MINISTRY OF HEALTH

AND

FAMILY WELFARE

RECORD OF PROCEEDING - FY 2026-27

State: Himachal Pradesh

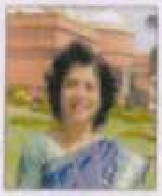
NATIONAL HEALTH MISSION

राष्ट्रीय स्वास्थ्य मिशन

NATIONAL HEALTH MISSION

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



PREFACE

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.

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#StopObesity

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 Mukt 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(5)/2024-NHM-I

Ministry of Health and Family Welfare
Government of India
National Health Mission

Kartavya Bhawan, New Delhi
Dated: 24th June, 2026

To,

Mr. Pradeep Kumar Thakur
The Mission Director, (NHM)
Department of Health & Family Welfare,
Government of Himachal Pradesh
SDA Complex Rd, SDA Complex, Kasumpti, Shimla- 171009
Himachal Pradesh

Subject: Approval of NHM State Programme Implementation Plan for the state/UT of Himachal Pradesh for the FY 2026-27.

Ma'am/Sir,

This refers to the Programme Implementation Plan (PIP) for FY 2026-27 submitted by the State of Himachal Pradesh and subsequent discussions in the NPCC meeting held on 28.01.2026 at Kartavya Bhawan, New Delhi.

Administrative approval is hereby accorded for an amount of Rs 948.14 Crore against a Resource Envelope of Rs 660.13 Crore for FY 2026-27. This amount is inclusive of IM and Immunization Kind Grants. Please refer to Tables 'A' and 'B' for details regarding the Resource Envelope."

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

Sl.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)	412.19
B	GoI Support for Incentive Pool based on last year's performance (assuming no incentive/ reduction on account of performance)	73.93
C	GoI Support (under Infrastructure Maintenance)	108.00
D	Total GoI support (A+B+C)	594.12
E	State Share (C*40% / 10%)	66.01
F	**Total Resource Envelope (D+E)**	**660.13**

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

	Particulars	2026-27
A	Total GoI Allocation	594.12
B	Proportionate State Matching Share (40%/10%)	66.01
C=(A+B)	**Total Allocation**	**660.13**
D	Less: GoI support - Infrastructure Maintenance	108.00
E	Less: (Kind Grants)	56.03
F=(C-D-E)	**Eligible amount for fresh approval other than IM and Immunisation Kind Grant**	**496.10**
G=(F*1.25)	**Permissible Limit (1.25 times of above)**	**620.12**
D	**Add: Infrastructure Maintenance (IM)**	**108.00**
E	Add: (Kind Grants)	**56.03**
H=(G+D+E)	**Maximum Permissible Resource Envelope**	**784.16**

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 (Sl. 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 (Sl 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, 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 utilize 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.

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 sanctioningauthority 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 timeto 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,

Director/DS, NHM

Annexure 1: SDG & Disease Elimination Targets Plan

Section A: SDG Health Indicator Progress

Sl.	SDG / Health Indicator	SDG 2030 Target	National Current Status	State Current Status
1	Maternal Mortality Ratio (MMR) per 1,00,000 LB	< 70	87	NA
2	Neonatal Mortality Rate (NMR) per 1,000 LB	≤ 12	18	8
3	Under-5 Mortality Rate (U5MR) per 1,000 LB	≤ 25	28	15
4	Full Immunization Coverage (%)	≥ 90 %	74.9%	86.6%
5	Reduction in premature mortality from Non - Communicable Diseases through prevention, treatment, and promotion.	30% Reduction	-	-

**SRS 2024; **NFHS 6*

Section B: Disease Elimination Milestones

Sl.	Disease Elimination Programme	National Target (Year)	State Status	Key Gap
1	TB Elimination (TB Mukt Bharat Abhiyan)	2030	Incidence: 244 (2024) Mortality: 31 (2024)	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

Sl.	Disease Elimination Programme	National Target (Year)	State Status	Key Gap
				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 Mukt Bharat App 100% timely disbursement of Ni-kshay Poshan Yojana DBT benefits to eligible beneficiaries
2	Malaria Elimination	2030	Annual Parasite Incidence (API) – 0.01	Seven districts having Annual Blood Examination Rate (ABER) less than the national guidelines. Screening of high risk groups, particularly migrant labour at industrial and construction sites needs to be strengthened
3	Lymphatic Filariasis Elimination	2027	HP is non- endemic for LF	HP is non- endemic for LF
4	Kala-Azar Elimination (<1case/10,000 pop.)	2023 (ongoing)	HP is non- endemic for Kala Azar	HP is non- endemic for Kala Azar
5	Leprosy Elimination (<1case/10,000 pop.)	Sustained	State of Himachal Pradesh has achieved elimination Status (i.e PR <1case/10,000 pop.). All districts have PR<1 in Himachal Pradesh.	NA

Sl.	Disease Elimination Programme	National Target (Year)	State Status	Key Gap
6	Viral Hepatitis Elimination (B & C) Target: Incidence of hepatitis B $\leq$ 0.1 % in 1 lakh population	2030	NA	NA
7	Sickle Cell Disease Elimination Mission	2047	Not implementing	NA

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

Sl No.	Indicator Type	Division	Indicator Statement	Indicator	Unit	Source of data	Target for FY 2026-27
1	Output	Maternal Health	ANC registration in1st trimester of pregnancy (within12weeks)	% 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	96%
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	16%
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	FBNC MIS Online Portal	> 90%
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/ HMIS	80% (1084 Under 5 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	HMIS	<10 Per 1000 Births
7	Output	Child Health (RBSK)	Screening of Children in Government & Government aided	Percentage of children screened and managed by RBSK MHTs Numerator: Number of Children in Government & Government	Percentage	Quarterly State Report	100% 0-6 Years 2 Visit -

Sl No.	Indicator Type	Division	Indicator Statement	Indicator	Unit	Source of data	Target for FY 2026-27
			schools and Anganwadi Centre	aided schools and Anganwadi Centre screened by RBSK MHTs as per RBSK Guideline. Denominator: Total number of Children in Government & Government aided schools and Anganwadi Centre			(8,78,142) 6-18 Years (7,82,418)
8	Output	Child Health (RBSK)	Secondary/ Territory management of Conditions specified under RBSK	Number of beneficiaries received Secondary/ Territory management against RoP approval (for surgical intervention specified under RBSK).	Nos.	Quarterly State Report	90
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% Numerator :Total no. of children received MR 2nd dose Denominator: Total no. of children under one year of age	Percentage	HMIS	Maintain >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	>45%
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	>92%
13	Output	Nutrition	Hemoglobin testing- In-school children	Percentage of children 6-19 years in Govt /Govt-aided schools tested for anemia by ANM/ Staff Nurse /CHO/RBSK MHT Numerator: Number of children 6-19 years in Govt /Govt-aided schools tested for anemia by ANM/Staff Nurse/CHO/RBSK	Percentage	RBSK dashboard U-WIN	>80%

Sl No.	Indicator Type	Division	Indicator Statement	Indicator	Unit	Source of data	Target for FY 2026-27
				MHT, using Digital Invasive Hemoglobinometer Denominator: Total Number of children 6-19 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	• District Hospital, CHCs (FRUs) & Other Sub District Level Hospitals and above: 100%; • 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

Sl No.	Indicator Type	Division	Indicator Statement	Indicator	Unit	Source of data	Target for FY 2026-27
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	170
16	Output	Adolescent Health	Ayushman Bharat School Health & Wellness Programme implementation	Percentage of Health & Wellness Ambassadors trained to transact 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	Percentage	State reports	100%
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	100%
18	Output	FP Division	Couple Protection Rate (CPR) for modern methods (Spacing methods + Limiting methods)	Numerator: Estimated Number of Couples protected by modern contraceptives Denominator: Total No. of Currently Married Women of Reproductive Age Group (15-49 years age group) Base Year: 2025	Percentage	Numerator: HMIS/Janani portal Denominator: TGPP report-2020	13.00%
19	Output	TB Mukt Bharat Abhiyan	TB patient assessed for Differentiated care	• Numerator: Total TB patients assessed for differentiated care • Denominator: Total TB case notified	Percentage	NIKSHAY Portal	100%
20	Output	TB Mukt 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	>50%

Sl No.	Indicator Type	Division	Indicator Statement	Indicator	Unit	Source of data	Target for FY 2026-27
21	Output	TB Mukt 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	100%
22	Output	National Viral Hepatitis Control Programme (NVHCP)	Management of Hepatitis C – under the program	Percentage of Hepatitis C Patients benefited i.e. number who received treatment against target	Percentage	NVHCP MIS Portal	100% (State achieved 136% against target 1598/1178)
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	84%
24	Outcome	Integrated Disease Surveillance Programme (IDSP)	Improved Capacity of Districts to detect and respond disease outbreaks	Reporting % of P form	Percentage	IDSP IHIP	78%
25	Output	National Leprosy Eradication Programme (NLEP)	Child Cases among new cases	No. of districts with Zero child case in the current F.Y	Number	State /UT Nikusth Report	12
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	12
27	Output	National Vector Borne Disease Control programm	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	API <1 ABER >7

Sl No.	Indicator Type	Division	Indicator Statement	Indicator	Unit	Source of data	Target for FY 2026-27
		e (NVBDCP)					
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	NA
29	Output	National Vector Borne Disease Control programme (NVBDCP)	Dengue & Chikungunya	Dengue Case Fatality Rate at State level	Percentage	State Report	CFR <1%
30	Output	National Vector Borne Disease Control programme (NVBDCP)	Kala-azar	% Complete treatment of KA and PKDL Cases	Percentage	State Report	NA
31	Output	National Vector Borne Disease Control programme (NVBDCP)	Japanese Encephalitis (JE)	JE Case Fatality Rate (CFR)	Percentage	State Report	NA
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)	Percentage	DVDMS Portal/State Monthly report Rural Health Statistic-MoHFW)	100%

Sl No.	Indicator Type	Division	Indicator Statement	Indicator	Unit	Source of data	Target for FY 2026-27
				Denominator- Total No. of Health Facilities till PHC level (Source- Rural Health Statistic-MoHFW)			
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	NA *(Himachal Pradesh is non-endemic for Leptospirosis)*
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 (NP-NCD)	Functional Day care Centre	Number of functional Day Care Cancer Centre against approved in FY 2025-26	Percentage	State Report	100%
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%

Sl No.	Indicator Type	Division	Indicator Statement	Indicator	Unit	Source of data	Target for FY 2026-27
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 : **3,08,420** hypertensive individuals under control which is 25% of the estimated hypertension prevalence of 12,33,680)*
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 : **2,23,605**Diabetic individuals under control which is 25% of the estimated Diabetes prevalence of 8,94,418)*
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 in the number of people who availed tobacco cessation services from last year
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		>15%

Sl No.	Indicat or Type	Division	Indicator Statement	Indicator	Unit	Source of data	Target for FY 2026-27
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	400
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	34,000
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	NA
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	1,881
46	Output	National Programme for Health Care of	Provision of primary and secondary Geriatric healthcare services at District	Number of older persons (=/>60 years of age) availing services at DH and CHC	Number	HMIS	5,00,000

Sl No.	Indicator or Type	Division	Indicator Statement	Indicator	Unit	Source of data	Target for FY 2026-27
		Elderly (NPHCE)	Hospital and below				
47	Output	National Programme for Palliative Care (NPPC)	Palliative care services	Number of beneficiaries availing palliative services from DH	Number	HMIS	30,000
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	5% (Increase from the baseline (previous year)
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	Treatment to individuals	% of diseased patients on Treatment	Percentage	Sickle Cell Portal	100%

Sl No.	Indicator Type	Division	Indicator Statement	Indicator	Unit	Source of data	Target for FY 2026-27
		& Disorders	with Sickle Cell Disease	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.		(Follow up module)	
53	Output	Blood Services & Disorders	Complete database of Thalassemia and Hemophilia patients on National portal	% of Thalassemia and Hemophilia patients registered on national portal Numerator: Total Number of Thalassemia and Hemophilia patients registered on National portal by the State/UT. Denominator: Number of Thalassemia 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	65%
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	40%

Sl No.	Indicator Type	Division	Indicator Statement	Indicator	Unit	Source of data	Target for FY 2026-27
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 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	Percentage	NHSRC HRH Division	**MPW (Male +Female):** 80% **Staff Nurses:** 50% **Lab technicians:** 90% **Pharmacists:** 100% **Medical Officer-MBBS:** 100% **Clinical specialists:** 80%
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	**Audiologist at DH:** 70% **Dentist up to CHC:** 100% **Physiotherapist up to CHC:** 50% **Radiographer up to CHC:** 100% **Clinical Psychologist up to CHC:** 25% **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%

Sl No.	Indicator Type	Division	Indicator Statement	Indicator	Unit	Source of data	Target for FY 2026-27
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%
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)- Number 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 Report	60
65	Output	Public Health Infrastructure	MMU	Average No. of camps held per MMU and average footfall per Camp	Numbers	State Report	23 camps, 40 patients

^Total in-place posts of Pharmacists exceed the requirement as per IPHS norms. State may drop the vacant NHM posts.

#Total sanctioned posts of MPW (F+M), Pharmacist and MO MBBS exceed the requirement as per IPHS norms. State is requested to fill the regular posts of MPW (F+M), Pharmacist and MO MBBS. NHM HR may be given weightage in such recruitments. Once adequate regular posts are filled, state may drop the vacant NHM posts.

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): • 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 • In 100% AAM-SC: +5 • In >=90% but <100% of AAM-SC: +3 • In >=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 • >=90%: +5 • >=70% but <90%: +3 • >=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 31st March 2027 • >=80%: +10 • >=70% but <80%: +5 • >=60% but <70%: 0 • <60%: -10	State notifications, advertisements and PIP, HRH Division	+10 to -10

S. No.	Conditionalities	Indicators of 2026-27	Source of verification	% Incentive/ Penalty % Incentive/ Penalty (+125 to -105)
		B. Percentage of contractual service delivery HRH in-place (MPW, Staff Nurse, LT, Pharmacists, MO MBBS and Clinical Specialist) filled against approved posts • >=90%: +5 • >=70% but <90%: +3 • >=60% but <70%: 0 • <60%: -5		+5 to -5
5.	**District RoP**	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 • 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**	Total Calls a. States achieving 30% or more, increase in total calls from previous year handled through the TeleManas helpline: +5 b. States achieving between 30% to 20% increase in total calls from previous year handled through the Tele MANAS helpline: +4 c. States achieving increase between 20% to 10% in total calls from previous year handled through the Tele MANAS helpline: = +3 d. 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

S. No.	Conditionalities	Indicators of 2026-27	Source of verification	% Incentive/ Penalty % Incentive/ Penalty (+125 to -105)
7.	**Implementation of National TB Elimination Programme**	A. Percentage of districts achieving more than 90% of treatment success rate • >=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 Numerator: No. of districts achieving more than 90% of treatment success rate Denominator: Total No. of districts in the State/UT	Ni-kshay Portal	+5 to -5
		B. Percentage of eligible patients receiving all benefits of Ni-kshay Poshan Yojana (NPY– DBT) • >=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 Numerator: No. of eligible patients receiving all benefits of NPY-DBT Denominator: No. of eligible patients	Ni-kshay Portal	+5 to -5

S. No.	Conditionalities	Indicators of 2026-27	Source of verification	% Incentive/ Penalty % Incentive/ Penalty (+125 to -105)
8.	NQAS Certification progress over last year	• 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	Percentage of IPHS-compliant facilities • >= 30%: +10 • >=20% to <30%: +5 • >=10% to <20%: -5 • <10%: -10 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.	IPHS Dashboard/PHA division	+10 to -10
10.	Increase in State Health Budget	• >=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. 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.	NP-NCD Portal	+5 to -5

S. No.	Conditionalities	Indicators of 2026-27	Source of verification	% Incentive/ Penalty % Incentive/ Penalty (+125 to -105)
		• ≥ 70% of eligible population screened: +5 • 20% to < 70%: Pro-rata scoring • < 20%: -5		
		B. Proportion of hypertensive and diabetic patients under control against the under-treatment hypertension and diabetes patients • ≥ 50%: +5 • 10% to < 50%: Pro-rata scoring • < 10%: -5	NP-NCD Portal	+5 to -5
		C. Proportion of District Hospitals providing services for all five newer NP-NCD components, namely Stroke, STEMI, NAFLD, COPD, and CKD • ≥ 50%: +5 • ≥ 25% but <50%: +3 • < 25%: 0	NP-NCD Portal	+5 to 0
12.	Implementation of Anaemia Mukt Bharat	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 • >50%: + 5 • 20-50%: + 3 • <20%: +1 • Not started: -5	RBSK Portal	+5 to -5
		Percentage of Pregnant Women tested for anemia during first trimester against those registered in JANANI portal • >50%: + 5 • 20-50%: + 3	JANANI Portal	+5 to -5

S. No.	Conditionalities	Indicators of 2026-27	Source of verification	% Incentive/ Penalty % Incentive/ Penalty (+125 to -105)
		• <20%: + 1 • Not started: - 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**	**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		

S. No	Sub Indicator	Scoring criteria	Max Score for AAM - SHC / AAM - USHC	Max Score for AAM-PHC/AAM -UPHC	Numerator and Denominator	Remarks
	@1200/month [1]					
3.a	**AAMs fulfilling expanded range of medicines as per essential medicine lists of Medicines[2] - AAM - SHC: 106, AAM-PHC:- 172;**	**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 **Denominator:** Total no. of Operational AAM	**Max. Score – 5** **Drugs – 2.5+2.5= 5** **Diagnostics – 2.5+2.5= 5** **Total Marks – 5 each parameters** **Total 10 Marks**
		60% - 79%	2	2		
		40%-59%	1	1		
		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 **Denominator:** Total no. of Operational AAM	
		60%-79%	2	2		
		40%-59%	1	1		
		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**	5	5	**Numerator:** Number of monthly wellness sessions being conducted minimum 10 wellness session	**Max. Score – 5 each parameters**

[1] Hilly states, NE states,in case of natural calamities 50% of given targets are applicable
OPD footfall, Wellness Footfall, Ayushman Arogya Shivir 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

S. No	Sub Indicator	Scoring criteria	Max Score for AAM - SHC / AAM - USHC	Max Score for AAM-PHC/AAM -UPHC	Numerator and Denominator	Remarks
		80% to 100 %			**Denominator:** Total no. of Operational AAM	**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 Shivir**[3] - Percentage of Ayushman Arogya Shivir conducted per FY	**If achievement is 80% to 100 %**	5	5	**Numerator** – No. of Ayushman Arogya Shivir conducted *100 **Denominator:** No. of Ayushman Arogya Shivir in FY. i.e 12 AAS per Operational AAM	**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**

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
टीबी 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,

19.12.25

(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)

Annexure 5: Summary of HRH Approvals under NHM

HRH under National Health Mission- Himachal Pradesh

Budget Summary

Budget Approved under HSS Rural and Urban	(in lakhs)	
	HSS Rural	HSS Urban
Service Delivery (SD) HRH	8,685.20	51.48
Programme Management (PM) HRH	2,027.26	0
Budget for Data Entry Operation (DEO)	971.73	3.01
Budget for engaging support services on outsource basis/ Support Staff at facility level (SS-F)	365.15	4.15
Budget for engaging support services on outsource basis/ Support Staff in Offices (SS-O)	162.12	0
Annual Increment and Rationalization budget - SD and SS-F	697.70	1.45
Annual Increment and Rationalization budget - PM, DEO and SS-O	244.41	0.15
EPF* - SD and SS-F	144.36	3.42
EPF* - PM, DEO and SS-O	76.16	0
Sub Total	13374.09	63.66
CHO/MLHP	7,799.25	
Annual Increment and Rationalisation budget - CHO/MLHP	319.44	
Sub Total	8118.69	
Total Budget	21492.78	63.66

* (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))

* States and 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.

