

**GOVERNMENT OF INDIA  
MINISTRY OF AYURVEDA, YOGA & NATUROPATHY,  
UNANI, SIDDHA AND HOMOEOPATHY  
(AYUSH)**

**LOK SABHA  
UNSTARRED QUESTION NO. 5574  
TO BE ANSWERED ON 7<sup>TH</sup> APRIL, 2017**

**INCENTIVE TO DOCTORS**

**5574. SHRIMATI SANTOSH AHLAWAT:**

Will the Minister of **AYURVEDA, YOGA AND NATUROPATHY, UNANI, SIDDHA AND HOMOEOPATHY (AYUSH)** be pleased to state:

- (a) whether the Government proposes to incentivize doctors to serve in the rural or remote areas;
- (b) if so, the details thereof;
- (c) whether the Government is planning to involve AYUSH practitioners to make primary health services available in rural or remote areas; and
- (d) if so, the details thereof?

**ANSWER**

**THE MINISTER OF STATE (IC) OF THE MINISTRY OF AYURVEDA,  
YOGA & NATUROPATHY, UNANI, SIDDHA AND HOMOEOPATHY  
(SHRI SHRIPAD YESSO NAIK)**

(a) & (b): Public health and hospitals being a State subject, the primary responsibility to ensure availability of healthcare facilities and health human resources lies with the State Governments. However, under the National Health Mission (NHM), financial and technical support is provided to States/UTs to strengthen their healthcare systems including support for insourcing or engagement of doctors on contractual basis, based on the requirements posed by the States/UTs in their Programme Implementation Plans (PIPs) within their overall resource envelope.

Support is also provided to States/UTs for hard area allowance to doctors for serving in rural and remote areas and for their residential quarters so that they find it attractive to serve in public health facilities in such areas. Performance based incentives are also provided under the NHM.

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Further, in order to encourage doctors to work in remote and difficult areas, the Medical Council of India, with the previous approval of Central Government, has amended the Post Graduate Medical Education Regulations, 2000 to provide:

- (i) 50% reservation in Post Graduate Diploma Courses for Medical Officers in the Government service, who have served for at least three years in remote and difficult areas; and
- (ii) Incentive at the rate of 10% of the marks obtained for each year in service in remote or difficult areas as upto the maximum of 30% of the marks obtained in the entrance test for admissions in Post Graduate Medical Courses.

(c) & (d): Public health and hospitals is State subject. However, under the NHM, financial and technical support is provided to States/UTs for strengthening their healthcare systems, including for mainstreaming of AYUSH, based on the requirements posed by the States/UTs in their Programme Implementation Plans (PIPs). The principle of 'Mainstreaming of AYUSH' was adopted to enhance choice of services for beneficiaries of public health facilities and also to revitalize local health care traditions. Accordingly, NHM Implementation Framework envisages co-location of AYUSH services in public health facilities. Further, under NHM, support is being provided to upgrade Sub-Health Centres into Health and Wellness Centres managed by a mid-level provider, who may be an Ayurveda doctor who has received training in public health and primary care.

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