

**GOVERNMENT OF INDIA
MINISTRY OF AYUSH**

**LOK SABHA
UNSTARRED QUESTION NO. 1041
TO BE ANSWERED ON 24.07.2026**

Universal Access to AYUSH Healthcare

1041. Prof. Sougata Ray:

Shri Kishori Lal:

Will the Minister of AYUSH be pleased to state:

- (a) whether the Government has formulated any national policy or roadmap to ensure affordable and universal access to AYUSH healthcare services for all citizens in the country if so, the details thereof;
- (b) whether the Government proposes to integrate AYUSH services with Primary Health Centers (PHCs), Community Health Centers (CHSs) and District Hospitals across the country;
- (c) if so, the details along with the timeline thereof;
- (d) whether the Government provides financial assistance to States and Union Territories for strengthening AYUSH infrastructure and services, if so, the details of funds released and utilised during the last three years, State/UT-wise; and
- (e) whether the Government has established quality standards and regulatory mechanisms to ensure the safety, efficacy and standardisation of AYUSH medicines and therapies available to the public, if so, the details thereof?

**ANSWER
THE MINISTER OF STATE (IC) OF THE MINISTRY OF AYUSH
(SHRI PRATAPRAO JADHAV)**

(a) Through Centrally Sponsored Scheme of National Ayush Mission (NAM), Government has ensured affordable and universal access to Ayush healthcare services for all citizens in the country. Ministry of Ayush is implementing the scheme through State/UT Governments for overall development & promotion of Ayush Systems in the country. The financial assistance is being provided to the States/UTs for implementation of the various activities against the State Annual Action Plans (SAAPs) submitted by them, as per NAM guideline. The NAM inter-alia makes provision for the following activities:

- (i) Operationalization of Ayush Health & Wellness Centres (AHWCs) now renamed as Ayushman Arogya Mandir (Ayush).
- (ii) Co-location of Ayush facilities at Primary Health Centres (PHCs), Community Health Centres (CHCs) and District Hospitals (DHs)
- (iii) Upgradation of existing standalone Government Ayush Hospitals
- (iv) Upgradation of existing Government/Panchayat/Government aided Ayush Dispensaries/
Construction of building for existing Ayush Dispensary (Rented/dilapidated accommodation)
/Construction of building to establish new Ayush Dispensary
- (v) Setting up of 10/30/50 bedded integrated Ayush Hospitals
- (vi) Supply of essential drugs to Government Ayush Hospitals, Government Dispensaries and Government/Government aided Teaching Institutional Ayush Hospitals
- (vii) Ayush Public Health Programs
- (viii) Ayush Gram
- (ix) Behavior Change Communication (BCC)
- (x) Establishment of new Ayush colleges in the States where availability of AYUSH teaching institutions is inadequate in Government Sector.
- (xi) Infrastructural development of Ayush Under-Graduate Institutions and Ayush Post-Graduate Institutions/add on PG/ Pharmacy/Para-Medical Courses.

(b) & (c) Under Centrally Sponsored Scheme of National Ayush Mission (NAM), Government is already integrating Ayush services with Primary Health Centers (PHCs), Community Health Centers (CHCs) and District Hospitals (DHs) across the country. Government of India has adopted a strategy of Co-location of Ayush facilities at PHCs, CHCs and DHs, thus enabling the choice to the patients for different systems of medicines under a single window. The engagement of Ayush doctors/ paramedics and their training is being supported by the Ministry of Health & Family Welfare under National Health Mission (NHM), while the support for Ayush infrastructure, equipment/ furniture and medicines is being provided by the Ministry of Ayush under National Ayush Mission (NAM), as shared responsibilities. Further, 6302 PHCs, 3191 CHCs & 475 DHs have been co-located with Ayush facilities across the country as per the NHM-MIS database as on 31.12.2025.

(d) Under Centrally Sponsored Scheme of National Ayush Mission (NAM) financial assistance is provided to the State/UT Governments against the proposals submitted through State Annual Action Plans (SAAPs) for implementation of various activities proposed in the NAM guideline including strengthening of Ayush infrastructure and services. The State/UT-wise details of the funds released and utilised during the last three years are enclosed as **Annexure**.