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

Old FMR	Name of Post	Approved posts 2025-26	Dropped Posts 2026-27	New Posts 2026-27	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	28			28
8.1.1.2	Staff Nurse	1370	304		1066
8.1.1.5.1	Lab Technician	312	148		164
8.1.1.8	Pharmacist	26			26
8.1.1.10	Occupational Therapist	1	1		0
8.1.1.10	Physiotherapist	69			69
8.1.1.10	Clinical Psychologist	45	44		1
	Radiographer	6			6
8.1.2.1	Obstetrician & Gynaecologist	6	6		0
8.1.2.2	Paediatrician	6	6		0
8.1.3.2	Psychiatrist	12	11		1
8.1.3.8	Microbiologist	4			4
8.1.2.3	Psychiatrist	6	6		0
8.1.2.4	Medical Specialist	6	6		0
8.1.2.5	Dermatologist	6	6		0
8.1.4.1	Dental Surgeon	13			13
8.1.4.3.1	Dental Hygienist	24			24
8.1.4.3.3	Dental Assistant	13			13
8.1.5.1	Medical Officer	12			12
8.1.7.1.1	Medical Officer AYUSH - RBSK	300			300
8.1.7.1.4	ANM - RBSK	150			150
8.1.7.1.5	Pharmacist - RBSK	150			150
8.1.7.2.2	Medical Officer	3	2		1
8.1.7.2.3	Medical Officer, Dental	1			1
8.1.7.2.5	Physiotherapist	6			6
8.1.7.2.6	Audiologist & speech therapist	6			6
8.1.7.2.7	Psychologist	6			6
8.1.7.2.8	Optometrist	6			6
8.1.7.2.9	Early interventionist cum special educator	6			6
8.1.7.2.10	Social Worker	1			1
8.1.8.6	Nutritional Counsellors	3			3
8.1.9.3	Staff Nurse	292	60		232
	Lactation Support Staff/ ANM	2			2
	CLMC Technician	1			1
8.1.10.3	Staff Nurse	28			28
8.1.13.1	Counsellor	144			144

Old FMR	Name of Post	Approved posts 2025-26	Dropped Posts 2026-27	New Posts 2026-27	Total Approved Posts 2026-27
		(a)	(b)	(c)	(d=a-b+c)
8.1.13.2	Psychologist	1			1
8.1.13.3	Lactation Counsellors for high case load facilities	1			1
8.1.13.5	Audiometrician	10			10
8.1.13.6	Multi-Rehabilitation worker	24	23		1
8.1.13.18	Audiometric Assistant	12			12
8.1.13.19	Instructor for Hearing Impaired Children	10			10
8.1.13.22	Sr. Lab technician	2			2
8.1.13.22	Lab technician	1			1
8.1.13.22	Lab Assistant	1			1
8.1.14.4	Blood Bank Technician	3			3
8.1.15.6	Medical Records Officer	17			17
8.1.16.2	Refrigerator Mechanics	12			12
9.1.4.1	Doctor- Skill Lab	3	3		0
9.1.4.1	Nursing Trainers- Skill Lab	15	4		11
16.4.1.4.2	Epidemiologist	1			1
16.4.1.4.2	Entomologist	1			1
16.4.2.2.1	Epidemiologists	12			12
16.4.3.2.6	Senior Treatment Supervisor (STS)	97		2	99
16.4.3.2.6	TBHV	37		1	38
16.4.2.1.2/ 16.4.1.3.1	Dakshata Mentor	13			13
	Store Assistant	1			1
	OT Assistant	138			138
	Bio Medical Engineer	3			3
	Dialysis Technician	0		49	49
CHO/MLHP					
8.1.12.1	Remuneration for CHOs	2113		2	2115
Support Services – Facility Level					
8.1.8.3	Cook cum caretaker	Lump sum (3)			Lump sum (3)
8.1.16.7	Support Staff	Lump sum (13)			Lump sum (13)
9.1.4.1	MPW (Support Staff)	Lump sum (3)			Lump sum (3)
8.1.16.7	Support Staff (Helper)	Lump sum (147)			Lump sum (147)
Programme Management*					
9.1.4.4	Personal Assistant	1			1
9.1.4.4	Technical Assistant	2			2
9.1.4.4	Consultant (Research Officer)	2			2
9.1.4.4	Consultant (Finance)	1			1
16.4.1.1	SPO-IDSP	1			1

Old FMR	Name of Post	Approved posts 2025-26	Dropped Posts 2026-27	New Posts 2026-27	Total Approved Posts 2026-27
		(a)	(b)	(c)	(d=a-b+c)
16.4.1.1	SPO-NCD/NUHM	1			1
16.4.1.1	SPO-MH	1			1
16.4.1.1	SPO-NCD	1			1
16.4.1.1	SPO-NPCB/RKSK	1			1
16.4.1.1	SPO-HMIS/ MCTS	1			1
16.4.1.1	SPO-FP	1			1
16.4.1.1	SPO	5			5
16.4.1.1	Controller Finance-NHM	1			1
	Asst. Controller Finance	1			1
16.4.1.3.1	State Vaccine & Logistics Manager	1			1
16.4.1.3.2	Consultant Finance-NHM	1	1		0
16.4.1.3.2	Consultant (Training)	1			1
16.4.1.3.2	Consultant-HPHC	1	1		0
16.4.1.3.2	Consultant- HR	1			1
16.4.1.3.2	Consultant- HWC	1	1		0
16.4.1.3.2	Consultant- LaQshya	1	1		0
16.4.1.3.2	Consultant-QA	1			1
16.4.1.3.2	IEC Consultant/ Officer	1			1
16.4.1.3.2	Consultant Procurement	2			2
16.4.1.3.2	Consultants (1 each for MH, NTEP, RKSK, HR, AMB, PFMS/SNA)	6	1		5
16.4.1.3.4	Programme Assistant-QA	1			1
16.4.1.3.4	Programme Assistant - ASHA	1	1		0
16.4.1.3.5	SNCU software coordinator	1			1
16.4.1.3.5	State ASHA Coordinator	1			1
16.4.1.3.5	State Coordinator - Blood Bank	1	1		0
16.4.1.3.5	Coordinator Family Planning	1	1		0
16.4.1.3.5	Graphic Designer	1			1
16.4.1.3.6	Consultant- MIS	1			1
16.4.1.3.8	Accountant	10			10
16.4.1.3.9	Clerk	1			1
16.4.1.3.9	Accounts Clerk	1			1
16.4.1.3.9	Statistical Assistant	2			2
16.4.1.3.9	Office Manager	2	1		1
16.4.1.3.12	Technical Officer (Surveillance, M&E and Research)	1	1		0
16.4.1.3.12	Assistant (Finance and Accounts)	1	1		0
16.4.1.4.2	State ACSM/IIEC Officer (Assistant Programme Officer)	1			1
	IT Cell Staff	Lump sum (5)	Lump sum (3)		Lump sum (2)

Old FMR	Name of Post	Approved posts 2025-26	Dropped Posts 2026-27	New Posts 2026-27	Total Approved Posts 2026-27
		(a)	(b)	(c)	(d=a-b+c)
16.4.1.4.3	Statistical Assistant	2			2
16.4.1.4.5	Data Manager	1	1		0
16.4.1.4.6	Consultant-NVBDCP	1			1
16.4.1.4.7	Accountant	1	1		0
16.4.1.5.2	Programme Manager – NCD (Consultant NCD)	2	1		1
16.4.1.5.2	Consultant-NPCCHH	1			1
16.4.2.1.1	RBSK Manager	12			12
16.4.2.1.2	Consultants	24			24
16.4.2.1.3	Admn. Assistant QA	12			12
16.4.2.1.3	ASHA Coordinator	12			12
16.4.2.1.4	BCC Coordinator	8			8
16.4.2.1.7	Accountant	24			24
16.4.2.2.4	District Programme Coordinator	12			12
16.4.2.2.4	Senior DOTS Plus and TB HIV Supervisor	12			12
16.4.2.2.6	DOTS Plus TB/ HIV Supervisor/ STLS	6	6		0
16.4.2.2.6	Senior Treatment Lab Supervisor (STLS)	55		2	57
	CLMC Manager	1			1
16.4.2.2.7	Accountant	13			13
16.4.2.3.4	Programme Coordinator	1			1
16.4.2.3.7	Finance Cum Logistic Consultant	1	1		0
16.4.3.1.1	Block Programme Manager	93			93
16.4.3.1.7	Accountant	80			80
	Procurement and Logistic Manager	1			1
16.4.3.2.10	Legal services	Lump sum (1)			Lump sum (1)
	Consultant (Drugs and Supplies Distribution Management)	2	2		0
16.4.2.2.5	VCCM			12	12
	Program assistant-Midwifery	1			1
	Public Health Specialist			6	6
	Project Officer			1	1
	Project Officer-Operation			2	2
Data Entry Operation					
9.1.4.1	DEO	Lump sum (3)			Lump sum (3)
16.4.1.3.10	Data Entry Operation	Lump sum (344)	10	6	Lump sum (340)

Old FMR	Name of Post	Approved posts 2025-26	Dropped Posts 2026-27	New Posts 2026-27	Total Approved Posts 2026-27
		(a)	(b)	(c)	(d=a-b+c)
Support Services – PMU/ Offices					
16.4.3.2.10	Support Staff	Lump sum (81)			Lump sum (81)
S. No. 142 – HSS Urban					
Service Delivery/Training/Others					
U.8.1.1.1	ANM	17		2	19
U.8.1.3.1	Radiographer	1			1
	Medical Officer			2	2
	Pharmacist			2	2
Support Services – Facility Level					
	Support Staff (Class IV)			2	Lump sum (2)
Data Entry Operation					
U.16.4.1.1	Data Entry Operation	Lump sum (1)			Lump sum (1)

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

Number of TeleMANAS Cells	1			
HRH Budget Approved (in lakhs)	45.31			
HRH Posts	Ongoing Posts	Dropped Posts	New Posts	Total No. of Approved Posts
	(a)	(b)	(c)	(d=a-b+c)
Counsellor	8	0	0	8

**EPF (Employer's contribution) @ 13.36% is recommended 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 disbursal 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 (in Lakhs)	Budget approved (in Lakhs)
RCH Flexible Pool (including RI, IPPI, NIDDCP)	3118.831	2,992.03
NDCP Flexible Pool (RNTCP, NVHCP, NVBDCP, NLEP, IDSP, NRCP, PPCL)	2367.58	2,226.82
NCD Flexible Pool (NPCB&VI, NMHP, NPHCE, NTCP, NPCDCS, PMNDP, NPPCCHH)	3452.406	3181.88
NUHM Flexible Pool	97.35	95.95
Health System Strengthening (HSS) under NRHM	73579.3184	64,166.10
Revalidation	5774.02	5748.62
Total	88389.5054	78411.3989
Infrastructure Maintenance (IM)	10800	10800
Immunization Kind Grants	5603	5603
Grand Total (including IM & kind grants)	104792.5054	94814.3989

Sl. No.	Pool	Proposed Amount (in Lakhs)	Approved amount (in Lakhs)	% approved pool wise out of total approved	% approved pool wise out of total RE
1	Capacity Building/Training	1140.69 (State calculation error)	1142.9165	1.5	1.73
2	ASHA Incentives	3677.17	3676.0315	4.7	5.57
3	IEC	1919.7184	1738.79	2.2	2.63
4	IT Interventions	1336.49	1314.47	1.7	1.99
5	Innovations	373.1	179.2	0.2	0.27
6	Drugs	10149.04	10050.65936	12.8	15.23
7	Diagnostics	10726.08	5492.8	7.0	8.32
8	HRH	24879.53	21556.44	27.5	32.65
9	Programme Management Activities	1838.84	1798.7	2.3	2.72
10	RCH	2940.331	2816.212	3.6	4.27
11	NCD	3152.146	2881.62	3.7	4.37
12	NDCP	1784.22	1782.44	2.3	2.70
13	HSS -Rural	18664.48	18206.35954	23.2	27.58
14	HSS- Urban	27.5	26.14	0.0	0.04
15	Revalidation	5774.02	5748.62	7.3	8.71
Total		8389.5054	78411.3989	100.0	118.78

*Note: Total PM Cost approved is Rs. 5450.82 Lakhs which is 8.6% of RE

Annexure 7: PIP proposals and approvals

FMR Code	Programme / Theme	S. No	Scheme / Activity	Amount Proposed (In Lakhs)	Amount Approved In Lakhs)	GoI Remarks
RCH.1	Maternal Health	1	**Village Health Sanitation & Nutrition Days (VHSNDs)**	107.30	107.30	OOC:- Ongoing Activity - Rs. 107.3 lakhs approved @ Rs 100 / per VHSND camp for 8942 camps per month*12 months= 1,07,304 camps (107303*100 = Rs. 107.3 lakhs.
		2	**Pregnancy Registration and Ante-Natal Checkups**			No proposal submitted by the state
		3	**Janani Suraksha Yojana (JSY)**	61.95	61.95	For FY 2026-27 details as under: DBT: Under JSY DBT: Rs 61.95 lakh is approved [i.e. Rs 1.25 lakh for 250 home deliveries of women from BPL households @ Rs 500 per case; Rs 57.40 lakh for 8,200 number of Rural institutional deliveries @ Rs 700 per case; Rs 3.30 lakh for 550 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)**	82.00	82.00	OOC- Ongoing Activity - Rs. 82 lakhs approved for the diet for 3 days in approx. 56,112 Normal Delivery and 7 days in the approx. 15,000 C-section deliveries @ Rs. 30/diet.
		5	**Janani Shishu Suraksha Karyakram (JSSK) - Transport**	580.00	500.00	OOC- Ongoing Activity - Rs. 500.0 lakhs approved for the JSSK transport (To and Fro) for approx. 50,000 pregnant women @ Rs. 1000/- (To and Fro) under JSSK.

FM R Code	Programme / Theme	S. No	Scheme / Activity	Amount Proposed (In Lakhs)	Amount Approved In Lakhs)	GoI Remarks
		6	**Pradhan Mantri Surakshit Matritva Abhiyan (PMSMA)**			No proposal submitted by the state
		7	**Surakshit Matritva Aashwasan (SUMAN)**	50.40	47.72	Diagnostics: Ongoing Activity - Rs. 47.72 lakhs approved for the procurement of Dual HIV–Syphilis Test Kits for estimated 1,03,284 pregnant women in the State with 10% additional kits i.e. total 1,13,612 kits @ Rs. 42 per kit.
		8	**Midwifery**	97.35	95.30	OOC- 1. Rs. 95.30 lakhs approved as under: New Activity - 1. Rs. 94.53 lakhs for the 2nd batch of 18 months NPM training at SMTI Nerchok, District Mandi for initial 9 months in FY 2026-2027 (274 days) including DA@ Rs.400/day, Food @ Rs. 250/day for a batch size of 30 NPMs, Accommodation @ Rs. 500/day for 274 days i.e. 400*274+250*274+500*274 = Rs. 3.15 lakhs*30 = Rs. 94.53 lakhs. The State may propose the additional amount for 9 months in the next PIP cycle of 2027-28. Ongoing Activity 2. Approval for honorarium of Program and Data Assistant shifted to Sl. No 185. 3. Rs. 0.5 lakhs as a contingency Fund for SMTI Nerchowk Mandi as per Midwifery Guidelines and 4. Rs. 0.27 lakhs @Rs. 6750/- per mentoring visit for 4 mentoring visits i.e. = 0.27 lakhs as per the Midwifery guidelines. = 94.53+0.5+0.27 = Rs. 95.30 lakhs
		9	**Maternal Death Review**	0.74	0.74	SEAR – Ongoing Activity - Rs. 0.74 lakhs approved for conducting Community Based Maternal Death Review

FMR Code	Programme / Theme	S. No	Scheme / Activity	Amount Proposed (In Lakhs)	Amount Approved In Lakhs)	GoI Remarks
						(CBMDR) @Rs. 150/member of the Team for 3 members = Rs. 450/-, Rs. 200 to the transport support for team member and Rs. 200/- each for two relatives of the deceased who attend the meeting at district level (Rs.200*2 = Rs. 400/-) i.e. 450+200+400 = 1050/- for approx. 70 estimated maternal deaths in the State. = 1050*70 = 0.735 lakhs
		10	**Comprehensive Abortion Care**	3.96	3.96	**Equipment: -** **For FY 2026-27, Rs. 3.96 Lakhs approved for procurement of 33 Electric Vacuum Aspiration Machines @ Rs. 12000 /- per EVA machine** **1. Procurement should be done through State MSCL or open tender process, following the L1 rate and State procurement norms to be followed.** **2. State to ensure the availability of MMA drugs at the facilities providing safe abortion services.**
		11	**MCH Wings**			No proposal submitted by the state
		12	**FRUs**			No proposal submitted by the state
		13	**HDU/ICU - Maternal Health**			No proposal submitted by the state
		14	**Labour Rooms (LDR + NBCCs)**	38.66	2.70	Equipment:- New Activity - The procurement of equipment of LRs for CHC Dhaneta and CH Nadaun in district Hamirpur as per the gap analysis shared by the State. As discussed in NPCC meeting, State has proposed INR 2.7 Lakhs for the procurement of equipment for Labour room as per IPHS guidelines. The discovered cost is as per NHSRC/GeM rate and is found to be competitive and reasonable. Activity for INR 2.7 Lakhs approved.
		15	**LaQshya**			No proposal submitted by the state

FMR Code	Programme / Theme	S. No	Scheme / Activity	Amount Proposed (In Lakhs)	Amount Approved In Lakhs)	GoI Remarks
		16	**Implementation of RCH Portal/ANMOL/MCTS**			No proposal submitted by the state
		17	**Other MH Components**	1.50	1.50	Ongoing Activity - Rs. 1.5 lakhs approved for recurring cost of skill labs @ Rs. 0.5 lakhs per skill lab for 3 skill labs situated at SIHFW Parimahal, Shimla, Chhebb and SLBSGMC = 0.5*3 = Rs. 1.5 lakhs.
		18	**State specific Initiatives and Innovations**			No proposal submitted by the state
RC H.2	**PC & PNDT Act**	19	**PC & PNDT Act**			**No Proposal under PCPNDT.** **A. State is requested to convene the District Advisory Committee Meeting and State Supervisory Board Meeting regularly. As per Section 16A (3) of the PC&PNDT Act, 1994, "the State Supervisory Board is mandated to meet at least once every four months."** **B. Further, the state may organise regular training of judicial officers, Appropriate Authorities, and other key stakeholders to strengthen the implementation of PC&PNDT Act.**
		20	**Gender Based Violence & Medico Legal Care For Survivors Victims of Sexual Violence**			No proposal submitted by the state
RC H.3	**Child Health**	21	**Rashtriya Bal Swasthya Karyakram (RBSK)**	818.40	818.40	**Approved Rs. 818.40 Lakhs under RBSK-MHT as per the following details:** **(1) Equipment:** Rs 2.40 lakhs for Replenishment / New equipment of MHTs @ Rs. 3000/- per team for 80 RBSK MHTs. **(2) OOC:**

FMR Code	Programme / Theme	S. No	Scheme / Activity	Amount Proposed (In Lakhs)	Amount Approved In Lakhs)	GoI Remarks
						(a) Rs 810 lakhs as Mobility support for MHT at Rs 45000 per vehicle per month for 150 RBSK-MHTs **(b) Rs 6 lakhs for** CUG connection @ 4000 per team per year for 150 RBSK - MHTs
		22	**RBSK at Facility Level including District Early Intervention Centers (DEIC)**	185.59	185.59	**Approved Rs. 185.69 Lakhs under RBSK-DEIC as per following details:-** **(1) OOC:** (a) Rs. 142.4 lakhs for Secondary/ Tertiary care as per RBSK procedure and model costing for surgeries (b) Rs. 0.96 lakhs for internet connection for Desktops @ 9600 per DEIC per year for 10 DEICs (c) Rs 0.80 lakhs as Operational cost of DEIC @ Rs. 8000 per DEIC per year for 10 DEICs (d) Rs. 1.50 lakhs for DEIC Una for setting up of sensory/ play area. **(2) Equipment:** Rs 39.9 lakhs for the equipment of DEIC Tanda as per the State proposal
		23	**Community Based Care - HBNC & HBYC**	20.00	20.00	Equipment- **Approved Rs. 20.0** Lakhs for procurement of 2000 HBNC/HBYC kits @ Rs. 1000 each for newly recruited ASHAs.
		24	**Facility Based New born Care**	95.60	95.60	**Approved Rs. 95.60 Lakhs under FBNC as per following details:** **(1) Equipment:** Rs. 35.72 lakh for procurement of 2 CPAP machines with blender each unit for 5 SNCUs Rohru, Arki, Ghumarwin, Karsog, Jogindernagar, unit cost @ 3.57 lakh **(2) Others including Opex costs (OOC):** (a) Rs. 30 lakhs as Operational cost of 20 SNCU @ 1.00 lakh per SNCU and Rs. 10 lakh for KNH Shimla

FM R Code	Programme / Theme	S. No	Scheme / Activity	Amount Proposed (In Lakhs)	Amount Approved In Lakhs)	GoI Remarks
						(b) Rs. 2.64 lakhs as Operational cost of 44 NBSUs @ 6000 per NBSU (c) Rs. 1.24 lakhs as Operational cost of 124 NBCCs @ 1000 per NBCCs (d) Rs. 1 lakhs as Operational cost of 1 State Newborn Resource Center at KNH Shimla (e) Rs. 15 lakhs for KMC binders for LBW babies @ 250 for 6000 infants (f) Rs. 10 lakh for Gap closure to achieve quality (NQAS/MusQan) certification, review and mentoring @ 1 lakh per facility for 10 facilities.
		25	**Child Death Review**	4.20	4.20	Approved Rs. 4.2 lakhs for Child Death Review as follows: (a) Rs. 3.5 lakh for Community Based Child Death Review @ Rs. 500 per death for 700 Under 5 Deaths (b) Rs. 0.7 lakh for ANM Honorarium @ Rs. 100 per death for 700 Under 5 Deaths
		26	**SAANS**	0.15	0.15	**OOC** **Approved Rs. 0.15 lakhs as a recurring cost of SAANS Skill Station as per the guidelines.**
		27	**Paediatric Care**	1.40	1.40	**OOC** **Approved Rs. 1.4 lakhs as Operational cost of 7 PHDUs @ Rs. 0.20 lakh per unit. State to share the report with GoI on a quarterly basis**
		28	**Janani Shishu Suraksha Karyakram (JSSK) (excluding transport)**			No proposal submitted by the state
		29	**Janani Shishu Suraksha Karyakram (JSSK) - Transport**			No proposal submitted by the state
		30	**Other Child Health Components**			No proposal submitted by the state

FMR Code	Programme / Theme	S. No	Scheme / Activity	Amount Proposed (In Lakhs)	Amount Approved In Lakhs)	GoI Remarks
		31	**State specific Initiatives and Innovations**			No proposal submitted by the state
RCH.4	**Immunization**	**32**	**Immunization including Mission Indradhanush**	223.87	243.87	**Rs. 243.87 lakhs approved as under:** **Infrastructure:** (i) The activity has been approved for the construction of RCC structure/lanter at SVS Parimahal Shimla along with proposal for the construction of Toilet /washing area in the premises of SVS store as per GOI SOPs. It also includes the expenditure for the arrangements of safe drinking water supply & equipment in the SVS office premises. **Approved Rs 15 lakhs for SVS Shimla** **Equipment:** i. Rs. 8 lakhs for DG set procurement for SVS Parimahal Shimla. ii. Rs. 12 lakhs per facility for procurement of online UPS for 4 locations @ Rs. 3 lakh each. **OOC (Other including Operational Cost):** **a**. Rs.0.92 Lakhs for Mobility Support for 175 mobile health teams @ Rs. 525 per team per year in case of exigencies/SIA. 175 @ Rs. 500/- =. b. Rs. 1.26 Lakhs for slums and underserved areas in Urban/Alternative vaccinator for slums for 240 sessions per year @ Rs. 525/- per session. c. Rs. 16.50 Lakh for Mobility support to vaccinator in vacant sub centres @ Rs 50/- per session for conducting RI sessions within the PHC area for 500 RI sessions and Rs 450/- per session for out of PHC area for 250 RI sessions per month. d. Rs 33.48 Lakhs for Alternative Vaccine Delivery in other areas @ Rs. 90/- per session for 3100 sessions site in a month.

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						e. Rs 24.30 Lakhs for Alternative Vaccine Delivery in hard to reach areas/very hard to reach areas @ Rs. 450/- per session for 450 sessions in a month including bus fare. f. POL for vaccine delivery to Vaccine Van/Repair Maintenance for vaccine Van: i. Rs.26 Lacs for POL for vaccine delivery from state to district and from district to PHC/CHCs etc. @ Rs. 2.00 Lakh per district. ii. Rs.26 Lacs for Vaccine Van maintenance and repair @ Rs 2.0 Lakh for every district and for the Vaccine van at SHQ. @ Rs. 2.00 Lakh . g. Cold Chain Maintenance: i. Rs. 7.80 lakhs for Cold Chain Maintenance in the district @ Rs. 1000/- per Cold Chain Point(CCP) per year (390x 1000 = 3.90 Lacs) and @ Rs. 20,000/- per District Vaccine Store(DVS) per year (12x 20000= 2.40 Lacs) and @ Rs. 50,000/- for two Regional Vaccine Store (2x50000 = 1.0 Lac) and one State Vaccine Store per year (1x 50000 = 0.50 Lac). ii. Rs. 11.61 lakh for the procurement of Voltage Stabilizer mounting stands, Racks/Wooden Stand for ILR/DF or for conditioning of Ice packs etc @ Rs. 11.61 Lacs in lumpsum. **SRRE (Surveillance, Diagnostic, Research, Review & Evaluation)** Rs. 41.00 lakhs for State EVM assessment EVM Assessment (Effective Vaccine Management) @ Rs. 41.00 lakh for the FY 2026-27. Shifted from S.No. 176 for Rs. 20 Lakhs proposed for Quality Management System for AEFI surveillance under Universal Immunization Programme is approved (OCC)

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		33	**Pulse Polio Campaign**	108.00	108.00	**Rs. 108 Lakhs approved** for NID/Pulse Polio campaign for approximately 6000 booths, IEC, trainings, supervision, stationery, printing of monitoring formats etc.
		34	**eVIN Operational Cost**	74.78	48.58	**Rs. 48.58 Lakhs approved as under:** **Other operational cost (OOC)** (i) Approval for eVIN HR salary shifted to Sl. No 185. Surveillance (SRRE): Rs.25.20 Lakhs approved. (a) Rs 10.80/- Lakh for Travel/field visit for SPO/PO @ Rs 30000/month person for staff of 3 (1 senior project officer, 2 PO operations). (This is PM Activity. Expenditure for PM activities to be booked under sl no 194) (b) Rs 14.40/- Lakhs for Travel/field visit of for 12 VCCMs @ 10,000 per VCCM/month. (This is PM Activity. Expenditure for PM activities to be booked under sl no 194) (ii) Rs. 15.84 lakh is approved for the replacement of 88 temperature loggers @ Rs 18,000/-each. (iii) Rs. 0.44 lakh is approved for 15 data sims cost for eVin Team @ Rs 247 per sim/month (This is PM Activity. Expenditure for PM activities to be booked under sl no 194). (iv) Rs. 7.10 lakh is approved for Data Sims for 506 temperature loggers @ Rs 117 per sim/month.
RC H.5	**Adolescent Health**	35	**Adolescent Friendly Health Centers (AFHCs)**	26.12	26.12	**Approved Rs 26.12 lakhs for below mentioned activities** **Civil Work** 1. Rs 5.50 lakhs for the establishment of 11 new Nayi Disha Kendra @ Rs 50000 per AFHC (NDK) **OOC** 2. Rs 11.20 lakhs for operational cost of all the existing 112 Nay Disha Kendra @Rs 10000/- per AFHC per annum.

