The EHCP was also to ensure that services were available 24x7, to the beneficiaries in the hospital.

Scrutiny of records of the sampled 61 hospitals³⁶ (40 Public hospitals and 21 Private hospitals), in 10 sampled districts, disclosed (detailed in *Appendix 1.6*) that:

- PMAM kiosks were not set up in 10 Public hospitals (25 *per cent* of the sampled public hospitals) and one Private hospital (five *per cent* of the sampled Private hospitals).
- In seven Public hospitals (17 *per cent* of the sampled Public hospitals) and two Private hospitals (nine *per cent* of the sampled Private hospitals), the PMAM kiosks were not set up near the reception as required under the guidelines.
- PMAM kiosks were not working 24x7 in 40 Public hospitals (100 *per cent* of the sampled public hospitals) and 14 Private hospitals (66 *per cent* of the sampled Private hospitals).
- In six Public hospitals (15 *per cent* of the sampled Public hospitals) no PMAM was deployed, at the time of Audit.
- Training was not provided to PMAMs deployed in 11 Public hospitals (28 *per cent* of the sampled Public hospitals) and in one Private hospital (five *per cent* of the sampled Private hospitals).
- Standard uniforms were not provided to PMAMs in 36 Public hospitals (90 *per cent* of the sampled Public hospitals) and 15 Private hospitals (71 *per cent* of the sampled Private hospitals).

Thus, the objectives of setting up of easily accessible 24x7 working PMAM kiosks having trained PMAMs, to assist beneficiaries, could not be fully achieved.

Audit also observed that a contract was finalised (July 2022) with a Beneficiary Facilitation Agency (BFA), “Vidal Health Insurance TPA Private Limited” for deployment of PMAMs in all the 570 Public hospitals, but no PMAM was deployed in 215 Public hospitals as on 31 March 2024. Besides, PMAMs were not properly trained in six out of 10 sampled districts and periodical post-training evaluation of

³⁶ Two hospitals namely Mehta Sewa Sadan, Muzaffarpur and Sidharta Multi speciality Hospital, Patna were found to be inactive.

PMAMs was also not done by BSSS. This was indicative of lack of internal control mechanism and monitoring of the system on the part of the concerned authorities of the BSSS.

CEO, BSSS, replied (November 2024) that: (i) 359 dedicated PMAMs were working in Public Hospitals as of September 2024 (ii) the Beneficiary Facilitation Agency had been instructed to deploy PMAM in remaining EHCPs at the earliest and (iii) all the private hospitals had been instructed to setup PMJAY kiosks near the reception area.

1.8.5 Inactive hospitals under the Scheme

Health care services, under PMJAY, were to be provided to beneficiaries through a network of public and private healthcare providers. Accordingly, hospitals were empanelled under the Scheme.

Analysis of data downloaded from the 'Hospital Empanelment Dashboard' of Insights-PMJAY portal, as on 10 September 2024, disclosed that:

- (i) there were 1,005 (Public-574, Private-419 and GoI-12³⁷) hospitals empanelled under the Scheme in the State.
- (ii) out of these empanelled 1,005 hospitals, 226 (Public-204, Private-12 and GoI-10) hospitals (22 per cent) were shown as inactive, as these hospitals had not initiated any pre-authorisation during the last three months *i.e.*, from 09 June 2024 to 09 September 2024.
- (iii) out of these 226 hospitals, 17 (Public-06, Private-01 and GoI-10) did not initiate any pre-authorisation since their empanelment.
- (iv) remaining 209 empanelled hospitals were inactive for a period ranging from three months (June 2024 to August 2024) to 63 months (June 2019 to August 2024).

Lack of pre-authorisation/non pre-authorisation by empanelled hospitals, for long periods of time implied that, despite empanelment, these hospitals were not providing intended benefits to the beneficiaries and was indicative of weak monitoring by the BSSS.

CEO, BSSS, replied (December 2024) that hospitals which remain inactive are dealt with according to NHA guidelines and hospitals that remain inactive for over a year are de-empanelled. As a result, 159 hospitals had been de-empanelled due to their status of being inactive for prolonged period.

It was however noted that, reply in respect of 226 hospitals which remained inactive during 2019-24, was not provided.

³⁷ Public hospitals of GoI are empanelled by NHA and the State has no role in their empanelment. Although, their claims under the Scheme are processed by SHA.

1.8.6 Lack of action regarding hospitals kept under suspension and hospitals de-empanelled

As per the Scheme Guidelines on Hospital Empanelment and De-Empanelment, if there is adequate evidence of malpractices and the EHCP is not able to provide satisfactory justification, the SHA is to suspend the hospital for a specified time period, not exceeding six months. Further, if the EHCP fails to meet and uphold the necessary criteria agreed upon during empanelment or indulge in wrongful acts during treatment, SHA may order de-empanelment of the EHCP along with additional disciplinary actions like penalties, filing of First Information Report *etc.*, as it may deem fit.

Scrutiny of records at the BSSS level disclosed that it had suspended 23 private hospitals during the period April 2020 to March 2024. Out of 23 suspended hospitals, 13³⁸ were de-empanelled (November 2021 to August 2024) after delays ranging from one and a half months to 40 months after lapse of the stipulated period of six months of their suspension. However, Audit observed (August 2024) that BSSS did not take necessary action such as imposing penalties, filing of First Information Report *etc.* with regard to these hospitals in time. Moreover, suspension of six³⁹ hospitals was reviewed and revoked (April 2021 to October 2022) after delays ranging from three months to 20 months, after lapse of the stipulated period of six months of their suspension.

Audit, further, noticed that 35 more hospitals were de-empanelled during the period from April 2021 to March 2024 by the BSSS for various reasons such as DEC/ SHA recommendation, hospitals not finalising the MoU/being non-operational hospitals, not uploading Clinical Establishment certificate *etc.*, as detailed in *Appendix 1.7*.

CEO, BSSS, replied (December 2024) that the hospitals were monitored by the district and State teams as per the guidelines. However, specific reply with regard to delay in de-empanelment and necessary action taken thereafter as per the guidelines, was not provided.

Recommendation 3: The State Government may ensure processing of applications for empanelment of hospitals within the prescribed timeline and reasons for delay may be properly analysed to take corrective measures.

Recommendation 4: The State Government may ensure that dedicated and trained PMAMs are deployed at empanelled hospitals on a 24x7 basis, to assist beneficiaries in completing the required formalities.

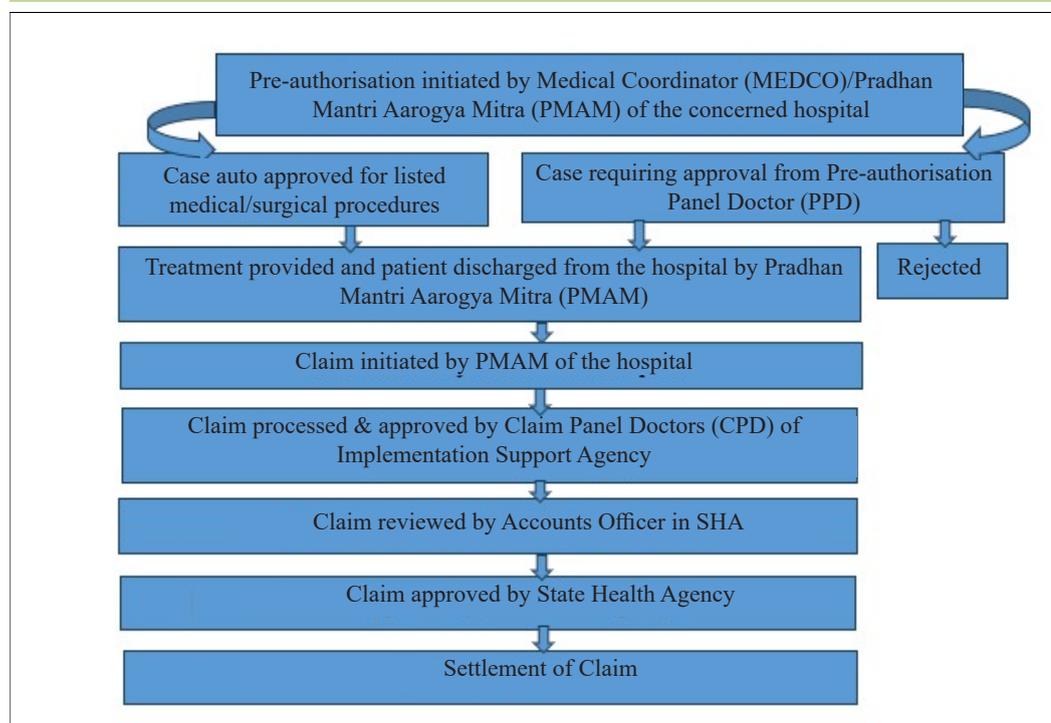
³⁸ Godawari Jiwachh Memorial hospital and Research Centre, Anand Hospital, Mithila Dental Clinic, Aadil Hospital, Aslam Mano Hospital, Radicure Hospital & Research Centre, Janta Nursing Home, Rose the Medicity & Ivf Centre, Gopalganj Aankh Asptal, Khushboo Hospital, Mirganj Eye Hospital, Eyerish World Hospital and Shri Attmaballabh Jan Kalyan Trust.

³⁹ Galaxy Hospital and Heart Care Centre, Advanced Orthopaedic and Spine Centre, Aashish Care & Cure Maternity Hospital Pvt. Ltd, SD Hospital, Tapaswi Multispeciality Hospital Pvt. Ltd. and Nirwana Netralaya.

1.9 Claims Management

Para 4 of the ‘Claims Adjudication Manual’ of the Scheme stipulates that a beneficiary must approach PMAM/MEDCO with a valid *Ayushman* Card for availing the treatment at EHCP. Thereafter, beneficiary verification is conducted using the Beneficiary Identification System (BIS). PMAM/MEDCO of the hospital would then initiate a pre-authorisation request *via* TMS. The pre-authorisation was to be approved by PPD at ISA for initiating treatment of the beneficiary. Claim was to be paid after necessary approvals, as depicted in **Chart 1.5**.

Chart 1.5: Process from pre-authorisation to claim settlement



(Source: Claims Adjudication Manual on PMJAY)

Once relevant documents were submitted by the hospital and verified by Third Party Agencies⁴⁰ (TPAs), through qualified medical staff, settlement of the claim was to be made with the hospital, within the prescribed time⁴¹. Details of all claims (rejected, pending and paid claims) were to be uploaded by the EHCPs on the online system. As per data/information provided by the BSSS, 8.10 lakh claims⁴², amounting to ₹ 911.54 crore, were approved in the State, during FYs 2018-19 to 2023-24.

1.9.1 Rejection of pre-authorisation due to lapses on the part of PMAMs/MEDCOs

As per the PMJAY ‘Claims Adjudication Manual’, before initiating the treatment of a beneficiary under the Scheme, a hospital needed to seek approval from the

⁴⁰ In Bihar, ISA discharges the role of TPA.

⁴¹ 15 days for ‘within the state’ cases and 30 days for ‘inter-state’ cases.

⁴² FY 2018-19: 0.13 lakh claims of ₹ 14.17 crore, FY 2019-20: 1.30 lakh claims of ₹ 126.59 crore, FY 2020-21: 0.82 lakh claims of ₹ 70.91 crore, FY 2021-22: 1.14 lakh claims of ₹ 131.43 crore, FY 2022-23: 1.89 lakh claims of ₹ 219.96 crore and FY 2023-24: 2.82 lakh claims of ₹ 348.48 crore.

designated authority *i.e.*, ISA/ SHA. Pre-Authorisation was to be initiated by MEDCO (Medical Coordinator) of the empanelled hospital and approved by Pre-authorisation Panel Doctor (PPD) of ISA. The PPD was to mention the reason(s) of rejection of the pre-authorisation, if applicable. Hospitals could forward all rejected pre-authorisation requests to the SHA, for review. The SHA could choose to revoke a rejected request and send it back to the PPD.

Analysis of TMS data for the period FYs 2018-19 to 2023-24, pertaining to claims paid to hospitals, indicated that the PPDs had rejected 14,015 pre-authorisation cases, amounting to ₹19.97 crore. Out of these rejected cases, 8,371 claim cases (60 *per cent*) amounting to ₹12.20 crore, were rejected due to lapses on the part of PMAMs/MEDCOs, as shown in **Table 1.6**.

Table 1.6: Rejection of pre-authorisations by PPDs

(Amount ₹ in crore)

Sl. No.	Reasons for rejection of pre-authorisation by PPDs	No. of cases rejected by PPDs (<i>per cent</i> of total rejected cases)*	Amount (<i>per cent</i> of the total amount of rejected cases)
1	Delayed ⁴³ initiation of pre-authorisation	3,129 (22)	2.65 (13)
2	Wrong selection of package	3,364 (24)	6.86 (34)
3	Non-compliance of queries	1,878 (13)	2.69 (13)
Total		8,371 (60)	12.20 (61)

(Source: TMS Data provided by BSSS)

*Total number of cases rejected by the PPDs were 14,015, amounting to ₹ 19.97 crore

Thus, it is evident from **Table 1.6** that out of 14,015 rejected pre-authorisations, 8,371 pre-authorisations (60 *per cent*), amounting to ₹ 12.20 crore (61 *per cent*) had been rejected due to lapses on the part of PMAM/MEDCOs of the concerned hospitals, resulting in denial of benefit of treatment to the concerned beneficiaries, under the Scheme.

Reasons for rejection of pre-authorisations due to lapses on the part of PMAMs/MEDCOs were lack of work related training imparted to them (**Paragraph 1.7.4 and 1.8.4**) as well as lack of availability of PMAMs in the empanelled hospitals (**Paragraph 1.8.4**).

CEO, BSSS, replied (April 2022) that rejection of pre-authorisation was not denial of treatment, as empanelled hospitals could again raise pre-authorisation after rejection. Further, the CEO replied (January 2025) that the agency was instructed to deploy PMAMs in all Government EHCPs. The delay in deployment of PMAMs was due to poor infrastructure and lesser footfall of beneficiaries. The agency had assured that it would complete deployment of PMAMs in all Government EHCPs.

The reply was not acceptable as Audit checked 4,609 cases rejected (as of March 2021) by PPD with the TMS Data provided by BSSS (as of March 2024) and found that none of the rejected 4,609 pre-authorisation cases were re-initiated by the

⁴³ TAT, for the pre-authorisation process, is six hours. In cases where a query is raised to the hospital, another six hours are allotted after receipt of the hospital's response.

empanelled hospitals. Further, as per the suggested deployment schedule prescribed under Para 4.4 of the contract made with BFA, a PMAM was to be deployed even in hospital with zero to 10 cases. Thus, the deployment of PMAMs was not done by the BFA as per the terms of the contract impacting the implementation of the Scheme.

1.9.2 Delay in approval of pre-authorisation

As per Paragraph 7.1 of the Claims Adjudication Manual, before initiating the treatment of a beneficiary under the Scheme, the concerned hospital was required to seek approval from the designated authority, *i.e.* the ISA/ BSSS. Pre-authorisation, for the proposed in-patient registered beneficiary, was to be approved by the PPD. Further, a turn-around time (TAT) of six hours was defined for a pre-authorisation approval. However, in cases where a query had been raised, another six hours were allotted for the hospital's response.

Contrary to the PMJAY Guidelines, analysis of TMS data (up to March 2024), disclosed that:

- During the period, since inception of the Scheme to 31 March 2024, 8.10 lakh claims were paid/processed by BSSS. Of this, in 2.06 lakh cases (25 *per cent*) amounting to ₹ 281.02 crore, the date of admission of the patient to the hospital was prior to the date of pre-authorisation by one to 736 days.
- In case of 85,939 claims, amounting to ₹ 130.38 crore, pre-authorisations had been approved with delays from the date of initiation of pre-authorisation, ranging from one to 817 days.

This indicated improper pre-authorisation, as well as delays in approval of pre-authorisation, in violation of provisions of the Claims Adjudication Manual, which may also lead to delay in extending healthcare benefits to eligible beneficiaries under the Scheme.

CEO, BSSS, replied (December 2024) that approximately 95 *per cent* pre-authorisations had been within TAT. However, sometimes there were delays due to unavoidable circumstances like technical glitches, slow working of TMS portal and server maintenance.

1.9.3 System allowing date of pre-authorisation requests later than date of death of beneficiaries

Scheme Guidelines, pertaining to payment of claims submitted by hospitals, provided a different payment structure for 'mortality' cases. These guidelines also stipulated that if a patient dies after admission in a hospital, but before discharge, payment to the hospital was to be made after audit of such case. Accordingly, three dates (dates of admission, discharge and death) were to be captured in TMS.

As per TMS data, (analysed up to 31 March 2024), a total of 4,468 patients died during treatment in empanelled hospitals. Out of these 4,468 patients, payment amounting to ₹32.60 lakh, was made against 141 claims but in all these cases it was

noted that, as per the TMS data, the dates of pre-authorisations were subsequent to the date of death of the concerned patients. Thus, allowing pre-authorisation initiation, claim submission and settlement for beneficiaries who had already been recorded as deceased, indicated flaws in the TMS and indicated that the System was susceptible to misuse at all user levels.

CEO, BSSS replied (December 2024) that: (i) in medical emergency situations, treatment had been provided without pre-authorisation (ii) in some cases, patients had unfortunately passed away during treatment, and subsequently, pre-authorisation requests had been raised. Most of these cases were from public hospitals.

1.9.4 Non-payment of claims due to lapses on the part of PMAMs/MEDCOs

As per the 'Claims Adjudication Manual' of the Scheme, claims, preferred by EHCPs after discharge of the concerned patients, were to be submitted as soon as possible, but not later than 15 days, post-discharge. For claims submitted beyond these 15 days and up to 30 days, approval of SHA was required while for those being submitted after 30 days to 60 days after discharge, approval of CEO, SHA was needed. No claims were admissible after 60 days of discharge of a patient. Claim Panel Doctors (CPDs) can approve/assign/keep it pending (query)/reject the claims. In case CPDs raise a query, EHCPs were required to submit responses to queries as soon as possible, but not later than 15 days.

Analysis of TMS Case Data, regarding rejected claim cases (as on 31 March 2024), disclosed non-payment of claims due to lapses on the part of PMAMs/MEDCOs. A total of 74,788 claims amounting ₹ 47.39 crore, were rejected by the CPDs and of these 74,788 claims, 34,193 claims (46 per cent), amounting to ₹ 20.30 crore (43 per cent) were rejected due to lapses on the part of PMAMs/MEDCOs, as shown in Table 1.7.

Table 1.7: Non-payment of claims due to lapses on the part of PMAMs/MEDCOs

(Amount ₹ in crore)

Sl. No.	Reason for rejection of claims by CPDs	No. of claims rejected by CPDs (per cent of total rejected cases)*	Amount involved (per cent of total amount of rejected cases)
1	Non-submission of replies of queries in due time	10,487 (14)	6.74 (14)
2	Selection of wrong package	4,503 (6)	4.11 (9)
3	Non-uploading of mandatory/complete documents	6,774 (9)	2.69 (6)
4	OPD converted to IPD	5,887 (8)	1.21 (3)
5	Non-conducting of Biometric Authentication	6,098 (8)	5.14 (11)
6	Initiation of duplicate claims	290 (0.40)	0.24 (0.50)
7	Initiation of claims with delay	154 (0.20)	0.17 (0.40)
Total		34,193 (46)	20.30 (43)

(Source: TMS Data provided by BSSS)

*Total no. of claims rejected by CPDs: 74,788; Amount involved: ₹ 47.39 crore.

Out of these 34,193 rejected claims, 31,209 claims (91 *per cent*) pertained to Public and GoI hospitals and remaining 2,984 claims (nine *per cent*) pertained to Private empanelled hospitals.

Audit observed that rejection of claims was mainly due to: (i) non-deployment of dedicated PMAMs/MEDCOs in every empanelled hospital and (ii) lack of proper training to PMAMs in all aspects of their roles and responsibilities (**Paragraph 1.8.4**).

Audit further analysed TMS data pertaining to period from September 2018 (inception of the Scheme) to 31 March 2024. During analysis, Audit observed that there were total 19,917 such instances in the State, wherein claims amounting to ₹ 35.29 crore were preferred by the concerned hospitals beyond prescribed period of 60 days from the discharge of the patient. As per the 'Claims Adjudication Manual' these 19,917 claims were not admissible. The SHA, however, not only accepted these cases but processed and paid ₹ 33.44 crore also to the claimant hospitals.

Above findings indicate deficiencies in the internal control mechanism, and lack of the monitoring by the BSSS leading to significant number of rejection cases and payment of inadmissible claims.

CEO, BSSS replied (December 2024) that: (i) BSSS was committed to adjudicating claims within the prescribed TAT (ii) however, due to unavoidable circumstances like technical glitches, slow working of TMS portal, server maintenance issue, the delay in processing and disposing of pending cases occurred.

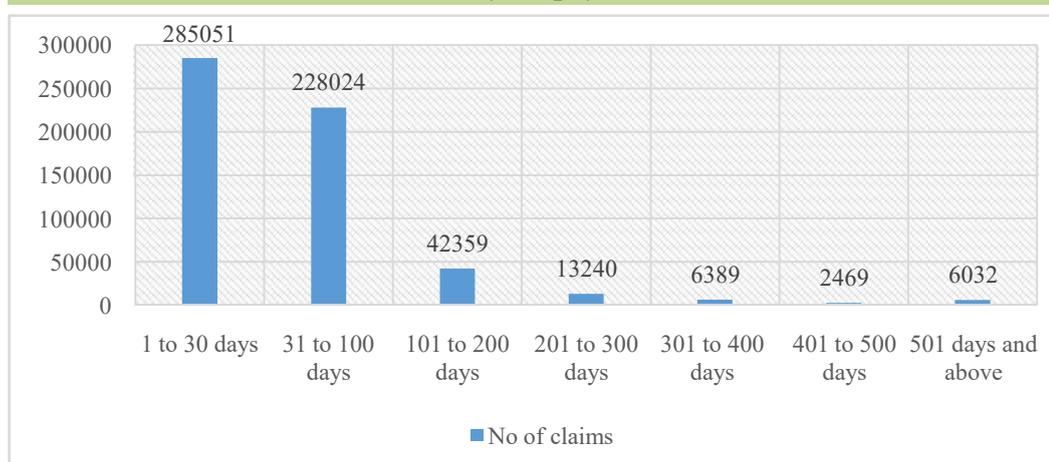
1.9.5 Delays in processing of claim payments

In the 'Claim Adjudication Manual' of the Scheme, for payment of claims, a TAT of 15 days and 30 days, for 'same state' and 'inter-state' (portability)⁴⁴ cases, respectively, was stipulated. Delays, observed in payment of claims that had been paid, as well as in the overdue cases, are discussed in succeeding paragraphs.

1.9.5.1 Delays in payment of claims

Analysis of TMS data, furnished by the BSSS (for the period up to 31 March 2024), disclosed that total 8,09,842 claims amounting to ₹ 911.54 crore were paid to the hospitals. These claims included 'same State (7,09,681)', as well as 'inter-state (1,00,161)' cases. Out of these paid claims, BSSS approved 5,83,564 claims (72.06 *per cent* of total 8,09,842 claims including Same state claims: 5,29,816 and interstate claims: 53,748) amounting to ₹ 675.94 crore, with delays ranging from one to 1,821 days against the TAT prescribed in the Guidelines, as shown in **Chart 1.6**.

⁴⁴ Means that an AB-PMJAY beneficiary got treatment outside his/her home state in any EHCP, in a cashless manner.

Chart 1.6: Delays in payment of claims

(Source: TMS Data provided by BSSS)

It is evident from the **Chart 1.6** that 2,85,051 claims (49 per cent) were paid with delays ranging from one to 30 days and 2,28,024 claims (39 per cent) were paid with delays ranging from 31 to 100 days.

Further, analysis of claims pertaining to ‘same state’ as well as ‘inter-state’ disclosed the following:

In case of 7,09,681 ‘same state’ claims, amounting to ₹ 694 crore, BSSS processed 5,29,816 claims (75 per cent), amounting to ₹ 539.39 crore with delays ranging from one day to 1,821 days (more than 60 months) which included 3,47,533 claims (49 per cent) related to private hospitals and 1,81,021 claims (26 per cent) related to public hospitals (State Government), as detailed in **Table 1.8**.

Table 1.8: Details of ‘same state’ claims paid with delay (in days)

Type of hospital	No. of claims paid with delay (per cent of total claims 7,09,681)	Amount (₹ in crore) (per cent of total amount of claims ₹ 694 crore)	Range of delay (in days)
Private	3,47,533 (49)	360.08 (52)	1 – 1,791
Public (State Government)	1,81,021 (26)	172.64 (25)	1 – 1,821
Public (GoI)	1,262 (0.18)	6.67 (01)	1 – 411
Total	5,29,816 (75)	539.39 (78)	1 – 1,821

(Source: TMS Data provided by BSSS)

Similarly, out of 1,00,161 inter-state (portability) claims amounting to ₹ 217.54 crore, BSSS processed 53,748 claims (54 per cent), amounting to ₹ 136.55 crore, with delays ranging from one day to 1,662 days (more than 55 months). These 53,748 claims included 39,373 claims (39 per cent) related to private hospitals and 10,682 claims (11 per cent) related to public hospitals (State Government), as detailed in **Table 1.9**.

Table 1.9: Details of ‘inter-state’ claims paid with delay (in days)

Type of hospital	No. of claims paid with delay (<i>per cent</i> of total claims 1,00,161)	Amount (₹ in crore) (<i>per cent</i> of total amount of claims ₹ 217.54 crore)	Range of delay (in days)
Private	39,373 (39)	77.49 (36)	1 – 1,488
Public (State Government)	10,682 (11)	29.49 (13)	1 – 1,662
Public (GoI)	3,693 (04)	29.58 (14)	1 – 501
Total	53,748 (54)	136.56 (63)	1 – 1,662

(Source: TMS Data provided by BSSS)

Thus, there were inordinate overall delays ranging from 1 to 1,821 days in processing of claims payment by BSSS. The time taken in approval of claims was in excess of the timeline prescribed in the TAT indicating lack of necessary efforts in timely processing of the claims by BSSS. Such, inordinate delays could also lead to disincentivising beneficiaries from availing the Scheme.

CEO, BSSS, replied (December 2024) that: (i) delay in processing and disposing of pending claims occurred due to unavoidable circumstances like technical glitches, slow working of TMS portal, server maintenance issue *etc.* and (ii) despite the challenges, BSSS adhered to the NHA guidelines and imposed penalties on ISAs when TAT violations were reported.

The reply was not acceptable as, 75 *per cent* same state claims and 54 *per cent* inter-state claims were paid after the stipulated TAT.

1.9.5.2 Delay in payment of overdue claims

In light of criteria mentioned in *Paragraph 1.9.5 ibid*, Audit analysed TMS data, furnished by the BSSS (since inception of the scheme to 31 March 2024) and observed that there were 18,791 overdue claims amounting to ₹35.54 crore in the State. These overdue claims included 13,558 same State claims amounting to ₹ 16.92 crore and 5,233 inter-state claims amounting to ₹ 18.62 crore. Further, these 18,791 claims were pending at the levels of BSSS (4,821), ISA (2,482), Hospital/ MEDCO (6,539) and Bank (4,949).

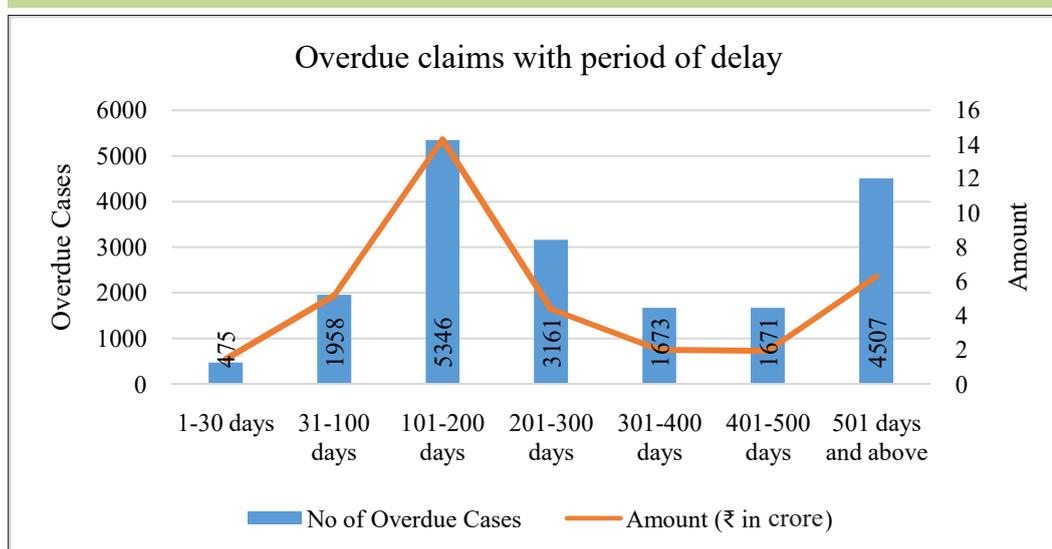
Out of 18,791 overdue claims, 14,284 claims remained overdue for a period of one to 500 days. Remaining 4,507 claims remained overdue for more than 500 days, against the TAT prescribed in the Guidelines. Range of delay, number of claims along with amount involved therein are detailed in **Table 1.10** and **Chart 1.7**.

Table 1.10: Details of period of delay, no. of claims overdue and amount involved

Sl. No.	Period of delay (in days)	No. of claims overdue	Amount (₹ in crore)
1	1-30	475	1.46
2	31-100	1,958	5.18
3	101-200	5,346	14.29
4	201-300	3,161	4.39
5	301-400	1,673	2.00
6	401-500	1,671	1.94
7	501 and above	4,507	6.28
Total		18,791	35.54

(Source: TMS Data provided by BSSS)

Chart 1.7: No. of overdue claims



(Source: TMS Data provided by BSSS)

Further, analysis of the 4,507 overdue claims, pending for 501 days and above, disclosed that these were pending at different levels *i.e.* with BSSS, ISA, concerned hospital and bank.

CEO, BSSS, replied (December 2024) that the claims had been processed based on the merit of cases within the stipulated TAT. In certain instances, where there were deficiencies in the claim documents, queries were raised by the CPD/ACO/BSSS, leading to delays in the processing of these claims.

The reply was not acceptable since, out of 18,791 overdue claims, 18,316 (97 *per cent*) were paid with delays ranging from 31 days to more than 501 days, indicating that most of the claims were paid after the stipulated TAT.

1.9.6 Payment of claims more than once without *Aadhaar* authentication

Scheme guidelines stipulated that *Aadhaar* linked biometric authentication, was mandatory at the time of admission and discharge. However, if the PMJAY beneficiaries' family/members did not have an *Aadhaar*, they were eligible for treatment only once without an *Aadhaar*.

Analysis of TMS data furnished by BSSS (as of 31 March 2024), disclosed that:

- Out of total 8,09,842 claims paid, amounting to ₹911.54 crore, 1,72,696 claims, amounting to ₹199.30 crore, had been processed without biometric authentication of the beneficiaries at the time of admission and discharge.
- These 1,72,696 claims included 52,055 claims (30 *per cent*), amounting to ₹40.30 crore, pertaining to those patients who had availed of the benefit of treatment under the Scheme more than once.
 - Out of 52,055 claims, 45,971 claims amounting to ₹35.04 crore were availed by the beneficiaries who had received benefits more than once, without undergoing mandatory *Aadhaar*-based biometric authentication at the time of admission and discharge in violation of the Scheme

guidelines. These 45,971 beneficiaries although, verified/ registered for the Scheme on the basis of *Aadhaar*, did not undergo mandatory *Aadhaar* based authentication during their admission and discharge from the hospital.

- In the remaining 6,084 claims amounting to ₹5.26 crore, beneficiaries were verified/registered on the basis of other Government IDs and had availed of the benefit more than once, without *Aadhaar* based biometric authentication, at the time of their admission and discharge.

Thus, 52,055 claims, amounting to ₹40.30 crore, had been processed more than once without *Aadhaar* based biometric authentication, against the provisions of the Scheme Guidelines.

