

## Ayushman Bharat "Niramayam'

Deen Dayal Swasthya Suraksha Parishad, IEC Bureau Building, J.P. Hospital Campus, Bhopal Madhya Pradesh, 462003



No./SHA/AB/2024/ | 87

Bhopal, Date 23/01/2024

To,

- 1. Chief Medical and Health Officer (Bhopal, Sehore, Indore, Ujjain, Gwalior, Jabalpur) Madhya Pradesh
- 2. Civil Surgeon and Superintendent, District Hospital (Bhopal, Sehore, Indore, Ujjain, Gwalior, Jabalpur) Madhya Pradesh

Subject: Regarding initiation of ABDM 100-Microsites work in M.P.

Dear Madam/Sir,

The state of Madhya Pradesh has been making concerted efforts towards implementation of ABDM in the state. The State already has created ABHAs for around half of its population, ranking #3 in terms of number of ABHAs created across various states.

While the State has made significant process on ABHA creation, the State needs to catch-up on the number of verified health facilities registered on HFR and the number of verified healthcare professionals registered on HPR. The HPR and HFR registrations are currently mostly driven by public sector. The 100 Microsites initiative is one such initiative which will drive adoption of ABDM among the private healthcare providers. A 'Microsite' is a focused region comprising of all small- to medium-sized healthcare facilities such as clinics, hospitals, labs, and pharmacies within that area, which may be on-boarded onto the ABDM ecosystem. There are six such microsites selected in Madhya Pradesh as given in the Annexure I.

The implementation of microsites will help the state accelerate onboarding of private players into the ABDM ecosystem. Each microsite has been assigned to an interfacing agency who will drive the ABDM adoption process on the ground. They will carry out surveying, mapping & engagement of private health facilities and professionals in these microsites. The interfacing agencies assigned to the microsites are also listed in **Annexure I.** WJCF has been selected as the developmental partner for all the Microsites

You are requested to provide your full support to the said agency in their roles and responsibilities. It'll be helpful to organise an orientation in your district by inviting all the stakeholders who will be a key for the success of this mission (a suggested list is provided in **Annexure 2**). You are also requested to issue a letter from your office to all the relevant healthcare facilities in your district informing them of the importance of ABDM and the need to join this revolutionary effort with our team. I look forward to your support in digitalization of health care, making Ayushman Bharat Digital Mission a success in Madhya Pradesh. A detailed roadmap of the Microsites implementation process is enclosed with this letter for your kind reference.

State Mission Director

Ayushman Bharat Digital Mission

Madhya Pradesh

## Copy to:

- 1. Additional Chief Secretary, Public Health and Family Welfare Department, Ministry of Madhya Pradesh.
- 2. Commissioner, Directorate of Health Services, Madhya Pradesh.
- 3. Mission Director, Office of the National Health Mission, Bhopal.
- 4. Executive Officer, Ayushman Bharat "Niramayam" Madhya Pradesh.
- 5. Finance Officer, Ayushman Bharat "Niramayam" Madhya Pradesh.
- 6. General Manager (Opp./Legal), Ayushman Bharat "Niramayam" Madhya Pradesh.
- 7. Junior Accounts Officer, Ayushman Bharat "Niramayam" Madhya Pradesh.
- 8. All, Divisional Incharge Officer, Ayushman Bharat "Niramayam" Madhya Pradesh.
- 9. Dr. Shikha Raghuwanshi, State Nodal Officer, Ayushman Bharat Digital Mission Madhya Pradesh.
- 10. Mr. Hemant Jain, State Project Manager (IT)
- 11. Regional Joint Director, Bhopal, Indore, Ujjain, Gwalior and Jabalpur Division MP.

State Mission Director

Ayushman Bharat Digital Mission

Madhya Pradesh

## Annexure-I

Sr. No.	Microsite	Microsite Category*	Interfacing Agency Selected#
1.	Bhopal	Category A	Divya Jyoti
2.	Sehore	Category B	Divya Jyoti
3.	Indore	Category A	Dhanush Healthcare
4.	Ujjain	Category B	Dhanush Healthcare
5.	Jabalpur	Category A	Doctors for You
6.	Gwalior	Category B	Doctors for You

<sup>\*</sup>As different regions may have different number of healthcare facilities, therefore, microsites have been classified into two categories, namely, 'Category-A' – with at least 1000 healthcare facilities, and 'Category-B' – with 500 to 1000 healthcare facilities.