

**Healthcare facilities in the rural areas**

1818. SHRI RAJMANI PATEL:

DR. AMEE YAJNIK:

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

(a) whether Government has assessed the availability of healthcare facilities in the rural areas *vis-a-vis* the urban areas of the country;

(b) if so, the details and the outcome thereof; and

(c) the programmes/schemes being implemented/proposed to be implemented by Government to reduce rural-urban gap in access of quality healthcare and advanced treatment and diagnostic facilities in the country?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI ASHWINI KUMAR CHOUBEY): (a) and (b) As per National Health Profile 2018, there are 19810 Rural Government Hospitals with 279588 beds and 3772 Urban Government hospitals with 431173 beds in India. The State-wise details are given in Statement (*See* below).

As per Health Management Information System (HMIS), there are 86342 doctors in rural areas (including doctors in District Hospitals) and 15964 doctors in urban areas.

As per Health and Morbidity Survey 2014 of National Sample Survey Office (NSSO), Ministry of Statistics and Program Implementation, Out of Pocket Expenditure (OOPE) per hospitalized case (excluding child birth) in Public Health Facilities is ₹ 5369 for rural and ₹ 7189 for urban areas. The OOPE in public health facilities is much lower than the private sector.

(c) “Public Health and Hospital” being a State subject, the primary responsibility to provide healthcare to its citizens lies with the State Governments. To address the healthcare challenges, particularly in rural areas, the National Rural Health Mission (NRHM) was launched in 2005 to supplement the efforts of the State/UT Governments to provide accessible, affordable and quality healthcare to all those who access public health facilities. Currently, NRHM is a submission of National Health Mission.

This support under NHM includes provision of a host of free services such as maternal health, child health, adolescent health, family planning, universal immunisation programme, and for major diseases such as Tuberculosis, HIV/AIDS, vector borne diseases like Malaria, Dengue and Kala Azar, Leprosy etc.

Other major initiatives include Janani Shishu Suraksha Karyakram (JSSK) (under which free drugs, free diagnostics, free blood and diet, free transport from home to institution, between facilities in case of a referral and drop back home is provided), Rashtriya Bal Swasthya Karyakram (RBSK) (which provides newborn and child health screening and early interventions services free of cost for birth defects, diseases, deficiencies and developmental delays to improve the quality of survival), implementation of Free Drugs and Free Diagnostics Service Initiatives, PM National Dialysis Programme and implementation of National Quality Assurance Framework.

Mobile Medical Units (MMUs) and Telemedicine are also being implemented with NHM support to improve healthcare access particularly in rural areas.

As part of Ayushman Bharat, the Government is supporting the States for strengthening Sub Centres and Primary Health Centres as Health and Wellness Centres (AB-HWCs) for provision of comprehensive primary health care that includes preventive and health promotion at the community level with continuum of care approach. Further, Ayushman Bharat, Pradhan Mantri Jan Arogya Yojana (AB-PMJAY) provides health coverage up to ₹ 5.00 lakh per family per year to around 10.74 crore poor and vulnerable families as per Socio Economic Caste Census (SECC).

To improve availability of doctors and specialists in underserved areas, the Government is upgrading District Hospitals to Medical Colleges in 82 districts which do not have any Medical College thereby providing at least one Medical College for every three contiguous Parliamentary Constituencies.

#### *Statement*

*State-wise details of availability of health care facilities in the rural areas vis-a-vis urban areas of the country*

Sl. No.	State/UT/ Division	Hospitals (Government) No.			Hospitals (Government) Beds		
		Rural	Urban	Total	Rural	Urban	Total
1	2	3	4	5	6	7	8
	<b>India</b>	<b>19810</b>	<b>3772</b>	<b>23582</b>	<b>279588</b>	<b>431173</b>	<b>710761</b>
1.	Andhra Pradesh	193	65	258	6480	16658	23138
2.	Arunachal	208	10	218	2136	268	2404
3.	Assam *	1176	50	1226	10944	6198	17142
4.	Bihar	930	103	1033	6083	5936	12019
5.	Chhattisgarh	169	45	214	5070	4342	9412

1	2	3	4	5	6	7	8
6.	Goa*	17	25	42	1405	1608	3013
7.	Gujarat	364	122	486	11715	20565	32280
8.	Haryana*	609	59	668	6690	4550	11240
9.	Himachal	705	96	801	5665	6734	12399
10.	Jammu and Kashmir	56	76	132	7234	4417	11651
11.	Jharkhand	519	36	555	5842	4942	10784
12.	Karnataka*	2471	374	2845	21072	49093	70165
13.	Kerala	981	299	1280	16865	21139	38004
14.	Madhya Pradesh	334	117	451	10020	18819	28839
15.	Maharashtra	273	438	711	12398	39048	51446
16.	Manipur	23	7	30	730	697	1427
17.	Meghalaya*	143	14	157	1970	2487	4457
18.	Mizoram*	56	34	90	604	1393	1997
19.	Nagaland	21	15	36	630	1250	1880
20.	Odisha*	1655	149	1804	6339	12180	18519
21.	Punjab*	510	172	682	5805	12128	17933
22.	Rajasthan	602	150	752	21088	10760	31848
23.	Sikkim*	24	9	33	260	1300	1560
24.	Tamil Nadu*	692	525	1217	40179	37353	77532
25.	Telangana*	802	61	863	7668	13315	20983
26.	Tripura*	99	56	155	1140	3277	4417
27.	Uttar Pradesh*	4442	193	4635	39104	37156	76260
28.	Uttarakhand	410	50	460	3284	5228	8512
29.	West Bengal	1272	294	1566	19684	58882	78566
30.	Andaman and Nicobar Islands	27	3	30	575	500	1075
31.	Chandigarh	0	4	4	0	778	778
32.	Dadra and Nagar Haveli*	10	1	11	273	316	589

1	2	3	4	5	6	7	8
33.	Daman and Diu	5	0	5	240	0	240
34.	Delhi	0	109	109	0	24383	24383
35.	Lakshadweep	9	0	9	300	0	300
36.	Puducherry	3	11	14	96	3473	3569

**Notes:** Government hospitals includes Central Government, State Government and local govt. bodies.

# Projected population is taken from Report of the Technical Group on Population Projections May 2006, National Commission on Population, Registrar General of India

\*States/Uts provided information for the year 2017 and PHCs are also included in the number of hospitals.

**Source:** Director General of State Health Services

### **Empanelment of hospitals under CGHS in H.P.**

1819. SHRI P. BHATTACHARYA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether his Ministry has received any representation regarding empanelment of private hospitals and diagnostic centres at Himachal Pradesh under CGHS which was forwarded by Prime Minister's Office in the month of February, 2019;

(b) if so, what action has been taken by the Ministry in this regard;

(c) if not, reasons therefor;

(d) whether Government will implement this scheme on priority basis; and

(e) the names of empanelled private hospitals and diagnostic centres in Himachal Pradesh?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI ASHWINI KUMAR CHOUBEY): (a) to (e) Yes, an online representation was received in February 2019, *inter alia*, requesting for empanelment of hospitals and diagnostic centres in Himachal Pradesh under CGHS. Government continues to make efforts to empanel private hospitals under CGHS Shimla. However, no hospital/diagnostic centre has applied for empanelment under CGHS Shimla even after repeated advertisements and relaxation of norms. Government can empanel private hospitals and diagnostic centres only if they apply for empanelment and are found eligible. As on date, no private hospital or diagnostic centre is empanelled under CGHS, Shimla, Himachal Pradesh.