This indicated lack of input control mechanism in the IT system, as also lack of monitoring by BSSS.

CEO, BSSS, replied (December 2024) that: (i) in case the biometric authentication was not completed due to any issue during the treatment process then the approval may be given as special case (ii) The TMS system displayed “No” against the biometric authentication for such requests.

However, as pointed out by Audit, out of 1,72,696 claims which had been processed without biometric authentication at the time of admission and discharge up to March 2024, 52,055 claims (30 *per cent*), pertained to those patients who had availed of the benefit of treatment, under the Scheme, more than once. It was also obvious from the above reply that claims were processed without biometric authentication more than once.

1.9.7 Payment of claims on disabled *Ayushman* Cards

As per the Scheme Guidelines, in case of any malpractice/unintentional error, NHA was to disable PMJAY (*Ayushman*) Cards, after a conclusive investigation by SHA/ NHA.

Analysis relating to TMS data, furnished by BSSS (as of March 2024), disclosed that:

- there were total 52,491 disabled *Ayushman* Cards in the system.
- payment in 2,186 claims amounting to ₹2.31 crore, had been made on the 2,186 *Ayushman* Cards disabled by BSSS, out of which:
 - in 21 claims, pre-authorisations amounting to ₹ 3.44 lakh were initiated after 10 to 434 days from the date of disabling of the card. In these 21 claims payment of ₹2.92 lakh was made.
 - in 185 claims, payment of ₹26.26 lakh was made on cards that had been disabled two to 1,626 days (more than 54 months) prior to payments.

Thus, payment of claims on disabled *Ayushman* Cards indicated lack of necessary internal control mechanism in the BSSS and input control in the IT system.

CEO, BSSS, replied (November 2024) that: (i) treatment had been availed on 2,609 disabled cards (ii) out of which, 1,963 were found genuine and 47 cards were marked as fraud (iii) field audit was pending for remaining 599 cards (iv) the TMS portal did not allow registration and initiation of pre-authorisation requests on disabled cards by issuing alerts, through pop-up messages, in such cases and (v) there was no technical provision in the TMS portal to check whether the card was active or disabled at the time of claim adjudication.

The reply was not acceptable, as BSSS did not provide supporting documents related to the genuineness of 1,963 cards. Further, final action against 47 fraud cards and field audit against 599 cards were still pending under BSSS.

1.9.8 Suspicious payment of claims on non-existent *Ayushman* Cards

In the light of criteria mentioned in Paragraph 1.9 *ibid*, Audit analysed TMS data (as of March 2024) related to claim payments pertaining to sampled hospitals and cross checked it with the BIS data (as of August 2024) provided by BSSS and data of beneficiaries available (as of November 2024) on the ‘Beneficiary portal’ of the Scheme (*beneficiary.nha.gov.in*). Audit observed that payments amounting to ₹25.25 lakh were made against 139 *Ayushman* Cards appearing in TMS. However, data analysis disclosed that these *Ayushman* Cards did not exist either in the BIS database provided by BSSS or in the data of beneficiaries available on ‘Beneficiary portal’ of the Scheme.

The possibility of suspicious payments of ₹25.25 lakh made against 139 PMJAY cards cannot be ruled out (*Appendix 1.8*).

The CEO, BSSS, replied (February 2025) that the matter had been referred to NHA to furnish a conclusive response to audit.

1.9.9 Non-utilisation of claim amounts by the Public hospitals, as per the guidelines

As per the Scheme Guidelines regarding use of ‘Claim Amount Earned by Public Hospitals’ issued (June 2020) by NHA, 25 *per cent* of the claim amount, earned by public hospitals under the Scheme was to be disbursed to the medical and paramedical teams, as an incentive for patient care after deducting the share of the ASHA workers (₹ 100 for claim amount less than ₹ 5,000 and ₹ 200 for claim amount more than ₹ 5,000). Remaining 75 *per cent* of the total claim amount was to be used by concerned healthcare unit⁴⁵ for infrastructure development, procurement of equipment, on human resources *etc.*

Revised Scheme guidelines (July 2021) prescribed utilisation of claim revenues by Government hospitals on payment of staff incentives (15 *per cent*); hospital

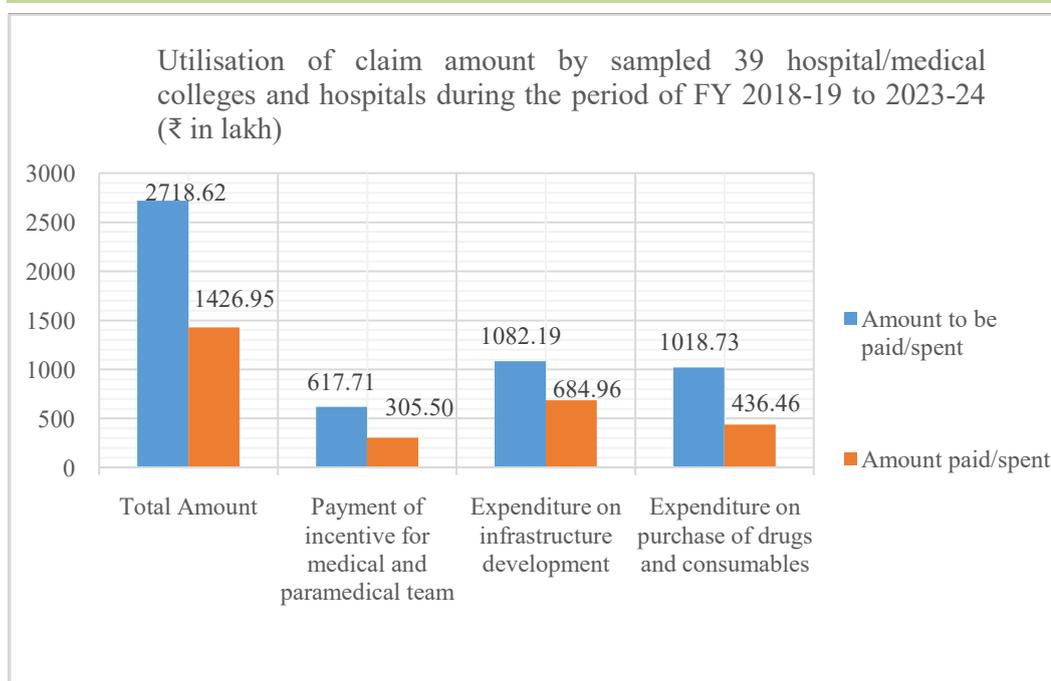
⁴⁵ *Medical College /Indira Gandhi Institute of Cardiology (IGIC)– 60 per cent of the remaining 75 per cent amount was to be used for infrastructure development, procurement of equipment, on human resources etc. The remaining 40 per cent of the amount was to be used for purchase of consumables for beneficiaries.*

District Hospitals to Primary Health Centres– 70 per cent of the remaining 75 per cent amount was to be used for infrastructure development, procurement of equipment, on human resources etc. The remaining 30 per cent was to be used for purchase of consumables for beneficiaries.

upgradation and quality improvement (20 per cent); purchase of medicines, consumables, and pathology/radiology tests (40 per cent); salary for HR (15 per cent) and administrative expenses (10 per cent).

Audit scrutinised data (up to 31 March 2024) provided by BSSS (September 2024) in respect of utilisation of claim amounts by 39 sampled public hospitals/medical colleges⁴⁶ in the sampled districts (*Appendices 1.9, 1.10 and 1.11*). Details of utilisation of claim amounts by the sampled hospital/medical college and hospitals are given in **Chart 1.8**.

Chart 1.8: Utilisation of claims amount by sampled hospital/ medical colleges and hospitals



(Source: Data provided by BSSS)

As can be seen from **Chart 1.8**, during 2018-24, 39 public hospitals/medical colleges and hospitals received claim amounts ₹27.19 crore for payment of incentive to Medical and Paramedical Teams, infrastructure development, and purchase of drugs and consumables *etc.*, but out of this, the sampled Public hospitals/medical colleges and hospitals spent only ₹14.27 crore (52 per cent) for this purpose, during the period.

In this context, Audit further observed the following:

(i) Payment of incentives to Medical and Paramedical teams

- **Non-payment of incentives to Medical and Paramedical Teams:** During 2018-24, eight sampled Public hospitals/medical colleges and hospitals did not pay any incentive to their medical and paramedical teams despite receiving an incentive amount of ₹ 0.16 crore for this purpose (*Appendix 1.9*).

⁴⁶ Information in respect of claim utilisation was not provided by one sampled hospital i.e. "Sadar hospital, Purnea" out of 40 sampled public hospitals.

- **Less payment of incentives to Medical and Paramedical Teams:** During 2018-24, 30 sampled public hospitals/medical colleges and hospitals received ₹ 5.84 crore for payment of incentives to their medical and paramedical teams. Out of this only ₹ 2.65 crore (45 *per cent*) was spent by these hospitals on incentives. Percentage of less payment against the amount to be paid ranged from three *per cent* to 99 *per cent* (*Appendix 1.9*).
- **Excess payment of incentives to Medical and Paramedical Teams:**
During 2018-24, one sampled Public hospital received ₹0.18 crore for incentive payment to their Medical and Paramedical teams but spent ₹0.40 crore (223 *per cent*) for the said purpose (*Appendix 1.9*).

(ii) Expenditure on infrastructure development

- **No expenditure on infrastructure development:** During 2018-24, four sampled Public hospitals/medical colleges and hospitals did not spend any amount on infrastructure development of hospitals despite receiving an amount of ₹0.71 crore for this purpose (*Appendix 1.10*).
- **Less expenditure on infrastructure development:** During 2018-24, 16 sampled Public hospitals/medical colleges and hospitals received ₹7.04 crore for infrastructure development against which, sampled public hospitals/medical colleges and hospitals spent only ₹2.25 crore (32 *per cent*). Percentage of less expenditure against the amount to be spent, ranged from eight *per cent* to 97 *per cent* (*Appendix 1.10*).
- **Excess expenditure on infrastructure development:** During 2018-24, 19 sampled Public hospitals received ₹3.06 crore for infrastructure development of hospitals/medical colleges and hospitals. Against this, sampled public hospitals/medical colleges and hospitals spent ₹4.60 crore (150 *per cent*) on infrastructure development. Percentage of excess expenditure against the amount to be spent ranged from 0.45 *per cent* to 163 *per cent* (*Appendix 1.10*).

(iii) Expenditure on purchase of drugs and consumables

- **No expenditure on purchase of drugs and consumables:** During 2018-24, 14 sampled Public hospitals/medical colleges and hospitals did not spend any amount on purchase of drugs and consumables for hospitals despite receiving an amount of ₹0.85 crore for this purpose (*Appendix 1.11*).
- **Less expenditure on purchase of drugs and consumables:** During 2018-24, 22 sampled Public hospitals/medical colleges and hospitals received ₹7.20 crore for purchase of drugs and consumables for hospitals/medical colleges and hospitals. Out of this, sampled public hospitals/medical colleges and hospitals spent only ₹1.65 crore (23 *per cent*) on purchase of drugs and consumables. Percentage of less expenditures against the amount to be spent ranged from seven *per cent* to 97 *per cent* (*Appendix 1.11*).

- **Excess expenditure on purchase of drugs and consumables:** During 2018-24, three sampled Public hospitals/medical colleges and hospitals received ₹2.13 crore for purchase of drugs and consumables for PMJAY beneficiaries. Against this, sampled public hospitals/medical colleges and hospitals spent ₹2.71 crore (127 per cent) for purchase of drugs and consumables. Percentage of excess expenditure against the amount to be spent ranged from seven per cent to 55 per cent (*Appendix 1.11*).

Above findings indicated that sampled Public hospitals/medical college and hospitals did not properly utilise the claim amounts received for: (i) payment of incentives to medical and paramedical teams (ii) development of infrastructure of public hospitals and (iii) purchase of drugs and consumables for beneficiaries, during 2018-24. This was indicative of poor monitoring with regard to utilisation of claim amount by public hospitals under BSSS.

Thus, there were several issues in the processing of claims, such as rejection of pre-authorisations and non-payment of claims due to deployment of untrained/non-dedicated PMAMs. Further, issues like delay in approval of pre-authorisation and processing of claim payments; payment of claims on disabled *Ayushman* Cards were also noted. Apart from these issues, non-utilisation of claim amounts released to public hospitals, for the intended purposes of providing incentives, infrastructure development, purchase on drugs and consumables *etc.*, indicated poor claim management and hampered the healthcare program's effectiveness.

Recommendation 5: The State Government may expedite claim payments, as per the stipulated turnaround time.

Recommendation 6: The State Government may contemplate measures to further strengthen the IT system, to curb cases of claim payments without biometric authentication and payment of claims on disabled cards.

1.10 Monitoring and Evaluation

1.10.1 Shortage of manpower at SHA/BSSS/DIUs

In the light of Guidelines issued by the NHA, the Health Department, GoB, sanctioned (January 2019) various posts (at the SHA, as well as at the DIUs level), for execution and monitoring of PMJAY. Further, the Department again (January 2020) sanctioned additional posts (at the SHA level) of General Medical Officers (MBBS), BIS manager, software developers, Internal Auditors, along with some other posts, such as Accountant and Database Administrator, for execution and monitoring of works under the Scheme.

Audit noted that out of total sanctioned strength of 183 posts at various levels, 100 posts (55 per cent of sanctioned), under different categories, were vacant in BSSS and DIUs, as on 31 March 2024 (*Appendix 1.12*).

Audit further observed that:

At SHA/BSSS level	At DIU level
<ul style="list-style-type: none"> • There were total 69 posts sanctioned at BSSS level, out of which, 31 (45 per cent) were lying vacant (as of March 2024). • During 2018-24, the post of CEO was held by the Additional Secretary, Health Department, GoB, as an additional charge. • No appointments were made (up to September 2024) for the posts of Additional CEO, Data Base Administrator, System Analyst, Software Developer, Executive Assistant-State etc. • Internal Auditors, Accounts Officers and Accountants were also not appointed (up to September 2024) against their sanctioned posts, which affected the necessary accounting and auditing activities of BSSS, reflecting its poor financial management, as commented in the Paragraph 1.6.1 of the Report. 	<ul style="list-style-type: none"> • There were total of 114 posts sanctioned at DIUs level and of these, 69 posts (61 per cent) were lying vacant (as of March 2024). • One post each for DPC, Information Technology Manager and District Accounts Executive was sanctioned in all 38 DIUs. Against these sanctioned 114 posts, only 28 DPCs and 17 Information Technology Managers were appointed and deployed in DIUs, as on 31 March 2024. No appointments were made against the sanctioned posts of District Accounts Executives in any of the DIUs. • As of March 2024, District Programme Coordinators were not appointed and deployed in 10 DIUs⁴⁷. District Information Technology Managers (DITMs) were not appointed and deployed in 21 DIUs⁴⁸. Further, posting of both DPCs and DITMs was not made as of October 2024 for four DIUs⁴⁹.

Besides, NHA directed (June 2023) that District Operation Manager (DOM) should be appointed for: (i) handling grievances related to beneficiaries/hospitals (ii) tackle fraud/ abuse incidents and (iii) coordinate capacity building activities etc. BSSS, however, decided (November 2023) that the duties of the DOM would be performed by the DITM in addition to their own allocated work. Audit observed that post of DITM was vacant in 21 DIUs (as of March 2024). Therefore, the assigned works of both DOMs and DITMs which included crucial aspects like handling grievances related to beneficiaries/hospitals, tackling fraud incidents, anchoring capacity building activities, ensuring smooth functioning of IT platform, ensuring regular troubleshooting, preparing detailed reports etc., were impacted in these 21 DIUs.

Hence, shortage of manpower at BSSS and DIUs affected the effective and smooth implementation of the Scheme as discussed in **Paragraph 1.7** (Beneficiary identification and verification), **Paragraph 1.8** (Hospital empanelment and management) and **Paragraph 1.9** (Claims management).

CEO, BSSS, replied (November 2024) that: (i) BSSS had recruited DPC and DITM for all 38 districts and present manpower shortage was due to resignation/

⁴⁷ Araria, Bhagalpur, Darbhanga, Katihar, Kisanganj, Muzaffarpur, West Champaran, East Champaran, Sheikhpura and Sitamarhi.

⁴⁸ Araria, Arwal, Banka, Bhojpur, Jamui, Jehanabad, Kaimur (Bhabhua), Khagaria, Lakhisarai, Munger, Muzaffarpur, Nawada, West Champaran, Purnea, Rohtas, Saharsa, Samastipur, Sitamarhi, Siwan, Supaul and Vaishali.

⁴⁹ Araria, Muzaffarpur, West Champaran and Sitamarhi.

death of employees (ii) tender had been floated for selection of HR Agency for undertaking recruitment, and (iii) the recruitment process would be completed shortly.

1.10.2 Fraud Prevention, Detection and Control

The National Anti-Fraud Unit (NAFU)⁵⁰ was set up (October 2018) by NHA, to work with the support of State Anti-Fraud Units (SAFU), created at the State level. SAFU was constituted (November 2019) in Bihar, to undertake medical audit, field audit and beneficiary audit of suspicious cases, referred to it by the medical team of the SHA and shared by the NAFU. Further, as per Anti-Fraud Framework Practitioners' Guidebook of PMJAY, Medical Audit was required to be conducted for all mortality cases.

1.10.2.1 Lack of necessary action against triggered suspicious cases

As per the Anti-Fraud Framework Practitioners' Guidebook, the SAFU portal had been created in the TMS to enable seamless due diligence in suspicious cases. The triggered suspicious cases are identified by NHA and are shared with SAFU via the TMS portal to conduct necessary investigation.

Analysis of triggered suspicious cases data provided by BSSS (since inception of the Scheme to 31 March 2024) disclosed that, 20,740 suspicious cases involving claims payment of ₹15.78 crore were triggered as of 31 March 2024. These cases were triggered due to reasons such as duplicate documents, discrepancies in registration number of treating doctors, same picture/document used in multiple cases *etc.*

As per data made available by BSSS, response status of these triggered cases are as detailed in **Table 1.11**.

Table 1.11: Details of response status of BSSS in triggered suspicious cases

Sl. No.	Response status of BSSS	No. of claims	Amount paid (₹ in lakh)
1.	Dismissed by SHA-AFO	9,105	1,084.78
2.	Rejected by SHA-AFO	3,397	32.97
3.	Dismissed by NHA-AFO	99	9.10
4.	Not fraud	512	41.20
5.	Terminated suspicious case rejected by SHA	1	0
6.	Not Suspicious	35	0
7.	Confirm fraud	67	2.56
8.	Process with partial amount	846	76.39
9.	No action taken	2,469	319.44
10.	Under investigation by SHA-AFO	325	8.45
11.	Suspicious cases sent to SHA-AFO	202	1.84
12.	Desk audit submitted	14	0
13.	Query to MEDCO by SHA-AFO	28	0
14.	Sent for field verification after desk audit	3	0
15.	Send to desk audit	234	0.63
16.	Sent for field verification	1	0
17.	Field verification submitted after desk audit	4	0.18
18.	Fraud	3,398	0
Total		20,740	1,577.54

(Source: Data provided by BSSS)

⁵⁰ NAFU was created at NHA level for overall monitoring and implementation of anti-fraud framework.

As indicated in **Table 1.11**, BSSS was not required to take any further action in 13,149 triggered cases (Sl. No. 1 to 6). Out of the remaining 7,591 cases, related to claims payment of ₹4.09 crore, the BSSS was to take action such as investigation followed by rejection of payment, partial payment or recovery of paid claims. BSSS, however, recovered only ₹0.93 lakh in 16 cases.

Thus, BSSS took action against only 16 confirmed fraud cases and necessary action was not taken against remaining 7,575 triggered cases with claim amount of ₹ 4.08 crore (September 2024). This indicates that BSSS did not observe due diligence and was lax in taking necessary investigations/actions in respect of all the remaining triggered suspicious cases.

CEO, BSSS, replied (December 2024) that: (i) recovery of claim paid in 16 confirmed fraud cases amounting to ₹ 1 lakh, had since been effected (ii) BSSS had received 31,876 suspicious cases for investigation and 25,104 cases had been disposed involving amount of ₹ 23.07 crore and (iii) suspicious cases were under review and the remaining pending cases shall be disposed of with due diligence.

However, specific reply in respect of 7,575 triggered cases was not provided to Audit.

1.10.3 Shortfall in meetings

1.10.3.1 Shortfall in meetings of the Governing Body and Executive Committee

The By-laws of BSSS stipulated that its Governing Body was empowered to review the activities and programmes undertaken and to give overall policy guidelines and directions for efficient functioning. The meeting of the Governing Body was to be held at least twice a year, and the Annual General Meeting (AGM) was to be called within six months of the end of the concerned financial year.

Audit observed that only six meetings⁵¹ of the Governing Body were held against provisioned 11 meetings, since the inception of the Scheme and up to 31 March 2024. Further, the Annual General Meeting of the Governing Body, which was required to be called within six months of the end of the concerned financial year, for approving the Receipt and Payment Account, Income and Expenditure Account, Balance Sheet and Annual Report of BSSS, for the past financial year, was also not held. Consequently, the Receipt and Payment Account, Income and Expenditure Account and Balance Sheet, for the FYs 2018-19 to 2021-22, were approved with delays ranging from six months to 29 months. Further, Audit noted that the Annual Accounts of the BSSS for FY 2022-23 were not approved by the Governing Body while for FY 2023-24, the Annual accounts were not prepared (as of September 2024).

Similarly, in order to efficiently and effectively carry out the functions /affairs of BSSS viz., administrative, financial, academic and recruitment (as mentioned in **Paragraph 1.2**), the Executive Committee was to meet as often as necessary, but at least once in each quarter of the year. However, only 10 meetings of the

⁵¹ 29.10.2018; 28.01.2020; 28.08.2020; 23.03.2021; 17.02.2023 and 20.02.2024.

Executive Committee were held against provisioned 22 meetings since inception of the Scheme to 31 March 2024. This led to lack of overall monitoring of the Scheme and deficiencies in its implementation, besides leading to lacunae in the internal control mechanism.

CEO, BSSS, replied (April 2022 and November 2024) that the meetings of Executive Committee and Governing Body shall be conducted on time, in future.

1.10.3.2 Delay in constitution and shortfall in meetings of the State Grievance Redressal Committee (SGRC) and District Grievance Redressal Committees (DGRC)

The grievance redressal system for the Scheme comprised a three-tier structure, comprising of committees set up at the National, State and District levels. The State Grievance Redressal Committee (SGRC) was to be set up by SHA within 15 days of signing MoU (June 2018) with the Central Government to perform all functions related to handling and resolution of all grievances, which had either been received directly or had been escalated through the District Grievance Redressal Committees (DGRCs). Similarly, the SHA was required to constitute a DGRC within 15 days of signing MoU (June 2018), in each district, for handling and redressal of grievances within the respective districts. As per the Guidelines, the DGRC and SGRC meetings were to be conducted regularly, every month, on a specific day.

Audit observed that the SGRC was set up in August 2019, while the DGRCs were constituted during September 2018 to January 2021 in the sampled districts. Thus, the SGRC was constituted after eleven months from the commencement of the Scheme and the DGRCs in eight sampled districts⁵² were constituted with a delay ranging from seven months to 28 months from the commencement of the scheme.

Further, it was also noted that no meeting of the SGRC was conducted during the FYs 2018-19 to 2021-22 and in 2023-24. Only eight meetings of the SGRC were held against the required 12 meetings during FY 2022-23.

Further, the meetings of DGRC were not held in 10 sampled districts up to FY 2023-24 except Bhojpur, where two meetings were held during the period FYs 2021-22 and 2022-23, against stipulated 59 meetings⁵³, since the inception of the Scheme and up to 31 March 2024.

CEO, BSSS, replied (December 2024) that: (i) the SGRC was set up in the month of August 2019 and reconstituted in July 2021 (ii) as per the Office Memorandum (16 February 2024) regarding the Meeting Schedule of committees, the DGRC and SGRC meetings were to be conducted once in every quarter or as and when required, whichever occurred sooner and (iii) BSSS was committed to adhering to these provisions and will ensure timely and regular organisation of SGRC meetings.

The reply corroborated the audit finding.

⁵² Constituted in April 2019 with delays of seven months: Bhojpur; Bhagalpur; Muzaffarpur; Nalanda, Saran; constituted in May 2020 with delay of 20 months: Darbhanga; constituted in January 2021 with delay of 28 months: Patna and Sitamarhi.

⁵³ Number of meetings required to be held (Bhagalpur:59; Bhojpur:59; Darbhanga:46; Katihar:66; Muzaffarpur:59; Nalanda:59; Patna:38; Purnea:66; Saran:59; and Sitamarhi:38).

1.10.4 Non-obtaining of beneficiaries' feedback

The Beneficiary Empowerment Guidebook, issued by NHA (March 2019), stipulated that the SHA should ensure that beneficiaries provide honest feedback about their experience, at the time of discharge from hospital, so that further improvements could be made. PMAMs would also seek feedback from them about their period of stay in hospital.

Audit scrutiny of information provided (September 2024) by 63 sampled hospitals of 10 sampled districts disclosed that 37 hospitals did not obtain feedback from the PMJAY beneficiaries after treatment. It was also seen that out of the 26 hospitals that obtained the feedback, 12 hospitals⁵⁴ were using formats prescribed by the NHA while 14 hospitals⁵⁵ were using formats issued by the BSSS (September 2024).

Comparing the NHA and BSSS formats for obtaining feedback, Audit observed that in the BSSS format, certain important feedback parameters prescribed in the Beneficiary Empowerment Guidebook, such as the quality of services received at the hospital, overall cleanliness of the hospital, support provided by PMAM, providing prescribed medicines at the time of discharge *etc.*, were not available. As a result, necessary feedback about the beneficiary's experience against these parameters and the quality of treatment in the hospitals could not be ensured.

CEO, BSSS, replied (December 2024) that: (i) as per protocol, all empanelled hospitals were required to upload the *Mangal Kamna Patra* (patient feedback form), which was auto-generated by the Transaction Management System (TMS) (ii) this form captured patient satisfaction, required for the processing of claims and (iii) to maintain quality and streamline the claim process, regular audits were conducted.

The reply was not acceptable as, documents in support of reply (*Mangal Kamna Patra* as patient feedback form) were not provided to Audit and such feedbacks were also not found available in claim documents downloaded from the TMS.

1.10.5 Lack of Medical Audit of mortality cases

As per Paragraph 7.5 of the Claims Adjudication Manual of PMJAY, SHA shall carry out an internal audit of 10 *per cent* of the approved cases and 100 *per cent* of the mortality cases. Besides, if a patient died after admission in the hospital and before discharge, payment to the hospital was to be made after medical audit, at the prescribed rates, ranging from zero to 100 *per cent*, depending upon the situation of death.

⁵⁴ IB Smiriti Arogya Sadan, Darbhanga; Akhand Jyoti Eye Hospital, Saran; Sadar Hospital, Muzaffarpur; Ashoka Hospital, Muzaffarpur; Ashish Care and Cure Hospital, Muzaffarpur; PHC Gaighat, Muzaffarpur; District Hospital, Biharsarif; RH Asthawan; VIMS Pawapuri; RH Chandi; Navjeevan Multispecialty Hospital, Sitamarhi and GGS Sadar Hospital, Patna.

⁵⁵ RH Jagdishpur; CHC Sahar; Shanti Memorial Hospital, Kanchan Shalya Niketan; District Hospital, Ara; Bathua Nursing Home; Mahavir Cancer Institute and Research Centre; Mahavir Vatsalya Hospital, Jeevak Heart Hospital and Research Institute Pvt. Ltd., Sri Sai Lions Netralaya, IGIMS, Patna; Dropadi Netralaya Pvt. Ltd., Jahnvi Eye Care and Research Centre and Drishti Eye Hospital, Nalanda.

Data analysis of claim payment of hospitals (based on TMS data provided by BSSS for the period up to 31 March 2024) disclosed that there were 4,468 mortality cases in 265 hospitals involving claim amount of ₹ 17.16 crore, since inception of the Scheme. BSSS, however, intimated (September 2024) that medical audit of total 3,548 mortality cases⁵⁶ related to 97 hospitals involving claim amount ₹ 11.72 crore (up to March 2024) had been conducted by SAFU, through Mortality and Morbidity Review Committee (MMRC).

Audit further observed that:

- (i) out of 3,548 mortality cases, wherein medical audit was conducted by SAFU, BSSS provided details of the medical audit in respect of only 2,625 mortality cases to the CAG Audit team.
- (ii) out of these 2,625 mortality cases, 2,089 cases were recorded as genuine, and remaining 536 mortality cases were recorded as either 'suspicious' or 'under scrutiny/recovery'. Information related to admissible payment of claims to hospitals after medical audit of 536 mortality cases, final action taken there-against after medical audit and actual recovery effected, was not made available to Audit.
- (iii) details of medical audit of remaining 923 (3,548-2,625) mortality cases, admissible payment of claims to hospitals after such medical audit, final action and actual recovery effected against concerned hospitals were not provided to Audit, despite requisitioned.

Thus, it was obvious that BSSS had not conducted medical audit of all the mortality cases, in violation of the Claims Adjudication Manual of NHA (February 2019). Further, necessary action was also not taken with regard to claim payment/ recovery after medical audit of mortality cases.

CEO, BSSS, replied (December 2024) that non-conduct of medical audit was due to lack of human resources at the early stages of the Scheme. The MMRC has now been strengthened by the addition of a Medical officer in MMRC. Out of medical audit of 2,625 cases, recovery of ₹ 6,15,060 under 63 cases has been affected, on the basis of recommendation of the MMRC.

The reply was not acceptable as the documents in support of: (i) recovery made in 63 cases (ii) final action taken against concerned hospitals after medical audit and amount recovered in 536 mortality cases; and (iii) medical audit conducted in remaining 923 mortality cases along with the final action taken, were not made available to Audit.

⁵⁶ 923 mortality cases from September 2018 to September 2022, data for which was kept in hard copy and 2,625 mortality cases from October 2022 to March 2024, data for which was kept in soft copy.

1.10.6 Non-submission of expenditure reports to BSSS by Public hospitals/ Medical college and hospitals

CEO, BSSS, directed (January 2020) that all Civil Surgeons and DPCs should submit expenditure reports regarding the claim amounts utilised by public hospitals under their jurisdiction, for onward submission to NHA. Further, Guidelines for Utilisation of Claim Revenues by Government Hospitals under PMJAY (July 2021) stipulates that all government hospitals should submit quarterly financial reports including statement of total receipts and expenditure to the SHA within the 5th working day of the month after the end of the quarter.

As per information provided by BSSS, it paid claim amount of ₹240.02 crore to 558 public hospitals/medical college and hospitals during FYs 2018-25 (up to August 2024). Audit observed that out of 558 public hospitals/medical colleges and hospitals, 270 public hospitals/medical colleges and hospitals did not submit expenditure reports related to ₹172.31 crore (72 per cent of total claim payments) to BSSS in violation of the Scheme Guidelines and directions of the BSSS (*Appendix 1.13*). The expenditure reports in respect of claim payment amount and its utilisation by public hospital/medical colleges up to March 2024 were not provided to Audit, despite requisitioned.

Further, Audit also observed that the revised Guidelines issued by NHA (July 2021) regarding how claims were to be utilised by Government hospitals (*i.e.* on Staff incentives; Human Resources; Medicines, consumables, and pathology/radiology tests; Hospital upgradation and Quality Improvement; and Administrative expenses) were also not circulated by BSSS to DIUs.

Therefore, neither the hospitals were aware about proper utilisation of claim amounts received by them nor did the BSSS monitor the expenditure incurred by them. Hence, the objective of utilising the claim amount paid to public hospitals as an incentive for patient care, improvement of hospital infrastructure and purchase of drug and consumables for patients, could not be fulfilled.

CEO, BSSS, replied (November 2024) that: (i) Guidelines for disbursement of incentives and for expenditure on development of infrastructure facilities and purchase of consumables and variables *etc.*, were circulated to all EHCPs for compliance (ii) the proportion of expenditure done was not exactly as per expectation and major share of incentives remained undistributed/unspent and (iii) action was being taken to strengthen and ensure the utilisation of EHCPs funds, through MIS software along with periodic review meetings at the highest level.

