

**MINISTRY OF HEALTH
AND
FAMILY WELFARE**

RECORD OF PROCEEDING - FY 2026-27

State: GOA



NATIONAL HEALTH MISSION



PREFACE

भारत सरकार
स्वास्थ्य एवं परिवार कल्याण विभाग
स्वास्थ्य एवं परिवार कल्याण मंत्रालय
Government of India
Department of Health and Family Welfare
Ministry of Health and Family Welfare

आराधना पटनायक, भा.प्र.से.
अपर सचिव एवं मिशन निदेशक (रा.स्वा.मि.)
Aradhana Patnaik, IAS
Additional Secretary & Mission Director (NHM)

The Record of Proceedings (ROP) document provides the budgetary approvals under the National Health Mission (NHM), guiding the states in implementing Program Implementation Plans (PIP) for the fiscal year 2026-27. A significant reform introduced in this cycle is the shift to a One-Year PIP Cycle, designed to strengthen responsiveness, ensure better alignment with annual budget cycles, and enable rapid course correction based on evolving health priorities. This year will be critical towards the achievement of the National Health Policy targets, Sustainable Development Goals (SDGs), and India's disease elimination targets, including TB elimination, elimination of Kala-azar, Lymphatic Filariasis, Measles-Rubella, and the reduction of maternal and child mortality indicators in alignment with global commitments.

To achieve the Sustainable Development Goals (SDGs) targets for Maternal Mortality Ratio (MMR) and Under-5 Mortality Rate by 2030, a focused and accelerated approach is required in the 13 High-Focus States, which disproportionately contribute to maternal and child mortality. Specific targeted measures need to be undertaken to strengthen maternal and child health outcomes in these states. Newly proposed strategic interventions—such as pre-pregnancy care, special packages for pregnant women, awards to Panchayats, digitalized and AI-enabled labour rooms, and biweekly home visits by ASHAs during the 8th and 9th months of pregnancy need to be prioritized to accelerate progress toward improved maternal and child health indicators and achievement of the SDG targets.

States/UTs should identify high-burden districts and geographical areas and strengthen newborn and child health services through targeted interventions based on local needs. Priority should be given to the identification, digital tracking and follow-up of newborns, children and at-risk newborns and children through JANANI, strengthening Newborn Stabilization Units (NBSUs) and their linkages with nearby Special Newborn Care Units (SNCUs)/Neonatal Intensive Care Units (NICUs), and enhancing screening of children aged 6–18 years under RBSK. States/UTs should also implement newer interventions such as establishing Mother-Newborn Care Units (MNCUs) to ensure zero separation of mother and newborn at high case-load facilities, and operationalizing the revised guidelines on Diabetes Mellitus in Children under RBSK. These focused efforts will strengthen child survival and development outcomes and accelerate progress towards achieving the SDG targets.

We have introduced the HPV Vaccine for 14 year old girls. States must undertake rigorous micro-planning and ASHA training to ensure successful rollout. The strengthening of digital maternal health platforms such as the Janani Portal should also be prioritized for real-time tracking of beneficiaries, high-risk pregnancies, and service delivery outcomes.

#StopObesity

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टीबी हारेगा देश जीतेगा / TB Harega Desh Jeetega

States should also prioritize implementation of RBSK 2.0 and AMB 2.0 for comprehensive screening, early identification, and continuum of care for children, adolescents, and beneficiaries at the community level through strengthened outreach and digital enablement.

India has set ambitious disease elimination targets as part of its commitment to achieving Universal Health Coverage and the Sustainable Development Goals. Among communicable diseases, Tuberculosis is a priority disease targeted for elimination. TB incidence needs to be reduced to 47/lakh population and TB mortality needs to be reduced to less than 3/lakh population. To accelerate the reduction, TB Mukht Bharat Abhiyan is being implemented since 7th December 2024. The key strategies include screening by X-ray for early detection of TB cases among vulnerable population including asymptomatic with focus on screening in 1.58 lakh high risk villages / wards & congregate settings, upfront NAAT tests for all presumptive TB cases, ensure timely treatment initiation & completion, differentiated TB care for managing high-risk TB cases, nutrition support (NPY, Ni-kshay Mitra initiative & EDNS) and preventive treatment for household contacts & eligible vulnerable population. Alongside the intensified efforts towards TB elimination, the National Leprosy Eradication Programme (NLEP) aims to achieve interruption of leprosy transmission by 2027. States and Union Territories need to intensify case detection activities and implement focused, targeted interventions to reduce the prevalence rate to less than 1 per 10,000 population in all states and districts. Special emphasis should be placed on achieving zero child leprosy and zero Grade-II disability among newly detected cases.

Beyond TB and Leprosy, India is also pursuing time-bound elimination targets for several vector-borne diseases. Malaria, a disease targeted for elimination under the SDGs by 2030, has shown remarkable decline in India over the past decade. To sustain gains and accelerate elimination, emphasis must remain on early diagnosis and complete treatment, timely outbreak detection and containment, village-level stratification and integrated vector management (LLIN, IRS etc.), while keeping vigilance high to prevent re-establishment of transmission. India achieved elimination of Kala-azar as a public health problem across all 633 endemic blocks in 54 districts of four states in 2023, ahead of the 2030 SDG target, and has sustained this achievement to date. Continued targeted interventions in high-burden blocks, early diagnosis, treatment of Visceral Leishmaniasis (Kala-azar) and Post-Kala azar Dermal Leishmaniasis (PKDL) cases and IRS are needed to achieve the goal of achieving zero Kala-azar cases. Lymphatic Filariasis is another disease targeted for elimination, aiming for <1 Mf rate in all endemic districts prior to the SDG target of 2030. The strategies needed are unified nationwide MDA in all endemic states, targeting >90% consumption through directly observed consumption; high-level advocacy with intersectoral convergence; early diagnosis and treatment of all Mf-positive cases; zero backlog of hydrocele cases and 100% provision of MMDP kits to lymphoedema patients and integrated vector control.

While sustained efforts to eliminate communicable diseases remain a public health priority, States/UTs must simultaneously strengthen prevention, early detection, and management of Non-Communicable Diseases (NCDs). States must adopt a hub-and-spoke model for acute conditions like STEMI and prioritize the early screening and management of COPD, asthma, chronic kidney disease, stroke, and NAFLD. Expanding dialysis coverage, particularly peritoneal dialysis in difficult terrains, remains essential. A major new initiative is the operationalization of Day Care Cancer Centres (DCCCs) in district hospitals, providing locally accessible chemotherapy and care to reduce patients' reliance on tertiary facilities. Simultaneously, the National Mental Health Programme must be strengthened by building the capacity of PHC/CHC officers. Tele-MANAS has also achieved remarkable success, handling over calls via cells across all States/UTs

and launching video consultations. Further focus should be on expansion of Tele-MANAS services with multilingual support.

Due to growing urban population, urban health requires focused attention. States should operationalize Polyclinics and Urban Community Health Centres (UCHCs) with flexible timings, such as evening and Sunday OPDs, to cater to the working population. This momentum must be sustained alongside infrastructure strengthening under the 15th Finance Commission Grants and PM-ABHIM, which support Critical Care Blocks and Integrated Public Health Labs. Quality assurance mechanisms through National Quality Assurance Standards (NQAS) and adherence to Indian Public Health Standards (IPHS) should be institutionalized across all public health facilities to ensure equitable, safe, and patient-centric healthcare services.

Human Resources for Health (HRH) continue to be the backbone of the public health system. States/ UTs should prioritize both the creation of posts and filling of vacancies under the regular cadre, as per IPHS norms, while leveraging NHM support to address critical gaps. Rational deployment of HRH based on IPHS and workload should be ensured to improve service availability, especially in the high-priority districts/ blocks and underserved areas. States/ UTs should also undertake rationalization and restructuring of Programme Management Units (PMUs) to enhance efficiency and support integrated programme implementation. To further support our workforce, we are introducing an Integrated Training Approach for ASHAs, MPWs, Staff Nurses, and MOs, utilizing the SASHAKT platform and engaging Medical/Nursing colleges as Regional Training Institutes (RTIs). This integrated training framework should focus on standardized capacity building, skill upgradation, and supportive supervision to improve the quality-of-service delivery across all levels of care.

The National Health Mission continues to evolve as a platform for resilience and innovation, and the Swasth Bharat Portal exemplifies this transformation. To establish a unified digital architecture, a National Aggregator Platform (Swasth Bharat Portal) has been developed that converges multiple national health programmes like NCD, Ni-kshay, U-WIN, Sickle Cell portals, etc. It provides a single window for healthcare workers, reduces redundant data entry, enhances operational efficiency, and strengthens data reliability at the point of care. Aligned with the principles of the Ayushman Bharat Digital Mission, it ensures interoperability, scalability, and secure data exchange. It represents a paradigm shift toward data-driven governance, empowering States/UTs to harness real-time insights for evidence-based planning, accountability, and citizen-centric health delivery. States should also ensure effective utilization of the Drug and Vaccine Distribution Management System (DVDMS) for transparent procurement, inventory management, and uninterrupted availability of drugs, diagnostics, and vaccines across facilities. The implementation of DVDMS is being expanded up to the Sub Health Centre (SHC) level to strengthen last-mile supply chain management and ensure real-time visibility of stocks across all tiers of healthcare facilities. The platform is envisioned to enable efficient forecasting, demand estimation, and timely replenishment of essential commodities to minimize stock-outs and wastage. States should also prioritize onboarding and operationalization of the Diagnostic Module under DVDMS for streamlined inventory management, utilization tracking, and uninterrupted availability of diagnostics and laboratory consumables across health facilities.

With the spirit of 'Leaving no one behind', we are striving to achieve Universal Health Coverage through Ayushman Arogya Mandirs (AAMs). It is imperative that all AAMs implement the 12 expanded packages of services, moving beyond curative services to invigorate communities with

the concept of well-being. States should also organize Ayushman Arogya Shivirs at regular intervals to promote comprehensive health screening, early disease detection, awareness generation, and community mobilization, particularly among vulnerable and underserved populations. These Shivirs should serve as a platform for integrated service delivery, ensuring continuum of care and enhanced community engagement at the grassroots level. The revised IEC Guidelines should be effectively operationalized to promote evidence-based communication strategies, community awareness, and behavioural change interventions across programmes. Further, implementation of revised VHSNC and VHND Guidelines should be ensured to strengthen community participation, improve outreach services, and enhance convergence at the village level. Additionally, the Community Based Assessment Checklist (CBAC) Form has been revised focusing on a comprehensive, lifecycle-based community health assessment approach to strengthen the effectiveness of community-based screening and referral services. The PM-JANMAN initiative for PVTGs continues to receive focus, with 750 Mobile Medical Units (MMUs) already operationalized to serve remote tribal habitations.

We hope that the revised PIP budget format, which consolidates components into thematic rows, and the rationalization of Key Deliverables from 186 to 65 will provide sufficient flexibility. States should also undertake rationalization of human resources and implementation of the revised Community Health Officer (CHO) framework to optimize deployment, strengthen service delivery at Ayushman Arogya Mandirs, and address gaps in healthcare accessibility.

While implementing the plans, States should proceed with a clear-sighted vision towards the key deliverables. Under the SNA SPARSH initiative, funds will not be carried forward as the Mother Sanction lapses at the financial year-end. Stringent review of processes and immediate outputs should be done to ensure favourable outcomes.

As we navigate the path ahead, we recognize that while the Ministry provides the policy framework, it is the States that hold the true insight into their specific socio-cultural and epidemiological landscapes. We encourage you to exercise your discretion to adopt and adapt these strategies to best fit your local realities. Let us embark on this fiscal year with a shared sense of purpose, guided by the wisdom that Arogyam Parmam Dhanam - Health is the ultimate wealth." With this spirit, let us work in unison to secure a future of health, hope, and prosperity for every citizen.



(Aradhana Patnaik)

F. No. 10/4/2026-NHM-I
Ministry of Health and Family Welfare
Government of India
National Health Mission

Kartavya Bhawan, New Delhi
Dated: 25th June, 2026

To,
Shri Yetindra M. Maralkar, IAS
Secretary, Health cum Mission Director,
National Health Mission, Goa,
Chamber Nos. 207, 3rd Floor,
Secretariat, Porvorim – Goa.

Subject: Approval of NHM State Programme Implementation Plan for the state of Goa for the FY 2026-27.

Sir,

This refers to the Programme Implementation Plan (PIP) for FY 2026-27 submitted by the State of Goa and subsequent discussions in the NPCC meeting held on 6th May, 2026 at Kartavya Bhawan, New Delhi.

Administrative approval is hereby accorded for an amount of **Rs 126.00 Crores** against a Resource Envelope of **Rs 82.83 Crores** for FY 2026-27. This amount is inclusive of IM and Kind Grants. Please refer to Tables 'A' and 'B' for details regarding the Resource Envelope.

Table 'A': Resource Envelope (Rs. in Crore):

| S No. | Particulars | 2026-27 |
|-------|---|--------------|
| A | GoI Support (Flexible Pool for RCH & Health System Strengthening, National Health Programme and Urban Health Mission under National Health Mission including Cash and Kind) | 37.33 |
| B | GoI Support for Incentive Pool based on last year's performance (assuming no incentive/ reduction on account of performance) | 4.15 |
| C | GoI Support (under Infrastructure Maintenance) | 8.22 |
| D | Total GoI support (A+B+C) | 49.70 |
| E | State Share (C*40% / 10%) | 33.13 |
| F | Total Resource Envelope (D+E) | 82.83 |

| S No. | Particulars | 2026-27 | |
|-------|---|--------------------------------------|-------------------------|
| | | GoI Share (including Incentive Pool) | State Share (40% / 10%) |
| A | GoI Support (Flexible Pool for RCH & Health System Strengthening, National Health Programme and Urban Health Mission under National Health Mission including Cash and Kind) (i + ii) | 41.48 | 33.13 |
| (i) | Cash | 28.47 | |
| (ii) | Kind (a + b + c + d) | 13.01 | |
| | (a) Immunisation | 4.88 | |
| | (b) NVBDCP | 1.69 | |
| | (c) NTEP | 6.40 | |
| | (d) NVHCP | 0.04 | |
| B | Infrastructure Maintenance (including Direction and Administration) | 8.22 | |
| C | Total Resource Envelope (A+B) | 49.70 | 33.13 |

Table 'B': Maximum Permissible Resource Envelope (Rs. in Crore)

| | Particulars | 2026 – 27 |
|-------------------|---|------------------|
| A | Total GoI Allocation | 49.70 |
| B | Proportionate State Matching Share (40%/10%) | 33.13 |
| C=(A+B) | Total Allocation | 82.83 |
| D | Less: GoI support - Infrastructure Maintenance | 8.22 |
| E | Less: (Kind Grants) | 13.01 |
| F=(C-D-E) | Eligible amount for fresh approval other than IM and Immunisation Kind Grant | 61.60 |
| G=(F*1.25) | Permissible Limit (1.25 times of above) | 77.00 |
| D | Add: Infrastructure Maintenance (IM) | 8.22 |
| E | Add: (Kind Grants) | 13.01 |
| H=(G+D+E) | Maximum Permissible Resource Envelope | 98.23 |

2. **SNA SPARSH & Financial Management:** In accordance with the SNA SPARSH initiative, all NHM funds will be operated through a Single Nodal Agency account. Unspent balances will NOT be carried forward, as the Mother Sanction lapses at the end of the financial year. States must ensure:
 - (i) Master sanction is issued to IA's as soon as mother sanction is issued by the centre.
 - (ii) Prioritize bills for beneficiary-oriented schemes like, JSY, NPY, etc., the payments will be made through DBT.
 - (iii) State must ensure that proportionate State share against Kind Grants and IM released is received in 0:100 SLS account and spent as per approved activities under ROP.
3. **PIP Reforms and Simplified Budget Format:** Major reforms in this planning cycle include: transition to a one-year PIP cycle; introduction of six new cross-cutting budget heads (S Nos. 201–206) for Capacity Building, ASHA Incentives, IT Interventions, IEC & Printing, PSA Plants (PM-CARES AMC/CAMC), and State-specific Innovations; introduction of six new annexures; and rationalisation of Key Deliverables from 186 to 65. The major outputs agreed with the State in the form of Key Deliverables are placed at Annexure 2.
4. **Conditionality Framework:** The Conditionality Framework for FY 2026-27 is given at Annexure 3. The key screening criterion remains Full Immunization Coverage (FIC): at least 90% for non-EAG/NE/hilly States and at least 85% for EAG, NE and hilly States. There are 12 conditionality indicators with incentive/penalty scoring ranging from +125 to -105 points.
5. **Revalidation of Previous Years' Approvals:** Proposals that were not implemented or were only partially implemented in previous PIPs have been clearly highlighted and submitted under revalidation using the prescribed format the details of amount revalidated is provided at Annexure 5. The amount proposed for revalidation will be counted within the current year's Resource Envelope and will correspondingly reduce funds available for new activity approvals.
6. **SDGs & Disease Elimination Targets (Annexure 1):** States must intensify efforts towards the achievement of Sustainable Development Goals (SDGs) and India's disease elimination targets through focused planning, robust surveillance, timely service delivery, and community participation. Special emphasis should be placed on accelerating progress in maternal and child health indicators, TB elimination, elimination of neglected tropical diseases, and reduction of the burden of communicable and non-communicable diseases through convergence, innovation and evidence-based interventions.
7. **CRM Action Taken Report:** States should ensure effective compliance of Action Taken Reports (ATRs) on the observations and recommendations emerging from Common Review Missions (CRMs). The findings of CRM visits should be utilized as an opportunity for systemic strengthening with focused corrective actions on service delivery gaps,

infrastructure, human resources, quality assurance, and programme implementation to improve overall health system performance and accountability.

8. **Human Resources for Health (HRH):** Support for Human Resources for Health (HRH) will be to the extent of positions engaged over and above the regular positions as per IPHS norms and caseload. NHM aims to strengthen the health systems by supplementing and hence it should not be used to substitute regular HRH. All States and Union Territories are encouraged to create sanctioned regular positions as per the IPHS requirements, including positions in urban areas-UCHCs, UAAM-PHCs and UAAM-SHCs. States/ UTs are encouraged to rationalize the service delivery and programme management HRH. It is advised to adopt a health-systems approach rather than programme-wise deployment to avoiding duplication and enable more efficient utilisation of HRH. The service delivery HR belongs to the system and the facility, and their posts should not be named after any program.

The HRH supported under NHM may be rationally redeployed by States/ UTs, as per IPHS and caseload ensuring that facilities with adequate regular cadre staff are not overstaffed, and that such redeployment is undertaken without compromising service availability at the originating facility. For programme management HR, a suggestive PMU structure which States/UTs may adapt based on local needs has been shared (please refer to AS&MD, NHM's letter - D.O. No. Z-18015/93/2025, dated 9th December 2025). The PMU structure may be reorganized by redistributing the work and reassigning the roles based on competency and educational qualifications, ensuring optimal utilization of resources.

HRH should only be engaged when infrastructure, procurement of equipment etc. required to operationalize the facility or provide services, are in place. Moreover, HRH can only be proposed and approved under designated FMRs (S no 142, 185, 187 and 98 for TeleMANAS HR). HRH under any other FMRs or in any lump sum amount of other proposals, would not be considered as approved NHM HRH. Please refer to AS&MD's letter dated 17th May 2018 in this regard. All approved HRH under NHM have also been listed in **Annexure-5** for ease of reference.

- i. Remuneration of existing posts as a lump sum has been calculated based on the salary approved in FY 2024-25, 5% annual increment and 3% rationalization amount (if any) for 12 months. The budget proposed by the State/ UT for remuneration of existing staff has been recommended for 12 months in principle. This is to save the efforts of the State/ UT in sending any supplementary HRH proposals to MoHFW. If there are funds left in HRH budget, it could be used to pay the approved HRH at the approved rate for rest of the months.
 - ii. The maximum increase in remuneration of any staff is to be within 15% (in total based both on performance and rationalization). Overall increment and rationalization of HRH is to be within the 8% of HRH budget. In case performance appraisal of NHM staff is not carried out by the State/ UT, only 5% increase on the salary can be given.
 - iii. Salary rationalization exercise (to be done only in cases where HRH with similar qualification, skills, experience, and workload are getting disparate salaries) and its principles including increments are to be approved by SHS GB under overall framework and norms of NHM. In cases where the salary difference is more than 15%, salary rationalization is to be done in phases. Increase in salary beyond 15% in any year for any individual will have to be borne by the State/ UT from its own resources. Uniformity should be ensured in appraisals, increments, and remuneration across contractual NHM HR.
 - iv. The States/UTs must ensure that achievement of performance above minimum performance benchmark, as guided by MoHFW and finalized by State Health Society, is included as a condition in the contract letter of every HRH engaged under the NHM. Before renewal of the contract, each employee must be appraised at least against these benchmarks.
 - v. States/UTs have been requested to fund remuneration and emoluments of programme management staff on deputation from the State budget in the PIP guidelines and through D.O. letter of AS&MD dated 9th December 2025 (D.O. No. Z-18015/93/2025-NHM-II). From April 2026, expenditure for the salaries and emoluments of the regular staff should be booked from State Budget.
 - vi. It may be noted that if any of the HRH positions approved (Annexure 4b) remain vacant from 01/07/2026 to 31/03/2027, then all such positions would be deemed to have been dropped/lapsed and a fresh assessment of positions to be supported under NHM shall be done in the next PIP cycle.
9. **Integrated Training Approach:** From FY 2026-27, an integrated comprehensive training approach will be adopted for ASHAs and four key service delivery cadres (MPW, CHO, Staff Nurses, and Medical Officers) to avoid multiple parallel training programmes for the same personnel. States are required to prepare and submit a Training Calendar



within 15 days of RoP issuance (format at Annexure 6). Medical and Nursing colleges will be engaged as Regional Training Institutes using a cascade model.

10. Finance:

- i. As per DoE guideline dated 4th September, 2023, 4th October, 2024 and 17th December, 2024 SNA SPARSH is implemented in 31 States/UTs under NHM and PM-ABHIM. SNA-SPARSH is to facilitate more effective cash management and with an aim of achieving the goal of “Just-in-time” fund flow from both the Centre and State Consolidated Funds through an integrated network of State IFMIS, e-kuber of RBI.
- ii. As per para 24 of DoE’s guidelines dated 23rd March 2021, for flow of CSS funds, instead of releasing funds to UTs w/o legislature, Ministries/Department will issue LoA of not more than 25% of the annual amount earmarked for the scheme for the UT in one instalment.
- iii. Using the authorization, the UT will transfer funds to the SNA account. Implementing agencies down the ladder will use the SNA account through zero balance account with clearly defined drawing limits. LoA for next instalment of funds will be issued by Ministries/Department after utilization of 75% of funds release earlier.
- iv. Separate budget lines must be maintained for central and state share under NHM.
- v. Refund of unspent balance to Consolidated Fund of India (CFI) and Consolidated Fund of State (CFS) in funding pattern of Centre and State, if any, as per the DoE Guidelines dated 16th January 2024.

B. Action on the following issues would be looked at while issuing 1st Mother sanction of funds under NHM:

- i. Submission of Provision Utilization Certificate of the Previous FY under NHM.
- ii. Submission of FMR and SFP up to 31st March of the Previous FY under NHM.
- iii. State should have utilize the matching state share against commodity and infrastructure maintenance grants sanction released in previous FY under 0:100 SLS.
- iv. Any other guidelines issued by DoE time to time.

C. Action on the following issues would be looked at while considering the issue of subsequent Mother sanction of funds under NHM:

- i. State must have utilized at least 75% of the already issued Mother Sanction.
- ii. Statutory audit report along with Audited UCs by 31st July needs to be submitted by the states/UTs for issue of mother sanction beyond 75% of central allocation.

D. Other Financial Matters

- i. The State should convey the district approvals within 30 days of issuing of RoP by MoHFW to States/UTs.
- ii. The State must ensure due diligence in expenditure and observe, in letter and spirit, all rules, regulations, and procedures to maintain financial discipline and integrity particularly with regard to procurement; competitive bidding must be ensured, and only need-based procurement should take place as per ROP approvals.
- iii. The unit cost/ rate wherever approved for all activities including procurement, printing, etc. are only indicative for purpose of estimation. However, actuals are subject to transparent and open bidding process as per the relevant and extant purchase rules and up to the limit of unit cost approved.
- iv. Third party monitoring of civil works and certification of their completion through reputed institutions may be introduced to ensure quality. Also, Information on all ongoing works should be displayed on the NHM website and PMS portal.
- v. The State to ensure regular meetings of State and District Health Missions/ Societies. The performance of SHS/DHS along with financials and audit report must be tabled in Governing Body meetings as well as State Health Mission and District Health Mission meetings.
- vi. As per the Mission Steering Group (MSG) meeting decision, only up to 9% of the total Annual State Work Plan for that year could be budgeted for program management and M&E for bigger States, while the ceiling could go up to 14% for small States of NE and the UTs. The states/ UTs will have to ensure that overall expenditure under programme management and M&E do not exceed the limit of 9%/ 14% (as applicable) as mandated by MSG.
- vii. The accounts of State/ grantee institution/ organization shall be open to inspection by the sanctioning authority and audit by the Comptroller & Auditor General of India under the provisions of CAG (DPC) Act 1971 and internal audit by Principal Accounts Officer of the Ministry of Health & Family Welfare.
- viii. All approvals are subject to the Framework for Implementation of NHM and guidelines issued from time to time and the observations made in this document.

11. **IT Solutions:** All IT solutions implemented by the State must be EHR-compliant. States not using the central software must provide APIs for accessing/viewing data required for monitoring. States are expected to operationalise the National Aggregator Platform for integration of programme portals (NCD, Nikshay, Sickle Cell, U-WIN, PMNDP, etc.) to enable seamless single-window data entry for healthcare workers.
12. **JSSK, JSY, NPY and Other Entitlement Schemes:** The State must mandatorily provide for all entitlement schemes. No beneficiary should be denied any entitlement due to limitations of approved amount. JSY and NPY payments must be made through Direct Benefit Transfer (DBT) via Aadhaar-enabled payment system.
13. **Mandatory Disclosures:** The State must ensure mandatory disclosures on the State NHM website of all publicly relevant information as per CIC directions and MoHFW letters. District-wise RoPs must be uploaded on the NHM website within 30 days of issuance of RoP by MoHFW.
14. **Approvals over and above the Resource Envelope:** Approvals over and above the Resource Envelope are accorded on the condition that there will be no increase in the Resource Envelope and the State will have to prioritise and undertake approved activities within the existing RE. Any subsequent modification in the RE will be communicated separately.

Yours sincerely,



(Akanksha Ranjan)
Deputy Secretary, NHM

Annexure 1: SDG & Disease Elimination Targets Plan

Section A: SDG Health Indicator Progress

| S No. | SDG / Health Indicator | SDG 2030 Target | INDIA | GOA |
|-------|---|-----------------|-------------------|---|
| 1 | Maternal Mortality Ratio (MMR) per 1,00,000 LB | < 70 | 87* | NA |
| 2 | Neonatal Mortality Rate (NMR) per 1,000 LB | ≤12 | 18** | Not available under SRS (State needs to monitor IMR as a proxy indicator of Child Mortality to improve Child Health Programmatic Interventions) |
| 3 | Under-5 Mortality Rate (U5MR) per 1,000 LB | ≤25 | 28** | |
| 4 | Full Immunization Coverage (%) | ≥90 % | 87.1 [#] | |
| 5 | Reduction in premature mortality from Non – Communicable Diseases through prevention, treatment, and promotion. | 30% Reduction | - | - |

* SRS Bulletin on MMR 2022-24.