(e) The following measures are being implemented to ensure quality standards and regulatory mechanisms for safety, efficacy and standardisation of Ayush medicines and therapies:

- i. Drugs & Cosmetics Act, 1940 and Drugs Rules, 1945 have exclusive regulatory provisions for Ayurvedic, Siddha, Sowa-Rigpa, Unani, and Homoeopathy (ASSU &H) drugs. It is mandatory for the manufacturers to adhere to the prescribed requirements for licensing of manufacturing units & medicines including proof of safety & effectiveness, compliance with the Good Manufacturing Practices (GMP) as per Schedule T & Schedule M-I of the Drugs Rules, 1945 for ASSU&H drugs respectively and also to follow the quality standards of drugs as prescribed in the respective pharmacopoeia. Drug Inspectors collect medicine samples regularly from manufacturing firms or sale shops within their jurisdiction and send them to Drug Testing Laboratory under Drug Control department for quality testing and if any sample is found to be 'Not of Standard Quality', appropriate action is initiated such as preventing the sale of the products from the market and appropriate legal actions as per Drugs and Cosmetics Act 1940 and Rules made thereunder.
- ii. Pharmacopoeia Commission for Indian Medicine & Homoeopathy (PCIM&H), sub-ordinate organization under Ministry of Ayush, lays down the formulary specifications and pharmacopoeia standards for ASSU&H drugs which serves as official compendia for ascertaining the quality (identity, purity and strength) of the ASSU&H drugs. As per the Drugs & Cosmetics Act, 1940 and rules there under, the compliance to this quality standards are mandatory for manufacturing of ASSU&H drugs.
- iii. PCIM&H also acts as the Appellate Drugs testing Laboratory for testing or analysis of ASSU&H Drugs. In addition, it conducts capacity-building trainings at regular intervals for the standardization, quality control, and testing or analysis of ASSU&H drugs for Drug Regulatory Authorities, Drug Analysts, and other relevant stakeholders, with a focus on laboratory techniques and methodologies essential for ensuring the quality of ASSU&H drugs.
- iv. Drug Testing Laboratories are being recognized under Rule 160 A to J of the Drugs Rules, 1945 for carrying out such tests of identity, purity, quality and strength of ASSU drugs. As on date, 118 private laboratories are approved or licensed under the provisions of Drugs Rules, 1945 for manufacturers. 34 Drug Testing Laboratories of State/UTs are testing quality of ASU drugs and raw materials for legal samples.
- v. Ministry of Ayush has implemented Central Sector Scheme Ayush Oushadhi Gunvatta Evam Utpadan Samvardhan Yojana (AOGUSY) to support Ayush Pharmacies and Drug Testing Laboratories to achieve higher standards under one of the components.
- vi. An Ayush vertical has been created in Central Drugs Standard Control Organization (CDSCO) to strengthen regulatory measures ensuring safety and quality of Ayush drugs. Further, CDSCO issues WHO Certificate of Pharmaceutical Product

(WHO-CoPP) to Ayush drugs having compliance to such standards. Drug Inspectors posted in Ayush vertical, conduct joint inspections of manufacturing units with State/UT licensing authorities to ensure the safety and quality of Ayush medicines.

vii. Further Ministry of Ayush encourages following certifications of Ayush products as per details below: -

- Quality Certifications Scheme implemented by the Quality Council of India (QCI) for grant of Ayush standard and premium mark to ASU products on the basis of third-party evaluation of quality in accordance with the status of compliance to domestic and international standards respectively.
- Ministry of Ayush is also implementing the Ayush Quality Mark (AQM) initiative through the Ayush Export Promotion Council (AYUSHEXCIL). Under this framework, the Ayush Quality Mark is being granted after scrutiny and verification of valid quality certifications and statutory approvals issued by the competent Government authorities, such as GMP, WHO-GMP, Ayush Premium Mark and other recognised certifications, as applicable. The initiative aims to strengthen quality assurance, enhance consumer confidence, and improve the credibility and global competitiveness of Indian Ayush products.

