

The details of incentives for routine and recurring activities given to ASHAs

S. No.	Incentives	Incentives (from September, 2018)
1	Mobilizing and attending Village Health and Nutrition Days or Urban Health and Nutrition Days	Rs.200/session
2	Conveying and guiding monthly meeting of VHSNC/MAS	Rs. 150
3	Attending monthly meeting at Block PHC/UPHC	Rs. 150
4	a. Line listing of households done at beginning of the year and updated every six months	Rs. 300
	b. Maintaining village health register and supporting universal registration of births and deaths to be updated on the monthly basis	Rs. 300
	c. Preparation of due list of children to be immunized on monthly basis	Rs. 300
	d. Preparation of list of ANC beneficiaries to be updated on monthly basis	Rs. 300
	e. Preparation of list of eligible couple on monthly basis	Rs. 300
	Total	Rs. 2000/-

	Activities	Amount in Rs/case
I	Maternal Health	
1	JSY financial package	
a.	For ensuring antenatal care for the woman	Rs.300/Rs.200 (Rural/Urban areas)
b.	For facilitating institutional delivery	Rs. 300/Rs.200 (Rural/Urban areas)
2	Reporting Death of women	Rs. 200 (reporting within 24 hours)
3	For prompt identification and referral of post-natal mothers with danger signs during HBNC visits, AND after confirmation of a healthy outcome for both mother & the baby after 45 th day of delivery	Rs 250 per high risk mother
II	Child Health	
1	Home Visit-care of the New Born and Post-Partum mother etc. / Young Child / follow up	Rs. 250 /Rs. 50 per visit / Rs.150 only after MUAC is equal to nor-more than 125mm
2	Intensified Diarrhoea Control Fortnight	
a.	Week-1-ASHA incentive for prophylactic distribution of ORS to families with under-five children	Rs. 1 per ORS packet for 100 under five children
b.	Week-2- ASHA incentive for facilitating growth monitoring of all children in village	Rs. 100 per ASHA for completing at least 80% of household
c.	MAA (Mother's Absolute Affection) Programme	Rs. 100/ASHA/ Quarterly meeting
III	Immunization	
1	Full immunization for a child under one year/ up-to two years age	Rs. 100 /Rs. 75
2	Mobilizing children for OPV immunization / DPT Booster	Rs. 100 per day / Rs. 50
IV	Family Planning	
1	Ensuring spacing of 2 years/ 3 years after birth of 1st child / permanent limiting method after 2 children after marriage	Rs. 500 / Rs. 500 / Rs. 1000
2	Counselling, motivating and follow up of the cases for Tubectomy	Rs. 200 in 11 with high fertility rates states, Rs.300 in 146 MPV districts, Rs. 150/Rs200 in remaining states
3	Counselling, motivating and follow up of the cases for Vasectomy and NSV and Female Postpartum sterilization	Rs. 300 in 11 states with high fertility rates and Rs. 400 in 146 MPV districts and Rs. 200 in remaining states
Mission ParivarVikas- In selected 146 districts in six states-(57 in UP, 37 in Bihar, 14 RJS, 9 in Jharkhand, 02 in Chhattisgarh and 2 in Assam)		

