

**GOVERNMENT OF INDIA
HEALTH AND FAMILY WELFARE
LOK SABHA**

UNSTARRED QUESTION NO:3871

ANSWERED ON:17.05.2006

FUND ALLOCATION TO STATES

Annayagari Shri Sai Prathap;Reddy Shri Mekapati Rajamohan

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

- (a) whether the Government proposes to redefine the Central fund allocation to States by reducing population weight;
- (b) if so, the details thereof;
- (c) whether any new formula has been chalked out for fund allocation to States; and
- (d) if so, the details thereof?

Answer

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH & FAMILY WELFARE (SMT. PANABAKA LAKSHMI)

(a) to (d) A number of parameters including population are considered while deciding on Central fund allocations to the States in the health sector. There are certain specific schemes like maintenance of Sub-Centres where the allocation is made in terms of the infrastructure created over the Plans and the norms that have been laid down based on 1991 population. In the case of Disease Control Programmes, allocations made are based on a mix of various factors namely population, prevalence of the disease, etc.

To have a better impact, a number of schemes have been merged under the over-arching umbrella of National Rural Health Mission(NRHM) of which the Reproductive Child Health Programme Phase-II (RCH II) forms an important constituent. The funds for this programme have been earmarked based on the Project Implementation Plans (PIPs) prepared by the States/UTs and appraised by the Government of India.

The States having poor public health systems and also weak key health indicators, called Empowered Action Group (EAG) States, namely Bihar, Chhattisgarh, Jharkhand, Madhya Pradesh, Orissa, Rajasthan, Uttar Pradesh and Uttaranchal; two hilly States of Himachal Pradesh and Jammu & Kashmir; and the whole of North-Eastern Region including Sikkim have been given special emphasis in the allocation of funds to improve the capacity of the health system to bring all round improvement in public health services.

Similarly, with the launch of National Rural Health Mission, while making allocations for the Scheme of Mission Flexible Pool, the same criteria as for RCH-II has been adopted.

Population continues to remain an important parameter, however, additionally health indicators have also been given an important place with the launch of National Rural Health Mission to make healthcare delivery more effective and healthcare services accessible and affordable to the rural poor.