

ASHA INCENTIVES

ASHA Incentive for Routine and Recurrent Activities		
SN	Activities	Incentive
1	Line listing and monthly updation of eligible population	
	a) Eligible couples	Rs 400
2	b) Expectant mothers (Preparation of list of ANC beneficiaries to be updated on monthly basis	Rs 400
3	c) Children 0-2 months, 2-59 months, 5 -10 years (Preparation of due list of children to be immunized on monthly basis)	Rs 400
4	d) Adolescent population 10-19 years	Rs 100
5	e) Elderly population	Rs 100
6	Conduct Village Health Sanitation and Nutrition Day or Urban Health and Nutrition Days	Rs 300
7	Family folder-beginning of year and updated monthly	Rs 400
8	NCD Enumeration (entry of CBAC form) and updation on regular basis in NCD portal	Rs 100
9	Monthly Meetings: Conduct monthly Village Health Sanitation and Nutrition Committee meeting/MAS	Rs 250
10	Attend monthly meeting at Block/PHC/UPHC	Rs 250
11	Registration of births and deaths Maintaining vital event register (births and death) and supporting universal registration to be updated on monthly basis-	Rs 400
12	Mobilizing community for celebration of Annual health calendar days/campaign/melas/health promotion activities and regular meetings and Ayushman Arogya Shivar	Rs 200

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13	Mobilisation of children for Routine Immunization	Rs 200
ASHA Incentives under National Health Program		
I	Maternal Health	
	JSY financial package	
1	a. For ensuring antenatal care for the woman	Rs.300 for Rural areas and Rs. 200 for Urban areas
	b. For facilitating institutional delivery	Rs. 300 for Rural areas and Rs. 200 for Urban areas
2	Reporting Death of women (15-49 years age group) by ASHA to PHC Medical Officer	Rs. 200 for reporting within 24 hours of occurrence of death by phone
3	Mobilization of HRPs under E-PMSMA	Rs 300 per ASHA to mobilize high risk pregnant woman to facility for follow up @Rs 100/-per visit for maximum up to 3 visits
4	Healthy Outcome for HRPs under E-PMSMA	Rs 500 after ensuring survival of baby and mother duo after 45 days of Delivery.
5	Identification of HRPs and their healthy Outcome during Post Natal Period under Optimization of PNC	Rs 250 after ensuring survival of baby and mother duo after 45 days of delivery
II	Child Health	
1	Home Visit for the newborn and post-Partum mother ⁽²⁾ -Six Visits in Case of Institutional Delivery (Days 3, 7, 14, 21, 28 & 42) -Seven visits in case of Home Deliveries (Days 1, 3, 7, 14, 21, 28 & 42)	Rs. 250
2	Home Visits of Young Child for Strengthening of Health & Nutrition of young child through Home Visits- (recommended schedule- 3, 6, 9, 12 and 15 months) -(Rs.50X5visits)	Rs. 50/visit with total Rs. 250/per child for making 05 visits
3	Ensuring quarterly follow up of low-birth-weight babies and newborns discharged after treatment from Specialized newborn Care Units.	Rs. 50/ Quarter-from the 3 rd month until 1 year of age
4	Child Death Review for reporting child death of children under 5 years of age	Rs. 50

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5	Week-1 & 2-ASHA incentive for prophylactic distribution of ORS to families with under-five children	Rs. 1 per ORS packet for 100 under five children or Rs. 100 per ASHA
III	Immunization	
1	Full immunization for a child under one year	Rs. 100
2	Complete immunization per child up-to two years age (all vaccination received between 1st & 2nd year of age after completing full immunization after one year	Rs. 75
3	Mobilizing children for OPV immunization under Pulse polio Programme	Rs. 100/day
4	DPT Booster at 5-6 years of age	Rs. 50
IV	Family Planning	
1	Ensuring spacing of 2 years after marriage	Rs. 500
2	Ensuring spacing of 3 years after birth of 1st child	Rs. 500
3	Ensuring a couple to opt for permanent limiting method after 2 children	Rs. 1000
4	Counselling, motivating and follow up of the cases for Tubectomy	High focus states (OD, UK, HR, GJ) - Rs.200/Case Mission Parivar Vikas (Uttar Pradesh, Bihar, Rajasthan, Madhya Pradesh, Chhattisgarh, Jharkhand, Arunachal Pradesh, Manipur, Mizoram, Meghalaya, Nagaland and Tripura) – Rs.300/Case. Other High focus states (SK, LD, J&K, HP)- Rs. 150/Case Non-High Focus States- Rs. 150/Case.
5	Counselling, motivating and follow up of the cases for Vasectomy/ NSV	High focus states (OD, UK, HR, GJ) - Rs.300/Case Mission Parivar Vikas (Uttar Pradesh, Bihar, Rajasthan, Madhya Pradesh, Chhattisgarh, Jharkhand, Arunachal Pradesh, Manipur,