FM R Code	Programme / Theme	S. No	Scheme / Activity	Amount Proposed (In Lakhs)	Amount Approved In Lakhs)	GoI Remarks
						3. Rs. 9.42 Lakhs proposed for AH Mobility cost i.e Rs. 6 lakhs proposed for mobility support to 50 AH Counsellors @ 250 per visit for 4 visits/month for 12 months and Rs 3.42 lakhs for 57 New AH Counsellors for 6 months @Rs 250 per visit for 4 visits/ month.
		36	**Weekly Iron Folic Acid Supplementation (WIFS)**			No proposal submitted by the state
		37	**Menstrual Hygiene Scheme (MHS)**	100.00	100.00	**Drugs & Supplies** Ongoing activity: **Approved Rs 100 lakh** for procurement of sanitary napkins for target beneficiaries 69,444(Adolescent girls +ASHAs) @ Rs 12 /pack/ month.
		38	**Peer Education Programme**	135.63	135.63	**OOC** **Approved Rs 135.63 lakhs for below mentioned activities** 1. Rs 32.79 Lakh for NGO implementation model in the state. 2. Rs 23.40 Lakh for organising 936 Adolescent Health and Wellness Days (AHWDs) @Rs 2500/AHWD. 3. Rs 17.61 Lakh for organising monthly Adolescent Friendly Club Meetings (AFC meetings) at 587 sub-centers @Rs 500/ meeting/ month for 6months. 4. Rs 61.62 Lakh for non- monetary incentives to 10271 PEs @Rs 50 /PE/month for 12 months. 5. Rs 0.20 lakh for 40 good performing PEs @ Rs 500/ PE (in non-monetary form).
		39	**School Health And Wellness Program under Ayushman Bharat**	2.43	2.43	**OOC** **Approved Rs 2.43 lakhs for below mentioned activities** 1. Rs 1.2 Lakh for bi-annual DLCC meeting with Education in 12 districts @5000/meeting.

FMR Code	Programme / Theme	S. No	Scheme / Activity	Amount Proposed (In Lakhs)	Amount Approved In Lakhs)	GoI Remarks
						2. Rs 1.23 lakh for 164 good performing HWAs/ DIET Principals/ DIET Coordinators @ Rs 750/ HWA (in non-monetary form).
		40	**Other Adolescent Health Components**	1.35	1.35	**OOC** **Approved Rs 1.35 Lakhs one SLCC at the state in coordination with Education and ICDS for strengthening SHWP and RKSK**
		41	**State specific Initiatives and Innovations**			No proposal submitted by the state
RC H.6	Family Planning	42	**Sterilization - Female**	70.19	70.19	**Approved Rs. 70.19 Lakhs under Sterilization -Female for F.Y.2026-27.** **(1) DBT:** Rs. 46.19 Lakhs for 4619 Female Sterilization cases @ Rs 1000/- per case (2) Equipment: Rs. 24.00 Lakhs for 4 Laproscope @ Rs 6 Lakh per Laproscope
		43	**Sterilization - Male**	5.10	5.10	**Approved Rs. 5.10 Lakhs under Sterilization- Male for F.Y.2026-27** **(1) DBT:** Rs. 4.80 Lakhs for 320 Male Sterilization cases @ Rs 1500/-per case **2) Equipment:** Rs. 0.30 lakhs under Equipment for 30 NSV Kits @ Rs 1000/ per NSV Kit
		44	**IUCD Insertion (PPIUCD and PAIUCD)**	6.39	6.39	**Approved Rs. 6.39 Lakh under IUCD insertion (PPIUCD & PAIUCD) for F.Y.2026-27.** **DBT: Rs. 6.39 Lakhs** (1) Rs. 5.94 Lakhs for 1979 PPIUCD beneficiaries @ Rs 300/-per PPIUCD client per insertion (2) Rs 0.45 lakhs for 150 PAIUCD beneficiaries @ Rs 300/- per PAIUCD client per insertion
		45	**ANTARA**	18.00	18.00	**Approved Rs. 18.00 Lakhs under Antara** for F.Y.2026-27
		46	**MPV (Mission Parivar Vikas)**			No proposal submitted by the state

FMR Code	Programme / Theme	S. No	Scheme / Activity	Amount Proposed (In Lakhs)	Amount Approved In Lakhs)	GoI Remarks
		47	**Family Planning Indemnity Scheme**	5.00	5.00	Approved Rs 5.00 lakhs under Family Planning Indemnity Scheme (FPIS) - DBT as per FPIS norms for F.Y. 2026-27.
		48	**FPLMIS**			
		49	**World Population Day and Vasectomy Fortnight**			No proposal submitted by the state
		50	**Other Family Planning Components**	0.90	0.90	Approved Rs 0.90 Lakhs under Other FP Components for F.Y. 2026-27. Others including operating costs(OOC): Rs. 0.90 Lakhs (i) Rs 0.60 lakhs for 2 State level SISC meeting @ 30,000/per meeting (ii) Rs 0.30 lakhs for One State level Family Planning review Meeting @ Rs 30,000/- (**This is PM Activity. Expenditure for PM activities to be booked under sl no 194**)
		51	**State specific Initiatives and Innovations**			No proposal submitted by the state
RC H.7	**Nutrition**	52	**Anaemia Mukt Bharat**	60.00	60.00	**Equipment** **Approved Rs 60 lakhs for the below-mentioned activities** 1.Rs 15.0 lakhs for 1000 new Digital Invasive Hemoglobinometers@ Rs 1500/Hemoglobinometer for anemia screening of AMB beneficiaries at AAM and for Mobile Health Teams 2. Rs 45.0 lakhs for 4.5 lakhs strips and lancets @ Rs10 each for testing of AMB beneficiaries (children < 5 years, 5-9 years, adolescents, WRA, PW and LM).
		53	**National Deworming Day**			No proposal submitted by the state
		54	**Nutritional Rehabilitation**	29.28	29.28	**Approved Rs 29.28 lakhs for below mentioned activities:-**

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			Centers (NRC)			1. Rs. 8.64 lakhs for mother wage compensation @ Rs 300/Day for two 10-bedded NRCs at IGMC, Shimla and Dr. RPGMC Tanda @ Rs 4.32 lakhs/NRC 2. Rs. 19.44 lakhs for mother wage compensation @ Rs 300/Day for six 5-bedded NRCs at Chamba, Hamirpur, LBSGMC Mandi, ZH Mandi, Nahan, RH Una @ Rs 3.24 lakhs/NRC 3.Rs. 1.2 lakhs to establish play areas at two NRCs at RPGMC Tanda and RH Una @ Rs 0.60 lakh/NRC, as an innovation by State 4. State to ensure the functioning of eight (8) NRCs through the provision of the required annual operational cost of Rs 1 lakh /NRC
		55	**Vitamin A Supplementation**			No proposal submitted by the state
		56	**Mother's Absolute Affection (MAA)**			No proposal submitted by the state
		57	**Lactation Management Centers**	72.99	72.99	**Approved Rs 72.99 lakhs for the below-mentioned activities** **Equipment:** Rs 50.37 lakhs for establishing CLMC at Dr. RPGMC Tanda, including cost of CLMC equipment, furniture and supplies **OCC:** Rs. 2.62 lakhs for annual operational cost for CLMC, SLBSGMC Hospital, Mandi **Infrastructure:** Rs 20.0 lakhs for civil works, renovation and upgrading of infrastructure to establish CLMC at Dr. RPGMC Tanda
		58	**Intensified Diarrhoea**			No proposal submitted by the state

FMR Code	Programme / Theme	S. No	Scheme / Activity	Amount Proposed (In Lakhs)	Amount Approved (In Lakhs)	GoI Remarks
			Control Fortnight			
		59	**Eat Right Campaign**			No proposal submitted by the state
		60	**Other Nutrition Components**			No proposal submitted by the state
		61	**State specific Initiatives and Innovations**			No proposal submitted by the state
RCH.8	**National Iodine Deficiency Disorders Control Programme (NIDDCP)**	**62**	**Implementation of NIDDCP**	29.60	29.60	**Approved Rs 29.6 lakhs for below mentioned activities:-** **Drugs:** As per the norms, Rs 27.10/- Lakhs for the procurement of Spot Testing Kit (STK.) **Diagnostic:** As per the programme norms, Rs 1.00 lakh approved. **SRAE:** As per the programme norms, (Rs. 50,000/- per district), **Rs 1.5 Lakhs for IDD survey/Resurvey in 3 endemic districts in FY 2026-27.**
RCH Sub Total				3,118.83	2,992.03	
NDCP.1	**Integrated Disease Surveillance Programme (IDSP)**	**63**	**Implementation of IDSP**	51.41	51.41	**Rs. 51.41 lakhs approved for below mentioned activities:-** **Diagnostics** **1. Rs. 19 Lakhs for DPHLs & SRLs:** **i) Amount of Rs. 4 Lakhs per DPHL Lab (Total = Rs. 2 Lakhs each DPHL). Currently, 2 DPHLs are running in the State of HP (Mandi & Bilaspur). Strengthening of Labs for timely Lab confirmation of Epidemic prone diseases, to meet the deficiency of equipment and funds for consumables.** **ii) Rs. 15 Lakhs for State Referral Labs: Rs. 3 Lakhs each for SRL-IGMC Shimla, DRRPGMC Tanda, SLBSGMCH Mandi (Total = Rs. 9**

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						Lakhs) and Rs. 2 Lakhs each for SRL – Pt JLNGMCH Chamba, SRL - DRYSPGMC Nahan and SRL - DRRKGMC Hamirpur for Outbreak investigations (Total = 6 Lacs). **2. Funds of Rs. 2 Lakhs for Sample Transport Expenses: proposed for the State Referral Labs for transportation of samples. Proposed for Mobility support and Field visits (including SRM).** **SRAE** **VPD Surveillance activities: Rs. 18.41 Lakhs** **a) Funds of Rs. 3.36 Lakhs for AFP surveillance** **b) Funds of Rs 13 Lakhs for MR case based investigation surveillance** **c) Funds of Rs 0.75 Lakhs for MR Outbreak Investigation** **d) Funds of Rs 1.3 Lakhs for DPT Case Investigation** **OOC :** **Rs 12.00 Lakhs for Mobility support and Field visits (including SRM) (This is PM Activity. Expenditure for PM activities to be booked under sl no 194)**
NDCP.2	**National Vector Borne Disease Control Programme (NVBDCP)**	**64**	**Malaria**	35.12	35.12	**Approved Rs 35.12 lakhs for the below-mentioned activities** **1. Diagnostics (Consumables, PPP, Sample Transport)-** Rs. 0.12 lakhs (Total cost for contingency RDTs) LPP of one RDT = ₹8.08 **2. Others including operating costs (OOC):** Rs. 35.0 lakhs (Sub-national Disease-free Certification: Malaria)
		65	**Kala-azar**			No proposal submitted by the state

FMR Code	Programme / Theme	S. No	Scheme / Activity	Amount Proposed (In Lakhs)	Amount Approved In Lakhs)	GoI Remarks
		66	AES/JE			No proposal submitted by the state
		67	Dengue & Chikungunya	63.13	61.35	**Approved Rs 61.35 lakhs for below mentioned activities:-** **1. Drugs and Supplies: Total Rs. 16.75 lakhs.** **Kind grant-** 16 ELISA based IgM test kit @ Rs.11150.00 per kit. Total Rs. 1.78 Lakh approved. **o Budget for Procurement done by States-** Approved 685 liter Technical Malathion @ Rs. 600/- per liter (Rs. 4.11 lakhs), 685 liter Cyphenothrin @ Rs. 1300/-per liter (Rs. 8.90 lakhs) and 280 litres of Temephos @ Rs. 700/-per liter (Rs. 1.96 lakhs). Total Rs. 14.97 lakhs approved. **3. Diagnostics (Consumables, PPP, Sample Transport):** Approved 47 ELISA based NS1 kits @ Rs. 15000/- per kit. Total Rs. 7.05 lakhs approved. **4.Others including operating costs (OOC):** Approved 11 fogging machines @ Rs. 36500/- per machine (Rs. 4.01 Lakhs), case management and inter-sectoral (Rs. 2.00 lakhs) and 22 DBCs in 10 districts @ Rs. 439/-per day for 20 days for months (Rs. 19.32 lakhs). Total Rs. 25.33 lakhs approved. **5. Surveillance, Research, Assessment, Evaluation (SRAE):** Approved SSHs recurrent cost @ Rs. 1.00 lakhs/-per SSH for 11 SSHs (Rs. 11.00 Lakhs) and Rs. 3.00 Lakhs for ARL AIIMS Bilaspur. Total Rs. 14.00 lakhs approved.
		68	Lymphatic Filariasis			

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ND CP.3	National Leprosy Eradication Programme (NLEP)	69	Case Detection and Management	15.15	15.15	**Total Rs 15.15 lakhs approved for below mentioned activities:-** **Equipment** Amount of Rs 0.15 lakhs for procurement of Rifampicin (Adult and Pediatric) Leprosy post-exposure prophylaxis with single-dose rifampicin). **OOC** Amount of Rs 15.00 lakhs for major program activity of Active case detection cases (ACD), FLC, and LCDC activities in the high-risk population by covering tribal areas, slums, industrial areas of Solan, Una, and Sirmaur, hard areas of Chamba, and villages in the districts.
		70	DPMR Services: Reconstructive Surgeries	3.22	3.22	**Approved Rs 3.22 lakhs for below mentioned activities:-** **DBT:** Fund for welfare allowance of patients for RCS (15 patients *@Rs.12000= Rs. 1.80 lakhs. **Equipment:** Fund for procurement other equipment –MCR footwear /self-care kits for Grade-1 and Grade-2 disability patients 2 Times (Half yearly 140 patients *2=280) Total@Rs.400*280= 1.12 Lakh **OOC:** Support to institutions for the conduction of Reconstructive surgery (RCS) Rs.5000 (Per Govt. Institution)*2= Rs. 0.10 Lakhs **RCS & Self Care camp operation cost (Rs. 10,000 per camp) *2= Rs.0.20 Lakhs**
		71	District Awards			No proposal submitted by the state
		72	Other NLEP Components	0.72	0.72	**OOC** **Approved Rs 0.72 lakhs for courier services to deliver leprosy drugs to**

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						districts from state store @6000 per district for 12 districts
ND CP.4	**National Tuberculosis Elimination Programme (NTEP)**	73	**Drug Sensitive TB (DSTB)**	368.22	368.22	**Approved Rs 368.22 lakhs as follows :** Treatment supporter Incentive, Tribal Incentive & Informant Incentive –Rs 60 lakh Maintenance work of DMC, TU, DTC & STDC – Rs 17.95 Procurement of chairs tables, LED TV, Almirah etc. - Rs 49.02 lakhs Procurement of loose drug 10%. and drug transportation – Rs 46.25 lakhs Cost for sample collection and transportation through ASHA, sample transportation from DMC to NAAT/IRL site through postal service & lab reagent – Rs 80 lakhs Incentive to community volunteer for ACF & procurement of EDNS - Rs 68 lakhs Operation research cost, TA/DA & medical college involvement- Rs 47 lakhs
		74	**Nikshay Poshan Yojana**	990.00	990.00	**Rs 990 lakhs approved for Ni-kshay Poshan Yojana to TB patients**
		75	**PPP**	85.00	85.00	**Rs 85 lakhs approved for private provider incentive** (10 lakh) and for X-ray from private sector & hiring of Radiographer per X-ray basis @10 Rs per X-ray (75 lakh)
		76	**Latent TB Infection (LTBI)**	2.00	2.00	Rs 2 lakhs approved for emergency procurement of CyTB
		77	**Drug Resistant TB(DRTB)**	452.17	452.17	**Rs 452.17 lakhs approved as follows :** Minor civil work NAAT labs, DRTB centre etc. – 13.35 lakhs

FMR Code	Programme / Theme	S. No	Scheme / Activity	Amount Proposed (In Lakhs)	Amount Approved In Lakhs)	GoI Remarks
						Procurement of various equipment for (DR TB Centre, IRL, C &DST Lab and Molecular Diagnostics)'DR-TB, Bio safety Cabinets ,battery backups(114 handheld X-ray machines available under CSR, AMC of HH X-ray, NABH accreditation etc. – Rs 240.12 lakh Emergency procurement of 2nd line drug – 18 lakhs Procurement of lab material and consumables, LPA, liquid culture, MTB CBNAAT cartridges & MGIT consumables- 170.70 lakhs DRTB patient travel charges – Rs 10 lakhs
		78	**TB Harega Desh Jeetega Campaign**	63.50	63.50	Rs 63.50 lakhs approved for Multi-sectoral engagement, community engagement, TB Champion, Home visit for LFU (incentive for non salaried staff), TB Mukt gram panchayat & World TB day celebration
		79	**State specific Initiatives and Innovations**			No proposal submitted by the state
ND CP.5	**National Viral Hepatitis Control Programme (NVHCP)**	80	**Prevention**	15.91	15.91	**Drugs and supplies** **Approved Rs 15.91 lakhs for below mentioned activities:-** Rs 4.22 Lakhs for HBIG for the newborns delivered to HBsAg positive mother Unit cost @Rs 2500 Rs 11.69 Lakh for Hep B vaccine consumables for HRG and HCWs
		81	**Screening and Testing through Facilities**	98.35	57.75	**Approved Rs. 57.75 lakhs for the FY 2026-27 for the procurement of screening kits and viral load cartridges by the state as additionally also proposed (for new treatment Provider centres i.e. CH Naduan**

FMR Code	Programme / Theme	S. No	Scheme / Activity	Amount Proposed (In Lakhs)	Amount Approved In Lakhs)	GoI Remarks
						Hamirpur and CH Nurpur Kangra) . as follows: **Diagnostics** Total of Rs. 40.60 lakhs for the viral load testing: 1a. Kind Grant of Rs 35.60 Lakhs for FY 2026-2027 for procurement of Viral load testing kits @ Rs 672 per test of both (B&C) for 6043 test (as per the seropositive target for hep B = 3685 patient & C = 2358 for 2026-27) . 1b. And cash grant of Rs. 5 lakhs. 2.a) Rs 52.35 Lakhs for districts for Hepatitis B & C RDT kits @Rs12 unit cost per test 222672*12 = Rs. 26.72 Lakhs for Hep B population target given by GOI for HP. @Rs20 unit cost per test.128141*20= Rs. 25.63 Lakhs for Hep C population target given by GOI for HP. 3. Rs.0.60 Lakhs for consumables for viral load testing @Rs10 per test i.e 6043*10=Rs 0.60 Lakhs **OOC** Rs 4.80 Lakhs for sample transportation
		82	**Screening and Testing through Outreach Activities**	1.80	1.80	OCC **Approved Rs. 1.80 Lakhs for outreach activities as per NVHCP norms @Rs5000 per camp for at least 50 HRGs to be screened**
		83	**Treatment**	113.88	15.50	**Approved Rs. 15.50 Lakhs for-** 1. Kind Grant of Rs 58.95 lakhs for the procurement of Hepatitis C Drugs. 2. Kind Grant of Rs 39.43 lakhs for the procurement of Hepatitis B Drugs i.e.

