

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

**RAJYA SABHA  
STARRED QUESTION NO. 172  
TO BE ANSWERED ON THE 05<sup>TH</sup> AUGUST, 2025**

**HEALTH INFRASTRUCTURE IN RURAL ODISHA**

**172 SHRI MUZIBULLA KHAN:**

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

- (a) the number of Primary Health Centres (PHCs) and Community Health Centres(CHCs) functioning in Odisha;
- (b) the availability of doctors and paramedics, district-wise;
- (c) the funds released under National Health Mission (NHM) in the last three years;
- (d) whether there is a shortage of equipment and medicines; and
- (e) the steps taken to bridge healthcare gaps in tribal belts

**ANSWER  
THE MINISTER OF HEALTH AND FAMILY WELFARE  
(SHRI JAGAT PRAKASH NADDA)**

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

**STATEMENT REFERRED TO IN REPLY TO RAJYA SABHA  
STARRED QUESTION NO. 172 \* FOR 5<sup>TH</sup> AUGUST, 2025**

(a) & (b): Health Dynamics of India (HDI) (Infrastructure & Human Resources), 2022-23 is an annual publication, based on Health care administrative data reported by States/UTs. The number of Primary Health Centres (PHCs) and Community Health Centres (CHCs) functioning in Odisha and State/UT-wise details of doctors and paramedics at the healthcare facilities across the country can be accessed at the following link of HDI 2022-23:

[https://mohfw.gov.in/sites/default/files/Health%20Dynamics%20of%20India%20%28Infrastructure%20%26%20Human%20Resources%29%202022-23\\_RE%20%281%29.pdf](https://mohfw.gov.in/sites/default/files/Health%20Dynamics%20of%20India%20%28Infrastructure%20%26%20Human%20Resources%29%202022-23_RE%20%281%29.pdf)

(c): Under National Health Mission (NHM), the Ministry of Health and Family Welfare provides technical and financial support to the States/UTs to strengthen the public healthcare system, based on the proposals received in the form of Programme Implementation Plans (PIPs).

The funds released under National Health Mission (NHM) in the last three years from the FY 2022-23 to 2024-25 to the State of Odisha is as under:

(Rs. in cr.)

Financial Year	NHM
2022-23	1,284.69
2023-24	1,901.77
2024-25	1,916.79

Note: The above releases relate to Central Govt. Grants & do not include State share contribution.

(d): To ensure availability of essential drugs and reduce the Out-of-Pocket Expenditure (OOPE) of the patients visiting the public health facilities, Government has rolled out the Free Drugs Service Initiative (FDSI) under National Health Mission. This includes financial support to States/UTs for 106 drugs at Sub Health Centre level, 172 at Primary Health Centre level, 300 at Community Health Centre level, 318 at Sub District Hospital level and 381 drugs at district Hospitals.

Odisha has implemented the Drug and Vaccine Distribution Management System (DVDMS) to ensure uninterrupted supply of medicines and reduce shortages. This enables real-time tracking of stock

availability, distribution, and expiry across health facilities that ensures data-driven monitoring and timely replenishment. Support under the scheme is available for Procurement of drugs and strengthening /setting up robust systems of procurement, Quality Assurance, Supply chain management and warehousing, Prescription audit, grievance redressal, dissemination of Standard Treatment Guidelines and Establishment of IT enabled platform DVDMS (Drugs & Vaccine Distribution Management System) for monitoring the real status of procurement and availability of essential medicines.

This Ministry supports 'Free Diagnostics Service Initiative' programme under NHM with the aim to provide accessible and affordable pathological and radiological diagnostics services closer to the community, which in turn reduces the Out-of-Pocket Expenditure (OOPE). Diagnostics services are provided free of cost at all levels of public health facilities (14 tests at Sub Centers, 63 at Primary Health Centers, 97 at Community Health Centres, 111 test at Sub District Hospitals and 134 tests at District Hospitals).

(e): **National Health Mission (NHM)** envisages universal access to equitable, affordable & quality health care services that are accountable and responsive to people's needs by supporting the States/UTs including Odisha in providing financial and technical

support for accessible, affordable and quality healthcare, especially to the poor and vulnerable sections in urban, rural, and tribal/hilly areas.

Under NHM, tribal areas have following relaxed norms for addressing the need-based intervention in terms of healthcare infrastructure and human resources:

**Health facility:** The population norms for setting up SHC AAM, PHC AAM and CHC in tribal and hilly areas has been relaxed from 5,000, 30,000, and 1,20,000 to 3000, 20,000 and 80,000 respectively.

