

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

**LOK SABHA  
UNSTARRED QUESTION NO. 3600  
TO BE ANSWERED ON 13<sup>th</sup> MARCH, 2026**

**ADEQUACY OF HEALTHCARE SERVICES IN URBAN, RURAL AND SEMI-  
URBAN AREAS**

**†3600. SHRI ANIL YESHWANT DESAI:**

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

- (a) whether special attention is being given by the Government to healthcare services in urban, rural and semi-urban areas of the country;
- (b) if so, the details thereof and the manner in which the same is being implemented;
- (c) whether the Government has assessed the adequacy of Community Health Centres (CHCs) in rural and semi-urban areas of Maharashtra;
- (d) if so, the details thereof and the steps taken by the Government to upgrade the existing Community Health Centres (CHCs);
- (e) the details of the availability of medical infrastructure, including operation theatres, diagnostic facilities and in-patient wards in CHCs in the said State;
- (f) whether the Government has taken any steps to address the shortage of medical personnel in CHCs; and
- (g) if so, the details thereof and the measures being taken or proposed to be taken by the Government for recruitment and deployment?

**ANSWER**

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

(a) to (g): 'Public Health' & 'Hospitals' are State subjects, hence, the primary responsibility of providing basic healthcare services to all the citizens of the country lies with respective State/UT Government.

The National Health Mission (NHM) provides support for improvement in health infrastructure, availability of adequate human resources in health facilities, to improve availability, affordability and accessibility to quality healthcare services especially in urban, rural and semi-urban areas of the country including Maharashtra. The Ministry of Health and Family Welfare (MoHFW) provides technical and financial support to the States/UTs to strengthen the public healthcare system, based on the proposals received in the form of Programme Implementation Plans (PIPs) under NHM. Government of India provides approval for the proposals in the form of Record of Proceedings (RoPs) as per norms &

available resources.

Various initiatives carried out under NHM by the Government of India in the country including Maharashtra are operationalisation of Ayushman Arogya Mandir (AAM), Free Drugs Service Initiative, Free Diagnostic Service Initiative (FDSI), National Ambulance Services, Mobile Medical Units, ASHAs, 24 x 7 Services and First Referral Facilities, Prime Minister's National Dialysis Programme, various activities under Reproductive & Child Health, Anaemia Mukta Bharat (AMB) strategy, TB Mukta Bharat Abhiyaan and Universal Immunization programme.

As per established norms, in rural areas, a Community Health Centre (CHC) for a population of 1,20,000 (in plain) and 80,000 (in hilly and tribal area) is suggested. Further, for urban areas, One Urban-Community Health Centre (U-CHC) for every 2.5 lakh population in non-metro cities (above 5 lakh population) and one U-CHC for every 5 lakh population in the metro cities.

Health Dynamics of India (HDI) (Infrastructure & Human Resources), is an annual publication, based on healthcare administrative data reported by States/UTs. Details of availability of CHCs, healthcare infrastructure and human resource in the country including Maharashtra, may be seen at the following link of HDI 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)

The Indian Public Health Standards (IPHS) have been developed by MoHFW for primary and secondary healthcare facilities including CHCs which provides a set of uniform standards, including norms for services, infrastructure, human resources, diagnostics, equipment, medicines etc, envisaged to improve the quality of health care delivery in the country. Further, MoHFW has issued operational guidelines for upgrading all CHCs to First Referral Units (FRUs) to include expanded services under the primary care essential service package and to strengthen service availability and ensure referral linkages at the secondary level.

The Pradhan Mantri Ayushman Bharat Health Infrastructure Mission (PM-ABHIM) with an outlay of Rs.64,180 crore aims to provide support for infrastructure development for Sub-Health Centres, Urban Health and Wellness Centres, Support for Block Public Health Units (BPHUs), Integrated District Public Health Laboratories (IPHL) and Critical Care Hospital Blocks (CCBs). The Fifteenth Finance Commission (FC-XV) has recommended grants through local governments for specific components of the health sector to the tune of Rs.70,051 crore including Maharashtra.

Under FDSI, Government of India provides financial support to States/UTs including Maharashtra for providing accessible and affordable pathological and radiological diagnostics services closer to the community, free of cost at all levels of public health facilities [14 tests at Sub Health Centre (SHC)-AAMs, 63 at Primary Health Centre (PHC)-AAMs, 97 at CHCs, 111 test at Sub-Divisional Hospitals (SDHs) and 134 tests at District Hospitals (DHs)].

The Government of India has taken number of initiatives in the form of incentives and honorarium to the medical professionals for encouraging better service delivery in rural and remote areas across the country, which include:

- i. Hard Area Allowance to specialist doctors for serving in rural and remote areas so that they find it attractive to serve in public health facilities in such areas.
- ii. States are also allowed to offer negotiable salary to attract specialist including flexibility in strategies such as “You Quote We Pay”.
- iii. Non-monetary incentives such as preferential admission in postgraduate courses for staff serving in difficult areas and improving accommodation arrangement in rural areas have also been introduced under NHM.
- iv. Multi-skilling of doctors is supported under NHM to overcome the shortage of specialists such as Comprehensive Emergency Obstetric and Newborn Care (CEmONC) and Life Saving Anaesthesia Skills (LSAS).

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