GOVERNMENT OF INDIA MINISTRY OF HEALTH & FAMILY WELFARE DEPARTMENT OF HEALTH & FAMILY WELFARE

RAJYA SABHA UNSTARRED QUESTION NO. 203 TO BE ANSWERED ON 22 JULY, 2025

NON-UTILIZATION OF ALLOCATED FUNDS

#203. SMT. SUNETRA AJIT PAWAR:

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

- (a) the State-wise details of unutilization of funds allocated for various schemes in the last financial year along with the reasons for such unutilization or reallocation;
- (b) whether the Ministry has conducted a comprehensive impact assessment of its major schemes and policies in the last five years;
- (c) if so, the key findings thereof and the manner in which these findings are being used in refining existing policies and formulating new ones; and
- (d) the steps taken to ensure effective coordination with other Ministries to address social determinants of health and achieve holistic health outcomes?

ANSWER THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SMT ANUPRIYA PATEL)

(a) to (d) The Ministry of Health and Family Welfare through various Centrally Sponsored Schemes and Central Sector Schemes supplements the efforts of the States / UTs in the healthcare sector. The various Centrally Sponsored Schemes are implemented with separate budget lines for each component of the schemes under this Ministry. Government spending for these schemes are made for best output as per quarterly expenditure plan. The funds are released on the basis of Utilization Certificate to the States/UTs. There is a robust system in place for monitoring various schemes implemented through the States / UTs. Reviews are conducted for ensuring and facilitating the speedy implementation of the schemes by way of addressing various administrative, technical and financial issues.

The 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.

"Public Health and Hospitals" is a State subject and the primary -responsibility of strengthening public healthcare system including up gradation and strengthening of existing health facilities lies with the respective State/ UT. However, under NHM, Ministry of Health and Family Welfare (MoHFW) provides the technical and financial support to States/UTs based on the proposals received from States within their overall resource envelope.

Under NHM, the performance of various health programmes is regularly assessed, through review meetings, video conferences & field visits of senior officials, promoting performance by setting up benchmarks for service delivery & rewarding achievements etc. The working of National Health Mission (NHM) has been regularly assessed through external surveys such as, National Family Health Survey (NFHS) and Sample Registration System (SRS). Further, under NHM, Common Review Missions (CRM) are conducted annually to assess and monitor the progress and implementation status s of various schemes. The key strategies and priority areas of CRM is to analyze challenges with respect to strengthening health systems, identify trends in progress of key indicators, evaluate the readiness of the state to undertake implementation of new initiatives, and review the progress and coordination mechanisms with various partners.

The Ministry of Health & Family Welfare (MoHFW) is actively collaborating with various ministries to optimize health outcomes and address social determinants of health across India. This coordinated effort includes working with the Ministry of Tribal Affairs on PM-JANMAN and DA-JGUA for Particularly Vulnerable Tribal Groups (PVTGs) and other tribal populations, respectively, and associating with the Ministry of Home Affairs to deliver health services in remote border villages through the Vibrant Village Program. Beyond these, MoHFW also coordinates with the Ministry of Women and Child Development (WCD), Ministry of Rural Development, and Ministry of Telecommunication, among others, to ensure effective implementation of different schemes.

During the planning phase of new schemes, the MoHFW actively seeks input and feedback from relevant line ministries. These ministries are also invited to participate in monitoring and evaluation meetings and field visits for various schemes, such as the Common Review Mission for the National Health Mission (NHM)

The details of various major Centrally Sponsored Schemes / programmes and Central Sector Schemes implemented through the States/UTs along with details of funds released / utilized is as under:

- i. National Health Mission (NHM) at Annexure-I
- ii. Pradhan Mantri Ayushman Bharat Health Infrastructure Mission (PM-ABHIM) at Annexure-II
- iii. Establishment of New Medical Colleges attached with existing District/Referral hospitals and up gradation of existing State Government/Central Government medical colleges to increase MBBS seats in the country and Strengthening and up gradation of State Government Medical colleges for starting new PG disciplines and increasing PG seats at Annexure-III
- iv. Augmenting Nursing Education at Annexure-IV
- v. Development of Nursing Services at Annexure-V
- vi. Ayushman Bharat Pradhan Mantri Jan Arogya Yojana (AB PM-JAY) at Annexure-VI
- vii. Health Sector Disaster Preparedness and Response" Scheme (HSDPR) and Human Resource Development for Emergency Medical Services' scheme (HRDEMS) at Annexure-VII.

State/UT wise Central Release under NHM from the FY 2024-25

(Rs. in cr.)