**Mobile Medical Units (MMUs):** The provision of 2 MMUs per district in plain areas is relaxed to 4 MMUs per district in tribal/ hilly/ inaccessible/ remote and hard to reach areas. There is further relaxation of up to 10 MMUs per district in PVTG areas under Pradhan Mantri Janjati Adivasi Nyaya Maha Abhiyan (PM JANMAN).

There is a provision of additional **Auxiliary Nurse Midwife (ANM)** in Multi-Purpose Centre (MPC) with basic drugs and diagnostics facilities under PM JANMAN.

As per Health Dynamics of India (HDI-2022-23), as on 31<sup>st</sup> March 2023 a total of 3292 Healthcare facilities (SHCs-AAM - 2701, PHCs-AAM - 457 & CHCs- 134) are functional in Tribal areas of Odisha.

Further, a total of 50 MMUs are deployed in Odisha under PM Janjati Adivasi Nyaya Maha Abhiyan (PM JANMAN) to cover left-out Particularly Vulnerable Tribal Groups (PVTGs) villages which do not have healthcare facilities within 5 KM. The District-wise Break-up is at **Annexure-I**.

- So far 26 MMUs are re-routed to cover the left-out villages under Dharti Aaba Janjatiya Gram Utkarsh Abhiyan (DA JGUA) in Odisha which are not covered by Healthcare facilities within 10 KM. Details are at **Annexure-II**.
- Central Release under Scheduled Tribe (ST) Category under NHM and Pradhan Mantri-Ayushman Bharat Health Infrastructure Mission (PM-ABHIM) from the FY 2022-23 to 2024-25 to the State of Odisha is as under:

(Rs. in cr.)

Financial Year	NHM			PM ABHIM
	ST	PM JANMAN	DA JGUA	
2022-23	454.37	-	-	55.81
2023-24	316.26	-	-	18.89
2024-25	414.62	5.98	52.37	34.05

Note: The above releases relate to Central Govt. Grants & do not include State share contribution.

Further, as per information provided by the State of Odisha, following Steps have also been taken to bridge healthcare gaps in Tribal areas:

- **Establishment of Maternity Waiting Homes (MWHs) also known as Maa Gruha:** It is a temporary home for expectant mothers where they can wait for safe delivery at nearest health institution. The objective of the MWH is to promote institutional delivery in the geographically inaccessible areas with high home delivery and poor mobile connectivity to call 102/108 Ambulance.

- **Engagement of more Accredited Social Health Activists (ASHAs) for hard to reach areas/hamlets:** The State government of Odisha has deployed ASHAs for all the hard to reach areas, even up to the extent of providing 1 ASHA for 100 populations for hard to reach tribal areas.
- **National Sickle Cell Mission:** Under this new Mission, priority has been given for screening, counselling and management of sickle cell anaemia in all 13 tribal and 7 non tribal districts. Over 32lakh population screened during 2023-24 and sickle cell cards have been distributed duly. The Sickle Cell Disease patients are also followed up for further treatment.
- **Strengthening Human Resources in Tribal Areas:** To address healthcare workforce shortages in tribal areas, the following measures have been implemented:
  - Additional weightage marks are provided to doctors in postgraduate entrance exams, with mandatory postings in tribal areas for three years during initial appointments.
  - Health institutions in tribal areas are graded based on vulnerability indicators, offering place-based incentives of up to ₹40,000 for medical officers and ₹80,000 for specialists.
  - A corpus fund of ₹1 crore is allocated to tribal districts for hiring specialists and super-specialists at negotiable rates.
- **Outsourcing Management of PHCs:** To ensure the availability of primary healthcare services in remote and inaccessible tribal areas, the management of PHCs has been outsourced. This approach aims to deliver quality healthcare services in outreach areas effectively.

\*\*\*\*

**Annexure-I****District-wise MMUs deployed under PM JANMAN**

<b>Sl. No.</b>	<b>District</b>	<b>MMU Deployed</b>
1	ANUGUL	2
2	DEOGARH	1
3	DHENKANAL	7
4	GAJAPATI	4
5	GANJAM	1
6	JAJAPUR	1
7	KALAHANDI	2
8	KANDHAMAL	3
9	KENDUJHAR	4
10	MALKANGIRI	7
11	MAYURBHANJ	11
12	NUAPADA	2
13	RAYAGADA	4
14	SUNDARGARH	1
<b>Total</b>		<b>50</b>

**Annexure-II**

**Number of MMU Re-routed so far to cover left-out villages under DA JGUA in Odisha**

State	District	MMU Rerouted
Odisha	Gajapati	3
	Kalahandi	2
	Kandhamal	3
	Keonjhar	3
	Koraput	1
	Malkangiri	3
	Mayurbhanj	6
	Nabarangpur	1
	Rayagada	3
	Sundargarh	1