** SRS Statistical Reports 2024.

NFHS 6

Section B: Disease Elimination Milestones

| S No. | Disease Elimination Programme | National Status | State Status | Key Gap |
|-------|--|--|--|---|
| 1 | TB Elimination by 2030 (TB Mukht Bharat Abhiyan) | Incidence - 187 Mortality - 21 | Incidence - 219 Mortality - 20 | <ul style="list-style-type: none"> 100% coverage of screening among vulnerable populations annually X-ray examination among all symptomatic and asymptomatic vulnerable populations needs to be improved Sustain upfront NAAT testing for all identified presumptive cases (symptomatic / X-ray abnormal & suggestive of TB) 100% assessment of all notified TB patients for differentiated TB care and intensified care & management of all high-risk TB cases 100% coverage of TB Preventive treatment to all eligible household contacts and vulnerable groups after ruling out active TB Sustain Ni-kshay Mitra initiative & monthly distribution of Poshan Kits to all consented TB patients and their reporting in the TB Mukht Bharat App 100% timely disbursement of Ni-kshay Poshan Yojana DBT benefits to eligible beneficiaries |
| 2 | Malaria Elimination by 2030 | Annual Parasite Incidence (API) – 0.17 | Annual Parasite Incidence (API) – 0.28 | <ul style="list-style-type: none"> Special Action Plan to be proposed for urban areas State to ensure surveillance of migrant groups with screening at entry points, follow up for treatment completion and line listing |

| S No. | Disease Elimination Programme | National Status | State Status | Key Gap |
|-------|--|---------------------|--|---------|
| 3 | Lymphatic Filariasis | Elimination by 2027 | 100% (2/2) endemic districts < 1 Mf rate | |
| 4 | Kala-Azar Elimination (< 1 case / 10,000 pop.) by 2023 | | | N A |
| 5 | Leprosy Elimination (< 1 case / 10,000 pop.) | Sustained | Sustained | |
| 6 | Viral Hepatitis Elimination (B & C) by 2030 | | | N A |
| 7 | Sickle Cell Disease Elimination Mission by 2047 | | | N A |

Annexure 2: Key Deliverables (KDs) for FY 2026-27

| S No. | Indicator or Type | Division | Indicator Statement | Indicator | Unit | Source of data | Target for FY 2026-27 |
|-------|-------------------|---------------------|--|---|------------|----------------------------|---|
| 1 | Output | Maternal Health | ANC registration in 1st trimester of pregnancy (within 12 weeks) | % of PW registered for ANC in 1st trimester Numerator: Total number of PW registered in 1st Trimester Denominator: Total number of PW registered for ANC | Percentage | HMIS | ≥ 85% |
| 2 | Output | Maternal Health | Identification of HRP under PMSMA/E-PMSMA | % of High-Risk Pregnancies (HRPs) identified Numerator: Total no. of PW identified as High-Risk Pregnancy (HRP) Denominator: Total number of PW registered for ANC | Percentage | PMSMA Portal | > 15% |
| 3 | Output | Maternal Health | Maternal death review mechanism | % of maternal deaths reviewed against the reported maternal deaths. Numerator: Total no. of maternal deaths reviewed Denominator: Total no. of maternal deaths reported | Percentage | HMIS | 100% |
| 4 | Output | Child Health | SNCU successful discharge rate | SNCU successful discharge rate out of total admission (%) Numerator: No. of sick and small newborns discharged successfully (Unsuccessful denotes Death, LAMA and referral) Denominator: Total no. of sick newborns admitted in SNCUs | Percentage | SNCU MIS Online Portal | ≥ 85% |
| 5 | Output | Child Health | Child Death Reporting | Percentage of Child Death Reported against Estimated deaths Numerator: Total no. of Child deaths reported. Denominator: Estimated number of Child Deaths based on latest SRS report (Based on reported birth cohort : HMIS) | Percentage | MPCDSR Portal / HMIS | 100% (73 Infant Deaths) |
| 6 | Outcome | Child Health | Stillbirth Rate | Still Birth Rate Numerator: Total no. of Stillbirth Reported Denominator: Total no. of Reported Deliveries on HMIS | Rate | MPCDSR Portal/ HMIS Portal | ≤ 8 per 1000 births |
| 7 | Output | Child Health (RBSK) | Screening of Children in Government & Government aided schools | Percentage of children screened and managed by RBSK MHTs Numerator: Number of Children in Government & Government aided schools and Anganwadi | Percentage | State Quarterly Report | 100% 0-6 Years 2 Visit - (86,404) 6-18 Years (2,59,400) |



| S No. | Indicator or Type | Division | Indicator Statement | Indicator | Unit | Source of data | Target for FY 2026-27 |
|-------|-------------------|---------------------|---|--|------------|------------------------|------------------------------|
| | | | and Anganwadi Centre | Centre screened by RBSK MHTs as per RBSK Guideline. Denominator: Total number of Children in Government & Government aided schools and Anganwadi Centre | | | |
| 8 | Output | Child Health (RBSK) | Secondary/ Tertiary management of Conditions specified under RBSK | Number of beneficiaries received Secondary/Tertiary management against RoP approval (for surgical intervention specified under RBSK). | Nos. | State Quarterly Report | 76 |
| 9 | output | Immunization | Pentavalent 1st dose coverage | Percentage of children receiving Pentavalent vaccine 1st dose Numerator: Total no. of infants immunized with Pentavalent 1st dose Denominator: Total no of children under one year of age | Percentage | HMIS | > 97 |
| 10 | Output | Immunization | MR-2nd dose Coverage >95% | MRCV 2nd dose coverage > 95% at State level Numerator: Total no. of children received MR 2nd dose Denominator: Total no. of children under one year of age | Percentage | HMIS | > 95 |
| 11 | Output | Nutrition | Bed Occupancy Rate at Nutrition Rehabilitation Centre (NRC) | Bed Occupancy Rate at NRCs Numerator- Total inpatient days of care in the reporting period Denominator- Total available bed days during the same reporting period | Percentage | State Reports | N A |
| 12 | Output | Nutrition | Early Initiation of Breastfeeding Source: HMIS | % of new born breastfed within one-hour birth against total live birth. Numerator: Number of new born breastfed within one hour of birth in the reporting period Denominator: Total live births registered in the same reporting period. | Percentage | HMIS | 90 % |
| 13 | Output | Nutrition | Hemoglobin testing- In-school children | Percentage of children 6-18 years in Govt /Govt-aided schools tested for anemia by ANM/ Staff Nurse /CHO/RBSK MHT Numerator: Number of children 6-18 years in Govt /Govt-aided schools tested for anemia by ANM/Staff Nurse/CHO/RBSK | Percentage | RBSK dashboard U-WIN | 50% (Total Target 249052) |



| S No. | Indicator or Type | Division | Indicator Statement | Indicator | Unit | Source of data | Target for FY 2026-27 |
|-------|-------------------|-------------------|---------------------------------|--|------------|-------------------------------|--|
| | | | | MHT, using Digital Invasive Hemoglobinometer Denominator: Total Number of children 6-18 years in Govt /Govt-aided schools (target beneficiaries) as provided by the State | | | |
| 14 | Output | CAC | CAC services | Public Health Facilities equipped with Drugs (MMA Combi pack/ Mifepristone & Misoprostol), Equipment (MVA/EVA) and Trained Provider (MTP Trained MO/OBGYN) for providing CAC services against the total number of Public Health Facilities as per RoP targets (Targets- Medical College 100%; District Hospital 100%; Sub District Hospital 100%; CHCs (FRUs) & Other Sub District Level Hospitals 100%; 24 x 7 PHCs, Non-FRU CHCs: >80%; Other PHCs: 75% of Other PHCs must ensure availability of Medical Methods of Abortion (MMA) at least, subject to availability of a Trained Registered Medical Practitioner) Numerator: Total no. of Public Health Facilities that are equipped with Drugs (MMA Combi pack/ Mifepristone & Misoprostol), Equipment (MVA/EVA) and Trained Provider (MTP Trained MO/OBGYN)) Denominator: Total number of Public Health Facilities as per RoP targets | Percentage | CAC Annual & Quarterly Report | <ul style="list-style-type: none"> • District Hospital, CHCs (FRUs) & Other Sub District Level Hospitals and above: 100% • Non-FRU CHCs & 24*7 PHCs: > 25% Other PHCs: > 33% of Other PHCs must ensure availability of Medical Methods of Abortion (MMA) at least, subject to availability of a Trained Registered Medical Practitioner |
| 15 | Output | Adolescent Health | Client load at AFHC | Average monthly Client load at AFHC/month at DH/SDH /CHC level in the reporting period Numerator: Total adolescent clients registered at the AFHCs Denominator: Number of AFHCs divided by no. of months (per AFHC per month) | Number | AFHC App / RKSK dashboard | 120 |
| 16 | Output | Adolescent Health | Ayushman Bharat School Health & | Percentage of Health & Wellness Ambassadors trained to transact | Percentage | SHWP Report | 100 % |



| S No. | Indicator or Type | Division | Indicator Statement | Indicator | Unit | Source of data | Target for FY 2026-27 |
|-------|-------------------|----------------------------------|---|---|------------|--|---|
| | | | Wellness Programme implementation | weekly activities in schools in the reporting period Numerator- Number of Health & Wellness Ambassadors (HWAs) trained in the reporting period Denominator- Target number of HWAs to be trained in the reporting period | | | |
| 17 | Output | PCPNDT | Total Number of meetings conducted by district advisory committees (DAC) in the state/ UT | As mandated by the PC&PNDT Act law the DAC has to meet minimum 6 times a year Numerator- Total No. of meetings actually conducted by all districts in the state Denominator- No of district *6 | Percentage | State Report | 12 (100%) Target 100% = 12 meetings per year in 2 districts) |
| 18 | Output | FP | Couple Protection Rate | CPR for modern methods (spacing methods + limiting methods) Numerator: Estimated number of couples protected by modern contraceptives. Denominator: Total number of currently married women of reproductive age group (15-49 years). Base year: 2025 | Percentage | HMIS /Janani portal and TGPP report - 2020 | 9 % |
| 19 | Output | TB Mukht Bharat Abhiyan | TB patient assessed for Differentiated care | • Numerator: Total TB patients assessed for differentiated care • Denominator: Total TB case notified | Percentage | NIKSHAY Portal | > 95 % |
| 20 | Output | TB Mukht Bharat Abhiyan | % of eligible population provided TB Preventive Treatment (TPT) | • Numerator: Total eligible population initiated on TPT • Denominator: Total eligible population for TPT | Percentage | NIKSHAY Portal | > 60 % |
| 21 | Output | TB Mukht Bharat Abhiyan | % Of patients adopted by Ni-Kshay Mitra | % of eligible patients receiving support by Ni-kshay Mitra Numerator: No. of consented TB patient received at least one food basket Denominator: Total TB patient consented for Ni-kshay Mitra Initiative | Percentage | NIKSHAY Portal | > 90% |
| 22 | Output | National Viral Hepatitis Control | Management of Hepatitis C – | Percentage of Hepatitis C Patients benefited i.e. number | Percentage | NVHCP MIS Portal | 100 % (45) |

| S No. | Indicator or Type | Division | Indicator Statement | Indicator | Unit | Source of data | Target for FY 2026-27 |
|-------|-------------------|--|--|--|------------|---|-----------------------|
| | | Programme (NVHCP) | under the program | who received treatment against target | | | |
| 23 | Output | National Viral Hepatitis Control Programme (NVHCP) | Management of Hepatitis B – under the program | Percentage of Hepatitis B Patients benefited i.e. number who received treatment against target | Percentage | NVHCP MIS Portal | 100 % (63) |
| 24 | Outcome | Integrated Disease Surveillance Programme (IDSP) | Improved Capacity of Districts to detect and respond disease outbreaks | Reporting % of P form | Percentage | IDSP IHIP | 86 % |
| 25 | Output | National Leprosy Eradication Programme (NLEP) | Child Cases among new cases | No. of districts with Zero child case in the current FY | Number | State /UT Nikusth Report | 02 |
| 26 | Output | National Leprosy Eradication Programme (NLEP) | Grade II Disability (G2D) among new cases | No. of Districts with Zero Grade II Disability (G2D) among new cases | Number | State /UT Nikusth Report | 02 |
| 27 | Output | National Vector Borne Disease Control programme (NVBDCP) | Malaria Reduction in API at District level | Annual blood Examination Rate (ABER) *ABER= Number of Blood smear/Rapid Diagnostic Test examined in a year x 100 / total population | Percentage | MES report, NVBDCP | 5 – 7 % |
| 28 | Output | National Vector Borne Disease Control programme (NVBDCP) | Lymphatic Filariasis | The proportion of districts/IUs with coverage > 90% against eligible population | Percentage | 13 Table MDA report and WHO Post MDA report | N A |
| 29 | Output | National Vector Borne Disease Control programme (NVBDCP) | Dengue & Chikungunya | Dengue Case Fatality Rate at State level | Percentage | State Report | < 1% |
| 30 | Output | National Vector Borne Disease Control programme (NVBDCP) | Kala-azar | % Complete treatment of KA and PKDL Cases | Percentage | State Report | N A |
| 31 | Output | National Vector Borne Disease Control | Japanese Encephalitis (JE) | JE Case Fatality Rate (CFR) | Percentage | State Report | N A |



| S No. | Indicator or Type | Division | Indicator Statement | Indicator | Unit | Source of data | Target for FY 2026-27 |
|-------|-------------------|--|---|---|------------|--|-----------------------|
| | | programme (NVBDCP) | | | | | |
| 32 | Output | National Rabies Control Program (NRCP) | Availability of Anti-Rabies Vaccine (ARV) and Anti-Rabies Serum (ARS) both till PHC level Health facilities | ARV available at the Health Facilities as per Essential Medical List Numerator- Total No. of Health Facility till PHC level having stocks of ARV and ARS both (Source-DVDMS Portal/State Monthly report) Denominator- Total No. of Health Facilities till PHC level (Source- Rural Health Statistic-MoHFW) | Percentage | DVDMS Portal/State Monthly report Rural Health Statistic-MoHFW) | 100 % |
| 33 | Output | Program for Prevention and Control of Leptospirosis (PPCL) | Suspected Leptospirosis cases tested in the state endemic for leptospirosis | Percentage of suspected Leptospirosis cases tested (screened and confirmed) in the state as per PPCL guidelines Numerator: Number of suspected Leptospirosis cases that were tested (screened and/or confirmed) as per PPCL guidelines during the reporting period. Denominator: Total number of suspected Leptospirosis cases identified during the same reporting period in state | Percentage | State Monthly Report | 90 % |
| 34 | Output | National Program for Prevention and Control of Snakebite Envenoming (NPSE) | Availability of Anti-Snake Venom (ASV) till PHC level Health facilities. | ASV available at the Health Facilities as per Essential Drug List till PHC level Numerator- Total No. of Health Facility till PHC level having stocks of ASV Denominator- Total No. of Health Facilities till PHC level (Source- Rural Health Statistic-MoHFW) | Percentage | State Monthly Report | 90 % |
| 35 | Output | National Programme for Non-Communicable Diseases | Functional Day care Centre | Number of functional Day Care Cancer Centre against approved in FY 2025-26 | Percentage | State Report | 100 % |



| S No. | Indicator or Type | Division | Indicator Statement | Indicator | Unit | Source of data | Target for FY 2026-27 |
|--------|-------------------|---|---|---|-----------------------|---------------------|--|
| | | (NP-NCD) | | | | | |
| 36 | Output | National Programme for Non-Communicable Diseases (NP-NCD) | Expanded NCD service coverage (STEMI / Stroke / COPD / NAFLD) | No. of Districts providing Expanded NCD Services (STEMI / Stroke / COPD / NAFLD) against the Number of districts in the State | Percentage | State Report | 50 % |
| 37 (a) | Output | National Programme for Non-Communicable Diseases (NP-NCD) | Hypertension Control Rate | % of Hypertensive patients under control against the Number of Hypertensive patients as per prevalence estimates | Percentage | National NCD Portal | 25% (Target: 44,504 hypertensive individuals under control which is 25% of the estimated hypertension prevalence of 1,78,016) |
| 37 (b) | Output | National Programme for Non-Communicable Diseases (NP-NCD) | Diabetes Control Rate | % of Diabetic patients under control against the Number of Diabetic patients as per prevalence estimates | Percentage | National NCD Portal | 25% (Target: 49,394 Diabetic individuals under control which is 25% of the estimated Diabetes prevalence of 1,97,574) |
| 38 | Output | National Programme for Non-Communicable Diseases (NP-NCD) | Cancer Patients Put on Treatment | % of Cancer patients put on treatment against diagnosed | Percentage | National NCD Portal | > 90 % |
| 39 | Outcome | National Tobacco Control Programme (NTCP) | Improved access for Tobacco Cessation Services | % increase in number of people availed tobacco cessation services from last year | Percentage | MIS / NTCP portal | 10 % Increase |
| 40 | Output | National Mental Health Programme (NMHP) | Increase in Mental Health outpatient Services | Numerator: No. of patients catered in mental health OPD during the given year Denominator: No. of patients catered in Mental Health OPD in the previous year | Percentage and Number | State Report / HMIS | 1.14% 11551 (1 & amp; 2 nd quarter report) FY 25-26 / 10090 (1 & amp; 2 nd quarter |



| S No. | Indicator Type | Division | Indicator Statement | Indicator | Unit | Source of data | Target for FY 2026-27 |
|-------|----------------|---|--|---|------------|-----------------------------|---|
| | | | | | | | report) FY 24-25 |
| 41 | Output | National Programme for Control of Blindness and Visual Impairment (NPCB&VI) | Eye care services under NPCB and VI provided at primary, secondary at District level and below level | Number of cornea collection done by the state / UT against the annual target shared by NPCBVI MOHFW | Number | State Report | 35 |
| 42 | Output | National Programme for Control of Blindness and Visual Impairment (NPCB&VI) | Eye care services under NPCB and VI provided at District level and below District level | No. of Free Spectacles to school children suffering from Refractive errors | Number | State Report | 5,000 |
| 43 | Output | Pradhan Mantri National Dialysis Program (PMNDP) | Number of new HD patients registered under PMNDP | Estimated number of new patients registered under PMNDP in the current financial year | Number | State Report / PMNDP portal | 10% increase in new patient registration from the previous FY |
| 44 | Outcome | National Programme for Prevention and Control of Fluorosis (NPPCF) | Extent of dental Fluorosis cases among children (aged 6-11) in Fluoride-affected districts | Percentage of children (aged 6-11) with suspected dental Fluorosis out of total children examined. | Percentage | State Report | N A |
| 45 | Output | National Programme for Prevention & Control of Deafness (NPPCD) | Screened for hearing loss | Number of people screened and managed for deafness / hearing impairment. | Number | NPPCD QPR | 890 |
| 46 | Output | National Programme for Health Care of Elderly (NPHCE) | Provision of primary and secondary Geriatric healthcare services at District Hospital and below | Number of older persons (≥ 60 years of age) availing services at DH and CHC | Number | HMIS | 3 Lakhs |
| 47 | Output | National Programme for Palliative Care (NPPC) | Palliative care services | Number of beneficiaries availing palliative services from DH | Number | HMIS | 7,000 |

| S No. | Indicator or Type | Division | Indicator Statement | Indicator | Unit | Source of data | Target for FY 2026-27 |
|-------|-------------------|---|--|--|------------|---------------------------------------|----------------------------|
| 48 | Output | National Oral Health Programme | Strengthening Oral Health Services | 1. Percentage of CHCs providing all of the following services against total CHCs with dental units: • Tooth Fillings • Root Canal Treatment • Scaling | Percentage | HMIS / State NOHP cell | 100 % |
| 49 | Output | Health System Strengthening (HSS)- Urban (NUHM) | % Improvement in Footfall at Urban Health Facilities | A. AAM-USHC and AAM UPHC (Difference in footfall between the current and previous financial year / Footfall in the previous financial year) x100 | Percentage | AAM Portal/ HMIS Portal | 20% increase from baseline |
| 50 | Output | Free Drugs Service Initiative | Availability of IPHS medicines | Availability of IPHS medicines at primary level and district hospital healthcare facilities at DVDMS integrated facilities Calculated as state average stock of total number of medicine available at primary level of health facility divided by the Total number of medicines in IPHS EML at primary level of facility Numerator: Number of medicine available in state at each level Denominator: Number of medicines in IPHS EML at primary level of facility | Percentage | DVDMS Central Dashboard | 70 % |
| 51 | Output | Free Diagnostic Service Initiative | Diagnostic Tests Availability in Aspirational blocks | Percentage of aspirational block provided with free lab diagnostic services (Calculated as total number of aspirational blocks providing free lab diagnostic services divided by the total number of aspirational blocks operational X 100 | Percentage | ODK Tool Kit | 100 % |
| 52 | Output | Blood Services & Disorders | Treatment to individuals with Sickle Cell Disease | % of diseased patients on Treatment Numerator: Total Number of individuals with Sickle Cell Disease put on Treatment in the State/UT. Denominator: Individuals confirmed with Sickle Cell Disease in the State/UT. | Percentage | Sickle Cell Portal (Follow up module) | N A |



| S No. | Indicat or Type | Division | Indicator Statement | Indicator | Unit | Source of data | Target for FY 2026-27 |
|-------|-----------------|---|--|--|------------|--------------------|---|
| 53 | Output | Blood Services & Disorders | Complete database of Thalassaemia and Hemophilia patients on National portal | % of Thalassaemia and Hemophilia patients registered on national portal Numerator: Total Number of Thalassaemia and Hemophilia patients registered on National portal by the State/UT. Denominator: Number of Thalassaemia and Hemophilia patients for whom budget for Blood Transfusion / Iron Chelation / factor drugs proposed by State / UT in PIP of previous FY. | Percentage | Sickle Cell Portal | 100 % |
| 54 | Output | Comprehensive Primary Healthcare (CPHC) | AAM providing expanded service packages | Numerator: No. of AAM providing all 12 expanded range of services. Denominator: Total functional AAM in the state/UT | Percentage | AAM Portal | 100% |
| 55 | Output | Comprehensive Primary Healthcare (CPHC) | Foot fall at AAM (Receiving services for Preventive, promotive, curative, rehabilitative and palliative care) | Numerator: No. of AAM reporting at least average foot fall as per norm of 60 footfalls per 1000 population: - Rural: SHC-AAM @ 300/month; PHC-AAM @1800/month - Urban: U-AAM @ 1200/month; UPHC-AAM @3000/month - Tribal: SHC-AAM @ 180/month; PHC-AAM @1200/month Denominator: Number of operational AAMs in rural areas (SHC-AAM+PHC-AAM) (Average population served by SHC/PHC as per HDI 22-23) | Percentage | AAM Portal | 30% (Annual Increment) |
| 56 | Output | Comprehensive Primary Healthcare (CPHC) | ASHA Certification | Numerator: No. of ASHAs Certified in RNMCAH+N component Denominator: No. of ASHAs in position | Percentage | NIOS Portal | N A |
| 57 | Output | Human Resource for Health | HRH Availability as per IPHS | % of HRH available as per IPHS (HR in Place/IPHS requirement x 100) for six key staff categories* 1. MPW (Male +Female) 2. Staff Nurses | Percentage | NHSRC HRH Division | 1. MPW (Male + Female) – 100 % 2. Staff Nurses – 100 % |

| S No. | Indicator or Type | Division | Indicator Statement | Indicator | Unit | Source of data | Target for FY 2026-27 |
|-------|-------------------|---|--|---|------------|---|--|
| | | | | 3. Lab technicians** (**Reduction in gap % applicable only for those levels of Facilities where lab services including HR for lab have been outsourced) 4. Pharmacists 5. Medical Officer (MBBS) 6. Clinical specialists | | | 3. Lab technicians – 100 % 4. Pharmacists – 100 % 5. Medical Officer (MBBS) – 100 % 6. Clinical specialists – 100 % |
| 58 | Output | Human Resource for Health | Saturation of HRH | % of HRH available as per IPHS (HR in Place/IPHS requirement x 100) for the following staff categories* o Audiologist at DH o Dentist up to CHC o Physiotherapist up to CHC o Radiographer up to CHC o Clinical Psychologist up to CHC o Entomologist at District Level | Percentage | NHSRC HRH Division | 1. Audiologist at DH – 100 % 2. Dentist up to CHC – 100 % 3. Physiotherapist up to CHC – 100 % 4. Radiographer up to CHC – 100 % 5. Psychologist up to CHC – 80 % 6. Entomologist at District Level – 100 % |
| 59 | Output | Human Resource for Health | HRH Training | % of the trainings program conducted against total trainings approved in ROP | Number | State Report | 60 % |
| 60 | Output | Biomedical equipment Management & Maintenance Program (BEMMP) | Equipment CAMC/AMC | % of Equipment Covered under Comprehensive Maintenance Contract/ Annual Maintenance Contract/ BEMMP Calculated as total number of equipment covered under CMC/AMC divided by total number of equipment available at the facility (Average of all Facilities in percentage) | Percentage | BEMMP Dashboard/ State Equipment Inventory Software (e-upkaran) | 100 % |
| 61 | Output | Quality Assurance (QA) | NQAS National certified public health facilities | Percentage of NQAS nationally certified public health facilities | Percentage | Certification Unit, QPS Division, NHSRC | 30 % |

| S No. | Indicator or Type | Division | Indicator Statement | Indicator | Unit | Source of data | Target for FY 2026-27 |
|-------|-------------------|---|--|---|------------|-----------------------|---|
| 62 | Output | National Programme for Climate Change and Human Health (NPCCHH) | Heat Stroke Management Units and Chest Clinics regarding Air Pollution | % of DH & SDH with Operational Heat Stroke Room (Mar-Jul) in Heat Prone State + % of DH with a functioning Chest Clinic regarding air pollution related Health Services (Oct-Feb) in cities recording AQI > 200 Numerator (First part)- Number of DH & SDH with Operational Heat Stroke Room (Mar-Jul) in Heat Prone State Denominator (First part)- Total number of DH & SDH in the State Numerator (Second part)- No. of DH with a functioning Chest Clinic (Oct-Feb) in Cities recording AQI > 200 Denominator (Second part)- Number of DH in the cities where AQI > 200 | Percentage | State Progress Report | 30 % + 30 % |
| 63 | Outcome | Public Health Infrastructure | IPHS compliance | % of healthcare facilities achieved IPHS compliance. | Percentage | IPHS Dashboard | 30 % |
| 64 | Output | Public Health Infrastructure | National Ambulance Services | Average No. of Patients Transferred Per Month Per ambulance | Number | State Progress Report | 60 |
| 65 | Output | Public Health Infrastructure | MMU | Average No. of camps held per MMU and average footfall per Camp | Numbers | State Progress Report | Avg. camps held per MMU / month – 26 Average footfall / day – 20 |

Annexure 3: Conditionalities Framework 2026 – 2027

Full Immunization Coverage (%) will be taken as the primary screening criterion. Conditionalities will be evaluated only for those Empowered Action Group (EAG), Hilly, and Northeastern States that achieve a minimum of 85% Full Immunization Coverage. For all other States and Union Territories, conditionalities will be assessed only for those achieving at least 90% Full Immunization Coverage. (Data Source: HMIS)

| S. No. | Conditionalities | Indicators of 2026-27 | Source of verification | % Incentive / Penalty % Incentive / Penalty (+125 to -105) |
|--------|---|--|---|--|
| 1. | AAMs State/UT Score* | Based on overall score of AAM conditionality (out of 50 marks): <ul style="list-style-type: none"> Score ≥ 40: +20 Score ≥ 30 or < 40: +10 Score ≥ 20 but < 30: -10 Score < 20: -20 | AAM portal | +20 to -20 |
| 2. | Implementation of DVDMS or any other logistic management IT software with API linkages to DVDMS up to AAM-SHC level | Implementation up to AAM-SHC <ul style="list-style-type: none"> In 100% AAM-SC: +5 In $\geq 90\%$ but $< 100\%$ of AAM-SC: +3 In $\geq 80\%$ but $< 90\%$ of AAM-SC: -3 In $< 80\%$ of AAM-SC: -5 | DVDMS Portal or any other similar system with API linkages to DVDMS | +5 to -5 |
| 3. | ANC Checkup | Percentage of pregnant women who received first ANC checkup in the first trimester <ul style="list-style-type: none"> $\geq 90\%$: +5 $\geq 70\%$ but $< 90\%$: +3 $\geq 50\%$ but $< 70\%$: -3 $< 50\%$: -5 | Janani Portal or similar state portal | +5 to -5 |
| 4. | Human Resources for Health | A. Percentage of service delivery HRH in-place in regular cadre against IPHS norms (MPW, Staff Nurse, LT, Pharmacists, MO MBBS and Clinical Specialists) as on 31 st March 2027 <ul style="list-style-type: none"> $\geq 80\%$: +10 $\geq 70\%$ but $< 80\%$: +5 $\geq 60\%$ but $< 70\%$: 0 $< 60\%$: -10 | State notifications, advertisements and PIP, HRH Division | +10 to -10 |
| | | B. Percentage of contractual service delivery HRH in-place (MPW, Staff Nurse, LT, Pharmacists, MO MBBS and Clinical Specialist) filled against approved posts <ul style="list-style-type: none"> $\geq 90\%$: +5 $\geq 70\%$ but $< 90\%$: +3 $\geq 60\%$ but $< 70\%$: 0 | | +5 to -5 |



| S. No. | Conditionalities | Indicators of 2026-27 | Source of verification | % Incentive / Penalty % Incentive / Penalty (+125 to -105) |
|--------|---|---|---|--|
| | | <ul style="list-style-type: none"> <60%: -5 | | |
| 5. | District RoP | <p>District wise RoP uploaded on NHM website within 30 days of issuing of RoP by MoHFW to State or before 31 May 2026, whichever is later</p> <ul style="list-style-type: none"> 100% of the districts whose RoPs for FY 2026-27 are uploaded on State NHM website: +5 Fewer than 100% districts whose RoPs for FY 2026-27 are uploaded on State NHM website: -5 | State NHM Website and D.O. Letter | +5 to -5 |
| 6. | Implementation of TeleMANAS | <p><u>Total Calls</u></p> <ol style="list-style-type: none"> States achieving 30% or more, increase in total calls from previous year handled through the TeleManas helpline: +5 States achieving between 30% to 20% increase in total calls from previous year handled through the Tele MANAS helpline: +4 States achieving increase between 20% to 10% in total calls from previous year handled through the Tele MANAS helpline: = +3 States achieving up to 10% increase or decrease in total calls from previous year handled through the Tele MANAS helpline: -5 | Report from Mental Health Division, MoHFW | +5 to -5 |
| 7. | Implementation of National TB Elimination Programme | <p>A. Percentage of districts achieving more than 90% of treatment success rate</p> <ul style="list-style-type: none"> >=80% districts achieving more than 90% treatment success rate: +5 >=60% to <80% of districts achieving more than 90% treatment success rate: +2.5 >=40% to <60% of districts achieving more than 90% treatment success rate: -2.5 <40% of districts achieving more than 90% treatment success rate: -5 <p><u>Numerator:</u> No. of districts achieving more than 90% of treatment success rate <u>Denominator:</u> Total No. of districts in the State/UT</p> | Ni-kshay Portal | +5 to -5 |

| S. No. | Conditionalities | Indicators of 2026-27 | Source of verification | % Incentive / Penalty % Incentive / Penalty (+125 to -105) |
|--------|--|--|--|--|
| | | <p>B. Percentage of eligible patients receiving all benefits of Ni-kshay Poshan Yojana (NPY-DBT)</p> <ul style="list-style-type: none"> • >=90% of eligible patients receiving all benefits of NPY – DBT: +5 • >=70% to <90% of eligible patients receiving all benefits of NPY – DBT: +2.5 • >=50% to <70% of eligible patients receiving all benefits of NPY – DBT: -2.5 • <50% eligible patients receiving all benefits of NPY – DBT: -5 <p><u>Numerator:</u> No. of eligible patients receiving all benefits of NPY-DBT <u>Denominator:</u> No. of eligible patients</p> | Ni-kshay Portal | +5 to -5 |
| 8. | NQAS Certification progress over last year | <ul style="list-style-type: none"> • Achieved certification of 90% or more of remaining facilities: +15 • Achieved certification of 70 to 89% of remaining facilities: +10 • Achieved certification of 50 to 69% of remaining facilities: +5 • Achieved certification of less than 50% of remaining facilities: 0 | Certification Unit, Quality & Patient Safety Division, NHSRC | 0 to +15 |
| 9 | Compliance to IPHS for Infrastructure | <p>Percentage of IPHS-compliant facilities</p> <ul style="list-style-type: none"> • >= 30%: +10 • >=20% to <30%: +5 • >=10% to <20%: -5 • <10%: -10 <p>All facilities put together: SC, PHC, CHC, SDH and DH, cumulative compliance would be taken In States with >75 % facilities achieving IPHS compliance will get full marks.</p> | IPHS Dashboard/PH A division | +10 to -10 |
| 10. | Increase in State Health Budget | <ul style="list-style-type: none"> • >=10% increase in State health budget: +10 • >0% to <10% increase in State health budget: +5 • No increase or decrease in State health budget: 0 • >0% to <5% decrease in State health budget: -5 • >=5% decrease in State health budget: -10 | State Report, State Health Budget | +10 to -10 |
| 11. | Implementation of NP-NCD | A. Screening coverage for Hypertension, Diabetes Mellitus and 3 cancers viz, Oral, Breast and Cervical Cancer. | NP-NCD Portal | +5 to -5 |



| S. No. | Conditionalities | Indicators of 2026-27 | Source of verification | % Incentive / Penalty % Incentive / Penalty (+125 to -105) |
|--------|--|---|------------------------|--|
| | | <p>Proportion of eligible population screened for Hypertension, Diabetes Mellitus, Oral, Breast and Cervical cancers against the target population under Population Based Screening (PBS) under NP-NCD.</p> <ul style="list-style-type: none"> • $\geq 70\%$ of eligible population screened: +5 • 20% to $< 70\%$: Pro-rata scoring • $< 20\%$: -5 | | |
| | | <p>B. Proportion of hypertensive and diabetic patients under control against the under-treatment hypertension and diabetes patients</p> <ul style="list-style-type: none"> • $\geq 50\%$: +5 • 10% to $< 50\%$: Pro-rata scoring • $< 10\%$: -5 | NP-NCD Portal | +5 to -5 |
| | | <p>C. Proportion of District Hospitals providing services for all five newer NP-NCD components, namely Stroke, STEMI, NAFLD, COPD, and CKD</p> <ul style="list-style-type: none"> • $\geq 50\%$: +5 • $\geq 25\%$ but $< 50\%$: +3 • $< 25\%$: 0 | NP-NCD Portal | +5 to 0 |
| 12. | Implementation of Anaemia Mukta Bharat | <p>Percentage of 5-19-year-old children and adolescents tested for anemia in schools by RBSK team against total no of children enrolled in Govt and govt-aided schools</p> <ul style="list-style-type: none"> • $> 50\%$: + 5 • 20-50%: + 3 • $< 20\%$: +1 • Not started: -5 | RBSK Portal | +5 to -5 |
| | | <p>Percentage of Pregnant Women tested for anemia during first trimester against those registered in JANANI portal</p> <ul style="list-style-type: none"> • $> 50\%$: + 5 • 20-50%: + 3 • $< 20\%$: + 1 • Not started: - 5 | JANANI Portal | +5 to -5 |

With reference to the proposed conditionalities and scoring framework for Ayushman Arogya Mandirs (AAMs) for FY 2026-27, the following clarification and detailed methodology for calculation of AAM State/UT Score is submitted for consideration. The overall AAM State/UT Score shall be calculated based on achievement against four sub-indicators derived from the AAM Portal. The total score shall be computed out of 50 marks and corresponding incentive/penalty shall be applied as per approved criteria.

