

**GOVERNMENT OF INDIA  
MINISTRY OF HEALTH AND FAMILY WELFARE  
DEPARTMENT OF HEALTH AND FAMILY WELFARE**

**LOK SABHA  
STARRED QUESTION NO. 137  
TO BE ANSWERED ON THE 10<sup>TH</sup> FEBRUARY, 2023**

**NATIONAL HEALTH MISSION**

**†\*137. SHRI GUMAN SINGH DAMOR:  
DR. DHAL SINGH BISEN:**

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

- (a) the works undertaken, programmes being run and targets set under the National Health Mission (NHM) along with the details of components/works for which funds are provided/released thereunder during the last five years, State/UT-wise and districtwise in Madhya Pradesh;
- (b) the details of funds allocated/utilized under NHM, State/UT-wise along with the per capita average amount being spent on healthcare services annually in the country including the tribal dominated areas;
- (c) whether the Government proposes to allocate more funds under NHM and if so, the details thereof, State/UT-wise;
- (d) the details of the proposals received from States/UTs under NHM and the action taken thereon during the last five years, State/UT-wise including Madhya Pradesh and Rajasthan;
- (e) whether the Government proposes to open Medical Colleges in tribal dominated Jhabua and Alirajpur districts on priority basis as various communicable and non-communicable diseases including Sickle Cell Anaemia, Silicosis, Fluorosis are prevalent and there is lack of adequate health facilities and if so, the details thereof along with the time by which such medical colleges will be opened and if not, the reasons therefor; and
- (f) the concrete steps taken by the Government to streamline the implementation of NHM in urban and rural areas of the country including Maharashtra?

**ANSWER  
THE MINISTER OF HEALTH AND FAMILY WELFARE  
(DR MANSUKH MANDAVIYA)**

(a) to (f) A Statement is laid on the Table of the House.

**STATEMENT REFERRED TO IN REPLY TO LOK SABHA  
STARRED QUESTION NO. 137 FOR 10<sup>TH</sup> FEBRUARY, 2023**

(a) National Health Mission (NHM) envisages achievement of universal access to equitable, affordable & quality health care services that are accountable and responsive to people's needs. Some major programme under NHM are as follows:

- **Ayushman Bharat – Health & Wellness Centres (AB-HWCs):** More than 1.56 lakh Sub- Health Centres (SHC), Primary Health Centres (PHC) and Urban Primary Health Centres (UPHC) have been transformed into Ayushman Bharat- Health and Wellness Centres (AB-HWCs) to deliver twelve packages of Comprehensive Primary Health Care (CPHC) that includes preventive, promotive, curative, palliative and rehabilitative services which is universal, free and close to the community.
- **National Free Drugs Initiative:** States/UTs are supported to provide essential drugs based on the level of public health facilities free of cost to all who access these facilities.
- **Free Diagnostics Initiatives. (FDI):** Under the initiative, support provided to States/UTs to provide a set of essential diagnostics in States/UTs at various levels of care, free of cost.
- **National Ambulance Services (NAS):** Under the NHM, technical and financial support is provided for emergency medical services in States/UTs through a functional National Ambulance Service (NAS) network linked with a centralized toll-free number 108/102.
- **Mobile Medical Units (MMU)** are supported to facilitate access to public health care at the doorstep particularly to people living in remote, difficult, under-served and unreached areas to provide primary care services.
- **Surakshit Matritva Aashwasan (SUMAN)** provides assured, dignified, respectful and quality healthcare at no cost and zero tolerance for denial of services for every woman and newborn visiting public health facilities to end all preventable maternal and newborn deaths.
- **Janani Suraksha Yojana (JSY)**, a demand promotion and conditional cash transfer scheme for promoting institutional delivery.
- Under **Janani Shishu Suraksha Karyakram (JSSK)**, every pregnant woman is entitled to free delivery, including caesarean section, in public health institutions along with the provision of free transport, diagnostics, medicines, other consumables & diet