S. No.	Name of the State/UT	Central Release
1	Andaman and Nicobar Islands	49.99
2	Andhra Pradesh	1,319.61
3	Arunachal Pradesh	388.86
4	Assam	2,076.25
5	Bihar	2,367.18
6	Chandigarh	43.43
7	Chattisgarh	969.11
8	Dadra & Nagar Haveli and Daman & Diu	40.96
9	Delhi	240.39
10	Goa	55.06
11	Gujarat	1,324.86
12	Haryana	562.49
13	Himachal Pradesh	523.70
14	Jammu & Kashmir	1,040.76
15	Jharkhand	964.31
16	Karnataka	1,295.81
17	Kerala	1,351.78
18	Ladakh	135.98
19	Lakshadweep	9.68
20	Madhya Pradesh	2,430.91
21	Maharashtra	2,417.95
22	Manipur	279.16
23	Meghalaya	297.95
24	Mizoram	159.96
25	Nagaland	204.47
26	Odisha	1,916.79
27	Puducherry	26.27
28	Punjab	878.21
29	Rajasthan	2,398.62
30	Sikkim	81.67
31	Tamil Nadu	1,742.67

32	 Telangana	1,110.43
33	Tripura	268.67
34	Uttar Pradesh	5,853.43
35	Uttarakhand	604.05
36	West Bengal	688.44

Note:

- i. The above releases relate to Central Govt. Grants & do not include State share contribution.
- ii. The entire Central Share released to the States/UTs has been utilized by the respective States/UTs.

State/UT wise Central Release under PM-ABHIM for FY 2024-25

(Rs. in cr.)

S. No.	Name of the State/UT	Central Release
1	Andaman and Nicobar Islands	1.05
2	Andhra Pradesh	39.07
3	Arunachal Pradesh	1.05
4	Assam	159.61
5	Bihar	15.92
6	Chandigarh	5.13
7	Chattisgarh	18.63
8	Dadra & Nagar Haveli and Daman & Diu	0.53
9	Delhi	0.00
10	Goa	0.10
11	Gujarat	79.38
12	Haryana	36.00
13	Himachal Pradesh	44.81
14	Jammu & Kashmir	60.44
15	Jharkhand	65.27
16	Karnataka	118.91
17	Kerala	24.58
18	Ladakh	0.62
19	Lakshadweep	0.00
20	Madhya Pradesh	63.19
21	Maharashtra	65.48
22	Manipur	5.74
23	Meghalaya	10.50
24	Mizoram	3.82
25	Nagaland	0.00
26	Odisha	149.05
27	Puducherry	2.50
28	Punjab	8.92
29	Rajasthan	157.76
30	Sikkim	1.67
31	Tamil Nadu	224.99
32	Telangana	208.82
33	Tripura	2.12
34	Uttar Pradesh	400.95
35	Uttarakhand	26.89
36	West Bengal	78.40

Note:

- 1. The above releases relate to Central Govt. Grants & do not include State share contribution.
- 2. The entire Central Share released to the States/UTs has been utilized by the respective States/UTs.

- (i) Establishment of New Medical Colleges attached with existing District/Referral hospitals
 - 'Establishment of new medical colleges attached with existing district/referral hospitals' with preference to underserved areas and aspirational districts, where there is no existing Government or private medical college. The fund sharing mechanism between the Centre and State Governments is in the ratio of 90:10 for North Eastern and Special Category States, and 60:40 for others. Under the scheme, all the envisaged 157 medical colleges have been approved.
- (ii) Up gradation of existing State Government/Central Government medical colleges to increase MBBS seats in the country and Strengthening and up gradation of State Government Medical colleges for starting new PG disciplines and increasing PG seats
 - Under CSS for 'Upgradation of existing State Government/Central Government medical colleges to increase MBBS seats in the country. The funding pattern is 90:10 by Central and State Governments respectively for North Eastern States and Special Category States and 60:40 for other States with the upper ceiling cost pegged at Rs.1.20 crore per seat.
 - Under Centrally Sponsored Scheme (CSS) for 'Strengthening and upgradation of State Government medical colleges for starting new PG disciplines and increasing PG seats', 8058 seats have been approved in 2 Phases. Target of the Scheme has been achieved.

Ministry of Health & Family Welfare, under these schemes, does not allocate funds State-wise, the funds are sanctioned after ensuring that the State has complied with the guidelines for release of funds under Centrally Sponsored Schemes released from time to time by the Department of Expenditure. These guidelines stipulates that the funds can only be released to the States after the fulfillment of the following conditions:

- Release of commensurate State Share of funds
- Expenditure of at least 75% of total corpus (Central and State Share released) and submission of relevant Utilization Certificates (UCs)
- The state must ensure that there is no deficit in the transfer of State Share and Central Share from treasury to SNA account.
- The balance in the SNA account must be less than 12.5% of the proposed release of Central Share.