The detailed scoring methodology proposed is as follows in table below:

| S. No | Sub Indicator | Scoring criteria | Max Score for AAM - SHC / AAM - USHC | Max Score for AAM- PHC/AAM- UPHC | Numerator and Denominator | Remarks |
|-------|---|---|--------------------------------------|----------------------------------|--|---|
| 1. | Functional AAMs providing all 12 expanded packages of services (%) | 80% and above operational AAM with 12 packages of services | 5 | 5 | Numerator: No. of AAM Providing 12 EPS services *100 Denominator: Total no. of Operational AAM | Max. Score – 5 for each facility parameters Total 10 Marks |
| | | 70%-79% | 4 | 4 | | |
| | | 60%-69% | 3 | 3 | | |
| | | 50%-59% | 2 | 2 | | |
| | | 40%-49% | 1 | 1 | | |
| | | Less than 40% | -5 | -5 | | |
| 2. | Functional AAMs reporting at least average footfall (norm 60 footfall/1000 population) (%) • Rural: AAM - SHC @300/month; AAM- PHC @1800/month • Urban: AAM- USHC @1200/month; AAM-UPHC @3000/month • Tribal: AAM - SHC @180/month; AAM -PHC @1200/month ¹ | 80% of AAM Facilities Meet criteria as per Calculation | 5 | 5 | Numerator: No. of AAMs reporting at least average footfall as per (norm of 60 footfalls per 1000 population): • Rural: AAM-SHC @ 300/month; AAM-PHC @ 1800/month • Urban: AAM-USHC @ 1200/month; AAM-UPHC @ 3000/month • Tribal: AAM-SHC@ 180/month; AAM-PHC @ 1200/month Denominator: Number of operational AAM | Max. Score – 5+5=10 or 5 each facility parameters Total 10 Marks |
| | | 70%-79% | 4 | 4 | | |
| | | 60%-69% | 3 | 3 | | |
| | | 50%-59% | 2 | 2 | | |
| | | 40%-49% | 1 | 1 | | |
| | | Less Than 40% | -5 | -5 | | |
| 3.a | AAMs fulfilling expanded range of medicines as per essential medicine lists of Medicines² - | 80% and above availability of drugs in an operational AAM | 2.5 | 2.5 | Numerator: No. of facility having at least 80% drugs available at AAM * 100 | Max. Score – 5 Drugs – 2.5+2.5= 5 |
| | | 60% - 79% | 2 | 2 | | |

¹ Hilly states, NE states, in case of natural calamities 50% of given targets are applicable
OPD footfall, Wellness Footfall, Ayushman Arogya Shivar Footfall, Immunization, VHSND/UHSND Footfall

² Old norms as revised DO letter not received

Hilly states, NE states, in case of natural calamities 50% of given targets are applicable

| | | | | | | |
|--------------------|--|--|------------|------------|---|---|
| | AAM - SHC: 106, AAM-PHC:- 172; | 40%-59% | 1 | 1 | Denominator: Total no. of Operational AAM | Diagnostics – 2.5+2.5= 5 Total Marks – 5 each parameters |
| | | Less than 40% | -2.5 | -2.5 | | |
| 3.b | AAMs fulfilling expanded range of diagnostics as per essential diagnostic lists of Diagnostics- AAM-SHC: 14, AAM-PHC: 63) (%) | 80% and above availability of Diagnostic in an operational AAM | 2.5 | 2.5 | Numerator: No. of facility having at least 80% diagnostics available at AAM *100 | Total 10 Marks |
| | | 60%-79% | 2 | 2 | | |
| | | 40%-59% | 1 | 1 | Denominator: Total no. of Operational AAM | |
| | | Less than 40% | -2.5 | -2.5 | | |
| 4 | AAMs providing minimum of 10 wellness sessions per month (%) | Percentage of facilities conducting minimum 10 wellness sessions per month 80% to 100 % | 5 | 5 | Numerator: Number of monthly wellness sessions being conducted minimum 10 wellness session | Max. Score – 5 each parameters Total 10 Marks |
| | | 70% -79% | 4 | 4 | | |
| | | 60% - 69% | 3 | 3 | | |
| | | 50% -59% | 2 | 2 | | |
| | | 40%-49% | 1 | 1 | | |
| | | Less than 40 % | -5 | -5 | | |
| 5 | AAM – Ayushman Arogya Shivar³ - Percentage of Ayushman Arogya Shivar conducted per FY | If achievement is 80% to 100 % | 5 | 5 | Numerator – No. of Ayushman Arogya Shivar conducted *100 | Max. Score – 5 each parameters |
| | | 70% -79% | 4 | 4 | | |
| | | 60%-69% | 3 | 3 | | |
| | | 50% -59% | 2 | 2 | | |
| | | 40% - 49% | 1 | 1 | | |
| | | Less than 40% | -5 | -5 | | |
| Total Marks | | | | | | 50 |

³ Old norms as revised DO letter not received
Hilly states, NE states, in case of natural calamities 50% of given targets are applicable



Annexure 4: HRH approvals



आराधना पटनायक, भा.प्र.से.
अपर सचिव एवं मिशन निदेशक (रा.स्वा.मि.)
Aradhana Patnaik, IAS
Additional Secretary & Mission Director (NHM)



भारत सरकार
स्वास्थ्य एवं परिवार कल्याण विभाग
स्वास्थ्य एवं परिवार कल्याण मंत्रालय
Government of India
Department of Health and Family Welfare
Ministry of Health and Family Welfare

D.O.No.Z-18015/93/2025-NHM-II
Dated: 9th December, 2025

Dear Sir/Madam,

As you are aware, the National Health Mission (NHM) has been supplementing human resources as a short-to-medium term measure to strengthen health systems. As discussed in various meetings and reviews, in most States/UTs, more than half of Resource Envelope is allocated to HRH, leaving a very small portion of resources left for programmatic interventions. Moreover the planning and deployment of HR at the State and district levels remain fragmented leading to duplication and redundancy of resources. Also, a large portion of the Programme Management (PM) cost, capped at 9% or 14% of the State/UT's Resource Envelope, is currently being used for PM staff leaving fewer resources for essential supervision and monitoring activities across the State level.

It is advised to not allocate more than half of the Resource Envelope to HRH for increased use of the resources for programmatic interventions. This can be ensured through rationalisation of human resources (HR) across various programs where a post of similar nature can be optimally utilised across these programs. I would like to mention here that similar directives from the Ministry have been issued earlier regarding integration of HR across vertical programmes in pursuance of the decision of the Mission Steering Group in 2016 under which States/UTs were encouraged to adopt a health-systems approach and avoid duplication.

In light of this, States and UTs are encouraged to create posts in the regular cadre to ensure the availability of service delivery HRH as per IPHS 2022 norms and use IPHS 2022 workload norms for rationalizing the requirement of HR (including programme management staff), and standardize appraisals, increments and remuneration across all contractual NHM. You are also requested to adopt the suggestive PMU structure (enclosed at **Annexure-I**) to optimize their functioning.

The proposed structure is suggestive and the States/UTs are encouraged to reorganize the existing HR structure and redistribute the work and assign roles based on competency and educational qualification ensuring optimal utilization of resources. Further, the PM Cost ceilings should be strictly adhered and the PMU may be rationalized by dropping vacant posts and revising to Rs. if required. The key points for consideration of the exercise are enclosed as **Annexure II**.

It has also been observed that Program Management Funds in few States/UTs are used for payment of salaries for regular staff deputed under NHM. This practice is to be discontinued in future and the salaries and emoluments of the regular staff should be booked from State Budget.

I would like to reiterate that the structure is suggestive in nature and States/UTs can adapt the same based on the local context and challenges for efficient utilization of resources.

#StopObesity

रीबी हारेगा देश जीतेगा / TB Harega Desh Jeetega

Room No 343-A 3rd Floor, A-Wing, Nirman Bhawan, New Delhi-110011, Tel No +91-11-23063618 23061097
e-mail: asmd-mohfw@nic.in

For any technical support, States/UTs may reach out to MoHFW/NHSRC.

With regards.

Yours sincerely,


(Aradhana Patnaik)

To

Addl. Chief Secretary / Pr. Secretary / Secretary (Health) - All States / UTs

Copy to:-

1. Mission Directors NHM, All States / UTs
2. PSO to Secretary (H&FW)
3. JS (P)
4. DS (NHM-II)

J

Annexure 5: Summary of HRH Approvals under NHM

HRH Budget Summary for FY 2026-27

| Budget Approved under HSS Rural and Urban | (in lakhs) | |
|---|-----------------|---------------|
| | HSS Rural | HSS Urban |
| Service Delivery (SD) HRH | 2,062.24 | 309.89 |
| Programme Management (PM) HRH | 461.51 | 17.77 |
| Budget for Data Entry Operation (DEO) | 177.65 | 3.98 |
| Budget for engaging support services on outsource basis/ Support Staff at facility level (SS-F) | 21.62 | 33.67 |
| Budget for engaging support services on outsource basis/ Support Staff in Offices (SS-O) | 2.52 | - |
| Annual Increment and Rationalization budget - SD and SS-F | 96.06 | 17.08 |
| Annual Increment and Rationalization budget - PM, DEO and SS-O | 31.12 | 1.09 |
| EPF* - SD and SS-F | 80.60 | 12.74 |
| EPF* - PM, DEO and SS-O | 28.73 | 0.71 |
| Sub Total | 2,962.05 | 396.93 |
| CHO/MLHP | 344.32 | |
| Annual Increment and Rationalisation budget - CHO/MLHP | 14.52 | |
| Sub Total | 358.84 | |
| Total Budget | 3,320.89 | 396.93 |

*[Employer's contribution @ 13.36% for salaries <= Rs 15000 pm) as per letter dated 8 March 2016 – (D.O.No.G.27034-8/2015-NHM (F)]

Note: States have been requested to fund remuneration and emoluments of programme management staff on deputation from the State budget in the PIP guidelines and through D.O. letter of AS&MD dated 9th December 2025 (D.O. No. Z-18015/93/2025-NHM-II). From April 2026, expenditure for the salaries and emoluments of the regular staff should be booked from State Budget.

List of Positions under HSS Rural and Urban for FY 2026-27

| Old FMR | Name of Post | Approved posts 2025-26 | Dropped Posts 26-27 | New Posts 26-27 | Total Approved Posts 2026-27 |
|---|--------------------------------------|------------------------|---------------------|-----------------|------------------------------|
| | | (a) | (b) | (c) | (d = a - b + c) |
| S. No. 185 and 187 – HSS Rural | | | | | |
| Service Delivery/Training/Others | | | | | |
| 8.1.1.1 | ANM | 82 | 6 | | 76 |
| 8.1.1.2 | Staff Nurse | 86 | 17 | | 69 |
| 8.1.1.3.1 | Psychiatric nurse | 2 | | | 2 |
| 8.1.1.3.2 | Palliative care nurse | 2 | | | 2 |
| 8.1.1.3.3 | Community nurse | 2 | 1 | | 1 |
| 8.1.1.4 | LHV/ supervisory nurse | 5 | | | 5 |
| 8.1.1.5.1 | Lab technician | 57 | 3 | | 54 |
| 8.1.1.5.2 | Sr. Lab technician | 2 | | | 2 |
| 8.1.1.7 | Technical Officer-Viral Hep. C | 1 | | | 1 |
| 8.1.1.9 | Radiographers | 12 | | | 12 |
| 8.1.1.10 | Physiotherapist | 8 | | | 8 |
| 8.1.1.11 | Nutrition Officer | 2 | | | 2 |
| 8.1.1.11 | Asst. Nutrition Officer | 2 | | | 2 |
| 8.1.1.12 | Immunization Field Monitors | 6 | | | 6 |
| 8.1.2.1 | OBGY | 4 | | | 4 |
| 8.1.2.2 | Paediatricians | 4 | 2 | | 2 |
| 8.1.2.3 | Anaesthetists | 2 | 1 | | 1 |
| 8.1.2.4 | Ophthalmic Surgeons | 6 | 1 | | 5 |
| 8.1.2.5 | Radiologists | 2 | 2 | | 0 |
| 8.1.2.5 | Sonologists | 2 | 1 | | 1 |
| 8.1.2.6 | Pathologist | 1 | | | 1 |
| 8.1.3.1 | Physician | 6 | 2 | | 4 |
| 8.1.3.2 | Psychiatrist | 3 | 2 | | 1 |
| 8.1.3.4 | ENT Surgeon | 2 | | | 2 |
| 8.1.3.8 | Microbiologist | 2 | | | 2 |
| 8.1.3.10 | Specialist - Cardiology | 1 | | | 1 |
| 8.1.3.10 | Specialist (MD General Medicine) | 1 | | | 1 |
| 8.1.3.10 | Specialist - Cardiology (ECHO) | 1 | | | 1 |
| 8.1.4.1 | Dental Surgeon- Full time | 13 | | | 13 |
| 8.1.4.1 | Honorarium for Dental MO-Specialists | 6 | | | 6 |
| 8.1.4.3.3 | Dental Assistants part time | 13 | | | 13 |
| 8.1.5.1 | Medical Officers | 6 | 1 | | 5 |
| 8.1.6.1 | AYUSH doctors | 52 | | | 52 |
| 8.1.6.2 | AYUSH pharmacists | 28 | | | 28 |
| 8.1.6.3 | Panchakarma Therapist | 2 | 1 | | 1 |
| 8.1.7.1.1 | Medical Officers, AYUSH | 30 | | | 30 |
| 8.1.7.1.4 | ANM | 15 | | | 15 |
| 8.1.7.1.5 | Pharmacists | 15 | | | 15 |

| Old FMR | Name of Post | Approved posts 2025-26 | Dropped Posts 26-27 | New Posts 26-27 | Total Approved Posts 2026-27 |
|------------|---|------------------------|---------------------|-----------------|------------------------------|
| | | (a) | (b) | (c) | (d = a - b + c) |
| 8.1.7.2.1 | Paediatricians | 2 | | | 2 |
| 8.1.7.2.2 | Medical Officers, MBBS | 2 | 1 | | 1 |
| 8.1.7.2.3 | Medical Officers, Dental | 2 | | | 2 |
| 8.1.7.2.4 | Staff Nurse | 2 | | | 2 |
| 8.1.7.2.5 | Physiotherapist | 2 | | | 2 |
| 8.1.7.2.6 | Audiologist & speech therapist | 2 | | | 2 |
| 8.1.7.2.7 | Psychologist | 2 | | | 2 |
| 8.1.7.2.8 | Optometrist | 2 | | | 2 |
| 8.1.7.2.9 | Early interventionist cum special educator | 2 | | | 2 |
| 8.1.7.2.10 | Social worker | 2 | | | 2 |
| 8.1.7.2.11 | Lab technician | 2 | 1 | | 1 |
| 8.1.7.2.12 | Dental technician | 2 | | | 2 |
| 8.1.8.6 | IYCF Counsellors (outsourced to NGO) | Lump sum (4) | | | Lump sum (4) |
| 8.1.9.2 | Medical Officers | 4 | 1 | | 3 |
| 8.1.9.4 | Lactation Counsellor (Staff Nurse) | 3 | | | 3 |
| 8.1.13.1 | Counsellor | 44 | 5 | | 39 |
| 8.1.13.2 | Psychologist | 4 | | | 4 |
| 8.1.13.4 | Microbiologist | 2 | | | 2 |
| 8.1.13.5 | Audiologist | 2 | | | 2 |
| 8.1.13.6 | Multi Rehabilitation Workers | 6 | | | 6 |
| 8.1.13.8 | Social Worker | 4 | | | 4 |
| 8.1.13.10 | TBHV Medical College | 10 | | | 10 |
| 8.1.13.11 | Lab Assistant (under NIDDCP) | 1 | 1 | | 0 |
| 8.1.13.15 | Cold Chain & Vaccine Logistic Assistant | 1 | | | 1 |
| 8.1.13.16 | Ophthalmic Assistant | 9 | | | 9 |
| 8.1.13.17 | Storekeepers | 2 | | | 2 |
| 8.1.13.18 | Audiometric Assistant | 2 | | | 2 |
| 8.1.13.19 | Instructor for Hearing Impaired Children | 2 | | | 2 |
| 8.1.13.20 | Field Worker | 132 | 52 | | 80 |
| 8.1.13.21 | Biomedical Engineer | 2 | | | 2 |
| 8.1.14.1 | Pathologist (MD) | 1 | | | 1 |
| 8.1.15.7 | Medical Records Asst. / Case Registry Asst. | 2 | | | 2 |
| 8.1.16.2 | Cold Chain Technician-Immunization | 1 | | | 1 |
| 9.2.2 | Principal – SIHFW | 1 | | | 1 |
| 14.1.1.2 | Pharmacist – SDS | 1 | | | 1 |
| 14.1.1.2 | Store Assistant - SDS | 1 | | | 1 |
| 14.1.1.2 | District Pharmacist | 1 | | | 1 |
| 16.4.1.4.2 | Medical Officers - STC | 1 | | | 1 |



| Old FMR | Name of Post | Approved posts 2025-26 | Dropped Posts 26-27 | New Posts 26-27 | Total Approved Posts 2026-27 |
|--|--|------------------------|---------------------|-----------------|------------------------------|
| | | (a) | (b) | (c) | (d = a - b + c) |
| 16.4.1.4.2 | State Microbiologist | 1 | | | 1 |
| 16.4.1.4.2 | Entomologists | 5 | | | 5 |
| 16.4.1.4.6 | STS | 14 | | | 14 |
| 16.4.1.4.2 | State Veterinary Consultant | 1 | | | 1 |
| 16.4.1.4.2 | State Epidemiologist | 1 | | | 1 |
| 16.4.1.5.1 | State Epidemiologist - NPCDCS | 1 | | | 1 |
| 16.4.2.2.2 | District Epidemiologists | 2 | | | 2 |
| 16.4.2.3.1 | Epidemiologist/ Public Health Consultant | 5 | | | 5 |
| CHO/MLHP | | | | | |
| 8.1.12.1 | Remuneration for CHOs | 141 | | | 141 |
| Support Services – Facility Level | | | | | |
| 8.1.13.11 | Lab attendant | Lump sum (3) | | | Lump sum (3) |
| 8.1.16.3 | Multitask Worker | Lump sum (3) | 1 | | Lump sum (2) |
| 8.1.16.4 | Hospital attendants | Lump sum (2) | | | Lump sum (2) |
| 8.1.16.5 | Sanitary Attendants | Lump sum (2) | | | Lump sum (2) |
| 9.2.2 | Support Staff | Lump sum (4) | | | Lump sum (4) |
| 14.1.1.2 | Peon/Hamal | Lump sum (1) | | | Lump sum (1) |
| Programme Management | | | | | |
| 8.1.13.22 | Technical supervisor | 3 | | | 3 |
| 8.1.13.22 | Male Supervisor | 1 | | | 1 |
| 8.1.13.22 | Female supervisor | 1 | | | 1 |
| 9.2.2 | Consultant | 1 | | | 1 |
| 9.2.2 | Secretarial Assistant | 1 | | | 1 |
| 9.2.2 | Accountant cum Cashier | 1 | | | 1 |
| 16.2.1 | Legal Assistant | 1 | | | 1 |
| 16.2.1 | Technical officers | 3 | | | 3 |
| 16.2.1 | Demographer | 3 | | | 3 |
| 16.2.1 | Program Coordinator | 1 | | | 1 |
| 16.4.1.1 | Director Finance | 1 | 1 | | 0 |
| 16.4.1.1 | State Finance Manager | 1 | 1 | | 0 |
| 16.4.1.1 | Technical Officer | 1 | 1 | | 0 |
| 16.4.1.1 | Statistical officer | 1 | 1 | | 0 |
| 16.4.1.1 | LDC Typist | 1 | 1 | | 0 |
| 16.4.1.3.1 | State Programme Manager | 1 | | | 1 |
| 16.4.1.3.1 | State Accounts Manager | 1 | | | 1 |
| 16.4.1.3.1 | State Data Manager | 1 | | | 1 |
| 16.4.1.3.2 | IEC Officer | 1 | | | 1 |
| 16.4.1.3.2 | Consultants MH | 1 | | | 1 |
| 16.4.1.3.2 | Consultants CH | 1 | | | 1 |
| 16.4.1.3.2 | Consultants School Health | 1 | | | 1 |
| 16.4.1.3.2 | Consultants ARSH | 1 | | | 1 |
| 16.4.1.3.2 | State consultant QA | 1 | | | 1 |

| Old FMR | Name of Post | Approved posts 2025-26 | Dropped Posts 26-27 | New Posts 26-27 | Total Approved Posts 2026-27 |
|-------------|---|------------------------|---------------------|-----------------|------------------------------|
| | | (a) | (b) | (c) | (d = a – b + c) |
| 16.4.1.3.4 | State Administrative Officer | 1 | | | 1 |
| 16.4.1.3.4 | Secretarial Assistant | 2 | | | 2 |
| 16.4.1.3.6 | Social scientist cum PO (RKSK) | 1 | | | 1 |
| 16.4.1.3.6 | M&E assistant | 1 | | | 1 |
| 16.4.1.3.6 | Data Assistant | 1 | | | 1 |
| 16.4.1.3.7 | IEC Supervisors | 10 | | | 10 |
| 16.4.1.3.8 | Accountants | 2 | | | 2 |
| 16.4.1.3.12 | VCCM | 2 | | | 2 |
| 16.4.1.4.1 | Project Co-ordinator (Viral Hep) | 1 | | | 1 |
| 16.4.1.4.2 | Consultant - Training/ Technical | 1 | | | 1 |
| 16.4.1.4.2 | Consultant-Finance/ Procurement | 1 | | | 1 |
| 16.4.1.4.2 | State IEC Officer/ ACSM Officer | 1 | | | 1 |
| 16.4.1.4.2 | Technical officer | 1 | | | 1 |
| 16.4.1.4.2 | APO | 1 | | | 1 |
| 16.4.1.4.4 | TB HIV Coordinator | 1 | | | 1 |
| 16.4.1.4.4 | District Program Coordinator | 2 | | | 2 |
| 16.4.1.4.5 | State Data Manager | 2 | | | 2 |
| 16.4.1.4.5 | Statistical Assistant | 1 | | | 1 |
| 16.4.1.4.6 | STLS | 5 | | | 5 |
| 16.4.1.4.7 | Accounts Officer/ State Accountant | 2 | | | 2 |
| 16.4.1.4.8 | Admin. Asst. | 1 | | | 1 |
| 16.4.1.4.8 | Secretarial asst | 1 | | | 1 |
| 16.4.1.5.2 | Consultant - NPPCD | 1 | | | 1 |
| 16.4.1.5.2 | Legal/finance consultant - NTCP | 1 | | | 1 |
| 16.4.1.5.2 | Consultant for Climate Change | 1 | | | 1 |
| 16.4.1.5.2 | Fin. Cum Logistic Consultant - NPCDCS | 1 | | | 1 |
| 16.4.1.5.4 | State Program Coordinator (MBBS) - NPCDCS | 1 | | | 1 |
| 16.4.1.5.7 | Accounts Staff- NCD (Supplementary 2021-22) | 1 | | | 1 |
| 16.4.1.5.7 | Administrative Assistant | 1 | | | 1 |
| 16.4.1.5.8 | Administrative Staff | 1 | | | 1 |
| 16.4.2.1.1 | DEIC Manager | 2 | | | 2 |
| 16.4.2.1.2 | District Consultant (QA) | 2 | | | 2 |
| 16.4.2.1.3 | Programme cum administrative assistant (QA) | 2 | | | 2 |
| 16.4.2.1.7 | District Accounts Managers | 2 | | | 2 |
| 16.4.2.1.8 | District Data Manager | 2 | | | 2 |
| 16.4.2.2.4 | District PPM Coordinator | 2 | | | 2 |
| 16.4.2.2.4 | PMDT Supervisor | 2 | | | 2 |
| 16.4.2.2.5 | District data manager | 2 | | | 2 |
| 16.4.2.2.7 | Accountant | 1 | | | 1 |
| 16.4.2.3.2 | District Consultant | 1 | | | 1 |

| Old FMR | Name of Post | Approved posts 2025-26 | Dropped Posts 26-27 | New Posts 26-27 | Total Approved Posts 2026-27 |
|--|--|------------------------|---------------------|-----------------|------------------------------|
| | | (a) | (b) | (c) | (d = a - b + c) |
| 16.4.2.3.2 | District Finance cum Logistic Consultant | 1 | | | 1 |
| 16.4.2.3.4 | District Program Coordinator | 1 | | | 1 |
| 16.4.3.1.7 | Accountants | 12 | | | 12 |
| 16.4.3.1.8 | Programme cum administrative assistant QA | 1 | | | 1 |
| 16.4.3.3.11 | Monitoring & Evaluation (M&E) Officer- HWC | 1 | | | 1 |
| Data Entry Operation | | | | | |
| 8.1.9.6 | Computer Assistants | Lump sum (3) | | | Lump sum (3) |
| 9.2.2 | Computer Assistant | Lump sum (3) | | | Lump sum (3) |
| 16.2.1 | DEO | Lump sum (3) | | | Lump sum (3) |
| 16.3.1 | Data assistants/ M&E DEOs | Lump sum (33) | | | Lump sum (33) |
| 16.4.1.3.10 | Computer Assistants | Lump sum (3) | | | Lump sum (3) |
| 16.4.1.4.9 | DEO | Lump sum (10) | | | Lump sum (10) |
| 16.4.1.5.9 | Data Entry Operation | Lump sum (2) | | | Lump sum (2) |
| 16.4.2.1.9 | Data entry operator | Lump sum (5) | | | Lump sum (5) |
| 16.4.2.2.9 | Data entry operator | Lump sum (5) | | | Lump sum (5) |
| 16.4.2.3.9 | DEO | Lump sum (7) | | | Lump sum (7) |
| Support Services – PMU/ Offices | | | | | |
| 16.4.1.3.11 | Multi-Tasking Staff (MTS) | Lump sum (1) | | | Lump sum (1) |
| 16.4.2.2.10 | Driver | Lump sum (1) | | | Lump sum (1) |
| S. No. 142 – HSS Urban | | | | | |
| Service Delivery/Training/Others | | | | | |
| U.8.1.1.1 | ANM | 32 | 3 | | 29 |
| U.8.1.2.1 | Staff Nurse | 32 | 17 | | 15 |
| U.8.1.3.1 | Lab technician | 4 | | | 4 |
| U.8.1.4.1 | Pharmacists | 4 | | | 4 |
| U.8.1.8.1.1 | Medical Officers - Full Time | 32 | 5 | | 27 |
| Support Services – Facility Level | | | | | |
| U.8.1.5.3 | Support Staff | Lump sum (32) | | | Lump sum (32) |
| Programme Management | | | | | |
| U.16.4.1.1 | Program Coordinator | 1 | | | 1 |
| U.16.4.1.1 | M&E Officer | 1 | | | 1 |
| U.16.4.2.1 | DAM | 2 | | | 2 |
| Data Entry Operation | | | | | |
| U.8.1.10.1 | LDC | Lump sum (2) | | | Lump sum (2) |
| U.16.4.1.1 | Data entry operator | Lump sum (1) | | | Lump sum (1) |
| U.16.4.2.1 | DEO | Lump sum (2) | | | Lump sum (2) |

Since the budget share of HRH on Resource Envelope is high, vacant posts under NHM have been dropped.

HRH Budget Summary and List of Positions under TeleMANAS (S. No. 98)

| | |
|--|-------------------------------------|
| Number of TeleMANAS Cells | 1 |
| HRH Budget Approved (in lakhs) | Rs. 105.13/- |
| HRH Posts | Total Approved Posts 2026-27 |
| Senior Consultant (MD / DNB / Diploma in Psychiatry + min 3 years' experience) | 1 |
| Consultant (MD/ DNB/ Diploma in Psychiatry) | 1 |
| Clinical Psychologist | 1 |
| Psychiatric Social Worker | 1 |
| Psychiatric Nurse | 0 |
| Counsellor | 10 |
| Technical Coordinator/ Project Coordinator | 1 |
| Data Entry Operator | 1 |
| Attenders | 1 |

* EPF (Employer's contribution) @ 13.36% is recommended for staff drawing salary \leq Rs 15000 pm as on/ after 1st April 2015. The State Administrative Officer looking after salary must ensure proper calculation and disbursement as mentioned in JS (P)'s letter dated 8 March 2016 (D.O.No.G.27034-8/2015-NHM (F)).