The reply was not acceptable as it did not circulate the revised guidelines regarding use of claim amounts in government hospitals issued by NHA (July 2021).

Thus, Audit noted that there was shortage of important functionaries/manpower at the State Health Agency/District Implementation Units and delays in provision of necessary infrastructure to DIUs. The monitoring and internal control mechanism for the implementation of the Scheme was also poor, as there were shortfalls in the meetings of the Governing Body, Executive Committee and State Grievance

Redressal Committee. There was also lack of necessary action regarding disabled cards, fraud cases and medical audit of mortality cases.

Recommendation 7: The State Government may improve the monitoring mechanism by strengthening the State Anti Fraud Unit, to prevent and detect frauds.

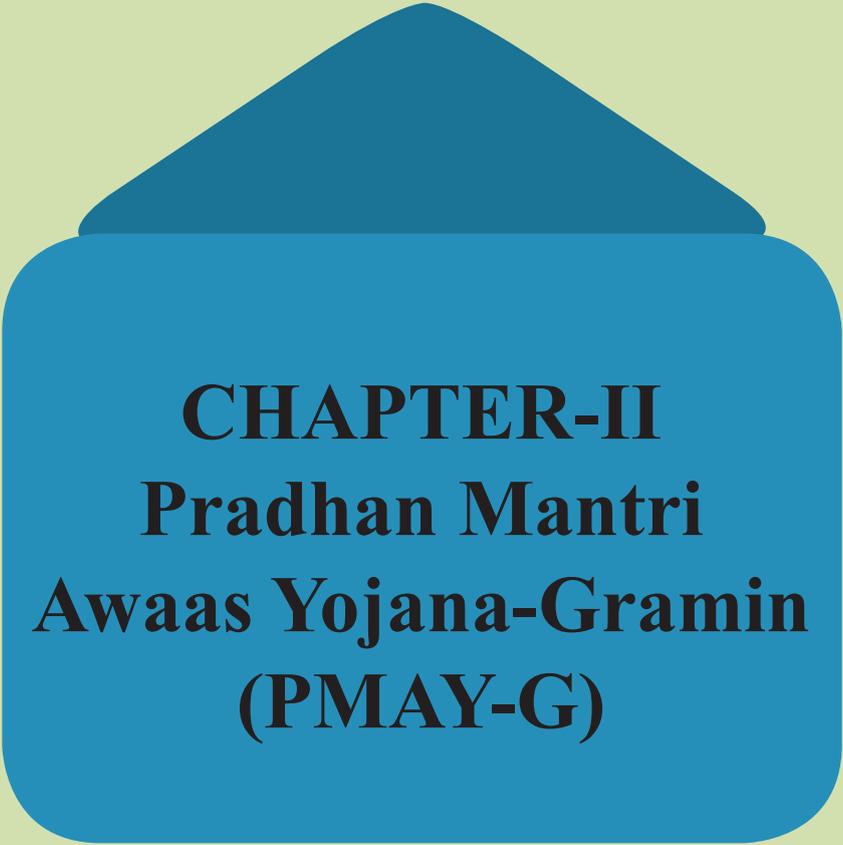
1.11 Beneficiary Survey

A beneficiary's survey was conducted (September 2021 to January 2022) by Audit amongst PMJAY beneficiaries, wherein the sampled beneficiaries were asked to provide feedback regarding their awareness, experience, expectations and level of satisfaction with the Scheme.

A survey questionnaire was issued to the beneficiaries, by the audit team, to ascertain the effectiveness, adequacy of access, impact of implementation of PMJAY and feedback on beneficiary satisfaction. Audit interacted with 590 beneficiaries of the sampled hospitals and GPs/ULBs, pertaining to 10 sampled districts. The key observations of the survey were as follows:

- Out of 3,884 family members of 590 beneficiaries, 2,717 members (70 per cent), had not been issued *Ayushman* Cards under the Scheme.
- 425 beneficiaries (72 per cent) were not aware of the existing grievance redressal system/complaint cell under the Scheme. Out of the remaining 165 beneficiaries, 146 beneficiaries were aware of the grievance redressal system but, 21 (14 per cent) out of them were not satisfied with the grievance redressal system.
- 38 beneficiaries (six per cent) had to spend money from their pocket, for their treatment at the hospitals.
- 157 beneficiaries (27 per cent) were not aware about the Scheme benefits.
- 481 beneficiaries (82 per cent) were not aware about the availability of a helpline number. Besides, 581 beneficiaries (98 per cent) had not used the helpline number.
- 142 beneficiaries (24 per cent) were not aware of any empanelled hospital, where benefits of the Scheme could be availed.

The outcome of the beneficiary survey corroborated the audit observations related to non-issuance of *Ayushman* Cards to the beneficiaries and inadequate IEC activities which was one of the reasons for poor coverage of beneficiaries under the Scheme in the State.



CHAPTER-II
Pradhan Mantri
Awaas Yojana-Gramin
(PMAY-G)

CHAPTER II

RURAL DEVELOPMENT DEPARTMENT

Pradhan Mantri Awaas Yojana-Gramin (PMAY-G)

2.1 Introduction

The *Pradhan Mantri Awaas Yojana-Gramin* (PMAY-G) (Scheme) was started with an aim to provide a *pucca* house with basic amenities to all homeless households and households in *kutcha* and dilapidated houses, by 2022. The Scheme was to benefit those beneficiaries who had been identified through the Socio Economic and Caste Census (SECC), 2011 and during the *Awaas+* Survey of 2018-19.

Prior to the introduction of PMAY-G, the *Indira Awaas Yojana* (IAY) was launched in 1996, to address the housing needs of Below Poverty Line (BPL) households in rural areas. The *Indira Awaas Yojana* was later restructured as the *Pradhan Mantri Awaas Yojana-Gramin*. The PMAY-G Scheme has been under implementation since 01 April 2016.

Under the Scheme, the State was to construct 37.40 lakh *pucca* houses by 2022, in two phases. Under Phase-I, 11.73 lakh houses were to be constructed in three financial years *viz.*, FY 2016-17 to 2018-19. Under Phase-II of the Scheme, 25.67 lakh houses (including 10.27 lakh households identified through *Awaas+* Survey) were to be built in the next three financial years (FYs 2019-20 to 2021-22).

Subsequently, GoI, extended (September 2022) the target of housing for all to be achieved through this Scheme by March 2024.

The key features of the Scheme are as follows:

- Identification and selection of beneficiaries on the basis of housing deficiency and other social deprivation parameters¹ identified in SECC 2011 and verified by the *Gram Sabhas*.
- Provision of a unit assistance of ₹ 1.20 lakh² and ₹ 1.30 lakh³ (for Integrated Action Plan⁴ districts), respectively, in three instalments, linked to the progress of construction of the house.

¹ Households with no adult members between ages 16 to 59, female headed households with no adult male members between ages 16 to 59, households with no literate adult above 25 years, households with any disabled members and no able bodied adult members and landless households deriving the major part of their income from manual casual labourer, living in zero, one or two rooms houses, with *kutcha* wall and *kutcha* roof.

² ₹ 40,000 for construction up to plinth level, ₹ 40,000 for construction up to roof casting and ₹ 40,000 for completion of the house.

³ ₹ 45,000 for construction up to plinth level, ₹ 45,000 for construction up to roof casting and ₹ 40,000 for completion of the house.

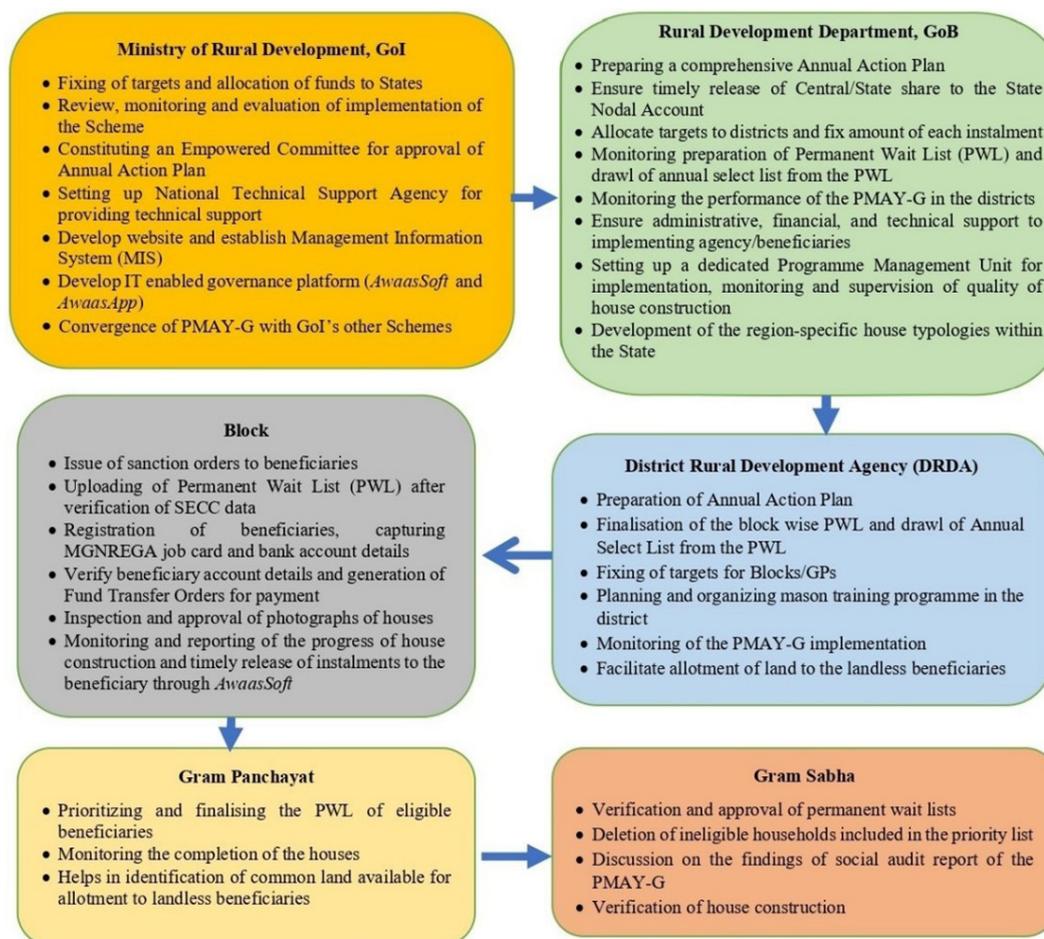
⁴ A Government of India initiative focusing on the development of selected tribal and backward districts, particularly those affected by Left Wing Extremism (LWE). In Bihar, there are 11 IAP districts (Arwal, Aurangabad, Jehanabad, Gaya, Rohtas, Jamui, Nawada, Munger, Kaimur, Sitamarhi and West Champaran).

- The cost of assistance to be shared between Central and State Governments in the ratio of 60:40.
- Convergence with other Government schemes, such as National Rural Drinking Water Programme (NRDWP), *Deen Dayal Upadhyay Gram Jyoti Yojana* (DDUGJY), *Pradhan Mantri Ujjawala Yojana* (PMUY), *Swachh Bharat Mission-Gramin* (SBM-G) and *Mahatma Gandhi National Rural Employment Guarantee Scheme* (MGNREGS) for providing basic amenities, viz., drinking water, electricity, clean and efficient cooking fuel, toilet, treatment of solid and liquid waste and providing labour wages as per prescribed person-days *etc.*
- Beneficiaries to be facilitated to avail a loan of up to ₹ 70,000 per unit from banks/ non-banking financial institutions.
- Payments to the beneficiaries' Bank/Post Office accounts, linked to *Aadhaar*.
- Allotment of land to landless beneficiaries by the Government of Bihar (GoB).

2.2 Organisational set-up

At the Central level, the Ministry of Rural Development (MoRD) provides financial support and allocates targets from the SECC 2011 database and data of identified households collected during the Special Survey conducted in 2018-19. The Rural Development Department (Department) of the GoB, is the nodal Department for implementing the Scheme in the State. At the Department level, the Scheme is being implemented through a State Project Management Unit (SPMU), headed by the Secretary to the Rural Development Department. At the District level, District Rural Development Agency (DRDA) headed by the Deputy Development Commissioner (DDC) acts as the District Project Management Unit (DPMU). Besides, at the Block level, Block Project Management Unit (BPMU), headed by the Block Development Officer (BDO), has been declared as the dedicated Project Management Units for planning, implementation, monitoring and supervision of the Scheme. Roles of the Central and State Governments in financing, planning, implementation, monitoring and supervision of the Scheme, are shown in **Chart 2.1**.

Chart 2.1: Roles of the Central and State Governments in the planning, execution and monitoring of PMAY-G



(Source: Framework for Implementation (FFI) of PMAY-G)

2.3 Audit Objectives

The Performance Audit was conducted to ascertain whether:

- the mechanism for identification, selection and verification of beneficiaries in the implementation of the Scheme was transparent and adequate;
- the implementation of the Scheme, including convergence with other Government schemes, was in compliance with the guidelines of PMAY-G;
- financial management of the Scheme was in compliance with Scheme guidelines and other financial rules, as applicable; and
- the mechanism for monitoring and evaluation of the Scheme was adequate and effective.

2.4 Audit Criteria

The audit criteria were derived from the following:

- Framework for Implementation (FFI) of PMAY-G, issued by the Ministry of Rural Development, Government of India (GoI), from time to time;
- Notifications, Circulars, Compendium and Orders issued by GoI and GoB, from time to time;

- Physical and financial progress reports under the Management Information System (MIS)- *AwaasSoft*⁵, available on the website of the Scheme; and
- SECC 2011, Permanent Wait List (PWL), Proceedings of the *Gram Sabhas* and Minutes of meetings of the monitoring committee constituted at the national, State and district levels.

2.5 Audit scope and methodology

Audit Scope

The Performance Audit, for the period from FY 2017-18 to FY 2021-22, was conducted during November 2022 to March 2023 and then between September 2024 to January 2025 to update the audit findings up to March 2024. The audit was conducted through test-check of records of the office of the Secretary, Rural Development Department (RDD) at the apex level; DRDAs, headed by Deputy Development Commissioner at the district level; and the BDOs and Programme Officers, MGNREGA, at the block level.

Audit methodology

The audit methodology included collection and analysis of data/information, examination of records, questionnaires and conduct of Joint Physical Verification (JPV) of houses along with field functionaries of the Department at the Block level. Audit also conducted a Beneficiary Survey to assess the effectiveness of the Scheme. Photographic evidence was also obtained, wherever necessary, to substantiate the audit findings.

The audit commenced with an Entry Conference, held on 11 October 2022, with the Secretary, RDD, GoB, wherein audit objectives, audit criteria, audit scope and methodology were discussed.

An Exit Conference was held with the Secretary, RDD on 20 July 2023 to discuss the audit findings. The Audit report has incorporated the response furnished by the Department during the Exit Conference and detailed replies provided (November 2023) thereafter.

2.6 Audit sampling

For sampling, the districts of the State were stratified into four geographical regions and 30 *per cent* of the districts were selected from each stratum, by using the Probability Proportional to Size without Replacement (PPSWOR)⁶ method, with the size measure being the total PMAY-G expenditure during the last five years. Out of 38 districts in the State 10 districts⁷ were selected. Further, 28 Blocks from 10 sampled districts and 126 GPs from the sampled blocks were selected, by using the PPSWOR method.

⁵ *A web based transactional electronic service delivery platform, to facilitate e-governance in PMAY-G.*

⁶ *A sampling method where each unit has a probability of selection proportional to its size.*

⁷ *Arwal, Aurangabad, Banka, Darbhanga, Khagaria, Madhubani, Samastipur, Saran, Sitamarhi and Vaishali.*

Further, for JPV of beneficiaries, Audit selected 1,103 beneficiaries from the sampled GPs, through the Systematic Random Sampling Method, from groups of people categorised as ‘Others’, ‘SC’, ‘ST’ ‘Minority’, ‘Physically Handicapped’, ‘Landless’, ‘Houseless’ and ‘Destitute living on alms’, as per availability. In addition, 351 beneficiaries selected randomly, on the spot, from the villages visited, were also physically verified and surveyed. Thus, a total of 1,454 beneficiaries were surveyed (*Appendix 2.1*).

2.7 Previous audits

The Comptroller and Auditor General of India (C&AG) conducted a Performance Audit of the erstwhile *Indira Awaas Yojana* (IAY) covering the period from April 2008 to March 2013. The Performance Audit featured as Report No. 37 of 2014 on the Union Government, Ministry of Rural Development. The Report pointed out issues such as non-assessment of housing shortage, lack of transparency in beneficiary selection, lack of convergence, low quality of houses, lack of technical supervision, loans not availed by the beneficiaries and weak mechanism for monitoring. While designing the framework for PMAY-G, GoI, took into account the gaps observed in the implementation of IAY. The present audit, however, observed that the issues which affected the efficiency of IAY continued to persist in PMAY-G as well.

2.8 Limitations to this Performance Audit

During updation of the audit findings for the period 2022-23 to 2023-24, records & information required from the Department and at unit levels were either not produced or produced partially. Further, replies to updated audit findings were not provided by the Department.

Audit Findings

2.9 Financial Management

For the implementation of the Scheme, MoRD releases funds to the States, on the basis of the Annual Action Plans prepared by the State and approved by the Empowered Committee, chaired by the Secretary, MoRD, Government of India. The State Government is required to release its matching share within 15 days of the release of the Central share. The State is also required to maintain a State Nodal Account⁸ (SNA) to administer the Scheme funds.

Audit observed various irregularities with regard to financial management of the Scheme, as discussed in the succeeding paragraphs.

2.9.1 Release of funds and expenditure incurred under the Scheme

The cost of assistance for the construction of houses, under the Scheme, was to be shared between GoI and State Government in the ratio of 60:40. The central allocation was to be released in two equal instalments to the State, which, along with the matching State’s share, was required to be deposited in the SNA. The details of release of funds, and expenditure incurred under the Scheme, during FYs 2017-18 to 2023-24, are shown in **Table 2.1**.

⁸ A savings bank account, operated in a Scheduled Commercial Bank at the State level.

Table 2.1: Release of funds and expenditure incurred, during FYs 2017-18 to 2023-24

(₹ in crore)

Financial Year	Opening Balance	Funds released		Other receipts*	Total available funds	Total expenditure incurred (percentage w.r.t col. 6)	Closing Balance
		Central share	State share				
1	2	3	4	5	6 = 2+3+4+5	7	8= 6-7
2017-18	2,857.37	579.39	386.26	115.61	3,938.63	3,243.42 (82)	695.20
2018-19	695.20	4,363.71	2,909.14	212.67	8,180.72	5,679.60 (69)	2,501.13
2019-20	2,501.13	4,902.88	3,268.59	211.75	10,884.35	8,126.86 (75)	2,757.49
2020-21	2,757.49	6,595.07	2,810.30	41.87	12,204.73	9,978.93 (82)	2,225.81
2021-22	2,225.81	2,948.10	3,551.82	677.36	9,403.09	5,865.34 (62)	3,537.75
2022-23	3,537.75	7,355.42	4903.61	46.95	15,843.73	12,152.33 (77)	3,691.40
2023-24	3,691.40	00	00	119.79	3811.20	968.86 (25)	2,842.34
Total		26,744.57	17,829.72	1,426.00	64,266.45	46,015.34 (72)	

(Source: Information furnished by RDD, GoB)

* Other receipts include interest received from bank, receipts from other scheme (IAY), Funds Transfer Order (FTO) reconciliation adjustment etc.

Table 2.1 indicates that the expenditure incurred on the Scheme, against available funds ranged between 25 and 82 per cent, during FYs 2017-18 to 2023-24. Less expenditure, against the available funds, was mainly due to delayed release of the Central share (**Paragraphs 2.9.4**) and State share (**Paragraph 2.9.5**); inordinate delays in release of first instalment to beneficiaries (**Paragraph 2.9.12**) and non-release of all instalments to beneficiaries against completed houses (**Paragraph 2.11.7**).

Details of release of funds for PMAY-G from the State Budget during the FYs 2017-18 to 2023-24, are shown in **Table 2.2**.

Table 2.2: State Budget and release of funds during FYs 2017-18 to 2023- 24

(₹ in crore)

Financial Year	Budget Provisions	Amount of funds released	Short release of funds (percentage) (2)-(3)
1	2	3	4
2017-18	1,666.67	386.26	1,280.41 (77)
2018-19	3,056.52	2,909.14	147.38 (5)
2019-20	3,332.56	3,268.59	63.97 (2)
2020-21	2,878.66	2,810.30	68.36 (2)
2021-22	5,285.95	3,551.82	1,734.13 (33)
2022-23	5,005.60	4,903.61	101.99 (2)
2023-24	78.00	00	78 (100)
Total	21,303.96	17,829.72	3,474.24 (16.31)

(Source: Information furnished by RDD, GoB)

Table 2.2 indicates that during FYs 2017-18 to 2023-24 there was short release of funds in comparison to the State Budget Provisions, ranging from ₹ 63.97 crore to ₹ 1,734.13 crore

The Department replied (August 2023) that: (i) due to release of the Central share in the last week of March, during the FYs 2020-21 and 2021-22 and non-provision of funds in the State Budget, the corresponding State share could not be released on time (ii) in the next FY, the State share had been released after making a provision in the State Budget and (iii) there had been procedural delays in release of first instalments after sanction of houses and payment of instalments due in respect of completed houses.

The reply of the Department was not acceptable as the Scheme has been in execution since 2016-17, and the State should have taken up the matter of delayed release of funds from the Central Government at appropriate levels and made appropriate provision in the State Budget for the Scheme.

2.9.2 Non-remittance of interest earned on Scheme funds to the Consolidated Fund

As per Rule 230(8) of the General Financial Rules, 2017, read with Paragraph 10.1 (1) of Framework for Implementation (FFI) of the PMAY-G, all interest or other earnings against Grants-in-aid or advances (other than reimbursement) released to any grantee institution should mandatorily be remitted to the Consolidated Fund of India and the State on *pro rata* basis, immediately after finalisation of its accounts.

As such, interest earned on Central and State shares of the Scheme funds were to be clearly and separately depicted in the SNA maintained at the State level.

Audit observed that the Department earned interest amounting to ₹ 483.04 crore, during the FYs 2017-18 to 2023-24 on Scheme funds. Out of ₹ 483.04 crore, interest amounting to only ₹ 218.20 crore (interest earned during FYs 2021-22 to 2023-24) was remitted to GoI and the State, in the ratio of 60:40 by the Department. The Department, however, did not remit the remaining interest amount of ₹ 264.84 crore, to the respective Consolidated Funds of India (₹ 158.90 crore) and Bihar (₹ 105.94 crore). Non-remitted amount pertained mainly to the FYs from 2017-18 to 2020-21.

The Department replied (August 2023) that the remittance of interest had been initiated from 2021-22. It also stated that as GoI had not demanded refund of interest for the FYs 2017-18 to 2019-20, remittance for the previous years had not been made.

The reply of the Department was not acceptable as they had to adhere to GFR provisions regarding mandatory remittance of interest earned on Scheme funds to the concerned Consolidated Funds.

2.9.3 Creation of interest payment liability

As per Paragraph 10.7 of the FFI, issued for the implementation of the Scheme by MoRD, Central allocations received by the State were to be transferred to the SNA within 15 days of their receipt. In case of delay, penal interest at the rate of 12 *per cent* per annum would be levied by GoI. This penal interest amount would

then be deducted while releasing subsequent instalments of the Scheme to the State.

Audit observed that during FYs 2017-18 to 2022-23, the State transferred ₹ 1,126.10 crore of the Central share received by it, to the related SNA, with delays, ranging from 14 to 154 days. These delays resulted in creation of interest liability of ₹ 71.08 crore, towards the State exchequer, as well as deprivation of Scheme funds up to this extent in succeeding years.

The Department, while accepting the audit observation stated (August 2023) that there were procedural delays in transfer of funds and the MoRD had been requested (June 2016) to relax this penal clause.

2.9.4 Delays in release of Central share due to delayed submission of proposals by the State

As per Paragraph 10.5.4 (a) of the FFI, the State was to submit the proposal for release of the second instalment of the Scheme funds by 31 December of the concerned financial year.

Audit observed that the State had sent the proposals, for release of the second instalments for the FYs 2017-18 and 2019-20, on 14 March 2019 and 07 October 2020, respectively, *i.e.*, in the next financial years to the concerned FYs. The proposals for the second instalment were of ₹ 1,979.66 crore and ₹ 4,759.10 crore for FYs 2017-18 and 2019-20, respectively. Due to delays in submission of proposals by the State Government, the second instalments of the Central share for FYs 2017-18 and 2019-20, were released with delays of 18 (released in September 2019) and 12 months (released in March 2021), respectively. Proposals for release of the second instalments for FYs 2018-19, 2020-21 to 2023-24, were not made available to Audit. Therefore, Audit could not ascertain whether they were submitted timely.

Delays in receipt of Central share of the Scheme impacts the timeliness in release of State's share and consequent implementation of the Scheme as the release of funds to beneficiaries would also be delayed.

The Department accepted (August 2023) that there were delays in sending the proposals for release of the second instalments of the Central share, during the FYs 2017-18 to 2019-20.

2.9.5 Delays in release of State share

Paragraph 10.6.1 of the FFI envisaged that the State Government shall release its full share, corresponding to the Central share, within 15 days of the release of the Central share.

Audit, however, observed that during FYs 2017-18 to 2022-23, the State share had been released with delays ranging between six and 180 days, as shown in **Table 2.3**.

Table 2.3: Delays in release of State Share

Financial Year	Amount of matching State share to be released (₹ in crore)	Date of release of the Central Share	Date of release of the State Share	Delays in release of State share (in days)
2017-18	177.17	26.09.2019	20.12.2019	69
	87.60	06.11.2019	20.12.2019	28
2019-20	1,948.82	03.02.2020	18.03.2020	28
2020-21	873.66	26.11.2020	08.03.2021	86
	945.98	25.03.2021	16.04.2021	6
	640.37	25.03.2021	23.06.2021	74
	0.02	25.03.2021	07.10.2021	180
2022-23	330.48	14.06.2022	14.07.2022	14
	339.45	22.07.2022	28.09.2022	52
	517.55	28.10.2022	30.12.2022	47
	117.67	09.11.2022	30.12.2022	35
	1,203.61	30.12.2022	17.03.2023	61
Total	7,182.38			

(Source: Information furnished by RDD, GoB)

Delays in release of State share was one of the reasons for less expenditure incurred by the State under the Scheme (**Paragraph 2.9.1**) due to consequent delayed receipt of funds by beneficiaries.

The Department replied (August 2023) that: (i) the instalments of Central share were released in the last week of March during FYs 2020-21 and 2021-22 by GoI (ii) at the end of the year there was no budgetary provision available for the State share, and thus the State share had been released on priority after availability of budget in the next financial year.

The reply from the Department was not acceptable, as the State should have made provisions for its matching share, in accordance with the annual proposals sent to the Central Government for funds under the Scheme.

2.9.6 Diversion and blockage of Indira Awaas Yojana funds

(i) Diversion of the Indira Awaas Yojana funds: In July 2016, the Department directed that the balance funds under the IAY should be transferred from the bank accounts maintained at the district/block levels to the SNA of the Department opened for PMAY-G.

In contravention of the above, Audit observed that in four⁹ DRDAs, during January 2017 to March 2024, IAY funds, amounting to ₹ 6.05 crore, had been diverted to the Administrative Heads of DRDAs. The diversion of IAY funds was reflective of weak financial control in the concerned districts.

The concerned DDCs stated (April 2023) that the payments had been made in the absence of availability of funds in other heads.

⁹ Darbhanga (₹1.77 crore); Madhubani (₹ 0.15 crore); Samastipur (₹ 2.56 crore) and Saran (₹ 1.57 crore).

In response, the Department issued instructions (November 2023) to the concerned DDCs to utilise funds only for the purposes for which they had been provided by the Department.

(ii) Blockage of the Indira Awaas Yojana funds: During scrutiny of records of two¹⁰ sampled DRDAs and five¹¹ sampled blocks, Audit noticed (September 2024 to January 2025) that IAY funds amounting to ₹ 7.72 crore were still lying in the bank accounts of these units even after lapse of more than eight years of departmental directions (July 2016). Besides, as per the records (April 2023), IAY funds amounting to ₹ 14.28 crore were still lying with DRDA, Araria.

The Department replied (August 2023) that in light of the guidelines received from the Ministry, all the districts were informed that the entire amount under IAY and PMAY-G should be spent from the SNA, through Fund Transfer Orders. The Department also issued instructions (November 2023) to the DDCs to transfer IAY/PMAY-G funds lying with them to the SNA of PMAY-G.

2.9.7 False success/rejection cases of benefit transfer to beneficiaries

Payments to PMAY-G beneficiaries were being made through the SNA linked to the Public Finance Management System (PFMS). Audit scrutiny of the information available in PFMS reports on *AwaasSoft* revealed that there were cases of 'False Success' of transactions, wherein PFMS was showing transactions as successful, despite the instalments not having been deposited in the bank accounts of concerned beneficiaries. Similarly, there were 'False Reject' cases, in which PFMS was showing transactions as having been 'rejected', despite the instalments having been deposited in the bank account of the concerned beneficiaries. Such transactions were to be reconciled with the banks by the Block level officials.

During analysis of *AwaasSoft* data related to the payments made to the beneficiaries in FYs 2017-18 to 2023-24, Audit observed that there were 2,962 'False Success' cases involving a minimum amount of ₹ 11.85 crore¹². Of these, the Department had reconciled only 159 (five *per cent*) cases involving a minimum amount of ₹ 63.60 lakh with the banks. Thus 2,803 unreconciled cases of 'False Success', involving a minimum amount of ₹ 11.21 crore¹³, were pending for payment to the concerned beneficiaries (as on 13 January 2025). Similarly, there were 2,525 unreconciled 'False Rejection' cases, involving minimum payments of ₹ 10.10 crore¹⁴ being incorrectly shown as rejected although the payments were made to the concerned beneficiaries (as on 13 January 2025).

Further, in the sampled districts Audit observed that out of 1,291 'False Success' cases only 60 were reconciled (five *per cent*) by the block level officials and the remaining 1,231 unreconciled cases involving a minimum amount of ₹ 4.92 crore remained pending for payment. Similarly, 884 'False Reject' cases involving

¹⁰ *Darbhanga* (₹ 5.50 crore) and *Saran* (₹ 0.50 crore).

¹¹ *Alauli* (₹ 0.06 crore); *Dumra* (₹ 0.06 crore); *Darbhanga Sadar* (₹ 0.66 crore); *Gogri* (₹ 0.62 crore) and *Harlakhi* (₹ 0.32 crore).

¹² Calculation based on ₹ 40,000 per instalment.

¹³ Calculated on the basis of ₹ 40,000 per instalment.

¹⁴ Calculated on the basis of ₹ 40,000 per instalment.

minimum payments of ₹ 3.54 crore were being incorrectly shown as rejected although the payments were made to the concerned beneficiaries, as on 13 January 2025.

Besides leading to data discrepancies, such incomplete transactions raise the risk of delayed payment of first instalment (**Paragraph 2.9.12**) and non-payments of all the instalments (**Paragraph 2.11.7**) to the beneficiaries. Also, risk of misappropriation of funds in 'False Success' cases cannot be ruled out.

The Department issued instructions (November 2023) to the DDCs to identify and inform about such cases wherein the amount paid is displayed on *AwaasSoft*, but the amount has not actually been credited to the bank account, so that necessary action is taken at the Department level.

2.9.8 Payments rejected by banks

As per paragraph 13.1.2 of FFI, instalments to the beneficiaries were to be made through Fund Transfer Orders (FTOs) issued to banks.

During analysis of *AwaasSoft* data as on 13 January 2025, Audit noticed that FTOs pertaining to 3,240 beneficiaries, involving an amount of ₹ 13.50 crore (related to different instalments), had been rejected by the banks, as shown in **Table 2.4**.