4	Injectable Contraceptive MPA (Antara Program) and a non-hormonal weekly centchroman pill (Chhaya) - Incentive to ASHA	Rs. 100 per dose
5	Mission ParivarVikas Campaigns Block level activities	Rs. 150/ ASHA/round
6	NayiPahel - an FP kit for newly weds	Rs. 100/ASHA/NayiPahel kit distribution
7	SaasBahuSammelan- mobilize SaasBahu for the Sammelan- maximum four rounds	Rs. 100/ per meeting
8	Updating of EC survey before each MPV campaign	Rs.150/ASHA/Quarterly round
V	Adolescent Health	
1	Sanitary napkins to adolescent girls	Rs. 1/ pack of 6 sanitary napkins
2	Organizing monthly meeting with adolescent girls pertaining to Menstrual Hygiene	Rs. 50/meeting
3	Conducting PLA meetings- 2 meetings per month	Rs. 100/ASHA/per meeting
VI	Revised National Tuberculosis Control Programme	
1	For Category I/Category II of TB patients (New cases/ previously treated of Tuberculosis)	Rs. 1000 for 42 contacts / Rs. 1500 for 57 contacts
2	For treatment and support to drug resistant TB patients	Rs. 5000 for completed course of treatment
3	For notification if suspect referred is diagnosed to be TB patient by MO/Lab	Rs.100
VII	National Leprosy Eradication Programme	
1	Treatment in pauci-bacillary cases /multi-bacillary cases of Leprosy - for 33 states (except Goa, Chandigarh & Puducherry).	Rs. 250 (for diagnosis) + Rs. 400/Rs.600 (for follow up)
VIII	National Vector Borne Disease Control Programme	
1	Malaria—Preparing Blood Slides/complete treatment for RDT or radical treatment of positive Pf cases	Rs. 15 per slide/ Rs. 75 per positive cases
2	Lymphatic Filariasis-Listing of cases	Rs. 200
3	Acute Encephalitis Syndrome/Japanese Encephalitis	
	Referral of AES/JE cases to the nearest CHC/DH/Medical College	Rs. 300 per case
4	Kala Azar elimination	
	Involvement of ASHAs during the spray rounds (IRS) / for referring a suspected case	Rs. 100/- per round / Rs. 500/per notified case
5	Dengue and Chikungunya	

	Incentive for source reduction & IEC activities for prevention and control of Dengue and Chikungunya in 12 High endemic States.	Rs. 200/- (1 Rupee /House for maximum 200 houses PM for 05 months- during peak season).
6	National Iodine Deficiency Disorders Control Programme	
	ASHA incentive for salt testing	Rs.25/ month (for 50 salt samples)
IX	Incentives under (CPHC) and Universal NCDs Screening	
1	Maintaining data validation and collection of additional information	Rs. 5/form/family
2	Filling up of CBAC forms of every individual	Rs. 10/per form/per individual
3	Follow up of patients	Rs. 50/per case/Bi-Annual
4	Delivery of new service packages under CPHC	Rs.1000/ASHA/PM
X	Drinking water and sanitation	
1	Motivating Households to construct toilet and promote the use of toilets and for individual tap connections	Rs. 75 per household

Additional incentives approved by Mission Steering Group of NHM in its 7th meeting held on 7th September, 2022.

Sl. No.	Activities	Amount in Rs/case
A.	Provision of a cash award to ASHAs and ASHA Facilitators who have successfully been certified in two independent certificates. i. RMNCHA+N ii. Expanded package of new services from Non-Communicable Diseases to Palliative Care	Rs. 5000/- for each certification
B.	Provision of incentives for ASHAs for facilitating creation and seeding of ABHA ID in various IT Portals of MoHFW such as CPHC NCD Portal and RCH Portal etc	Rs. 10/- for each ABHA account created and seeded
C.	Provision of Incentive to ASHAs or Community Volunteers for ensuring seeding of bank account details of notified TB patients in Ni-kshay portal within 15 days of treatment initiation for enabling DBT Payments under the National Tuberculosis Elimination Programme (NTEP).	Rs. 50/- per patient
D.	Provision to 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.
E.	Revision of ASHA incentive for referral of SAM children to NRC and follow up of SAM children after discharge from NRC to from current norms of Rs. 50/- to Rs. 300/- per SAM child.	<ul style="list-style-type: none"> • For referring SAM child with medical complication to NRCs, ASHA incentive enhanced from Rs. 50/- per child to Rs. 100/- per child. • For follow up visits of SAM children discharged from NRC, ASHA incentive enhanced from Rs. 100/- per child to Rs. 150/- per child. (Rs 50 per visit for 1st and 4th visit and Rs 25 per visit for 2nd and 3rd visit). • Additional incentive of Rs. 50/- per SAM child for ASHA in case child is declared free of SAM status after completion of all follow ups.
F.	Provision of incentive to ASHAs for referring Post Kali-Azar Dermal Leishmaniasis (PKDL) case detection and complete treatment in all 4 Kala-azar endemic states.	Rs. 500/. per case (Rs. 200/- at the time of diagnosis and Rs. 300/- after treatment completion)
G.	Revision of ASHA incentives under National Malaria Control Programme for enhancing ASHA incentive for ensuring complete treatment.	Enhancing ASHA incentive from Rs 75/- to Rs. 200/- per confirmed case of Malaria