Annexure 6: Pool Wise Summary (RoP 2026-27)

| FY 2026-27 | Budget Proposed | Budget Approved |
|--|------------------|------------------|
| | (in Lakhs) | (in Lakhs) |
| RCH Flexible Pool (including RI, IPPI, NIDDCP) | 805.07 | 778.56 |
| NDCP Flexible Pool (RNTCP, NVHCP, NVBDCP, NLEP, IDSP, NRCP, PPCL) | 753.78 | 735.77 |
| NCD Flexible Pool (NPCB&VI, NMHP, NPHCE, NTCP, NPCDCS, PMNDP, NPPCCHH) | 1,735.13 | 1,716.94 |
| NUHM Flexible Pool | 521.99 | 420.67 |
| Health System Strengthening (HSS) under NRHM | 7,079.11 | 6,825.53 |
| Sub Total | 10,895.08 | 10,477.47 |
| Infrastructure Maintenance (IM) | 822.00 | 822.00 |
| Kind Grants | 1,301.00 | 1,301.00 |
| Grand Total (including IM & kind grants) | 13,018.08 | 12,600.47 |

| S No. | Pool | Proposed Amount (in Lakhs) | Approved Amount (in Lakhs) # | Pool - wise approved as % of total approved |
|-------|----------------------------------|----------------------------|------------------------------|---|
| 1 | Capacity Building / Training | 152.19 | 150.24 | 1.43% |
| 2 | IEC | 263.54 | 165.66 | 1.58% |
| 3 | IT Interventions | 168.10 | 161.15 | 1.54% |
| 4 | Innovations | 4.00 | 4.00 | 0.04% |
| 5 | Drugs | 784.54 | 773.33 | 7.38% |
| 6 | Diagnostics | 503.81 | 490.31 | 4.68% |
| 7 | HRH | 4,172.46 | 3,976.62 | 37.95% |
| 8 | Programme Management Activities* | 311.45 | 286.95 | 2.74% |
| 9 | RCH | 510.71 | 484.18 | 4.62% |
| 10 | NDCP | 415.19 | 415.19 | 3.96% |
| 11 | NCD | 1,601.79 | 1,584.32 | 15.12% |
| 12 | HSS | 2,007.30 | 1,985.52 | 18.95% |
| | Total | 10,895.08 | 10,477.47 | 100.00% |

Excluding IM & KG Grants

* The total PM Cost approved is Rs. 920.11 Lakhs, which is 11.11% of RE.

Annexure 7: PIP Proposals

(Amount in Lakhs)

| FMR Code | Programme/ Theme | S. No. | Scheme/ Activity | Amount Proposed FY 26-27 | Amount Approved FY 26-27 | GoI Remarks for RoP |
|----------|------------------|--------|---|--------------------------|--------------------------|--|
| RCH.1 | Maternal Health | 1 | Village Health Sanitation & Nutrition Days (VHSNDs) | 11.80 | 11.80 | Approved Rs. 11.80 Lakhs for the following: 1. OOC (On Going Activity): Rs. 11.80 Lakhs for a. Rs. 10.00 lakhs for conducting VHSNDs @ Rs. 150/VHSND for 6667 VHSNDs b. Rs. 1.80 lakhs for conducting outreach camps @ Rs. 500 per camp for 360 camps. |
| | | 2 | Pregnancy Registration and Ante-Natal Checkups | - | - | |
| | | 3 | Janani Suraksha Yojana (JSY) | 3.80 | 3.80 | Approved Rs. 3.80 Lakhs for the following: 1. DBT (On Going Activity): Rs. 3.80 Lakhs for a. Rs. 3.50 lakh for 500 number of Rural institutional deliveries @ Rs 700 per case b. Rs. 0.30 lakh for 50 number of Urban institutional deliveries @ Rs 600 per case. To ensure transparency in all kinds of financial transactions; 100% e-payment are to be done using SNA-SPARSH in the accounts. State also needs to ensure that DBT beneficiaries are 100% biometric Aadhaar authenticated and the 100% Aadhaar Based Payments is done into their Aadhaar linked bank/Post office account. |
| | | 4 | Janani Shishu Suraksha Karyakram (JSSK) (excluding transport) | 176.50 | 176.50 | Approved Rs. 176.50 Lakhs for the following: 1. Drugs (On Going Activity): Rs. 87.50 Lakhs for a. Rs. 83.00 Lakhs for drugs and consumables for 10,000 deliveries (7,000 normal deliveries + 3,000 C-sections.) @ Rs. 500/- per normal delivery (Rs 500 X 7000= 35,00,000/- & Rs. 1,600/- per C-section , Rs.1600 x 3000 = Rs. 48,00,000/) b. Rs. 4.50 Lakhs for blood transfusion under JSSK @ Rs. 300 per case for 1500 cases . 2. Diagnostics (On Going Activity): |

| FMR Code | Programme/ Theme | S. No. | Scheme/ Activity | Amount Proposed FY 26-27 | Amount Approved FY 26-27 | GoI Remarks for RoP |
|----------|------------------|--------|---|--------------------------|--------------------------|--|
| | | | | | | Rs. 26.00 Lakhs for procurement of diagnostic test kits, reagents and consumables (such as vacutainers) @ Rs. 200 per case for 13,000 cases. 3. OOC (On Going Activity): Rs. 63.00 Lakhs for a. Rs. 31.50 Lakhs for diet for normal deliveries @ Rs. 150 per day for 3 days (Rs. 450 × 7,000 = Rs. 31,50,000). b. Rs. 31.50 Lakhs for diet for C-section deliveries @ Rs. 150 per day for 7 days (Rs. 1,050 × 3,000 = Rs. 31,50,000). |
| | | 5 | Janani Shishu Suraksha Karyakram (JSSK) - Transport | 30.00 | 30.00 | Approved Rs. 30.00 Lakhs for the following: 1. OOC (On Going Activity): Rs. 30.00 Lakhs for JSSK transport @ Rs.500 per trip (one way) for 6000 PW. |
| | | 6 | Pradhan Mantri Surakshit Matritva Abhiyan (PMSMA) | 8.20 | 8.20 | Approved Rs. 8.20 Lakhs for the following: 1. DBT (On Going Activity): Rs. 7.80 Lakhs for incentives for high-risk pregnant women for attending extended PMSMA sessions @ Rs. 100 per visit for 3 visits for 2,600 high risk pregnancies (Rs. 300/- X 2600 = 7,80,000) 2. OOC (On Going Activity): Rs. 0.4 Lakh for 4 awareness sessions per year per centre for 40 centres @ Rs. 250/- per awareness session = 250*4*40 = 0.4 Lakh. |
| | | 7 | Surakshit Matritva Aashwasan (SUMAN) | 0.10 | 0.10 | Approved Rs. 0.10 Lakh for the following: 1. DBT (On Going Activity): Rs. 0.10 Lakh for incentive for reporting of maternal death in the community @Rs. 1000/- per reporting for 10 cases. |
| | | 8 | Midwifery | - | - | |
| | | 9 | Maternal Death Review | 0.33 | 0.33 | Approved Rs. 0.33 Lakh for the following: 1. OOC (On Going Activity): Rs. 0.33 lakhs for a. Rs. 0. 16 Lakh for four quarterly meetings @ 2000 per meeting per district for two districts. (This is a PM activity. Expenditure to be booked under S.No. 194) b. Rs. 0.08 Lakh for quarterly review |

| FMR Code | Programme/ Theme | S. No. | Scheme/ Activity | Amount Proposed FY 26-27 | Amount Approved FY 26-27 | GoI Remarks for RoP |
|----------|------------------|--------|-----------------------------|--------------------------|--------------------------|---|
| | | | | | | meetings of the Confidential Committee for maternal deaths @ Rs. 2,000/ meeting. 3. Rs. 0.09 Lakh as incentive for 20 cases to be audited @Rs. 450/- per case. |
| | | 10 | Comprehensive Abortion Care | 1.50 | 1.50 | Approved Rs. 1.50 Lakhs for the following: 1. Drugs (On Going Activity): Rs. 1.50 Lakhs for procurement of 1000 MMA combi pack Kit @ Rs. 150/- per MMA Kit. State to ensure: i. Procurement should be done through State MSCL or open tender process following the L1 rate and State procurement norms to be followed. ii. Availability of MVA/EVA equipment for provision of surgical abortion services at facilities iii. Availability of MTP formats as per the mandate of the Medical Termination of Pregnancy Act, 1971 at the facilities providing Comprehensive Abortion Care services. |
| | | 11 | MCH Wings | - | - | |
| | | 12 | FRUs | - | - | |
| | | 13 | HDU/ICU - Maternal Health | - | - | |
| | | 14 | Labour Rooms (LDR + NBCCs) | - | - | |
| | | 15 | LaQshya | 26.49 | 26.49 | Approved Rs. 26.49 Lakhs for the following: 1. Equipment (On Going Activity): Rs. 4.19 Lakhs for a. Rs. 3.91 Lakhs for procurement of equipment for labour room / MoT of SDH Chicalim. The cost of equipment has been vetted against the NHSRC costing database and is found to be competitive and reasonable. Equipment are as per IPHS 2022. b. Rs. 0.28 Lakh for procurement of equipment for LR / MoT of SDH Ponda. The cost of equipment has been vetted against the NHSRC costing database and is found to be competitive and reasonable. Equipment is as per the IPHS 2022. 2. OOC (On Going Activity): Rs. 22.30 Lakhs for |



| FMR Code | Programme/ Theme | S. No. | Scheme/ Activity | Amount Proposed FY 26-27 | Amount Approved FY 26-27 | GoI Remarks for RoP |
|----------|------------------|--------|--|--------------------------|--------------------------|--|
| | | | | | | a. Rs. 0.30 Lakh LaQshya State surveillance assessment of Goa Medical College, @ Rs. 30,000/- b. Rs. 22.00 Lakhs for LaQshya Incentive for already National LaQshya certified facilities. i. Rs. 12.00 Lakhs for Goa Medical College (LR & MOT) ii. Rs 6.00 Lakhs for SGDh (LR & MoT) iii. Rs. 4.00 Lakhs for SDH Chicalim (LR & MOT). |
| | | 16 | Implementation of RCH Portal/ANMOL/ MCTS | | | |
| | | 17 | Other MH Components | 2.40 | 2.40 | Approved Rs. 2.40 Lakhs for the following: 1. Diagnostics (On Going Activity): Rs. 2.40 Lakhs for procurement of 8,000 dual test kits for (RDTs) for HIV and syphilis @ Rs. 30/- per kit, |
| | | 18 | State specific Initiatives and Innovations | | | |
| RCH.2 | PC & PNDT Act | 19 | PC & PNDT Act | - | - | |
| | | 20 | Gender Based Violence & Medico Legal Care For Survivors Victims of Sexual Violence | - | - | |
| RCH.3 | Child Health | 21 | Rashtriya Bal Swasthya Karyakram (RBSK) | 49.17 | 47.90 | Approved Rs. 47.90 Lakhs for the following: 1. Equipment (On Going Activity): Rs. 2.18 Lakhs towards purchase of screening equipment for 15 MHTs @ Rs. 14,540/- per MHT. 2. OOC (On Going Activity): Rs. 45.72 Lakhs for a. Rs 45.00 Lakhs towards mobility support for 15 MHT for 12 months @ Rs 25000 / team / month. b. Rs 0.72 lakh towards CUG support for 15 MHT for 12 months @ Rs 400 / team / month. |
| | | 22 | RBSK at Facility Level including District Early Intervention | 158.85 | 137.39 | Approved Rs. 137.39 Lakhs for the following: 1. Equipment (On Going Activity): Rs. 49.74 Lakhs for |



| FMR Code | Programme/ Theme | S. No. | Scheme/ Activity | Amount Proposed FY 26-27 | Amount Approved FY 26-27 | GoI Remarks for RoP |
|----------|------------------|--------|------------------------------------|--------------------------|--------------------------|--|
| | | | Centers (DEIC) | | | <p>a. Rs. 24.74 Lakhs for equipment for South Goa DEIC (Optional equipment for Occupational therapy, Psychology, Sensory room etc.) and North Goa DEIC (vision equipment). Discovered cost of INR 31.30 Lakhs for procurement of DEIC equipment at DH North Goa & DH South Goa has been vetted against the NHSRC costing database. The State is suggested to procure the items through GeM bidding. The total eligible cost is INR 24.739 Lakhs.</p> <p>b. Rs. 25.00 Lakhs for 3D Echocardiography machine at Goa Medical College. Cost has been vetted against the NHSRC costing database and is found to be on higher side. The eligible unit cost is INR 25 Lakhs and is available on GeM.</p> <p>2. OOC (On Going Activity): Rs. 87.65 Lakhs for</p> <p>a. Rs. 2.00 Lakhs towards operational cost of 2 DEIC @ 1 lakh per DEIC.</p> <p>b. Rs. 85.65 Lakhs towards referral support for secondary/tertiary care for surgical intervention for 76 children for selected health conditions.</p> |
| | | 23 | Community Based Care - HBNC & HBYC | 0.80 | 0.80 | <p>Approved Rs. 0.80 Lakh for the following:</p> <p>1. Equipment (On Going Activity): Rs. 0.80 Lakh for</p> <p>a. Rs. 0.40 Lakh for new HBNC kits for 40 ASHAs @1000/- per kit</p> <p>b. Rs. 0.40 Lakh for new HBYC kits for 40 ASHAs @1000/- per kit</p> |
| | | 24 | Facility Based New born Care | 24.91 | 22.72 | <p>Approved Rs. 22.72 Lakhs for the following:</p> <p>1. OOC (On Going Activity): Rs. 22.72 lakhs for</p> <p>a. Rs. 12.00 Lakhs for operational cost for 3 SNCUs @ Rs. 4 lakh per SNCU as per FBNC Op guideline. State to book the expenditure as per actual.</p> <p>b. Rs. 1.00 Lakh for operational cost of 2 NBSUs @ Rs. 0.50 lakh per NBSU. State to book the expenditure as per actual.</p> <p>c. Rs. 0.09 Lakh for operational cost of 9 NBCCs @ Rs. 0.01 lakh per NBCC. State to book the expenditure as per</p> |



| FMR Code | Programme/ Theme | S. No. | Scheme/ Activity | Amount Proposed FY 26-27 | Amount Approved FY 26-27 | GoI Remarks for RoP |
|----------|------------------|--------|--------------------|--------------------------|--------------------------|--|
| | | | | | | actual. d. Rs. 0.50 Lakh for MusQan Surveillance assessment as per norms for the already certified facility. e. Rs. 9.00 Lakhs for MusQan incentives for 1 DH for 3 departments @ 3L. f. Rs. 0.13 Lakhs for 2 breastfeeding simulator @ Rs 6500 per mannequins for SDH Ponda. |
| | | 25 | Child Death Review | 0.98 | 0.98 | Approved Rs. 0.98 Lakh for the following: 1. OOC (On Going Activity): Rs. 0.08 Lakh for DM / CMHO level meeting - Four quarterly meetings @ 2000 per meeting. 2. SRAE (On Going Activity): Rs. 0.90 Lakh for a. Rs. 0.04 Lakh for ANM honorarium to conduct FBIR of 40 Under 5 Deaths at Community / Non-FRU level / Private Facilities @ Rs. 100 each. b. Rs. 0.20 Lakh for Team based incentive to MOs to conduct Verbal Autopsy of 40 Under 5 Deaths at Community / Non-FRU level / Private Facilities @ Rs. 500 each c. Rs. 0.036 Lakh for Transport of parents to attend DM/CMHO level Review meeting @ Rs. 100 each for 36 Parents of Deceased children. Rs. 0.054 Lakh for Printing of CDR formats (90 sets @ Rs. 60 each) d. Rs. 0.57 Lakh for Orientation cum Training on CDR and Stillbirth Mechanism. |
| | | 26 | SAANS | 0.00 | 8.00 | Approved Rs. 8.00 Lakhs for the following: (Shifted from RCH 7.58 to RCH 3.26) 1. Drugs (On Going Activity): Rs. 8.0 Lakh for procurement of ORS and Zinc for STOP Diarrhoea 2026 Campaign as per following details: a. Rs. 5.00 Lakhs for procurement of ORS packets [Total Quantity: 200000 @ Rs. 2.5 each] b. Rs. 3.00 Lakhs for procurement of Zinc [Total Quantity: 1400000 @ Rs. 0.214 each] |
| | | 27 | Paediatric Care | - | - | |
| | | 28 | Janani Shishu | 4.50 | 4.50 | Approved Rs. 4.50 Lakhs for the |



| FMR Code | Programme/ Theme | S. No. | Scheme/ Activity | Amount Proposed FY 26-27 | Amount Approved FY 26-27 | GoI Remarks for RoP |
|----------|------------------|--------|---|--------------------------|--------------------------|---|
| | | | Suraksha Karyakram (JSSK) (excluding transport) | | | <p>following:</p> <p>1. Drugs (On Going Activity): Rs. 3.00 Lakhs under JSSK consumable and drugs @ Rs.200 for 1500 children.</p> <p>2. Diagnostics (On Going Activity): Rs. 1.50 Lakhs under JSSK diagnostics for sick infants @ Rs. 100 for 1500 children.</p> <p>The budget is normative, state to follow GoI JSSK guideline and book the expenditure as per actual and ensure reporting.</p> |
| | | 29 | Janani Shishu Suraksha Karyakram (JSSK) - Transport | 11.25 | 11.25 | <p>Approved Rs. 11.25 Lakhs for the following:</p> <p>1. OOC (On Going Activity): Rs. 11.25 Lakhs under JSSK referral transport (to and fro) for 1500 sick infants up to one year of age @ Rs. 750/- per sick infant.</p> <p>The budget is normative, state to follow GoI JSSK guideline and book the expenditure as per actual and ensure reporting.</p> |
| | | 30 | Other Child Health Components | - | - | |
| | | 31 | State specific Initiatives and Innovations | | | |
| RCH.4 | Immunization | 32 | Immunization including Mission Indradhanush | 61.72 | 61.72 | <p>Approved Rs. 61.72 Lakhs for the following:</p> <p>1. OOC (On Going Activity): Rs. 61.72 Lakhs for</p> <p>a. Rs. 2.00 Lakhs for Focus on slums @ Rs. 1400 for 12 slum.</p> <p>b. Rs. 0.78 Lakh for Mobility support to vaccinator @ Rs.650 / Sub center.</p> <p>c. Rs. 3.88 Lakhs for AVD @ Rs. 90 for 4320 sessions.</p> <p>d. Rs. 0.50 Lakh for Refrigerated vaccine van maintenance.</p> <p>e. Rs. 2.00 Lakhs for POL vaccine van.</p> <p>f. Rs. 1.50 Lakhs for Procurement of spare parts of cold chain equipment (1 SVS).</p> <p>g. Rs. 2.00 Lakhs for Procurement of spare parts of cold chain equipment for CCPs @ Rs. 1 Lakh / District.</p> <p>h. Rs. 0.36 Lakh for Red / Black / Blue bag @ Rs. 3/bag for 3 bags for 4000 sessions.</p> |



| FMR Code | Programme/ Theme | S. No. | Scheme/ Activity | Amount Proposed FY 26-27 | Amount Approved FY 26-27 | GoI Remarks for RoP |
|----------|-------------------|--------|--|--------------------------|--------------------------|---|
| | | | | | | <p>i. Rs. 3.75 Lakhs for Hub cutter/ Anaphylaxis kit @ Rs. 1500/PHC/CHC.</p> <p>j. Rs. 2.00 Lakhs for Operational expenses @ Rs. 5000 for 40 centers.</p> <p>k. Rs. 22.88 Lakhs for HPV Campaign.</p> <p>l. Rs. 20.07 Lakhs for QMS for AEFI Surveillance.</p> |
| | | 33 | Pulse Polio Campaign | 10.21 | 10.21 | <p>Approved Rs. 10.21 Lakhs for the following:</p> <p>1. OOC (On Going Activity): Rs. 10.21 Lakhs towards Pulse Polio Campaign.</p> |
| | | 34 | eVIN Operational Cost | 11.30 | 11.30 | <p>Approved Rs. 11.30 Lakhs for the following:</p> <p>1. OOC (On Going Activity): Rs. 11.30 Lakhs for</p> <p>a. Rs. 1.69 Lakhs for Data Sim Cards for CCH and vaccine store handlers.</p> <p>b. Rs. 2.52 Lakhs for Data Sim Cards for Temperature Loggers.</p> <p>c. Rs. 0.07 Lakh for Data and Voice SIM Cards for Project Staff / VCCM. (This is a PM activity. Expenditure to be booked under S. No. 194)</p> <p>d. Rs. 0.06 Lakh for Laptop Maintenance Cost (This is a PM activity. Expenditure to be booked under S. No. 194)</p> <p>e. Rs. 2.16 Lakhs for Replacement of Temperature loggers against loss / damage of sensor / charger etc.</p> <p>f. Rs. 2.40 Lakhs for Travel cost for VCCM (This is a PM activity. Expenditure to be booked under S. No. 194)</p> <p>g. Rs. 2.40 Lakhs for Training on eVIN, UWIN, Cold Chain Management, temperature Loggers for RI Nodal Officers, PHN / LHV, ANMs @ Rs. 40,000/- per batch for 6 batches.</p> |
| RCH.5 | Adolescent Health | 35 | Adolescent Friendly Health Centers (AFHCs) | 8.75 | 8.75 | <p>Approved Rs. 8.75 Lakhs for the following:</p> <p>1. OOC (On Going Activity): Rs. 8.75 Lakhs for</p> <p>a. Rs. 6.25 Lakhs for mobility support of 34 Counsellors @ Rs. 200/ visit for 8 outreach visits / month for 12 months.</p> |



| FMR Code | Programme/ Theme | S. No. | Scheme/ Activity | Amount Proposed FY 26-27 | Amount Approved FY 26-27 | GoI Remarks for RoP |
|----------|------------------|--------|--|--------------------------|--------------------------|---|
| | | | | | | b. Rs 2.22 Lakhs for communication support of 37 AH Counsellor @ Rs 500/- per month for 12 months. |
| | | 36 | Weekly Iron Folic Acid Supplementation (WIFS) | 63.80 | 63.80 | Approved Rs. 63.80 Lakhs for the following: 1. Drugs (On Going Activity): Rs. 63.80 Lakhs for procurement of prophylactic doses of weekly blue IFA supplementation for 148723 adolescent boys and girls @ Rs 0.75 / tablet for 52 weeks. |
| | | 37 | Menstrual Hygiene Scheme (MHS) | 5.68 | 5.68 | Approved Rs. 5.68 Lakhs for the following: 1. Drugs (On Going Activity): Rs 5.68 Lakhs for procurement of sanitary napkins for target 4300 adolescent girls @ Rs 1/ sanitary napkin for 120 sanitary napkins / AG / Year with 10% buffer. |
| | | 38 | Peer Education Programme | 3.57 | 2.21 | Approved Rs. 2.21 Lakhs for the following: 1. OOC (On Going Activity): Rs 0.17 Lakh for Rewards & recognition in non-monetary forms for 34 PEs @ Rs. 500/ PE. 2. SRAE (On Going Activity): Rs. 2.04 Lakhs for Organizing AFC Meetings @ Rs. 500 / meeting / month in 34 AAM-HSC for 12 months. |
| | | 39 | School Health And Wellness Program under Ayushman Bharat | 0.17 | 0.17 | Approved Rs. 0.17 Lakhs for the following: 1. OOC (On Going Activity): Rs 0.17 Lakh for Rewards & recognition in non-monetary forms for 34 HWAs @ Rs. 500/- per HWA. |
| | | 40 | Other Adolescent Health Components | - | - | |
| | | 41 | State specific Initiatives and Innovations | | | |
| RCH.6 | Family Planning | 42 | Sterilization - Female | 5.55 | 5.55 | Approved Rs. 5.55 Lakhs for the following: 1. DBT (On Going Activity): Rs 5.55 Lakhs for a. Rs. 1.00 Lakh for 100 female Sterilization (BPL @ Rs. 1000 per case) b. Rs. 4.55 Lakhs for 700 female Sterilization (APL @ Rs. 650 per case) |
| | | 43 | Sterilization - | 0.15 | 0.15 | Approved Rs. 0.15 Lakh for the |



| FMR Code | Programme/ Theme | S. No. | Scheme/ Activity | Amount Proposed FY 26-27 | Amount Approved FY 26-27 | GoI Remarks for RoP |
|----------|------------------|--------|--|--------------------------|--------------------------|---|
| | | | Male | | | following: 1. DBT (On Going Activity): Rs. 0.15 Lakh for 10 cases of male sterilization @ Rs. 1,500 per case. |
| | | 44 | IUCD Insertion (PPIUCD and PAIUCD) | 2.16 | 2.16 | Approved Rs. 2.16 Lakhs for the following: 1. DBT (On Going Activity): Rs. 0.81 Lakh for a. Rs. 0.60 Lakh for 200 PPIUCD cases @ Rs. 300 / beneficiary / insertion. b. Rs. 0.21 Lakh for 70 PAIUCD cases @ Rs. 300 / beneficiary / insertion. 2. Equipment (On Going Activity): Rs. 1.35 Lakhs for procurement of 30 PPIUCD Kits @ Rs. 4,500 per kit. |
| | | 45 | ANTARA | - | - | |
| | | 46 | MPV (Mission Parivar Vikas) | - | - | |
| | | 47 | Family Planning Indemnity Scheme | 3.00 | 3.00 | Approved Rs. 3.00 Lakhs for the following: 1. DBT (On Going Activity): Rs. 3.00 Lakhs under Family Planning Indemnity Scheme (FPIS) as per Norms. |
| | | 48 | FPLMIS | - | - | |
| | | 49 | World Population Day and Vasectomy Fortnight | - | - | |
| | | 50 | Other Family Planning Components | - | - | |
| | | 51 | State specific Initiatives and Innovations | | | |
| RCH.7 | Nutrition | 52 | Anaemia Mukh Bharat | 87.68 | 87.70 | Approved Rs. 87.70 Lakhs for the following: 1. Drugs (On Going Activity): Rs. 77.50 Lakhs for a. Rs 21.60 Lakhs for procurement of 2 prophylactic IFA syrup bottles for 71860 children 6-59 months @ Rs 15/bottle b. Rs 43.00 Lakhs for procurement of 52 prophylactic IFA pink tablets for 110380 children 5-9 years @ Rs 0.75/tablet c. Rs 12.90 Lakhs for procurement of 90 folic acid tablets for 14300 PW @ |



| FMR Code | Programme/ Theme | S. No. | Scheme/ Activity | Amount Proposed FY 26-27 | Amount Approved FY 26-27 | GoI Remarks for RoP |
|----------|---|--------|--|--------------------------|--------------------------|--|
| | | | | | | Rs 1/tablet. 2. OOC (On Going Activity): Rs 10.20 Lakhs for organizing 340 T4 camps for Hb testing at 10 camps per Health Facility @ Rs 3000/camp |
| | | 53 | National Deworming Day | 17.70 | 17.70 | Approved Rs. 17.70 Lakhs for the following: 1. Drugs (On Going Activity): Rs. 16.00 Lakhs for procurement of 400000 albendazole tablets for children 1-19 years for Bi-annual NDD rounds @Rs 2/tablet. 2. OOC (On Going Activity): Rs 1.70 Lakhs for facility level supportive supervision of bi-annual NDD rounds @ Rs 2500 / facility |
| | | 54 | Nutritional Rehabilitation Centers (NRC) | - | - | |
| | | 55 | Vitamin A Supplementation | - | - | |
| | | 56 | Mother's Absolute Affection (MAA) | - | - | |
| | | 57 | Lactation Management Centers | 1.05 | 1.05 | Approved Rs. 1.05 Lakhs for the following: 1. OOC (On Going Activity): Rs. 1.05 Lakhs for operational cost of CLMC at Goa Medical College. |
| | | 58 | Intensified Diarrhoea Control Fortnight | 8.00 | - | Approved amount of Rs. 8.00 Lakhs for procurement of ORS & ZINC under IDCF - shifted to RCH 3.26 |
| | | 59 | Eat Right Campaign | - | - | |
| | | 60 | Other Nutrition Components | - | - | |
| | | 61 | State specific Initiatives and Innovations | | | |
| RCH.8 | National Iodine Deficiency Disorders Control Programme (NIDDCP) | 62 | Implementation of NIDDCP | 3.00 | 2.75 | Approved Rs. 2.75 Lakhs for the following: 1. Equipment (On Going Activity): Rs. 0.50 Lakh for procurement of equipment (laboratory refrigerator) for newly established lab. 2. Drugs (On Going Activity): Rs. 1.00 Lakh for procurement of STK kits for household testing of salt. 3. Diagnostics (On Going Activity): |



| FMR Code | Programme/ Theme | S. No. | Scheme/ Activity | Amount Proposed FY 26-27 | Amount Approved FY 26-27 | GoI Remarks for RoP |
|----------|--|--------|------------------------|--------------------------|--------------------------|---|
| | | | | | | Rs. 0.50 Lakh for IDD lab requirements for Urinary Iodine estimation for lab set up. 4. SRAE (On Going Activity): Rs. 0.75 Lakh for a. Rs. 0.50 Lakh for IDD Survey. b. Rs. 0.25 Lakh for management of IDD monitoring lab. |
| NDCP .1 | Integrated Disease Surveillance Programme (IDSP) | 63 | Implementation of IDSP | 11.30 | 11.00 | Approved Rs. 11.00 Lakhs for the following: 1. Diagnostics: Rs. 11.00 Lakhs for a. Rs.8.00 lakhs for recurring costs on account of consumables, kits, communication, and misc. expenses etc. @ Rs. 4 lakhs each for two DPHLs (North and South Goa). b. Not Approved, Rs. 0.30 lakhs not Approved for transport of samples for DPHLs as already Rs. 4 lakhs Approved for each DPHL. c. Rs. 3.00 Lakhs for diagnostic and sample transport under VPD surveillance. |
| NDCP .2 | National Vector Borne Disease Control Programme (NVBDCP) | 64 | Malaria | 41.90 | 41.90 | Approved Rs. 41.90 Lakhs for the following: 1. Equipment (On going Activity): Rs. 2.00 Lakhs for Maintenance / minor repairs / provision of the roof covers of the existing 28 hatcheries. 2. Drugs (On Going Activity): Rs. 30.80 Lakhs for a. Rs. 0.50 Lakh for Chloroquine b. Rs. 0.30 Lakh for primaquine 2.5 c. Rs. 1.00 Lakh for primaquine 7.5 d. Rs. 2.00 Lakhs for ACT e. Rs. 7.00 Lakhs for 400 L cyphenothrin f. Rs. 20.00 Lakhs for 10,000 LLINs / Insecticide treated nets at Rs. 200 each. 3. Diagnostics (On Going Activity): Rs. 5.10 Lakhs for a. Rs. 2.00 Lakhs for 20,000 RDT b. Rs. 0.20 Lakh for 200 lts MLO c. RS. 0.40 Lakh for 200 slides box d. Rs. 2.50 Lakhs for 8 Malaria microscopy 4. OOC (On Going Activity): Rs. 3.00 Lakhs for a. Rs. 2.00 Lakhs for Biological and Environmental Management through |