- **Pradhan Mantri Surakshit Matritva Abhiyan (PMSMA)** provides pregnant women a fixed day, free of cost assured and quality antenatal check up by a Specialist/Medical Officer on the 9th day of every month.
- **LaQshya** improves the quality of care in labour room and maternity operation theatres to ensure that pregnant women receive respectful and quality care during delivery and immediate post-partum.
- **Monthly Village Health, Sanitation and Nutrition Day (VHSND)** is an outreach activity at Anganwadi centers for provision of maternal and child care including nutrition in convergence with the ICDS.
- **Reproductive and child health (RCH) portal** is a name-based web-enabled tracking system for pregnant women and new born so as to ensure seamless provision of regular and complete services to them including antenatal care, institutional delivery and post-natal care.
- **Delivery Points-** Over 25,000 ‘Delivery Points’ across the country have been strengthened in terms of infrastructure, equipment, and trained manpower for provision of comprehensive RMNCAH+N services
- **Setting up of Maternal and Child Health (MCH) Wings** at high caseload facilities to improve the quality of care provided to mothers and children.
- **Functionalization of First Referral Units (FRUs)** by ensuring manpower, blood storage units, referral linkages to improve the access to quality of care for pregnant women.
- Further, initiatives such as **Mission Parivar Vikas, Adolescent Friendly Health Clinics (AFHCs), Weekly Iron Folic Acid Supplementation (WIFS), Menstrual Hygiene Scheme, Facility Based Newborn Care (FBNC), Home Based Newborn Care Program, Social Awareness and Actions to Neutralize Pneumonia Successfully (SAANS), Home Based Care for Young Child (HBYC), Rashtriya Bal Swasthya Karyakram (RBSK), Early Childhood Development (ECD), Comprehensive Abortion Care (CAC), Anemia Mukh Bharat (AMB) strategy, Nutrition Rehabilitation Centre (NRC) program** are supported to increase access to quality healthcare services. Support is also provided to strengthen Universal Immunization programme.

Details of targets set under the National Health Mission are attached at **Annexure-I**.

**(b) & (c)** The details of State/UT-wise Central Release and utilisation under National Health Mission (NHM) for 2021-22 in the country is attached at **Annexure-II**. As per the latest available National Health Accounts Estimates (NHA 2018-19), the per capita

government expenditure on health is Rs. 1,815. The funds are allocated to States/UTs in the form of RoP on the basis of Resource Envelope of State/UT based on Budget/ Revised Estimate.

(d) The details of State/UT proposals under NHM and action taken thereon during the last five years including Madhya Pradesh and Rajasthan are available as Programme Implementation Plans (PIPs) on the National Health Mission website:

<https://nhm.gov.in/index1.php?lang=1&level=1&sublinkid=1377&lid=744>

(e) 157 Medical colleges have been approved in three phases including 14 medical colleges in the State of Madhya Pradesh, of which 06 Medical Colleges have been approved in tribal districts of the State, namely, Mandla, Shahdol, Chhindwara, Singrauli, Ratlam & Khandwa (East Nimar). The list of Medical Colleges approved in tribal districts under the Scheme is at **Annexure-III**. In NHM, under National Programme for Prevention and Control of Cancer, Diabetes, Cardiovascular Diseases and Stroke (NPCDCS), 707 District NCD Clinics, 193 District Cardiac Care Units, 268 Day Care Centres and 5,541 Community Health Centre NCD Clinics have been set up across country. For Sickle cell Screening in tribal areas, NHM supports the states in screening of affected population by approving the proposals in annual PIP. The GoI is also supporting the states to establish the Sub Health Centres, Primary Health Centres in tribal areas as per the prescribed norm of 3,000 and 20,000 population respectively.

(f) MoHFW has issued guidelines to States/UTs for strengthening the implementation of National Health Mission in country. Few important to mention are National Health Policy 2017, to provide overall vision towards Health, Indian Public Health Standards 2022 for prescribing Standard of service from health facilities, Public Health Management Cadre guidelines to prescribe the various cadre of Health Professional in States/UTs. MoHFW provides technical and financial assistance to states on various health challenges in country.

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**The major milestones to be achieved under NHM till 31.03.2026 are as follows:**

<b>Sl. No.</b>	<b>Major Milestones</b>	<b>Timeframe for completion / target date</b>
1.	Reduction of MMR from 113/100000 to 87/100000	31 .03.2026
2.	Reduce U5 MR from 30/1000 to 23/1000; IMR from 28/ 1000 to 22/1000 , NMR from 20/1000 to 16/1000	31 .03.2026
3.	Sustain TFR-2.0 (Source: NFHS-S) at national level and achieve replacement level TFR at sub-national level	31.03.2026
4.	Sustain Antenatal care coverage (ANC) above 90% and pregnant women receiving skilled birth attendant (SBA) during deliveries (institutional + home) above 90%	31.03.2026
5.	Achieve and Sustain 90% Full immunization coverage of all children by one year of age	31.03.2026
6.	All districts (730) in the country to have following facilities by 2026: Diagnosis and management of viral hepatitis Free dialysis services in all district hospitals NCD clinics in all district hospitals and CHCs	31.03.2026
7.	40% increase in no. of dialysis sessions in public health facilities over a period of 5 years by 2026	31.03.2026
8.	6500 no. of UPHCs to be made operational as Health and Wellness Centers (UPHCS- HWCs)	31.03.2026
9.	Tuberculosis : 90% of the districts will achieve 90% of annual targets for TB case notification by 2025	31.03.2026
10.	Perform at least 365 Lakh Cataract surgeries by 2025- 26	31.03.2026
11.	Malaria: No. of districts with API< 1/1000 population - 710	31.03.2026
12.	Leprosy: Achieve prevalence rate of less than 1 case/10,000 population in all districts	31.03.2026
13.	Achieve the operationalization of 1.5 lakh Ayushman Bharat- Health and Wellness Centres (AB-HWCs) Baseline: 80,348 functional HWCs as on 26.11.21	31.03.2026
14.	NPCDCS Persons screened for high blood pressure and high blood sugar- 50 crore Patients under treatment for diabetes and hypertension - 2.2 crore	31.03.2026
15.	Reduce OOPE by 15%	31.03.2026