Table 2.4: Payments rejected by banks, as on 13 January 2025

(₹ in crore)

Instalment	No. of beneficiaries whose payments were rejected	Amount involved
1 st	1,606	6.59
2 nd	846	2.81
3 rd	788	4.10
Total	3,240	13.50

(Source: *AwaasSoft*)

Scrutiny of the rejected FTOs, showed that these were rejected due to discrepancies in the bank account details and other technical problems like accounts having been closed due to lack of transactions and non-mapping of *Aadhaar* with such accounts *etc.* Thus, these 3,240 beneficiaries had remained deprived of the benefits of assistance under the Scheme.

With regard to the sampled districts, Audit observed that payments to 242 sampled beneficiaries of 27 sampled blocks, involving an amount of ₹ 1.03 crore, had been rejected (as on 13 January 2025), (**Appendix 2.2**). These payments were rejected on various grounds, *viz.*, the accounts being blocked or frozen (41), *Aadhaar* having been deseeded (58), *Aadhaar* not being mapped (16), accounts reached maximum credit limit (30), invalid/non-existing account (12), the accounts having been closed (46) and for miscellaneous/other reasons (39). The Department, however, did not take any corrective action in this regard.

The Department replied (July 2023) that rectification is an ongoing process and the rejected cases have been corrected and payments have been made.

The reply of the Department was not acceptable, as the beneficiaries' accounts had not been promptly updated and were frozen again.

Further, the Department instructed the DDCs (November 2023) to generate FTOs on a weekly basis in cases of rejected FTOs after ascertaining the reasons for such rejections.

2.9.9 Pendency of Fund Transfer Orders

As per Paragraphs 13.6.2 and 13.6.3 of FFI, all the beneficiaries who were to receive benefits under the Scheme were to be registered on *AwaasSoft* and their bank accounts details were to be validated through PFMS. Payments of instalments under the Scheme were to be made through FTOs generated in *AwaasSoft*. The FTOs generated in *AwaasSoft* were to be processed by PFMS and forwarded to the banks, for transferring funds to the beneficiaries' accounts.

Further, as per Paragraph 13.6.1 (b) (ii) and (iii) of FFI, the PFMS, after validating the Bank/Post Office account details of beneficiaries in an FTO, would send an acknowledgment of having accepted the FTO, or else respond with rejection of the FTO. The accepted FTOs would then be sent to the concerned Banks, for making payments to beneficiaries' bank/ post office accounts.

In this context Audit noticed that during the period 2017-18 to 2023-24, at the State level, 140 FTOs of 195 beneficiaries amounting to ₹ 0.80 crore were pending from more than two to six years with PFMS for approval/ rejection, as on 14 January 2025. Details of FTOs pending with PFMS are shown in **Table 2.5**.

Table 2.5: FTOs pending with PFMS (financial year of sanction)

Financial Year	Number of pending FTOs with PFMS	Number of beneficiaries	Amount (₹ in lakh)
2017-18	23	27	11.00
2018-19	00	00	00
2019-20	41	47	19.05
2020-21	13	15	6.15
2021-22	63	106	43.55
2022-23	00	00	00
2023-24	00	00	00
Total	140	195	79.75

(Source: *AwaasSoft* report F-4, FTO transaction summary, as on 14 January 2025)

FTOs remaining pending for long periods implied that the eligible beneficiaries had remained deprived of financial assistance, thus defeating the objective of timely completion of houses under the Scheme. However, no corrective action was taken by the Department in this regard.

The Department replied (August 2023), that the pendency at the end of PFMS was depicted on *AwaasSoft* as updation of PFMS reports takes 10-12 days to reflect.

The reply was not acceptable, as cases pertaining to FY 2017-18 were also pending (as of August 2023) with PFMS, for payment.

2.9.10 Payment of instalments to other than beneficiaries' bank accounts

As per Paragraph 10.1(h) of the FFI, assistance amount was to be transferred to beneficiaries through digitally signed FTOs issued by officials designated by the State Government and verified by block level officials and PFMS. Further, as per Paragraph 13.1.2 of FFI of PMAY-G, block officials were responsible for mapping and verification of bank accounts of beneficiaries.

Audit observed that in Bihar the FTOs were to be generated and verified by the block level officials. However, in 83 cases in five¹⁵ of 10 sampled districts, ₹ 53 lakhs was transferred to bank accounts other than those of the beneficiaries concerned due to incorrect mapping of their bank accounts. Due to non-adherence by block officials with the provisions mentioned in the FFI, payment of instalments to bank accounts that did not pertain to the beneficiaries had been made. Further, these are only test-checked cases pointed out by Audit and require further investigation to examine if there are more such cases across the State.

The Department replied (July 2023) that: (i) payments in wrong accounts had been due to wrong mapping or *Aadhaar* seeding in the accounts (ii) the amount was being refunded to the SNA, as soon as such cases were detected (iii) in *Aadhaar* based payments, payment is made in the account which was verified during latest KYC, due to which the beneficiaries are often unaware of the receipt of instalment and (iv) action with regard to wrong mapping of accounts by responsible officials would be taken.

2.9.11 Irregular payment of assistance to ineligible beneficiaries

As per Scheme guidelines, multi-layered prioritisation is to be carried out within the universe of eligible PMAY-G beneficiaries. Priority would be assigned on the basis of parameters reflecting housing deprivation in each category *viz.*, SC/ST and Others. Households would first be prioritised based on houselessness, followed by the number of rooms; zero, one and two, in that order. In a particular social category *viz.*, SC/ST and Others, households which are houseless or living in houses with lesser rooms shall not be ranked below households living in houses with greater number of rooms.

Paragraph 4.4.1 of the FFI states that the category-wise priority lists generated would be suitably publicised, and were to be verified by the concerned *Gram Sabha*, to identify eligible households. Names of ineligible households were to be removed from these system generated priority lists¹⁶. Further, as per instructions of the MoRD, GoI (October 2017), households who had availed the benefits from other schemes of the Government or might have constructed their *pucca* house from their own funds were ineligible for availing PMAY-G assistance or any other benefit under the Scheme. Therefore, these households

¹⁵ *Aurangabad-14 cases (₹ 7.65 lakh), Banka-05 cases (₹ 2.80 lakh), Darbhanga-61 cases (₹ 40.50 lakh), Samastipur-02 cases (₹ 0.85 lakh) and Saran-01 case (₹ 1.20 lakh).*

¹⁶ *If included on the basis of wrong facts, or if the household has constructed a pucca house, or has been allotted a house under any other Government scheme, or the beneficiary has permanently migrated since the time of the survey, or he/she has died, leaving no successor.*

were required to be removed (remanded) from the Permanent Wait List (PWL) of the Scheme.

During scrutiny of *AwaasSoft* data (as of January 2025) and Scheme related records in sampled blocks, pertaining to FYs 2017-18 to 2023-24, Audit observed that:

- Twelve beneficiaries in two¹⁷ of the sampled districts, had earlier been remanded by the concerned GPs, but despite this they were sanctioned houses and provided PMAY-G assistance amounting to ₹ 12.40 lakh, without taking into account the decision of the concerned *Gram Sabha*.
- Six beneficiaries in three¹⁸ districts, who had been earlier provided IAY/ PMAY-G instalment for house construction during FYs 1998-99 to 2019-20, were again provided assistance amounting to ₹ 6.40 lakh during FYs 2019-20 to 2022-23, under PMAY-G.

The Department assured (November 2023), that the matter would be enquired into considering the seriousness of observations, and action would be initiated against the defaulting officials.

2.9.12 Inordinate delays in releasing the first instalment to beneficiaries

Paragraph 5.4.1 of the FFI, stipulates that the first instalment was to be released to beneficiaries within seven working days from the date of issue of the sanction order.

During analysis of *AwaasSoft* data (as on 09 February 2025), Audit observed delays in releasing the first instalment to 1,248 sampled beneficiaries, in all the 10 sampled districts, during FYs 2017-18 to 2022-23, as shown in **Table 2.6**.

Table 2.6: Delays in release of first instalment to PMAY-G beneficiaries

Financial Year	No. of sampled beneficiaries	Cases wherein 1 st instalment was released with delay	Range of delays in releasing the first instalment			
			Up to three months	More than three months to six months	More than six months to one year	More than one year
2017-18	63	56	49	5	2	0
2018-19	100	69	58	7	2	2
2019-20	306	208	186	12	5	5
2020-21	203	167	143	14	7	3
2021-22	759	735	684	36	11	4
2022-23*	23	13	12	0	0	1
Total	1,454	1,248	1,132	74	27	15

(Source: *AwaasSoft* data) *Sampled beneficiaries were registered under the Scheme prior to FY 2021-22 but houses were sanctioned to them in FY 2022-23

As is evident from **Table 2.6**, out of 1,454 sampled beneficiaries, the first instalments were released with delays of eight to 935 days to 1,248 (86 per cent) beneficiaries,

¹⁷ *Darbhanga-05* beneficiaries (₹ 6 lakh) and *Saran-07* beneficiaries (₹ 6.40 lakh).

¹⁸ *Darbhanga-03* beneficiaries (₹ 2.80 lakh), *Khagaria-01* beneficiary (₹ 1.20 lakh) and *Samastipur-02* beneficiaries (₹ 2.40 lakh).

during FYs 2017-18 to 2022-23. Delays, in 74 and 27 cases, were of more than three to six months and more than six months to one year, respectively. The delays occurred due to mismatches in beneficiaries' name, deaths, delayed verification and auto-rejections in PFMS, merger of banks *etc.*

At the State level there were 830 such beneficiaries, who had been sanctioned houses during FYs 2017-18 to 2023-24, but had not been paid their first instalments (as on 06 February 2025).

Delayed release of funds to beneficiaries resulted in delays in completion of houses by 478 beneficiaries, as noticed during the JPV conducted jointly with Block officials in November 2022 to March 2023.

The Department attributed (August 2023) these delays to the time taken for verification of bank accounts, delayed disposal of FTOs and other problems related to bank accounts, MGNREGS job cards, *Aadhaar* numbers of beneficiaries and death of beneficiaries, *etc.* Further, the Department directed (November 2023), the DDCs to release the first instalment within one week of issue of sanction orders to the beneficiaries.

Thus, the State could not fully utilise the funds available under the Scheme and did not remit the interest earned on the Scheme to the respective Consolidated Funds. There were instances of delayed release of first instalments to beneficiaries and second instalment of Central Share due to delayed submission of proposals by the State. Cases of diversion and blockage of the *Indira Awaas Yojana/ PMAY-G* funds were also noticed, as also instances of assistance being paid to remanded persons, instalments being paid twice to the same beneficiaries *etc.*

Recommendation 1: The Government may ensure proper verification of beneficiaries including IT application to detect incorrect and irregular payments of assistance and initiate system improvements to ensure that there are no delays in release of funds to beneficiaries.

2.10 Identification and selection of beneficiaries

Paragraphs 4.3, 4.5.2 and 4.7.1 of the FFI stipulated that separate priority lists were to be generated for Scheduled Castes (SC), Scheduled Tribes (ST), Others and Minorities, for each GP, on the basis of the housing deprivation parameters of SECC 2011. These lists were to be circulated to the GPs concerned, for their verification through the *Gram Sabhas* and disposal of the complaints related thereto. Post-verification, the final PWL for each category was to be published at the GP level. This List was to be uploaded on the website of the PMAY-G at the block level.

MoRD, GoI, on the basis of the previous year's performance of the State and availability of funds communicates targets for PMAY-G to the State. The State was to further allocate category-wise targets to respective districts on the basis of number of eligible beneficiaries therein and enter the targets on *AwaasSoft*. The Annual Select List (ASL), drawn from the PWL of the beneficiaries, as per the target allocated was to be registered on MIS *AwaasSoft*. The list was to begin with

the top households in the approved PWL and was to be restricted to the targets assigned for each category for that year.

Deficiencies relating to identification and selection of beneficiaries are discussed, in the succeeding paragraphs.

2.10.1 Non-preparation of Comprehensive Annual Action Plans

Paragraphs 3.6.1 and 3.6.2 of the FFI stipulate that the State should prepare an Annual Action Plan (AAP) for implementation of the Scheme. The plan should, *inter alia*, include the roadmap for time-bound completion of houses sanctioned and ensure convergence with other government schemes. In addition, the AAP for the State should contain the district-wise plan highlighting the strategy that would be adopted for saturating priority households. The district-wise AAP would, *inter alia*, also need to highlight mason training programme, sources for construction material, facilitation of loans to beneficiaries, development and dissemination plan for house typologies, beneficiary sensitisation workshops and the amenities to be provided to the beneficiaries through convergence with different schemes.

Audit observed that either AAPs were not prepared or records/reply was not furnished to Audit during FYs 2017-18 to 2023-24, as detailed in **Table 2.7**.

Table 2.7: Status of preparation of AAP in sampled districts

Sl. No.	District	Period and remarks	
		2017-18 to 2021-22	2022-23 to 2023-24
1	Arwal	Did not reply	Records not produced
2	Aurangabad	Records not produced	Did not reply
3	Banka	Records not produced	Records not produced
4	Darbhanga	Did not reply	Did not reply
5	Khagaria	Not prepared	Did not reply
6	Madhubani	Records not produced	Records not produced
7	Saran	Not prepared	Did not reply
8	Samastipur	Not prepared	Records not produced
9	Sitamarhi	Not prepared	Did not reply
10	Vaishali	Not prepared	Did not reply

(Source: Records of DRDAs)

As can be seen from **Table 2.7**, five sampled districts did not prepare AAPs during FYs 2017-18 to 2021-22. Remaining districts either did not provide records or did not reply, regarding preparation of AAPs by them for the remaining or complete audit period. Therefore, it could not be ensured that these districts prepared the AAPs for that period.

Besides, at the State level, comprehensive AAPs for the FYs 2017-18 and 2018-19 were not made available to Audit, indicating the possibility that no State level comprehensive Annual Action Plans were prepared for this period. However, the comprehensive AAP at the State had been prepared since FY 2019-20.

Non-preparation of Annual Actions Plans at the district and State levels contributes to overall lack of direction and planning for the Scheme, resulting in delayed completion of houses sanctioned (**Paragraph 2.11.6**), shortfall in providing basic

amenities through convergence with other Government schemes (**Paragraph 2.12.2**) etc.

The Department replied (November 2023) that comprehensive AAP was being prepared from FY 2019-20 onwards and DDCs had been directed to prepare AAPs.

2.10.2 Non-preparation of Annual Select Lists

As per Paragraph 4.7 of the FFI, based on the targets communicated by GoI, the States were to distribute category wise targets to respective districts. Thereafter, *Gram Panchayat* wise Annual Select Lists (ASL) were to be prepared at the block level, based on the targets assigned for four¹⁹ categories. The ASL were to be accorded wide publicity through print and electronic media, as well as wall paintings in the villages.

Audit observed that out of the 28 sampled blocks, 16 blocks of six²⁰ sampled districts had not prepared year-wise ASL during the FYs 2017-18 to 2021-22²¹. Sampled nine blocks of the four sampled Districts, viz., Arwal, Khagaria, Madhubani and Vaishali, had prepared ASL during this period. However, despite preparation of ASL there was violation of priority numbers at the time of selection of beneficiaries (**Paragraph 2.10.11**). Further, in the absence of response from Amnour and Marhaura blocks of Saran and Bhagwanpur block of Vaishali, Audit could not ascertain whether they prepared the ASL, during the audit period.

Therefore, in the sampled districts the houses were either being sanctioned without preparation of any ASL or being sanctioned by violating the priority numbers accorded in the already prepared ASL.

The Department instructed (November 2023) the DDCs to prepare the ASL at the block level, in light of the annual targets, and get the waiting list painted on the walls of the villages, for ensuring transparency in Scheme execution.

2.10.3 Incomplete universe of eligible beneficiaries under PMAY-G

As per Paragraph 4.1 of the FFI, the universe of eligible beneficiaries under PMAY-G included all houseless and households living in zero, one or two rooms, with *kutcha* wall and *kutcha* roof, as per SECC 2011, subject to the exclusion process. Further, the Government conducted a special survey in 2018-19, to identify those eligible beneficiaries who remained deprived of the Scheme benefits. Additional beneficiaries were to be drawn from this special survey (*Awaas+*). In Bihar, based on SECC 2011 data and the special survey, 37.40 lakh beneficiaries were to be covered under the Scheme (as of 2022).

¹⁹ *Scheduled Castes, Scheduled Tribes, Minorities and Others.*

²⁰ *Aurangabad (Nabinagar, Goh and Aurangabad), Banka (Amarpur, Belhar and Fullidumer), Darbhanga (Alinagar, Darbhanga Sadar and Keotirunway), Samastipur (Bithan, Kalyanpur and Sarairanjan), Saran (Dighwara) and Sitamarhi (Bairgania, Dumra and Runnisaidpur).*

²¹ *No targets were fixed for FYs 2022-23 and 2023-24.*

Audit, however, observed that:

- 59 beneficiaries of the sampled districts of Darbhanga (53) and Samastipur (06) were not included as eligible beneficiaries in the universe of the Scheme due to the following reasons:
 - Wrongful remand on the basis of recommendation of the concerned *Gram Sabha* (46 cases). These remand cases were seen to be incorrect based on *AwaasSoft* data and Report of BDO stating that beneficiaries had been wrongfully remanded;
 - Postponement of survey (9 cases); and
 - Reasons not assigned (4 cases).
- In order to cover left out beneficiaries of the Scheme, the State launched (August 2018) the *Mukhyamantri Gramin Awaas Yojana*, from the FY 2018-19. As part of this, the Department listed out (January 2020), 32.86 lakh houseless families, whose names were not in the PWL of the PMAY-G Scheme.
- As per PMAY-G guidelines, the Annual Select List drawn from the PWL of the beneficiaries shall be registered on *AwaasSoft*. During the registration, the details of bank account, name of the nominee, MGNREGS Job Card number have to be mandatorily entered. As per correspondences between the Rural Development Department and MoRD (December 2022 and November 2023), there were 16,447 such eligible beneficiaries who could not be registered on *AwaasSoft* under the Scheme as there were duplicate MGNREGS job cards in their name and there was no provision in the *AwaasSoft* to rectify their job cards. The Department remanded all such 16,447 beneficiaries, depriving them of the benefit of sanction of houses, under the Scheme.

Thus, non-inclusion of all the eligible beneficiaries in the PWL of the Scheme left its universe incomplete and these 33.02 lakh²² beneficiaries were deprived of houses, under the Scheme.

The Department replied (July 2023) that all the eligible beneficiaries had been included in the waiting list but due to increase in population and breakup of families, the data of left-out persons has been reflected as 'left-out'. The left-out beneficiaries from the Special survey, were being covered under the *Mukhya Mantri Gramin Awaas Yojana*.

2.10.4 Non-removal of discrepancies in the Socio Economic Caste Census data

As per the instructions (April 2016) of MoRD, GoI, the Scheme beneficiaries were to be selected on the basis of housing deprivation parameters in the SECC 2011 data. The list of beneficiaries, derived from SECC 2011 data, was to be verified by the concerned *Gram Sabha*, for their inclusion in the PWL.

²² *Wrongful remanded beneficiaries: 59; Beneficiaries left out of PWL of PMAY-G: 32.86 lakh and Beneficiaries having duplicate MGNREGS job cards: 16,447.*

Further, as per Paragraphs 5.3.1 and 5.3.2 of the FFI, sanction order is generated in *AwaasSoft* for each beneficiary, with a distinct PMAY-G ID, after registration of beneficiary details, viz., MGNREGS job card number, name of nominee, *Aadhaar* number and validation of bank account. The sanction order, along with the PMAY-G ID, is issued in the name of the beneficiary or any of his/her family members available in the SECC 2011.

Besides, MoRD, GoI instructed (September 2017) that, in cases where the name of the beneficiary or the family members, in PWL, is 'Unknown', then the Department was to issue sanction order after certifying the inclusion of the names of the family members, available in the registered MGNREGS job card.

Audit analysed 'Category wise SECC data verification summary' report containing data of beneficiaries in the *AwaasSoft*, provided by the Department for the period 2017-18 to 2021-22²³. In nine out of 10 sampled districts, names of 1,572 beneficiaries²⁴ were being shown as 'Unknown' below the 'Beneficiary Name' column, in the SECC data as well as in the sanction order issued in *AwaasSoft*.

Population of beneficiaries names as 'Unknown' in place of their names, was an omission on the part of the block officials charged with the responsibility of entering the names as available in the registered MGNREGS Job cards of these beneficiaries.

Further, analysis showed that out of above 1,572 cases, 95 cases²⁵ pertained to the seven sampled GPs of five test-checked districts. Out of these 95 cases, payments of ₹ 30.40 lakh was made in 26 cases related to Madhubani²⁶ (02) and Samastipur²⁷ (24) districts, although the names of the recipients differed even from the names available in the registered MGNREGS job cards.

Reasons for showing beneficiaries names as "Unknown" in *AwaasSoft* were not stated to Audit. The Department replied (July 2023) that the beneficiaries, displayed as 'Unknown' in the waiting list, are verified with the details of their ration cards and the SECC data. After identification and verification of the beneficiaries, they are registered on *AwaasSoft*.

The reply of the Department was not acceptable, as in cases where the name of the beneficiary is 'Unknown', then the sanction order was to be issued in the name available in the registered MGNREGS job card.

²³ With regard to the 126 sampled GPs, no beneficiary whose name was shown as 'unknown' found in *AwaasSoft*, for FYs 2022-23 and 2023-24.

²⁴ Arwal (07), Aurangabad (463), Banka (12), Khagaria (45), Madhubani (269), Samastipur (411), Saran (10), Sitamarhi (260) and Vaishali (95).

²⁵ Aurangabad (One case in one GP), Banka (One case in one GP), Madhubani (Five cases in two GPs), Samastipur (83 cases in two GPs) and Sitamarhi (Five cases in one GP).

²⁶ Madhubani: Two cases of Sonai GP of Harlakh block (₹ 2.40 lakh).

²⁷ 24 cases amounting to ₹ 28.00 lakh in two GPs {Kharsand West GP of Kalyanpur block (17 cases amounting to ₹ 19.60 lakh) and Dharampur GP of Sarairanjan block (07 cases amounting to ₹ 8.40 lakh)}.

2.10.5 Discrepancies in the decisions of Gram Sabha

Audit noticed discrepancies in the decisions taken by sampled *Gram Sabhas* regarding eligibility of the beneficiaries under the Scheme. Some of the instances are as detailed below:

- Scrutiny of minutes of the *Gram Sabha* meetings held in six sampled GPs of Bithan and Kalyanpur blocks of Samastipur district during FYs 2020-21 and 2021-22 revealed that 20 beneficiaries in these six GPs {(Bithan: 13 beneficiaries (₹ 15.60 lakh) and Kalyanpur: 7 beneficiaries (₹ 8.40 lakh)} were shown as eligible. These 20 beneficiaries were shown as eligible by modifying the reasons²⁸ for eligibility under the Scheme mentioned in the minutes of *Gram Sabha* meeting. Therefore, payment of ₹ 24 lakh made to these 20 beneficiaries was irregular.
- In the *Gram Sabha* meeting of GP-Jamua, Block-Bairgania, District-Sitamarhi, held on 5 January 2022, 10 ST beneficiaries were declared ineligible on the ground that they had *pucca* houses. However, in the same meeting, all these 10 beneficiaries were declared eligible, through a different proposal. Subsequently, these 10 beneficiaries received payment of instalments amounting to ₹ 10.45 lakh under the Scheme.

The Department accepted the observation and issued (November 2023) instructions to DDCs to obtain the signature of members present in *Gram Sabha* meetings, to validate the priority lists.

2.10.6 Non-adherence to provision for Persons with Disabilities (PwDs)

As per Paragraph 3.4.5 of FFI, while allotting houses, priority was to be accorded to households with any disabled member and no able bodied adult member. Accordingly, MoRD, GoI, instructed (March 2018) the States to reserve five *per cent* sanctions, under the Scheme, for PwDs.

Scrutiny of MIS-*AwaasSoft* data, pertaining to the FYs 2017-18 to 2023-24, revealed that while MoRD, GoI had allocated specified targets for housing for PwDs during the FY 2017-18 and FYs 2019-2021, no such targets were assigned in the remaining FYs (2018-19, 2022-2024). Details of houses sanctioned to PwDs under the Scheme, are given in **Table 2.8**.

Table 2.8: Houses sanctioned to PwDs, during FYs 2017-24

Financial Year	Total Number of houses sanctioned in the State	Target of PwDs received from MoRD (in number)	Number of houses sanctioned to PwDs (per cent to targets allocated by MoRD)
2017-18	5,34,871	26,948	2,654 (9.8)
2018-19*	Target not received from MoRD		
2019-20	12,88,982	39,653	3,281 (8.27)

²⁸ Four being ineligible in physical verification by block officials; four being temporarily migrated; four already had *pucca* houses and three had already been benefited under PMAY-G. Reasons of ineligibility in the remaining five were not ascertainable as they were marked as eligible in the resolution of *Gram Sabha* meeting using correction fluid.

Financial Year	Total Number of houses sanctioned in the State	Target of PwDs received from MoRD (in number)	Number of houses sanctioned to PwDs (per cent to targets allocated by MoRD)
2020-21	2,41,562	12,404	154 (1.2)
2021-22	10,01,603	Target not received from MoRD	677
2022-23 [#]		Target not received from MoRD	
2023-24		Target not received from MoRD	
Total	30,67,018	79,005	6,766 (8.6)

(Source: Data provided by RDD, GoB)

*Due to slow progress of the Scheme in the State

Reasons for non-fixing of targets for FYs 2022-23 and 2023-24 were not provided by the Department

As evident from **Table 2.8**, total 30.67 lakh houses were sanctioned in the State during 2017-24, against which 1.53 lakh²⁹ houses were to be sanctioned to the PwDs. However, the MoRD allocated target of 79,005 (2.57 per cent of the number of houses sanctioned) houses to be sanctioned to the PwDs in the State. Out of these targeted 79,005 houses, the Department sanctioned only 6,766 houses to PwDs during 2017-24, which is only 0.22 per cent of the total houses sanctioned to the State.

Sanction of houses to the PwDs in negligible numbers indicated that the Department had not taken sufficient steps to provide houses to PwDs, as required under the Scheme provisions.

The Department accepted the observation and issued (November 2023) instructions to DDCs to ensure priority, up to five per cent, in the allotment of houses to the PwDs.

2.10.7 Non-provision of land for houses to landless beneficiaries

Paragraph 5.2.2 of the FFI provided that the State was to ensure that the landless beneficiaries were provided land, from Government land or any other land, including public land³⁰ for construction of houses under the Scheme. The State was to provide land to the landless beneficiaries, once the PWL was finalised.

In order to provide land to such landless beneficiaries of SC, ST, and Backward Classes, who were included in the PWL but could not purchase land, the Department started (August 2018) the *Mukhyamantri Vaas Sthal Kray Sahayata Yojana* (MVSKSY). Under this Scheme, assistance of ₹ 60,000 was to be paid to landless beneficiaries for purchasing land. The beneficiaries had to purchase the land within three months from the sanction of funds.

Audit observed that GoB provided ₹ 120 crore and ₹ 50 crore in FYs 2018-19 and 2019-20, respectively, under this scheme to the Department. The selection of beneficiaries under this scheme was to be made out of the PWL, but the number of landless beneficiaries was not ascertained in the PWL.

²⁹ Five per cent of 30.67 lakh.

³⁰ Panchayat common land, community land or land belonging to other local authorities.

The Department fixed a target of 20,000 landless beneficiaries, for the FY 2018-19, under this scheme. Thereafter, no targets were fixed under this Scheme and the Department subsequently surrendered (March 2020), ₹ 50 crore out of the funds received under this scheme.

As per information furnished by the Department (November 2022), out of 20,000 targeted landless beneficiaries, only 3,462 (17 per cent) beneficiaries had received assistance for the purchase of land under MVSKSY and only 2,935 (15 per cent) beneficiaries had been sanctioned houses under the PMAY-G.

Further, in the sampled districts, following shortcomings were noticed:

(a) In Samastipur district, the DDC selected (October 2018) 68 beneficiaries from PWL, for release of payments under MVSKSY, to enable them to purchase land. However, 24 (35 per cent) out of 68 beneficiaries were paid assistance of ₹ 14.40 lakh (24 x ₹ 60,000) for purchase of land (including six beneficiaries to whom assistance had not been provided under PMAY-G for construction of houses) and 21 landless beneficiaries did not receive assistance of ₹ 12.60 lakh for land purchase, but received assistance of ₹ 24.50 lakh under PMAY-G for construction of houses. The remaining 23 beneficiaries neither got assistance for land purchase nor did they receive PMAY-G assistance for construction of houses. Cases of landless beneficiaries, wherein assistance for construction of houses was provided under PMAY-G but no land for the construction had been provided, implied that funds may still be lying unused and remained with the beneficiaries.

These instances are indicative of the fact that landless beneficiaries remained deprived of houses under PMAY-G either due to non-provision of land to them under MVSKSY or due to non-sanction of houses to them under PMAY-G.

(b) In Sadar block of Aurangabad district, 13 landless beneficiaries were provided (August 2021) ₹ 7.80 lakh, for purchase of land under MVSKSY. Out of these 13 beneficiaries, 12 were provided ₹ 10.35 lakh (October 2022), for construction of houses under PMAY-G. Audit also noticed that land had not been registered in the names of these beneficiaries as stipulated in the guidelines, and only agreements between the landowners (person selling the land to the beneficiaries) and the beneficiaries had been entered into.

The Department, issued instructions (November 2023) to the DDCs, to: (i) make the land available to landless beneficiaries, through regular monitoring, along with the officers of the Revenue and Land Reforms Department (ii) ensure sanction of houses to beneficiaries only after registration of land in their name and (iii) also initiate recovery of the amounts released to beneficiaries who had not purchased any land.

2.10.8 Payment of instalments to beneficiaries whose names differed from the names entered in *AwaasSoft*

Paragraph 13.4.2 of the FFI stipulates that the bank account details of the beneficiaries were to be captured and locked in *AwaasSoft* at the block level. These bank accounts details of all the beneficiaries were then to be verified through PFMS. After the

accounts had been verified *via* PFMS, the block level officials were to re-verify the bank account details by matching with the names of the beneficiaries registered in *AwaasSoft*.

Audit analysed details of payments made to beneficiaries in PFMS with the available beneficiaries' details in *AwaasSoft*. This analysis revealed that in 15.18 lakh cases in the State, the names of the beneficiaries, as per PFMS and as per *AwaasSoft* were mismatched. Out of these 15.18 lakh cases, 8.75 lakh cases were verified and corrected by the block officials and 185 cases were rejected. Thus, the names of the beneficiaries, in the remaining 6.43 lakh cases, still remained mismatched (as of January 2025).

Audit further observed that in 126 sampled GPs there were 28,997 beneficiaries, whose names were different in PFMS and *AwaasSoft*. Out of these in 1,635 cases, the names of the beneficiaries as per PFMS, did not match with the names reflected in the SECC data also. An amount of ₹19.37 crore had been paid to these 1,635 beneficiaries during the period April 2017 to March 2022. These cases of mismatch highlight the risk that payments may have been made to persons other than the actual beneficiaries.

The Department issued instructions (November 2023) to the DDCs to take necessary action in such cases, after verification.

2.10.9 Rejection of eligible beneficiaries

On the directions of MoRD, GoI, a special survey was conducted during January 2018 to March 2019, to identify and include such beneficiaries who although eligible, had been left out of the PWL of the Scheme. The Survey was to be conducted by *Gramin Awaas Sahayaks* (GAS). Households identified through this survey were to fulfil parameters specified in SECC 2011 database and in the FFI's (Annexure-I) of the Scheme.

Audit observed that in four blocks³¹ of Khagaria district, 464 beneficiaries added through this special survey were rejected (FY 2021-22), mostly on the grounds of exclusion parameter (Annexure-I of FFI), of possessing five acres or more of irrigated land for two or more crop seasons. However, BDOs of concerned blocks (Khagaria and Parbatta), reported (July 2021) to the DDC, Khagaria, that none of the 407 beneficiaries in their blocks were in possession of more than five acres of land and were eligible for houses under the Scheme.