| FMR Code | Programme/ Theme | S. No. | Scheme/ Activity | Amount Proposed FY 26-27 | Amount Approved FY 26-27 | GoI Remarks for RoP |
|----------|------------------|--------|----------------------|--------------------------|--------------------------|---|
| | | | | | | VHSCs. b. Rs. 1.00 Lakh for Malaria microscopy maintenance. 5. SRAE (On Going Activity): Rs. 1.00 Lakh for Zonal entomological unit. |
| | | 65 | Kala-azar | - | - | |
| | | 66 | AES/JE | - | - | |
| | | 67 | Dengue & Chikungunya | 40.97 | 34.07 | Approved Rs. 34.07 Lakhs for the following: 1. Drugs (On Going Activity): Rs. 7.20 Lakhs for a. Rs. 6.00 Lakhs for 300 lts. Temephose @ Rs. 2000 per litre b. Rs. 1.20 Lakhs for 50 ltrs Pyrethrum @ Rs.2400 per litre 2. Diagnostics (On Going Activity): Rs. 1.00 Lakh for NS1 ELISA kits as CASH GRANT. Rs. 6.90 Lakhs for IgM Mac ELISA kits as KIND GRANT. 3. OOC (On Going Activity): Rs. 21.87 Lakhs for a. Rs. 7.97 Lakhs for Hiring of 48 Laborers / field workers for source reduction for 20 days for 2 months (40 working days) @ 415 / day. b. Rs. 5.20 Lakhs for 6 fogging machine to replace not working / unrepairable machine c. Rs. 5.00 Lakhs for maintenance and repair of all existing equipment for vector control at the peripheral units. d. Rs. 2.00 Lakhs for procurement of fogging machine fund required for publishing of tender notices in newspapers (local and National) e. Rs. 1.70 Lakhs for 20 Hand Compression Spray Pumps (HCSP) @ 8,500 per pump. 4. SRAE (On Going Activity): Rs. 4.00 Lakhs for 4 Sentinel Surveillance Hospital. |
| | | 68 | Lymphatic Filariasis | 2.40 | 2.40 | Approved Rs. 2.40 Lakhs for the following: 1. Diagnostics (On Going Activity): Rs. 1.00 Lakh for contingencies for Lymphoedema Clinic. 2. OOC (On Going Activity): Rs. 0.40 Lakh for management of 80 chronic Lymphedema cases. |



| FMR Code | Programme/ Theme | S. No. | Scheme/ Activity | Amount Proposed FY 26-27 | Amount Approved FY 26-27 | GoI Remarks for RoP |
|----------|--|--------|---|--------------------------|--------------------------|--|
| | | | | | | 3. SRAE (On Going Activity): Rs. 1.00 Lakh for post MDA Surveillance. |
| NDCP .3 | National Leprosy Eradication Programme (NLEP) | 69 | Case Detection and Management | 5.66 | 5.66 | Approved Rs. 5.66 Lakhs for the following: 1. SRAE (On Going Activity): Rs. 5.66 Lakhs for case detection and management. a. Rs. 2.72 Lakhs for 4 Special Activity per year in 34 centers at Rs.2000 per activity. b. Rs. 1.36 Lakhs for two special skin camps for 34 health centers annually by UHC / PHC / CHC in collaboration with DH / SDH @ Rs. 2000 per half yearly. c. Rs. 0.08 Lakh for Clofazimine and Rifampicin Capsule. d. Rs. 1.50 Lakhs for LCDC Campaign for 6 high risk centers @ 25000. |
| | | 70 | DPMR Services: Reconstructive Surgeries | 0.81 | 0.81 | Approved Rs. 0.81 Lakh for the following 1. DBT (On Going Activity): Rs. 0.34 Lakh for welfare allowance for RCS Patients and RCS Support for Govt. Institutions /Camps for 2 patients @ Rs. 17000/- each (Rs. 5000/- for GMC and Rs. 12000/- to the patients in installment). 2. Drugs (On Going Activity): Rs. 0.47 Lakh for a. Rs. 0.27 Lakh for 60 MCR Footwear @Rs.400 per unit. b. Rs. 0.20 Lakh for 50 Selfcare ulcer kits@ Rs. 400 per unit. |
| | | 71 | District Awards | - | - | |
| | | 72 | Other NLEP Components | 1.20 | 1.20 | Approved Rs. 1.20 Lakhs for the following 1. OOC (On Going Activity): Rs 1.20 lakhs for consumables and office operation cost. |
| NDCP .4 | National Tuberculosis Elimination Programme (NTEP) | 73 | Drug Sensitive TB (DSTB) | 80.89 | 80.89 | Approved Rs 80.89 Lakhs for the following: 1. DBT (On Going Activity): Rs. 0.55 Lakhs for Treatment supporter Honorarium. 2. Infrastructure (On Going Activity): Rs. 4.29 Lakhs for maintenance of TU, drug store, DTC etc. 3. Drug (On Going Activity): Rs. 1.70 Lakhs for emergency procurement of first line drug, drug sleeves, 99 DOTS |



| FMR Code | Programme/ Theme | S. No. | Scheme/ Activity | Amount Proposed FY 26-27 | Amount Approved FY 26-27 | GoI Remarks for RoP |
|----------|------------------|--------|----------------------------|--------------------------|--------------------------|---|
| | | | | | | & drug Transportation charge. 4. Diagnostics (On Going Activity): Rs. 7.90 Lakhs for sample collection & transportation & lab consumables 5. OOC (On Going Activity): Rs. 53.74 Lakhs for ACF activity, Injection prick charges, maintenance of equipment & EDNS. 6. SRAE (On Going Activity): Rs. 12.71 Lakhs for SNC, CIE, SIE & thesis. |
| | | 74 | Nikshay Poshan Yojana | 159.60 | 159.60 | Approved Rs. 159.60 Lakhs for the following: 1. DBT (On Going Activity): Rs. 159.60 Lakhs for Ni-kshay Poshan Yojana to TB patients |
| | | 75 | PPP | 96.58 | 96.58 | Approved Rs 96.58 Lakhs for the following: 1. DBT (On Going Activity): Rs. 6.05 Lakhs for Private provider incentive & Informant incentive. 2. OOC (On Going Activity): Rs. 90.53 Lakhs for x-ray from private sector, PPSA, Operationalization of x-ray & Multi sectoral activity. |
| | | 76 | Latent TB Infection (LTBI) | 20.00 | 20.00 | Approved Rs 20.00 Lakhs for the following: 1. Diagnostics (On Going Activity): Rs. 20.00 Lakhs for consumables for LTBI. |
| | | 77 | Drug Resistant TB (DRTB) | 199.19 | 199.19 | Approved Rs 199.19 Lakhs for the following: 1. DBT (On Going Activity): Rs. 1.10 Lakhs for treatment supporter honorarium. 2. Infrastructure (On Going Activity): Rs. 1.93 Lakhs for minor civil work DRTB centre & NAAT site. 3. Equipment (On Going Activity): Rs. 16.70 Lakhs for procurement of equipment & furniture. 4. Drugs (On going Activity): Rs. 7.50 Lakhs for procurement of second line drugs. 5. Diagnostics (On Going Activity): Rs. 171.91 Lakhs for lab material, TrueNat & CBNAAT chips and LPA items. 6. SRAE (On Going Activity): Rs. 0.05 Lakh for AIC review meeting. (This is a PM activity. Expenditure to |



| FMR Code | Programme/ Theme | S. No. | Scheme/ Activity | Amount Proposed FY 26-27 | Amount Approved FY 26-27 | GoI Remarks for RoP |
|----------|--|--------|---|--------------------------|--------------------------|--|
| | | | | | | be booked under S. No. 194) |
| | | 78 | TB Harega Desh Jeetega Campaign | 23.52 | 23.52 | Approved Rs 23.52 Lakhs for the following: 1. OOC (On Going Activity): Rs. 23.52 Lakhs for TB mukt panchayat & TB Mukht Bharat Abhiyaan. |
| | | 79 | State specific Initiatives and Innovations | | | |
| NDCP .5 | National Viral Hepatitis Control Programme (NVHCP) | 80 | Prevention | 5.00 | 5.00 | Approved Rs 5.00 Lakhs for the following: 1. Drugs (On Going Activity): Rs. 5.00 Lakhs for a. Rs 1.50 Lakhs for consumables for Hepatitis B Vaccine for HRG b. Rs 0.50 Lakhs for consumables for Hepatitis B Vaccine for HCW c. Rs 3.00 Lakhs for HBIG administration @Rs 2500 for 121 newborns born to hepatitis B positive pregnant women |
| | | 81 | Screening and Testing through Facilities | 52.20 | 45.90 | Approved Rs 45.90 Lakhs for the following: 1. Diagnostics (On Going Activity): Rs. 45.70 Lakhs for a. Rs. 41.70 Lakhs as cash grant for Screening Kits (Rapid/ELISA) b. Rs. 4.00 Lakhs for consumables for diagnostics. c. Rs. 6.30 Lakhs as KIND GRANT for Viral Load testing Kits 2. OOC (On Going Activity): Rs. 0.20 Lakh for sample transportation @ Rs. 0.01 Lakh / district for 2 districts |
| | | 82 | Screening and Testing through Outreach Activities | 3.75 | 3.75 | Approved Rs 3.75 Lakhs for the following: 1. OOC (On Going Activity): Rs 3.75 Lakhs for screening of HRGs through outreach camps @ Rs. 2500 / camp for 150 camps. |
| | | 83 | Treatment | 5.51 | 1.00 | Approved Rs 1.00 Lakh for the following: 1. Drugs (On Going Activity): Rs. 1.00 Lakh for a. Rs. 0.50 Lakh as cash grant for procurement of Daclatasvir 30mg + Ribavirin 200 mg. b. Rs. 0.50 Lakh for management of Hepatitis A and E. c. Rs. 4.51 Lakhs as KIND GRANT (central supplies) for procurement of |

| FMR Code | Programme/ Theme | S. No. | Scheme/ Activity | Amount Proposed FY 26-27 | Amount Approved FY 26-27 | GoI Remarks for RoP |
|----------|---|--------|---|--------------------------|--------------------------|--|
| | | | | | | antiviral Drugs |
| NDCP .6 | National Rabies Control Programme (NRCP) | 84 | Implementation of NRCP | 0.30 | 0.30 | Approved Rs. 0.30 Lakh for the following 1. Diagnostics (On Going Activity): Rs 0.30 Lakh for diagnostics consumables, PPP, sample transport for rabies testing at NIV Pune. |
| NDCP .7 | Programme for Prevention and Control of Leptospirosis (PPCL) | 85 | Implementation of PPCL | 3.00 | 3.00 | Approved Rs. 3.00 Lakhs for the following 1. Diagnostics (On Going Activity): Rs. 3.00 Lakhs for procurement of diagnostic kits & other supplies for Leptospirosis. |
| NDCP .9 | State specific Initiatives and Innovations | 86 | Implementation of State specific Initiatives and Innovations | | | |
| NCD.1 | National Program for Control of Blindness and Vision Impairment (NPCB+VI) | 87 | Cataract Surgeries through Facilities | 100.00 | 100.00 | Approved Rs. 100.00 Lakhs for the following: 1. OOC (On Going Activity): Rs 100.00 Lakhs for Cataract Surgeries through government health facilities. [Target of Cataract surgeries for FY 2026-27 is 25000] |
| | | 88 | Cataract Surgeries through NGOs | - | - | |
| | | 89 | Other Ophthalmic Interventions through Facilities | - | - | |
| | | 90 | Other Ophthalmic Interventions through NGOs | - | - | |
| | | 91 | Mobile Ophthalmic Units | - | - | |
| | | 92 | Collection of Eye Balls by Eye Banks and Eye Donation Centres | 0.35 | 0.35 | Approved Rs. 0.35 Lakh for the following: 1. OOC (On Going Activity): Rs 0.35 Lakh for 35 eye balls collection @ Rs.1000/- per eyeball. [GoI's new target for 2026-27 is 35 CORNEA] |
| | | 93 | Free Spectacles to School Children | 3.50 | 3.50 | Approved Rs. 3.50 Lakhs for the following: 1. Equipment (On Going Activity): Rs. 3.50 Lakhs for distribution of 1700 spectacles distribution to school children [Target of spectacles to school |

| FMR Code | Programme/ Theme | S. No. | Scheme/ Activity | Amount Proposed FY 26-27 | Amount Approved FY 26-27 | GoI Remarks for RoP |
|----------|--|--------|--|--------------------------|--------------------------|---|
| | | | | | | children for FY 2026-27 is 5000] |
| | | 94 | Free spectacles to Others | 7.00 | 7.00 | Approved Rs. 7.00 Lakhs for the following: 1. Equipment (On Going Activity): Rs. 7.00 Lakhs for distribution of 2000 spectacles distribution to elderly person [Target of spectacles to elderly person for FY 2026-27 is 4000] |
| | | 95 | Grant in Aid for the Health Institutions, Eye Bank, NGO, Private Practitioners | 40.00 | 35.40 | Approved Rs. 35.40 Lakhs for the following: 1. Equipment (On Going Activity): Rs. 35.40 Lakhs for a. Rs. 2.80 Lakhs for 7 LED Vision Charts @ Rs 40,000/- each. b. Rs. 22.60 Lakhs for 5 Auto refractometer with motorized tables (except PHC Colvale) @ Rs. 4,52,000/- c. Rs 10.00 Lakhs maintenance of Ophthalmic Equipment. |
| | | 96 | Other NPCB+VI components | - | - | |
| NCD.2 | National Mental Health Program (NMHP) | 97 | Implementation of District Mental Health Plan | 8.00 | 7.00 | Approved Rs. 7.00 Lakhs for the following: 1. Equipment (ON Going Activity): Rs. 2.00 Lakhs for procurement of psychiatric restrain bands for 2 districts @ Rs. 1.00 Lakh per district, as per norms. 2. Drugs (On Going Activity): Rs. 5.00 Lakhs for procurement of drugs for 2 Districts @ Rs. 2.5 Lakhs per district. |
| | | 98 | Implementation of TeleMANAS | 109.93 | 109.93 | Approved Rs. 109.93 Lakhs for the following: 1. DBT (On Going Activity): Rs 105.13 lakhs as remuneration for the HR posted in the State Tele MANAS cell. The details of the approved posts are provided in the Tele MANAS HRH Annexure. 2. OOC (On Going Activity): Rs. 4.80 Lakhs for a. Rs. 3.00 Lakhs for Contingency and Misc. expenditure @ 25,000 per month for 12 months for 1 Tele MANAS cell. b. Rs. 1.80 Lakhs for Internet Vendor to State cell @ 15,000 per month for 12 months for Tele MANAS cell. |
| NCD.3 | National Programme for Health Care for the Elderly | 99 | Geriatric Care at DH | 26.00 | 26.00 | Approved Rs. 26.00 Lakhs for the following: 1. Equipment (On Going Activity): Rs. 6.00 Lakhs for procurement of |



| FMR Code | Programme/ Theme | S. No. | Scheme/ Activity | Amount Proposed FY 26-27 | Amount Approved FY 26-27 | GoI Remarks for RoP |
|----------|--|--------|--|--------------------------|--------------------------|---|
| | (NPHCE) | | | | | Machinery and Equipment. Cold Laser Bio Stimulation unit – class 3B lasers @ 3 lakhs per unit for both district hospitals 2. Drugs (On Going Activity): Rs 20.00 Lakhs for procurement of non EDL Geriatric care Drugs (Denusomab 60mg, Alendronate 70mg, Cilnidipine 10mg, Tryptomer 25mg, Syrup Lactulose) |
| | | 100 | Geriatric Care at CHC/SDH | 4.00 | 4.00 | Approved Rs. 4.00 Lakhs for the following: 1. Equipment (On Going Activity): Rs. 4.00 lakhs for procurement of Machinery & Equipment @ 0.50 lakh per CHC / SDH for 6 CHC & 2 SDH (Continuous Passive Motion (CPM) unit @Rs. 44,000/- per unit; IR Lamp @ Rs.6,000/- per unit) |
| | | 101 | Geriatric Care at PHC/ SHC | 5.00 | 5.00 | Approved Rs. 5.00 Lakhs for the following: 1. Equipment (On Going Activity): Rs. 5.00 Lakhs for procurement of Machinery and Equipment @ Rs. 0.20 Lakh per PHC per year for 26 PHC's (Shoulder pulley @4,500/- per unit; Shoulder wheel @ 11,000/- per unit; Weighing cuffs 0.5 kg, 1kg, 1.5kg and 2kg @ Rs. 4,500/-; Total Rs.20,000/- per centre). Calculation error in the state proposal. |
| | | 102 | Community Based Intervention | - | - | |
| | | 103 | State specific Initiatives and Innovations | | | |
| NCD.4 | National Tobacco Control Programme (NTCP) | 104 | Implementation of COTPA - 2003 | - | - | |
| | | 105 | Implementation of ToEFI Guideline | - | - | |
| | | 106 | Tobacco Cessation | 4.00 | 4.00 | Approved Rs. 4.00 Lakhs for the following: 1. Drugs (On Going Activity): Rs. 4.00 Lakhs for procurement of drugs as per NTCP PIP guidelines. |
| NCD.5 | National Programme for Prevention and Control of Non | 107 | NCD Clinics at DH | 47.00 | 47.00 | Approved Rs. 47.00 Lakhs for the following: 1. Equipment (On Going Activity): Rs. 2.00 Lakhs for spirometry lab at |

| FMR Code | Programme/ Theme | S. No. | Scheme/ Activity | Amount Proposed FY 26-27 | Amount Approved FY 26-27 | GoI Remarks for RoP |
|----------|--------------------------------|--------|---|--------------------------|--------------------------|--|
| | Communicable Diseases (NP-NCD) | | | | | <p>NGDH</p> <p>2. Drugs (On Going Activity): Rs. 38.00 Lakhs for</p> <p>a. Rs. 8.00 Lakhs for procurement of drugs and supplies at 2 DH for NCDs.</p> <p>b. Rs. 30.00 Lakhs for Drugs and Consumables for Day Care Centre for Chemotherapy at 2 DH.</p> <p>3. OOC (On Going Activity): Rs. 7.00 Lakhs for</p> <p>a. Rs. 5.00 Lakhs for referral transportation of patients for DH @ 2.5 lakh each.</p> <p>b. Rs. 2.00 Lakhs for Prg Mg cost and contingencies for DH @ 1 lakh each. (This is a PM activity. Expenditure to be booked under S. No. 194)</p> |
| | | 108 | NCD Clinics at CHC/SDH | 17.47 | 17.47 | <p>Approved Rs. 17.47 Lakhs for the following:</p> <p>1. Equipment (On Going Activity): Rs. 0.07 Lakhs for procurement of peak flow meter for 6 CHCs and 2 SDH @ Rs.800/- each.</p> <p>2. Drugs (On Going Activity): Rs.11.40 Lakhs for drugs and supplies at 6 CHC @ Rs. 1.90 Lakhs per CHC.</p> <p>3. OOC (On Going Activity): Rs.6.00 Lakhs for Prg Mg cost and contingency for 6 CHC @ 1 lakh per CHC. (This is a PM activity. Expenditure to be booked under S. No. 194)</p> |
| | | 109 | Cardiac Care Unit (CCU/ICU) including STEMI | 10.00 | 10.00 | <p>Approved Rs. 10.00 Lakhs for the following:</p> <p>1. Drugs (On Going Activity): Rs.10.00 Lakhs for drugs and supplies at 2 CCU @ Rs. 5 Lakhs per CCU.</p> |
| | | 110 | Other NP-NCD Components | 36.18 | 24.26 | <p>Approved Rs. 24.26 Lakhs for the following:</p> <p>1. Equipment (On Going Activity): Rs 0.26 Lakh for procurement of Peak flow meter at 32 PHCs @ Rs. 800/- each</p> <p>2. OOC (On Going Activity): Rs. 24.00 Lakhs for Tele ECG Services (Maintenance of Tele ECG with IT System) Consumable, ECG Rolls etc.) for 20 units at Rs.10,000 per month (Rs.10,000 x 20 Units x 12 months).</p> <p>Not Approved, Rs. 11.20 Lakhs for</p> |



| FMR Code | Programme/ Theme | S. No. | Scheme/ Activity | Amount Proposed FY 26-27 | Amount Approved FY 26-27 | GoI Remarks for RoP |
|----------|---|--------|--|--------------------------|--------------------------|--|
| | | | | | | <p>Pneumatic Compression Devices including consumables (DVT pumps) two each for 2 District Hospitals @ Rs.2.80 Lakh per unit under Goa Stroke Programme, as it is not as per GoI norms.</p> <p>Not Approved, Rs. 0.72 Lakh for Monofilaments for screening of diabetic neuropathy under for 72 HFs, as it is not as per GoI norms.</p> |
| | | 111 | State specific Initiatives and Innovations | | | |
| NCD.6 | Pradhan Mantri National Dialysis Programme (PMNDP) | 112 | Hemodialysis Services | 1,199.02 | 1,198.35 | <p>Approved Rs. 1198.35 Lakhs for the following:</p> <p>1. OOC (On Going Activity): Rs. 1198.35 Lakhs for 97745 hemodialysis sessions @ INR 1226 per session.</p> |
| | | 113 | Peritoneal Dialysis Services | 5.76 | 5.76 | <p>Approved Rs. 5.76 Lakhs for the following:</p> <p>1. OOC (On Going Activity): Rs. 5.76 Lakhs for procurement of CAPD bags and consumables for 02 beneficiaries @ INR 24000 per month per beneficiary. State is suggested to ensure the availability of a Nephrologist at the hub who can supervise the PD programme.</p> |
| NCD.7 | National Program for Climate Change and Human Health (NPCCHH) | 114 | Implementation of NPCCHH | 5.22 | 5.22 | <p>Approved Rs. 5.22 Lakhs for the following:</p> <p>1. Infrastructure (On Going Activity): Rs. 5.00 Lakhs for rain water harvesting for 1 PHC.</p> <p>2. Drugs (On Going Activity): Rs. 0.22 Lakh for inflatable bath tub for both District Hospital at Heat Stroke Room</p> |
| NCD.8 | National Oral health programme (NOHP) | 115 | Implementation at DH | 33.50 | 33.50 | <p>Approved Rs. 33.50 Lakhs for the following:</p> <p>1. Equipment (On Going Activity): Rs.8.00 Lakhs for instruments (Surgical, Diagnostic & Restorative instruments & RVG)</p> <p>2. Diagnostics (On Going Activity): Rs. 25.50 Lakhs for consumables, for specialty clinic.</p> |
| | | 116 | Implementation at CHC/SDH | 30.50 | 30.50 | <p>Approved Rs. 30.50 Lakhs for the following:</p> <p>1. Equipment (On Going Activity): Rs. 15.00 Lakhs for Surgical, Restorative Diagnostic Instruments & RVG for all</p> |



| FMR Code | Programme/ Theme | S. No. | Scheme/ Activity | Amount Proposed FY 26-27 | Amount Approved FY 26-27 | GoI Remarks for RoP |
|----------|---|--------|--|--------------------------|--------------------------|--|
| | | | | | | facilities. 2. Diagnostics (On Going Activity): Rs.15.50 Lakhs for consumables for all facilities. |
| | | 117 | Mobile Dental Units/Van | - | - | |
| | | 118 | State specific Initiatives and Innovations | | | |
| NCD.9 | National Programme on palliative care (NPPC) | 119 | Implementation of NPPC | 23.20 | 23.20 | Approved Rs. 23.20 Lakhs for the following: 1. Drugs (On Going Activity): Rs. 3.00 Lakhs for procurement of opioids @ Rs. 1.50 Lakh per DH per year 2. OOC (On Going Activity): Rs. 20.20 Lakhs for a. Rs. 19.20 Lakhs for home based palliative care visits for patients 2 DH @ 9.6 lakh per DH @ Rs 0.80 per vehicle per month (0.80*2*12= 19.20 Lakhs) b. Rs. 1.00 Lakh for miscellaneous expenses for state. (This is a PM activity. Expenditure to be booked under S. No. 194) |
| NCD.10 | National Programme for Prevention and Control of Fluorosis (NPPCF) | 120 | Implementation of NPPCF | - | - | |
| NCD.11 | National Programme for Prevention and Control of Deafness (NPPCD) | 121 | Screening of Deafness | - | - | |
| | | 122 | Management of Deafness | - | - | |
| | | 123 | State Specific Initiatives | | | |
| NCD.12 | National programme for Prevention and Management of Burn & Injuries | 124 | Support for Burn Units | - | - | |
| | | 125 | Support for Emergency Trauma Care | 19.50 | 19.50 | Approved Rs. 19.50 Lakhs for the following: 1. Equipment (On Going Activity): Rs 17.50 Lakhs for purchase of equipment (S-II Wave Touch Screen Ultrasound System) at North Goa DH. 2. OOC (On Going Activity): Rs 2.00 Lakhs for state - level programme management cost (This is a PM activity. Expenditure to be booked under S. No. 194) |

| FMR Code | Programme/ Theme | S. No. | Scheme/ Activity | Amount Proposed FY 26-27 | Amount Approved FY 26-27 | GoI Remarks for RoP |
|-----------|---|--------|---|--------------------------|--------------------------|---|
| NCD.13 | State specific Programme Interventions | 126 | Implementation of State specific Initiatives and Innovations | | | |
| HSS (U).1 | Comprehensive Primary Healthcare (CPHC) | 127 | Development and Operations of Ayushman Arogya Mandirs - Urban | - | - | |
| | | 128 | Wellness Activities at AAMs- Urban | 1.20 | 1.20 | Approved Rs. 1.20 Lakhs for the following: 1. OOC (On Going Activity): Rs. 1.20 Lakhs for carrying out wellness activities @ Rs. 250 per activities for 10 activities in a month for 4 UPHCs for 12 months. |
| | | 129 | Teleconsultation Facilities at AAMs-Urban | - | - | |
| HSS (U).2 | Community Engagement | 130 | ASHA (including ASHA Certification and ASHA benefit package) | - | - | |
| | | 131 | MAS | 0.60 | - | Approved amount of Rs. 0.60 Lakh as untied fund for MAS @ Rs. 5000 per year for 12 MAS - shifted to S no. 149. |
| | | 132 | JAS | 3.50 | - | Approved amount of Rs. 3.50 Lakhs as Untied fund for JAS for 2 Govt. building UPHC @ 1.75 lakhs - shifted to S no. 149. |
| | | 133 | RKS | - | - | |
| | | 134 | Outreach Activities | 0.44 | 0.44 | Approved Rs. 0.44 Lakh for the following: 1. OOC (On Going Activity): Rs. 0.44 Lakh for a. Rs. 0.32 Lakh as Special outreach Camp / Ayushman Arogya Shivir @ Rs. 2000 per UPHC per quarter for 4 UPHC for 4 quarter. b. Rs. 0.12 Lakh for UHND @ Rs. 250 per month per UHND for 4 UPHC for 12 months. |
| | | 135 | Mapping of Slums and Vulnerable Population | - | - | |
| | | 136 | Other Community Engagement | - | - | |

| FMR Code | Programme/ Theme | S. No. | Scheme/ Activity | Amount Proposed FY 26-27 | Amount Approved FY 26-27 | GoI Remarks for RoP |
|-----------|--|--------|--|--------------------------|--------------------------|---|
| | | | Components | | | |
| HSS (U).3 | Public Health Institutions as per IPHS norms | 137 | Urban PHCs | 28.00 | 6.00 | <p>Approved Rs. 6.00 Lakhs for the following:</p> <p>1. Equipment (On Going Activity): Rs. 4.80 Lakhs @ Rs. 1,20,000 per UPHC for 4 UPHC for Equipment / Furniture for Polyclinic upgradation.</p> <p>2. OOC (On Going Activity): Rs. 1.20 Lakhs as rent for 2 UPHC @ 5000 per UPHC for year.</p> <p>(Approved amount of Rs. 20.00 Lakhs for drugs - shifted to S no. 180) (Approved amount of Rs. 2.00 Lakhs for diagnostics - shifted to S no. 181)</p> |
| | | 138 | Urban CHCs and Maternity Homes | - | - | |
| HSS (U).4 | Quality Assurance | 139 | Quality Assurance Implementation & Mera Aspataal | - | - | |
| | | 140 | Kayakalp | - | - | |
| | | 141 | Swacch Swasth Sarvatra | - | - | |
| HSS (U).5 | HRH | 142 | Remuneration for all NHM HR | 458.08 | 396.93 | <p>Approved Rs. 396.93 Lakhs for the following:</p> <p>DBT (On Going Activity): Rs. 396.93 Lakhs for</p> <ul style="list-style-type: none"> • 79 positions of service delivery staff and 04 programme management staff. Since the budget share of HRH on Resource Envelope is high, vacant posts under NHM has been dropped. • Lump sum budget for engaging support staff and for data entry operations • Annual Increment as per the principles mentioned in the HRH Guidelines. • EPF (Employer's contribution) @ 13.36% for staff drawing salary <= Rs 15000 pm as on/ after 1st April 2015. The State Administrative Officer looking after salary must ensure proper calculation and disbursement as mentioned in JS (P)'s letter dated 8 March 2016 (D.O.No.G.27034-8/2015-NHM (F)). All posts are Approved for 12 months in principle. Details of the approved posts and budget are provided in HRH Annexure. Individual salaries are to be |

| FMR Code | Programme/ Theme | S. No. | Scheme/ Activity | Amount Proposed FY 26-27 | Amount Approved FY 26-27 | GoI Remarks for RoP |
|-----------|----------------------|--------|--|--------------------------|--------------------------|---|
| | | | | | | <p>calculated by the State based on principles mentioned in the HRH Guidelines.</p> <p>Approval includes Rs. 18.17 Lakhs for Annual increment for NHM HR - shifted from S no. 143</p> <p>The State have been requested to fund remuneration and emoluments of programme management staff on deputation from the State budget in the PIP guidelines and through D.O. letter of AS&MD dated 9th December 2025 (D.O.No.Z-18015/93/2025-NHM-II). From April 2026, expenditure for the salaries and emoluments of the regular staff should be booked from State Budget.</p> |
| | | 143 | Incentives (Allowance, Incentives, Staff Welfare Fund) | 18.17 | - | Approval for Rs. 18.17 Lakhs for Annual increment for NHM HR - shifted to S no. 142 |
| | | 144 | Incentives under CPHC | - | - | |
| | | 145 | Costs for HR Recruitment and Outsourcing | - | - | |
| HSS (U).6 | Technical Assistance | 146 | Planning and Program Management* | 10.00 | 10.00 | <p>Approved Rs. 10.00 Lakhs for the following:</p> <p>1. OOC (On Going Activity): Rs 10.00 Lakhs for the PM activities as per the details mentioned in the PM Annexure. State to ensure that the budget approved under this head is not utilised for construction, engaging HR and purchasing vehicle. State to also ensure that overall expenditure under PM and M&E, including PM-HRH is within 14% of RE or 14% of the total expenditure, whichever is less, as mandated by Mission Steering Group. If required, state to spend on programme management from state budget. Expenditure for activities not pertaining to PM and M&E is to be booked under relevant head.</p> |
| HSS (U).7 | Access | 147 | PPP | - | - | |
| HSS (U).8 | Innovation | 148 | State specific Programme | | | |



