

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

**LOK SABHA  
STARRED QUESTION NO. 100  
TO BE ANSWERED ON THE 5<sup>TH</sup> DECEMBER, 2025**

**MODERNISATION OF HOSPITALS IN UTTARAKHAND**

**\*100. SHRI AJAY BHATT:**

Will the **MINISTER OF HEALTH AND FAMILY WELFARE** be pleased to state:

- (a) whether the Government is aware that the condition of Government hospitals in the State of Uttarakhand is very pathetic;
- (b) if so, the details thereof;
- (c) whether the Government proposes to modernise Government hospitals, including those in rural areas by providing them with modern diagnostic machines, increasing the number of doctors and staff in these hospitals across the country;
- (d) if so, the details thereof, State/UT-wise including Uttarakhand and if not, the reasons therefor; and
- (e) whether any such proposal which ensures that doctors mandatorily provide services in rural areas is pending with the Government, if so, the details thereof?

**ANSWER  
THE MINISTER OF HEALTH AND FAMILY WELFARE  
(SHRI JAGAT PRAKASH NADDA)**

(a) to (e) A Statement is laid on the Table of the House.

**STATEMENT REFERRED TO IN REPLY TO LOK SABHA  
STARRED QUESTION NO.100 FOR 5<sup>TH</sup> DECEMBER, 2025**

(a) & (b) Public Health is a State subject, hence, the primary responsibility of providing basic health services to all the citizens of the country lies with respective State/UT Government. However, this Ministry provides technical and financial support to the States/UTs to strengthen the public healthcare system.

Regarding the condition of hospitals in Uttarakhand, the State Government has informed that medical facilities are provided in all Government Hospitals as per Indian Public Health Standards (IPHS) 2022, which aim to improve the quality of services. For detailed information on the status of healthcare infrastructure and manpower in Uttarakhand, district-wise data is available in the annual publication "Health Dynamics of India (Infrastructure & Human Resources) 2022-23".

[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)

(c) & (d) NHM supports upgradation of health infrastructure through operationalisation of a total of 1,80,906 Ayushman Arogya Mandir (AAM), including 2,355 in Uttarakhand, by upgrading existing Sub-Health Centres (SHCs) and Primary Health Centres (PHCs). AAMs are equipped with the required resources including upgraded infrastructure, additional human resource, essential drugs & diagnostics, IT systems, etc. to provide twelve packages of primary health care services.

Under Free Diagnostics Service Initiative, Government of India provides financial support to States/UTs for 14 tests at SHCs, 63 tests at PHCs, 97 tests at Community Health Centres (CHCs), 111 tests at Sub-District Hospitals (SDHs) and 134 tests at District Hospitals (DHs).

In Uttarakhand, under the Pradhan Mantri Ayushman Bharat Health Infrastructure Mission (PM-ABHIM), Rs. 215.79 crore has been approved for the period FY 2021-22 to FY 2025-26 to support infrastructure development, including 5 Critical Care Hospital Blocks and 13 Integrated District Public Health Laboratories. Additionally, the XV-Finance Commission has recommended grants of Rs. 797.09 crore over five years (2021-2026) to strengthen the healthcare system through Local Governments. Under the Emergency Covid Response & Health System Preparedness Package-II (ECRP-II), Rs. 433.35 crore was allocated to the State in FY 2021-22 for infrastructure support.

(e) Various initiatives in the form of incentives and honorarium to the medical professionals have been taken for encouraging better service delivery in rural and remote areas across the country. The Family Adoption Programme (FAP) has been incorporated into the MBBS curriculum to provide equitable healthcare access to rural population. Under District Residency Program of National Medical Commission (NMC), second/third year PG students of medical colleges are posted in district hospitals. Hard Area Allowance is given to specialist doctors for serving in rural and remote areas. States also offer negotiable salary to attract specialist including flexibility in strategies such as “You Quote We Pay” and Non-monetary incentives such as preferential admission in postgraduate courses for staff serving in difficult areas.

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