

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

**LOK SABHA
UNSTARRED QUESTION NO. 3543
TO BE ANSWERED ON 21.03.2025**

EXPANSION OF HEALTH INFRASTRUCTURE IN RURAL AREAS

†3543. SHRI PUSHPENDRA SAROJ:

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

- (a) whether it is true that though the budget allocation has increased by 13% as compared to the previous year, there is still shortage of doctors, nurses and hospitals in the country especially in the rural areas;
- (b) if so, the details thereof, State-wise; and
- (c) the specific measures taken/proposed to be taken by the Government to expand healthcare infrastructure and ensure equitable access to medical facilities across all the States in the country?

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

(a) & (b) : The details of doctors and nurses and hospitals in the country especially in rural area, States/UTs wise are available at website of Ministry of Health and Family Welfare at the Uniform Resources Locator (URL) as under:

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): The Ministry of Health and Family Welfare provides technical and financial support to the States/UTs to strengthen the public healthcare system including setting up of health facilities and recruitment of medical personnel 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.

Further, Government of India has launched several schemes to address healthcare infrastructure in all the States/UTs in the country in addition to National Health Mission:

- **Pradhan Mantri Ayushman Bharat Health Infrastructure Mission (PM-ABHIM)** envisages increased investments in public health and other health reforms to provide better access to health in rural areas by i) Strengthening of Health and Wellness Centres in villages and cities for early detection of diseases; ii) Addition of new critical care-related beds at district level hospitals; iii) Support for Block Public Health Units (BPHU) in 11 high focus States; and iv) Integrated district public health laboratories in all districts.
- **The Fifteenth Finance Commission (FC-XV)** has recommended grants through local governments for specific components of the health sector and spread over the five-year period from FY 2021-22 to FY 2025-26 to facilitate strengthening of health system at the grass-root level.
- **The Pradhan Mantri Swasthya Suraksha Yojana (PMSSY)** aims at correcting regional imbalances in the availability of affordable tertiary healthcare services and to augment facilities for quality medical education in the country. The Scheme has two components, namely, (i) setting up of all India Institute of Medical Sciences (AIIMS); and (ii) Upgradation of existing Government Medical Collages/ Institution (GMCIs).
- Under Centrally Sponsored Scheme (CSS), **‘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 NHM, following types of incentives and honorarium are provided for encouraging doctors and paramedics to practice in rural and remote areas to ensure equitable access to medical facilities across all the States/UTs in the country:

- Hard area allowance to specialist 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.
- Honorarium to Gynecologists/ Emergency Obstetric Care (EmOC) trained, Pediatricians & Anesthetist/ Life Saving Anaesthesia Skills (LSAS) trained doctors is also provided to increase availability of specialists for conducting Cesarean Sections in rural & remote area.
- Incentives like special incentives for doctors, incentive for Auxiliary Nurse and Midwife (ANM) for ensuring timely Antenatal Checkup (ANC) checkup and recording, incentives for conducting Adolescent Reproductive and Sexual Health activities.
- States are also allowed to offer negotiable salary to attract specialist including flexibility in strategies such as “You Quote We Pay”.

- Non-Monetary incentives such as preferential admission in post graduate courses for staff serving in difficult areas and improving accommodation arrangement in rural areas have also been introduced under NHM.
- Multi-skilling of doctors is supported under NHM to overcome the shortage of specialists. Skill upgradation of existing HR is another major strategy under NRHM for achieving improvement in health outcomes.