Thus, due to wrongful entries made during the Survey by the GAS concerned, 407 beneficiaries, remained deprived of the benefits of the Scheme (as of March 2024).

The Department stated (July 2023) that due to erroneous entries made by *Gramin Awaas Sahayaks* in *AwaasApp*³² these beneficiaries were rejected. As there is no provision for correction of data in *AwaasSoft*, efforts would be made

³¹ Allouli (44), Gogri (13), Khagaria (314) and Parbatta (93).

³² A mobile application to monitor real time, evidence based progress of house construction through date and time stamped and geo-referenced/tagged photographs of the house.

to provide houses to these beneficiaries through *Mukhyamantri Gramin Awaas Yojana*. Further, it would be ensured that action is taken against such defaulting officials.

2.10.10 Sanction of houses to ineligible beneficiaries

During test-check of records of the sampled districts, Audit observed instances of sanction of houses to ineligible beneficiaries. Some of the instances, noticed are as follows:

(i) Sanction of houses to beneficiaries owning a *pucca* house: According to exclusion criteria Annexure I of FFI, all households living in houses with *pucca* roof and/or *pucca* wall and households living in houses with more than two rooms are filtered out. Further, in the light of criteria mentioned in Paragraph 2.9.11 *ibid*, the *Gram Sabha* was to verify the eligibility of a household under the Scheme.

Audit observed that in four of the 10 sampled districts, 21 households, owning *pucca* houses, were sanctioned houses under the Scheme (2019-20 to 2021-22). These 21 ineligible households had been paid irregular payments of ₹ 24.30 lakh (**Appendix 2.3**).

The Department while accepting the observation, stated (July 2023) that cases of sanctioning of houses to beneficiaries who already owned *pucca* houses, were of a serious nature.

(ii) Sanction of houses to minors: There was no provision for registration/sanction of houses to minors, in the FFI of PMAY-G. Further, MoRD, GoI, clarified (September 2017) that if the beneficiaries *viz.*, husband and wife, both had died then the minor child, whose name was displayed in the SECC list, may be sanctioned a house jointly with the guardian or officer of the Block/Panchayat, after verification.

During JPV (November 2022 to March 2023) of beneficiaries, against total four cases of minor beneficiaries, Audit noticed two³³ instances of irregular sanction of houses to minors, despite their parents being alive indicating that their eligibility had not been verified properly. Payments of ₹ 2.50 lakh had been made to these two minor ineligible beneficiaries.

Thus, due to faulty verification of the priority list by the concerned *Gram Sabha*, houses were sanctioned to the ineligible beneficiaries.

The Department replied (September 2023) that: (i) in the light of the guidance of MoRD, houses had been approved only in the name of the minors displayed on *AwaasSoft* and (ii) the assistance had been disbursed by opening joint bank accounts of the approved beneficiaries with their guardians.

The reply of the Department was not acceptable, as houses could be sanctioned to minors only in case of death of their parents.

³³ *Priyanshu Kumari- BHXXXX090 (₹ 1.30 lakh) and Nitish Kumar- BHXXXX415 (₹ 1.20 lakh).*

2.10.11 Non-adherence to priority numbers in sanction of houses

As per Paragraphs 4.2.1 and 4.2.2 of the FFI, priority was first to be assigned on the basis of parameters reflecting housing deprivation in each category, viz. SC, ST, Minorities and Others. Households with higher deprivation scores were to be ranked higher within the sub-groups. The system generated category-wise ranked priority list was to be circulated to the concerned GPs, for their verification.

In *AwaasSoft*, Audit reviewed the year-wise 'Work progress Report' for PMAY-G (containing details of beneficiaries along with their category, priority, panchayat names and payment details *etc.*), for the sampled GPs and cross-verified it with the E4 Report (category-wise SECC data containing details of total households, rejected, priority accorded to households *etc.*), to derive assurance that the priority numbers had been adhered to, at the time of sanction of houses to the beneficiaries.

In this regard, during test-check of records in sampled districts for FYs 2017-18 to 2023-24, Audit observed in five of 10 sampled districts, instances related to: (i) sanction of houses to beneficiaries whose names had appeared at the bottom of the PWL, in place of beneficiaries with higher priority (79 cases) and (ii) delays in sanction of houses to eligible beneficiaries due to violation of the priority numbers (51 cases) and (iii) sanctioning of houses to the beneficiaries from other categories (*Appendix 2.4*).

The Department issued (November 2023) instructions to the DDCs that in case of any discrepancies noticed in the priority numbers during the sanction of houses on *AwaasSoft*, clear reasons should be provided for not sanctioning houses to the beneficiaries that were placed higher in the waiting list.

Thus, identification and selection of beneficiaries in the Scheme, was not in accordance with its Framework for Implementation, as several deficiencies such as non-preparation of Annual Action Plans and Annual Select Lists; insufficient steps taken to provide houses to PwDs; non-providing of land to landless beneficiaries; sanction of houses to ineligible beneficiaries and by violation of priority numbers, were noticed during audit. Besides, instances of assistance being paid in wrong bank accounts, were also observed during audit of the Scheme.

Recommendation 2: The State Government may ensure that eligible beneficiaries are not deprived of the Scheme benefits, landless beneficiaries are allotted land for construction of houses and Persons with Disabilities, are given due priority, in the allotment of houses.

2.11 Implementation of the Scheme

As per Paragraphs 7.2 and 7.3 of the FFI, the States were to provide technical support in the construction of houses and also closely monitor the process, so that the construction of houses is completed in a timely manner.

Deficiencies relating to the implementation of the Scheme are discussed in the succeeding paragraphs.

2.11.1 Target and Achievement there against under the Scheme

Status of year-wise targets of construction of houses, under the Scheme, and the achievements there against, as of March 2024, are shown in **Table 2.9**.

Table 2.9: Targets and achievements, in regard to construction of houses

Financial Year	Target during the year for houses to be constructed	No. of houses sanctioned	No. of houses completed (As of March 2024)	Percentage of Completion	No. of incomplete houses (as against the houses sanctioned)
1	2	3	4	5	6= (3-4)
2017-18	5,34,914	5,34,871	5,20,827	97	14,044
2018-19	No target was fixed for the State*				
2019-20	12,88,985	12,88,982	12,49,608	97	39,374
2020-21	2,41,563	2,41,562	2,30,250	95	11,312
2021-22	10,01,612	10,01,603	8,93,409	89	1,08,194
2022-23	No target was fixed for the State [#]				
2023-24	No target was fixed for the State				
Total	30,67,074	30,67,018	28,94,094	94	1,72,924

(Source: Information furnished by RDD, GoB)

*Due to slow progress of the Scheme in the State

[#] Reasons for non-fixing of targets for FYs 2022-23 and 2023-24 were not provided by the Department

It is evident from **Table 2.9** that the State sanctioned 30,67,018 houses, against the target of 30,67,074 houses, during the FYs 2017-18 to 2023-24. Against this, 28,94,094 houses (94 per cent) were constructed during the FYs 2017-18 to 2023-24 and 1,72,924 houses remained incomplete. The percentage of completion of houses declined from 97 per cent in FY 2017-18, to 89 per cent in FY 2021-22. Further, GoI did not provide targets to the State, for FYs 2018-19, 2022-23 and 2023-24.

In this regard, Audit also observed that:

- (i) the Empowered Committee³⁴ of MoRD, GoI, while considering (March 2018) the target to be set for FY 2018-19 for the State, observed that achievements against targets had been poor, till FY 2017-18. As against the cumulative target of 11.76 lakh, four lakh houses were to be constructed by March 2018, against which only 11,561 (three per cent) houses were found to have been completed. Considering the State's slow progress in implementing PMAY-G against the assigned targets, no target, for FY 2018-19, was set for the State. Reasons for non-assigning of the target for the period 2022-23 and 2023-24 were not provided by the Department to Audit.
- (ii) Besides, Audit also observed that as per *AwaasSoft*, 26.21 lakh (85 per cent) houses were shown as completed as on 21 January 2025, (**Paragraph 2.11.6**), contrary to the completion of 28.94 lakh (94 per cent) number of houses, as per information provided by the Department. Discrepancy between both these numbers needs to be reconciled.

³⁴ Chaired by Secretary, Ministry of Rural Development, GoI, to approve the Annual Action Plans of the States.

(iii) Further, during JPV, conducted in November 2022 to March 2023, Audit also found that against 1,324 houses, which had been marked as ‘completed’ in *AwaasSoft*, only 961 houses were found to be completed (**Paragraph 2.11.3**). Thus, there was lack of coherence in data provided by RDD *vis-a-vis* *AwaasSoft* and the position as noted during the JPV.

Due to non-achievement of targets, the beneficiaries were deprived of the benefits of the Scheme, resulting in non-fulfilment of the Government’s commitment to provide “Housing for All”, by March 2024.

The Department accepted the audit observation and stated (July 2023) that progress was slow due to delays in the release of funds by GoI.

The reply of the Department was not acceptable as the State itself had released Central and State Shares with delays (**Paragraph 2.9.5**).

2.11.2 Payment of full assistance despite non-commencement of construction of houses

As per Paragraph 5.7.1 of the FFI, the instalments of assistance were to be released based on different stages of progress of construction of houses. Further, as per Paragraph 9.3.1.2 of the FFI the physical progress of stage-wise construction on the ground was to be verified and monitored through geo-referenced/tagged, date and time stamped photographs, captured through the *AwaasApp* mobile application and uploaded on *AwaasSoft*.

During test-check of the Scheme related records, Audit observed that 11 beneficiaries of sampled Darbhanga (seven) and Sitamarhi (four) districts, had been paid all the three instalments, although the construction of their houses was yet to be commence (as of January 2025). In addition to these 11 cases, three incomplete houses (constructed up to plinth and windowsill levels) were shown as completed in *AwaasSoft*. Audit observed that in these 14 cases, payments of ₹ 17.20 lakh (**Appendix 2.5**), were made, by violating the Scheme guidelines.

The Department replied (July 2023) that this being a serious matter would be verified, and action would be taken.

2.11.3 Physical verification of houses

Audit conducted (November 2022 to March 2023) JPV of 1,454 houses, in sampled 126 GPs, of 10 sampled districts. Findings of JPV conducted are discussed in subsequent sub paragraphs.

I. Incomplete houses shown as complete:

- Out of 1,454 houses, 1,324 houses were shown as ‘completed’ in *AwaasSoft* although, roof casting had not been carried out in 306 (23 per cent) houses.
- Out of 1,324 houses shown as completed in *AwaasSoft*, only 961 (73 per cent) were found actually completed during the JPV.

II. Geo-tagging of houses other than that existing on the site: In 155 cases (11 per cent of 1,454) photographs of houses geo-tagged in *AwaasSoft* were different

from those actually found at the site. Some of these instances of differences between the photographs uploaded in *AwaasSoft*, vis-à-vis the actual houses found during JPV, are as shown in **Images 1 to 6**.

Image 1 to 6: Photographs of houses in <i>AwaasSoft</i> vis-a-vis photographs taken during JPV	
Photograph uploaded in <i>AwaasSoft</i> (showing houses as 'completed')	Status of construction of houses actually found during JPV
	
<p>Image 1: (Beneficiary ID-BHXXXXXX259) GP-Pipra, Block- Nabinagar, District-Aurangabad (uploaded on <i>AwaasSoft</i> after inspection conducted on 13 August 2022)</p>	<p>Image 2: The house found to be constructed up to the plinth level only (photograph taken on 15 December 2022)</p>
	
<p>Image 3: (Beneficiary ID-BHXXXXX267), GP- Bahuarapatti, Block-Marhaura, District-Saran (uploaded on <i>AwaasSoft</i> after inspection conducted on 10 September 2020)</p>	<p>Image 4: Actual house was different from photo uploaded on <i>AwaasSoft</i> (photograph taken on 28 February 2023)</p>
	
<p>Image 5: (Beneficiary ID-BHXXXXXX172), GP- Madhopatti, Block- Keotirunway District- Darbhanga (uploaded on <i>AwaasSoft</i> after inspection conducted on 23 August 2022)</p>	<p>Image 6: Construction of house was not started (photograph taken on 16 February 2023)</p>

III. Release of all the instalments without commencement of construction work: The second and third instalments for construction of house were to be released after roof casting and completion of house, respectively. However, it was noticed that 25, and 19 beneficiaries, had not started construction of houses, even after receiving assistance up to second (₹ 21 lakh) and third (₹ 23.20 lakh) instalments, respectively.

IV. Construction of houses beyond the prescribed size: Paragraph 5.1.4 of FFI, stipulates that the minimum size of a house is to be 25 square metre. It was observed that out of 1,314 houses wherein all the instalments were paid, there were 229 such houses for which all the instalments amounting to ₹ 2.80 crore were paid but these houses remained incomplete as area taken up for the construction was substantially larger than 25 sq. metres. Taking up large area for construction was one of the reasons for these 229 houses having remained incomplete. The Department also accepted this observation. Examples of such houses are shown in **Images 7 and 8**.

Image 7 and 8: Incomplete houses with construction area substantially more than 25 sq. metre



Image 7: Beneficiary ID-BHXXXXXX725, GP- Sonoura, Block- Nabinagar, District- Aurangabad, Area- 167 sq. metre (photograph taken on 12 December 2022)

Image 8: Beneficiary ID-BHXXXX812, GP- Bazidpur Meari, Block- Sarairanjan, District- Samastipur. Area- 133 sq. metre (photograph taken on 02 January 2023)

Further, Audit also observed that in 389 cases, beneficiaries had constructed houses with area of house less than 25 square metre. On an average, the area of these houses was 18.39 square metre, which was 26.44 *per cent* less than the stipulated area.

V. Non-display of Scheme logo and other details on houses: As per the letter of MoRD (November 2017), the logo of the PMAY-G and other details were to be displayed on the completed houses. However, the official logo of the PMAY-G was found displayed on only 237 houses (25 *per cent*), against 961 completed houses.

VI. Sanction of houses to ineligible beneficiaries:

- In 93 (6 *per cent*) cases, houses were sanctioned to such beneficiaries who were already residing in *pucca* houses, leading to an irregular expenditure of ₹ 1.10 crore.
- 25 beneficiaries were liable for automatic exclusion from the PWL, for being owners of motorised two to four wheelers/ fishing boat (20), mechanised

three/four wheeler agricultural equipment (2), refrigerator (2) and 2.5 acres or more of irrigated land with at least one irrigation equipment (1). However, these 25 beneficiaries were sanctioned houses under the Scheme leading to an irregular expenditure of ₹ 29.50 lakh.

VII. Absence of dedicated cooking space in the houses: As per Paragraph 2.2 (b) of the FFI, the completed house had to include a dedicated area for hygienic cooking. During JPV, it was noticed that 686 (71 per cent) completed houses did not have any dedicated space for hygienic cooking.

VIII. Abandonment of construction of houses midway: There were 13 such instances wherein construction of houses was abandoned (without roof casting) after receiving full assistance amounting to ₹ 15.20 lakh under the Scheme, as shown in *Image 9 and 10*.

Image 9 and 10: Beneficiaries paid full assistance against houses constructed up to roof casting and abandoned



Image 9: Beneficiary ID-BHXXXX244, GP- Asaraha, Block- Keotirunway, District- Darbhanga {House abandoned after constructing up to roof level (photograph taken on 27 February 2023)}

Image 10: Beneficiary ID-BHXXXX884, GP- Karanchi, Block-Bithan, District- Samastipur {House abandoned after constructing up to roof level (photograph taken on 20 January 2023)}

The Department accepted (July 2023) that the lapses detected during JPV were of a serious nature and action would be taken on the issues raised by Audit.

2.11.4 Non-organisation of Rural Mason Training

Paragraph 6.2.3.1 of the FFI stated that in order to ensure construction of good quality houses, availability of skilled masons in rural areas is imperative. The States therefore were to plan and conduct training programs for masons in locations where the construction intensity was projected to be high.

Further, Paragraph 6.2.5.1 of the FFI stipulated that construction of houses for old or infirm beneficiaries or persons with disability who were not able to get the houses constructed on their own, was to be taken up as a part of a Rural Mason Training (RMT) programme.

The Department was to fix targets and to conduct trainings to masons as per targets given by MoRD, GoI. For FY 2016-17 and 2017-18, MoRD, fixed (September 2017) targets for imparting trainings to 18,948 and 16,015 masons,

respectively. Further, for the FY 2018-19, MoRD fixed a target (June 2018) to train 30,000 masons.

Against these targets, the State fixed (February 2021) a target to train 18,945 masons only for the FY 2016-17, that too after a delay of three and a half years. No State level targets were fixed for the FYs 2017-18 and 2018-19.

Audit observed that in eight³⁵, of the 10 sampled districts, against the target of training 4,325 masons, only 3,231 masons were trained during FYs 2020-21 to 2023-24. Less trainings were due to delays in the distribution of targets to districts and selection of agency for organising the training. In case of Samastipur district, no training programmes were conducted by the State.

Delayed/non-conduct of RMT contributed to delays in timely completion of houses, especially for old/infirm or disabled beneficiaries who were not in a position to get the houses constructed on their own.

The Department replied (July 2023) that due to the paucity of funds, trainings against the target set for FY 2017-18 actually started during FY 2020-21 and were still under progress.

The reply of the Department was not acceptable, as no targets were fixed for FY 2017-18. Besides, sufficient funds were available with the Department under Administrative heads to provide trainings to masons. Further, against the targets for RMT received for three years, targets for only one year (2016-17) were taken up for execution and that had also not been achieved in the test-checked districts.

Subsequently, the Department issued instructions (November 2023) to the DDCs for taking up RMT as per the targets of FY 2016-17 and further instructed that houses of eligible beneficiaries should be selected and monitored for training and completion.

Audit, however, observed (January 2025) that against total target of 18,945 for the FY 2016-17, training for 16,016 masons, had been conducted. Thus, despite Departmental instructions, training for even FY 2016-17 targets were yet to be completed.

2.11.5 Non-commencement of construction of house even after release of first instalment

In light of criteria mentioned in Paragraph 2.9.12 *ibid*, the first instalment was to be released to the beneficiary within seven working days from the date of issue of the sanction order. Further, as per Paragraph 5.6.2 of the FFI, the construction of houses is to be completed within 12 months from the date of their sanction.

While analysing *AwaasSoft* data for FYs 2017-18 to 2023-24, Audit observed that in 102, out of the 126 sampled GPs of 10 sampled districts, construction of houses had not commenced in 390 cases (0.78 *per cent* of 49,796 cases in the sampled GPs) despite 34 to 93 months having elapsed since release of first instalment (as on 21 January 2025), as shown in **Table 2.10**.

³⁵ Except Samastipur (no training imparted) and Darbhanga (information not provided).

Table 2.10: Details of non-commencement of construction of houses, despite release of first instalment

Sl. No.	District	No. of GPs	Year wise number of beneficiaries							Amount of 1 st instalment (₹ in lakh)	Range of delay (in months) up to February 2025
			2017-18	2018-19	2019-20	2020-21	2021-22	2022-23	Total*		
1	Arwal	7	3	0	3	1	14	0	21	9.65	34 to 92
2	Auranagabad	10	8	1	3	0	24	0	36	16.90	35 to 91
3	Banka	12	6	5	9	8	1	0	29	12.30	35 to 92
4	Darbhangha	12	14	8	8	18	4	1	53	22.50	35 to 92
5	Khagaria	10	8	5	29	10	20	0	72	30.20	34 to 93
6	Madhubani	10	3	1	4	3	7	0	18	7.60	35 to 91
7	Samastipur	11	3	6	8	22	4	0	43	18.00	35 to 91
8	Saran	12	14	6	16	9	12	0	57	23.80	35 to 92
9	Sitamarhi	9	8	7	6	13	5	0	39	18.65	35 to 92
10	Vaishali	9	10	4	1	2	4	1	22	9.90	35 to 91
Total		102	77	43	87	86	95	2	390	169.50	

(Source: GP wise data available on AwaasSoft)

*No houses were sanctioned during FY 2023-24

As can be seen from **Table 2.10**, first instalments of ₹ 1.69 crore had been released to these 390 beneficiaries where construction of houses was yet to commence.

The Department replied (July 2023) that Certificate Cases³⁶ had been filed against defaulters for recovery of the amount, and instructions had been issued (November 2023) to the DDCs to regularly monitor such cases.

2.11.6 Delays in completion of houses

Paragraph 5.6.1 of the FFI, stipulates that the States/UTs have to closely monitor the construction of house by the beneficiary and ensure constant handholding. Further, in light of criteria mentioned in Paragraph 2.11.5 *ibid*, the construction of house was to be completed within 12 months from the date of sanction.

During scrutiny of the *AwaasSoft* Data Analytic Report of the PMAY-G dashboard for the period 2017-24, (as on 21 January 2025) Audit observed that there were delays in the completion of houses, during the period 2017-24, as shown in **Table 2.11**.

³⁶ Under the Bihar & Odisha Public Demands Recovery Act, 1914, a Certificate Case refers to a legal proceeding initiated for the recovery of public dues.

Table 2.11: Delays in completion of houses during FYs 2017-24

Financial Year	Total no. of houses sanctioned	Total no. of houses completed (percentage of sanctioned houses)	No. of houses completed within the prescribed time (percentage of houses completed)	No. of houses completed in more than 1 year-up to 2 years (percentage of houses completed)	No. of houses completed in 2-3 years (percentage of houses completed)	No. of houses completed in more than 3 years (percentage of houses completed)	No. of houses still incomplete (percentage of sanctioned house) as of January 2025
2017-18	5,34,871	4,71,955 (88)	3,00,672 (64)	1,29,275 (27)	35,029 (7)	6,979 (2)	62,916 (12)
2018-19	Data not available						
2019-20	12,88,982	12,35,321 (96)	7,08,904 (57)	4,04,564 (33)	1,16,268 (9)	5,585 (0)	53,661 (4)
2020-21	2,41,562	1,10,167 (46)	1,10,159 (100)	8 (0)	0 (0)	0 (0)	1,31,395 (54)
2021-22	10,01,603	8,03,459 (80)	8,03,459 (100)	0 (0)	0 (0)	0 (0)	1,98,144 (20)
2022-23	Data not available						
2023-24	Data not available						
Total	30,67,018	26,20,902 (85)	19,23,194 (73)	5,33,847 (20)	1,51,297 (6)	12,564 (0)	4,46,116 (15)

(Source: Data Analytic Report of the PMAY-G dashboard, as on 21 January 2025)

As can be seen from the **Table 2.11**:

(i) out of total 30.67 lakh houses sanctioned during 2017-24, 26.21 lakh (85 per cent) houses had been completed and 4.46 lakh (15 per cent) houses were yet to be completed, as of January 2025.

(ii) 57 to 100 per cent houses had been completed within the prescribed time, during FYs 2017-18 to 2021-22.

(iii) 27 and 33 per cent houses were completed with delays of between one to two years and seven and nine per cent houses were completed with delays of two to three years.

The Department replied (November 2023) that, due to temporary migration, deaths of some of the beneficiaries, construction of houses in large areas and poor financial condition of the beneficiaries, the completion of houses had been delayed.

The reply was not acceptable, as houses sanctioned even during FYs 2017-18 to 2020-21 were still incomplete. Further, the implementing authorities were to monitor the construction work and resolve the stated issues to ensure timely completion of the houses.

2.11.7 Non-payment of all instalments of assistance against completed houses

Analysis of *AwaasSoft* data for the State (as of 04 February 2025), revealed that payment of second and third instalments was still pending against 5,768 houses which had been sanctioned and completed during FYs 2017-18 to 2023-24 due to the death of beneficiary or in case of closure of beneficiary's bank account, as shown in **Table 2.12**.

Table 2.12: Non-payment of all instalments of assistance against completed houses (as of 04 February 2025)*(₹ in crore)*

Financial Year	Number of houses which had been completed but against which amounts had not been released in full	Amounts sanctioned	Amount paid	Amount pending for payment
2017-18	1,049	12.89	6.98	5.91
2018-19	Data not available			
2019-20	2,296	27.91	14.78	13.13
2020-21	556	6.72	3.47	3.25
2021-22	1,867	23.25	12.52	10.73
2022-23	Data not available			
2023-24	Data not available			
Total	5,768	70.77	37.75	33.02

(Source: AwaasSoft)

As can be seen from **Table 2.12**, ₹ 33.02 crore, pertaining to 5,768 beneficiaries, whose houses were sanctioned and completed during 2017-24, was still pending for payment, as on 04 February 2025.

During JPV it was noticed that there were 10 such beneficiaries whose houses were found to be completed but had not received their second and third instalments.

The Department accepted (July 2023) the audit observation and issued instructions (November 2023) to the DDCs, that: (i) there should be no delays in making payment to the beneficiaries whose houses had been completed; and (ii) payment related issues should be reviewed weekly at the district and block levels and resolved in a timely manner.

Thus, implementation of the Scheme was deficient, as the Department had failed to achieve the target for construction of houses and training for masons, as given by the Centre to the State. During JPV, houses marked as 'completed', in *AwaasSoft* were found to be incomplete. Further, instances of non-payment of all instalments to beneficiaries against completed houses and cases wherein all the three instalments had been paid, without the commencement of house construction, were also noticed.

Recommendation 3: The Government may strive to achieve the targets set for construction of houses, Rural Mason Training programme and ensure timely release of payments so that construction of houses is carried out to achieve the goal of 'Housing for All'.

2.12 Convergence with other Government schemes

Paragraph 8.1 of the FFI stressed on providing basic amenities in houses being constructed under the PMAY-G Scheme, in convergence with the existing Government schemes. These Schemes included, the Mahatma Gandhi National Rural Employment Guarantee Scheme (MGNREGS for providing 90/95 days³⁷ of wage employment); *Swachh Bharat Mission-Gramin* (SBM-G, for providing toilets and management of liquid & solid waste); *Pradhan Mantri Ujjawala Yojana* (PMUY, for LPG connections); *Deen Dayal Upadhyay Gram Jyoti Yojana* (DDUGJY, for electricity connections, solar lights) and the National Rural Drinking Water Programme (NRDWP, for piped drinking water facilities). Further, houses were to be treated as ‘complete’ only after construction of the toilet.

As per Paragraph 8.3 of the FFI, State and District Level Committees were to monitor/review the convergence with other Schemes. These Committees were also required to advise on inclusion of various schemes for convergence, in the Annual Action Plans.

Irregularities in regard observed during audit, are discussed as follows:

2.12.1 Convergence with MGNREGS

In light of the criteria mentioned in Paragraph 2.12 *ibid*, up to 90/95 person-days of unskilled labourers during house construction was to be provided for, under MGNREGS. Details of beneficiaries for providing person-days under convergence were to be obtained from *NREGASoft*³⁸.

The details of person-days provided to a total of 2,35,538 beneficiaries during the period 2017-18 to 2023-24 are shown in **Table 2.13**.

Table 2.13: Provision of person-days in convergence with MGNREGS

Financial Year	Total no. of beneficiaries	No. of beneficiaries provided less than 90/95 person-days	No. of short person-days	No. of beneficiaries given excess person-days	No. of excess person-days	No. of beneficiaries given nil person-days
2017-18	4,257	2,633	31,099	3	40	0
2018-19	39,181	24,023	2,05,098	165	991	1
2019-20	71,247	42,374	3,70,434	266	2,316	6
2020-21	43,662	34,205	5,35,780	127	768	1
2021-22	20,781	16,285	2,16,930	102	842	0
2022-23	54,454	53,151	2,12,250	10	33	1
2023-24	1,956	1,980	2,16,90	2	2	0
Total	2,35,538	1,74,651	15,93,281	675	4,992	9

(Source: AwaasSoft and NREGASoft)

As may be seen from **Table 2.13**, 1,74,651 beneficiaries had not been provided mandatory support of employment for 90/95 person-days in full and there

³⁷ 90 days for general districts; 95 days for hilly terrain, difficult areas and IAP districts.

³⁸ NREGASoft is a local language enabled workflow-based e-Governance system to capture all the activities under MGNREGS at the Centre/State/ District/Block and Panchayat levels.

was shortfall of 15,93,281 person-days in these cases. On the other hand, 675 beneficiaries had received employment for 4,992 excess person-days, over and above the 90/95 days. Further, no person-days had been provided to nine beneficiaries.

Further, Audit analysed *AwaasSoft* and *NREGASoft* data of the person-days, sanctioned and paid to 1,435 sampled beneficiaries in the 10 test checked districts. This analysis showed that in comparison to the mandated period, 15,546 less person-days were provided to 1,180 (82 *per cent*) beneficiaries (**Appendix 2.6**) which deprived them of wage income of up to ₹ 33.46 lakh.

The Department replied (July 2023) that these discrepancies had occurred due to software issues between *AwaasSoft* and *NREGASoft*, as well as issue of new guidelines under MGNREGS.

The reply was not acceptable as instances of providing short/excess person-days to beneficiaries were spread across the audit period, *i.e.*, FYs 2017-18 to 2023-24. Further, no details regarding the software issues between *AwaasSoft* and *NREGASoft* were produced to Audit.

2.12.2 Shortfall in providing basic amenities through convergence with other Government Schemes

In light of criteria mentioned in Paragraph 2.12 *ibid*, various government schemes were to be converged with PMAY-G, for providing basic amenities, *viz.*, drinking water (under NRDWP) (ii) electricity connections and solar lights (under DDUGJY) (iii) provision of toilets and management of liquid and solid wastes (under SBM-G) and (iv) development of group/individual amenities³⁹ (under MGNREGS).

As per information furnished by the Department (as on 04 February 2025), against the sanctioned 39.96 lakh houses, 37.04 lakh houses were completed. Out of these completed 37.04 lakh houses, in 0.50 lakh (1.35 *per cent* of the completed houses) and 0.30 lakh houses (one *per cent* of the completed houses), drinking water facility and LPG connections, were not available, respectively. Toilets and electricity connections were available in all the completed houses.

Details of basic amenities not found provided to beneficiaries of completed houses in the sampled districts, as noted during JPV, are given in **Appendix 2.7**. During the JPV it was noticed that out of the 961 completed houses, in 541 cases (56 *per cent*), toilets were not constructed. It was also observed that 157 houses did not have the basic amenities of drinking water, electricity/solar connection, LPG connection, bathing area, waste management facility, *etc.*

In this regard, the Block Coordinators⁴⁰ (for SBM-G) of the selected blocks replied that they were ignorant about beneficiaries who had been sanctioned houses under

³⁹ *Development of house sites, bio fencing, paved pathways, approach roads or steps to the house, soil conservation and protection works etc.*

⁴⁰ *Responsible for handholding, supervising and monitoring the implementation of the SBM-G at the Block level.*

PMAY-G, as the list of such beneficiaries had not been provided by the block level officials. The reply was indicative of the lack of coordination between two implementing agencies of the same Department, for ensuring convergence under different GoI schemes.

The Department issued instructions (November 2023) to the DDCs, to motivate beneficiaries to apply for electricity connections under DDUGJY, water supply connections under the *Saat Nischay*⁴¹ and LPG connections under PMUY.

2.12.3 Discrepancies in details of beneficiaries between *AwaasSoft* and *NREGASoft*

As per Paragraph 5.3.1 of FFI, during registration of the beneficiary in *AwaasSoft*, bank account details, name of the nominee, MGNREGS Job Card number have to be mandatorily entered.

In light of criteria mentioned in Paragraph 2.12 *ibid*, under PMAY-G, it is mandatory to provide support of 90/95 person-days unskilled wage employment to the Scheme beneficiaries, for construction of their houses, in convergence with MGNREGS.

Audit observed discrepancies in beneficiaries' details in *AwaasSoft* and *NREGASoft*, as discussed below:

(i) **Beneficiary name mismatch in Job Cards, as per *AwaasSoft* and *NREGASoft*:** In 24 of the 28 sampled blocks, Audit observed that there were 127 such cases wherein the beneficiaries, reflected in *AwaasSoft*, were different from those reflected in the MGNREGS job cards of *NREGASoft* (**Appendix 2.8**). Further scrutiny revealed that the names, reflected in the job cards did not match with the names of any of the family members of the beneficiaries. Payment of ₹ 16.91 lakh was made to these 127 beneficiaries.