FMR Code	Programme / Theme	S. No	Scheme / Activity	Amount Proposed (In Lakhs)	Amount Approved In Lakhs)	GoI Remarks
						Rs. 1500* 2629 (Cumulative plus new target of 500 as per GOI). 3. Cash Grant- 1 lakh per district i.e Rs 1 *12=Rs 12 Lakhs Management of Hep A & E . 4. 3.5 lakhs for treatment of complicated cases of Hep B & C.
NDCP.6	**National Rabies Control Programme (NRCP)**	**84**	**Implementation of NRCP**	8.00	8.00	**Infrastructure** **Ongoing activity:** **Approved Rs 8 Lakhs for New Construction of 4 Wound Washing area in Pt. JLNGMC Chamba, RH Solan , CH Theog & CH Rohroo) (Rs. 2 Lacs each)**
NDCP.7	**Programme for Prevention and Control of Leptospirosis (PPCL)**	**85**	**Implementation of PPCL**			No proposal submitted by the state
NDCP.9	**State specific Initiatives and Innovations**	**86**	**Implementation of State specific Initiatives and Innovations**			No proposal submitted by the state
NDCP Sub Total				**2,367.58**	**2,226.82**	
NCD.1	**National Program for Control of Blindness and Vision Impairment (NPCB+VI)**	**87**	**Cataract Surgeries through Facilities**	**393.00**	**393.00**	**Rs 393 lakhs approved for below mentioned activities:-** Rs. 300.00 lakhs for conducting 30,000 cataract surgeries @ Rs. 1000 per case. Rs. 90.00 lakhs for procurement of operating microscopes for ZH Mandi, CH Palampur and ZH Dharamshala (@ Rs. 30 lakhs each). Rs. 3.00 lakhs for procurement of one Flash Autoclave for ZH Dharamshala.
		88	**Cataract Surgeries through NGOs**	**100.00**	**100.00**	**OOC** **Approved Rs 100 lakhs for cataract**

FMR Code	Programme / Theme	S. No	Scheme / Activity	Amount Proposed (In Lakhs)	Amount Approved In Lakhs)	GoI Remarks
						surgeries support to the NGOs /Pvt Hospitals for 5000 cases.
		89	Other Ophthalmic Interventions through Facilities	1.00	1.00	**Diagnostics** **Approved Rs 1 lakh for** Storage medium and solutions for SLBSGMCH Mandi
		90	Other Ophthalmic Interventions through NGOs			No proposal submitted by the state
		91	Mobile Ophthalmic Units			No proposal submitted by the state
		92	Collection of Eye Balls by Eye Banks and Eye Donation Centres	18.00	18.00	**Equipment** **Approved Rs 18 lakhs for equipment @ Rs 3 lakh per institute to Medical Colleges i.e IGMC Shimla, Tanda, Nerchowk, Nahan, Hamirpur and Chamba for eye ball collection centers**
		93	Free Spectacles to School Children	50.00	50.00	**OOC** **Approved Rs 50 Lakhs for spectacles @Rs 350 per student for 14,285 students. (Free spectacles)**
		94	Free spectacles to Others	50.00	50.00	**OOC** **Approved Rs 50 Lakhs for spectacles to elderly persons @Rs 350 per person for 14,285 persons. (Free spectacles)**
		95	Grant in Aid for the Health Institutions, Eye Bank, NGO, Private Practioners			No proposal submitted by the state
		96	Other NPCB+VI components			No proposal submitted by the state
NCD.2	National Mental Health	97	Implementation of District Mental Health Plan	16.00	16.00	**Approved Rs 16 lakhs for below mentioned activities:-** **Drugs and supplies:**

FMR Code	Programme / Theme	S. No	Scheme / Activity	Amount Proposed (In Lakhs)	Amount Approved In Lakhs)	GoI Remarks
	Program (NMHP)					Rs. 10 Lakhs for drugs. The drugs proposed are not in accordance with DMHP guidelines. Under the MNS package, only two of the proposed drugs are included. However, the budget has been approved in principle as per the NPCC discussion. **SRAE:** Rs 6 Lakhs for 12 Districts @ Rs 50,000 per District.
		98	**Implementation of TeleMANAS**	**57.31**	**57.31**	**Approved Rs 57.31 lakhs for the implementation of TeleMANAS.** **DBT** **Approved a lump sum amount of Rs 45.31 lakhs for FY 2026-27 as remuneration for staff posted in the State TeleMANAS cell.** **OOC** **Approved Rs. 12.00 Lakhs for FY 2026-27 as Operating Costs (OOC) for the following activities:** **a. Contingency and Miscellaneous @Rs 6.00 Lakhs p.a for one State cell (@Rs. 50,000/mth)** **b. Internet/telecom vendor @Rs 2.4 Lakhs p.a for one State cell (@Rs. 20,000/mth)** **c. Internet charges @Rs 3.6 Lakhs p.a for 12 DMHP units (@Rs. 2500/mth/DMHP Unit)** **State to ensure that Tele MANAS IEC materials should be displayed across AAM facilities.**
NCD.3	**National Programme for Health Care for the**	**99**	**Geriatric Care at DH**			No proposal submitted by the state
		100	**Geriatric Care at CHC/SDH**			No proposal submitted by the state

FM R Code	Programme / Theme	S. No	Scheme / Activity	Amount Proposed (In Lakhs)	Amount Approved In Lakhs)	GoI Remarks
	Elderly (NPHCE)	101	Geriatric Care at PHC/ SHC			No proposal submitted by the state
		102	Community Based Intervention			No proposal submitted by the state
		103	State specific Initiatives and Innovations			No proposal submitted by the state
NC D.4	National Tobacco Control Programme (NTCP)	104	Implementation of COTPA - 2003	0.36	0.36	**Diagnostics** **Rs 0.36 lakhs is approved for the procurement of tobacco products and transportation to NTTL**
		105	Implementation of ToFEI Guideline	45.00	45.00	**OOC** **Rs. 45 lakhs is approved for implementation of ToFEI Guideline**
		106	Tobacco Cessation	35.86	35.86	**Approved Rs 35.86 lakhs for below mentioned activities:-** Drugs & Supplies: Rs. 18 lakhs is approved for drug and supplies. OOC: Rs. 17.86 lakh is approved for councelling session at TCC
NC D.5	National Programme for Prevention and Control of Non Communicable Diseases (NP-NCD)	107	NCD Clinics at DH	309.66	309.66	**Rs.309.66 Lakhs is approved for below mentioned activities:-** A) Rs 153.66 lakh for the procurement of equipment for 12 DCCCs at DH B) Rs 120 lakhs for procurement of Chemotherapy drugs @ 10 lakh per 12 DCCCs at District Hospital C) Rs 12 Lakh for referral patients for 12 NCD Clinics D) Rs 12 Lakh for contingency at 12 NCD Clinics @ Rs 1 lakh per Clinic E) Rs 12 lakh for contingency at 12 DCCCs at DH @ Rs 1 lakh per DCCC
		108	NCD Clinics at CHC/SDH	179.79	179.79	**Rs.179.79 Lakhs is approved for below mentioned activities:-** A) Rs 76.83 lakh for the procurement of equipment for 6 DCCCs at SDH B) Rs 60 lakhs for the procurement of Chemotherapy drugs @ 10 lakh per 6 DCCCs

FM R Code	Programme / Theme	S. No	Scheme / Activity	Amount Proposed (In Lakhs)	Amount Approved In Lakhs)	GoI Remarks
						C) Rs 8.96 Lakh for referral patients for 28 NCD Clinics D) Rs 28 Lakh for contingency at 28 NCD Clinics @ Rs 1 lakh per clinic E) Rs 6 lakh for contingency at 6 DCCCs at DH @ Rs 1 lakh per DCCC
		109	**Cardiac Care Unit (CCU/ICU) including STEMI**	**69.50**	**69.50**	**Rs.69.50 Lakhs is approved for Establishment and equipping of a dedicated 8-bedded Coronary Care Unit (CCU) in DH Hamirpur.**
		110	**Other NP-NCD Components**	**1,500.00**	**1,447.00**	**Budget of Rs.1447.00 Lakhs is approved–** Based on DO letter no. T.20015/03/2026-NCD-II dated 4th Feb 2026 on gap analysis and proposing need based infrastructure for 5 new NPNCD components i.e. CKD, COPD, NAFLD, Stroke and STEMI. State has conducted a gap analysis and details of proposals is being is placed below: - • 12-Lead ECG machine (PC Enabled): Rs 646 lakhs @ Rs 1 lakh per unit (for 47 at SDH, 78 at CHC & 521 at PHC level) • 3D/4D USG machine: Rs 132 lakhs @ Rs 22 lakhs per unit (for • USG Probe with Sheer Wave Elastoglaply (SWE): Rs 30 lakhs @ Rs 5 lakhs per unit • BMI Kiosk with digital Printer: Rs 53 lakhs @ Rs 0.5 lakhs per unit (for 106 CCU at CHC level) – Not approved. • BMI assessment equipment (weighing scale, height stand, measuring tape): Rs 184 lakhs (for 182 weighing machines@ PHC level and 719 @ HSC level @Rs 5000 each. 283 Height Stand @ PHC level & 1128 @ HSC level @ Rs 7500 each. 249 measuring tape @PHC level &

FMR Code	Programme / Theme	S. No	Scheme / Activity	Amount Proposed (In Lakhs)	Amount Approved In Lakhs)	GoI Remarks
						1082 @ HSC level @ Rs 2500 each) • Intracranial Bleed Detector: Rs 19 lakhs @ Rs 2500 per unit (for 92 SDH, 106 CHC and 561PHC) • Spirometry Lab: Rs 414 lakhs @ Rs 2 lakhs per unit (for 11 DH, 92 SDH, 104 CHC) • Peak Expiratory Flow meter: Rs 21 lakhs @ Rs 800 per unit. (for 554 PHCs and 2011 at HSC)
		111	**State-specific Initiatives and Innovations**			No proposal submitted by the state
NC D.6	**Pradhan Mantri National Dialysis Programme (PMNDP)**	**112**	**Hemodialysis Services**	**124.50**	**124.50**	**OOC** **Approved Rs 124.50 lakhs for Hemodialysis services** **Activity-1: Ongoing Activity** (State has erroneously proposed Rs 133.5 Lakhs instead of the pre-NPCC proposed amount of Rs 124.5 L) As discussed in NPCC, the amount of Rs 115.5 Lakhs is for 11550 anticipated dialysis sessions @ Rs 1000 per sessions through in-house mode at 29 dialysis centres. **Rs 115.5 Lakhs approved.** As **Activity-2 Ongoing Activity** discussed in NPCC meeting, the amount of Rs 9 Lakh is for 900 dialysis sessions anticipated in PPP-mode @Rs 2000 per session for 2 Dialysis centres. State has projected 50% of total anticipated budget. **Rs 9.00 Lakhs approved.**
		113	**Peritoneal Dialysis Services**	**30.00**	**30.00**	**OOC** **New Activity:** **As discussed in NPCC, the amount of INR 30 Lakh is for procurement of CAPD bags for estimated 12 patients**

FMR Code	Programme / Theme	S. No	Scheme / Activity	Amount Proposed (In Lakhs)	Amount Approved In Lakhs)	GoI Remarks
						@ Rs 20833 per month is approved. Activity for INR 30 Lakh approved.
NC D.7	**National Program for Climate Change and Human Health (NPCCHH)**	**114**	**Implementation of NPCCHH**	**219.53**	**2.00**	**Approved Rs 2.00 lakhs for the below-mentioned activities:-** OOC Rs. 217 lakhs for installation of solar power systems in selected healthcare facilities- Not approved. **SRAE** Rs 2.00 lakhs for conducting a Vulnerability Assessment Study under the technical guidance of the Departments of Community Medicine (PSM) in State Government Medical Colleges. The study will assess climate-related health vulnerabilities and support evidence-based planning for mitigation strategies.
NC D.8	**National Oral health programme (NOHP)**	**115**	**Implementation at DH**			No proposal submitted by the state
		116	**Implementation at CHC/ SDH**	**90.90**	**90.90**	**Approved Rs 90.90 lakhs for below mentioned activities:-** **Diagnostics** Rs 35 Lakhs for the requirement of 5 Dental Chairs for 5 Dental clinics (RVG ,Dental Lathe Machine, Denture trimming motor and handpiece heavy duty, etc & (One) Dental Clinics Cost Rs 7.00 Lakhs/per clinic Rs. 55.90 Lakhs for the consumable for NOHP clinics @ Rs. 1 lakhs/- per clinics for 22 clinics /- and consumables for 113 Muskaan clinics @ Rs. 30,000/- per clinics for 113 Muskaan clinics (Rs 33,90,000/-)
		117	**Mobile Dental Units/Van**			No proposal submitted by the state
		118	**State specific Initiatives and Innovations**			No proposal submitted by the state

FMR Code	Programme / Theme	S. No	Scheme / Activity	Amount Proposed (In Lakhs)	Amount Approved In Lakhs)	GoI Remarks
NC D.9	National Programme on palliative care (NPPC)	119	Implementation of NPPC	72.00	72.00	**OOC** **Approved Rs 72.00 Lakh for hiring of 12 vehicles @Rs.50,000 per vehicles per month @Rs.6 lakh per annum per vehicle (12 vehicles x Rs.6 lakh = Rs.72 lakh)**
NC D.10	National Programme for Prevention and Control of Fluorosis (NPPCF)	120	Implementation of NPPCF			No proposal submitted by the state
NC D.11	National Programme for Prevention and Control of Deafness (NPPCD)	121	Screening of Deafness	90.00	90.00	**Equipment** **Approved Rs 90 lakhs for the procurement of** 1) Operating microscope and other equipment Rs 20 lakh for Hamirpur Medical College. 2) Operating microscope and other equipment, Rs 20 lakh for DH Solan. 3) Audiometry equipment, Rs 20 lakh for Nahan Medical College. 4) Operating microscope Rs 10 lakh for DDUZH Shimla, 5) Bera Machine Rs 10 lakh for RH Kullu and 6) PTA and impedance audiometry machine ZH Mandi Rs 10 lakh Not approved for Drills and Burrheads for Chamba @Rs 10 Lakh
		122	Management of Deafness			No proposal submitted by the state
		123	State Specific Initiatives			No proposal submitted by the state
NC D.12	National programme for Prevention and Management of Burn & Injuries	124	Support for Burn Units			No proposal submitted by the state
		125	Support for Emergency Trauma Care			No proposal submitted by the state

FMR Code	Programme / Theme	S. No	Scheme / Activity	Amount Proposed (In Lakhs)	Amount Approved In Lakhs)	GoI Remarks
NCD.13	State specific Programme Interventions	126	Implementation of State specific Initiatives and Innovations			No proposal submitted by the state
NCD Sub Total				3,452.41	3,181.88	
HSS (U).1	Comprehensive Primary Healthcare (CPHC)	127	Operationalisation of Ayushman Arogya Mandirs (AAM) - Urban			No proposal submitted by the state
		128	Wellness Activities at AAMs- Urban			No proposal submitted by the state
		129	Teleconsultation Facilities at AAMs-Urban			No proposal submitted by the state
HSS (U).2	Community Engagement	130	ASHA (including ASHA Certification and ASHA benefit package)			No proposal submitted by the state
		131	MAS	2.00	2.00	**Approved Rs 2.00 Lakhs for MAS:** **OOC - Total untied cost of Rs 2.00 lakhs** for the 40 MAS at the rate of Rs 5000 per MAS per year. (total cost Rs 2 lakhs - for district Kangra total Rs 30,000, for district Solan total Rs 1,25,000 and district Shimla total Rs 45000)
		132	JAS			No proposal submitted by the state
		133	RKS			No proposal submitted by the state
		134	Outreach Activities	3.14	3.14	**Approved Rs 3.14 lakhs in FY 2026-2027 :** **OOC** i) **Total cost of Rs 1.1 lakhs**, for 92 UHND camps at the rate of Rs 100 per month per UHND camps for FY 2026-27.

FMR Code	Programme / Theme	S. No	Scheme / Activity	Amount Proposed (In Lakhs)	Amount Approved In Lakhs)	GoI Remarks
						ii) **Total cost of Rs 2.04 lakhs** for the mobility support of 17 ANMs at the rate of Rs 1000 per month per year
		135	**Mapping of Slums and Vulnerable Population**			No proposal submitted by the state
		136	**Other Community Engagement Components**			No proposal submitted by the state
HSS (U). 3	**Public Health Institutions as per IPHS norms**	137	**Urban PHCs/ Polyclinics**			No proposal submitted by the state
		138	**Urban CHCs and Maternity Homes**			No proposal submitted by the state
HSS (U). 4	**Quality Assurance**	139	**Quality Assurance Implementation & Mera Aspataal**			No proposal submitted by the state
		140	**Kayakalp**			No proposal submitted by the state
		141	**Swacch Swasth Sarvatra**			No proposal submitted by the state
HSS (U). 5	**HRH**	142	**Remuneration for all NHM HR**	**63.70**	**63.66**	**DBT: As per the discussion in NPCC, Rs 63.66 lakhs is approved for:** • 24 positions of service delivery staff. • Lump sum budget for engaging support staff and 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 disbursal as mentioned in JS (P)'s letter dated 8 March 2016 (D.O.No.G.27034-8/2015-NHM(F)). **The budget discussed during NPCC meeting was appraised and same has been approved .**

FMR Code	Programme / Theme	S. No	Scheme / Activity	Amount Proposed (In Lakhs)	Amount Approved In Lakhs)	GoI Remarks
						All posts are approved for 12 months in principle. Approval for U-AAM HR shifted from serial number 185. Approved for the shifting of HR for U-AAMs (2MOs, 2 ANMs, 2 Pharmacists and 2 Support staff) from FC-XV to NHM. State to access the requirement before filling up the vacant positions. 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. 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.
		143	**Incentives (Allowance, Incentives, Staff Welfare Fund)**			No proposal submitted by the state
		144	**Incentives under CPHC**			No proposal submitted by the state
		145	**Costs for HR Recruitment and Outsourcing**			No proposal submitted by the state
HSS (U). 6	**Technical Assistance**	**146**	**Planning and Program Management***	**6.15**	**6.15**	**OOC:** An amount of Rs 6.15 lakhs is **approved for** the activities approved under sl no 146 as per the details mentioned in the PM Annexure. State to ensure that the budget approved

FMR Code	Programme / Theme	S. No	Scheme / Activity	Amount Proposed (In Lakhs)	Amount Approved In Lakhs)	GoI Remarks
						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 9% of RE or 9% of the total expenditure, whichever is less, as mandated by Mission Steering Group. If required, State to spend on programme management from State budget.
HSS (U). 7	**Access**	**147**	**PPP**			No proposal submitted by the state
HSS (U). 8	**Innovation**	**148**	**State specific Programme Innovations and Interventions**			No proposal submitted by the state
HSS (U). 9	**Untied Grants**	**149**	**Untied Fund**	**22.36**	**21.00**	**Approved Rs 21 lakhs for Untied funds for 21 UPHCs in FY 2026-27: OOC** i) Rs 20 lakhs approved for 20 government UPHC @ Rs 1 lakh per UPHC per year. ii) Rs 01 lakh for one rented UPHC
HSS (U) Sub total				**97.35**	**95.95**	No proposal submitted by the state
HSS .1	**Comprehensive Primary Healthcare (CPHC)**	**150**	**Operationalisation of Ayushman Arogya Mandirs (AAM) - Rural**	**717.37**	**717.07**	**Approved Rs. 717.07 lakhs for operationalisation of AAM.** **OOC** **1. Ongoing activity: Approved Rs 10.77 lakhs for the rent of 26 AAMs for 12 months @3451/month** **2. Approved Rs 398.40 lakhs as incentive for yoga guides @Rs 250 for 10 days for 1328 AAM-SHC, PHC and UPHC for 12 months** **3. Approved Rs 307.90 lakhs for third-party evaluation @Rs 51,102 for 518 AAM-SHC and @Rs 28,800 for 150**

FMR Code	Programme / Theme	S. No	Scheme / Activity	Amount Proposed (In Lakhs)	Amount Approved In Lakhs)	GoI Remarks
						AAM-PHC as per the Ayushman Bharat guidelines for independent monitoring costs for performance assessment
		151	**Wellness Activities at AAMs- Rural**	923.70	923.70	**Approved Rs. 923.70 lakhs for wellness activities at AAMs. OOC** **1. Approved Rs 796.5 lakhs for Ayushman Arogya shivir @Rs 5000 for 2655 AAM-SHC/PHC/UPHC for 12 months. (State has proposed for only 796.5 lakhs i.e half the amount of the actual amount of Rs 1593 lakhs taking into account the expenditure of previous year and limited resource envelope)** **2. Ongoing activity: State has proposed Rs 127.2 lacs for Ayushman Arogya Shivir at CHCs in 106 CHC Approved Rs 127.2 lacs for Ayushman Arogya Shivir at CHCs in 106 CHC.**
		152	**Teleconsultation Facilities at AAMs-Rural**			No proposal submitted by the state
		153	**CHO Mentoring**	23.76	23.76	**OOC** **Approved Rs 23.76 lakhs as incentives for 11 State Mentors(SM) as part of CHO Mentoring @Rs 150 per CHO for 12 months with a ratio of 1:120 i.e one SM will mentor 120 CHOs**
HSS .2	**Blood Services & Disorders**	154	**Screening for Blood Disorders**	210.00	20.00	**1. Ongoing activity: Approved;** **a)Rs.15,000 for sickle cell screening @ Rs. 30 for 500 individuals.** **b) Rs 19.85 Lakh for combined testing for Hemophilia and Thalassemia at Rs. 101.8 per test which includes Hb, CBC for thalassemia and aPTT .** **2. New Activity: Pended for HTA Norms Rs. 190 Lakhs for NAT testing.**

FMR Code	Programme / Theme	S. No	Scheme / Activity	Amount Proposed (In Lakhs)	Amount Approved In Lakhs)	GoI Remarks
		155	Support for Blood Transfusion			No proposal submitted by the state
		156	Blood Bank/BCSU/BSU/Thalassemia Day Care Centre			No proposal submitted by the state
		157	Blood Collection and Transport Vans			No proposal submitted by the state
		158	Other Blood Services & Disorders Components	103.00	103.00	**Drugs & Supplies** **Rs. 103 Lakhs is approved for the procurement of Anti – haemophilia drugs Factors VIII, IX , VII & APCC :** **1. Factor VIII: Rs. 35 L (3,50,000 IU for factor VIII @ Rs 10)** **2. Factor IX: Rs. 52.76 L (4,40,000 IU for Factor IX @ Rs. 12)** **3. APCC : Rs. 6.49 L (11,000 IU for APCC @ Rs. 29,500 per vial)** **4. Factor VII: Rs. 8.75 L (23 mg of Factor VII @ Rs. 38,027)**
HSS.3	Community Engagement	159	ASHA (including ASHA Certification and ASHA Benefit Package)	752.39	514.57	**Approved Rs. 514.57 lakhs for ASHA (including ASHA certification and ASHA benefit package)** **OOC** **1. Approved in principle for uniform and shoes as per the revised GOI norms. (The amount of this proposal has not been added in total amount recommended)** **2. Approved in principle for bags and umbrellas as per the revised GOI norms. (The amount of this proposal has not been added in total amount recommended)**

FM R Code	Programme / Theme	S. No	Scheme / Activity	Amount Proposed (In Lakhs)	Amount Approved In Lakhs)	GoI Remarks
						3. Approved 11.43 lakhs as ASHA certification exam fees @Rs 762 for 1500 ASHA(50 batches with 30 in each batch) **4. Approved Rs 41.19 lakhs @Rs 436 per annum for PMJJBY and @Rs 20 per annum for PMSBY for 9034 ASHA** **5. Approved Rs 14,500 for ID cards @Rs 50 per card for 290 ASHAs as per NPCC discussion.** **6. Approved Rs 3.85 lakhs for ASHA awards @Rs 5000 for 77 blocks.** **7. Approved Rs 54.20 lakhs for stationary allowance @Rs 50 per month for 12 months for 9034 ASHAs as per NPCC discussion** **8. Approved Rs 162.61 lakhs for CUG @Rs 150 per month for 12 months for 9034 ASHAs** **9. Approved Rs 239.95 lakhs as incentive award for ASHA certification as follows:** **a. Rs 67.4 lakhs as liability to clear all previous incentive award dues for ASHA certification** **b. Rs 63.75 lakhs as an incentive award @Rs 5000 for 1275 ASHA, considering the pass percentage as 85% for RMNCHA+N certification** **c. Rs 108.80 lakhs as an incentive award @Rs 5000 for the expanded package certificate for 2176 ASHA, considering 80% of pass percentage.**

FMR Code	Programme / Theme	S. No	Scheme / Activity	Amount Proposed (In Lakhs)	Amount Approved In Lakhs)	GoI Remarks
						10. Approved Rs 1.20 lakhs @Rs 20,000 for 6 ASHA who have left the programme after completing service of 10 yrs.
		160	VHSNC	447.10	447.10	**OOC** **Approved Rs 447.10 lakhs as untied fund for 8942 VHSNC @Rs 5000 per annum.**
		161	JAS			No proposal submitted by the state
		162	RKS			No proposal submitted by the state
		163	Other Community Engagements Components			No proposal submitted by the state
HSS .4	Public Health Institutions as per IPHS norms	164	District Hospitals			No proposal submitted by the state
		165	Sub-District Hospitals			No proposal submitted by the state
		166	Community Health Centers			No proposal submitted by the state
		167	Primary Health Centers			No proposal submitted by the state
		168	Sub-Health Centers			No proposal submitted by the state
		169	Other Infrastructure /Civil works/Expansion etc.	4.17	4.17	**Infrastructure** **Ongoing activity:** Approved Rs 4.17 lakhs for the installation of water source for fire fighting purpose in the Zonal Hospital Dharamshala.
		170	Renovation/Repair/Upgradation of Facilities for IPHS/NQAS/ LaQshya/ MUSQAN/SUMAN Compliance	-	-	No proposal submitted by the state