| FMR Code | Programme/ Theme | S. No. | Scheme/ Activity | Amount Proposed FY 26-27 | Amount Approved FY 26-27 | GoI Remarks for RoP |
|-----------|---|--------|---|--------------------------|--------------------------|--|
| | | | Innovations and Interventions | | | |
| HSS (U).9 | Untied Grants | 149 | Untied Fund | 2.00 | 6.10 | Approved Rs. 6.10 Lakhs for the following: 1. OOC (On Going Activity): Rs. 6.10 Lakhs for a. Rs. 2.00 Lakhs as untied fund @ Rs. 1 lakhs for 2 UPHC-AAM. b. Rs. 0.60 Lakhs as untied fund for MAS @ Rs. 5000 per year for 12 MAS (Shifted from Sr no. 131). c. Rs 3.50 Lakhs as untied grant for 2 UPHC @ Rs. 1.75 lakh per UPHC AAM for govt building (Shifted from Sr. No. 132). |
| HSS.1 | Comprehensive Primary Healthcare (CPHC) | 150 | Development and Operations of Ayushman Arogya Mandirs - Rural | 60.00 | 60.00 | Approved Rs. 60.00 Lakhs for the following: 1. OOC (On Going Activity): Rs 60 lakhs for Infrastructure civil works @ Rs. 3.00 Lakhs for 20 Sub Centers. |
| | | 151 | Wellness Activities at AAMs- Rural | 145.82 | 140.82 | Approved Rs. 140.82 Lakhs for the following: 1. Drugs (On Going Activity): Rs. 79.56 Lakhs for AAM Shivirs as per GOI cost norms: a) Rs. 55.68 Lakhs for AAM Shivar at 58 AAM (25 PHC + 31 RMD + 1 RHTC + 1 UHTC) @ Rs. 0.08 Lakhs / AAM / month b) Rs. 16.68 Lakhs for AAM Shivar at 139 AAM-SHCs @ Rs. 0.01 Lakhs / AAM / month c) Rs. 7.20 Lakhs for conducting camps at 6 CHCs (10,00 per camp*12 months*6 CHCs) 2. OOC (On Going Activity): Rs. 61.26 Lakhs for a) Rs. 2.16 Lakhs for adoption of AAM by Medical College @ Rs. 2.16 Lakhs / medical college / year b) Rs. 59.10 Lakhs for wellness activity – Yoga sessions @ Rs. 250 per session for 10 session / month for 197 AAM. Not Approved, Rs. 5.00 Lakhs for Review meeting of AAM at State and National level, Outstation trainings, workshops, National Workshops / Conferences, etc. as it may be considered under State Review Mission. |



| FMR Code | Programme/ Theme | S. No. | Scheme/ Activity | Amount Proposed FY 26-27 | Amount Approved FY 26-27 | GoI Remarks for RoP |
|----------|----------------------------|--------|--|--------------------------|--------------------------|--|
| | | 152 | Teleconsultation Facilities at AAMs-Rural | - | - | |
| | | 153 | CHO Mentoring | 2.50 | 2.50 | Approved Rs. 2.50 Lakhs for the following: 1. OOC (On Going Activity): Rs. 2.50 Lakhs for Incentives to State Mentors for CHO Monitoring @ 150 / CHO / month for 139 CHOs. |
| HSS.2 | Blood Services & Disorders | 154 | Screening for Blood Disorders | - | - | |
| | | 155 | Support for Blood Transfusion | - | - | |
| | | 156 | Blood Bank / BCSU / BSU / Thalassemia Day Care Centre | - | - | |
| | | 157 | Blood Collection and Transport Vans | - | - | |
| | | 158 | Other Blood Services & Disorders Components | 40.50 | 34.50 | Approved Rs. 34.50 Lakhs for the following: 1. Drugs (On Going Activity): Rs. 34.50 Lakhs for a. Rs. 25.20 Lakhs for procurement of Factor VIII @ Rs. 12/IU for 210000 IU. b. Rs. 9.00 Lakhs for Factor IX @ Rs. 15/IU for 60000 IU. |
| HSS.3 | Community Engagement | 159 | ASHA (including ASHA Certification and ASHA Benefit Package) | - | - | |
| | | 160 | VHSNC | 28.50 | 28.50 | Approved Rs. 28.50 Lakhs for the following: 1. OOC (On Going Activity): Rs. 28.50 Lakhs for Training of 285 VHSNC batches @ Rs. 0.10 Lakh per Batch. As per GOI Cost norms |
| | | 161 | JAS | 94.50 | 94.50 | Approved Rs. 94.50 Lakhs for the following: 1. OOC (On Going Activity): Rs. 94.50 Lakhs as JAS Untied Funds for a. Rs. 25.00 Lakhs for 25 AAM-PHCs @ Rs. 1.0 Lakhs per AAM-PHC, As per GOI Cost norms. b. Rs. 69.50 Lakhs for 139 AAM-SHCs @ Rs. 0.50 Lakhs per AAM- |

| FMR Code | Programme/ Theme | S. No. | Scheme/ Activity | Amount Proposed FY 26-27 | Amount Approved FY 26-27 | GoI Remarks for RoP |
|----------|--|--------|---|--------------------------|--------------------------|---|
| | | | | | | SHC, as per GOI Cost norms. |
| | | 162 | RKS | 3.00 | 3.00 | Approved Rs. 3.00 Lakhs for the following: 1. OOC (On Going Activity): Rs. 3.00 Lakhs as RKS fund for 1 TB hospital. |
| | | 163 | Other Community Engagements Components | - | - | |
| HSS.4 | Public Health Institutions as per IPHS norms | 164 | District Hospitals | - | - | |
| | | 165 | Sub-District Hospitals | - | - | |
| | | 166 | Community Health Centers | - | - | |
| | | 167 | Primary Health Centers | - | - | |
| | | 168 | Sub-Health Centers | - | - | |
| | | 169 | Other Infrastructure / Civil works / Expansion etc. | 16.20 | 16.20 | Approved Rs. 16.20 Lakhs for the following: 1. OOC (On Going Activity): Rs. 16.20 Lakhs for a. Rs. 11.40 Lakhs operational cost for smooth running of the drug warehouse. b. Rs. 4.80 Lakhs as rent for 20 SC @ Rs 2000/month/SC. |
| | | 170 | Renovation / Repair / Upgradation of Facilities for IPHS / NQAS / LaQshya / MUSQAN / SUMAN Compliance | - | - | |
| HSS.5 | Referral Transport | 171 | Advance Life Saving Ambulances | 513.02 | 513.02 | Approved Rs. 513.02 Lakhs for the following: 1. OOC (On Going Activity): Rs. 513.02 Lakhs as Opex cost of 27 ALS ambulances as per the norms @ Rs 1.58 lakh / ALS / month (Rs 158340*12* 27 ambulances). State to ensure all ambulances are AIS-125 compliant & GPS enabled. • Conduct quarterly ambulance audits. • Review EMT performance and provide ongoing capacity building. • Integrate C&D centre with 112 for end-to-end emergency response. |
| | | 172 | Basic Life Saving | - | - | |

| FMR Code | Programme/ Theme | S. No. | Scheme/ Activity | Amount Proposed FY 26-27 | Amount Approved FY 26-27 | GoI Remarks for RoP |
|----------|-------------------|--------|--|--------------------------|--------------------------|---|
| | | | Ambulances | | | |
| | | 173 | Patient Transport Vehicle | - | - | |
| | | 174 | Other Ambulances | - | - | |
| HSS.6 | Quality Assurance | 175 | Quality Assurance Implementation & Mera Aspataal | 625.00 | 621.22 | <p>Approved Rs. 621.22 Lakhs for the following:</p> <p>1. Equipment (On Going Activity): Rs. 4.00 Lakhs for</p> <p>a. Rs. 1.00 Lakh for the external Quality assurance System (EQAS)</p> <p>b. Rs. 3.00 Lakhs for establishment of Quality Unit [Rs. 1 Lakh for Furniture, Fixtures, etc.; Rs 1 Lakh for Air Conditioner; Rs. 1 Lakh for Operational Expenses (Internet, Electricity, Printing, Stationeries) and Miscellaneous]. (This is a PM activity. Expenditure to be booked under S. No. 194)</p> <p>2. OOC (On Going Activity): Rs. 617.22 Lakhs for</p> <p>a. Rs. 118.54 Lakhs for National Level Assessment for 1 DH @ Rs 2.1 Lakhs; 1 SDH @ Rs 2.1 Lakhs; 5 CHCs @ Rs. 1.46 Lakhs each; 11 AAM-PHCs @ Rs. 1.2 Lakhs each; 3 UPHCs @ Rs. 1.2 Lakhs each; 94 AAM-SCs @ Rs.0.96 Lakh each.</p> <p>b. Rs. 8.68 Lakhs for State Assessment for 2 DH & 2 SDH@ Rs. 0.12 L each; 6 CHCs @ Rs.0.08 L; 55 AAM-PHCs and 4 UPHCs @ Rs. 0.08 L each; 139 AAM-SCs @ Rs. 0.04L each.</p> <p>c. Rs. 481.24 Lakhs for Incentives to 2 DHs, 2 SDHs, 6 CHCs, 24 PHCs, 4 UPHCs and 139 Sub-Center subject to the submission of surveillance report yearly.</p> <p>d. Rs. 6.88 Lakhs for State & District Mentoring visits.</p> <p>e. Rs. 1.00 Lakh for Workshops/Training/Meetings (This is a PM activity. Expenditure to be booked under S. No. 194)</p> <p>f. Rs. 0.88 Lakh for Review Meetings (SQUA-Quarterly @0.10 Lakhs; Rs.0.24 Lakh per district per year) - (This is a PM activity. Expenditure to be booked under S. No. 194)</p> |



| FMR Code | Programme/ Theme | S. No. | Scheme/ Activity | Amount Proposed FY 26-27 | Amount Approved FY 26-27 | GoI Remarks for RoP |
|----------|-------------------------------------|--------|---|--------------------------|--------------------------|--|
| | | 176 | Kayakalp | 86.07 | 73.07 | <p>Approved Rs. 73.07 Lakhs for the following:</p> <p>1. OOC (On Going Activity): Rs. 73.07 Lakhs for</p> <p>a. Rs. 2.00 Lakhs for Contingencies.</p> <p>b. Rs. 8.32 Lakhs for Peer & State Assessment @ Rs. 0.04 Lakh per facility</p> <p>c. Rs. 62.75 Lakhs for incentives under Kayakalp with details as follows:</p> <p>i) Rs. 3.00 Lakhs for 1 Commendation Award for DH @ Rs. 3.00 Lakhs</p> <p>ii) Rs. 27.00 Lakhs for 1 Best SDH / CHC @ Rs. 15 Lakhs; 1 Eco Friendly SDH / CHC @ 5 Lakhs; 7 Commendation Award @ Rs. 1 Lakh each</p> <p>iii) Rs. 9.5 Lakhs for 2 Best PHC @ Rs. 2 Lakhs each, 11 Commendation Award @ Rs. 0.50 Lakh each</p> <p>iv) Rs. 7.5 Lakhs for 15 UPHCs @ Rs. 0.50 L each.</p> <p>v) Rs. 15.75 Lakhs for 2 Best SC/HWC @ Rs. 1 Lakh each, 55 Commendation Award @ Rs. 0.25 Lakh each.</p> |
| | | 177 | Swachh Swasth Sarvatra | - | - | |
| HSS.7 | Other Initiatives to improve access | 178 | Comprehensive Grievance Redressal Mechanism | 32.76 | 32.76 | <p>Approved Rs. 32.76 Lakhs for the following:</p> <p>1. OOC (On Going Activity): Rs 32.76 Lakhs as operational cost towards Help line 104, ECD and SUMAN and also for Grievance Redressal Call Centre as per the norms @ Rs 39000/Seat/Month for 12 months for 7 seater call center (Rs 39000*12 months*7)</p> |
| | | 179 | PPP | - | - | |
| | | 180 | Free Drugs Services Initiative | 230.00 | 250.00 | <p>Approved Rs. 250.00 Lakhs for the following:</p> <p>1. Drugs (On Going Activity): Rs. 250.00 Lakhs for</p> <p>a. Rs. 30.00 Lakhs for procurement of Anti Rabies Vaccine, Anti Rabies Serum and Anti Snake Venom.</p> <p>b. Rs. 200.00 Lakhs for procurement of medicines under free drug services initiative.</p> <p>Free essential medicines is subject to following conditions: * The medicines should be from IPHS EMLs. * The</p> |



| FMR Code | Programme/ Theme | S. No. | Scheme/ Activity | Amount Proposed FY 26-27 | Amount Approved FY 26-27 | GoI Remarks for RoP |
|----------|----------------------|--------|--|--------------------------|--------------------------|---|
| | | | | | | medicines should be procured for DH and below levels of facilities only. * The medicines should be quality tested from NABL accredited labs. c. Rs. 20.00 Lakhs per UPHC for 4 UPHCs for procurement of drugs (Shifted from Sr. no. 137 urban PHCs / Polyclinic). |
| | | 181 | Free Diagnostics Services Initiative | 150.00 | 152.00 | Approved Rs. 152.00 Lakhs for the following: 1. Diagnostics (On Going Activity): Rs. 152.00 Lakhs for a. Rs. 150.00 Lakhs procurement of reagents and consumables for 6.6 Lakhs diagnostic test. b. Rs. 2.00 Lakhs for procurement of consumables at UPHCs @ Rs. 50,000 per UPHC (Shifted from Sr. no. 137 urban PHCs / Polyclinic). |
| | | 182 | Mobile Medical Units | - | - | |
| | | 183 | State specific Programme Interventions and Innovations | | | |
| HSS.8 | Inventory management | 184 | Biomedical Equipment Management System and AERB | 336.00 | 336.00 | Approved Rs. 336.00 Lakhs for the following: 1. OOC (On Going Activity): Rs. 336.00 Lakhs for equipment maintenance and management @ 3.93% of total asset value of INR 59.74 Cr. |
| HSS.9 | HRH | 185 | Remuneration for all NHM HR | 2,951.39 | 2,962.05 | Approved Rs. 2,962.05 Lakhs for the following: 1. DBT (On Going Activity): Rs. 2,962.05 lakhs for: • 682 positions of service delivery staff and 108 programme management staff. Since the budget share of HRH on Resource Envelope is high, vacant posts under NHM has been dropped. • Lump sum budget for engaging support staff and for data entry operations • Annual Increment as per the principles mentioned in the HRH Guidelines • EPF (Employer's contribution) @ 13.36% for staff drawing salary <= Rs 15000 pm as on/ after 1st April 2015. The State Administrative Officer |



| FMR Code | Programme/ Theme | S. No. | Scheme/ Activity | Amount Proposed FY 26-27 | Amount Approved FY 26-27 | GoI Remarks for RoP |
|----------|------------------|--------|--|--------------------------|--------------------------|---|
| | | | | | | <p>looking after salary must ensure proper calculation and disbursal as mentioned in JS (P)'s letter dated 8 March 2016 (D.O.No.G.27034-8/2015-NHM (F)). All posts are Approved for 12 months in principle. Details of the approved posts and budget are provided in HRH Annexure. Individual salaries are to be calculated by the State based on principles mentioned in the HRH Guidelines.</p> <p>Approval includes Rs. 127.18 Lakhs for Annual increment for NHM HR shifted from S no. 186.</p> <p>The State have been requested to fund remuneration and emoluments of programme management staff on deputation from the State budget in the PIP guidelines and through D.O. letter of AS&MD dated 9th December 2025 (D.O.No.Z-18015/93/2025-NHM-II). From April 2026, expenditure for the salaries and emoluments of the regular staff should be booked from State Budget.</p> |
| | | 186 | Incentives (Allowance, Incentives, Staff Welfare Fund) | 127.18 | - | Approval of Rs. 127.18 Lakhs for Annual increment for NHM HR shifted to S no. 185. |
| | | 187 | Remuneration for CHOs | 344.32 | 358.84 | <p>Approved Rs. 358.84 Lakhs for the following:</p> <p>1. DBT (On Going Activity): Rs. 358.84 Lakhs for 141 CHOs. The remuneration, including annual increment as applicable as per NHM norms, is Approved for 12 months in principle.</p> <p>Approval includes Rs. 14.52 Lakhs for annual increment of CHOs shifted from S no. 188.</p> |
| | | 188 | Incentives under CPHC | 268.32 | 253.80 | <p>Approved Rs. 253.80 Lakhs for the following:</p> <p>1. DBT (On Going Activity): Rs. 253.8 Lakhs for Performance Incentive @ Rs. 15000 per month for 141 CHOs. (Error in State Remarks noted)</p> <p>Approval of Rs. 14.52 Lakhs for annual increment of CHOs shifted to S No. 187.</p> |



| FMR Code | Programme/ Theme | S. No. | Scheme/ Activity | Amount Proposed FY 26-27 | Amount Approved FY 26-27 | GoI Remarks for RoP |
|----------|----------------------|--------|--|--------------------------|--------------------------|--|
| | | 189 | Costs for HR Recruitment and Outsourcing | 5.00 | 5.00 | Approved Rs. 5.00 Lakhs for the following: 1. OOC (On Going Activity): Rs 5.00 Lakhs for conducting recruitment/ outsourcing costs. If the State engages an external agency for recruitment and the responsibility of recruitment is delegated for improving speed and efficiency, the accountability remains with the State. |
| | | 190 | Human Resource Information Systems (HRIS) | | | |
| HSS.10 | Enhancing HR | 191 | DNB Courses for Medical Doctors | - | - | |
| | | 192 | Training Institutes and Skill Labs | 10.00 | 10.00 | Approved Rs. 10.00 Lakhs for the following: 1. Infrastructure (On Going Activity): Rs. 5 Lakhs for a. Rs. 2.5 Lakhs for waterproofing of roof b. Rs. 2.5 Lakhs for painting 2. Equipment (On Going Activity): Rs. 1 Lakh for procurement of furniture. 3. OOC (On Going Activity): Rs. 4 Lakhs for office Stationery (1 Lakh); Internet annual plans (0.30 Lakh); pointer, battery charger, router (0.20 Lakh); utilities to make guest room functional (1 Lakh); 2 laptops (1.5 Lakhs). |
| HSS.11 | Technical Assistance | 193 | SHSRC / ILC (Innovation & Learning Centre) | - | - | |
| | | 194 | Planning and Program Management* | 301.45 | 276.95 | Approved Rs. 276.95 Lakhs for the following: OOO (On Going Activity): Rs 768.71 lakhs for FY 2026-27 as PM and M&E cost including PM-HRH have already been approved under various heads. An amount of Rs 212.94 lakhs is Approved for PM and M&E activities approved under s no 194 as per the details mentioned in the PM Annexure. Expenditure for PM activities approved under other heads (excluding s no 98, 142, 143, 146, 185 and 186) to be booked under this head. State to ensure that the budget approved under this head is not utilized for construction, engaging HR |



| FMR Code | Programme/ Theme | S. No. | Scheme/ Activity | Amount Proposed FY 26-27 | Amount Approved FY 26-27 | GoI Remarks for RoP |
|------------|----------------------------------|--------|--|--------------------------|--------------------------|---|
| | | | | | | and purchasing vehicle. State to also ensure that overall expenditure under PM and M&E, including PM-HRH is within 14% of RE or 14% of the total expenditure, whichever is less, as mandated by Mission Steering Group. If required, State to spend on programme management from State budget. Expenditure for activities not pertaining to PM and M&E and approved under 194 to be booked under relevant head. Details in PM annexure. |
| HSS.1 2 | IT interventions and systems | 195 | Health Management Information System (HMIS) | | | |
| | | 196 | Implementation of DVDMS | | | |
| | | 197 | eSanjeevani (OPD+HWC) | | | |
| HSS.1 3 | Innovation | 198 | State specific Programme Innovations and Interventions | | | |
| HSS.1 4 | Untied Grants | 199 | Untied Fund | 119.75 | 119.75 | Approved Rs. 119.75 Lakhs for the following: 1. OOC (On Going Activity): Rs. 119.75 Lakhs for a. Rs. 60.00 Lakhs as untied fund for DH, SDH and CHC. (Rs 20 lakhs for 2 DH @ Rs 10 lakhs per DH and Rs 40 lakhs for 2 SDH and 6 CHC @ Rs 5 lakhs/SDH and CHC) b. Rs.59.75 Lakhs for i. Rs. 43.75 Lakhs for 25 AAM-PHCs @ Rs. 1.75 Lakhs per AAM-PHC, State has proposed Untied fund for 25 AAM-PHCs under Sr. No. 161, State to ensure no overlapping of funds per facility (state has 58 AAM-PHCs) ii. Rs. 16.00 Lakhs as untied fund for non-AAM-SHCs @ Rs. 0.20 Lakhs for 80 non-AAM-SHCs. |
| HSS.1 5 | Snakebite envenoming | 200 | Snakebite Prevention and Control (SBPC) | - | - | |
| HSS.1 6 | Capacity building incl. training | 201 | Capacity building incl. training (Incl. RCH, NDCP, | 152.19 | 150.24 | Details in annexure 7.1 (Capacity Building) |



| FMR Code | Programme/ Theme | S. No. | Scheme/ Activity | Amount Proposed FY 26-27 | Amount Approved FY 26-27 | GoI Remarks for RoP |
|-------------------------------|------------------------------|--------|---|--------------------------|--------------------------|--|
| | | | NCD, HSS-Urban, HSS-Rural)* | | | |
| HSS.1 7 | ASHA Incentives | 202 | ASHA Incentives (Incl. RCH, NDCP, NCD, HSS-Urban, HSS-Rural)* | - | - | Details in annexure 7.2 (ASHA Incentives) |
| HSS.1 8 | IT Interventions and Systems | 203 | IT interventions (Incl. RCH, NDCP, NCD, HSS-Urban, HSS-Rural - IT software, Laptops etc. for service delivery)* | 168.10 | 161.15 | Details in annexure 7.3 (IT Interventions and Systems) |
| HSS.1 9 | IEC & Printing | 204 | IEC & Printing (Incl. RCH, NDCP, NCD, HSS-Urban, HSS-Rural)* | 263.54 | 165.66 | Details in annexure 7.4 (IEC & Printing) |
| HSS.2 0 | Inventory management | 205 | PSA Plants (funded under PM-CARES) | - | - | |
| HSS.2 1 | Innovation | 206 | State-specific Initiatives and Innovations* | 4.00 | 4.00 | Details in annexure 7.5 (Innovations) |
| Grand Total (In Lakhs) | | | | 10,895.08 | 10,477.47 | |

Annexure 7.1: Capacity Building (Details of trainings proposed under S. No. 201)

| S. No. | Programme/ Theme | Proposed Training / Activity | Amount Proposed FY 26-27 | Amount Approved FY 26-27 | GoI Remarks |
|--|---------------------|--|--------------------------|--------------------------|---|
| A. Integrated Training of Core Cadres | | | | | |
| 1 | Integrated Training | Integrated Training MO | 4.80 | 4.80 | Approved Rs. 4.8 Lakhs for integrated training of MOs @ Rs. 2.40 Lakhs per batch for six days for two batches. |
| 2 | Integrated Training | Integrated Training SN | 12.00 | 12.00 | Approved Rs. 12.0 Lakhs for integrated training of SNs @ Rs. 4.0 Lakhs per batch for 10 days for three batches. |
| 3 | Integrated Training | Integrated Training CHO | 8.00 | 8.00 | Approved Rs. 8.0 Lakhs for integrated training of CHOs @ Rs. 4.0 Lakhs per batch for 10 days for two batches. |
| 4 | Integrated Training | Integrated Training ANM/ MPW | 12.00 | 12.00 | Approved Rs. 12.0 Lakhs for integrated training of MPW (M/F) @ Rs. 4.0 Lakhs per batch for 10 days for three batches. |
| B. Specific Packages | | | | | |
| 5 | MH | Maternal Death Surveillance | 1.20 | 1.20 | Approved Rs 1.20 Lakhs for the Maternal Death Surveillance Training for 2 batches for 80 MOs / PHN / LHV / ANM |
| 6 | MH | Comprehensive Abortion Care - Proposed MMA training | 0.40 | 0.40 | Approved Rs. 0.40 Lakhs is Approved for 2 batches of MMA Trainings for 6 MBBS Doctors (duration : 3 days & batch size: 3 MBBS Doctors) @ Rs. 20,000/- per batch 1. All trainings should follow RCH training norms and bookings to be done as per actuals. 2. All the MMA trainings to be conducted as per protocols mentioned in "Guidance Note on MMA trainings" available on NHM Website, which may be accessed from the link below. https://nhm.gov.in/New_Update-2022-23/MH/GUIDELINES-%20MH/Guidance_Note_on_MMA_Trainings.pdf |
| 7 | MH | Training on RCH portal /ANMOL | 3.00 | 3.00 | Approved Rs 3.00 Lakhs for Training on Janani portal (6 batches @ Rs. 50,000 per batch) |
| 8 | MH | GDM Training for MOs | 0.40 | 0.40 | Approved Rs 0.40 Lakh for the GDM training 1 batch for 40 MOs. |
| 9 | MH | GDM Training for SN / LHV / PHN | 0.80 | 0.80 | Approved Rs 0.80 Lakh for the GDM training for 2 batches for 80 SN / LHV / PHN. |
| 10 | MH | Skilled birth attendant training for staff nurses | 3.00 | 3.00 | Approved Rs. 3.00 Lakhs for Skilled birth attendant training for staff nurses for six batches, each batch of 8 nurses. @ Rs. 50,000/- per batch. |
| 11 | PC-PNDT | Sensitization for 2 blocks (Bardez & Bicholim) CDPOs / | 0.40 | 0.40 | Approved Rs. 0.40 Lakhs for One-Day Block Level Sensitization of Frontline Workers (FLW) on PC&PNDT Act in 4 batches @ Rs. 0.10 Lakhs/ batch for 2 blocks of Bardez & Bicholim. State to ensure sensitization of other |

| S. No. | Programme/ Theme | Proposed Training / Activity | Amount Proposed FY 26-27 | Amount Approved FY 26-27 | GoI Remarks |
|--------|------------------|--|--------------------------|--------------------------|--|
| | | Mukhya Sevika /Anganwadi workers | | | relevant stakeholders at the block level including AWW, Mukhya Sevika, ANM & PRI members. Training to be conducted as per the RCH Training norms, 2015. |
| 12 | MH/PC-PNDT | Training course in ultrasonography for medical officers | 0.60 | 0.60 | <p>Approved Rs. 0.60 Lakhs @ 03 Medical officers (MO) in 1 batch * Rs. 20,000 per MO for FY 2026-27.</p> <p>State to train 03 Medical Officers on "The Fundamentals in Abdomino-Pelvic Ultra Sonography: Level One for M.B.B.S. Doctors" during FY 2026-27.</p> <p>As per the "fee structure for training" laid out under Rule 10(1) of The Pre-conception and Prenatal Diagnostic Techniques (Prohibition of Sex Selection) (Six Months Training) Rules, 2014, following budget is Approved.</p> <p>The amount is Approved with the following conditionalities:</p> <p>The 6 months training rules, 1994 to be complied to, in terms of eligibility, accredited institutes, staff faculty ratio etc. and components as laid out in Schedule I & Schedule II of the said Rules.</p> <p>The State to submit a compliance report after the completion of training for FY 2026-27.</p> <p>Further State to comply with the regulatory aspects as per rules laid out under PC&PNDT Act.</p> |
| 13 | PC-PNDT | Gender Based Violence & Medico Legal Care For Survivors Victims of Sexual Violence | 1.00 | 1.00 | <p>Approved Rs. 1 Lakh for Two-Days State Level Training of Medical Officer (MO) and Staff Nurse (SN) on Medico Legal Care for Survivors / Victims of Sexual Violence @ Rs. 0.50 Lakhs per batch in 2 batches (1 batch of Medical Officers and 1 batch of Staff Nurse). Training to be conducted as per the RCH Training norms, 2015.</p> |
| 14 | CH | TOT for Stillbirth surveillance | 0.40 | 0.40 | <p>Approved Rs. 0.4 Lakh for 1 batch of Training of Obs / Gynae, Pediatricians, Medical Officer, Staff Nurses on Stillbirth Surveillance and Response in Public Health Facilities. State to follow RCH Training Norms and book expenditure as per actuals.</p> |
| 15 | Immunization | Routing Immunization, Safe Injection practices, AEFI management & Newer vaccine | 0.40 | 0.40 | <p>Approved Rs. 0.40 Lakh for Routine Immunization, Safe Injection practices, AEFI management & Newer vaccine for MO, 1 batch</p> |
| 16 | Immunization | Routing Immunization, Safe Injection practices, Cold | 0.40 | 0.40 | <p>Approved Rs. 0.40 Lakh for Routine Immunization, Safe Injection practices, AEFI management & Newer vaccine for CCH, 1 batch</p> |

| S. No. | Programme/ Theme | Proposed Training / Activity | Amount Proposed FY 26-27 | Amount Approved FY 26-27 | GoI Remarks |
|--------|------------------|---|--------------------------|--------------------------|---|
| | | Chain management & Newer vaccine | | | |
| 17 | Immunization | Routing Immunization, Safe Injection practices, Cold Chain management & Newer vaccine | 0.40 | 0.40 | Approved Rs. 0.40 for Routine Immunization, Safe Injection practices, Cold Chain management & Newer vaccine for ANMs, 1 batch |
| 18 | Immunization | BRIDGE | 0.63 | 0.63 | Approved Rs. 0.63 Lakh for BRIDGE (cascade training in the peripheral health facility) for MPHWs /ANMs / AWWs, 1 batch |
| 22 | Immunization | IMA | 1.00 | 1.00 | Approved Rs. 1.00 Lakh for IMA training of IMA Doctors,1 batch |
| 23 | Immunization | IAP | 1.00 | 1.00 | Approved Rs. 1.00 Lakh for IAP training of IAP Doctors,1 batch |
| 27 | AH | Adolescent Friendly Health Services Training | 2.40 | 2.40 | Approved Rs. 2.40 Lakhs for the following: 1. Rs. 0.80 Lakh for One Batch of skill-based AFHS Training of MOs @ Rs. 80,000/ batch 2. Rs. 0.80 Lakh for One Batch of skill-based AFHS training of ANMs @ Rs. 80,000/ batch 3. Rs. 0.80 lakh for One Batch of skill-based AFHS training of Counsellors @ Rs. 80,000/ batch |
| 28 | AH | Peer Educator Training under Peer Education | 15.58 | 15.58 | Approved Rs. 15.56 Lakhs for Training of students as Peer Educators, PE nodal teachers along with MOs (RBSK) for programme orientation @ Rs.64,900/batch for 24 batches. |
| 29 | AH | Health & Wellness Ambassador Training under School Health and Wellness Programme | 16.15 | 16.15 | Approved Rs. 16.15 Lakhs for Training of HWAs along with MOs (RBSK) and counsellors for programme orientation @ Rs. 67,300/batch for 24 Batches. |
| 30 | Nutrition | Anaemia Mukt Bharat | 1.60 | 1.60 | Approved Rs. 1.6 Lakhs for State level training of Counsellor, MO, School health ANM, Staff nurse, PHN, LHV on revised AMB guidelines @ Rs 40,000/batch for 4 batch |
| 31 | IDSP | IDSP & IHIP Training for Laboratory Technician | 0.60 | 0.60 | Approved Rs. 0.60 Lakh for 2 batches of IDSP & IHIP Training for Laboratory Technicians. |
| 32 | IDSP | IDSP & IHIP Training Pharmacist | 0.40 | 0.40 | Approved Rs. 0.40 Lakh for 1 batch of IDSP & IHIP Training for Pharmacist. |
| 33 | NVBDCP | NVBDCP Training | 1.20 | 0.00 | Not Approved as it has been already covered under integrated training. |