Annexure**The State/UT-wise details of the funds released and utilised during the last three years under National Ayush Mission (NAM):**

(Rs. In lakhs)

S. No.	Name of States/UTs	2023-24		2024-25		2025-26	
		Allocated/Release (Central Share)	Utilization/Expenditure (As per reported by State/UT)	Allocated/Release (Central Share)	Utilization/Expenditure (As per reported by State/UT)	Allocated/Release (Central Share)	Utilization/Expenditure (As per reported by State/UT)
1	Andaman & Nicobar Islands	407.29	407.29	542.75	525.43	237.35	236.82
2	Andhra Pradesh	0.00	0.00	2497.19	2497.19	2182.31	2182.11
3	Arunachal Pradesh	1186.04	1186.04	1498.84	1498.84	3374.07	3374.08
4	Assam	3471.45	3471.45	6511.87	6511.87	5710.66	5710.67
5	Bihar	1161.06	758.11	0.00	0.00	222.28	222.28
6	Chandigarh	226.32	224.75	447.58	420.90	284.75	89.57
7	Chhattisgarh	2151.43	1894.01	3194.06	2716.19	2321.06	2321.06
8	Dadra & Nagar Haveli and Daman & Diu	408.45	408.45	690.73	690.73	1181.89	1116.46
		0.00	0.00	0.00	0.00	0.000	0.00
9	Delhi	0.00	0.00	0.00	0.00	144.79	144.79
10	Goa	628.30	628.30	610.67	610.67	803.33	803.33
11	Gujarat	2961.42	2011.53	2623.10	1409.87	2643.61	2643.42
12	Haryana	3026.59	3026.59	1371.90	1371.90	1007.34	1007.34
13	Himachal Pradesh	3659.22	3659.22	2899.09	2899.09	3216.75	3216.75
14	Jammu & Kashmir	7510.36	7510.36	4361.60	4361.60	2666.12	2653.65
15	Jharkhand	2390.42	2390.42	3217.06	3217.06	1506.84	1506.85
16	Karnataka	5031.54	5031.54	6067.28	6067.28	2422.58	2422.58
17	Kerala	7989.40	7989.40	11037.96	11037.96	4847.69	4847.70
18	Ladakh	47.32	47.32	190.29	190.29	207.78	36.92
19	Lakshadweep	332.01	332.01	220.48	220.48	146.08	114.37
20	Madhya Pradesh	6120.00	6120.00	8169.59	8169.59	6702.25	6702.26
21	Maharashtra	2235.54	1959.92	2681.16	1210.94	2023.76	0.00
22	Manipur	0.00	0.00	1276.67	1276.67	237.94	237.94
23	Mizoram	1057.86	1057.86	1101.48	1101.48	1585.76	1585.76
24	Meghalaya	1722.60	1722.60	1520.48	1520.48	1457.04	1457.04
25	Nagaland	1016.97	1016.97	1342.11	1342.11	812.92	812.93
se	Odisha	0.00	0.00	2369.21	2369.21	862.30	862.30
27	Puducherry	197.08	179.21	683.40	325.71	174.08	174.09

28	Punjab	109.85	109.85	1701.10	1701.10	304.83	304.83
29	Rajasthan	3731.51	3724.81	15051.80	15003.67	9216.65	9216.65
	Sikkim	492.37	492.37	434.78	434.78	859.16	859.16
31	Tamil Nadu	6635.76	6635.76	7380.32	7380.32	2303.49	2303.49
32	Telangana	1225.17	1225.17	2491.38	2491.38	2575.45	2575.46
33	Tripura	566.99	566.99	815.77	815.77	413.78	413.50
34	Uttar Pradesh	12418.60	12418.60	13903.18	13893.18	2414.63	2414.64
35	Uttarakhand	3234.38	3234.38	2441.12	2441.12	5409.49	5409.25
36	West Bengal	3379.39	3339.22	2308.43	1374.88	1135.40	1135.35
	Total	86732.66	84780.49	113654.42	109099.72	73616.37	71115.41