FMR Code	Programme / Theme	S. No	Scheme / Activity	Amount Proposed (In Lakhs)	Amount Approved In Lakhs)	GoI Remarks
HSS .5	Referral Transport	171	Advance Life Saving Ambulances	636.74	636.74	**OOC** **Ongoing activity: ApprovedRs 636.74 lakhs for the operational cost of 31 ALS @ Rs 1.71 lakhs per ambulance per month for FY 2026-27.**
		172	Basic Life Saving Ambulances	3116.64	3116.64	**OOC** **Ongoing activity:** **State has proposed Rs 3272.05 lakhs for the operational cost of 172 BLS ambulances for FY 2026-27.** **Approved Rs 3116.64 lakhs for the operational cost of 172 BLS ambulances @1.51 lakhs per ambulance per month as per the norm for FY 2026-27.** **(State calculation error)**
		173	Patient Transport Vehicle			No proposal submitted by the state
		174	Other Ambulances	21.60	21.60	**OOC** **Ongoing activity: Approved Rs 21.60 lakhs for the operational cost of Six (6) bike ambulances @ Rs 0.30 lakhs/ bike ambulance/month.**
HSS .6	Quality Assurance	175	Quality Assurance Implementation & Mera Aspataal	1,825.41	1,825.41	**OOC** **Rs. 1825.41 Lakhs is approved as follows:** **1.** New Activity: As discussed in NPCC, the amount of Rs 13.5 Lakhs is for AERB compliance of 18 health facilities @ Rs 75000 per facility is recommended. Activity for Rs 13.5 Lakhs approved. 2. Rs. 4.495 Lakh for EQAS for Labs in Health care facilities for DH and 100 & above bedded Facilities (ongoing activity). 3. Rs. 4.9 Lakhs for Mera-Aspataal

FMR Code	Programme / Theme	S. No	Scheme / Activity	Amount Proposed (In Lakhs)	Amount Approved In Lakhs)	GoI Remarks
						Implementation/ Operationalisation of Patient Feedback System in seven facilities. 4. Rs. 606.9 Lakhs for traversing gaps in HCFs under quality assurance program implementation (1DH@5L, 7 CH@3L, 10 CHC@2L, 241 PHC@1L, 457 SC@0.7L) 5. Rs. 6.82 Lakhs for State & District Level assessment cum Mentoring Visits. 6. Rs. 456.9 Lakhs for Quality Assurance Certifications, Re-certification (National & State Certification) under NQAS for 1 DH @2.70 L, 5 CH & 5 CHC @1.90 L,135 PHC @1.45 L, 228 HWC @1.05 L. 7. Rs. 731.89 Lakhs for Incentivization on attainment of NQAS certification subject to submission of surveillance report to certification unit, NHSRC on yearly basis.
		176	**Kayakalp**	618.30	**598.30**	**OOC** **Rs. 598.30 Lakhs is approved as follows:-** 1. Rs. 190.1 Lakh for Kayakalp Assessments. 2. Rs. 390 Lakhs for Kayakalp incentives 3. Rs. 2 Lakhs for contingencies. 4. Rs 16.2 Lakhs for mobility support **(This is PM Activity. Expenditure for PM activities to be booked under sl no 194)** **5. Quality Management System for AEFI surveillance under Universal Immunization Programme: - Rs. 20 Lakh for trainings and implementation shifted to Sl no 32.**
		177	**Swacch Swasth Sarvatra**			No proposal submitted by the state
HSS .7	**Other Initiatives**	**178**	**Comprehensive Grievance**			No proposal submitted by the state

FMR Code	Programme / Theme	S. No	Scheme / Activity	Amount Proposed (In Lakhs)	Amount Approved In Lakhs)	GoI Remarks
	to improve access		Redressal Mechanism			
		179	PPP			No proposal submitted by the state
		180	Free Drugs Services Initiative	9,500.00	9,500.00	Drugs and supplies Rs. 9500.0 Lakhs is approved for procurement of IPHS recommended medicines for FY 2026-27 based on the following conditions: **-MoHFW provides the budget for IPHS recommended Medicines only. -Budget under NHM shall be proposed to meet the medicine demand of the patients at DH, SDH, CHC, AAM PHCs and AAM SHCs level health facilities -The medicines should be quality tested from NABL accredited labs.** **State need to ensure provision of following drugs under the Nutrition programme. 1.IFA syrup and tablets (pink, blue and red) for all the beneficiaries in a saturation mode and therapeutic dosage of those tested and found anemic ensuring resolution of anemic cases. 2. Albendazole tablets for 1-19 years for biannual rounds of National Deworming Day 3. Vitamin A bottles for 9-59 months) children**
		181	Free Diagnostics Services Initiative	10,000.00	5,000.00	Diagnostics Ongoing Activity As discussed in NPCC meeting, State is advised to strengthen in-house capacity and review the existing mode of service delivery.

FMR Code	Programme / Theme	S. No	Scheme / Activity	Amount Proposed (In Lakhs)	Amount Approved In Lakhs)	GoI Remarks
						Based on the previous year's expenditure and RoP norms Rs 5000 Lakhs approved for Free Diagnostics Services Initiative.
		182	Mobile Medical Units	232.09	232.09	OOC Ongoing activity: Approved Rs 232.09 lakhs for the operational cost of 12 MMUs- 10 MMUs @Rs 1,54,437 per MMU per month for 12 months. 2 MMUs @Rs 1,94,854 per MMU per month for 12 months
		183	State specific Programme Interventions and Innovations			No proposal submitted by the state
HSS.8	Inventory management	184	Biomedical Equipment Management System and AERB	500.00	500.00	OOC Ongoing Activity As discussed in NPCC, the amount of Rs 500 Lakhs is for equipment maintenance @ (5.7% of Estimated TAV 87.5 Cr) is recommended. Activity for INR 500 Lakhs approved.
HSS.9	HRH	185	Remuneration for all NHM HR	16,697.15	13,374.09	DBT: As per discussion in NPCC, Rs 13,374.09 lakhs is approved for: • 2907 positions of service delivery staff and 439 programme management staff • 4 Lab Assistants under NTEP approved. • Lump sum budget for engaging support staff and for data entry operations • Annual Increment as per the principles mentioned in the HRH Guidelines

FM R Code	Programme / Theme	S. No	Scheme / Activity	Amount Proposed (In Lakhs)	Amount Approved In Lakhs)	GoI Remarks
						• 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 disbursal as mentioned in JS (P)'s letter dated 8 March 2016 (D.O.No.G.27034-8/2015-NHM(F)). The budget discussed during NPCC meeting was appraised and same has been recommended. Approval for U-AAM HR shifted to serial number 142. Recommended for approval for shifting of positions (6 Public Health Specialist and 6 DEOs) from 15th FC to NHM. State to access the requirement before filling up the vacant positions. All posts are recommended 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. 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.

FM R Code	Programme / Theme	S. No	Scheme / Activity	Amount Proposed (In Lakhs)	Amount Approved In Lakhs)	GoI Remarks
						Approval for honorarium of Program and Data Assistant has been shifted from sl no 8 Approval for the remuneration of e-Vin HR has been shifted from Sl no. 34
		186	Incentives (Allowance, Incentives, Staff Welfare Fund)	2,481.01	2,281.01	**Approved Rs. 2281.01 lakhs for incentives.** DBT: Ongoing Activity: **Approved budget of Rs 2160 lakhs for FY 2026-27 for area based incentives for Medical Officers/ Specialists.** Ongoing Activity: **State has proposed budget of Rs 28.8 lakhs as incentives for peer supporters under NVHCP. Approved Rs 28.8 lakhs.** **New Activity: State has proposed incentives for Rs 3.84 lakhs as incentives for DEOs under NVHCP. Approved Rs 3.84 lakhs.** **Budget of Rs 100 lakhs proposed fro ex-gratia grant for death in service is not approved as per discussion in NPCC.** **Budget of Rs 100 lakhs proposed for gratuity is not approved.** Ongoing Activity: **Approved Rs 69.60 lakhs for all service delivery HRH and Rs 18.77 lakhs for all programme management HRH under NHM and NUHM as staff welfare fund. State may explore the modalities through which Bihar/Chhattisgarh have provided insurance to the NHM HRH.**

FMR Code	Programme / Theme	S. No	Scheme / Activity	Amount Proposed (In Lakhs)	Amount Approved In Lakhs)	GoI Remarks
		187	Remuneration for CHOs	8,118.68	8,118.69	DBT: Approved Rs 8,118.69 lakhs for 2115 CHOs for FY 2026-27. The remuneration, including annual increment as applicable as per NHM norms, is approved for 12 months in principle.
		188	Incentives under CPHC	2,933.30	2,933.30	OOC Approved Rs. 2933.30 lakhs for incentives under CPHC. 1. Approved Rs 1864.80 lakh as performance-based incentive for 2072 CHOs @Rs7500(State has proposed for 50% of actual amount of PBI-Rs 15,000 taking into account the expenditure of the previous year) 2. Approved Rs 1058 lakhs as Team Based Incentives for AAM-SHC & PHC Team as follows: a. Rs 777 lakhs @ Rs 75000 per facility per year for 2072 AAM-HSCs team i.e ASHAs & MPWs(State has proposed for 50% of actual calculated amount of Rs 1554 lakhs considering the expenditure of previous year) b.Rs 281 lakhs @Rs 1 lakh per facility per year for 562 AAM-PHC team i.e ASHAs & MPWs (State has proposed for 50% of actual calculated amount of Rs 562 lakhs considering the expenditure of previous year) 3. Approved Rs 10.5 lakhs as team based incentives @Rs 1 lakh per facility per year for 21 AAM-UPHC(State has proposed for 50% of actual calculated amount of Rs 21 lakhs considering the expenditure of previous year)

FM R Code	Programme / Theme	S. No	Scheme / Activity	Amount Proposed (In Lakhs)	Amount Approved (In Lakhs)	GoI Remarks
HSS .10	Enhancing HR	189	Costs for HR Recruitment and Outsourcing			No proposal submitted by the state
		190	Human Resource Information Systems (HRIS)			No proposal submitted by the state
		191	DNB Courses for Medical Doctors			No proposal submitted by the state
		192	Training Institutes and Skill Labs			No proposal submitted by the state
HSS .11	Technical Assistance	193	SHSRC / ILC (Innovation & Learning Centre)	100.00	100.00	**OOC** **Approved Rs. 100 Lakhs for FY 2026-27 as Operational Cost (OOC) for SHSRC and for conducting SRM activities.** **State to expedite the process of recruitment and make SHSRC functional in its full capacity.** **For SRM activities, the budget utilized should be exclusively for transportation/mobility support, accommodation, TA/DA, and not for honorarium.** **State to ensure that there is no duplication of activities with SRM. All review meetings/visits may be clubbed with SRM as single uniform activity.** **The tentative timelines for SRM may be shared with KMD, NHSRC.**
		194	Planning and Program Management*	1,838.84	1,792.55	OOC: Rs 3652.18 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 1253.46 lakhs is approved for PM and M&E activities

FMR Code	Programme / Theme	S. No	Scheme / Activity	Amount Proposed (In Lakhs)	Amount Approved In Lakhs)	GoI Remarks
						approved under sl no 194 as per the details mentioned in the PM Annexure. Expenditure for PM activities approved under other heads (excluding sl 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 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 9% of RE or 9% of the total expenditure, whichever is less, as mandated by Mission Steering Group. If required, State to spend on programme management from State budget. An amount of Rs. 539.09 lakhs is approved for activities not pertaining to PM and M&ME. Expenditure for these activities to be booked under relevant head. Details in PM annexure.
HSS .12	**IT interventions and systems**	**195**	**Health Management Information System (HMIS)**			No proposal submitted by the state
		196	**Implementation of DVDMS**			No proposal submitted by the state
		197	**eSanjeevani (OPD+HWC)**			No proposal submitted by the state
HSS .13	**Innovation**	**198**	**State specific Programme Innovations and Interventions**			No proposal submitted by the state
HSS .14	**Untied Grants**	**199**	**Untied Fund**	**3,233.00**	**3,233.00**	**OOC** **Approved Rs. 3233.00 lakhs as untied fund.** **1. Approved Rs 1057.50 lakhs for SHC @50000 for 2115 AAM-SHCOngoing activity:** **2. Approved Rs 1025.50 lakhs for**

FMR Code	Programme / Theme	S. No	Scheme / Activity	Amount Proposed (In Lakhs)	Amount Approved In Lakhs)	GoI Remarks
						PHC @1.75 Lakhs for 586 AAM-PHC 3. Approved Rs.1010.00 Lakhs as per norms @ Rs.5.00 Lakhs per CHC for 202 CHCs. 4. Approved Rs.140.00 Lakhs as per norms @ Rs.10.00 Lakhs per DH for 14 DHs
HSS .15	Snakebite envenoming	200	Snakebite Prevention and Control (SBPC)	-	-	No proposal submitted by the state
HSS .16	Capacity building incl. training	201	Capacity building incl. training (Incl. RCH, NDCP, NCD, HSS-Urban, HSS-Rural)*	1140.69	1,142.92	State calculation error in proposal.
HSS .17	ASHA Incentives	202	ASHA Incentives (Incl. RCH, NDCP, NCD, HSS-Urban, HSS-Rural)*	3677.17	3,676.03	
HSS .18	IT Interventions and Systems	203	IT interventions (Incl. RCH, NDCP, NCD, HSS-Urban, HSS-Rural - IT software, Laptops etc. for service delivery)*	1336.49	1,314.47	
HSS .19	IEC & Printing	204	IEC & Printing (Incl. RCH, NDCP, NCD, HSS-Urban, HSS-Rural)*	1919.72	1,738.79	
HSS .20	Inventory management	205	PSA Plants (funded under PM-CARES)	97.90	97.90	New Activity: As discussed in NPCC, the amount of INR 97.90 lakhs for maintenance of PSA plant @ 3.29% of

FM R Code	Programme / Theme	S. No	Scheme / Activity	Amount Proposed (In Lakhs)	Amount Approved In Lakhs)	GoI Remarks
						TAV (INR 2969.5 Lakhs) is approved. Approved Rs 97.90 Lakhs for this activity.
HSS .21	**Innovation**	**206**	**State-specific Initiatives and Innovations***	**373.10**	**179.20**	
HSS-Rural Sub Total				**73,579.32**	**64,166.10**	
Sub Total				**82,615.49**	**72,662.78**	
Revalidation				**5774.02**	**5748.62**	
Grand Total				**88,389.51**	**78411.39 89**	

Annexure 7.1: Capacity Building (Details of trainings proposed under Sl. No. 201)					
					Amount in Rs. (Lakhs)
S. No.	**Programme/ Theme**	**Proposed Training/Activity**	**Amount Proposed**	**Amount Approved**	**GoI Remarks**
A. Integrated Training of Core Cadres					
1	Integrated Training of Core Cadres	Regional ToTs for Medical Officer	4.49	4.48	Approved Rs 4.48 lakhs for Regional ToT for medical officers @Rs 448755 per batch for 6 days
2	Integrated Training of Core Cadres	State ToTs for Medical Oficer	8.98	8.97	Approved Rs 8.97 lakhs for State ToT for medical officers @ Rs 448755 per batch for 2 batches for 6 days
3	Integrated Training of Core Cadres	Integrated Training of Medical Officers	98.73	98.72	Approved Rs 98.72 lakhs for integrated training of medical officers @Rs 448755 per batch for 6 days for 22 batches
4	Integrated Training of Core Cadres	Regional ToTs for Staff Nurse	4.53	4.53	Approved Rs 4.53 lakhs for Regional ToT for Staff Nurse @Rs 453203 per batch for 7 days
5	Integrated Training of Core Cadres	State ToTs for Staff Nurse	9.06	9.06	Approved Rs 9.06 lakhs for State ToT for Staff Nurse @Rs 453203 per batch for 2 batches for 7 days
6	Integrated Training of Core Cadres	Integrated Training of Staff Nurses	18.65	18.65	Approved Rs 18.65 lakhs for integrated training for Staff Nurse @Rs 621805 per batch for 3 batches for 10 days
7	Integrated Training of Core Cadres	Regional ToTs for Health Worker	4.59	4.58	Approved Rs 4.58 lakhs for Regional ToT for MPW @ Rs 458954 per batch for 7 days
8	Integrated Training of Core Cadres	State Tots for Health Worker	9.17	9.17	Approved Rs 9.17 lakhs for State ToT for MPW @ Rs 458954 per batch for 7 days for 2 batches
9	Integrated Training of Core Cadres	Integrated Training of Health Workers	12.55	12.55	Approved Rs 12.55 lakhs for integrated training for MPW @ Rs 627555 per batch for 10 days for 2 batches
10	Integrated Training of Core Cadres	Regional ToTs of CHOs	4.56	4.56	Approved Rs 4.56 lakhs for Regional ToT for CHOs @ Rs 456653 per batch for 7 days

11	Integrated Training of Core Cadres	State Tots for CHOs	9.14	9.13	Approved Rs 9.13 lakhs for State ToT for CHOs @ Rs 456653 per batch for 2 batches for 7 days
12	Integrated Training of Core Cadres	Integrated training of CHOs	18.76	18.75	Approved Rs 18.75 lakhs for integrated training for CHOs @ Rs 625255 per batch for 3 batches for 10 days
13	Integrated Training of Core Cadres	Regional ToT for ASHAs	6.98	6.97	Approved Rs 6.97 lakhs for Regional ToT for ASHA @ Rs 697705 per batch for 10 days
14	Integrated Training of Core Cadres	State ToTs for ASHAs	12.58	12.57	Approved Rs 12.57 lakhs for State ToT for ASHA @ Rs 628705 per batch for 2 batches for 10 days
15	Integrated Training of Core Cadres	Integrated Training of ASHA	118.35	118.35	Approved Rs 118.35 lakhs for integrated training for ASHA @ Rs 194005 per batch for 61 batches for 14 days
16	Integrated Training of Core Cadres	Integrated training of leftout ASHAs	1.27	1.26	Approved Rs 1.26 lakhs for integrated training of left out ASHA @ Rs 126730 per batch for 1 batches for 14 days
Integrated Sub Total			342.39	342.30	
Training of Mos. Paramedics & other staff at SIHFW, Parimhal, Shimla					
1		Orientation training of CMOs reg. overall National Health Programme	1.70	1.7	Approved Rs 1.70 Lakhs for Orientation training of CMOs for FY 2026-27.
2		Financial Adminstration and Office Procedures for BMOS	7.50	7.5	Approved Rs 7.5 lakhs for Financial Administration and Office Procedures training for BMOs for FY 2026-27.
3		Programme Activity Coordination,Reporting,Monitoring and Evaluation training Health Supervisors	6.77	6.77	Approved Rs 6.77 lakhs for training on Coordination, Reporting, Monitoring and Evaluation for health programs for Health Supervisors for FY 2026-27.
4		National Programme Implementation,Community Process,IEC Planning,Reporting and Monitoring	3.40	3.4	Approved Rs 3.40 lakhs for training of Health educators on National Programme Implementation including Community Process, IEC, Reporting and Monitoring for FY 2026-27.

5		Prescription Dispensing, Inventory Management & 3R's(Right Drug, Right patient & Right Dose) DVDMS training for Pharmacist	10.16	10.16	Rs.10.16 Lakhs is approved for the training of Pharmacist on Prescription Dispensing, Inventory Management & 3R's(Right Drug, Right patient & Right Dose) DVDMS training for Pharmacist at SIHFW, Parimahal, Shimla.
6		Nursing Leadership Ward Management for Ward Sister and Matron	4.30	4.3	Approved Rs 4.3 lakhs for Leadership and Ward management training for Ward Sisters and Matrons for FY 2026-27.
7		Patient and lab Safety, Equipment calibration & Laboratory exposure training for Lab Technicians	3.12	3.12	Approved Rs 3.12 lakhs for training of Lab Technicians on patient and lab safety, equipment calibration & laboratory related exposure for FY 2026-27.
8		Training of Block Program Manager	3.12	3.12	Approved Rs 3.12 lakhs for training of Block Program Manager for FY 2026-27.
9		Training of Block Accountant &MRO	3.12	3.12	Approved Rs 3.12 lakhs for training of block accountants & MRO for FY 2026-27.
10		Refresher Course for Ministerial Staff	6.50	6.5	Approved Rs 6.5 lakhs for refresher course for ministerial staff for FY 2026-27.
Training of Mos. Paramedics & other staff at RHFWTC, Chebb, Kangra					
		Administration & Financial Management Trg. For MO's	18.68	18.68	Approved Rs 18.68 lakhs for administration & financial management training for MOs for FY 2026-27.
		National Health Programmes implementation community Process for & IEC Planning for Health Educators/MEIOs/BCC/Health Lecturer	10.17	10.17	Approved Rs 10.17 lakhs for training of Health educators on National Programme Implementation, including Community Process, IEC, Reporting and Monitoring for FY 2026-27.
		Capacity building, Health Programmes orientation and record maintenance trg for Health Supervisors	10.17	10.17	Approved Rs 10.17 lakhs for training of Health Supervisors on capacity building, health programmes orientation and record maintenance for FY 2026-27.
		Nursing Leadership and Ward management	6.40	6.4	Approved Rs 6.4 lakhs for Leadership and Ward management training for Ward

		trg for WSs and Matrons			Sisters and Matrons for FY 2026-27.
		Refresher Course for ministerial Staff	6.40	6.4	Approved Rs 6.4 lakhs for refresher course for ministerial Staff for FY 2026-27.
		Patients and Lab safety, equipment's Calibration &Laboratory exposure trg for Lab Technician	2.99	2.99	Approved Rs 2.99 lakhs for training of Lab Technicians on patient and lab safety, equipment calibration & laboratory related exposure for FY 2026-27.
		Prescription dispensing Inventory Management and 3 Rs (Right drug Right Pt. & Right dose trg for Pharmacists	16.96	16.96	Rs. 16.96 Lakh is approved for the training of Pharmacist on Prescription dispensing, Inventory Management and 3 Rs (Right drug Right Pt. & Right dose trg for Pharmacists) at RHFWTC, Chebb, Kangra.
RCH					
	Maternal Health	Re-orientation workshop on MPCDSR	13.68	13.68	Rs. 13.68 lakhs approved for conducting 6 batches of MDSR and MPCDSR Portal training @ Rs. 2.28 lakh/batch. 2.28*6 = Rs. 13.68 lakhs
		MTP training	8.50	8.50	For FY 2026-27, Rs. 8.50 Lakhs approved for MMA Training for 100 MBBS Doctors in 10 batchs (Duration : 3 days & batch size: 10 MBBS doctors per batch) 1. All training 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