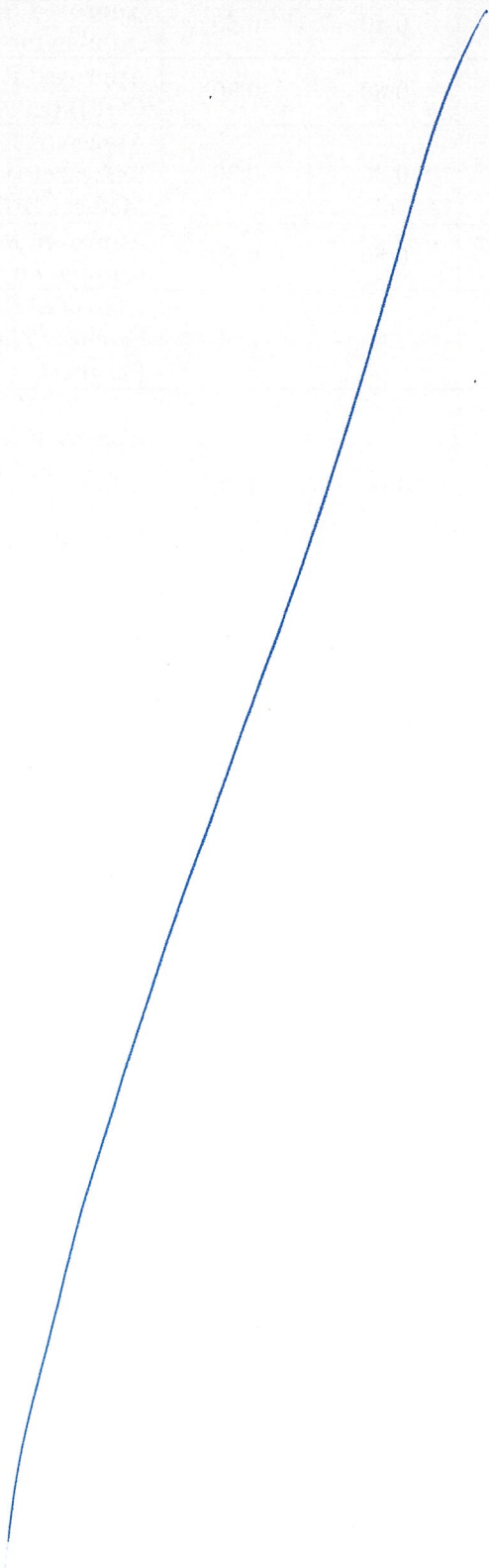
| S. No. | Programme/ Theme | Proposed Training / Activity | Amount Proposed FY 26-27 | Amount Approved FY 26-27 | GoI Remarks |
|--------|--|------------------------------|--------------------------|--------------------------|--|
| 34 | NVBDCP | NVBDCP Training | 2.50 | 2.50 | Approved Rs. 2.50 Lakhs for training of field workers (20 batches @ 12,500 per batch) |
| 35 | NVBDCP | NVBDCP Training | 2.10 | 2.10 | Approved Rs. 2.10 Lakhs for training of lab technicians (18 batches @ 11,666 per batch) |
| 36 | NVBDCP | NVBDCP Training | 0.25 | 0.00 | Not Approved as it has been already covered under integrated training. |
| 37 | NVBDCP | NVBDCP Training | 0.50 | 0.00 | Not Approved as it has been already covered under integrated training. |
| 38 | NVBDCP | NVBDCP Training | 0.50 | 0.50 | Approved Rs. 0.50 Lakh for training of SI, EE, PHN, LHV. (1 batch @ 50,000 per batch) |
| 39 | NLEP | Training on Leprosy | 0.21 | 0.21 | Approved Rs. 0.21 Lakh for training of 30 pharmacists. |
| 40 | NLEP | Training on Leprosy | 0.42 | 0.42 | Approved Rs. 0.42 Lakh for training of 30 ayush doctors. |
| 41 | NLEP | Training on Leprosy | 2.25 | 2.25 | Approved Rs. 2.25 Lakhs for training of 1500 Anganwadi Workers. |
| 42 | NTEP | Nikshay Aushadhi | 0.70 | 0.70 | Approved Rs. 0.70 Lakh for Nikshay Aushadhi training for Pharmacists (2 Batches @ 35,000 per batch) |
| 43 | NTEP | Nikshay Portal | 0.70 | 0.70 | Approved Rs. 0.70 Lakh for Nikshay Portal training for DEOs (2 Batches @ 35,000 per batch) |
| 44 | NTEP | Refresher training on NTEP | 0.40 | 0.40 | Approved Rs. 0.40 Lakh for Refresher training on NTEP for Extension Educator, IEC Officer / IEC Incharge. (1 Batch @ 40,000 per batch) |
| 45 | NTEP | Refresher training on NTEP | 1.60 | 1.60 | Approved Rs. 1.60 Lakhs for Refresher training on NTEP of NTEP staff (4 Batches @ 40,000 per batch) |
| 46 | NTEP | Refresher Training on NTEP | 0.50 | 0.50 | Approved Rs. 0.50 Lakh for Refresher training on NTEP of lab technicians (5 Batches @ 10,000 per batch) |
| 47 | NTEP | Modular training on NTEP | 0.70 | 0.70 | Approved Rs. 0.70 Lakh for Modular training on NTEP for 150 GMC interns. |
| 48 | NTEP | TB Mukht Bharat Abhiyan | 0.80 | 0.80 | Approved Rs. 0.80 Lakh for Training on TB Mukht Bharat Abhiyan for LVH and PHN (2 Batches @ 40,000 per batch) |
| 49 | NTEP | TB Mukht Bharat Abhiyan | 0.80 | 0.80 | Approved Rs. 0.80 Lakh for Training on TB Mukht Bharat Abhiyan for BHMS / Ayush (2 Batches @ 40,000 per batch) |
| 50 | NTEP | TB Mukht Bharat Abhiyan | 0.80 | 0.80 | Approved Rs. 0.80 Lakh for Training on TB Mukht Bharat Abhiyan for BHMS/ Ayush (2 Batches @ 40,000 per batch) |
| 51 | National Viral Hepatitis Control Programme | Refreshers training on NVHCP | 0.50 | 0.50 | Approved Rs. 0.50 Lakh for capacity building of Lab Technicians @ Rs 0.50 Lakh/batch for one batch. |

| S. No. | Programme/ Theme | Proposed Training / Activity | Amount Proposed FY 26-27 | Amount Approved FY 26-27 | GoI Remarks |
|--------|--|--|--------------------------|--------------------------|---|
| 52 | National Viral Hepatitis Control Programme | Refreshers training on NVHCP | 0.50 | 0.50 | Approved Rs. 0.50 Lakh for capacity building of Medical Officers (Physicians & Microbiologists) @ Rs 0.50 Lakh/batch for one batch |
| 53 | NMHP | training on mental health | 0.50 | 0.50 | Approved Rs. 0.50 Lakh for training of Mental Health Counselors for 2 Districts @ Rs.25 thousand per District |
| 54 | NMHP | Other Department Training and NGO Training | 1.50 | 1.50 | Approved Rs. 1.50 Lakhs for training on Mental Health for Other Department Training and NGO @ Rs. 50000/- per batch |
| 55 | NTCP | Enforcement Training for stake Holders | 1.60 | 1.60 | Approved Rs. 1.60 Lakhs, as per NTCP PIP Guideline, for 4 batches of Enforcement Training for stake Holders @ Rs. 40000/- per batch. |
| 56 | NTCP | Tobacco free educational institutions | 1.60 | 1.60 | Approved Rs. 1.60 Lakhs, as per NTCP PIP Guideline Proposed 4 batches of Tobacco free educational institutions Training for stake Holders @ Rs. 40000/- per batch. |
| 57 | NTCP | Tobacco Free Village Panchayat Guideline | 1.60 | 1.60 | Approved Rs. 1.60 Lakhs, as per NTCP PIP Guideline Proposed 4 batches of Tobacco Free Village Panchayat Guideline Training for stake Holders @ Rs. 40000/- per batch. |
| 58 | NTCP | COTPA ,PECCA Guideline | 1.60 | 1.60 | Approved Rs. 1.60 Lakhs, as per NTCP PIP Guideline Proposed 4 batches of COTPA, PECCA Guideline Training for stake Holders @ Rs. 40000/- per batch. |
| 59 | NP-NCD | Training on Cervical Cancer screening using pap smear | 0.30 | 0.30 | Approved Rs. 0.30 Lakh for training (1 batch) on Cervical Cancer screening using pap smear for CHO (SN), Staff Nurse, ANM / MPHWH. |
| 60 | NP-NCD | Training on Basic ECG, Diagnosis and treatment of Cardiac Diseases and its Complications | 0.80 | 0.80 | Approved Rs. 0.80 Lakh for training (2 batches) on Basic ECG, Diagnosis and treatment of Cardiac Diseases and its Complications for MO @ Rs. 40000/- per batch. |
| 61 | NP-NCD | Training on Type 2 Diabetes, Type 1 Diabetes | 2.50 | 2.50 | Approved Rs. 2.50 Lakhs for training for caregivers of Type 1 Diabetes patients. |
| 62 | NP-NCD | iBreast device training (Breast Cancer) | 0.80 | 0.80 | Approved Rs. 0.80 Lakh for iBreast (Breast Cancer) device training (2 batches), for MO/SN @ 40000/- per batch |
| 63 | NP-NCD | NAFLD | 0.50 | 0.50 | Approved Rs. 0.50 Lakh for 1 batch of NAFLD training, for MO @ 50000/- per batch |
| 64 | NP-NCD | NAFLD | 0.80 | 0.80 | Approved Rs. 0.80 Lakh for 2 batches of NAFLD training, for CHO / SN @ 40000/- per batch |

| S. No. | Programme/ Theme | Proposed Training / Activity | Amount Proposed FY 26-27 | Amount Approved FY 26-27 | GoI Remarks |
|-------------------------|------------------|---|--------------------------|--------------------------|--|
| 65 | NP-NCD | COPD | 0.50 | 0.50 | Approved Rs. 0.50 Lakh for 1 batch of COPD training for MOs @ 50000/- per batch |
| 66 | NP-NCD | COPD | 0.80 | 0.80 | Approved Rs. 0.80 Lakh for 2 batches of COPD training for CHO/SN @ 40000/batch |
| 67 | NP-NCD | Lung Cancer | 0.30 | 0.30 | Approved Rs. 0.30 Lakh for 1 batch of Refresher training on Lung Cancer for Medical Officers |
| 68 | NP-NCD | DCCC refresher training | 0.50 | 0.50 | Approved Rs. 0.50 Lakh for DCCC Refresher training for Medical Officers / Staff Nurses |
| 69 | NP-NCD | Training under Goa Stroke Programme | 2.50 | 2.50 | Approved Rs. 2.50 Lakhs for training in 6 batches (2 for each Cadre) under Goa Stroke Program. |
| 21 | NPPC | 3 days Certificate course on Pain and Palliative Care at 2 DH and 2 SDH | 4.00 | 4.00 | Approved Rs 4.00 Lakhs for 3 days Certificate course for Medical Officers and Staff Nurses at 2 District Hospitals and 2 Sub District Hospitals |
| 70 | NPPCD | Training on Creating Awareness on causes and prevention of deafness | 3.20 | 3.20 | Approved Rs 3.20 Lakhs for 8 batches of training for Anganwadi workers and primary school teachers on creating awareness about causes and prevention of deafness. |
| 71 | NPPMT&BI | Community First Responder Training | 12.00 | 12.00 | Approved Rs. 12.00 Lakhs towards training of 1000 community first responders @ Rs 1180 per person. |
| 72 | NOHP | Dental Root Canal & difficulties encountered while extraction | 0.40 | 0.40 | Approved Rs. 0.40 Lakh for 1 batch of refresher training of dental root canal & difficulties encountered while extraction @ Rs. 40,000/- per batch. |
| 73 | NOHP | Training for Dentist on effect of Hormonal Changes in oral cavity | 0.40 | 0.40 | Approved Rs. 0.40 Lakh for 1 batch of training for dentists on effect of hormonal changes in oral cavity @ Rs. 40,000/- per batch. |
| 74 | CPHC- AAM | JAS Training | 5.00 | 5.00 | Approved Rs. 5.00 Lakhs for Training of JAS Members @ Rs. 40000/- per batch for 13 batches. State to consider maximum batch size of 30-40 participants. Error in Calculation noted |
| 75 | HMIS | Training on HMIS portal | 2.00 | 2.00 | Approved Rs. 2.00 Lakhs for training on HMIS portal for Data Assistant / DEO / Private Hospital representatives (5 batches @ Rs. 40,000 per batch) |
| Total (In Lakhs) | | | 152.19 | 150.24 | |

Note: Capacity Building and Training to be conducted as per Integrated Training Modules developed.

Annexure 7.2: ASHA Incentives (Details of proposal under S. No. 202)



Annexure 7.3: IT Interventions (Details of proposal under S. No. 203)

| S. No | Programme/ Theme | Activity Proposed | Amount Proposed FY 26-27 | Amount Approved FY 26-27 | GoI Remarks |
|-------|--|----------------------------------|--------------------------|--------------------------|---|
| 1 | Maternal Health | 5 Laptop and 8 Desktop Computers | 10.16 | 10.16 | Approved Rs. 10.16 Lakhs for procurement/replacement of laptops @ INR 0.70 lakh per unit and tablets @ INR 0.24 lakh per unit for ANMs at Sub-centre level. State is advised to procure desktop/laptop in place of tablets through GeM to ensure competitive rates. |
| 2 | Child Health | Desktop Computer | 0.70 | 0.70 | Approved Rs. 0.70 Lakh for procurement of one desktop computer for operationalization of the FBNC portal at SDH Ponda. |
| 3 | Adolescent Health | Desktop Computer | 0.70 | 0.70 | Approved Rs. 0.70 Lakh for procurement one laptop for RKSK Programme. (This is a PM activity. Expenditure to be booked under S. No. 194) |
| 4 | Family Planning | Desktop Computer | 0.80 | 0.80 | Approved Rs. 0.80 Lakh for one desktop computer with UPS and scanner printer for Technical Officer @ INR 0.80 lakh. (This is a PM activity. Expenditure to be booked under S. No. 194) |
| 5 | Child Health-RBSK | Laptop | 11.90 | 8.50 | Approved Rs. 8.50 Lakhs for procurement of computers @ INR 50,000 per unit, as per programme guidelines. |
| 6 | PC PNDD | Procurement of Desktop Computer | 0.70 | 0.70 | Approved Rs. 0.70 Lakh for procurement of one desktop computer with UPS for Demographer for office use @ INR 0.70 lakh. (This is a PM activity. Expenditure to be booked under S. No. 194) |
| 7 | Integrated Disease Surveillance Programme (IDSP) | Desktop Computer for DPHL North | 1.50 | 0.75 | Approved Rs. 0.75 Lakh for procurement of one desktop computer for DPHL North Not Approved, Rs. 0.75 lakh for procurement of one desktop computer for the State Microbiologist. |
| 8 | Malaria | IT Equipment for PMUs | 0.50 | 0.50 | Approved Rs. 0.50 Lakh towards procurement of computer and printer accessories and internet connectivity. (This is a PM activity. Expenditure to be booked under S. No. 194) |

| S. No | Programme/ Theme | Activity Proposed | Amount Proposed FY 26-27 | Amount Approved FY 26-27 | GoI Remarks |
|-------------------------|--|--|--------------------------|--------------------------|--|
| 9 | National Tuberculosis Elimination Programme (NTEP) | Procurement of Tablet and Printer | 8.52 | 8.52 | Approved Rs. 8.52 Lakhs for replacement of 33 tablets (Rs. 7.92 Lakhs) for STS / STLS / TBHV and procurement of 2 printers (Rs. 0.60 Lakh). (Procurement of tablets for STLS and TBHV is a PM activity. Expenditure to be booked under S. No. 194) |
| 10 | National Mental Health Program (NMHP) | Desktop Computer and Printer | 1.50 | 1.50 | Approved Rs. 1.50 Lakhs for procurement of IT equipment, including all-in-one printer and computer, for DMHP North and DMHP South @ INR 0.75 lakh per DMHP. |
| 11 | Comprehensive Primary Healthcare (CPHC) | Procurement of Tablets and Laptops | 9.75 | 9.75 | Approved Rs. 9.75 Lakhs for procurement of 30 tablets (Rs. 6.00 Lakhs) and 5 laptops (Rs. 3.75 Lakhs) for AAMs. State is advised to procure desktop / laptop in place of tablet through GEM to achieve competitive grades. |
| 12 | Comprehensive Primary Healthcare (CPHC) | Procurement of IT Equipment (Desktop, Printer, Camera, UPS, Speaker) | 7.80 | 7.80 | Approved Rs. 7.80 Lakhs for IT equipment for 10 AAMs. |
| 13 | Comprehensive Primary Healthcare (CPHC) | Recurring costs for Repairs, maintenance and Internet connectivity | 22.70 | 22.70 | Approved Rs. 22.70 lakh for repairs, maintenance, and internet connectivity. The unit cost of INR 10,000 per facility is in line with norms. |
| 14 | Technical Assistance (HSS) | Desktop Computer | 2.80 | 0.00 | Not Approved Rs. 2.80 Lakhs for procurement of 4 desktop computers and 1 mono laser printer the staff belongs to an outsourced agency. |
| 15 | IT interventions and systems | HMIS IT Intervention | 82.07 | 82.07 | Approved Rs. 82.07 Lakhs for software / cloud hosting, network & bandwidth, ICT procurement, and AMC for ABDM-enabled HMIS. |
| 16 | IT interventions and systems | Aadhaar Enabled Biometric Attendance System (AEBAS) | 6.00 | 6.00 | Approved Rs. 6.00 Lakhs for procurement of 12 Aadhaar Enabled Biometric Attendance System (AEBAS) machines @ INR 0.50 lakh per unit. |
| Total (In Lakhs) | | | 168.10 | 161.15 | |

Annexure 7.4: IEC & Printing (Details of proposal under S. No. 204)

| S. No | Programme/ Theme | Activity Proposed | Amount Proposed FY 26-27 | Amount Approved FY 26-27 | GoI Remarks |
|-------|--|---|--------------------------|--------------------------|--|
| 1 | Maternal Health | Mass media Advertisement.: Radio, Audio, Bus shelter advertisement, | 3.66 | 1.86 | Approved Rs. 1.86 Lakhs for Audio Visual Advertisement on KTC bus stands for the period of 1 month. Not Approved Rs. 1.86 Lakhs as the administrative expenses under JSY can be up to 5% of the total scheme budget including IEC and has been already Approved as Rs. 0.19 lakhs in the PM Activities Annexure. |
| 2 | Maternal Health | Audio Visual Advertisement | 1.86 | 1.86 | Approved Rs 1.86 Lakhs for Audio Visual Advertisement on KTC bus stands for the period of 1 month (10 nos. @ Rs. 18640/- = 186,400/-) on SUMAN & Kilkari |
| 3 | PC & PNDDT Act | Radio, Audio advertisement, sensitization for CDPO | 1.86 | 1.86 | Approved Rs. 1.86 Lakhs for the Audio Visual Advertisement on KTC bus stands for the period of 1 month on the provisions of the PC&PNDDT Act, 1994 @ Rs. 18,640 per AV Advertisement at 10 bus stands = Total Rs. 1,86,400. State to avoid duplication with BBBP budget of WCD. |
| 4 | Other MH, CH & FP Component | Installation of new Hoardings, Flex changes and maintenance of existing hoardings, & Procurement of wall mounted digital signage. | 6.00 | 6.00 | Approved Rs. 6.00 Lakh for Integrated IEC Activities under Family Planning 1) Rs. 5.00 Lakhs for Flex changes and maintenance of existing hoardings (40 nos @ Rs. 12500/-) 2) Rs. 1.00 Lakh for Procurement of wall mounted digital signage for 2 facilities @ Rs. 50,000/- each. |
| 5 | State Specific Initiative & Innovation | State level function | 6.15 | 6.15 | Approved Rs. 6.15 Lakhs for the following: 1. Rs. 5.00 Lakhs for the procurement of digital standees (55") for 2 district hospitals & 2 PHCs to display the flyers & videos of maternal health (CAC, Diet chart in pregnancy, SUMAN, Kilkari initiative etc.) @ Rs 1.25 lakhs per standee. 2. Rs 1.15 Lakhs for the repair and maintenance of existing 15 digital standees. |
| 6 | Maternal Health | Printing MCP cards | 12.30 | 11.55 | Approved Rs. 11.55 lakhs for following: 1. Rs 1.05 lakhs for printing of antenatal registers @Rs. 700/- x 150 registers 2. Rs 1.50 lakhs for printing of ANC Card for PW (15000 cards @ Rs. 10/- per card) 3. Rs. 9.00 lakhs for printing of 15,000 MCP Cards @Rs. 60/- per card |
| 7 | Maternal Health | Sensitization for facility | 0.40 | 0.40 | Approved Rs. 0.40 Lakh for sensitization of SUMAN volunteers @ Rs 1000 per facility for 40 healthcare facilities |

| S. No | Programme/ Theme | Activity Proposed | Amount Proposed FY 26-27 | Amount Approved FY 26-27 | GoI Remarks |
|-------|------------------|---|--------------------------|--------------------------|---|
| 8 | Maternal Health | Hoarding, Radio, Audio, Newspaper, Bus shelter advertisement, IEC & Printing activities | 1.25 | 0.00 | Not Approved Rs. 1.25 Lakhs as the administrative expenses under JSY can be up to 5% of the total scheme budget including IEC and has been Approved as Rs. 0.19 lakhs in the Annexure PM Activities sheet. |
| 9 | PC & PNDDT Act | National and International Girl Child Day observance, Printing of envelope, etc. | 6.30 | 5.80 | Approved Rs. 5.80 Lakhs for the following: 1) Rs. 2.50 Lakhs for National & International Girl Child Day observance (organizing skit competition / dance competition / digital poster competition / Video Making / Wall painting, etc.). 2) Rs. 0.30 Lakh for purchase of PC&PNDDT Act Books (200 books, Approximate @ Rs.150 per Book) 3) Rs. 2.00 Lakhs for printing of appeal letters to newly married couple. 4) Rs. 1.00 Lakh for social media publication (social media influencers shortlisted by Entertainment Society of Goa for creating public awareness) Not Approved, Rs. 0.50 Lakh for printing of cash enveloped with BBBP branding. State to avoid duplication with BBBP budget of WCD. |
| 10 | Child Health | RBSK screening | 35.63 | 35.63 | Approved Rs. 35.63 Lakhs for the following: 1. Rs. 10.00 Lakhs for 0 - 6 years (1 Lakh Cards) required at unit cost of Rs.10 per card 2. Rs. 25.00 Lakhs for 6 - 18 years (2.5 Lakh cards) required unit cost of Rs.10 per card 3. Rs. 0.63 Lakhs for RBSK Referral Book (250 books @ Rs.250 per book) |
| 11 | Child Health | Printing activities under DEIC | 2.20 | 2.19 | Approved Rs 2.19 Lakhs for the following: 1. Rs. 0.985 Lakh for Printing for DEIC i. DEIC forms @ Rs.45 per form x 1000 no ii. DEIC registers @ Rs 850 per book x 5 no 2. Rs 1.20 Lakhs towards sensitize and create awareness among people / school for autism disability / intellectual disability / learning disability at DEIC. |
| 12 | Child Health | SAANS Initiative | 2.76 | 2.76 | Approved Rs 2.76 Lakhs for 1) Rs. 0.90 Lakh for Social Media Advertisement (with hiring of 3 influencers @ Rs. 30,000/- = 90,000/-) 2) Rs. 1.86 Lakhs for Audio Visual Advertisement on KTC bus stands for the period of 1 month (10 nos. @ Rs. 18640/- = 186,400/-) on Pneumonia prevention. |
| 13 | Child Health | Hoarding, Radio, Audio, Bus shelter | 3.00 | 2.10 | Approved Rs 2.10 Lakhs for the following |



| S. No | Programme/ Theme | Activity Proposed | Amount Proposed FY 26-27 | Amount Approved FY 26-27 | GoI Remarks |
|-------|--|---|--------------------------|--------------------------|--|
| | | advertisement, IEC & Printing activities (Other CH comp) | | | 1) Rs. 1.00 Lakh Newspaper advertisement @ Rs.50,000/each x 2 newspapers x 1 topics = Rs.100,000/- 2) Rs. 0.60 Lakh Social Media Advertisement (with hiring of 2 influencers @ Rs. 30,000/- = 60,000/-) 3) Rs. 0.50 Lakh Bill Board Advertisement for the 10 days @ Rs. 5000/- = 50,000/- |
| 14 | State Specific Initiative & Innovation | Digital standees & signage | 7.00 | 7.00 | Approved Rs. 7.00 Lakhs for digital standees for display of IEC regarding Child health and RBSK |
| 15 | Immunization | Hoarding, Radio, Audio, Bus shelter advertisement, IEC & Printing activities | 7.90 | 7.90 | Approved Rs 7.90 Lakhs for the following 1. Rs. 3.00 Lakhs for Printing of registers, logistics dairies, Temperature monitoring registers etc. 2. Rs. 1.90 Lakhs (38 CCP x Rs.5000 = Rs.1,90,000/-) for designated printing of IEC material at 38 cold chain points 3. Rs. 3 Lakhs for printing of posters, banners etc. |
| 16 | Adolescent Health | Printing of WIFS IEC material | 0.50 | 0.50 | Approved Rs 0.5 Lakh for printing of WIFS card and registers @Rs 25000/ district for 2 districts .State to shift to digital platforms |
| 17 | Adolescent Health | Organizing State Level Menstrual Hygiene Day, Menstrual Health and Hygiene Activities, etc. | 1.52 | 1.50 | Approved Rs 1.5 Lakhs for awareness activities related to menstrual hygiene in schools and community including celebration of Menstrual Hygiene Day. |
| 18 | Adolescent Health | Purchase of PE Kits | 8.10 | 8.10 | Approved Rs 8.10 Lakhs for Peer Educator kits @ Rs 750/ kit for 1080 PE |
| 19 | Adolescent Health | Printing Training Modules | 4.60 | 4.60 | Approved Rs 4.60 Lakhs for training materials for 920 teachers/HWAs @ Rs 500/ HWA |
| 20 | Family Planning | Proposed for World Population Day and IEC Activities during Vasectomy Fortnight | 0.76 | 0.76 | Approved Rs.0.76 Lakh for celebration of WPD@ Rs. 2000/- per facility for 38 facilities. |
| 21 | Family Planning | Print and Mass Media advt. (other FP comp) | 1.50 | 1.50 | Approved Rs. 1.50 Lakhs for 3 Newspaper advertisement x 2 times @ Rs. 25,000/- each. |
| 22 | Nutrition | IEC & Printing activities | 1.70 | 1.70 | Approved Rs 1.70 Lakhs for printing of reporting formats and registers for AMB until digital reporting is in position fully. |
| 23 | Nutrition | State level Dissemination of NDD, printing & | 4.00 | 4.00 | Approved Rs 4.00 Lakhs for printing of reporting formats and NDD launch activities at community and in schools for |

| S. No | Programme/ Theme | Activity Proposed | Amount Proposed FY 26-27 | Amount Approved FY 26-27 | GoI Remarks |
|-------|---|--|--------------------------|--------------------------|--|
| | | mass media activities. | | | bi-annual NDD rounds @ Rs. 1 lakh each/district |
| 24 | Nutrition | MAA | 5.06 | 3.20 | Approved Rs. 3.20 Lakhs for the following: a. Rs 2.00 Lakhs for launch & IEC activities during World Breastfeeding Week and dissemination of AV material to promote breastfeeding on bus stands @ Rs 1 lakh/district for 2 districts. b. Rs. 1.2 Lakhs for 300 KMC foam boards @ Rs. 400 each board to be displayed at PHU. |
| 25 | Nutrition | IDCF | 2.95 | 2.95 | Approved Rs. 2.95 Lakhs for STOP Diarrhoea 2026 IEC/ BCC Campaign as per following details: (i) Rs. 1.95 Lakh for 10 digital hoardings @ Rs. 19500 per digital hoarding (ii) Rs. 1.0 Lakh for STOP Diarrhoea banners for facility and community level (Total Quantity: 200 units @ Rs. 500/- each) |
| 26 | National Iodine Deficiency Disorders Control Programme (NIDDCP) | IEC for celebration of Global IDD prevention day | 0.51 | 0.51 | Approved Rs. 0.51 Lakhs for IEC activities and celebration of Global IDD prevention day. |
| 27 | Integrated Disease Surveillance Programme (IDSP) | Printing activities for Communicable Diseases under IDSP | 1.50 | 1.50 | Approved Rs. 1.50 Lakhs for printing under IDSP & VPD Surveillance. |
| 28 | National Vector Borne Disease Control Programme (NVBDCP) | IEC & Printing activities | 6.91 | 6.31 | Approved Rs. 6.31 Lakhs for the following: 1) Rs. 0.60 Lakh for Awareness Drives at Community level 2) Rs. 0.20 Lakh for Advocacy State Rs. 10000X2 3) Rs. 0.20 Lakh for Advocacy District Rs.10000X2 4) Rs. 1.20 Lakhs for Electronic – AIR/DD/Cable/Local channels 5) Rs. 0.40 Lakh for Folk media (skits, street plays, magic shows), wall paintings, Hoardings on buses, Bill boards, slides in theatres etc. 6) Rs. 0.40 Lakh for Others (group meetings, school campaign) Social Mobilization 7) Rs. 0.40 Lakh for Independent body 8) Rs. 0.10 Lakh for 5000 M4 forms 9) Rs. 0.10 Lakh for 5000 M1 forms 10) Rs. 0.60 Lakh for 100000 M2 forms 11) Rs. 0.50 Lakh for 150 M3 Register 12) Rs. 0.10 Lakh for 2,000 Case investigation form |