Under the Centrally Sponsored Scheme (CSS) "Augmenting Nursing Education - Establishment of 157 Colleges of Nursing co-located with Medical Colleges

S.No.	State	Funds released (Rs. In crore)	Funds unutilized
1.	Rajasthan	77.00	0
2.	Uttar Pradesh	60.00	3.18
3	Ladakh	2.50	0
4	Uttarakhand	9.00	0
5	Andaman and Nicobar	2.50	0
Total		151	3.18

Under these Schemes, the funds are sanctioned after ensuring that the State has complied with the guidelines for release of funds under Centrally Sponsored Schemes released from time to time by the Department of Expenditure. These guidelines stipulates that the funds can only be released to the States after the fulfillment of the following conditions:

- A. Release of commensurate State Share of funds
- B. Expenditure of at least 75% of total corpus (Central and State Share released) and submission of relevant Utilization Certificates (UCs)
- C. The state must ensure that there is no deficit in the transfer of State Share and Central Share from treasury to SNA account.
- D. The balance in the SNA account must be less than 12.5% of the proposed release of Central Share.
- E. In addition to this, for further release of grants during 2024-25, State/UTs had to onboard on SNA SPARSH platform.

.Central Sector Scheme "Development of Nursing Services".

Under the Central Sector Scheme (CS) "Development of Nursing Services", funds to the tune of Rs.7.00 crore is released for Upgradation of each School of Nursing into College of Nursing and strengthening of nursing infrastructure and also a financial assistance of Rs. 2,28,500/- per course has been provided for a duration of 7 days for 30 participants (nurses) from State Government/State Nursing Council/Central Government Institutions/TNAI to update their knowledge and skills in the different nursing specialty

Upgradation School of Nursing into College Nursing

S.no	Name of State Fund released (Rs. in Funds		Funds unutilized
		crore)	
	Maharastra	9.6586	0
2	2 Arunachal Pradesh	6.7782	0
3	3 Mizoram	3.875	0
	Total	20.3118	0

Training of Nurses

S.No.	Name of State	No of	Fund released	Funds
		Courses	(Rs.in actuals)	unutilized
1	Manipur	10	22,85,000	0
2	Chandigarh	4	9,14,000	0
3	Punjab	3	6,85,500	0
4	Maharashtra	4	9,14,000	0
5	Andhra Pradesh	1	2,28,500	0
6	New Delhi	14	31,99,000	0
7	Karnataka	2	4,57,000	0
8	Mizoram	6	13,71,000	0
9	Puducherry	03	6,85,500	0
10	Chhattisgarh	02	4,57,000	0
11	Uttar Pradesh	03	6,85,500/-	О
	Total	49	1,18,82,000/-	0

Ayushman Bharat Pradhan Mantri Jan Arogya Yojana (AB PM-JAY)

Ayushman Bharat - Pradhan Mantri Jan Arogya Yojana (AB-PMJAY) is a flagship scheme of the Government which provides health cover of Rs. 5 lakh per eligible beneficiary family per year for secondary and tertiary care hospitalization in 27 different medical specialties corresponding to 1961

The funding of AB PM-JAY is entirely demand driven. NHA releases funds for scheme implementation to the State UTs on the basis of the actual demand received from States/UTs. There is no State / UT - wise allocation of funds. As per the process defined by NHA, States are required to furnish a Utilization Certificate of previously received funds prior to every new fund release. The details of Central share of funds released to the States/UTs in FY 2024-25 is as under

States/UTs	Central Share released (₹ in Cr.)
Andaman And Nicobar Islands	1.00
Andhra Pradesh	313.74
Arunachal Pradesh	7.40
Assam	290.93
Bihar	600.00
Chandigarh	8.44
Chhattisgarh	336.13
Dadra & Nagar Haveli and Daman & Diu	5.43
Goa	0.00
Gujarat	240.58
Haryana	118.69
Himachal Pradesh	49.71
Jammu and Kashmir	46.14
Jharkhand	340.84
Karnataka	486.19
Kerala	151.34
Ladakh	1.28
Lakshadweep	0.00
Madhya Pradesh	657.76
Maharashtra	379.18
Manipur	29.85
Meghalaya	36.52
Mizoram	20.51
Nagaland	24.15
Puducherry	9.26
Punjab	122.20
Rajasthan	418.95
Sikkim	4.36
Tamil Nadu	440.57
Telangana	218.29
Tripura	52.12
Uttar Pradesh	1026.06
Uttarakhand	56.67

Two Central Sector Schemes i.e. "Health Sector Disaster Preparedness & Response" and "Human Resources Development for Emergency Medical Services", do not involve allocation of any funds to States.

A third party evaluation of the two Schemes i.e. "Health Sector Disaster Preparedness & Response" and "Human Resources Development for Emergency Medical Services" was undertaken through National Institute of Health & FW (NIHFW) in FY 2019-2020.

Key findings of this report including redressal of administrative issues through coordinated efforts; State nodal/coordination officers; proficient health workforce in Public Health Emergency Management/Emergency Medical Services; Central Database, hands on training etc. were given due consideration at the time of formulation of the SFC proposals for these Schemes for the current plan period.