		Training under LaQshya	1.57	1.57	Rs. 1.57 lakhs approved for conducting 2 batches of State level review meeting/training under LaQshya @ Rs. 0.785 lakh/batch of the Dakshta mentors, Quality Assurance Consultant, MOs, Staff Nurse 0.785*2 = Rs. 1.57 lakhs.
1	FBNC	FBNC revised guidelines training	35.20	35.20	Skill based specialized training of SNCU Staff Approved Rs. 35.20 lakhs for 16 batches of FBNC training for MOs and SNs @ Rs. 2.2 lakhs per batch.
2	Immunization including Mission Indradhanush	Capacity building training for Cold Chain Handler/CCT/VCCM on Handbook for VCCH	16.89	16.89	Total budget of Rs. 16.89 lakh for Capacity building training of Cold Chain Handler/CCT/VCCM on Handbook for VCCH is approved as per RCH norms
3	Immunization including Mission Indradhanush	Capacity building training for Cold Chain Handler/CCT/VCCM on NCCMIS application including any new application to be introduced by GOI during the calendar year	1.25	1.25	Total budget of Rs.1.25 lakh for Capacity building training of Cold Chain Handler/CCT/VCCM on NCCMIS application including any new application to be introduced by GOI during the calendar year is recommended for approval as per RCH norms
4	Immunization including Mission Indradhanush	Capacity building training for Medical Officer on Handbook for AEFI: Surveillance & Response	14.13	14.13	Total budget of Rs.14.13 lakh Capacity building training for Medical Officer on Handbook for AEFI: Surveillance & Response is recommended for approval as per RCH norms
1	Adolescent Health	RKSK training	10.50	10.5	Approved Rs 10.50 Lakhs for conducting 3 batches of Medical Officers skill based training for (AFHS) Nayi Disha Kendra @ Rs 3.5 Lakh per batch
2	Adolescent Health	RKSK training	7.50	7.50	Approved Rs 7.50 Lakhs for conducting 3 batches of ANM/LHVs/ Paramedics skill based training for (AFHS) Nayi Disha Kendra @ Rs 2.5 Lakh per batch

3	Adolescent Health	RKSK training	5.00	5.00	Approved Rs 5.00 Lakhs for conducting 2 batches of Adolescent Health Counsellors skill based training for (AFHS) Nayi Disha Kendra @ 2.5 Lakh per batch
4	Adolescent Health	WIFS Training	7.80	7.7	Approved Rs 7.7 Lakhs for one-day WIFS training of school nodal teachers at block level for 154 batches in 77 blocks @ 5000 per batch
5	Adolescent Health	Peer Education Programme	4.00	4.0	Approved Rs.4.00 lakh for 2 batches of block level PE master trainers trainings in Sunni and Rampur blocks of district Shimla @2lakh/batch
6	Adolescent Health	Peer Education Programme	18.90	18.9	Approved Rs.18.9 lakh for 27 batches of newly selected 890 PE s for training in Sunni and Rampur blocks of district Shimla @70000/batch
7	Adolescent Health	School Health and Wellness Programme under Ayushman Bharat	49.5	49.5	Approved Rs 49.5 lakhs for below mentioned trainings:- 1. Rs 29.70lakh for training of 15 batches of teachers as HWAs @Rs 1.98 lakh/ batch in 6 districts for Govt and Govt aided schools 2. Rs 19.80 lakh for training of 10 batches of teachers @Rs 1.98 lakh/ batch in one district (Kullu) as a pilot to cover pvt schools under SHWP.
42	Sterilization-Female	Laparoscopic sterilization training for Doctors/Surgeons/Gynecologist	22.98	22.90	**Approved Rs. 22.90 lakh for Laparoscopic training of MOs for FY 2026-27** Total No. of batches: 10 Duration of Training: 12 days/batch Participants: Maximum 4 participants per batch Unit Cost: Rs 2.29 lakh per batch
43	Sterilization-Male	NSV training for Doctors/Surgeons/Gynecologist	9.57	9.57	Approved Rs 9.57 Lakh for NSV training for FY 2026-27 Total No. of Batches: 8 Participants: Maximum 4 participants per batch Duration of Training: 5

					days/batch Unit Cost: Rs 1.19 lakh per batch
4 4	IUCD insertion (PPIUCD AND PAIUCD)	Integrated IUCD/PPIUCD/PAIUCD training of staff nurse and ANM	7.72	7.72	Approved Rs 7.72 lakh for integrated IUCD/ PPIUCD/ PAIUCD training of staff nurse & ANM for FY 2026-27 Total No. of Batches: 15 Participants per batch: Maximum 10 participants per batch Duration of Training: 5 days/batch Unit Cost: Rs 51462/- per batch
6	Anemia Mukt Baharat	FCM/AMB	35.35	**35.35**	Approved Rs 35.35 lakh for training of medical officers and staff nurses on Anaemia Mukt Bharat, including IV Iron implementation for 29 batches @ Rs 121900/batch
1	HMIS & RCH Portal	Training cum Review Meetings of District level participants regarding HMIS , RCH Portal , ANMOL& RCH Register etc. to be conducted at State Level	2.80	2.80	Approved Rs. 1,72,800 for 2 State level training for FY 2026-27 Approved Rs. 1,06,600 for 2 State level review meetings for FY 2026-27 **(This is PM Activity. Expenditure for PM activities to be booked under sl no 194)** Approved Rs 2,78,400/- for FY 2026-27 for Training and Review Meetings at State Level
2	HMIS & RCH Portal	Training cum Review Meetings of Block level participants regarding HMIS, RCH Portal , ANMOL& RCH Register to be conducted at District Level	20.48	20.48	Approved Rs 20,48,000/- for FY 2026-27 for 2 Training and 2 Review Meetings at District Level
3	HMIS & RCH Portal	Training cum Review Meeting of Block level participants regarding HMIS RCH Portal , ANMOL& RCH Register to be conducted at Health Block level Level	25.44	25.44	Approved Rs 25,44,000/- for FY 2026-27 for 2 Training cum Review Meetings at Block Level
RCH sub total			91.22	91.22	

NDCP					
	Integrated Disease Surveillance Programme	Training of health workers on entries of P-Form ,L-form , S form on IHIP-IDSP Portal	1 .00	1 .00	Approved Rs 1 lakh for State level one day trainings of Epidemiologists, DEOs on entries of P-Form, L-form, S-form on IHIP-Portal (Total 15 participants).
	Integrated Disease Surveillance Programme	Training of health workers on entries of P-Form ,L-form , S form on IHIP-IDSP Portal	10.51	10.51	Approved Rs 10.51 lakh for District level one day trainings of MOs/Epidemiologists, Pharmacists, CHOs, ANMs, DEOs on entries of P-Form, L-form, S-form on IHIP-Portal (Total 40-45 participants).
	Vaccination Preventable Diseases Surveillance	Training on VPD reporting formats, SOPs for DIO and DSO	14.51	14.51	ApprovedRs 14.51 lakh for District level & State level one day trainings of VPD Surveillance of DIO, DSO & Data supervisor/DEOs (40-45 participants)
1	Malaria	Malaria Microscopy training under NVBDCP	1.56	1.56	Approved for approval under specialized training-Rs. 1.56 Lakhs
2	Dengue & Chikungunya	Training for integrated vector mangement	6.20	6.20	Approved for integrated trainings as proposed by State. **Total Rs.6.20 lakhs.**
	NLEP	Slit Skin Smear (SSS)	0.50	0.50	Approved Rs 0.50 lakh for Slit Skin Smear (SSS) training of LTs
		Re-orientation of Nikusth 2.0	1.00	1.00	Approved Rs 1.00 lakh for Re-orientation training of DEOs of block on Nikusth portal 2.0
		NLEP -DPMR training	2.50	2.50	Approved Rs 2.50 lakhs for District Leprosy Officers (DLOs) is essential for the effective management and implementation of the National Leprosy Eradication Programme (NLEP) at the district level.
		NLEP -DPMR training	2.00	2.00	Approved Rs 2.00 lakhs for Physiotherapists is important for strengthening deformity management under NLEP as it includes case demonstration, hands-on assessment, and case presentation
	NTEP	Re Orienation STS & STLS on TOG &	5.00	5.00	Approved Rs 5.00 lakhs for reorientation training of

		PMDT/ TPT/DTBC/ACSM			STS/STLS/DPCs/TBHVs at STDC level
	NTEP	Sensitization training for TB Survivors as TB champions	10.00	10.00	Rs 10 lakh approved for Sensitization training of TB champions
	NTEP	Sensitization/ training for LTs	5.50	5.50	Rs 5.5 lakh approved for Sensitization training of LTs
	NTEP	/ ACSM/Social Media	1.50	1.50	Rs 1.5 lakh approved for Sensitization training of DTO/DPC on ACSM and AIC as per guideline
	NTEP	Sensitization training on AIC/NAAT	3.40	3.40	Rs 3.4 lakh approved for Sensitization of DMC LTs for sputum collection & transport mechanism for culture & DST/NAAT
	NVHCP	Prevention	2.10	2.10	Approved Rs 2.1 lakhs towards capacity building of Medical officers and other health staff under NVHCP in state level
			6.00	6.00	Approved Rs 6 lakhs towards capacity building of Medical officers and other health staff under NVHCP in district level.
1	NRCP	NRCP HAND'S ON TRAINING	4.25	4.25	Approved Rs 4.25 Lakh for Training and Capacity Building to Medical officers, Nurses, Paramedics, CHOs, at District Level under NRCP
2	NRCP	NRCP HAND'S ON TRAINING	1.01	1.01	Approved Rs 1.01 Lakh for Training and Capacity Building to Medical officers, Nurses, Paramedics, CHOs, at State Level under NRCP
NCDP sub total			77.54	77.54	
NCD					
2 0 1	National Program for Control of Blindness and Vision Impairment (NPCB+VI	Capacity building of ophthalmic officers as per NPCBVI guidelines.	1.25	1.25	Approved Rs 1.25 lakhs for Capacity building of ophthalmic officers as per NPCBVI guidelines. (2 batches- Offline)

114	National programme on Climate Change and Human Health	State level training of MOs and DNOs sensitize participants on climate-sensitive diseases such as heat-related illness, vector-borne diseases, water-borne diseases, allergic disorders, air pollution–related health issues, disaster-related health impacts,	2.00	2.00	Approved Rs 2 lakhs for the training of 2 batches of 40 participants each (MO)
114	National programme on Climate Change and Human Health	District-level training on climate-sensitive diseases and climate-resilient healthcare practices.	8.40	8.40	Approved Rs 8.40 lakhs for 12 batches for 30 participants each (MO)
97	National Mental Health Programme (NMHP)	Online training program for Medical Officers on de-addiction care	0.32	0.32	Approved Rs. 0.32 Lakhs for Online training of Medical Officers on de-addiction care.
97	National Mental Health Programme (NMHP)	Hands-on training for Medical Officers on de-addiction care	15.46	15.46	Approved Rs.15.46 Lakhs for Hands-on training for Medical Officers.
1	National Tobacco Control Program (NTCP)	Community based councelling on tobacco cessation	20.00	20.00	Approved Rs. 20.00 lakhs for the training of 25 batches of health workers @80,000 per batch
2	National Tobacco Control Program (NTCP)	a) ToT for flying squad at state level at Parimehal, Shimla b) Training of flying squad for one day at district level	13.00	13.00	Approved Rs. 13 lakhs for the training of the enforcement squad at state & district level

3	National Tobacco Control Program (NTCP)	a) Training of tobacco cessation Centre & NDK at medical colleges, dental colleges & district hospitals for one day at Parimehal, Shimla b) Training of NDK Medical Officers & Counsellors for one day in two batches one at RHPW, Chheb, Kangra and one at Parimehal, Shimla c) Training of Medical Officers(Dental) on Tobacco Cessation for one day divided into total ten batches, five batches at RHPW, Chheb and five batches at Parimehal, Shimla	19.50	19.50	Approved Rs. 19.50 lakhs for Training of tobacco cessation Centre & NDK at medical colleges, dental colleges & district hospitals for one day at Parimehal for nodal officers, medical officers, CHO and councellors
1	NP-NCD	Training of District-level Trainers of Trainers (ToTs) on STEMI, Stroke, NAFLD and COPD	3.66	3.66	Approved Rs. 3.66 Lakhs for (ToTs) on STEMI, Stroke, NAFLD, and COPD across all 12 districts, with an estimated financial implication of ₹3.66 lakh.
2	NP-NCD	Training of Medical Officer at CH and CHC on STEMI, Stroke, NAFLD and COPD	47.76	47.76	Approved Rs.47.76 Lakhs for Training of two (2) Medical Officers of each Civil Hospital (CH) and Community Health Centre (CHC) on STEMI, Stroke, NAFLD and COPD in all the 12 districts.
3	NP-NCD	Training of 2 MO and 2 SN in each of the 18 DCCCs	31.09	31.09	Rs. 31.09 Lakhs is approved for - 18 Medical Officers and 18 Staff Nurses of 18 DCCCs @ Rs 24.05 lakh and refresher training of existing trained 18 MOs and 18 SNs of the respective DCCCs @ Rs 7.04 lakh.
NCD sub total:			162.44	162.44	

	HSS.2 Community Engagement	MAS	3.03	3.03	Approved Rs 3.03 lakhs for the training of MAS members for 12 batches at the rate of Rs 25300 for FY 2026-27.
	QA	Quality Assurance Training (including training for internal assessors, service providers at State and District levels) Rs. 22.21 Lakh. SP Training: Physical Mode: • 1 Batch of Service provider trainings @ Rs. 335000 each (60-70 participants in each batch) • 1 Batch of Internal Assessor training (LaQshya, NQAS & Kayakalp) @ Rs 2,66,000/- (60-70 Participants) • Orientation Training: Physical Mode NQAP: 13 Batchs of trainings at District level (2 in Kangra) @ Rs. 120000 each (35-40 participants) TISS Quality Course for one nominee from State @ 2.75 Lakh	24.96	24.96	A total amount of Rs. 24.96 lakh is approved as follows: 1) Rs. 2.75 lakh for TISS training of one state nominated candidate. (2) Rs. 22.21 lakh for Quality Assurance Training • 1 Batch of Service provider trainings @ Rs. 335000 each (60-70 participants in each batch) • 1 Batch of Internal Assessor training @ Rs 2,66,000/- (60-70 Participants) • Orientation Training: Physical Mode NQAP: 13 Batchs of trainings (two at Kangra) at District level @ Rs. 120000 each (35-40 participants).
HSS					

	Kayakalp	Kayakalp Trainings – Rs. 24.45 Lakh. • 3 Batch of Infection Control & Biomedical waste Training at the state Level for preparing Distt TOTs @ Rs 40,000/- (45-50 Participants) • 32 Batches Infection Control & Biomedical waste Training at facility Level (DH, Upgraded Med Colleges, Medical Colleges, Mental Hospital & Sanatorium Hospital) @ Rs. 20,000/- per batch (35-40 participants each batch) • 12 Batches Infection Control & Biomedical waste Training at Distt. Level (Preparing Block TOTs) @ Rs. 40,000/- per batch (35-40 participants each batch) • 80 Batches Infection Control & Biomedical waste Training at Block Level (Preparing of CHC & PHC staff) @ Rs. 15,000/- per batch (35-40 participants each batch)	24.45	24.4	**Rs. 24.40 Lakh is approved as follows**: • 3 Batch of Infection Control & Biomedical waste Training at the state Level @ Rs 40,000/- (45-50 Participants) • 32 Batches Infection Control & Biomedical waste Training at facility Level @ Rs. 20,000/- per batch (35-40 participants each batch) • 12 Batches Infection Control & Biomedical waste Training at Distt. Level @ Rs. 40,000/- per batch (35-40 participants each batch) • 80 Batches Infection Control & Biomedical waste Training at Block Level @ Rs. 15,000/- per batch (35-40 participants each batch)
158	Blood Storage Units	Other Blood Services & Disorders Components	2..54	2.54	Ongoing activity:- Approved Rs. 2.54 Lakh for training of medical officers and lab technicians.
3	HSS.3 Community Engagement	Training of ASHA facilitators	5.20	5.2	Approved Rs 5.20 lakhs @Rs 74382 for Training of ASHA facilitator in 7 batches

4	HSS.3 Community Engagement	Refresher Training of VHSNC	49.40	49.4	Approved Rs 49.4 lakhs for 298 batches @Rs 16,606 for VHSNC training of left out ASHAs
1	SNAKEBITE PREVENTION AND MANAGEMENT	SNAKEBITE PREVENTION AND MANAGEMENT TRAINING HAND'S ON TRAINING	4.25	4.25	Rs 4.35 Lakh approved for the training and Capacity Building at District Level to under NPSE
2	SNAKEBITE PREVENTION AND MANAGEMENT	SNAKEBITE PREVENTION AND MANAGEMENT TRAINING HAND'S ON TRAINING	1.01	1.01	Rs1.01 Lakh approved for Training and Capacity Building at State Level to under NPSE
	NELS Skill Centre	NELS Training of Mos	5.80	5.80	Approved Rs 5.6 lakhs for NELS Skill training of MOs. Further, the budget for the proposed training should be in line with the approved NHM budget norms for trainings. NELS Skill Centre at Dr. Rajendra Prasad Govt. Medical College, Tanda is operationalized and trainings of clinical faculty from Dr. RPGMC Tanda as well as other State Medical Colleges of Himachal Pradesh as Master Trainers in NELS course for doctors have been undertaken under the scheme.The expectation being that the State will be utilizing the capacities of these Master Trainers to carry out NELS trainings at different levels of healthcare facilities.
HSS- total			120.59	120.59	
Total Budget Proposed			**1,140.69**	**1,142.92**	

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

Annexure 7.2: ASHA Incentives (Details of proposal under Sl. No. 202)						
						Amount in Rs. (Lakhs)
S. No	**Programme/ Theme**	**Old Sl. No.**	**Activity Proposed**	**Amount Proposed**	**Amount Approved**	**GoI Remarks**
1	Maternal Health	3	ASHA incentive under JSY	51.40	**51.40**	(2) ASHA Incentive: Rs. 51.40 Lakh is approved for ASHA incentive as requested by the state. State to ensure that ASHAs are paid performance based incentives as per extant JSY guidelines - at the rate of Rs. 600/- in Rural areas for 8,200 institutional deliveries and Rs. 400/- in Urban areas for 550 institutional deliveries. 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.
2	Maternal Health	6	PMSMA	134.00	134.00	Rs. 134 lakhs approved as ASHA incentives for PMSMA/EPMSMA and Optimization Post-Natal care Activities as under: 1. Rs. 100/PW to ASHA for accompanying approx. 50,000 PW to PMSMA site in 2nd and 3rd trimester = 50,000*100 = Rs. 50 lakhs 2. Rs. 100/HRPW to ASHA for accompanying approx. 8,000 HRPW for maximum 3 follow-up visits = 8000*100*3 = Rs. 24 lakhs 3. Rs. 500/HRPW to ASHA for ensuring Healthy Outcome on 45th day after delivery for approx. 8000 HRPW = 8000*500 = Rs. 40 lakhs 4. Rs. 250/HRPM to ASHA under Optimization of Post Natal Care (PNC) for approx. 8000 High Risk Post Natal Mothers = 8000*250 =Rs.

						20 lakhs = 50+24+40+20 = Rs. 134 lakhs
3	Maternal Health	9	Maternal death Review	0.14	0.14	Rs. 0.14 lakhs approved for ASHAs for reporting of MDs @ Rs. 200 for approx. 70 MDs.
4	HBNC /HBYC visits	23	a. HBNC visits (6 to 7 visits) 55000 children @ Rs. 250/- b. HBYC quarterly visits 42000 children @ Rs.250/-	242.50	242.5	**Ongoing Activity: Approved** of Rs.242.5 Lakh as ASHA incentive under HBNC and HBYC Program as per following details: (1) Rs. 137.50 lakhs for ASHA incentives under HBNC after completion of 6/7 home visits for 55000 newborns @Rs. 250/- per newborn. (2) Rs. 105.00 lakhs for ASHA incentives under HBYC for completion of 5 quarterly home visits for 42000 children @Rs. 250/- per child (3-15 months).
5	Child Death Review	25	ASHA Incentive on reporting of death @ Rs 50/- per death for estimated 700 deaths	0.35	0.35	**Ongoing Activity: Approved** Rs. 0.35 lakh as ASHA incentive for estimated 700 nder 5 Deaths at community level/ Non-FRU level/ Private Facilities @ Rs. 50 per Under 5 Deaths following CDR guideline
6	Immunization including Mission Indradhanush	32	ASHA Incentives:	159.58	159.58	Total funds of Rs 159.58 Lakh is approved. The funds @ Rs 100/- for FIC before 12 months of age and @ Rs 75/- at MR 2 completion before age of 2 years per beneficiary. The target population has been taken against achievement in last FY approx @ 0.91 Lakh beneficiaries (91189 beneficiary) each for FIC and CIC.
7	IUCD Insertion (PPIUCD AND	44	Motivation incentive	3.16	3.16	Approved Rs 3.16 Lakh under ASHA incentive IUCD insertion for FY2026-27 DBT: (i) Rs 2.93 lakh for 1959 PPIUCD insertions cases @ Rs150/ insertion/ASHA

	PAIUCD)					(ii) Rs 0.22 Lakh for 150 PAIUCD insertions cases @ Rs 150/insertion/ASHA
8	ANTRA	45	Motivation incentive	18.00	18.00	Approved Rs 18.00 Lakh under ASHA incentive-Antara for 18000 doses @ Rs 100/dose/ASHA for FY 2026-27
9	Anemia Mukt Bharat	52	National Iron Plus ASHA Incentive for mobilizing children (6-59 months) @ Rs. 100 for ASHAs	48.37	48.37	Approved Rs 48.37 lakh as Monthly incentive to ASHAs for mobilizing children (6-59 months) for IFA supplementation @Rs 100/month /ASHA
10	National Deworming Day	53	ASHA Incentive for National Deworming Day for mobilizing out of school children @ 100 per round for 7924 ASHAs. Funds proposed for two rounds of NDD	15.84	15.85	Approved Rs 15.84 lakh as ASHA incentive for 7924 ASHAs for mobilizing out of school children in biannual rounds of NDD @ Rs 100/ASHA/round
11	Nutritional Rehabilitation Centre	54	ASHA incentive for referral of SAM cases to NRC and for follow up of discharge SAM children from NRCs @ Rs. 300 for 500 SAM children	1.50	1.50	Approved Rs 1.5 lakh as ASHA incentive for referral of MAM/SAM Children to NRC and their post discharge follow up @Rs 300 per child for 500 children
12	Mothers absolute affection	56	ASHA Incentive - ASHA incentive under MAA programme @ Rs 100 per ASHA for quarterly mother's meeting	26.13	**26.13**	Approved Rs 26.13 lakh as incentive for 7924 ASHAs to promote breastfeeding through quarterly Mothers Meeting @Rs 100/ASHA/meeting
13	Intensified diarrhoea control fortnight	58	ASHA Incentive for IDCF for prophylactic distribution of ORS to families with under-five children (for 6 lac children) @ Rs. 1	6.00	6	**Ongoing Activity:** Approved Rs. 6 lakh as ASHA Incentive for STOP Diarrhoea 2026 Campaign @ Rs. 1 child for 600000 Under 5 Chidren. State to follow STOP Diarrhoea Campaign Guidelines for implementation.