## State/UT wise Central Release and Utilisation under National Health Mission (NHM) in 2021-22

(Rs. In Crore)

Sl. No.	State/UT	2021-22 (Release)	2021-22 (Utilisation)
1	Andaman & Nicobar Islands	43.68	31.20
2	Andhra Pradesh	1199.37	2448.67
3	Arunachal Pradesh	188.53	248.51
4	Assam	1955.93	2194.36
5	Bihar	1748.76	1905.35
6	Chandigarh	17.47	26.86
7	Chhattisgarh	969.61	1833.45
8	Dadra & Nagar Haveli	38.59	45.02
9	Daman & Diu		
10	Delhi	127.37	237.79
11	Goa	26.01	60.56
12	Gujarat	1094.48	1835.81
13	Haryana	577.07	879.91
14	Himachal Pradesh	555.09	525.09
15	Jammu & Kashmir	459.1	779.61
16	Jharkhand	640.18	1176.55
17	Karnataka	1274.71	2200.92
18	Kerala	771.47	1230.96
19	Lakshadweep	8.41	7.26
20	Madhya Pradesh	2295.66	3714.92
21	Maharashtra	1769.67	4227.31
22	Manipur	95.59	154.09
23	Meghalaya	282.46	227.08
24	Mizoram	93.82	153.16
25	Nagaland	126.66	192.16
26	Odisha	1263.07	2587.72
27	Puducherry	21.33	46.36
28	Punjab	349.21	918.96
29	Rajasthan	1924.95	3230.01
30	Sikkim	51.86	46.06
31	Tamil Nadu	1631.91	3039.39
32	Tripura	217.95	237.24
33	Uttar Pradesh	3235.46	6210.20
34	Uttarakhand	553.47	606.07
35	West Bengal	1654.26	2229.46
36	Telangana	725.67	1556.65
37	Ladakh	44.79	62.81

Note:

1. The above releases relate to Central Govt. Grants & do not include State share contribution.
2. National Health Mission (NHM) comprises of two sub Missions viz. National Rural Health Mission (NRHM) and National Urban Health Mission (NUHM).
3. Expenditure includes expenditure against Central Release, State Release & unspent balances at the beginning of the year. Expenditure is as per available Financial Management Reports submitted by the States/UTs.

**Details of Medical Colleges approved in Tribal districts under the Centrally Sponsored Scheme for  
'Establishment of new Medical Colleges attached with existing District/Referral Hospitals'**

S.No.	State	Districts
1	Arunachal Pradesh	Papum Pare
2	Assam	Kokrajhar
3	Bihar	Jamui
4	Chhattisgarh	Surguja
5	Chhattisgarh	Kanker
6	Chhattisgarh	Korba
7	Chhattisgarh	Mahasamund
8	Chhattisgarh	Rajnandgaon
9	Gujarat	Narmada
10	Gujarat	Navsari
11	Gujarat	Panchmahal
12	Himachal Pradesh	Chamba
13	Jammu & Kashmir	Leh (Ladakh)
14	Jammu & Kashmir	Rajouri
15	Jharkhand	Pashchimi- Singhbhum
16	Jharkhand	Dumka
17	Jharkhand	Palamu
18	Jharkhand	Hazaribagh
19	Madhya Pradesh	Mandla
20	Madhya Pradesh	Shahdol
21	Madhya Pradesh	Chhindwara
22	Madhya Pradesh	Singrauli
23	Madhya Pradesh	Ratlam
24	Madhya Pradesh	Khandwa (East Nimar)
25	Maharashtra	Nandurbar
26	Manipur	Churachandpur
27	Meghalaya	West Garo Hills
28	Mizoram	Aizwal
29	Nagaland	Mon
30	Nagaland	Kohima
31	Odisha	Mayurbhanj
32	Odisha	Koraput
33	Odisha	Kalahandi
34	Rajasthan	Banswara
35	Rajasthan	Dungarpur
36	Rajasthan	Sirohi
37	Rajasthan	Dausa
38	Sikkim	East District (Gangtok)

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