(ii) **Non-allocation of additional work under MGNREGS due to incorrect Job Cards in *NREGASoft*:** Audit cross examined the beneficiaries' Report and Job Card registration registers available on *NREGASoft* with MGNREGS related details of the beneficiaries on *AwaasSoft*. This examination revealed that the Job Cards of 30 PMAY-G beneficiaries of nine of the 10 sampled districts (except Saran) were not available (on *NREGASoft*), even though the Job card numbers of these beneficiaries were available on *AwaasSoft*.

This indicated that either the Job Cards were being entered arbitrarily in *AwaasSoft* at the time of registration of PMAY-G beneficiaries, by the block level officials, or that the server- to- server integration of the MIS of *AwaasSoft* and *NREGASoft* was not proper. Consequently, these beneficiaries remained deprived of mandatory convergence of 90/95 man-days, under MGNREGS due to non-availability of actual Job Cards for payment of wages (**Appendix 2.9**).

⁴¹ *Saat Nischay* is an initiative of Government of Bihar, focused on improving infrastructure and quality of life through seven key areas viz., road development, electricity access, clean drinking water, sanitation, skill development, social welfare and women empowerment.

The Department instructed (November 2023) the DDCs that: (i) special care should be taken while entering details of the job cards of beneficiary/beneficiary's family members (ii) problems, if any, should be resolved by contacting the Programme Officer, MGNREGA and (iii) while registering under the Scheme, the MGNREGS job cards of the beneficiary/beneficiary's family members should be used.

Recommendation 4: The State Government may ensure effective integration between NREGASoft and AwaasSoft and other schemes for better coordination and monitoring.

2.12.4 Irregular payment of wages under MGNREGS

(i) Payment of MGNREGS wages without commencement of house construction: The Department directed (September 2017) that payment for 28/30 person-days under MGNREGS was to be made to the concerned beneficiaries for construction of their houses up to the plinth level.

Audit analysed *AwaasSoft* and *NREGASoft* data (as of February 2025) of the sampled districts for FYs 2017-18 to 2023-24. Analysis revealed that wages, in excess of 28/30 person-days, had been paid to 208 beneficiaries under MGNREGS without commencement of construction work (**Appendix 2.10**). This had resulted in excess payment of ₹ 22.33 lakh, towards MGNREGS, for 11,569 excess person-days.

The Programme Officers (at block level), MGNREGA, replied (December 2022 to February 2023) that the stages of construction of house were not ascertainable from *NREGASoft*.

The reply was not acceptable, as the stages of construction of houses could be ascertained from *AwaasSoft*.

The Department issued instructions (November 2023), to the DDCs to maintain uniformity in providing person-days to beneficiaries, under convergence with MGNREGS.

(ii) Payment of MGNREGS wages to remanded beneficiaries: Audit observed that in 14 sampled blocks of seven districts, 180 persons who had become ineligible for availing PMAY-G assistance were paid wages of ₹ 22.28 lakh for 10,689 person-days under MGNREGS during FYs 2017-18 to 2021-22 (**Appendix 2.11**) (as on 31 March 2024). These persons were remanded by the concerned *Gram Sabhas* from PWL, on being found ineligible for availing benefits of the Scheme. Therefore, the payments made to them under convergence with MGNREGS were irregular.

The concerned Programme Officers, MGNREGA, accepted the observation and assured that initiative would be taken for recovery of such wages.

The Department instructed (November 2023), the DDCs to send information relating to remand of ineligible beneficiaries under PMAY-G also to the Programme

Officers, MGNREGA, adding that weekly joint reviews of such cases may be conducted at the block level.

Thus, convergence with other government schemes was deficient and there was lack of provision of all basic amenities in the houses constructed under the Scheme. There were also cases of discrepancies in the provision of stipulated person-days to beneficiaries, under convergence with MGNREGS. Cases of MGNREGS wages being paid to persons who had not started the construction work and persons who had been remanded were also noticed.

Recommendation 5: The State Government may ensure adequate and effective convergence with the specified social sector schemes, as envisaged in the PMAY-G guidelines, to ensure that all basic facilities are provided in the houses being constructed under the Scheme.

2.13 Monitoring and Evaluation

As per Paragraph 9.3.2 of the FFI, the State was to monitor the implementation of the Scheme and quality supervision at different⁴² levels through IT enabled e-governance platforms (*AwaasSoft* and *AwaasApp*), as well as through ground verification.

2.13.1 Discrepancies in the geo-tagging of locations and photographs of houses

(A) Discrepancies in the geo-tagging of locations of houses:

Paragraph 5.2.1 of the FFI stipulated that before issue of the Sanction Order, the concerned *Gramin Awaas Sahayak* was to capture photos of old houses and the construction site of new houses under the Scheme, through the mobile application “*AwaasApp*”. These geo-referenced photographs were to be uploaded in *AwaasSoft*. In case the beneficiary wished to construct the PMAY-G house on the plot where he/she was currently residing, this should also be clearly indicated. Further, as per Paragraph 9.3.1.2 of the FFI, the progress of stage-wise construction (Plinth, Roof cast and completed) was to be verified and monitored through geo-referenced, date and time stamped photographs captured by *Awaas Sahayaks*. The permissible deviation in location of site in *AwaasApp* was 25 metres and in case of deviations beyond this permissible limit, the application flashed an error message.

Audit, however, observed cases of houses being geo-tagged outside their concerned GP, district and even outside the State. In 52 cases⁴³, location of houses had been geo-tagged at distant places in the State, in wide deviation from the actual house locations. In three⁴⁴ cases, the locations of houses were geo-tagged at places outside the State (in Delhi and Jharkhand), with distances ranging from 51 Km to 915 Km.

⁴² At GP, block and district levels.

⁴³ Arwal-08, Aurangabad-02, Banka-08, Darbhanga-02, Madhubani-21, Samastipur-03, Saran-02 and Vaishali-06.

⁴⁴ Banka-02, Madhubani-01.

Instances of discrepancies in geo-tagging of house locations, are shown in *Images 11 to 13*.

Image 11: House sanctioned in one block (Andhartharhi) of a district, geo-tagged in another block (Jhanjharpur) of that district

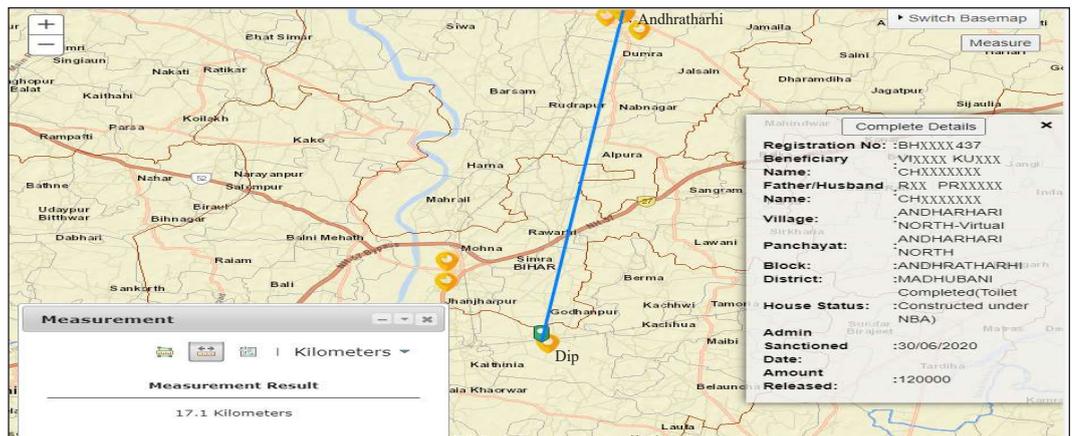


Image 11: House of Beneficiary ID-BHXXXX437, sanctioned in Andhartharhi block was geo-tagged at Dip Railway Station, Jhanjharpur (Madhubani) (distance between both the locations is 17 km)

Image 12: Geo-tagging of house location in different district



Image 12: House of Beneficiary ID- BHXXXX748, of Arwal district, geo-tagged in Aurangabad district (distance between both locations is 34 Km)

Image 13: Geo-tagging of house location outside Bihar

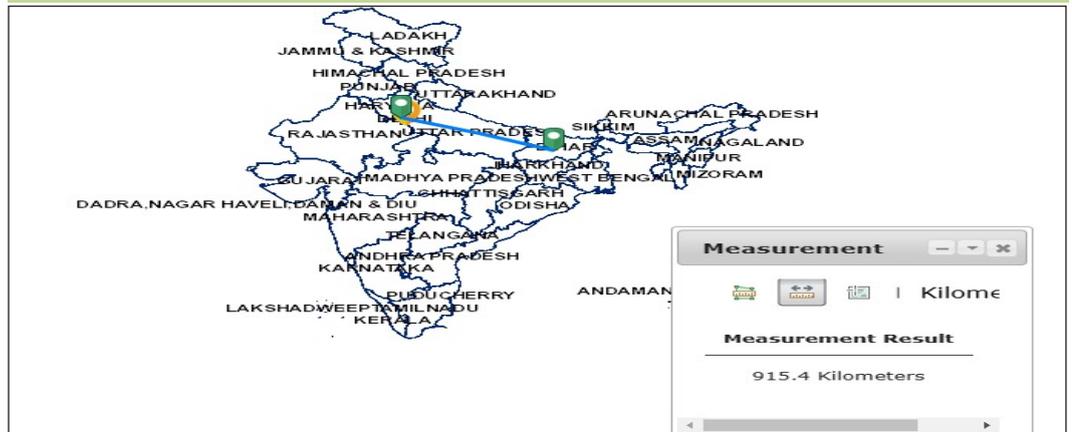


Image 13: House of Beneficiary ID- BHXXXX381, of Madhubani district, geo-tagged in New Delhi (distance between both locations is 915 Km)

(Source: Awaasoft)

The images are indicative of the risk that the concerned *Gramin Awaas Sahayak*, who was tasked with the responsibility of geo-tagging the houses, had geo-tagged them without visiting the actual sites.

The Department instructed (November 2023) DDCs that: (i) photographs uploaded by the *Gramin Awaas Sahayak* must be scrutinised at the block level before approval (ii) random scrutiny of uploaded photographs should also be conducted at the district level and (iii) in case of uploading of a wrong photograph, responsibility may be fixed and necessary action may be taken against the defaulting officials.

(B) Discrepancies in the geo-tagging of stages of house construction:

Audit test-checked photographs related to house construction, uploaded on *AwaasSoft*. Test-check revealed that in the *AwaasSoft*, photographs of 10 of the ‘completed houses’ were shown as taken and uploaded just one day after the photographs showing the stage of construction up to the ‘plinth level’ only were uploaded on the *AwaasSoft*. One of the instances is shown in *Images 14* and *15*.

Image 14 and 15: Discrepancies in geo-tagging of stages of house construction

Plinth level photograph	Completion level photograph
	
<p>Image 14: Shown as uploaded on <i>AwaasSoft</i> after inspection conducted on 03 June 2022</p>	<p>Image 15: Shown as uploaded on <i>AwaasSoft</i> after inspection conducted on 04 June 2022</p>
<p>(ID-BHXXXX202), GP-Saramahmad, Block-Darbhanga, District-Darbhanga</p>	

(Source: *AwaasSoft*)

It is evident from the *Image 14* and *15* that the houses had been shown as completed (in *AwaasSoft*) in just one day after the house shown as constructed up to the plinth level, which was practically not possible.

This was indicative of the fact that dates on which the photographs were uploaded and geo-tagged on *AwaasSoft* were different from the actual dates of the stages of house construction. Thus, the prescribed checks were not exercised before accepting the photographs, for geo-tagging.

2.13.2 Inordinate delays in conducting the first inspection

As per Paragraph 9.2.1(e) of the FFI, the first inspection of houses was to be conducted within three months of their sanction. Further, as per Paragraph 13.1.1(f) of the FFI, during inspection, images of different levels of construction of houses were to be taken. These images were to be verified and uploaded on *AwaasSoft*, using “*AwaasApp*”.

Audit observed that, in the sampled districts there were inordinate delays in conducting the first inspections of houses sanctioned, during FYs 2017-18 to 2023-24, as shown in **Table 2.14**.

Table 2.14: Delays in conduct of first inspection

Financial Year	No. of beneficiaries	No. of houses against which the first inspection had been conducted within the prescribed time	No. of houses where first inspection was conducted beyond 3 months from the date of sanction	Range of delays in conducting first inspections				No. of houses against which first inspection was not conducted
				Up to three months	More than three & up to six months	Six months to one year	More than one year	
2017-18	63	10	53	20	9	13	11	0
2018-19	100	24	75	26	16	15	18	1
2019-20	306	85	221	67	44	47	63	0
2020-21	203	54	148	40	31	32	45	1
2021-22	759	245	507	382	70	43	12	7
2022-23	23	16	6	4	1	0	1	1
2023-24	0	0	0	0	0	0	0	0
Total	1,454	434	1,010	539	171	150	150	10

(Source: AwaasSoft)

It is evident from **Table 2.14** that, out of the 1,454 houses sanctioned during 2017-24, the first inspection of houses was conducted with delays in 1,010 cases (70 per cent cases). It was also observed that, in 171, 150 and 150 cases, delays in conducting the first inspection ranged between more than three to six months, between six months to one year and more than one year, respectively. Delays in conducting the first inspection led to irregularities such as non-commencement of house construction even after the payments of the first (**Paragraph 2.11.5**) and all the instalments (**Paragraph 2.11.2**).

The Department replied (November 2023) that that instructions had been issued to the DDCs to ensure regular inspections during construction of houses.

Further, during the JPV, Audit noticed 25 such cases, (**Appendix 2.12**), wherein same/similar photographs were used to show different stages/levels of construction of houses and payments of ₹ 30 lakh were made in these cases. This was indicative of the possibility of doubtful construction of houses, meriting investigation. One of the instances, in which the same photograph had been geo-tagged and uploaded on *AwaasSoft*, against different stages of construction of the house, is shown in **Images 16 to 18**.

Images 16 to 18: Same photographs uploaded on *AwaasSoft* for different stages of house construction

Plinth level	Roofcast level	Completed level
		
<p align="center">Image 16</p> <p>(Shown as uploaded on <i>AwaasSoft</i> after inspection conducted on 10 March 2022)</p>	<p align="center">Image 17</p> <p>(Shown as uploaded on <i>AwaasSoft</i> after inspection conducted on 10 March 2022)</p>	<p align="center">Image 18</p> <p>(Shown as uploaded on <i>AwaasSoft</i> after inspection conducted on 10 March 2022)</p>
<p align="center">(ID-BHXXXX710), GP- Bakhri Buzurg, Block - Sarairanjan, District- Samastipur</p>		

(Source: *AwaasSoft*)

Above discrepancies in geo-tagging of houses/photographs are also indicative of lack of monitoring at the block level.

The Department accepted (July 2023) the observations of the JPV.

2.13.3 Shortfall in conducting of Social Audits

As per Paragraphs 9.6.1 to 9.6.5 of the FFI, social audit was to be conducted in every GP, at least once in a year. Social audit was to involve a mandatory review of all aspects, with the basic objective of ensuring achievement of public accountability in implementation of PMAY-G. Social Audit Units (SAUs)⁴⁵, set up by the State government under MGNREGA, were to be roped in, to facilitate conduct of Social Audit of PMAY-G. Resource persons, drawn from primary stakeholders, civil society organisations or individuals, having knowledge and experience in working for the rights of the people, were to be involved with the *Gram Sabhas*, in conducting social audits. The findings of the Social Audits were to be discussed by the *Gram Sabha* concerned. The concerned GPs and BDOs were to take follow-up action on the findings of Social Audits and send the action taken reports to the State SAU.

Audit observed shortfalls in conducting Social Audits at the GP level, in the nine sampled districts (except Sitamarhi, wherein information, regarding conduct of Social Audits was not provided) during FYs 2017-18 to 2023-24, as shown in **Table 2.15**.

⁴⁵ *Independent organisations that facilitates conduct of social audit of MGNREGA works for ensuring transparency and accountability.*

Table 2.15: Details of shortfall in conducting of social audits in the sampled districts during FYs 2017-18 to 2023-24

Sl. No.	District	No. of Social Audits required to be conducted (<i>No. of GPs in the district x 7</i>)	No. of Social Audits conducted	Shortfall (in per cent)
1	Arwal	452	252	200 (44)
2	Aurangabad	1,016	171	845 (83)
3	Banka	1,286	683	603 (47)
4	Darbhanga	1,545	161	1,384 (90)
5	Khagaria	855	420	435 (51)
6	Madhubani	2,760	807	1,953 (70)
7	Samastipur	2,076	280	1,796 (87)
8	Saran	1,908	453	1,455 (76)
9	Vaishali	1,430	421	1,009 (71)
	Total	13,328	3,648	9,680 (73)

(Source: Information provided by the sampled DRDAs)

As can be seen from **Table 2.15**, against the required 13,328 Social Audits to be conducted during 2017-24, only 3,648 social audits (27 per cent) were conducted in the nine of the 10 sampled districts.

Audit further observed that:

- no social audit was conducted in any of the sampled districts during FY 2017-18,
- in FY 2018-19, Social Audit was conducted only in two districts (Khagaria and Madhubani).
- Further, findings of Social Audits, such as non-availability of booklets pertaining to PMAY-G to beneficiaries; non-production of documents relating to *Awaas Diwas*; PWL not being painted on the walls of concerned GPs; beneficiaries not having Job Cards; work not being started despite payment of first instalments; MGNREGS wages payments being made for short person-days, had not been complied with by the concerned *Gram Sabhas/ Gram Panchayats*.

The Department replied (August 2023) that due to delayed appointment of State Resource Persons and District Resource Persons and enforcement of the model code of conduct, appropriate number of social audits could not be conducted in GPs. The Department also issued (November 2023) instructions to DDCs, to facilitate Social Audits, as prescribed.

2.13.4 Grievance redressal mechanism

As per Paragraphs 12.1 and 12.2 of the FFI, a grievance redressal mechanism was to be set-up at the GP, Block, District and State levels. A State Government official was to be identified at each level, to ensure the disposal of grievances. The designated official was to be responsible for disposing off the grievances/complaints within 15 days of receipt.

No records relating to complaints/grievances were, however, found to have been maintained in any of the sampled Blocks, Districts, and at the State level. In the

absence of any records, Audit could not ascertain whether the grievances received, with respect to the Scheme, were being disposed off properly.

In light of the audit observation, the Department issued (November 2023) instructions to the DDCs to resolve complaints received properly, within 15 days.

2.13.5 Shortage of manpower

To assist beneficiaries and monitor the construction of houses under the Scheme, a dedicated GAS was to be appointed for each *Panchayat*. An *Awaas* Supervisor, at the block level, was also to be appointed for the supervision of the GAS. In case of blocks having more than 15 *Panchayats*, there were to be two *Awaas* Supervisors. Further, for maintenance of accounts and facilitating annual audit, there was to be an Accounts Assistant (*Gramin Awaas*) in every block. Similarly, posts of Accountant, MIS officer, District Audit Manager, Accounts Officer and Senior Accounts Officers were sanctioned at the district level, for implementation and monitoring of the Scheme.

Status of sanctioned strength (SS) and men-in-position (MIP), in regard to PMAY-G, in the State, is given in **Table 2.16**.

Table 2.16: Sanctioned strength and men-in-position for PMAY-G in the State (as of November 2024)

Post	Sanctioned Strength	Men-in-position	Vacancy	Vacancy (Per cent)
(A) At District Level				
Senior Accounts Officer	36	27	9	25
Accounts Officer	76	29	47	62
District Finance Manager	38	16	22	58
District Audit Manager	38	26	12	32
MIS Officer	38	30	8	21
Accountant	141	48	93	66
(B) At Block Level				
Technical Assistant	318	90	228	72
Gramin Awaas Supervisor	821	424	397	48
Accounts Assistant	534	26	508	95
Block Accountant	534	318	216	40
Gramin Awaas Sahayak	8,422	5,686	2,736	32
Total	10,996	6,720	4,276	39

(Source: Information provided by the RDD, GoB)

Table 2.16 shows that vacancies for various posts in the State, ranged from 21 per cent to 95 per cent, vis-a-vis the sanctioned posts, as of November 2024. The overall vacancies in the State were 39 per cent of the overall number of sanctioned posts.

These vacancies, across different posts, and especially at the level of GAS (32 per cent), who were to supervise construction of houses at the ground level, led to poor monitoring of the Scheme at different levels, as discussed in **Paragraphs 2.13.1 and 2.13.2**. This shortfall also paved the way for different kinds of irregularities such as delays in completion of houses (**Paragraph 2.11.6**), non-payments of instalments for completed houses (**Paragraph 2.11.7**).

The Department instructed (November 2023) that in the GPs where the post of GAS is vacant, the Scheme related work may be taken up by the *Panchayat Rojgar Sevak* of that GP.

2.13.6 Delays in submission of Audit Reports

Paragraph 9.5 of the FFI stipulated that the State had to get the accounts of PMAY-G pertaining to a Financial Year audited by a Chartered Accountant, before 31 August of the next financial year.

Further, as per information provided by the Department, audit report on the accounts of the Scheme for a financial year was to be submitted by a Chartered Accountant to the Department by 30 September of the ensuing financial year.

Besides, the State was to submit, by 31 December of a financial year, the proposal for release of second instalment of that financial year to the GoI. The proposal was to be forwarded along with audited accounts of the previous financial year.

Details of delays in submission of audit reports on the accounts of the Scheme, during FYs 2017-18 to 2023-24, are shown in **Table 2.17**.

Table 2.17: Delays in submission of audit report on PMAY-G accounts, during FYs 2017-18 to 2023-24

Financial Year	Due date for submission of audit report to the Department	Date of submission of audit report	Delay (in days)
2017-18	30.9.2018	22.11.2018	51
2018-19	30.9.2019	2.12.2019	62
2019-20	30.9.2020	18.1.2021	109
2020-21	30.9.2021	13.12.2021	73
2021-22	30.9.2022	17.10.2022	16
2022-23	30.9.2023	29.12.2023	89
2023-24	30.9.2024	9.1.2025	100

(Source: Information provided by RDD, GoB)

It can be seen from **Table 2.17** that there were delays of 16 to 109 days, in the submission of audit reports on PMAY-G accounts, indicating lack of monitoring on the part of the Department.

Delayed submission of audit reports for the FYs 2018-19, 2020-21, 2022-23 and 2023-24 impacted submission of proposals for second instalments for the Scheme. Further, delays in submission of proposals for the second instalment of the Scheme resulted in delays of 18 and 12 months in FY 2017-18 and 2019-20, respectively, in receipt of funds from the Central Government (**Paragraph 2.9.4**).

The Department replied (August 2023) that there had been procedural delays in the selection of a Chartered Accountant, causing delays in submission of audit reports.

2.13.7 Non-maintenance of the Scheme related vital records

The Department prescribed (May 2018 and August 2021) the process for disposal of applications received under PMAY-G and maintenance of various vital related records *thereto*, to be maintained at the block and district levels. These records included maintenance of registers to watch the progress of construction of houses

undertaken by beneficiaries; records related to Certificate Cases; payment of instalments and generation of FTOs; records related to monitoring and inspection at the district and block levels *etc.* However, despite the Departmental instructions, sampled districts and blocks, did not maintain these records for FYs 2017-18 to 2023-24 (*Appendix 2.13*) contributing to poor monitoring as well as limiting the scope of audit.

The Department instructed (November 2023) the DDCs, to maintain registers related to PMAY-G, as well as to ensure, compliance with the guidelines.

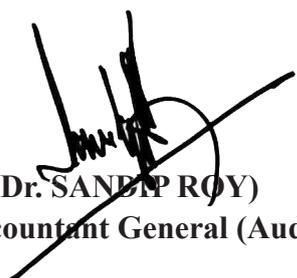
Thus, there were instances of improper geo-tagging of houses indicating poor monitoring mechanism, cases of inordinate delays in conducting the first inspections of houses and social audits not being conducted, as per the Scheme guidelines. Besides this, issues related to shortage of manpower, delays in submission of audit reports and non-maintenance of vital records at the district and block levels were also noticed during audit.

Recommendation 6: The State Government may ensure geo-tagging of houses from their actual locations and monitor progress of house construction through evidence based, date and time-stamped and geo-referenced photographs.

Recommendation 7: The State Government may ensure conduct of social audits, to improve public accountability and address shortcomings in the implementation of the Scheme.

Patna

Dated : 26 November 2025


(Dr. SANDIP ROY)

Principal Accountant General (Audit), Bihar

Countersigned

New Delhi

Dated : 3 December 2025


(K. SANJAY MURTHY)

Comptroller and Auditor General of India



Appendices

Appendix-1.1
(Refer: Paragraph-1.5)
Details of sampled 10 Districts and 63 Hospitals

Sl. No.	Name of District	Sl. No.	Name of Hospital	Type of Hospital
1	Purnea	1	Al Shafa Hospital	Private
		2	Dropadi Netralaya Private Limited	Private
		3	RH, Amour	Public
		4	PHC, Bhawanipur	Public
		5	Sadar Hospital, Purnea*	Public
2	Darbhanga	6	Sub-Divisional Hospital, Benipur	Public
		7	CHC, Baheri	Public
		8	CHC, Biraul	Public
		9	RH, Jalley	Public
		10	Darbhanga Medical College and Hospital	Public
		11	Uro Stone Research Centre Pvt. Ltd.	Private
		12	I B Smriti Arogya Sadan	Private
		13	Swami Vivekanand Cancer Aspatal	Private
3	Saran	14	CHC, Amnaur	Public
		15	RH, Baniyapur	Public
		16	Sub-Divisional Hospital, Sonapur	Public
		17	District Hospital, Saran	Public
		18	Akhand Jyoti Eye Hospital	Private
4	Muzaffarpur	19	PHC, Gaighat	Public
		20	Sadar Hospital, Muzaffarpur*	Public
		21	Sri Krishna Medical College and Hospital	Public
		22	Mehta Seva Sadan Hospital	Private
		23	Bathua Nursing Home Pvt. Ltd.	Private
		24	Aashish Care & Cure Maternity Hospital Pvt. Ltd.	Private
		25	Ashoka Hospital	Private
		26	Prashant Memorial Charitable Hospital	Private
5	Sitamarhi	27	CHC, Nanpur	Public
		28	PHC, Dumra	Public
		29	CHC, Bokhra	Public
		30	Sadar Hospital, Sitamarhi*	Public
		31	CHC, Runnisaipur	Public
		32	Navjivan Multispeciality Hosptal & Research Centre Pvt. Ltd.	Private
6	Katihar	33	Sadar Hospital, Katihar*	Public
		34	PHC, Amdabad	Public
		35	CHC, Falka	Public
		36	PHC, Mansahi	Public
		37	Satyabhama Netralaya	Private

Sl. No.	Name of District	Sl. No.	Name of Hospital	Type of Hospital
7	Bhagalpur	38	PHC, Narayanpur	Public
		39	CHC, Shahkund	Public
		40	CHC, Bihpur	Public
		41	Lok Nayak Jaiprakash Narayan Sadar Hospital, Bhagalpur*	Public
		42	Jawahar Lal Nehru Medical College and Hospital	Public
		43	Harishakha Drishti	Private
8	Nalanda	44	RH, Chandi	Public
		45	RH, Asthawan	Public
		46	PHC, Nagarnausa	Public
		47	District Hospital, Biharsharif, Nalanda*	Public
		48	Vardhman Institute of Medical Science & Hospital, Pawapuri	Public
		49	Jahnavi Eye care and Research Centre	Private
		50	Drishti Eye Hospital	Private
9	Patna	51	Guru Govind Singh Sadar Hospital, Patna*	Public
		52	Indira Gandhi Institute of Medical Science	Public
		53	RH, Bihta	Public
		54	Sidhartha Multispeciality Hospital Pvt. Ltd.	Private
		55	Jeevak Heart Hospital & Res. Inst. Pvt. Ltd.	Private
		56	Mahavir Vatsalya Aspatal	Private
		57	Sri Sai Lions Netralaya	Private
		58	Mahavir Cancer Institute & Research Centre	Private
10	Bhojpur	59	CHC, Sahar	Public
		60	RH, Jagdishpur	Public
		61	District Hospital, Bhojpur*	Public
		62	Shanti Memorial Hospital	Private
		63	Kanchan Shalya Niketan	Private

* Indicates District Hospitals (There is no District Hospital in Darbhanga district)

Note: RH: Referral Hospital, CHC: Community Health Centre, PHC: Primary Health Centre

Appendix-1.2
(Refer: Paragraph-1.5)
Details of sampled 40 Gram Panchayats and 10 Urban Local Bodies (ULBs)

Sl. No.	Name of District	Name of Block	Name of ULB	Name of Gram Panchayat
1	Bhagalpur	Kahalgaon	Nagar Panchayat, Kahalgaon	Shyampur/Shampur Jani Dih
		Pirpainti	0	Manikpur Hardew chack
		Agiaon	0	Agiaon Kirkiri
2	Bhojpur	Jagdishpur	Nagar Panchayat, Jagdishpur	Siyaruwa/Shiaura Shiupur/Seopur
		Singhwara	0	Bharwara Singhwara south
3	Darbhanga	Darbhanga	Nagar Nigam, Darbhanga	Shahbajpur Kharua
		Katihar	Nagar Nigam, Katihar	Garbhaili Dalan west
4	Katihar	Korha	0	Simariya South Babanganj/ Banganj
		Motipur	Nagar Panchayat, Motipur	Mohammadpur Balmi/ Mahamadpur Balmi Baruraj East
5	Muzaffarpur	Katra	0	Bandhpur Madhepura
		Noorsarai	0	Daruara Paparnausa
6	Nalanda	Silao	Nagar Panchayat, Silao	Surajpur Mahuri
		Bakhtiyarpur	Nagar Parishad, Bakhtiyarpur	Doman/Doma Hardaspur Diyara
7	Patna	Punpun	0	Baranwa/ Barawan Paimar/Panwar
		Dhamdaha	0	Mogaliya Purandaha East Dhamdaha Middle
8	Purnea	Banmankhi	Nagar Panchayat, Banmankhi	Jiyanganj/Jianganj Pipra
		Chapra	Nagar Nigam, Chapra	Tenua Maharajganj
9	Saran	Dariyapur	0	Bajhiya/Bajahia Bishambharpur
		Belsand	Nagar Panchayat, Belsand	Dumra Lahasi/Lahansi
10	Sitamarhi	Runnisaidpur	0	Mahesha Farakpur Uttar Manik Chak Dakshini

No. of selected Blocks: 20; No. of selected ULBs: 10 and no. of selected GPs: 40

Appendix-1.3
(Refer: Paragraph-1.7)