			per round (1 rounds)			
14	NIDDCP	62	Implementation of NIDDCP	27.10	27.10	As per the programme norms. Rs. 27.10 lakh approved for ASHA incentive
15	Malaria	64	ASHA incentives to 7 districts for Malaria testing. Resource has been allocated to 9 Districts for ASHA incentives for complete malaria treatment	14.46	14.46	Approved Rs 14.46 lakhs for ASHAs incentives for Malaria progarmme.
16	Dengue & Chikungunya	67	ASHA incentive for engaging as Domestic Breeding Checkers	17.59	17.59	Approved Rs. 17.59 lakhs as ASHAs incentives for Dengue & Chikungunya programme.
17	NLEP	69	ACD & RS Activity	1.05	1.05	Approved Rs 1.05 lakhs for ASHA Incentive Cases Detection Grade- 0 and 1 (Rs.250*50= Rs.12,500 and Grade-2 - Rs.200*12 = 2400)
18	NLEP	69	Cases Detection Grade- 0 and 1, 2	0.15	0.15	Approved Rs. 1.05 lakh for ASHA incentives ACD & RS Activity.
19	NLEP	69	Treatment completion of PB cases and MB cases	0.42	0.42	Approved Rs 0.42 lakh for Asha Incentive for treatment completion of PB cases (@Rs.400*30=Rs.12000) and MB cases (@Rs.600*50=Rs.30,000).
20	NTEP	73	ABHA ID Creation/seeding with Ni-kshay portal	1.15	0	Not approved
21	NTEP	73	Seeding Account no. in Nikshay(with in 15 days).	5.00	5.00	Approved Rs 5 lakh for bank account seeding of TB patients @Rs 50/-
22	NTEP	76	TB Preventive Treatment Incentive	20.00	20.00	Approved Rs 20.00 lakh for approval for TPT incentive @ Rs 250/-
23	NTEP	73	Treatment Supporter Honorarium(DSTB):- (Rs.1000):-	60.00	60.00	Approved Rs 60.00 lakh for Treatment Supporter Honorarium (DSTB) @ Rs.1000

24	NTEP	77	Treatment Supporter Honorarium(DRTB):- (Rs.5000):-	7.50	7.50	Approved Rs 7.5 lakh for Treatment Supporter Honorarium (DRTB) @ Rs.5000
25	NTEP	73	Informant incentive 500 for ASHA	10.00	10.00	Approved Rs 10 lakh for informant incentive @ Rs 500
26	NTEP	73	Informant incentive 500 for ASHA	35.00	35.00	Approved Rs 35 lakh Sputum collection & transportation to ASHAs
27	NP-NCD	110	Filling up of CBAC form	450.0	450.0	Approved Rs 450.00 Lakhs for ASHA Incentive for filling up of CBAC form @ Rs 10 per CBAC-ongoing activity.
28	NP-NCD	110	Follow up of Patients	150.0	150.0	Approved Rs. 150.00 Lakhs - For follow up of 1 lakh diagnosed Hypertensives and 0.5 lakh Diabetics @ Rs. 100 per patient. 5 lakh patient* Rs 100= Rs 150 lakh.
29	HSS(U).2 ASHA (including ASHA Certification and ASHA benefit package)	130	ASHA incentives	22.08	**22.08**	Approved Rs 22.08 lakhs as routine and recurring incentive for ASHA @Rs 2000 per month for 12 months for 92 Urban ASHA as per GOI norms
30	HSS.3 Community engagement	159	ASHA incentives	2,146.08	**2146.08**	Approved Rs 2146.08 lakhs as routine and recurring incentives for ASHAs @Rs 2000 per month for 12 months for 8942 ASHAs as per GOI norms
31	NVHCP	83	Asha Incentives(Allowance, Incentives, staff welfare fund	2.62	2.62	Approved Rs 2.62 lakhs for ASHA incentives
				3,677.17	**3676.03**	

Annexure 7.3- IT Interventions (Details of proposal under Sl. No. 203)						
						Amount in Rs. (Lakhs)
	Programme/ Theme	**Old Sl. No.**	**Activity Proposed**	**Amount Proposed**	**Amount Approved**	**GoI Remarks**
RCH						
1	**Maternal Health**	7	Suman	14.00	3.60	Approved for the procurement of 12 LED Screens as under: One LED Screen for the Post Natal Ward of the three new Medical Colleges recently upgraded from district hospital (Hamirpur, Chamba and Nahan), 4 Regional Hospital, 3 Zonal Hospital and 2 district Hospital under SUMAN (Total-12 LED Screens). **As discussed in NPCC meeting, the indicative cost of LED (43") screen is @ INR 30000 per unit as per NHSRC/Gem rate. Activity Rs 3.6 Lakhs approved.**
2	**e-Vin**	34	Laptops for VCCMS	8.40	8.40	Approved Rs 8.40 for 12 laptops for VCCMs @ Rs 70,000 per laptop (This is PM Activity. Expenditure for PM activities to be booked under sl no 194)
NDCP						
1	**NTEP**	**73**	**IT equipment to supervisory staff / Mobile Tablets for high loaded DMCs**	33.35	33.35	Approved Rs 33.35 lakh for procurement of laptop, AC for STDC training hall, desktop, LED screen & replacement of tablets
NCD						
1	**STEMI**	109	Hosting of STEMI application	10.00	**0**	**Not approved as it is a state-specific portal.**
HSS-Urban						
HSS-Rural						

	HMIS	195	AMC of Computers, Internet connectivity, Procurement of new computers, Operational cost of RCH Portal, OPEX for 104 Call Center & Operational cost for e-Sushrut (HMIS implementation in 53 Hospitals	**674.76**	673.14	Approved Rs. 673.14 lakhs, as follows: 1. Rs 1.78 lakhs as AMC of 89 Computers at District/Block/Health Facility level @ Rs 2000 per annum per unit. **(This is PM Activity. Expenditure for PM activities to be booked under sl no 194)** 2.Rs 11.83 Lakhs including: (a) Rs 9.63 lakhs for broadband connectivity charges @ Rs 750 per month per location for 107 sites [Health Block (80), District level (12), District MCH Centres (12) & Medical College Hospitals (03)], and (b) Rs 2.20 lakhs for leased line / FTTH internet connectivity on two locations each @Rs.1.1 lacs per year at CH Dodrakwar in Shimla District and CH Killar (Pangi) in aspirational district -Chamba (**Budget approved for broadband connectivity charges for District and Block is PM Activity. Expenditure for PM activities to be booked under sl no 194)** 3. Rs 3.30 lakhs for 6 new desktop computers (including UPS & MF Laserjet printers) @ Rs 55000 per unit for three new Health Blocks (2 in Kangra and 1 in Solan) as per the approved norms **(This is PM Activity. Expenditure for PM activities to be booked under sl no 194)** 4. Rs 19.26 lakhs in principle for Office Expenditure at 107 office locations within following norms (12 District level @ 2500 pm, 80 Block level@ 1500 p.m, 12 District MCH Centres@ 1000 p.m. and 3 MCH Health Facilities @ Rs 1000 p.m). **(Budget approved for district and block office expenditure is PM Activity. Expenditure for PM activities to be booked under sl no 194)** 5. Ongoing activity: State has proposed Rs 205.84 lacs for operational cost of 42 seater call centre. Approved Rs 205.84 lacs for operational cost of 42 seater call centre. 6. Operational Charges for the operations & management of Hospital Management Information System in 53 hospitals & implementation of S/W in 3 new hospitals:

						• AMC Charges to be paid to CDAC Noida = 37.68 Lacs+ GST = Rs. 44.46 lakh • Hosting Charges to be paid to CDAC Noida / Annum = 54.60 Lacs+GST = Rs. 64.42 Lakh • Manpower Deployment cost (One Project manager + 5 Technical Assistants / Support Engineers) to be paid to CDAC = Rs. 50.4 Lacs+ GST = Rs. 59.47 Lakh • Internet Connectivity (Leased line / FTTH) Charges @ Rs. 1 lakhs per Hospital per annum = Rs. 1 lakh x 53 = Rs.53 Lakh • Operational Cost (Stationary, printer tonners and other misc charges) = Rs. 168 Lakh • SMS Charges = 40,00,000*4 paisa= Rs. 1.6 Lakh • Internet connectivity for 3 new Hospitals for HMIS @Rs. 1 Lakh / hospital = Rs. 3 Lakh • HMIS software implementation & handholding charges for 3 new hospitals (Dental College- Shimla, CHC-Nalagarh & PHC HP Secretariat Shimla) @ Rs.4.97 Lakh x 3 = Rs. 14.91 Lakh Total=Rs.44.46+64.42+59.47+53+168+1.6+3+14.1 = Rs. 408.86 Lakh 7. Approved Rs 22.27 lakhs for internet connectivity for 928 in-position ANMs/HWs @ Rs 200 per month.
	DVDMS	**196**	Implementation of DVDMS Portal	96.28	96.28	Approved Rs. 96.28 Lakhs for FY 2026-27 as per the DVDMS norms for the following activities: (i) Approved Rs. 43.04 lakhs for IT Cell Team at DHS-HP HQ Shimla (**This is PM Activity. Expenditure for PM activities to be booked under sl no 194**) . (ii) Approved Rs. 17.69 lakhs for Application Software Support. (iii) Approved Rs. 35.55 Lakh for Data Center Hosting Charges (per annum) for DVDMS-HP (Hosting Services from CDAC Data Centre Including Infrastructure, Platform Management, EDB as service and Safe to Host Certification)

	e-Sanjeevani	197	1. Funds proposed for procurement of Desktops of left out AAMs 2. Funds proposed for procurement of projectors of left out AAMs	499.70	499.70	Approved Rs 499.70 lakhs for below mentioned activities:- 1. As of now state has notified 2655 AAMs (2072 HSC, 562 PHCs & 21 UPHCs). Desktops for 2206 have been approved in previous PIP and have been procured (out of 2206 desktops, 60 desktops have been given to the Teleconsultation hubs (i.e Medical Colleges) and 2146 have been given to different AAMs. Funds are being approved for the remaining 509 AAMs @ Rs. 70,000 per Desktop amounting to Rs. 356.30 lakh. 2. The state has notified 2655 AAMs and projectors for 1464 AAMS were approved in previous PIPs and against the same the state procured 1698 projectors after following codal formalities. The state proposes to procure projectors for left out 478 AAMs @ Rs. 30,000 each, amounting to Rs 143.4 lakh
				1,336.49	**1314.47**	

Annexure - IEC & Printing (Details of proposal under Sl. No. 204)						
Amount in Rs. (Lakhs)						
S. No	**Programme / Theme**	**Old Sl. No.**	**Activity Proposed**	**Amount Proposed**	**Amount Approved**	**GoI Remarks**
A. Integrated IEC activities						
B. Major pool-specific IEC						
RCH						
1	Maternal Health	7	SUMAN	8.10	8.10	**Approved Rs. 8.1 lakhs for display of IEC** at ANC/PNC/LR/ANC/OPD ward of the SUMAN Notified facilities @ Rs. 10,000/facilities in the digital form for 81 SUMAN Facilities as discussed during the NPCC. The State to focus on the citizen centric IEC/display.
2	Maternal Health	10	Printing of MTP formats and registers under CAC	0.17	0.17	**Approved** Rs 0.17 Lakhs for CAC Printing. (CAC Printing Details as received by the State: 1. Admission Register: Quantity 81 @ Rs. 59.5/- per register; 2. MMA Card: Quantity 4050 @ Rs. 0.81/- per register; 3. Form C & RMP Opinion Form: Quantity 4050 @ Rs. 2.2/- per booklet)
3	Maternal Health	17	Printing of registers	30.00	30.00	**Approved Rs. 30 lakhs as under:** Maternity Case Sheet (L-3) having 48 pages =85755*27.85 = 23.88 lakhs Maternity Case Sheet (L-2) having 30 pages = 28650*19.75 = 5.65 lakhs Maternity Case Sheet (L-1) having 22 pages = 2930*16.15 = 0.47 lakhs
4	Maternal Health	17	Printing of OPNC modules	0.14	0.00	**Not approved.**
5	Other MH Components	17	Broadcast of Radio Jingles	152.80	152.80	**Ongoing Activity – Approved Rs. 152.8 lakhs** for airing radio jingles/spots through AIR, FM Channels, A/V spots through Doordarshan Kendra, Private TV Channels and Other outdoor activities. As discussed during the NPCC, the

						State to carry out the activity in a targeted approach (such as focusing on high home delivery pockets) in a comprehensive manner. The State to follow the competitive bidding process. (**State proposal**: Broadcast of Radio Jingles through Prime Channel, FM Dharamshala, FM Hamirpur, FM Shimla of All India Radio, 5 private FM Channels and one Community Radio. Broadcast of A/v spots through Doordarshan Kendra Shimla, Private TV Channel, Web TV/Youtube Channels, In House sponsored programme Hello Doctor and Swasth Jeevan through DDK Shimla, Publication of Display advertisements through Print Media. Outdoor publicity through bus panels, display of hoardings, CPIS, printing and installation of sunboards/posters, post office passbooks) etc.
6	RBSK	21	Printing of RBSK Stationeries	24.90	24.90	**Approved** Rs 24.90 lakh for printing of RBSK registers (AWC, School and Delivery point registers, Total 3898 Registers @ Rs 95 each = Rs. 370310) and screening cards (**For 0-6 years:** Total 400000 cards @ Rs 2= Rs. 800000 and **for 7-18 years**: Total 660000 cards @ Rs 2 = Rs. 1320000)
7	Community Based Care-HBNC& HBYC	23	HBNC andHBYC referral card booklet for ASHA	22.69	22.69	**Approved** Rs. 22.69 lakhs for printing of HBNC and HBYC reporting format booklets @ Rs. 250.64/- per booklet for 9054 ASHAs.
8	Child Death Review	25	CDR formats printing	0.813	0.81	**Approved** Rs. 0.813 lakh for printing of CDR formats (15 pages per deceased @ Rs. 4 per page) for 1355 Deceased Under 5 Children
9	SAANS	26	IEC of SAANS	6.00	6.00	**Approved** Rs. 6 Lakh for IEC/ Printing for SAANS 2026-27 Campaign @ Rs. 50,000 per district for 12 districts following SAANS Guidelines.

						Note: State to avoid printing of Posters and Pamphlets under this activity
10	Other CH Components	30		152.80	152.80	**Approved Rs. 152.8 Lakhs** for airing radio jingles/spots through AIR, FM Channels, A/V spots through Doordarshan Kendra, Private TV Channels and Other outdoor activities under Child Health and Nutrition Programme **Note:** State to book expenditure as per actuals and for Child Health and Nutrition Program only
11	Immunisation, including Mission Indradhanush	32	IEC & Printing	45.00	45.00	**Approved Rs. 45.00 Lakhs** for IEC activities for Immunization printing purpose (Such as MCP Cards, Immunization Job aids, Indent and supply Voucher, Temp log books, Banners/ hoardings/ hand bills and AEFI registers) and SIA activity is recommended for approval.
12	Adolescent Health	35	Printing of Registers, Reporting formats, Training material and IEC	2.94	2.94	**Approved** Rs 2.94 lakh for printing of training and IEC materials for display at NDKs.
13	Adolescent Health	38	Printing of Training material	2.00	2.00	**Approved** Rs 2.00 lakh for training and dissemination of updated IEC materials for Peer Education programme
14	Adolescent Health	39	Printing of Training material	5.64	5.64	**Approved** Rs 5.64 lakh for training and IEC material for School Health and Wellness Programme for use by teachers/principals
15	Other AH Components	40		152.80	0.00	As per NPCC discussion, this proposal was dropped. State was directed to celebrate Health Days as per calendar and not programme-wise

16	Sterilization -Female	42	To print Consent form register, medical record and checklist register, Post operative instruction card perforated booklet & Sterilization certificate	0.52	0.52	**Approved Rs 0.52 lakh under IEC -Sterilization Female for FY 2026-27** (i) Rs 0.48 lakh for 4795 Sterilization forms including Consent form @ Rs 10/ per form. (ii)Rs 0.04 lakh for 5000 Sterilization Certificate @ Rs 0.81/ per Certificate.
17	Sterilization -Male	43	To print Consent form register, medical record and checklist register, post-operative instruction card perforated booklet, & Sterilization certificate	0.04	0.04	**Approved Rs 0.04 lakh under IEC -Sterilization-male for FY 2026-27** (i)Rs 0.036 lakh for 363 Sterilization forms including Consent form @ Rs 10/ per form. (ii) Total Rs 0.003 lakh for 350 Sterilization Certificate @ Rs 0.81/ per Certificate.
18	IUCD Insertion (PPIUCD AND PAIUCD)	44	To print IUCD cards and PPIUCD registers	0.09	0.09	**Approved Rs 0.09 lakh under IEC - IUCD/PPIUCD for FY 2026-27** (i) Rs 0.04 lakh for 5000 PPIUCD cards @ Rs.0.81/- per card (ii) Rs 0.05 lakh for 84 PPIUCD/PAIUCD register @ Rs 59.5/per register
19	ANTRA	45	To print Antra register and Antra cards	2.26	2.26	**Approved Rs 2.26 Lakh under Antara IEC for FY 2026-27** (i) Rs 1.73 lakh for 2913 Facilities (SC & above) @ Rs 59.5/-per register (ii) Rs 0.53 lakh for 18000 Antara Cards @ Rs 2.95/-per card.

20	WPD campaign and Vasectomy fortnight	49	IEC and promotional activities for World Population Day and Vasectomy Fortnight	4.69	4.69	**Approved Rs 4.69 lakh for WPD campaign and Vasectomy fortnight for FY 2026-27** (i) Rs. 2.345 lakh to celebrate World Population Day @3500 per district for 12 districts and @Rs. 2500 per block for 77 blocks. (ii) Rs. 2.345 lakh has for vasectomy fortnight @3500 per district for 12 districts and @Rs. 2500 per block for 77 blocks.
21	Other Family Planning Components	50	To print the Sugam model and MEC wheel card	3.15	3.15	**Approved Rs 3.15 lakh under IEC** for small Sugam Models for high-fertility pockets.
22	Other FP Components	50	Other outdoor activities under Family Planning Programme.	152.80	152.80	**Approved Rs 152.8 lakh** for airing radio jingles/spots through AIR, FM Channels, A/V spots through Doordarshan Kendra, Private TV Channels and Other outdoor activities under Family Planning Programme.
23	Anemia Mukt Bharat	52	Printing of FCM Register, information pad, vital monitoring pad	1.27	1.27	**Approved** Rs 1.27 lakhs for printing of formats for patient information and vital monitoring until the AMB dashboard is fully functionalized
24	National Deworming Days	53	Printing of formats and IEC for two rounds	12.00	12.00	**Approved** Rs.12.0 lakhs for IEC and printing formats for biannual rounds of NDD in 12 districts @ Rs 1.0 lakh/distt
25	Intensified Diarrhoea Control Fortnight	58	Printing of IEC/formats	4.00	4.00	**Approved** Rs. 4 Lakh for IEC/ Printing for STOP Diarrhea 2026 Campaign @ Rs. 33,333 per district for 12 districts following STOP Diarrhea Guidelines. **Note:** State to avoid printing of Posters and Pamphlets under this activity
26	Implementation of NIDDCP	62	IEC activities	3.60	3.60	**Approved Rs 3.60 lakhs** for 12 districts (for @ Rs 30,000 per district) for NIDDCP
RCH Sub-Total				**791.21**	**638.28**	

27	Integrated Disease Surveillance Programme	63	Printing of IEC related to IDSP	5.80	5.80	**Approved Rs 5.80 lakhs for Printing of IEC related to IDSP:** Pamphlets/ Posters/Print Media at State & District level related to Water Borne & Epidemic Prone diseases
28	VPD Surveillance	63	Printing of IEC and consumables related to VPD Survillance	0.36	0.36	**Approved Rs 0.36 lakhs for Printing of IEC and consumables related to VPD Surveillance:** IEC and printing of forms 001, H002, AFP CIF booklet, MR CIF booklet, VPD CIF booklet and calendar size posters for reporting facilities
29	Malaria	64	Districts for conducting IEC-related activities under the National Vector Borne Disease Control Programme	2.8	2.80	**Approved Rs. 2.8 lakhs for approval of IEC/BCC activities.**
30	Dengue & Chikunguny a	67	Districts for conducting IEC-related activities under the National Vector Borne Disease Control Programme	2.8	2.80	**Approved Rs. 2.8 lakhs for IEC/BCC activities.** (Anti Malaria Month, World Mosquito Day, Posters, Newspaper Ads, Radio jingles etc).
31	NLEP	69	ACD &RS IEC activities	3.00	3.00	**Approved Rs 3.00 lakhs** for IEC for ACD &RS activities on Anti leprosy Day (Sparsh).
32	NLEP	69	ACD &RS Printing activities	9.00	9.00	**Approved Rs.9.00 lakh** for print training Module and Sun boards, banners, pamphlets, ASHA flipbook, and other required lab and treatment registers
33	NLEP	70	DPMR IEC activities	0.20	0.20	**Approved Rs 0.20 lakh** for RCS camp printing of flex, Social, Digital, paper media, etc.

34	NTEP	73	Printing of various format,Register, Sun Boards /Phamplets, leaflets, brochers	55.00	55.00	**Approved Rs 55 lakh** for printing of various reporting formats, registers, treatment cards and patients' identity cards, Sun Boards / Pamphlets, leaflets, brochures, etc.
35	NTEP	78	ACSM/IEC/ BCC/SBCC	58.00	58.00	**Approved** Rs 58 lakh for hoarding, nukkad natak, message on souvenirs, message on print media/newspaper advertisement, AIR/Audio etc.
36	NVHCP	80	Prevention	2.50	2.50	**Approved Rs 2.50 Lakhs** for IEC activities under National Viral Hepatitis Control Programme including World Hepatitis Day celebration. (July, Posters or sun boards to be displayed in Healthcare facilities , News Paper Adds , Radio jingles related with Viral Hepatitis awareness etc) . Funds of Rs 0.1 Lakhs to be retained at SHQ for IEC Activities and the remaining 2.4 has been allocated to all the Districts
37	NRCP	84	Printing of colour sun board depicting treatment of prophylaxis of Rabies	2.56	**2.56**	**Approved** Rs 2.56 Lakh for Printing activities at the State & District level
NDCP Sub-Total				**142.02**	**142.02**	
NCD						
38	National Program for Control of Blindness and Vision Impairment (NPCB+VI)	96	Development and printing of IEC/BCC materials, awareness campaigns, outreach activities in schools and communities for prevention and control of blindness	36.00	20.00	**Approved Rs 20 lakhs** for development & printing of IEC material and for conducting IEC and outreach activities in schools and communities to strengthen implementation of NPCB&VI at State and District level.