| S. No | Programme/ Theme | Activity Proposed | Amount Proposed FY 26-27 | Amount Approved FY 26-27 | GoI Remarks |
|-------|--|---|--------------------------|--------------------------|--|
| | | | | | 13) Rs. 1.50 Lakh for 70,000 Health cards 14) Rs. 0.01 Lakh for 1,000 support case investigation form Not Approved Rs. 0.60 lakh newspaper advertisements. |
| 29 | National Vector Borne Disease Control Programme (NVBDCP) | IEC & Printing activities | 0.25 | 0.25 | Approved Rs. 0.25 Lakh for the following: 1) Rs. 0.15 Lakh for Advertisement on Electronic Media, Folk media 2) Rs. 0.10 Lakh for Advocacy workshops |
| 30 | National Vector Borne Disease Control Programme (NVBDCP) | IEC & Printing activities | 3.00 | 3.00 | Approved Rs. 3.00 Lakhs for the following: 1) Rs. 0.60 Lakh for Observation of National Dengue day 2) Rs. 0.20 Lakh for Advocacy State Rs. 10000X2 3) Rs. 0.20 Lakh for Advocacy District Rs.10000X2 4) Rs. 1.20 Lakhs for Electronic – AIR/DD/Cable/Local channels 5) Rs. 0.80 Lakh for Folk media (skits, street plays, magic shows), wall paintings, Hoardings on buses, Bill boards, slides in theatres etc. |
| 31 | National Vector Borne Disease Control Programme (NVBDCP) | IEC & Printing activities | 2.00 | 2.00 | Approved Rs. 2.00 Lakhs for the following: 1) 0.80 Lakhs for Electronic – AIR / DD / Cable / Local channels 2) 1.20 Lakhs for Folk media (skits, street plays, magic shows), wall paintings, hoardings on buses, posters, Bill boards, slides in theatres etc. |
| 32 | National Leprosy Eradication Programme (NLEP) | IEC & Printing activities | 1.68 | 1.68 | Approved Rs. 1.68 Lakhs for the following: a. Rs. 1.00 Lakh for State Level IEC activities (Competitions, street play etc.) b. Rs. 0.68 Lakh for SPARSH Leprosy activities for 34 centers @ 2000/- per center. |
| 33 | National Leprosy Eradication Programme (NLEP) | IEC & Printing activities | 2.50 | 2.50 | Approved Rs. 2.50 Lakhs for printing of house to house registers and patient annexures. |
| 34 | National Tuberculosis Elimination Programme (NTEP) | Hoarding, IEC activities, Printing, Advertisement, etc. | 23.00 | 23.00 | Approved Rs. 23.00 Lakhs for the following: 1. Rs. 3.00 Lakhs for Bill board advertisement 300000 x 1 months (one month in every quarter). 2. Rs. 2.50 Lakhs for Bus shelter advertisement on 10 bus stands for 1 months. 3. Rs. 1.50 Lakhs for Audio advertisement on bus stands for 20 days. |

| S. No | Programme/ Theme | Activity Proposed | Amount Proposed FY 26-27 | Amount Approved FY 26-27 | GoI Remarks |
|-------|---|---|--------------------------|--------------------------|--|
| | | | | | 4. Rs. 2.00 Lakhs for 2500 Paper poster printing in public places. 5. Rs. 2.50 Lakhs for 100000 pamphlets printing. 6. Rs. 2.50 Lakhs for printing of sticker for lab transportation and lamination of guidelines. 7. Rs. 2.50 Lakhs for hoarding advertisement on KTC bus stands on 5 bus stands for 1 month. 8. Rs. 2.50 Lakhs for Backlit pole kiosk advertisement in 6 cities for 1 months. 9. Rs. 2.50 Lakhs for replacement of flex banner of Hoardings installed at PHC / CHC / UHC. 10. Rs. 1.50 Lakhs for LED boards at 3 centers (GMC, TB hospital North and TB hospital South) @ 0.50 Lakh per board. |
| 35 | National Rabies Control Programme (NRCP) | Printing of Rabies Card, Register, Pamphlets, posters, action manual under PPCL | 2.00 | 2.00 | Approved Rs 2.00 Lakhs for IEC activities at State & District level for Rabies Prevention and Control |
| 36 | Programme for Prevention and Control of Leptospirosis (PPCL) | Printing of pamphlets & Charts | 0.75 | 0.75 | Approved Rs 0.75 Lakh for IEC activities at State & District level for Prevention & Control of Leptospirosis |
| 37 | National Viral Hepatitis Control Programme (NVHCP) | IEC & Printing of posters, Hoardings, Banners, Standees. | 0.99 | 0.99 | Approved Rs 0.99 Lakhs for IEC/BCC activities for NVHCP @ Rs 3000 for 33 peripheries. |
| 38 | National Viral Hepatitis Control Programme (NVHCP) | Printing for Treatment Cards / Flyers / formats / registers | 2.00 | 2.00 | Approved Rs 2.00 Lakhs for Printing for Treatment Cards/Flyers/formats/registers. State to use digital media as far as possible. |
| 39 | National Program for Control of Blindness and Vision Impairment (NPCB+VI) | Printing of posters and IEC material | 2.50 | 2.50 | Approved Rs. 2.50 Lakhs for IEC activities at both district level and state level. |
| 40 | National Mental Health Program (NMHP) | IEC & Printing | 14.00 | 8.00 | Approved Rs. 8.00 Lakhs for Digital IEC activities for 2 Districts @ Rs. 4 Lakhs per district as per norms. |
| 41 | National Tele Mental Health | IEC & Printing | 6.00 | 6.00 | Approved Rs. 6.00 Lakhs for media campaigns and multimedia content |

| S. No | Programme/ Theme | Activity Proposed | Amount Proposed FY 26-27 | Amount Approved FY 26-27 | GoI Remarks |
|-------|---|---|--------------------------|--------------------------|---|
| | Program (NTMHP) | | | | (video/podcasts) used for targeted public messaging and education, awareness activities, printing of leaflets, booklets, hoardings, radio jingles under Telemanas @ 50,000 per month for 12 months. |
| 42 | National Programme for Health Care for the Elderly (NPHCE) | Printing of IEC on healthy ageing, Observation of activities on International elderly Day, Printing of elderly policy | 2.70 | 1.40 | Approved Rs. 1.40 Lakhs for the following: 1. Rs 0.40 Lakh Approved to conduct activities on International Day of Older Persons @ Rs. 1000 for 40 Health facilities. 2. Rs 1.00 Lakh Approved for digital IEC & social media campaigns. Not Approved Rs 1.30 Lakhs for printing of Goa State Elderly Policy booklets |
| 43 | National Tobacco Control Programme (NTCP) | Implementation of COTPA | 17.60 | 14.00 | Approved Rs. 14.00 Lakhs for the following: 1. Rs. 3.00 Lakhs for development of posters / stickers / handouts / wall paintings / hoardings / local advt etc. Use of innovative IEC tools, including m-Health in campaigns. 2. Rs. 2.00 Lakhs for hoardings / bill boards / signage etc. 3. Rs. 1.00 Lakh for maintenance of existing boards, digital screens. 4. Rs. 2.00 Lakhs for Printing of Challan Books under NTCP 5. Rs. 4 lakhs for printing and IEC for declaring tobacco free village panchayats 6. Rs. 2.00 Lakhs for observation of World No Tobacco Day. Not Approved Rs. 3.60 Lakhs for Anti-Tobacco Film Festival, as it does not fall under the NTCP PIP Guidelines |
| 44 | National Tobacco Control Programme (NTCP) | Implementation of ToFEI | 8.00 | 8.00 | Approved Rs. 8.00 Lakhs, as per NTCP PIP guideline, for compliance to tobacco free educational institutional guidelines @ Rs 4 lakhs per District Tobacco Cessation Center. |
| 45 | National Programme for Prevention and Control of Non Communicable Diseases (NP-NCD) | Printing of CBAC Form | 3.00 | 3.00 | Approved Rs. 3.00 Lakhs for Printing of CBAC Forms |
| 46 | National Programme for Prevention and Control of Non Communicable Diseases | STEMI referral form for SPOKE Centres | 0.50 | 0.50 | Approved Rs. 0.50 Lakh for STEMI referral form for 20 SPOKE centres. |

| S. No | Programme/ Theme | Activity Proposed | Amount Proposed FY 26-27 | Amount Approved FY 26-27 | GoI Remarks |
|-------|--|--|--------------------------|--------------------------|--|
| 47 | National Programme for Prevention and Control of Non Communicable Diseases | Observation / Celebration of world Heart Day, World Hypertension Day at State and District Level | 0.50 | 0.50 | Approved Rs. 0.50 Lakh for Observation / Celebration of world Heart Day and World Hypertension Day at State and District Level for 32 HF (24 PHC+6 CHC+ 2 DH). |
| 48 | National Programme for Prevention and Control of Non Communicable Diseases | Printing of treatment and follow up register for HTN & DM | 2.38 | 0.00 | Not Approved Rs. 2.38 Lakhs for Printing of three registers per HF |
| 49 | National Programme for Prevention and Control of Non Communicable Diseases | Printing of IEC material for Diabetes awareness including observation of World Diabetes Day | 7.50 | 7.50 | Approved Rs. 7.50 Lakhs for the following: 1. Rs. 5.00 Lakhs for 20 Health facilities (DH/SDH/PHC) for digital standees @Rs. 25,000/- per standee displaying IEC all NCD's 2. Rs. 2.50 Lakhs for Observation of World Diabetes Day. |
| 50 | National Programme for Prevention and Control of Non Communicable Diseases | Observation of Breast Cancer awareness month, COPD, NAFLD and National Cancer awareness | 1.00 | 1.00 | Approved Rs. 1.00 Lakh for 40 Health facilities at Rs.2500 per HF for the year for Observation of Breast Cancer awareness month, COPD, NAFLD and National Cancer awareness. |
| 51 | National Programme for Prevention and Control of Non Communicable Diseases | Printing of Breast Cancer, COPD and NAFLD posters | 1.50 | 1.50 | Approved Rs. 1.50 Lakhs for Printing of Breast Cancer, COPD and NAFLD posters for the year at all the Health facilities. |
| 52 | National Programme for Prevention and Control of Non Communicable Diseases | Printing of IEC material under Goa Stroke Programme observation of World Stroke Day | 3.50 | 3.50 | Approved Rs. 3.50 Lakhs for Printing of IEC material under Goa Stroke Programme observation of World Stroke Day, NCD camps and printing & editing of Goa Stroke management guidelines, stroke forms |
| 53 | National Program for Climate Change and Human Health (NPCCHH) | Printing of Charts & manuals and IEC material under NPCCHH | 0.50 | 0.50 | Approved Rs. 0.50 Lakh for IEC on Celebration of International day Air pollution & heat related diseases. |
| 54 | National Oral health programme (NOHP) | IEC activities | 0.50 | 0.50 | Approved Rs. 0.50 Lakh for IEC on Celebration of Oral Health Day and Satellite Clinic |
| 55 | National Oral health | IEC activities | 1.00 | 1.00 | Approved Rs. 1.00 Lakh for IEC on Celebration of Oral Health Day and IEC/ Awareness activities |



| S. No | Programme/ Theme | Activity Proposed | Amount Proposed FY 26-27 | Amount Approved FY 26-27 | GoI Remarks |
|-------------------------|---|---|--------------------------|--------------------------|---|
| | programme (NOHP) | | | | |
| 56 | National Programme on Palliative Care (NPPC) | Printing of IEC material under palliative care including observation of World Palliative Care Day | 2.68 | 2.68 | Approved Rs. 2.68 Lakhs for the following: 1. Rs. 0.18 Lakh for printing of IEC material under palliative care for 72 Health facilities @ Rs.500 per HF for the year. 2. Rs. 2.50 Lakhs for observation of World Palliative Care Day with related IEC / BCC Activities at state and district level |
| 57 | National programme for Prevention and control of Deafness | IEC on world hearing day, printing of posters on ear care for public awareness | 1.50 | 1.50 | Approved Rs. 1.50 Lakhs for IEC on world hearing day, social media campaigns, multimedia content (video/podcasts), used for targeted public messaging and education on ear care for public awareness. |
| 58 | National programme for Prevention and Management of Burn & Injuries | Awareness on Road Safety | 1.50 | 1.50 | Approved Rs 1.50 Lakhs towards IEC activities (Observation of State and National Road Safety week/month, Printing of hands-on books on Prevention of Accidents and awareness of first aid, observation of World Trauma Day) |
| 59 | Public Health Institutions as per IPHS norms | IEC & Printing activities | 1.00 | 1.00 | Approved Rs. 1.0 Lakhs for IEC & Printing @ Rs.25000/- per USHC for 4 USHC |
| 60 | Comprehensive Primary Healthcare (CPHC) | Printing of Eat Right Toolkit | 0.20 | 0.20 | Approved Rs. 0.20 Lakhs for Eat Right Tool kit for 20 AAM-SHCs @ Rs. 1000 / AAM, as per GOI cost norms. |
| 61 | Comprehensive Primary Healthcare (CPHC) | IEC under CPHC and SC | 5.68 | 5.68 | Approved Rs. 5.68 Lakhs for IEC for the following: a. Rs. 2.78 Lakhs for 139 AAM-SHCs @ Rs. 2000 per AAM-SHC, as per GOI cost norms. b. Rs. 2.90 Lakhs for 58 AAM-PHC @ Rs. 5000 per AAM-PHC, as per GOI cost norms. |
| 62 | IT interventions and systems | Printing of formats | 1.00 | 1.00 | Approved Rs. 1.00 Lakhs for Printing of HMIS formats |
| 63 | Snakebite Envenoming | Printing of posters, chart, leaflets reporting format under Snakebite Program | 1.25 | 1.25 | Approved Rs 1.25 Lakhs for IEC and printing activities on snakebite prevention. |
| Total (In Lakhs) | | | 263.54 | 242.57 | |

Note: The activity-wise approvals indicated above are subject to the condition that the overall expenditure on IEC and printing activities shall remain within the ceiling of 2% (Rs. 165.66 Lakhs) of the RE. The State may prioritize and implement activities accordingly within the prescribed limit.



Annexure 7.5: State-specific Initiatives and Innovations (Details of proposal under S. No. 206)

| S. No | Programme / Theme | Activity | Amount Proposed FY 26 - 27 | Amount Approved FY 26 - 27 | GoI Remarks |
|-------------------------|--|---|----------------------------|----------------------------|--|
| 1 | National Vector Borne Disease Control Programme (NVBDCP) | Research related to Malaria Elimination | 4.00 | 4.00 | Approved Rs. 4.00 Lakhs for research related to Malaria Elimination on effectiveness of LLINs usage among workers of high risk construction sites in Goa. |
| Total (In Lakhs) | | | 4.00 | 4.00 | |

Annexure 7.6: Programme Management Activities (Proposal under S. Nos. 146 and 194)

| S. No | Programme/ Theme | Amount Proposed FY 26 - 27 | Amount Approved FY 26 - 27 | GoI Remarks |
|------------|--|----------------------------|----------------------------|--|
| S. No. 146 | Technical Assistance | 10.00 | 10.00 | Approved Rs. 10.00 Lakh for PM Activities. State to ensure there is no duplications. |
| | Total S no. 146 (In Lakhs) | 10.00 | 10.00 | |
| S. No. 194 | Maternal Health | 0.19 | 0.19 | Approved Rs. 0.19 Lakh for JSY administrative expenses as per the Provision of Administrative Expenses in the JSY guidelines [Up to 4 % and 1% of the fund released could be utilized towards administrative expenses for implementation of JSY by the district and state authorities respectively]. |
| | PC & PNDD Act | 6.20 | 6.20 | Approved Rs. 6.20 Lakhs for the following: a) Rs. 0.70 Lakhs for mobility support for inspection & monitoring visits, including field visits for trainings and sensitization activities. b) Rs. 5.50 Lakhs for annual maintenance for online form F reporting in PNDD portal. Further, State may develop a dedicated PNDD Portal as directed by Central Supervisory Board (CSB). (Activity a and b are not PM activities. Expenditure may be booked under S no. 19) |
| | Child Health | 1.60 | 1.60 | Approved Rs 1.6 Lakhs towards RBSK convergence meetings with stakeholder departments cum review meeting on a quarterly basis at the State level with the State and district authorities and Stakeholders. |
| | Immunization | 5.06 | 5.06 | Approved Rs 5.06 Lakhs for the following: a) Rs.0.50 Lakhs for Monthly Review meetings (IFMS performance review meetings, portal review meetings, etc.) b) Rs. 0.18 Lakh for Quarterly review meetings at State level @ Rs.1500 x 3 x 4 meetings (Quarterly review meetings at State level @ Rs.1500 x 3 x 4 meetings) c) Rs. 2.88 Lakhs for Quarterly review meetings for 40 centers [Rs 60 *30 persons*4 meetings (review meetings, city task force, inter-sectoral meetings)] d) Rs. 1.50 Lakhs for Quarterly Review Meetings for 1 Monthly Meeting for HOs and remaining for quarterly review meetings (State task force, State AEFI technical committee) |
| | Adolescent Health | 1.00 | 1.00 | Approved Rs 1.00 Lakh for bi-annual coordination meetings with WCD, Education and Health @ Rs 50,000/meeting. |
| | Nutrition | 1.20 | 1.20 | Approved Rs 1.20 Lakhs for state level monitoring and supervision of NDD rounds @ Rs 60000/round. |
| | Integrated Disease Surveillance Programme (IDSP) | 18.20 | 17.00 | Approved Rs. 17.00 Lakhs for the following: a. Rs.7.00 Lakhs for State Surveillance Unit per annum under PM activities as per IDSP mandate. b. Rs. 10.00 Lakhs (@ Rs. 5 lakhs per District Surveillance Unit) per annum under PM activities as per IDSP mandate. |

| S. No | Programme/ Theme | Amount Proposed FY 26 - 27 | Amount Approved FY 26 - 27 | GoI Remarks |
|-------|--|----------------------------|----------------------------|--|
| | | | | (These activities are not PM activities. Expenditure may be booked under s no. 63) Not Approved, Rs. 0.50 Lakh for publication and paper presentation related to studies on Kyasanur Forest Disease (KFD), Scrub Typhus, and other communicable diseases. |
| | National Vector Borne Disease Control Programme (NVBDCP) | 6.34 | 6.34 | Approved Rs. 6.34 Lakhs for the following: a. Rs. 1.50 Lakhs for Review meetings at the centers / outside the state / PIP meetings. b. Rs. 0.84 Lakh Rigorous quality assurance of diagnostics, drugs and LLINs. c. Rs 4.00 Lakhs for Mobility for field visits, supervisory field visits, Night collection of adult mosquito, Entomological Surveillance for Adult / larva of mosquito, Rapid Response team (Activity b and c are not PM activities. Expenditure may be booked under S no. 64) |
| | National Vector Borne Disease Control Programme (NVBDCP) | 3.00 | 3.00 | Approved Rs. 3.00 Lakhs for the following: 1) Rs. 2.50 Lakhs for Monitoring, Evaluation and Supervision :- a) Rs. 0.50 Lakh for biannual meetings at 2 districts (4) and at block level (10 blocks) b) Rs. 2.00 Lakhs for Epidemic preparedness 2) Rs 0.50 for Printing of Dengue investigations forms (Activity 1.b and 2 are not PM activities. Expenditure may be booked under s no. 67) |
| | National Vector Borne Disease Control Programme (NVBDCP) | 0.10 | 0.10 | Approved Rs. 0.10 Lakh for State level, district level and block level meeting |
| | National Leprosy Eradication Programme (NLEP) | 6.70 | 6.70 | Approved Rs. 6.70 Lakhs for the following: 1) Rs. 4.00 lakhs for Meetings, Workshops and Conferences 2) Rs. 2.70 lakhs for SRRE inclusive of hiring of vehicles for surveillance supervision and monitoring of leprosy patients at Rs.20000 per months and 0.3 lakhs for 2 half year state level review meeting per year. (Activity 2 is not PM activity. Expenditure may be booked under s no. 72) |
| | National Rabies Control Programme (NRCP) | 4.00 | 4.00 | Approved Rs. 4.00 Lakhs for mobility support and surveillance activities at state & Districts level on rabies prevention |
| | Programme for Prevention and Control of Leptospirosis (PPCL) | 1.25 | 1.25 | Approved Rs. 1.25 Lakhs for mobility support, contingency & surveillance activities at state & Districts level on Leptospirosis prevention |
| | National Viral Hepatitis Control Programme (NVHCP) | 4.87 | 4.87 | Approved Rs. 4.87 Lakhs for the following activities: 1.Rs. 0.40 Lakh for SVHMU travel cost for supervision and monitoring @ 0.20 Lakh per district for 2 districts 2. Rs. 0.27 Lakh for SVHMU: Meeting Costs / Office expenses / Contingency for 2 districts as per NVHCP norms. |

| S. No | Programme/ Theme | Amount Proposed FY 26 - 27 | Amount Approved FY 26 - 27 | GoI Remarks |
|-------|---|----------------------------|----------------------------|---|
| | | | | (i.e. at least 2 participants per district @ Rs. 6700 per participant) 3. Rs. 1.20 Lakhs as Operational cost for existing 2 TCs and additional 2 TCs at below district level @ Rs. 0.3 Lakh/TC. 4. Rs. 3.00 Lakhs as Operational cost for MTC & State Lab @ 1.5 Lakh each (Activity 3 and 4 are not PM activities. Expenditure may be booked under s no. 80) |
| | National Mental Health Program (NMHP) | 8.80 | 8.70 | Approved Rs. 8.70 Lakhs for the following: 1. Rs. 2.00 Lakhs for conducting meeting and workshops in 2 Districts @ Rs. 1 Lakh per District. 2. Rs. 6.00 Lakhs for mobility support for 2 districts @ Rs. 3 Lakh per district. 3. Rs. 0.20 Lakh for operational cost for 2 districts @ Rs. 10 thousand per district. 4. Rs. 0.50 Lakh for M& E activities in 2 Districts @ Rs. 25 thousand per District. |
| | National Programme for Health Care for the Elderly (NPHCE) | 2.00 | 0.00 | Not Approved Rs. 2.00 Lakhs for workshop and conferences. |
| | National Tobacco Control Programme (NTCP) | 21.50 | 21.50 | Approved Rs. 21.50 Lakhs for meeting, workshops, conferences, monitoring and evaluation, mobility support, operational cost, cost of collecting and sending tobacco samples to the testing laboratories for STCC and 2 DTCC (Cost of collecting and sending samples for lab testing is not a PM activity. Expenditure may be booked under s no. 104) |
| | National Tobacco Control Programme (NTCP) | 5.00 | 5.00 | Approved Rs. 5.00 Lakhs for the following: 1. Rs. 3.00 lakhs for mobility for school, college visits, inspection, etc. @ Rs. 1.50 Lakhs per district. (This does not pertain to PM activity. Expenditure may be booked under s no. 105) 2. Rs. 2.00 Lakhs for operational cost at 2 DTCC's @ Rs. 1 Lakh per DTCC. |
| | National Programme for Prevention and Control of Non Communicable Diseases (NP-NCD) | 8.00 | 8.00 | Approved Rs. 8.00 Lakhs for the following: 1. Rs. 3.00 Lakhs for Hiring of Vehicles. 2. Rs. 2.00 Lakhs Office stationery, contingencies, operating expenses, etc. at 2 DH 3. Rs. 3.00 Lakhs for supervisory field visits for District Hospitals and peripheral health care facilities and for awareness and IEC activities for Goa stroke programme, monitoring visit NPNCD portal, etc. and other NP-NCD activities. (Activity 3 is not a PM activity. Expenditure may be booked under s no. 107) |
| | National Programme for Prevention and Control of Non Communicable Diseases (NP-NCD) | 1.20 | 1.00 | Approved Rs. 1.00 Lakh for Office stationery, contingencies, operating expenses, etc. at CHC |

| S. No | Programme/ Theme | Amount Proposed FY 26 - 27 | Amount Approved FY 26 - 27 | GoI Remarks |
|-------|---|----------------------------|----------------------------|---|
| | National Programme for Prevention and Control of Non Communicable Diseases (NP-NCD) | 17.00 | 10.00 | <p>Approved Rs. 10.00 Lakhs for the following:</p> <p>1. Rs 1.00 Lakhs for Misc. and contingency at Day Care Centre, as per norms. (This is not a PM activity. Expenditure may be booked under s no. 110)</p> <p>2. Rs 2.00 Lakhs for State Level Programme & Management cost, Office stationery, contingencies, operating expenses, purchase of folders, Photo copies and binding etc., as per norms</p> <p>3. Rs 2.00 Lakhs for District Level Programme & Management cost continued activity.</p> <p>4. Rs 5.00 Lakhs for Review meetings and Outstation trainings, workshops, National Review Workshops / Conferences on Stroke, Steering committee meetings lung cancers, DCCC and other NP NCD programmes, review meetings and field visits to peripheral health care facilities for Diabetes Management etc.</p> <p>Not Approved, Rs. 5.0 Lakhs for Hiring of Vehicles</p> |
| | National Program for Climate Change and Human Health (NPCCHH) | 2.00 | 2.00 | Approved Rs. 2.00 Lakhs towards mobility support for Heat Surveillance in 2 districts. |
| | National Oral health programme (NOHP) | 5.00 | 5.00 | Approved Rs. 5.00 Lakhs towards Mobility support for field visits (35 Dental Clinics across Goa). (This is not a PM activity. Expenditure may be booked under s no. 115 & 116) |
| | National Programme on Palliative Care (NPPC) | 6.00 | 0.00 | Not Approved Rs. 6.00 Lakhs as there is no existing provision for the said activities under NPPC. |
| | National Programme for Prevention and Control of Deafness (NPPCD) | 2.00 | 2.00 | Approved Rs. 2.00 Lakhs towards workshop and conferences. |
| | National programme for Prevention and Management of Burn & Injuries | 3.00 | 3.00 | Approved Rs. 3.00 Lakhs for conducting Review meetings and Outstation training, workshops, National Review Workshops / Conferences on Trauma Care, Drowning etc. |
| | National Program for Control of Blindness and Vision Impairment (NPCB+VI) | 7.00 | 7.00 | <p>Approved Rs. 7.00 Lakhs for the following:</p> <p>a) Rs. 0.50 Lakh for research & publication. (This is not a PM activity. Expenditure may be booked under s no. 96)</p> <p>b) Rs. 0.50 Lakh Annual review meetings.</p> <p>c) Rs. 3.00 Lakhs Mobility support & field visits.</p> <p>d) Rs. 3.00 Lakhs for operational cost for stationery, office expenses, etc.</p> |
| | Technical Assistance (HSS) | 24.68 | 24.68 | <p>Approved Rs. 24.68 Lakhs for the following:</p> <p>a. Rs.0.92 Lakhs (Rs. 23,000 per month * 4 Months) to conduct monthly meetings to review the progress and performance of Peripheral Health Centres.</p> <p>b. Rs. 8.00 Lakhs towards Meetings / workshops / Conference outside the State.</p> |

| S. No | Programme/ Theme | Amount Proposed FY 26 - 27 | Amount Approved FY 26 - 27 | GoI Remarks |
|------------------------------------|--------------------------------|----------------------------|----------------------------|--|
| | | | | c. Rs. 5.00 Lakhs for hosting national-level officials visiting the State of Goa for review, monitoring, evaluation, trainings and other official purposes. d. Rs. 2.56 Lakhs for procurement of official postpaid SIM cards for 61 officials. e. Rs. 3.70 Lakhs for repair and AMC of ICT equipment. f. Rs. 1.50 Lakhs for procurement of 4 desktop computers and 1 laser printer. g. Rs. 3.00 Lakhs for stationery and printing. State to ensure there is no duplication. |
| | Technical Assistance (NTEP) | 74.25 | 74.25 | Approved Rs. 74.25 Lakhs for Mobility support to staff, review meeting, medical college engagement, POL & Hiring of vehicle & Office expenditure. Mobility support for service delivery HR, POL and Maintenance charges for Mobile Medical Vans, contingency for IRL, Core committee & other meetings at Medical college, travel cost of ZTF/ STF, thesis at state level, and TLD Batch for radiographers operating handheld x-ray machines are not PM Activities. Expenditure may be booked under s no. 73. |
| | Technical Assistance (RCH) | 43.92 | 35.92 | Approved Rs. 35.92 Lakhs for Technical Assistance (RCH). State to ensure there is no duplication of proposal. Not Approved Rs. 8.00 Lakhs towards mobility support for Director Finance as the post has been dropped by the state as per NPCC discussion. |
| | IT interventions and systems | 2.00 | 2.00 | Approved Rs. 2.00 Lakhs for the following: 1. Rs. 1.00 Lakh for Mobility Support and Field Visits to facilities. 2. Rs. 1.00 lakh for Expenses on account of consumables, office expenses, operating expenses, contingency, admin expenses, miscellaneous, Internet bills etc. |
| | Snakebite Envenoming | 1.50 | 1.50 | Approved Rs. 1.50 Lakhs for mobility support and surveillance activities at state & Districts level on snakebite prevention. |
| | Capacity Building and Training | 6.89 | 6.89 | Approved Rs. 6.89 Lakhs for ToT of Medical Officers, Staff Nurses, CHOs and MPW/ANMs @ Rs. 1.69 Lakhs for Medical Officers, and total Rs. 5.20 Lakhs for Staff Nurses, CHOs and MPW/ANMs. The days approved for integrated training TOT for medical officers are 6 days, TOT of CHO, ANM and Staff Nurses are 7 days each. (This is not a PM activity. Expenditure may be booked under s no. 201) |
| Total S. No. 194 (In Lakhs) | | 301.45 | 276.95 | |