District-wise families/beneficiaries verified in Bihar up to 16 October 2023

District wise BIS Report							
Sl. No.	Name of District	Total Household/ Families	Total Beneficiaries	Families Verified	Beneficiaries Verified	Percentage of families verified	Percentage of beneficiaries verified
1	Rohtas	2,35,302	13,31,803	1,37,209	3,79,932	58.31	28.53
2	Bhojpur	2,41,699	13,48,503	1,33,464	3,52,316	55.22	26.13
3	Buxar	1,07,799	6,47,591	56,556	1,49,631	52.46	23.11
4	Gopalganj	1,48,982	8,37,513	77,391	1,90,920	51.95	22.80
5	Munger	1,60,478	7,79,934	77,156	1,76,709	48.08	22.66
6	Nalanda	2,68,552	14,61,095	1,27,799	3,18,173	47.59	21.78
7	Madhepura	2,44,634	11,69,363	1,16,272	2,45,063	47.53	20.96
8	Saharsa	2,40,156	12,30,542	1,15,547	2,46,689	48.11	20.05
9	Arwal	63,758	3,60,214	27,439	71,661	43.04	19.89
10	Jehanabad	91,136	5,25,353	41,005	1,00,456	44.99	19.12
11	Begusarai	3,88,063	19,54,596	1,66,497	3,73,710	42.90	19.12
12	Banka	2,17,516	10,74,647	98,495	2,02,333	45.28	18.83
13	Aurangabad	2,00,297	11,67,555	90,848	2,19,696	45.36	18.82
14	Jamui	1,56,242	8,26,989	67,307	1,49,745	43.08	18.11
15	Sheikhpura	56,868	3,31,029	22,503	59,650	39.57	18.02
16	Kaimur (Bhabua)	1,22,173	7,08,506	53,798	1,21,872	44.03	17.20
17	Vaishali	4,20,599	22,17,924	1,68,353	3,79,766	40.03	17.12
18	Nawada	1,85,597	11,35,011	75,495	1,92,490	40.68	16.96
19	Kishanganj	2,17,430	10,46,501	84,154	1,72,180	38.70	16.45
20	Muzaffarpur	5,20,794	24,91,879	1,94,968	4,02,920	37.44	16.17
21	Lakhisarai	80,881	4,78,676	33,454	75,598	41.36	15.79
22	Supaul	2,62,940	12,35,593	90,369	1,87,511	34.37	15.18
23	Saran	2,56,384	13,96,260	94,125	2,11,157	36.71	15.12
24	Sheohar	95,039	3,87,615	30,993	58,413	32.61	15.07
25	Siwan	1,97,695	11,18,308	72,308	1,64,251	36.58	14.69
26	Samastipur	5,30,774	26,94,227	1,97,147	3,85,003	37.14	14.29
27	Madhubani	4,91,247	23,70,685	1,51,291	2,97,541	30.80	12.55
28	Patna	5,55,543	29,90,294	1,62,709	3,71,012	29.29	12.41
29	Sitamarhi	4,59,456	20,21,318	1,31,569	2,41,027	28.64	11.92
30	Bhagalpur	3,13,773	16,86,320	1,06,366	2,00,238	33.90	11.87
31	Darbhanga	5,99,387	27,89,706	1,68,207	3,13,546	28.06	11.24
32	Gaya	3,72,580	20,94,478	1,08,597	2,34,065	29.15	11.18
33	Purnea	4,04,244	19,38,657	1,11,171	2,03,130	27.50	10.48
34	West Champaran	4,11,831	19,87,505	1,05,309	2,08,520	25.57	10.49
35	East Champaran	5,26,049	26,85,802	1,41,872	2,66,765	26.97	9.93
36	Khagaria	2,50,047	12,24,551	59,973	1,17,280	23.98	9.58
37	Katihar	4,13,774	19,75,168	97,981	1,79,105	23.68	9.07
38	Araria	3,85,852	18,40,695	79,576	1,42,970	20.62	7.77
Total		1,08,95,571	5,55,62,406	38,75,273	83,63,044	35.57	15.05

(Source: Insight portal of AB-PMJAY)

Appendix-1.4
(Refer: Paragraph-1.7.3 (iii))
Details of illustrative IEC activities in sampled 10 districts

Sl. No.	Name of District	Name of illustrative IEC activities					
		1. Print material i. Banners ii. Brochures iii. Leaflets iv. Standees v. Backdrops	2. Communication at empanelled hospitals i. <i>Arogya mitra</i> uniforms ii. Kiosk iii. Hospital enrolment certificate iv. Hoardings v. Standees vi. Leaflets/pamphlets/handbills vii. Certification for empanelled hospitals	3. Out of home advertising i. Hoardings ii. Panels iii. Bus Stops iv. Railway Stations v. Digital Vans vi. Wall painting	4. Media coverage i. TV spots ii. Radio Spots iii. Whatsapp / Mobile SMS: iv. Film animation v. Newspaper/Magazine vi. Website videos/ Tickers vii. Cinema slides	5. Public engagement activities i. Kiosk/canopy at haat ii. Nukkad natak/puppet show iii. Village / Panchayat meets iv. Health Camp/Mela etc. v. Slum activities vi. Mass rally vii. Exhibitions	6. Other medium i. Handbills ii. ID cards iii. Coffee Table Book iv. Calendars v. Giveaways
1	Bhagalpur	Banners, Brochures	Hoardings	Hoardings	-	Village / Panchayat meets, Exhibitions	Handbills
2	Bhojpur	Banners, Leaflets	Certification for empanelled hospitals	Digital Vans, Wall painting	-	Kiosk	Handbills
3	Darbhanga	Banners, Brochures, Leaflets	Hoardings, Leaflets	Wall painting	-	-	Handbills
4	Muzaffarpur	Banners, Brochures, Leaflets, Standees	Kiosk, Hoardings	Hoardings, Digital Vans, Wall painting	-	Health Mela/camp etc., Exhibitions	Giveaways
5	Katihar	Banners, Leaflets	Leaflets/ pamphlets / handbills	-	-	-	Handbills
6	Nalanda	Banners, Leaflets	Kiosk, Hoardings, Standees, Leaflets/pamphlets/handbills, Certification for empanelled hospitals	Hoardings, Wall painting	-	Village / Panchayat meets, Health Camp/Mela, Slum activities, Mass rally	Handbills, ID cards, Giveaways
7	Patna	Banners, Backdrops	-	Hoardings, Railway Stations, Digital Vans	-	Health Camp/ Mela specific health day	ID cards
8	Purnea	Banners, Brochures, Leaflets	Kiosk, Hoardings,	Hoardings, Digital Vans, Wall painting	-	Nukkad natak/puppet show, Exhibitions	Handbills
9	Saran	Banners, Leaflets	-	Hoardings, Wall painting	-	-	ID cards
10	Sitamarhi	Banners, Brochures, Leaflets	-	Hoardings	-	Health Camp/ Mela etc.	-

(Source: Information furnished by DIUs)

Appendix-1.5
(Refer: Paragraph-1.8.1)
Irregular empanelment of hospitals under PMJAY

Sl. No.	Name of Hospital	Date of Agreement	Clinical Certificate (issued/valid up to)	Fire Safety Certificate (issued/valid up to)	Bio-Medical Waste Certificate (issued/valid up to)	Remarks
1	Hari Sakha Drishti, Bhagalpur	14.1.2020	15.1.2019/ 15.1.2020	14.5.2019/ 13.5.2020	15.7.2019/ 14.7.2024	-
2	Kanchan Shalya Niketan, Bhojpur	30.5.2020	22.1.2021/ 21.1.2022	24.6.2020/ 23.6.2021	24.1.2019/ 23.1.2024	Agreement executed without ensuring Fire Certificate and Clinical Certificate. Signature of member not found on physical verification report.
3	Mahavir Vatsalya, Patna	13.1.2020	22.1.2019/ 14.6.2022	7.8.2020/ NA	26.2.2019/ 25.2.2024	Agreement executed without ensuring Fire certificate.
4	Jeevak Heart Hospital & Research Inst. Pvt. Ltd., Patna	19.5.2020	22.2.2020/ 21.2.2021	7.2.2020/ 6.2.2023	25.4.2018/ 17.4.2023	Signature of only one member was found in physical verification report.
5	Siddhartha Multispecialty Hospital Pvt. Ltd., Patna	2.6.2020	NA	19.12.2017/ NA	NA	Physical verification Report was only signed by one member. Agreement done without ensuring Clinical, Fire and Bio medical waste Certificate.
6	Mahavir Cancer Institute and Research Centre, Patna	20.5.2020	12.10.2018/ 11.10.2019	17.6.2020/ NA	22.2.2018/ 5.2.2023	Agreement done without ensuring Fire certificate. Signature of only one member was found in physical verification report.
7	Sri Sai Lions Netralaya, Patna	2.3.2020	28.1.2020/ 27.1.2021	9.1.2020/ 8.1.2021	10.5.2019/ 9.5.2021	-
8	Drishti Eye Hospital, Biharsharif	25.2.2020	20.12.2018/ 28.4.2022	8.12.2018/ 25.2.2022	5.3.2019/ 4.3.2024	Physical verification Report was not signed by any member.
9	Jahnvi Eye Care & Research Centre, Biharsharif	9.1.2020	24.12.2019/ 23.12.2020	15.11.2019/ 14.11.2020	12.2.2019/ 11.2.2024	-
10	Al Shafa Hospital, Purnea	14.7.2020	2.12.2018/ 1.12.2024	29.12.2018/ 27.12.2019	28.6.2019/ 27.6.2024	Physical verification Report was not signed by any member.
11	Dropadi Netralaya Pvt. Ltd., Purnea	8.6.2020	14.12.2019/ 13.12.2025	21.5.2020/ 20.5.2021	27.6.2019/ NA	-

Sl. No.	Name of Hospital	Date of Agreement	Clinical Certificate (issued/valid up to)	Fire Safety Certificate (issued/valid up to)	Bio-Medical Waste Certificate (issued/valid up to)	Remarks
12	Satyabhama Netralaya, Katihar	28.12.2019	23.5.2014/ 31.5.2022	1.5.2018/ 9.6.2022	6.9.2019/ 5.9.2024	-
13	Aashish Care & Cure Maternity Hospital Pvt. Ltd., Muzaffarpur	6.3.2020	12.7.2019/ 11.7.2021	25.8.2019/ 24.8.2020	15.7.2019/ 14.7.2020	-
14	Mehta Sewa Sadan Hospital, Muzaffarpur	26.2.2020	17.2.2021/ 16.2.2022	16.2.2020/ 15.2.2021	1.11.2017/ 31.10.2022	Physical verification Report was signed by only two members on two pages out of 19 pages.
15	Bathua Nursing Home Pvt. Ltd., Muzaffarpur	11.1.2020	7.6.2019/ 6.6.2020	18.5.2018/ 13.5.2020	14.5.2018/ 24.1.2023	-
16	Ashoka Hospital, Muzaffarpur	26.11.2018	24.5.2018/ 23.5.2019	26.5.2018/ 25.5.2019	10.8.2018/ 9.8.2023	-
17	Prashant Memorial Charitable Hospital, Muzaffarpur	18.5.2020	16.4.2019/ 15.4.2022	7.6.2018/ 24.5.2021	19.6.2018/ 6.5.2023	-
18	I.B. Smriti Arogaya Sadan, Darbhanga	9.1.2020	7.9.2016/ 6.9.2021	30.6.2018/ 27.12.2021	2.5.2019/ 1.5.2024	Signature of only one member was found in physical verification report.
19	Uro Stone Research Centre Pvt. Ltd., Darbhanga	16.1.2020	27.2.2016/ 26.2.2021	6.1.2020/ 5.1.2021	25.2.2019/ 24.2.2020	Signature of only one member was found in physical verification report.
20	Swami Vivekanand Cancer Asptal, Darbhanga	21.5.2020	25.1.2019/ 24.1.2021	6.7.2019/ 5.7.2020	25.7.2019/ 24.7.2024	Physical verification Report was not signed by any member.
21	Navjeevan Multispeciality Hospital & Research Centre Pvt. Ltd., Sitamarhi	21.12.2018	21.12.2018/ 20.12.2024	21.12.2018/ 20.2.2020	14.5.2018/ 16.2.2025	-
22	Akhand Jyoti Eye Hospital, Saran	13.1.2020	28.1.2020/ 27.1.2021	1.9.2018/ 31.8.2020	23.6.2019/ 22.6.2024	Agreement done without ensuring Clinical certificate.
23	Shanti Memorial Hospital, Ara	14.1.2020	12.2.2019/ 11.2.2020	13.10.2019/ 12.10.2020	10.5.2019/ 9.5.2024	Physical verification Report was not signed by any member.

(Source: Information furnished by BSSS)

Appendix-1.6
(Refer: Paragraph-1.8.4)
Status of Help Desk/PMAM Kiosk and deployment of PMAMs in sampled hospitals of sampled districts

Sl. No.	Name of District	Name of Hospital	Availability of help desk/kiosk/Arogya Mitra Sahayata Kendra		Was Kiosk working 24x7	Availability of PMAM	Standard uniform provided to PMAMs	Whether training provided to PMAMs	
			Availability	Availability at Reception					
1	Sitamarhi	CHC, Nanpur	Yes	Yes	No	Yes	Yes	Yes	
2		Sadar Hospital	Yes	Yes	No	Yes	No	No	
3		PHC, Dumra	Yes	Yes	No	Yes	No	Yes	
4		CHC, Bokhra	Yes	Yes	No	Yes	No	Yes	
5		CHC, Runnisaidpur	Yes	yes	No	Yes	No	Yes	
6		Navjivan Multispecialty, Hospital & Research Centre Pvt. Ltd.	Yes	No	No	Yes	No	Yes	
7	Muzaffarpur	Sri Krishna Medical College and Hospital	Yes	No	No	Yes	NA	Yes	
8		Sadar Hospital	Yes	No	No	Yes	No	Yes	
9		PHC, Gaighat	Yes	yes	No	Yes	Yes	Yes	
10		Prashant Memorial Charitable Hospital	Yes	Yes	No	Yes	No	Yes	
11		Ashoka Hospital	Yes	Yes	Yes	Yes	Yes	Yes	
12		Bathua Nurshing Home Pvt. Ltd.	Yes	Yes	Yes	Yes	No	Yes	
13		Mehta Sewa Sadan Hospital	Inactive						
14		Ashish Care & Cure maternity Hospital Pvt. Ltd.	Yes	Yes	No	Yes	No	Yes	
15	Darbhanga	Darbhanga Medical College and Hospital	Yes	No	No	Yes	No	Yes	
16		RH, Jalley	Yes	No	No	Yes	No	Yes	
17		Uro Stone Research Centre Pvt. Ltd.	Yes	Yes	No	Yes	No	Yes	
18		I.B. Smirti Arogya Sadan	Yes	Yes	No	Yes	No	Yes	
19		SDH, Benipur	No	NA	No	Yes	No	Yes	
20		CHC, Baheri	No	NA	No	Yes	No	Yes	
21		Swami Vivekanand Cancer Asptal	Yes	Yes	Yes	Yes	No	Yes	
22		CHC, Biraul	No	NA	No	Yes	No	Yes	

Sl. No.	Name of District	Name of Hospital	Availability of help desk/kiosk/Arogya Mitra Sahayata Kendra		Was Kiosk working 24x7	Availability of PMAM	Standard uniform provided to PMAMs	Whether training provided to PMAMs
			Availability	Availability at Reception				
23	Saran	Sadar Hospital	Yes	Yes	No	Yes	No	No
24		RH, Baniyapur	Yes	Yes	No	Yes	No	No
25		SDH, Sonapur	Yes	Yes	No	Yes	No	No
26		Akhand Jyoti eye Hospital	Yes	No	Yes	Yes	No	Yes
27		CHC, Amnour	Yes	No	No	Yes	No	No
28	Bhojpur	District Hospital, Ara	No	NA	No	Yes	No	Yes
29		RH, Jagdishpur	No	NA	No	Yes	No	Yes
30		CHC, Sahar	No	NA	No	Yes	No	Yes
31		Shanti Memorial Hospital	Yes	Yes	Yes	Yes	Yes	Yes
32		Kanchan Shalya Niketan	Yes	Yes	No	Yes	Yes	Yes
33	Bhagalpur	Jawahar Lal Nehru Medical College and Hospital	Yes	Yes	No	Yes	No	Yes
34		Lok Nayak Jaiprakash Narayan Sadar Hospital	Yes	No	No	Yes	No	Yes
35		PHC, Naryanpur	Yes	Yes	No	Yes	No	Yes
36		CHC, Bihpur	Yes	Yes	No	Yes	No	Yes
37		CHC, Shakkund	Yes	Yes	No	Yes	No	Yes
38		Harishakha Dristhi	Yes	Yes	No	Yes	Yes	Yes
39	Katihar	Sadar Hospital	Yes	Yes	No	Yes	No	Yes
40		PHC, Mansahi	Yes	Yes	No	No	No	No
41		PHC, Falka	Yes	Yes	No	Yes	No	Yes
42		PHC, Amdabad	Yes	Yes	No	Yes	No	Yes
43		Satyabhama Netralya	Yes	Yes	No	Yes	Yes	Yes
44	Nalanda	RH, Chandi	Yes	Yes	No	Yes	No	Yes
45		PHC, Nagarnausa	Yes	Yes	No	No	No	No
46		RH, Asthawan	Yes	Yes	No	No	No	No
47		Vardhman Institute of Medical Science & Hospital, Pawapuri	Yes	Yes	No	Yes	No	Yes
48		District Hospital, Biharsharif	Yes	Yes	No	Yes	No	Yes
49		Jahnavi Eye Care & Research Centre	Yes	Yes	No	Yes	No	Yes
50		Drishti Eye Hospital	Yes	Yes	No	Yes	No	Yes

Sl. No.	Name of District	Name of Hospital	Availability of help desk/kiosk/Arogya Mitra Sahayata Kendra		Was Kiosk working 24x7	Availability of PMAM	Standard uniform provided to PMAMs	Whether training provided to PMAMs
			Availability	Availability at Reception				
51	Patna	Indira Gandhi Institute of Medical Sciences	Yes	Yes	No	Yes	No	Yes
52		Guru Govind Singh Sadar Hospital	Yes	No	No	Yes	Yes	yes
53		RH, Bihta	No	NA	No	No	No	No
54		Jeevak Heart Hospital & Res. Inst. Pvt. Ltd.	Yes	Yes	No	Yes	No	Yes
55		Sri Sai Lions Netralaya	Yes	Yes	No	Yes	No	Yes
56		Mahvir Vatsalya Aspatal	Yes	Yes	No	Yes	Yes	No
57		Mahavir Cancer Institute & Research Centre	Yes	Yes	No	Yes	No	Yes
58		Sidhartha Multispeciality Hospital Pvt. Ltd.	Inactive					
59	Purnea	Sadar Hospital	No	NA	No	Yes	No	Yes
60		RH, Amour	No	NA	No	No	No	No
61		PHC, Bhawanipur	No	NA	No	No	No	No
62		Dropadi Netralaya Private Limited	Yes	Yes	Yes	Yes	No	Yes
63		AL Shafa Hospital	No	NA	Yes	Yes	No	Yes

(Source: Information furnished by sampled hospitals)

Appendix-1.7
(Refer: Paragraph-1.8.6)

Details of hospitals de-empanelled during April 2021 to March 2024 by the SHA

Sl. No.	Hospital ID	Name of Hospital	Date of De-empanelment	Reason
1	HOSP10P27703	Adwita Hospital, Begusarai	19.11.2021	Poor health and unavoidable circumstances
2	HOSP10P101420	Eye Hospital/Aankh Aspatal, Aurangabad	05.01.2022	Not operational
3	HOSP10P86159	I T Memorial Hospital, Muzaffarpur	08.02.2022	
4	HOSP10P79370	Ugratara Netra Chikitsalaya, Saharsa	23.08.2022	Updated Clinical Establishment Certificate
5	HOSP10P90896	Amrit Jeevan Hospital, Begusarai	18.01.2023	DEC recommendation
6	HOSP10P23303	Sri Shobha Nursing Home, Gaya		
7	HOSP10P28650	Baccha Hospital, Gaya		
8	HOSP10P80222	Maa Gayatry Memorial Hospital Pvt. Ltd, Gaya		
9	HOSP10P111762	Siddharth Nursing Home, Gaya		
10	HOSP10P46996	Orthocare, Bhojpur	18.01.2023	MoU not completed
11	HOSP10P42700	Raghuwansham Hospital, Bhojpur		
12	HOSP10P01912	Nayan Jyoti Eye Hospital, Siwan		
13	HOSP10P37904	Pulse Women Hospital, Aurangabad		
14	HOSP10P16236	Big Hospital, Patna		
15	HOSP10P04090	Apex Institute of Medical Science Private Limited, Patna		
16	HOSP10P01724	Basu Surgical and Urology Hospital, Nalanda		
17	HOSP10P113412	Narayani Hospital, Muzaffarpur		
18	HOSP10P03159	Sri Ram Govind Pyare Hospital, Nalanda		
19	HOSP10P24730	R.S. Hospital & Research Centre, Sitamarhi		
20	HOSP10P111773	Kamla Emergency Hospital, Samastipur	06.03.2023	DEC recommendation
21	HOSP10P00862	Gopalganj Dental Hospital, Gopalganj		
22	HOSP10P63333	MRM Health Point, Aurangabad		
23	HOSP10P06115	Maa Jagadamba Sewa Sadan, Patna	18.01.2024	SHA recommendation
24	HOSP10P140079	SBS IT Hospital, Muzaffarpur	17.11.2023	DEC recommendation
25	HOSP10P01779	Muzaffarpur Heart Hospital and Research Centre Pvt. Ltd., Muzaffarpur		

Sl. No.	Hospital ID	Name of Hospital	Date of De-empement	Reason
26.	HOSP10P23186	Ahmad Life Care Hospital, Gaya	17.11.2023	DEC recommendation
27.	HOSP10P68507	Ashutosh Arogya Sadan, Gaya		
28.	HOSP10P26104	B.D. Hospital, Gaya		
29.	HOSP10P12615	Buddha Nursing Home, Gaya		
30.	HOSP10P03391	Hind Nursing Home Research Centre, Gaya	17.11.2023	
31.	HOSP10P64173	Sri Ram Hospital, Gaya	17.11.2023	
32.	HOSP10P13995	Shri Sai Hospital, Jamui	03.01.2024	
33.	HOSP10P108248	City Hospital, Vaishali	03.01.2024	
34.	HOSP10P92045	Navjat Shishu Kalyan Kendra and City Critical Hhospital Pvt. Ltd., Munger	18.01.2024	
35.	HOSP10P111138	Adarsh Hospital, East Champaran	18.01.2024	

(Source: Information furnished by BSSS)

Appendix-1.8
(Refer: Paragraph-1.9.8)

**Details of claim payment made on non-existent PMJAY Cards under sampled hospital
in sampled districts as on March 2024**

Sl. No.	Name of hospital	No. of non-existent cards on PMJAY Portal	Amount paid (in ₹)
1	CHC, Bihpur, Bhagalpur	01	9,000
2	CHC, Shahkund, Bhagalpur	03	5,400
3	PHC, Narayanpur, Bhagalpur	01	1,700
4	Lok Nayak Jaiprakash Narayan Sadar Hospital, Bhagalpur	21	1,95,710
5	Darbhanga Medical College and Hospital, Darbhanga	01	1,084
6	Swami Vivekanand Cancer Aspatal, Darbhanga	08	6,67,350
7	PHC, Mansahi, Katihar	01	9,900
8	Sadar Hospital, Katihar	01	1,084
9	Ashoka Hospital, Muzaffarpur	07	1,99,530
10	Bathua Nursing Home Pvt. Ltd, Muzaffarpur	02	29,970
11	Prashant Memorial Charitable Hospital, Muzaffarpur	09	4,31,820
12	Sadar Hospital, Muzaffarpur	09	86,680
13	Shri Krishna Medical College and Hospital, Muzaffarpur	14	1,72,669
14	District Hospital, Biharsharif, Nalanda	01	1,700
15	RH, Asthawan, Nalanda	01	9,000
16	Guru Govind Singh Sadar Hospital, Patna	01	14,200
17	Indira Gandhi Institute of Medical Science, Patna	04	1,58,109
18	Mahavir Cancer Institute & Research Centre, Patna	06	2,88,900
19	Mahavir Vatsalya Aspatal, Patna	01	7,290
20	PHC, Bhawanipur, Purnea	01	9,900
21	Akhand Jyoti Eye Hospital, Saran	01	25,200
22	District Hospital, Saran	44	1,74,300
23	Navjivan Multispeciality Hospital & Research Centre Pvt. Ltd., Sitamarhi	01	24,829
Total		139	25,25,325

(Source: Information furnished by BSSS)

Appendix-1.9
(Reference: Paragraph-1.9.9 (i))
Status of Utilising Claim amounts for the period 2018-24 (Payment of Incentive)

(A) Non-payment of Incentive to medical and paramedical team for patient care (₹ in lakh)					
Sl. No.	Name of Hospital	Incentive paid to medical and paramedical team for patient care			
		Amount to be paid	Actual expenditure incurred	Percentage of expenditure	Percentage of less expenditure
1	2	3	4	5	6
1	CHC, Baheri, Darbhanga	1.47	0.00	0.00	100.00
2	CHC, Sahar, Bhojpur	0.82	0.00	0.00	100.00
3	District Hospital Chapra, Saran	4.48	0.00	0.00	100.00
4	Indira Gandhi Institute of Medical Science, Patna	1.25	0.00	0.00	100.00
5	RH, Baniyapur, Saran	1.18	0.00	0.00	100.00
6	RH, Bihta, Patna	2.68	0.00	0.00	100.00
7	Sub-Divisional Hospital, Sonapur, Saran	2.55	0.00	0.00	100.00
8	Sub-Divisional Hospital, Benipur, Darbhanga	1.65	0.00	0.00	100.00
Total		16.08	0.00	0.00	100.00
(B) Less payment of Incentive to medical and paramedical team for patient care (₹ in lakh)					
Sl. No.	Name of Hospital	Incentive paid to medical and paramedical team for patient care			
		Amount to be paid	Actual expenditure incurred	Percentage of expenditure	Percentage of less expenditure
1	2	3	4	5	6
1	CHC, Amnaur, Saran	1.31	1.01	77.10	22.90
2	CHC, Bihpur, Bhagalpur	2.82	2.51	89.01	10.99
3	CHC, Biraul, Darbhanga	2.74	2.44	89.05	10.95
4	CHC, Bokhra, Sitamarhi	11.00	4.39	39.91	60.09
5	CHC, Falka, Katihar	6.84	6.34	92.69	7.31
6	CHC, Nanpur, Sitamarhi	5.05	2.70	53.47	46.53
7	CHC, Runnisaipur, Sitamarhi	14.42	1.25	8.67	91.33
8	CHC, Shahkund, Bhagalpur	7.29	0.11	1.51	98.49
9	Darbhanga Medical College and Hospital, Darbhanga	59.81	19.18	32.07	67.93
10	District Hospital, Bhojpur	19.36	6.09	31.46	68.54
11	District Hospital, Biharsharif, Nalanda	21.50	2.63	12.23	87.77
12	Guru Govind Singh Sadar Hospital, Patna	6.34	1.91	30.13	69.87
13	Jawahar Lal Nehru Medical College and Hospital, Bhagalpur	96.46	23.90	24.78	75.22
14	Lok Nayak Jaiprakash Narayan Sadar Hospital, Bhagalpur	13.44	11.24	83.63	16.37
15	PHC, Nagarnausa, Nalanda	4.68	0.34	7.26	92.74
16	PHC, Amdabad, Katihar	5.37	4.34	80.82	19.18
17	PHC, Bhawanipur, Purnea	19.70	17.56	89.14	10.86
18	PHC, Gaighat, Muzaffarpur	8.65	7.94	91.79	8.21
19	PHC, Mansahi, Katihar	14.32	13.87	96.86	3.14
20	PHC, Narayanpur, Bhagalpur	3.48	3.11	89.37	10.63
21	PHC, Dumra, Sitamarhi	7.01	3.14	44.79	55.21
22	RH, Jagdishpur, Bhojpur	4.36	1.78	40.83	59.17
23	RH, Amour, Purnea	9.97	8.56	85.86	14.14
24	RH, Asthawan, Nalanda	3.34	1.03	30.84	69.16

25	RH, Chandi, Nalanda	2.44	0.63	25.82	74.18
26	RH, Jalley, Darbhanga	4.64	3.03	65.30	34.70
27	Sadar Hospital, Katihar	7.08	0.25	3.53	96.47
28	Sadar Hospital, Muzaffarpur	14.33	0.34	2.37	97.63
29	Sri Krishna Medical College and Hospital, Muzaffarpur	180.26	97.93	54.33	45.67
30	Vardhman Institute of Medical Science & Hospital, Pawapuri, Nalanda	25.56	15.57	60.92	39.08
Total		583.57	265.12	45.43	54.57
(C) Excess payment of Incentive to medical and paramedical team for patient care (₹ in lakh)					
Sl. No.	Name of Hospital	Incentive paid to medical and paramedical team for patient care			
		Amount to be Paid	Actual expenditure incurred	Percentage of expenditure	Percentage of excess expenditure
1	2	3	4	5	6
1	Sadar Hospital, Sitamarhi	18.06	40.42	223.81	123.81

(Source: Information furnished by BSSS)

Appendix-1.10
(Reference: Paragraph-1.9.9 (ii))
Status of Utilising Claim amounts for the period 2018-24
(Infrastructure development)

(A) No expenditure on Infrastructure development (₹ in lakh)					
Sl. No.	Name of Hospital	Amount to be spent	Actual expenditure incurred	Percentage of expenditure	Percentage of less expenditure
1	2	3	4	5	6
1	CHC, Runnisaidpur, Sitamarhi	29.43	0.00	0.00	100.00
2	Indira Gandhi Institute of Medical Science, Patna	2.25	0.00	0.00	100.00
3	RH, Baniyapur, Saran	2.38	0.00	0.00	100.00
4	Vardhman Institute of Medical Science & Hospital, Pawapuri, Nalanda	37.38	0.00	0.00	100.00
Total		71.44	0.00	0.00	100.00
(B) Less expenditure on Infrastructure development (₹ in lakh)					
Sl. No.	Name of Hospital	Amount to be spent	Actual expenditure incurred	Percentage of expenditure	Percentage of less expenditure
1	2	3	4	5	6
1	CHC, Bihpur, Bhagalpur	6.28	4.36	69.43	30.57
2	CHC, Biraul, Darbhanga	6.07	2.12	34.93	65.07
3	CHC, Bokhra, Sitamarhi	23.89	18.92	79.20	20.80
4	CHC, Nanpur, Sitamarhi	10.82	4.24	39.19	60.81
5	CHC, Sahar, Bhojpur	1.57	1.44	91.72	8.28
6	Darbhanga Medical College and Hospital, Darbhanga	89.33	47.76	53.46	46.54
7	District Hospital, Bhojpur	32.77	18.70	57.06	42.94
8	Jawahar Lal Nehru Medical College and Hospital, Bhagalpur	154.65	45.74	29.58	70.42
9	PHC, Nagarnausa, Nalanda	9.82	7.65	77.90	22.10
10	PHC, Gaighat, Muzaffarpur	17.96	14.46	80.51	19.49
11	PHC, Mansahi, Katihar	32.61	28.34	86.91	13.09
12	PHC, Narayanpur, Bhagalpur	7.35	5.78	78.64	21.36
13	PHC, Dumra, Sitamarhi	15.07	11.42	75.78	24.22
14	RH, Jagdishpur, Bhojpur	8.98	3.15	35.08	64.92
15	Sri Krishna Medical College and Hospital, Muzaffarpur	284.01	8.63	3.04	96.96
16	Sub-Divisional Hospital, Benipur, Darbhanga	3.12	2.20	70.51	29.49
Total		704.30	224.91	31.93	68.07
(C) Excess expenditure on Infrastructure development (₹ in lakh)					
Sl. No.	Name of Hospital	Amount to be spent	Actual expenditure incurred	Percentage of expenditure	Percentage of excess expenditure
1	2	3	4	5	6
1	CHC, Amnaur, Saran	2.60	3.21	123.46	23.46
2	CHC, Baheri, Darbhanga	2.85	7.48	262.46	162.46
3	CHC, Falka, Katihar	15.15	16.98	112.08	12.08

Sl. No.	Name of Hospital	Amount to be spent	Actual expenditure incurred	Percentage of expenditure	Percentage of excess expenditure
1	2	3	4	5	6
4	CHC, Shahkund, Bhagalpur	13.56	16.96	125.07	25.07
5	District Hospital Saran	7.41	9.06	122.27	22.27
6	District Hospital, Biharsharif, Nalanda	40.54	64.23	158.44	58.44
7	Guru Govind Singh Sadar Hospital, Patna	12.05	20.46	169.79	69.79
8	Lok Nayak Jaiprakash Narayan Sadar Hospital, Bhagalpur	26.11	45.15	172.92	72.92
9	PHC, Amdabad, Katihar	12.07	18.05	149.54	49.54
10	PHC, Bhawanipur, Purnea	41.47	52.65	126.96	26.96
11	RH, Amour, Purnea	22.85	33.62	147.13	47.13
12	RH, Asthawan, Nalanda	7.09	9.13	128.77	28.77
13	RH, Chandi, Nalanda	4.95	5.21	105.25	5.25
14	RH, Bihta, Patna	6.60	6.63	100.45	0.45
15	RH, Jalley, Darbhanga	9.53	13.20	138.51	38.51
16	Sadar Hospital, Sitamarhi	35.10	58.93	167.89	67.89
17	Sadar Hospital, Katihar	14.14	17.93	126.80	26.80
18	Sadar Hospital, Muzaffarpur	27.49	54.55	198.44	98.44
19	Sub-Divisional Hospital, Sonepur, Saran	4.88	6.62	135.66	35.66
Total		306.44	460.05	150.12	50.13

