

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

**LOK SABHA  
UNSTARRED QUESTION NO. 2454  
TO BE ANSWERED ON 9<sup>TH</sup> MARCH, 2018**

**NATIONAL HEALTH POLICY**

**2454. SHRI A.T. NANA PATIL:  
SHRI SUNIL KUMAR SINGH:**

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

- (a) whether the Government has formulated a National Health Policy for providing better and affordable health facility for the poor and middle class people;
- (b) if so, the details thereof and the time by which the said scheme is likely to be launched and the blueprint prepared by the Government in this regard;
- (c) the provision of budget allocation made by the Government for the scheme, State/UT-wise including Jharkhand; and
- (d) the details of the benefits likely to be provided to different categories of people for treatment of various diseases under the said scheme and the details thereof including Jharkhand?

**ANSWER**

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

- (a): The Government has formulated and brought out National Health Policy, 2017, which aims at attainment of the highest possible level of good health and well-being, through a preventive and promotive health care orientation in all developmental policies, and universal access to good quality health care services without anyone having to face financial hardship as a consequence. The National Health Policy, 2017 is available at <http://mohfw.nic.in/sites/default/files/9147562941489753121.Pdf>
- (b): The National Health Policy, 2017 states following targets for reduction in incidence and prevalence of certain disease conditions:
  - HIV/AIDS: Achieve global target of 2020 (also termed as target of 90:90:90)
  - Eliminate Leprosy by 2018, Kala-Azar by 2017 and Lymphatic Filariasis in endemic pockets by 2017
  - Eliminate Tuberculosis by 2025: Achieving and maintaining a cure rate of >85% in new sputum positive patients and reduce incidence of new cases.
  - Reduce prevalence of blindness to 0.25/ 1000 by 2025 and disease burden by one third from current levels.
  - Reduce premature mortality from cardiovascular diseases, cancer, diabetes and chronic respiratory diseases by 25% by 2025.
- (C) & (d): “Public Health and Hospitals” being a State subject, the primary responsibility for providing affordable health services lies with respective State/UT Governments. Technical and financial support under the National Health Mission (NHM) is being provided to States/UTs for strengthening their health system for provision of universally accessible affordable and quality healthcare. A statement showing State/UT wise expenditure including Jharkhand under National Health Mission during 2016-17 is annexed.

## State-wise Expenditure under NHM 2016-17]

S/No.	States	2016-17 [Rs. in crore]
1	Andaman & Nicobar Islands	28.83
2	Andhra Pradesh	1,247.63
3	Arunachal Pradesh	165.16
4	Assam	1,331.77
5	Bihar	1,536.72
6	Chandigarh	20.36
7	Chhattisgarh	987.4
8	Dadra & Nagar Haveli	17.22
9	Daman & Diu	9.97
10	Delhi	147.56
11	Goa	40.52
12	Gujarat	1,376.91
13	Haryana	510
14	Himachal Pradesh	343.39
15	Jammu & Kashmir	414.43
16	Jharkhand	570.6
17	Karnataka	1268.33
18	Kerala	737.69
19	Lakshadweep	4.32
20	Madhya Pradesh	1,956.84
21	Maharashtra	1,773.47
22	Manipur	78.99
23	Meghalaya	145.68
24	Mizoram	90.45
25	Nagaland	134.55
26	Orissa	1,255.88
27	Pudducherry	32.56
28	Punjab	687.75
29	Rajasthan	1856.77
30	Sikkim	50.57
31	Tamil Nadu	1,816.97
32	Telangana	687.15
33	Tripura	141.27
34	Uttar Pradesh	4,901.10
35	Uttarakhand	346.01
36	West Bengal	1,743.92
	Total	28,458.73

Note: NHM: Expenditure includes expenditure against Central release, State release and unspent balances at the beginning of the year.