

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

**RAJYA SABHA  
UNSTARRED QUESTION NO. 1881  
TO BE ANSWERED ON 16.12.2025**

**STRENGTHENING PRIMARY HEALTHCARE SERVICES IN STATES**

**1881: SHRI SANJAY RAUT:**

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

- (a) whether Government acknowledges that primary healthcare in many States continues to suffer from staff shortages, weak facilities and uneven access;
- (b) whether the Ministry plans to convert COVID-era oxygen plants, ICUs and modular hospitals into a permanent, functional critical-care system;
- (c) the steps taken to check rising medical costs, insurance disputes and overcharging by private hospitals and whether Government will bring uniform treatment tariffs;
- (d) whether the digital health push under Ayushman Bharat Digital Mission (ABDM) is addressing data quality, consent and interoperability; and
- (e) whether concrete programmes exist for NCD management, mental-health support and independent evaluation of major health schemes?

**ANSWER**

**THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND  
FAMILY WELFARE  
(SHRI PRATAPRAO JADHAV)**

(a) “Public Health & Hospitals” is a State subject, hence, the primary responsibility of strengthening primary healthcare system lies with the respective State/UT Governments. However, the Ministry of Health and Family Welfare provides technical and financial support to the States/UTs to strengthen the primary healthcare system including recruitment of health care professionals, improvement of healthcare facilities and their accessibility based on the proposals received in the form of Programme Implementation Plans (PIPs) under National Health Mission. Government of India provides approval for the proposal in the form of Record of Proceedings (RoPs) as per norms & available resources. The details are available in public domain at:

<https://nhm.gov.in/index4.php?lang=1&level=0&linkid=45&lid=58>

The details of healthcare facilities and health care professionals in all State/UTs in the country are available in public domain at the following URL:

[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)

(b) Government of India supported States/UTs by setting up and operationalizing 1225 sites (1287 Pressure Swing Adsorption (PSA) Plants) with financial support of Government of India with a mandate of at least 1 PSA plant in each district of the country.

The Emergency COVID Response Package (ECRP) was launched as a comprehensive initiative to support States/UTs in managing the challenges posed by the COVID-19 pandemic. The package enabled rapid procurement of medical equipment, enhanced availability of human resources, and facilitated improved surveillance and diagnostic capabilities to effectively tackle the pandemic and future health emergencies.

(c) National Free Drugs Service initiative and Free diagnostic Service has been rolled out to ensure availability of essential drugs and diagnostic facilities and reduce out of pocket expenditure of the patients visiting public health facilities. Besides, quality generic medicines are made available at affordable prices to all under Pradhan Mantri Bhartiya Janaushadhi Pariyojana (PMBJP) in collaboration with the State Governments. Affordable Medicines and Reliable Implants for Treatment (AMRIT) Pharmacy stores have been set up in some hospitals/institutions.

The National Pharmaceutical Pricing Authority (NPPA) fixes ceiling prices for medicines listed in Schedule-I of the Drugs (Prices Control) Order, 2013 (DPCO, 2013), and manufacturers must sell these drugs within the notified ceiling price (plus GST). NPPA also sets retail prices for new drugs, which the concerned manufacturers and marketers must adhere to.

As per National Health Accounts (NHA) Estimates, there is declining trend in out of pocket expenditure (OOPE) as percentage of Total Health Expenditure (THE). OOPE as percentage of THE has declined from 62.6% in 2014-15 to 39.4% in 2021-22.

(d) The Ayushman Bharat Digital Mission (ABDM) aims to develop the backbone necessary to support the integrated digital health infrastructure of the country. It will bridge the existing gap amongst different stakeholders of Healthcare ecosystem through digital highways. Under the ABDM, specific measures have been instituted to ensure data quality, patient consent, and interoperability in the digital health ecosystem.

(e) Launched in the year 2018, Ayushman Arogya Mandir (AAM), erstwhile Ayushman Bharat -Health and Wellness Centres program, is India's commitment for achieving promotive, preventive, curative, palliative and rehabilitative aspects of Universal Health Coverage. Besides expanding and strengthening the existing Reproductive and Child Health

(RMNCHA+N) services and Communicable Diseases services, the functional AAM provide services related to Non-Communicable Diseases (NCDs) (screening and management for NCDs such as Hypertension, Diabetes and 3 common cancers of Oral, Breast and Cervix) and incrementally adding other primary healthcare services for mental health, ENT, Ophthalmic, oral health, geriatric and palliative health care and trauma care etc.

The Department of Health and Family Welfare, Government of India, provides technical and financial support to the States and Union Territories under the National Programme for Prevention and Control of Non Communicable Diseases (NP-NCD) as part of National Health Mission (NHM).

Healthy Eating is promoted through “Eat Right India movement” of Food Safety and Standards Authority of India (FSSAI). “Fit India movement” is implemented by Ministry of Youth Affairs and Sports. Various Yoga related activities are carried out by Ministry of AYUSH.

Mental health is an integral component of overall health and well-being. The Government is implementing the National Mental Health Programme (NMHP) to improve access to quality mental health care across the country. Under this, the District Mental Health Programme (DMHP) is implemented in districts to provide community-based mental health services, early identification, treatment, and referral. In addition, Tele-MANAS has been launched as a 24×7 toll-free tele-mental health service to provide counselling, care, and support through trained professionals, ensuring wider and timely access to mental health services.

NITI Aayog, through its Development Monitoring and Evaluation Office (DMEO), undertakes independent evaluations of Centrally Sponsored Schemes (CSS) including major health sector schemes to assess their relevance, effectiveness, efficiency, and impact. These evaluations provide evidence-based feedback and recommendations to support informed policy decisions, improve programme design, and enhance implementation outcomes.

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