(Source: Information furnished by BSSS)

Appendix-1.11
(Reference: Paragraph-1.9.9 (iii))
Status of Utilising Claim amounts for the period 2018-24
(Purchase of drugs and consumables)

(A) Non-Purchase of drugs and consumables (₹ in lakh)					
Sl. No.	Name of Hospital	Amount to be spent	Actual expenditure incurred	Percentage of expenditure	Percentage of less expenditure
1	2	3	4	5	6
1	CHC, Amnaur, Saran	1.55	0.00	0.00	100.00
2	CHC, Baheri, Darbhanga	1.84	0.00	0.00	100.00
3	CHC, Biraul, Darbhanga	2.97	0.00	0.00	100.00
4	CHC, Bokhra, Sitamarhi	10.62	0.00	0.00	100.00
5	CHC, Nanpur, Sitamarhi	5.82	0.00	0.00	100.00
6	CHC, Runnisaipur, Sitamarhi	15.39	0.00	0.00	100.00
7	CHC, Sahar, Bhojpur	1.09	0.00	0.00	100.00
8	District Hospital, Saran	8.61	0.00	0.00	100.00
9	Indira Gandhi Institute of Medical Science, Patna	1.50	0.00	0.00	100.00
10	PHC, Amdabad, Katihar	5.49	0.00	0.00	100.00
11	PHC, Bhawanipur, Purnea	18.80	0.00	0.00	100.00
12	RH, Baniyapur, Saran	1.30	0.00	0.00	100.00
13	Sadar Hospital, Katihar	8.01	0.00	0.00	100.00
14	Sub-Divisional Hospital, Benipur, Darbhanga	2.29	0.00	0.00	100.00
Total		85.29	0.00	0.00	100.00
(B) Less purchase of drugs and consumables (₹ in lakh)					
Sl. No.	Name of Hospital	To be spent	Actual expenditure incurred	Percentage of expenditure	Percentage of less expenditure
1	2	3	4	5	6
1	CHC, Bihpur, Bhagalpur	2.98	2.76	92.62	7.38
2	CHC, Falka, Katihar	7.41	6.33	85.43	14.57
3	CHC, Shakhund, Bhagalpur	10.60	0.28	2.64	97.36
4	Darbhanga Medical College and Hospital, Darbhanga	129.38	72.95	56.38	43.62
5	District Hospital, Bhojpur	35.61	23.25	65.29	34.71
6	Guru Govind Singh Sadar Hospital, Patna	8.63	3.64	42.18	57.82
7	Lok Nayak Jaiprakash Narayan Sadar Hospital, Bhagalpur	16.95	4.69	27.67	72.33
8	PHC, Nagarnausa, Nalanda	4.21	0.55	13.06	86.94
9	PHC, Gaighat, Muzaffarpur	8.25	0.58	7.03	92.97
10	PHC, Mansahi, Katihar	13.98	1.89	13.52	86.48
11	PHC, Narayanpur, Bhagalpur	3.78	0.57	15.08	84.92
12	RH, Jagdishpur, Bhojpur	4.33	0.56	12.93	87.07
13	RH, Amour, Purnea	10.06	0.83	8.25	91.75
14	RH, Asthawan, Nalanda	3.51	2.34	66.67	33.33
15	RH, Chandi, Nalanda	2.62	0.52	19.85	80.15
16	RH, Bihta, Patna	2.88	0.44	15.28	84.72

17	RH, Jalley, Darbhanga	4.66	0.81	17.38	82.62
18	Sadar Hospital Sitamarhi	26.65	2.83	10.62	89.38
19	Sadar Hospital, Muzaffarpur	18.98	0.72	3.79	96.21
20	Sri Krishna Medical College and Hospital, Muzaffarpur	343.47	25.66	7.47	92.53
21	Sub-Divisional Hospital, Sonapur, Vaishali	3.42	2.61	76.32	23.68
22	Vardhman Institute of Medical Science & Hospital, Pawapuri, Nalanda	57.79	10.17	17.60	82.40
Total		720.15	164.98	22.91	77.09
(C) Excess purchase of drugs and consumables (₹ in lakh)					
Sl. No.	Name of Hospital	To be spent	Actual expenditure incurred	Percentage of expenditure	Percentage of excess expenditure
1	2	3	4	5	6
1	District Hospital, Biharsharif, Nalanda	29.98	32.21	107.44	7.44
2	Jawahar Lal Nehru Medical College and Hospital, Bhagalpur	175.43	227.06	129.43	29.43
3	PHC, Dumra, Sitamarhi	7.88	12.20	154.82	54.82
Total		213.29	271.47	127.28	27.28

(Source: Information furnished by BSSS)

Appendix-1.12
(Refer: Paragraph-1.10.1)

Men-in-position in Bihar Swasthya Suraksha Samiti, Patna as on March 2024

Sl. No.	Designation	Sanctioned post (s) (as per GoB)	Men in Position	Vacant post(s)	Shortage (in per cent)
(A) At the level of SHA					
1	CEO	01	01	0	0
2	Addl. CEO	01	0	01	100
3	Administrative Officer	01	01	0	0
4	Finance Controller	01	01	0	0
5	Director Administration	01	01	0	0
6	Director IT & MIS	01	01	0	0
7	Director (operation)	01	01	0	0
8	Director-Health Care	01	01	0	0
9	Human Resource Manager	01	01	0	0
10	Procurement Manager	01	01	0	0
11	Legal Advisor	01	01	0	0
12	Finance Manager	01	01	0	0
13	Grievance Manager	01	01	0	0
14	Quality Assurance Manager	01	01	0	0
15	Information Technology Manager	01	01	0	0
16	Capacity Building & Information Education & Communication Manager	01	01	0	0
17	Monitoring & Evaluation Manager	01	01	0	0
18	BIS Manager	01	01	0	0
19	Database Administrator	02	0	02	100
20	System Analyst	01	0	01	100
21	Medical Officer	20	19	01	5
22	Software Developer	04	0	04	100
23	Accountant	02	0	02	100
24	Accounts Officer	02	0	02	100
25	Internal Auditor	03	0	03	100
26	Steno	05	2	03	60
27	Executive Assistant-State	12	0	12	100
Total (A)		69	38	31	45
(B) At the level of DIUs					
28	District Programme Coordinator	38	28	10	26
29	District IT Manager	38	17	21	55
30	District Account Executive	38	0	38	100
Total (B)		114	45	69	61
Grand Total (A & B)		183	83	100	55

(Source: Information furnished by BSSS)

Note: BSSS sanctioned various post vide notifications (through memorandum No-12/P.K.-09-44/2018-68(12) dated 18.01.2019) and sanctioned additional various post vide notifications (through memorandum No-12/P.K.-09-44/2018-86(12) dated 27.01.2020)

Appendix-1.13
(Refer: Paragraph-1.10.6)
Status of Public EHCP Claim Fund Utilisation for the period 2018-19 to 2024-25
(up to August 2024)

Sl. No.	Name of district	No. of Hospital	Claim amounts paid up to August 2024 (₹ in crore)	Amount for which expenditure reports were submitted (₹)
1	Araria	6	0.14	0
2	Arwal	2	0.27	0
3	Aurangabad	4	0.14	0
4	Begusarai	8	3.35	0
5	Bhagalpur	3	5.28	0
6	Bhojpur	14	2.21	0
7	Buxar	1	0.06	0
8	Darbhanga	19	0.76	0
9	Gaya	15	3.98	0
10	Gopalganj	1	0.03	0
11	Jamui	9	0.12	0
12	Jehanabad	4	0.26	0
13	Katihar	17	2.55	0
14	Khagaria	6	0.73	0
15	Kishanganj	3	0.34	0
16	Madhepura	1	0.14	0
17	Madhubani	12	0.59	0
18	Munger	6	1.39	0
19	Muzaffarpur	10	22.18	0
20	Nalanda	2	0.02	0
21	Nawada	7	0.09	0
22	West Champaran	19	1.29	0
23	Patna	28	119.43	0
24	East Champaran	20	2.72	0
25	Samastipur	11	1.79	0
26	Saran	14	0.79	0
27	Sheikhpura	5	0.27	0
28	Sheohar	3	0.63	0
29	Sitamarhi	2	0.01	0
30	Siwan	8	0.10	0
31	Supaul	6	0.24	0
32	Vaishali	4	0.41	0
Grand Total		270	172.31	0

(Source: Information furnished by BSSS)

Appendix-2.1
(Reference: Paragraph-2.6)
Details of Audit Sampling

Sl. No.	District	No. of Blocks	No. of Gram Panchayats	No. of Beneficiaries selected	No. of Additional Beneficiaries	Total No. of Beneficiaries
1	Arwal	2	8	71	22	93
2	Aurangabad	3	14	129	22	151
3	Banka	3	13	115	45	160
4	Darbhangha	3	13	118	27	145
5	Khagaria	2	10	80	60	140
6	Madhubani	3	14	123	37	160
7	Samastipur	3	13	117	27	144
8	Saran	3	13	111	27	138
9	Sitamarhi	3	13	119	15	134
10	Vaishali	3	15	120	69	189
Total		28	126	1,103	351	1,454

Appendix-2.2
(Reference: Paragraph-2.9.8)
Payments rejected by banks

Sl. No.	District	Block	Number of beneficiaries	Amount (₹ in lakh)
1	Arwal	Arwal	10	4.20
2		Karpi	1	0.45
3	Aurangabad	Aurangabad	11	4.95
4		Goh	5	2.00
5		Nabinagar	13	5.60
6	Banka	Amarpur	2	0.90
7		Belhar	4	1.90
8	Darbhanga	Darbhanga	9	3.90
9		Alinagar	10	4.30
10		Keotirunway	13	5.30
11	Khagaria	Allouli	17	7.30
12		Gogri	9	3.60
13	Madhubani	Andhratharhi	8	3.20
14		Harlakhi	5	2.00
15		Laukahi	8	3.30
16	Samastipur	Bithan	7	3.00
17		Kalyanpur	12	5.10
18		Sarairanjan	6	2.70
19	Saran	Amnour	12	5.10
20		Dighwara	3	1.10
21		Marhaura	11	4.50
22	Sitamarhi	Bairgania	3	1.65
23		Dumra	11	4.95
24		runnisaidpur	27	11.55
25	Vaishali	Bhagwanpur	4	1.60
26		Jandaha	12	4.90
27		Patepur	9	3.90
Total	10 Districts	27 Blocks	242	102.95

(Source: AwaasSoft)

Appendix-2.3
(Reference: Paragraph-2.10.10)
Sanction of houses to beneficiaries already owning pucca houses

Sl. No.	District	Block	GP	PMAY-G ID	Sanction Year	Amount paid (₹ in lakh)		
1	Aurangabad	Aurangabad Sadar	Parashdih	BHXXXXXX217	2021-22	1.30		
2	Darbhanga	Biraul	Arga Usari	BHXXXXXX946	2021-22	1.20		
3				BHXXXXXX414	2021-22	1.20		
4		Keotirunway	Rajoura	BHXXXX760	2019-20	0.80		
5				BHXXXX744	2019-20	0.80		
6		Sitamarhi	Dumra	Lagma	BHXXXX467	2020-21	1.30	
7	BHXXXX051				2020-21	1.30		
8	BHXXXX809				2019-20	1.30		
9	BHXXXX574				2020-21	1.30		
10	BHXXXX490				2020-21	1.30		
11	BHXXXX575				2020-21	1.30		
12	BHXXXX524				2020-21	1.30		
13	Bairgania				Jamua	BHXXXXXX254	2021-22	0.45
14						BHXXXXXX454	2021-22	0.45
15						BHXXXXXX782	2021-22	1.30
16						BHXXXXXX697	2021-22	1.30
17						BHXXXXXX995	2021-22	1.30
18			BHXXXXXX772	2021-22		1.30		
19			BHXXXXXX132	2021-22		1.30		
20			BHXXXXXX987	2021-22		1.30		
21	Saran		Dighwara	Akilpur	BHXXXXXX567	2019-20	1.20	
Total						24.30		

(Source: Scheme files in sampled DRDAs and Blocks)

Appendix-2.4
(Reference: Paragraph-2.10.11)
Non-adherence to priority numbers in sanction of houses

Sl. No.	District	GP (Block)	Category	Priority Sl. No. of beneficiary in PWL (to whom houses were sanctioned in FY 2017-18)	Priority Sl. No. of beneficiary in PWL (to whom houses were sanctioned in FY 2018-19)	Priority Sl. No. of beneficiary in PWL (to whom houses were sanctioned in FY 2019-20)	Priority Sl. No. of beneficiary in PWL (to whom houses were sanctioned in FY 2020-21)
1	Darbhanga	Jalwara (Keotirunway)	Minority	67, 88, 89, 90, 91, 95, 96, 99, 102, 122 (10 beneficiaries)	-	-	26, 42, 51, 54, 64, 77, 78, 84, 116, 117 (10 beneficiaries)
2	Samastipur	Sakhwa (Bithan)	Others	66 to 108 (total 35 beneficiaries)	-	-	5, 20, 71, 96 (4 beneficiaries)
3	Madhubani	Gangaur (Harlakhi)	Others	-	111, 113, 209, 212, 222, 226, 236, 238 (8 beneficiaries)	20, 34, 58, 89, 91, 92, 110, 112, 117, 121, 122 (11 beneficiaries)	-
		Kalna (Harlakhi)	Others	32, 40, 48, 52, 55, 68, 87 (7 beneficiaries)	2, 30, 31, 34, 38, 39, 41, 43, 49 (9 beneficiaries)	19, 22 (2 beneficiaries)	8 (1 beneficiary)
4	Arwal	Fakharpur (Arwal)	Others	-	41, 49, 52, 53, 56, 58, 59 (7 beneficiaries)	36, 48, 50, 51, 54, 57 (6 beneficiaries)	-
5	Banka	Ballikita (Amarpur)	Others	26, 34 (2 beneficiaries)	24, 25, 27, 28, 29, 30, 31, 33 (8 beneficiaries)	-	-

(Source: Records of the sampled Blocks)

Appendix-2.5
(Reference: Paragraph-2.11.2)

Payment of full assistance despite non-commencement of construction of houses

Sl. No.	Block (District)	GP	PMAY-G ID	Sanction Year	Physical status found on the basis of records (as of July 2022)	Status, as per AwaasSoft	Amount Paid (₹ in lakh)
1	Bahadurpur (Darbhanga)	Rambhadrapur	BHXXXX004	2019-20	Windowsill level	Completed	1.20
2			BHXXXX014	2019-20	Construction not started		1.20
3			BHXXXX871	2019-20			1.20
4			BHXXXX918	2019-20			1.20
5	Bairgania (Sitamarhi)	Patahi	BHXXXX352	2019-20			1.30
6		BHXXXX201	2017-18	1.30			
7	Dumra (Sitamarhi)	Bariyarpur	BHXXXX656	2017-18			1.30
8		Rampur Parori	BHXXXX794	2019-20			1.30
9	Manigachhi (Darbhanga)	Raghopur East	BHXXXX701	2017-18			1.20
10			BHXXXX410	2019-20			1.20
11			BHXXXX288	2017-18			1.20
12			BHXXXX254	2019-20	1.20		
13			BHXXXX147	2019-20	1.20		
14			BHXXXX970	2016-17	Plinth level		1.20
Total							17.20

(Source: Scheme files and AwaasSoft)

Appendix-2.6
(Reference: Paragraph-2.12.1)
Provision of short person days in convergence with MGNREGS

Sl. No.	District	No. of beneficiaries whose houses had been completed as per <i>AwaasSoft</i> (up to February 2025)	No. of beneficiaries to whom short person-days were provided	Total short person-days provided	Total Short wage paid (₹ in lakh)
1	Arwal	94	85	1,316	2.67
2	Aurangabad	133	119	973	2.08
3	Banka	157	105	802	1.62
4	Darbhanga	146	86	1,252	2.56
5	Khagaria	137	120	1,534	3.22
6	Madhubani	158	138	1,731	3.53
7	Samastipur	154	127	1,379	2.65
8	Saran	137	119	2,408	5.75
9	Sitamarhi	130	109	1,963	3.99
10	Vaishali	189	172	2,188	5.39
Total		1,435	1,180	15,546	33.46

(Source: *AwaasSoft* and *NREGASoft*)

Appendix-2.7
(Reference: Paragraph-2.12.2)
Shortfall in providing basic amenities to Scheme beneficiaries

Sl. No.	District	No. of beneficiaries/houses	Houses completed	Houses without facility of drinking water	Houses without electricity connections	Houses without LPG connections	Houses without toilet facility	Houses without waste management facility	Houses without Bathing area	Houses without Solar home lighting, solar street lighting system	Houses for which group/individual amenities developed
1	Aurangabad	151	78	68	70	60	49	78	58	78	77
2	Banka	160	104	73	89	62	75	104	94	103	96
3	Darbhanga	145	91	52	27	32	47	91	47	90	91
4	Madhubani	160	89	76	76	56	74	89	70	89	83
5	Arwal	93	53	48	49	39	45	53	47	53	53
6	Sitamarhi	134	94	49	47	38	29	94	36	94	94
7	Saran	138	109	27	46	60	85	109	80	108	108
8	Khagaria	140	116	24	69	36	44	116	63	108	116
9	Samastipur	144	55	17	17	21	33	55	28	55	55
10	Vaishali	189	172	11	90	68	60	172	81	159	172
Total (per cent)		1,454	961	445 (46)	580 (60)	472 (49)	541 (56)	961 (100)	604 (62)	937 (98)	945 (98)

(Source: JPV conducted in sampled districts)

Appendix-2.8
(Reference: Paragraph-2.12.3 (i))
Beneficiary name mismatch in MGNREGS Job Cards,
as per AwaasSoft and NREGASoft

Sl. No.	Name of Block	No. of beneficiaries	Total amount paid (₹ in lakh)
1	Arwal	06	0.63
2	Goh	14	2.06
3	Nabinagar	05	0.87
4	Aurangabad Sadar	06	1.03
5	Amarpur	10	1.69
6	Belhar	07	1.14
7	Fullidumar	05	0.87
8	Alinagar	07	0.91
9	Darbhangha	02	0.36
10	Allouli	02	0.31
11	Gogri	05	0.51
12	Andhratharhi	04	0.57
13	Harlakhi	05	0.62
14	Laukahi	04	0.43
15	Bithan	04	0.68
16	Kalyanpur	06	0.90
17	Sarairanjan	16	1.12
18	Amnour	04	0.45
19	Dighwara	01	0.14
20	Marhaura	02	0.05
21	Bairgania	02	0.22
22	Bhagwanpur	01	0.15
23	Jandaha	07	0.89
24	Patepur	02	0.31
Grand Total		127	16.91

(Source: AwaasSoft and NREGASoft)

*As the wages under MGNREGS are variable, the amounts have been calculated beneficiary wise and then consolidated at the district level.

Appendix-2.9
(Reference: Paragraph-2.12.3 (ii))
Non-allocation of additional work under MGNREGS due to incorrect Job Cards in NREGASoft

Sl. No.	District	Block	Gram Panchayat	MGNREGS Job Card No.	PMAY-G ID	Admin Sanction No.	Admin Sanction Date	House status, as per AwaasSoft
1	Arwal	Karpi	Khajuri	BH-XX-XXX-XXX-XXXXXXXX00/1770	BHXXXXXXXX444	BHXXX3/X/XX70	26.02.2022	Completed
2			Kinjar	BH-XX-XXX-XXX-XXXXXXXX00/1514	BHXXXXXXXX115	BHXXX3/X/XX47	17.02.2022	Proposed site
3			Kocha hasa	BH-XX-XXX-XXX-XXXXXXXX00/2036	BHXXXXXXXX030	BHXXX3/X/XX49	17.02.2022	Completed
4			Shahar telpa	BH-XX-XXX-XXX-XXXXXXXX00/2933	BHXXXXX022	BHXXX3/X/XX28	13.12.2021	Completed
5	Aurangabad	Goh	Buxar	BH-XX-XXX-XXX-XXXXXXXX00/2526	BHXXXXXXXX866	BHXXX4/X/X73	18.02.2022	Completed
6			Phag	BH-XX-XXX-XXX-XXXXXXXX00/2258	BHXXXXXXXX293	BHXXX4/X/X72	18.02.2022	Completed
7	Banka	Amapur	Fatehpur	BH-XX-XXX-XXX-XXXXXXXX00/1992	BHXXXXX309	BHXXX5/X/XX23	07.05.2022	Completed
8			Sultanpur	BH-XX-XXX-XXX-XXXXXXXX00/893	BHXXXXX820	BHXXX5/X/XX40	03.06.2022	Plinth
9		Belhar	Basmatta	JH-XX-XXX-XXX-X03/92	BHXXXXXXXX937	BHXXX2/X/XX95	18.02.2022	Completed
10				BH-XX-XXX-XXX-XXXXXXXX50/3883	BHXXXXXXXX703	BHXXX2/X/XX95	18.02.2022	Completed
11				BH-XX-XXX-XXX-XXXXXXXX50/3887	BHXXXXXXXX870	BHXXX2/X/XX95	18.02.2022	Completed
12				BH-XX-XXX-XXX-XXXXXXXX50/3878	BHXXXXXXXX748	BHXXX2/X/XX98	18.02.2022	Completed
13	Darbhanga	Darbhanga	Atihar	BH-XX-XXX-XXX-XXXXXXXX00/5274	BHXXXXX584	BHXXX7/X/XX66	16.08.2021	Completed
14				BH-XX-XXX-XXX-XXXXXXXX00/5276	BHXXXXX197	BHXXX7/X/XX06	06.12.2021	Completed
15				BH-XX-XXX-XXX-XXXXXXXX00/5277	BHXXXXX601	BHXXX7/X/XX66	16.08.2021	House Sanctioned
16			Sara	BH-XX-XXX-XXX-XXXXXXXX00/4070	BHXXXXX426	BHXXX7/X/XX99	25.10.2021	Completed
17			Mahamad	BH-XX-XXX-XXX-XXXXXXXX00/4072	BHXXXXX237	BHXXX7/X/XX99	25.10.2021	Completed
18				BH-XX-XXX-XXX-XXXXXXXX00/4071	BHXXXXX799	BHXXX7/X/XX99	25.10.2021	Completed
19				BH-XX-XXX-XXX-XXXXXXXX00/4069	BHXXXXX930	BHXXX7/X/XX95	03.09.2021	Completed
20				BH-XX-XXX-XXX-XXXXXXXX00/4068	BHXXXXX098	BHXXX7/X/XX95	03.09.2021	Completed

Sl. No.	District	Block	Gram Panchayat	MGNREGS Job Card No.	PMAY-G ID	Admin Sanction No.	Admin Sanction Date	House status, as per AwaasSoft	
21	Khagaria	Allouli	Goriyami	BH-XX-XXX-XXX-XXXXXXXX00/3975	BHXXXXXXXX654	BHXXXXX7/X/XX24	23.02.2022	Completed	
22			Haripur	BH-XX-XXX-XXX-XXXXXXXX71/1564	BHXXXXXXXX745	BHXXXXX7/X/XX73	02.03.2022	Completed	
23					BH-XX-XXX-XXX-XXXXXXXX71/2027	BHXXXXXXXX861	BHXXXXX7/X/XX92	25.02.2022	Completed
24			Meghauna	BH-XX-XXX-XXX-XXXXXXXX00/2778	BHXXXXXXXX547	BHXXXXX7/X/XX12	23.02.2022	House sanctioned	
25		Gogri	Borna	BH-XX-XXX-XXX-XXXXXXXX10/2268	BHXXXXXXXX244	BHXXXXX1/X/XX55	09.03.2022	Completed	
26			Madarpur	BH-XX-XXX-XXX-XXXXXXXX00/3299	BHXXXXXXXX841	BHXXXXX1/X/XX27	24.02.2022	Completed	
27	Madhubani	Laukahi		BH-XX-XXX-XXX-XXXXXXXX00/3144	BHXXXXXXXX849	BHXXXXX7/X/XX41	29.04.2022	Completed	
28	Samastipur	Kalyanpur	Semariya Bhindi	RJ-XXXXXXXXXXXXXXXX2200/XXXXXXXX926	BHXXXXXXXX956	BHXXXXX1/X/XX68	24.02.2022	Completed	
29	Sitamarhi	Runnisaipur	Olipur Sarhachiya	BH-XX-XXX-XXX-XXXXXXXX00/3180	BHXXXXXXXX104	BHXXXXX1/X/XX55	17.02.2022	Completed	
30	Vaishali	Jandaha	Bishanpur Bedauliya	RJ-XXXXXXXXXXXXXXXX2900/X1	BHXXXXXXXX252	BHXXXXX2/X/XX03	16.02.2022	Completed	

(Source: Report-R6.15 'map of IAY status' of NREGASoft)

Appendix-2.10
(Reference: Paragraph-2.12.4 (i))
Irregular payment of wages under MGNREGS

Sl. No.	District	No. of beneficiaries	Total person-days provided under MGNREGS	Amount paid (₹ in lakh)	Admissible person-days @28/30 days,	Admissible amount (on pro rata basis)	Excess person-days provided	Excess payment made (₹ in lakh)
1	Arwal	4	371	0.73	120	0.22	251	0.51
2	Aurangabad	37	2,971	5.92	1,110	2.22	1,861	3.70
3	Banka	32	2,717	5.33	896	1.76	1,821	3.57
4	Darbhanga	46	3,887	7.34	1,288	2.44	2,599	4.90
5	Khagaria	1	78	0.16	28	0.06	50	0.10
6	Madhubani	18	1,415	2.81	504	1.00	911	1.81
7	Samastipur	10	854	1.71	280	0.56	574	1.15
8	Saran	30	2,485	4.80	840	1.68	1,738	3.12
9	Sitamarhi	21	1,853	3.70	630	1.23	1,265	2.47
10	Vaishali	9	751	1.50	252	0.50	499	1.00
	Total	208	17,382	34.00	5,948	11.67	11,569	22.33

(Source: AwaasSoft and NREGASoft)

Appendix-2.11
(Reference: Paragraph-2.12.4 (ii))
Payment of MGNREGS wages to remanded beneficiaries

Sl. No.	District	Block	Number of beneficiaries	Number of person-days (in days)	Amount Paid (₹ in lakh)
1	Aurangabad	Aurangabad Sadar	4	247	0.52
		Goh	38	2438	5.12
2	Banka	Fullidumar	1	72	0.15
3	Darbhanga	Alinagar	1	46	0.10
		Keotirunway	20	1336	2.77
		Baheri	27	1140	2.39
		Jale	11	838	1.69
4	Khagaria	Allouli	6	447	0.94
		Gogri	17	316	0.66
5	Samastipur	Kalyanpur	3	183	0.38
6	Saran	Dighwara	3	139	0.28
7	Vaishali	Bhagwanpur	13	938	1.97
		Jandaha	32	2368	4.96
		Patepur	4	181	0.35
Total		14	180	10,689	22.28

(Source: Records of sampled Blocks and AwaasSoft and NREGASoft)

Appendix-2.12
(Reference: Paragraph-2.13.2)
Discrepancies in the geo-tagging of photographs

Sl. No.	District	Block/Panchayat	PMAY-G ID	Amount Paid (₹ in lakh)	Date on which photograph Geo-tagged and stages of construction.
1	Arwal	Arwal/Bhadasi	BHXXXXX231	0.90	01.04.2023 for Plinth and Roof Cast (Same day).
2			BHXXXXXXX883	1.30	16.07.2022 for Plinth and Roof cast (same day).
3		Karpi/Puran	BHXXXXXXX031	1.30	07.08.2022 for Plinth and Roof cast (same day).
4			BHXXXXXXX178	1.30	Roof cast (28.07.2022) and completed (29.07.2022) (gap of one day).
5	Darbhanga	Darbhanga/Khutwara	BHXXXXX146	1.20	19.05.2022 for Plinth, Roof cast and Completed (same day).
6		Darbhanga/Ghorghatta	BHXXXXXXX615	1.20	10.08.2022 for plinth, roof cast and completed (same day).
7		Darbhanga/Sara Mahamad	BHXXXXX309	1.20	11.08.2021 for plinth, roof cast and completed (same day).
8		Darbhanga/Bijuli	BHXXXXX258	1.20	03.06.2022 for plinth, roof cast and completed (same day).
9		Keotirunway/ Koylasthan	BHXXXXX241	1.20	19.03.2020 for plinth, roof cast and completed (same day).
10		Keotirunway/ Paigamberpur	BHXXXXXXX712	1.20	27.07.2022 for plinth, roof cast and completed (same day).
11			BHXXXXX547	1.20	26.01.2022 for plinth, roof cast and completed (same day).
12			Madhubani	Andhratharhi/ Marukiya	BHXXXXXXX575
13	BHXXXXXXX847	1.20			06.08.2022 for plinth, roof cast and completed (same day).
14	Andhratharhi/Dumra	BHXXXXX215		1.20	20.09.2021 for plinth, roof cast and completed (same day).
15		BHXXXXXXX844		1.20	06.08.2022 for roof cast and completed (same day).
16	Harlakhi/Sonai	BHXXXXXXX099		1.20	12.10.2022 for roof cast and completed (same day).
17	Laukahi/Mahadeomath	BHXXXXXXX858		1.20	08.07.2022. for roof cast and completed (same day).
18		BHXXXXX020		1.20	27.02.2020 for roof cast and completed (same day).
19		BHXXXXXXX267		1.20	24.08.2022 for plinth, roof cast and completed (same day).
20		BHXXXXXXX868		1.20	01.08.2022 for roof cast and completed (same day).
21	Laukahi/Kariaut	BHXXXXXXX358		1.20	26.07.2022 for roof cast and completed (same day).

Sl. No.	District	Block/Panchayat	PMAY-G ID	Amount Paid (₹ in lakh)	Date on which photograph Geo-tagged and stages of construction.
22		Laukahi/Baruar	BHXXXX309	1.20	29.02.2020 for plinth, roof cast and completed (same day).
23		Laukahi/Dharhara	BHXXXXXX848	1.20	10.08.2022 for roof cast and completed (same day).
24			BHXXXXXX161	1.20	14.08.2022 for plinth, roof cast and completed (same day).
25	Samastipur	Sarairanjan/Manikpur	BHXXXX615	1.20	29.01.2022 for plinth, roof cast and completed (same day).
Total				30.00	

(Source: AwaasSoft)

Appendix-2.13
(Reference: Paragraph-2.13.7)
Details of non-maintenance of Scheme related records

Sl. No.	Record	To be maintained by/At the level of
1.	Register related to applications received during field visits and action taken by the GASs.	GAS/ Block
2.	Register to be maintained by the GASs to watch the progress of construction of houses undertaken by the PMAY-G beneficiaries	GAS/Block
3.	Records relating to handing over of the PMAY-G scheme related applications to GASs, received by the BDOs during field visits, for verification and enquiry.	Office of the BDO/Block
4.	Records related to white notice, red notice and certificate case filing, which were to be maintained at the block level.	Gramin Awaas Supervisor/Block
5.	Registers relating to applications for payment of instalments and generation of FTOs of receipts of applications, which were to be maintained by the Accounts Assistants.	Accounts Assistant/Block
6.	Records relating to weekly monitoring of house construction and verification of the enquiry reports submitted by GASs, which were to be maintained by the Gramin Awaas Supervisors.	Gramin Awaas Supervisor/Block
7.	Records relating to weekly review meetings for identification of the two most under-performing blocks and inspection of the most backward blocks, conducted by the DDCs, which were to be maintained at the district level.	Office of the DDC/ DRDA
8.	Records related to verification reports, in prescribed proformas, for the families, added through special survey conducted on <i>Awaasplus</i> , for identification and selection of beneficiaries, which were to be maintained at the block level.	Office of the BDO / Block

(Source: Records of sampled GPs, Blocks and Districts)

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