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		Mizoram, Meghalaya, Nagaland and Tripura) – Rs.400/Case. Other High focus states (SK, LD, J&K, HP)- Rs. 200/Case Non-High Focus States- Rs. 200/Case.
6	Female Postpartum sterilization	High focus states (OD, UK, HR, GJ) - Rs.300/Case Mission Parivar Vikas (Uttar Pradesh, Bihar, Rajasthan, Madhya Pradesh, Chhattisgarh, Jharkhand, Arunachal Pradesh, Manipur, Mizoram, Meghalaya, Nagaland and Tripura) – Rs.400/Case
7	Escorting or facilitating beneficiary to the health facility for the PPIUCD insertion	Rs. 300/per case
8	Escorting or facilitating beneficiary to the health facility for the PAIUCD insertion	Rs. 300/case
Mission Parivar Vikas- MPV Extended in all districts of the seven high focus states (UP, Bihar, Jharkhand, MP, Chhattisgarh, Rajasthan and Assam) as well as six North-Eastern states of the country.		
9	Injectable Contraceptive MPA (Antara Program) - Incentive to ASHA	Rs 100/dose (1 st , 2 nd and 3 rd doses) Rs. 200 only for Fourth Dose
10	Mission Parivar Vikas Campaigns Block level activities- ASHA to be oriented on eligible couple survey for estimation of beneficiaries and will be expected to conduct eligible couple survey- maximum four rounds	Rs. 150/ ASHA/round
11	Nayi Pahel- an FP kit for newlyweds- a FP kit would be given to the newlywed couple by ASHA	Rs. 200/ASHA/Nayi Pahel kit distribution
12	Saas Bahu Sammelan- mobilize Saas Bahu for the Sammelan- maximum four rounds	Rs. 200/ Sammelan

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V	Adolescent Health	
1	Distributing sanitary napkins to adolescent girls	Rs. 1/ pack of 6 sanitary napkins
2	Organizing monthly meetings with adolescent girls pertaining to Menstrual Hygiene	Rs. 50/meeting
3	Incentive for support to Peer Educator (for facilitating selection process of peer educators)	Rs. 100/ Per PE
4	Incentive for mobilizing adolescents for Adolescent Health Day	Rs. 200/ Per AHD
VI	Participatory Learning and Action- (In selected 10 states that have low RMNCH+A indicators – Assam, Bihar, Chhattisgarh, Jharkhand, MP, Meghalaya, Odisha, Rajasthan, Uttarakhand and UP)	
1	Conducting PLA meetings- 2 meetings per month- Note-Incentive is also applicable for AFs @Rs.100/- per meeting for 10 meetings in a month	Rs. 100/ASHA/per meeting for 02 meetings in a month
VII	Nutrition	
1	Referral of SAM children to NRC and follow up of SAM children after discharge from NRC	Rs 300 per SAM child/ASHA. Break-up as below: Rs 100 for referral and Rs 200 follow up
2	For mobilising and ensuring every eligible child (1-19 years out-of-school and non-enrolled) is administered Albendazole.	Rs. 100/ ASHA/Bi-Annual
3	MAA (Mother's Absolute Affection) Programme Promotion of Breastfeeding- Quarterly mother meeting	Rs. 100/ASHA/ Quarterly meeting

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4	Anaemia Mukht Bharat	
4a	ASHA incentive for mobilizing children and ensuring compliance of IFA for 6-59 months children	Rs 100/month/ASHA
4b	ASHA incentive for mobilizing and ensuring compliance of IFA for WRA	Rs 50/month/ASHA
VIII Comprehensive Abortion Care		
1.	ASHA transportation incentive for accompanying women for availing safe and legal abortion services:	Rs.200/- transportation incentive for abortion by Surgical Methods of abortion at a public health facility Rs. 400/- transportation incentive for abortion by Medical Methods of Abortion at a public health facility
IX National Tuberculosis Elimination Programme		
1	Honorarium to treatment supporter to be disbursed upon completion or cure of TB patient for Drug Susceptibility TB patients	Rs 1000
2	For treatment and support to drug resistant TB patients	Rs. 5000 (Rs. 2000 for IP and Rs. 3000 for CP) for Drug Resistant TB patients (including shorter regimen, MDR and XDR TB patients)
3	Incentives to informant for notification	Rs. 500 for referral of presumptive TB patient to public health facility and diagnosis as TB
4	Incentive to ASHA/Community Volunteers for ensuring seeding of bank account details of TB patients in Nikshay portal within 15 days of treatment initiation for enabling DBT Payments under NTEP	Rs 50/notified TB patient for seeding of bank account details on the Nikshay portal
5	Incentive to ASHA / Community Health Volunteer for supporting treatment adherence and completion of TB Preventive Treatment among eligible individuals	Rs. 250/- per individual for successful completion of TB Preventive Treatment

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6	Mobilization of beneficiary through ASHA or other mobilizers for additional adult BCG beneficiaries	Rs 150 per session, Two mobilizers will be present at each session site (ASHA/AWW/link worker). Each mobilizer may be paid Rs 75 with a maximum limit of Rs 150 per session site
7	ASHA incentive for due list preparation (For monthly updating of due list of beneficiaries for adult BCG Vaccination)	Rs 300/month ×3 months (if mop-up is required). This amount may be paid to the ASHA. If no ASHA is identified or available, the same may be paid to the link worker/AWW, subject to a total ceiling of Rs 300
8	ASHA incentive for house-to-house survey, before the campaign.	Rs 300 once for the campaign. This amount may be paid to the ASHA. If no ASHA is identified or available, the same may be paid to the link worker/AWW, subject to a total ceiling of Rs 300
X	National Leprosy Eradication Programme	
1	Referral and ensuring compliance for complete treatment in pauci-bacillary cases of Leprosy	Rs. 250 per case (for early detection) Rs. 200 per case (for late detection, any visible disability) Rs. 400 per case, for Paucibacillary Case (PB) case treatment completion
2	Referral and ensuring compliance for complete treatment in multi-bacillary cases of Leprosy- for 33 states	Rs. 250 per case (for early detection) Rs. 200 per case (for late detection, any visible disability) Rs. 600 per case (for Multibacillary Case (MB) case treatment completion
3	ASHA Incentives for Leprosy Case Detection Campaign (LCDC)	Search Activity incentives for ASHA-

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		Rs. 75 per day for 14 days , a total amount of Rs. 1050 for 14 days. ASHA incentives are given two times in a year if LCDC campaign is done twice in a year in few States/UTs.
XI	National Vector Borne Disease Control Programme	
A)	National Malaria Control Program	
1	Preparing blood slides or testing through RDT	Rs. 15/slide or RDT
2	Providing complete treatment for RDT positive Pf cases and Pv cases	Rs 200/ confirmed case for ensuring complete treatment.
3	Providing complete radical treatment to positive Pf and Pv case detected by blood slide, as per drug regime	
B)	Lymphatic Filariasis	
1	For one time linelisting of lymphoedema and hydrocele cases in all areas of non-endemic of endemic and non-endemic States	Rs 200.
2	For annual Mass Drug Administration for cases of Lymphatic Filariasis	Rs 3000/- for 15 days for a population of a village (approx. 1000 population or 250 houses)
C)	Acute Encephalitis Syndrome/Japanese Encephalitis	
1	Referral of AES/JE cases to the nearest CHC/DH/Medical College	Rs 300/ case
D)	Kala Azar elimination	
1	Involvement of ASHAs during the spray rounds (IRS) for sensitizing the community to accept indoor spraying	Rs. 100/- per round during Indoor Residual Spray i.e. Rs 200 in total for two rounds

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2	ASHA Incentive for referring a suspected case and ensuring complete treatment.	Rs. 500/per notified case
3	Incentive to ASHAs for referring Post Kala-Azar Dermal Leishmaniasis (PKDL) case	Rs. 500/- per case (Rs. 200/- at the time of diagnosis and Rs. 300/- after treatment completion)
E)	Dengue and Chikungunya	
1	Incentive for source reduction & IEC activities for prevention and control of Dengue and Chikungunya in all States	Incentive @ Rs. 200/- (1 Rupee per house for maximum 200 houses per month). The time period for involvement of ASHAs may be throughout the year. However, total amount should not be exceeding from Rs. 2400/- per ASHA/year.
F)	National Iodine Deficiency Disorders Control Programme	
1	ASHA incentive for salt testing	Rs. 25 a month for testing 50 salt samples
XII	Incentives under Comprehensive Primary Health Care (CPHC) and Universal NCDs Screening	
1	Filling up of CBAC forms of every individual –onetime activity for enumeration of all individuals, filling CBAC for all individuals 30 or > 30 years of age	Rs. 10/- per form/ per individual as one time incentive
2	Follow up of patients diagnosed with Hypertension/Diabetes and three common cancers for initiation of treatment and ensuring compliance	Rs. 50/- per case/ Bi-
3	Delivery of new service packages under CPHC component	Rs. 1000/ASHA/PM (linked with activities)
XIII	Drinking water and sanitation	
1	Motivating Households to construct toilet and promote the use of toilets.	Rs. 75 per household
2	Motivating Households to take individual tap connections	Rs. 75 per household
XIV	ASHA Certification	

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	<p>Incentive award in cash for ASHAs and ASHA Facilitators who have certified in two independent certificates:</p> <p>1- RMNCHA+N</p> <p>2- Expanded Service Package from NCDs to Palliative Care</p>	<p>Rs. 5000 for all ASHAs and ASHA Facilitators who successfully receive certification by NIOS in two independent certificates:</p> <p>A. RMNCHA+N</p> <p>B. Expanded package of new services from Non-Communicable Diseases to Palliative Care</p> <p>Total incentive: Rs 5000*2 (two independent certificates)= Rs 10,000/-(Introduced in 2022)</p>
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