39	National Mental Health programme	97	National Mental Health programme	12.00	0	**Not approved for IEC and contingencies for the workshop with Judiciaries and police persons as per Mental Health Care Act 2017- The budget may be proposed under State Mental Health Authority (SMHA)**
40	National Mental Health programme	97	IEC activities on de-addiction to districts	18.00	18.00	**Approved Rs. 18 Lakhs for 12 Districts for IEC activities** @Rs. 2 lakh per district for the six districts having Medical Colleges to support IEC activities related to deaddiction care, and 1 lakh per district for the remaining six districts
41	National Program for Healthcare of Elderly (NPHCE)	99	Development and printing of IEC regarding Elderly care	24.00	24.00	**Approved** Rs 24 lakh @ Rs 2 Lakh/District for approval for conducting IEC/BCC & mass media activities during International day of older person (IDOP)
42	National Program for Healthcare of Elderly (NPHCE)	100	Development and printing of IEC regarding Elderly care	2.40	2.40	**Approved** Rs 2.4 Lakh @ Rs 0.10 Lakh/ CHC for 24 CHCs for conducting Mass media activities and awareness activities during IDOP
43	National Tobacco Control Program (NTCP)	104	Required Rs. 26.25 lakh Hoardings, Posters and Brochures	26.25	26.25	**Approved Rs. 26.25 lakh for IEC activities under NTCP.** (a) 10 hoardings per district for (Shimla, Mandi and Kangra) @Rs. 15000 per hoarding (Rs.15000* 10 hoarding* 3 districts = Rs. 4.50 lakhs) b) 5 hoardings per district for the remaining districts (Rs. 15000* 9 districts* 5 districts =Rs.6.75lakhs) c) Rs.15 lakhs required for printing posters and brochures.
44	NP-NCD	110	Printing	40.00	40.00	**Approved Rs. 40.00 Lakhs for below mentioned activities-** A) 15 lakhs for IEC & Printing of Standard Treatment Protocol of Hypertension & Diabetes (cover each HWC) B) 25 lakh for the observation of various NCD Health Days

45	NP-NCD	110	Printing	50.00	50.00	**Approved Rs. 50.00 for the standardized IEC developed by MOHFW under NP-NCD.**
46	National Programme on climate change and Human Health	114	IEC and printing	9.50	9.50	**Approved Rs. 9.50 Lakhs** for conducting IEC activities in the state under NPCCHH
47	Implementation at CHC/SDH	116		5.00	5.00	**Approved Rs. 5.00 Lakhs** for the Celebration of World Oral Health Day IEC activities to be carried out in 12 Districts of the State @ Rs. 41667 per District. (All the District CMO's @ Rs 5000/- per district & @ Rs. 3000/- per block).
48	National Program for Palliative Care (NPPC)	119	Development and printing of IEC regarding Palliative care	24.00	24.00	**Approved** for approval Rs 24.00 Lakh for the development and printing of IEC regarding Palliative care, celebration of days etc. @ Rs 2.00 lakh per district for 12 districts.
49	National Programme for Prevention and Control of Deafness (NPPCD)	121	1.IEC 2.Printing 3. Celebration of deafness week	17.00	17.00	**Approved** Rs 17 lakhs for IEC activities & celebration of deafness week and days at State headquarters and districts
NCD Sub-Total				264.15	236.15	
HSS-Urban						
HSS-Rural						
50	Development and operations of Health & Wellness Centers - Rural	150	IEC for 2655 AAMs	50.00	50.00	1. Approved Rs 26.55 lakhs @ Rs 1000 for IEC Display Boards/Banners installed at each AAM for 2655 AAM. 2. Approved Rs 23.45 lakhs @ Rs 220.81 per quarter per event for village announcement/miking at each AAM for 2655 AAM.

51	Development and operations of Health & Wellness Centers - Rural	150	Funds proposed under IEC head for organising 42 Health Days at HSC-AAM	348.10	348.10	Approved Rs 348.096 lakh @Rs 400 per health day for organising 42 Health Days at AAM-SHC for 2072 AAM-SHC
52	Development and operations of Health & Wellness Centers - Rural	150	Funds proposed under IEC head for organising 42 Health Days at PHC-AAM	118.02	118.02	Approved Rs 118.02 lakhs for organizing 42 Health Days at PHC-AAM @ Rs. 1000 per health day per facility for 562 AAM-PHC (562*42*1000=236.04 L). (State has proposed for 50% of total calculated amount of 236.04 lakh taking in to account the expenditure of previous year)
53	Development and operations of Health & Wellness Centers - Urban	150	Funds proposed under IEC head for organizing 42 Health Days at UPHC-AAM	8.82	8.82	Approved Rs 8.82 lakh for organizing 42 Health Days at UPHC-AAM @ Rs. 1000 per health day per facility for 21 AAM-UPHC
54	Blood Storage Unit	154	Other Blood Services & Disorders Components	1.00	1.00	Approved Rs 1 lakh for printing of IEC material on blood cell services and disorders.
55	HSS.3 Community Engagement	159	ASHA diaries	13.55	13.55	Approved Rs 13.55 lakhs for ASHA Diary @Rs 150 for 9034 ASHAs
56	HSS.3 Community Engagement					
57	Other Community Engagements Component	163	Observance of International /State Fair and Health days across the State of Himachal Pradesh	163.15	163.15	The activities listed amount to Rs 213.15 lakhs. However, State has proposed Rs 163.15 lakh. **Hence, in principle, approved for IEC activities at the district and state level. State to ensure that it doesn't exceed 2 per cent of RE. (state calculation error)**
58	HMIS	195	Printing of HMIS Formats	7.32	7.32	**Approved Total Rs 7,31,700/-** for FY 2026-27 for printing of HMIS formats.

59	RCH Portal	195	Printing of Facility based RCH Service Recording & Monitoring Registers (As per RCH 2.0)	7.38	7.38	**Approved Rs. 7.38 lakhs** in principle for printing of up to 2951 Integrated RCH registers for the users @ Rs 250 as proposed by the state. Use of Registers is to be encouraged only in those facilities where entry on RCH 2.0 could not be done. The data fields in the registers have to be exactly matching with the RCH 2.0 data fields. These are maximum indicative rates- final rates to be arrived at as per GeM rate contract and after competitive bidding following Government protocols. RCH Portal 2.0 is a mobile-compatible application that enables beneficiary registration and service delivery data entry directly through mobile devices, thereby facilitating a paperless system. States/UTs are requested to ensure that 100% registration and service delivery entries at service delivery points carried out exclusively through the RCH Portal 2.0 without maintaining parallel paper-based registers. It is further informed that RCH register proposals will not be recommended in the forthcoming PIP. The state is therefore advised to strictly adhere to the paperless implementation of RCH Portal 2.0.
60	RCH Portal	195	Printing of RCH Portal of followup formats / services due list / work plans	2.00	2.00	**Approved Rs. 2 lakhs** for printing of upto 100,000 MCTS Follow-up formats for the users @ Rs 2 per unit as proposed by the state.

61	Snakebite envenoming	200	IEC related activities for Snake Bite Envenomating Management	3.00	**3.00**	**Approved Rs 3.00 Lakhs for IEC-related activities at the State & District level.** ((Printing of Pamphlets , Display of Poster Hordings in Healthcare facilities , Radio Gingles , News Paper Adds etc.)
HSS-Rural Sub-Total				**722.34**	**722.34**	
Grand Total				1,919.72	1738.79	

Note: As per recent IEC guidelines, the maximum expenditure per IEC to be restricted to 2% of RE and IEC Guidelines to be followed.

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

Amount in Rs. (Lakhs)

S. No	Programme/ Theme	Old Sl. No.	Activity Proposed	Amount Proposed (In Lakhs)	Amount Approved In Lakhs)	GoI Remarks
RCH						
	Maternal Health					
		18	State-specific interventions	7.20	7.2	**Ongoing activity: Approved Rs 7.2 lakhs as a continued activity Rs 15, 000/- per month for 4 Birth Waiting Homes.**
		18	State specific interventions	150.00	150	**Approved Rs. 150 lakhs for** AI-Driven Predictive care for Maternal Health. As discussed during the NPCC, the State to include the post-natal period for the mother and the early neonatal period for the newborn for AI-Driven Predictive Care. The State to share progress reports and results with MoHFW on a periodic basis, along with a detailed post-intervention report.
NDCP						
NCD						
1	NP-NCD	111	Provision of Insulin Pump	171.90	**0**	Not Approved, As per the Guidance Document on Diabetes in Children and Adolescents
3	NP-NCD	111	Tele-Onclogy	22.00	**22**	Approved Rs 22.00 lakhs for establish Tele-Onclogy between the 4 TCCs and 18 DCCCs, (all in one desktop at TCC and touch screen at DCCCs, amounting to Rs 1 lakh each.) The institution would use its own internet. The eSanjeevani platform of GoI would be used for onboarding the services

5	National Program for Control of Blindness and Vision Impairment (NPCB+VI)	98	Assessment for cataract backlog free status in HP	10.00	0.00	During NPCC discussion, it was agreed to drop the Study. Rs. 5 Lakh was approved in PIP 2024-26 for the same study for FY 2024-25. State to share the report on the findings from the study with KMD NHSRC. (District's name for assessment for district backlog free status not mentioned)
6	National Programme for Prevention and Control of Deafness (NPPCD)	123	Operationalisation of Mobile Deafness Screening Van for IGMC Shimla for outreach-based screening.	12.00	0	**Not approved** **Existing MMUs may be used for outreach/ screening activities under the National Programme for Prevention and Control of Deafness (NPPCD)**
HSS-Urban						
HSS-Rural						
Grand Total				**373.10**	**179.2**	

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

Amount in Rs. (Lakhs)

S. No	Programme/ Theme	Old Sl. No.	Planning Activities	Amount Proposed (In Lakhs)	Amount Approved In Lakhs)	GoI Remarks
Sl no 146	**HSS-Urban**					
	HSS(U).6 Technical Assitance	146	Ongoing activity mobility cost for SPMU. Proposal of 5.40 lakhs for FY 26-27 @ Rs 45000 per month for 12 months & administrative expenses of 75000 for SPMU for 12 months i.e. 45000*12 + 75000= 6.15 lakhs	6.15	6.15	Approved. State to ensure that there are no duplications.
				6.15	6.15	
Sl. No. 194	**RCH**					
	RBSK	21	a. Convergence meeting under RBSK (for quarterly meeting @ 5000 per quarter for all the districts & SHQ) = Rs. 2.60 lacs b. Prepare detailed operational plan for RBSK across districts (including cost of plan) @	3.37	3.37	**Approved Rs 3.77 lakhs for below mentioned activities:-** (1) Rs 2.60 lakh for Convergence meeting under RBSK (for quarterly meeting @ 5000 per quarter for 12 districts & SHQ) **(This is not a PM Activity. Expenditure may be booked under sl no 21)** (2) Rs 0.77 lakh Prepare detailed operational plan/microplan for RBSK across districts @ Rs. 1000 per block **(This is PM Activity. Expenditure for**

			1000 per block = 0.77 lacs			**PM activities to be booked under sl no 194)**
	Community Based Care-HBNC& HBYC	23	Fund proposed for Review & Orientation meetings of HBNC/HBYC (for quarterly meeting @ 5000 per quarter for all the districts & SHQ). =Rs. 2.60 lacs	2.60	2.60	**Approved** Rs. 2.60 lakhs for 52 review and orientation meetings for HBNC and HBYC @Rs. 5000/- per meeting on quarterly basis for all 12 districts and at State level. **(This is PM Activity. Expenditure for PM activities to be booked under sl no 194)**
	Facility Based New Born Care	24	SNCU Data management @ 20000 for 21 SNCU =4.20	4.20	4.20	**Approved** Rs. 4.20 lakh for SNCU data management for 21 SNCUs @ Rs. 20,000 per SNCU (Internet / telephone etc.) **(This is not a PM Activity. Expenditure may be booked under sl no 24)**
	SAANS	26	for monitoring of SAANS campaign =1.20 lacs	1.20	1.20	**Approved** Rs. 1.2 lakh for monitoring and supportive supervision of SAANS 2026-27 Campaign @ Rs. 10000 per district for 12 districts. **(This is PM Activity. Expenditure for PM activities to be booked under sl no 194)**
	Immunization including Mission Indradhanush	32	a).Preparation of Microplan at Sub-Centre level b) Preparation of Microplan at PHC/CHC/CH & District level.	301.90	300.93	**Approved Rs 300.93 lakhs for below mentioned activities** a) Internet Connectivity: Funds have been required for consumables for computer including provision for internet access for strengthening RI at state and 12 district level Immunization cells @ Rs. 1000 per establishment per month. Total fund of Rs 1.80 Lakh is approved . **(This is PM**

						Activity. Expenditure for PM activities to be booked under sl no 194) b) Preparation of Micro plan at Sub Centre level: For approx. 2100 Sub Centre @ Rs. 100/- per Sub Centre per year. Total fund of Rs. 2.10 Lakh is approved. (**This is not a PM Activity. Expenditure may be booked under sl no 32**) c) Preparation of Micro plan at PHC/CHC/CH & District level: @ Rs. 1000/- for PHC/CHC/CH and @ Rs. 2000/- for District per year. Total fund of 9.27 Lakh is approved. (**This is not a PM Activity. Expenditure may be booked under sl no 32**) d) RI Qtr review Meeting at State level: For quarterly review meetings exclusive for RI and its components@ Rs1500/- per participant, for up to 30 participants. Total fund of Rs 1.80 Lakh is approved. (**This is PM Activity. Expenditure for PM activities to be booked under sl no 194**) e) RI review Meeting at District level: For quarterly review meetings exclusive for RI and its components@ Rs 150/- per participants, for up to 30 participants for 12 districts. Total fund of Rs 2.16 Lakh is approved. (**This is PM Activity.**

							Expenditure for PM activities to be booked under sl no 194) f) RI review meeting at Block Level: For quarterly review meetings exclusive for RI and its components@ Rs 100/- per participant, for up to 10 participants for 80 blocks. Total fund of Rs 3.20 Lakh is approved. **(This is PM Activity. Expenditure for PM activities to be booked under sl no 194)** g) Mobility support for supportive supervision at state: Total fund of Rs 3.60 Lakh is approved @ 0.30 lakh per month for 12 month. **(This is PM Activity. Expenditure for PM activities to be booked under sl no 194)** h) Mobility Support for DIO: For monitoring and supervision of RI and SIA related activities by DIOs @ Rs 25,000 per month. Total fund of Rs 36.00 Lakh is approved. @ 3 lakh per district per year for 12 districts. **(This is not a PM Activity. Expenditure may be booked under sl no 32)** Introduction of new HPV vaccine under UIP:- For implementation of HPV Vaccination programme the fund of Rs. 241 lakh is approved. **(This is not a PM Activity. Expenditure**

						may be booked under sl no 32)
	RCH Sub-Total			**313.27**	**312.30**	
	NDCP					
	Integrated Disease Surveillance Programme	63	Integrated Disease Surveillance Programme	11.91	11.91	**Approved Rs 11.91 lakhs for below mentioned activities:-** 14 Computer Systems & 2 Laptops amounting to overall Rs.13.53 Lacs (Rs. 85,117.06/- each) proposed for 14 units of Computer Desktop Systems along with Printers and UPS (State and District Units) and 2 unit of Laptop (Rs. 80,000/-) to replace more than 10 years old systems ensuring smooth and effective functioning of the Integrated Disease Surveillance Programme (IDSP). The proposed allocation will support essential activities such as data entry, VCs, data compilation, data analysis, and timely reporting of disease surveillance information. **(This is PM Activity. Expenditure for PM activities to be booked under sl no 194)**
	Dengue & Chikungunya	67	**1.** Rs 2 lakhs: Resource allocated to State HQ and 5 districts for surveillance, research and outbreak **2.** Operational cost @ Rs. 500 × 10 days × 5 months × 17 machines = Rs. 4.25 Lakhs.	6.25	6.25	Approved Rs. 6.25 lakhs for monitoring and epidemic preparedness. **(This is not a PM Activity. Expenditure may be booked under sl no 63)**

	NLEP	72	Review meeting ,office operational costs and mobility support	7.00	7.00	**Approved Rs 07.00 lakh for below mentioned activities:-** Rs 1.00 lakhs for review of the program state level 2 review meetings (Half Yearly) (Rs. 50000 per meeting) **(This is PM Activity. Expenditure for PM activities to be booked under sl no 194)** Rs 0.50 lakhs for Supervision TA/DA of SLAC, LCDC, ACD&RS activities. **(This is PM Activity. Expenditure for PM activities to be booked under sl no 194)** Rs 1.50 lakhs for Mobility support State level and Mobility support for patients two districts hospital i.e. Zonal Leprosy Hospital Kandbari (Palampur) and Zonal Leprosy Hospital Lohanji (Solan) **(This is not a PM Activity. Expenditure may be booked under sl no 70)** Rs 4.00 lakhs for telephone bills, internet charges, cartridge filling, paper office expenses, stationery etc. at State Cell & District Cell budget. **(This is PM Activity. Expenditure for PM activities to be booked under sl no 194)**

	National TB Elimination Programme	**73**	Procurement of office equipment and furniture for State & District levels. (Office Equipment at STC, SDS) Operational Costs (Expenses on account of consumables, office expenses, operating expenses, contingency, admin expenses, miscellaneous) State, District and Block level)Meetings / SIE/CIE. Hiring of vehicles, maintenance of office equipment, mobile tablets and desktops and maintenance costs of office equipment etc.	621.00	621.00	**Approved Rs 621 lakh as per details below :** For Meetings, Workshops and Conferences – 37 lakh **(Budget for meetings and state internal evaluation is PM Activity. Expenditure for PM activities to be booked under sl no 194)** For monitoring & evaluation – 45 lakh For Mobility Support and Field Visits (including SRM)- 504 lakh **(This is PM Activity. Expenditure for PM activities to be booked under sl no 194)** Procurement of two-wheeler not recommended; mobility support to be given For Operational Costs (Expenses on account of consumables, office expenses, operating expenses, contingency, admin expenses, miscellaneous) – 35 lakh
	NVHCP	80	Prevention	4.61	4.61	**Approved Rs 4.61 lakhs for below mentioned activities:-** **(This is PM Activity. Expenditure for PM activities to be booked under sl no 194)** 1. Rs 1.61 lakhs for Planning & M & E for SVHMU towards meeting the cost of office expenses and contingency as per NVHCP norms. (i.e. at

					least 2 participants per district @Rs 6700 per participant) 2. Rs. 2.0 lakhs for SVHMU towards monitoring and supervision as per NVHCP norms. 3. Rs. 1.00 lakhs for mobility support to attend National level review meetings
NRCP	84	Planning , Monitoring & Evaluation activities, and State & District level meetings	4.10	**4.10**	**Approved Rs 4.10 Lakh for Planning, Monitoring & Evaluation activities, and State & District level meetings under NRCP (This is PM Activity. Expenditure for PM activities to be booked under sl no 194)**
NDCP Sub-Total			**654.87**	**654.87**	
NCD					
	97	Medical Officer - Online training program for Medical Officers on de-addiction care	0.32	0	**Not approved- As it is a duplication of the activity. It is already approved in the Capacity Building Annexure.**
NPHCE	103		1.00	0	**Not approved- no such norms are there under NPHCE**
NTCP	104	Required Rs. 29.45 lakhs I. Travelling for surveillance and monitoring activities @Rs.8,300 per month per district (Rs. 8,300 * 12 districts * 12 months =	29.45	29.45	**Approved Rs. 29.45 lakhs for below mentioned activities** I. Travelling for surveillance and monitoring activities @Rs.8,300 per month per district (Rs. 8,300 X 12 districts X 12 months = Rs.11.95 lakhs) **(This is not a PM Activity. Expenditure may be booked under sl**

			Rs.11.95 lakhs) there are one state, 12 districts and 78 block flying squads. so their travel travel cost will be met from this head. II. Quarterly meeting of DLCC in districts (4meetings per year * 12 districts = 48 meetings) @Rs. 5 thousand per meeting (Rs. 5thousand* 48 meetings = Rs. 2.40 Lakhs) III. Biannual meeting of SLCC on state level (2 meetings) @Rs. 5000 per meeting (Rs. 5000* 2 meetings = Rs. 10 thousand) IV. Rs. 15 Lakhs for Implementation of Tobacco free panchayat (@Rs.1500 * 1000 panchayats = Rs.15 lakhs)			**no 104)** There are one state, 12 districts and 78 block flying squads. So their travel cost will be met from this head. II. Quarterly meeting of DLCC in districts (4meetings per year X 12 districts = 48 meetings) @Rs. 5 thousand per meeting (Rs. 5000/- X 48 meetings = Rs. 2.40 Lakhs) **(This is PM Activity. Expenditure for PM activities to be booked under sl no 194)** III. Biannual meeting of SLCC on state level (2 meetings) @Rs. 5000 per meeting (Rs. 5000 X 2 meetings = Rs. 10,000/-) **(This is PM Activity. Expenditure for PM activities to be booked under sl no 194)** IV. Rs. 15 Lakhs for Implementation of Tobacco free panchayat: (@Rs.1500 X 1000 panchayats = Rs.15 lakhs) P27. **(This is not a PM Activity. Expenditure may be booked under sl no 104)**

	NP-NCD	110	1. Conduct various meeting and field visits to monitor the NP-NCD programme along with fuctionality of DCCCs and Nirog Clinics	54.00	54.00	**Budget of Rs. 54.00 Lakhs is approved-** **1. Rs. 4 lakhs for Prog. & Mgmt cost at State Level** **2. Rs. 48 lakhs for Prog. & Mgmt. cost at Distt. Level for 12 districts @ Rs 4 lakh per district.** **Rs 2 lakh for 1 Desktop and 1 Laptop for NCD Division at SHQ** **(This is PM Activity. Expenditure for PM activities to be booked under sl no 194)**
	National programme on climate change and human health	114	Funds of Rs. 3.50 lakhs are proposed under PME for FY 2026–27. The allocation will cover activities related to programme management, including State, District, and Block-level review and monitoring meetings under NPCCHH.	3.50	3.5	**Approved Rs. 3.50 lakhs** for the allocation to cover activities related to programme management, including State, District, and Block-level review and monitoring meetings under NPCCHH. **(This is PM Activity. Expenditure for PM activities to be booked under sl no 194)**
	NCD Sub Total			**88.27**	**86.95**	
	HSS-Rural (including cross cutting activities)					

	CPHC-AAM	150	The state has proposed funds @ Rs. 1 lac each for Meetings, Mobility Support & Operational Cost for each district = 3 X12 Rs. 36 L.The state has proposed 2 lac each for Meetings, Monitoring Support, Mobility Support & Operation Cost atstate = 4 X 2 Rs. 8L	44.00	-	In principle approved for review meetings. State to subsume these activities in State Review Mission.
	HSS.3	159	Supervision Cost	116.30	116.30	**1. Approved Rs 108.0 Lakhs for supervision cost is proposed as a supervision cost for 300 ASHA facilitators @Rs 300 for 10 visits per month (Rs 3000 per month)for 12 month for the FY 26-27. (This is not a PM Activity. Expenditure may be booked under sl no 159)** **2. Approved Rs 8.3 Lakhs for the supervision cost for 77 block level ASHA coordinators @ Rs 900 per month for 12 month for 77 blocks for the FY 26-27. As per NPCC Discusssion. (This is not a PM Activity. Expenditure may be booked under sl no 159)**

	QA PM	175	State & District Quality Assurance Unit (Review meetings) 0 .2 for State & 0.96 for Districts	1.16	1.16	**Approved Rs.1.16 lakhs for approval for State & District QAU review meetings. (This is PM Activity. Expenditure for PM activities to be booked under sl no 194)**
		175	District Quality Assurance Unit (Operational cost)	4.32	4.32	**Approved Rs.4.32 lakh for DQAU operational cost. (This is not a PM Activity. Expenditure may be booked under sl no 175)**
		175	Laptops 7 Units @ 70,000/-	4.90	4.90	**Approved** Rs 4.9 Lakh for 7 Laptops @0.7L. **(This is PM Activity. Expenditure for PM activities to be booked under sl no 194)**
	Planning	194	For Mobility support, office expenses, audit and concurrent audit for state, district & Block level.	607.00	607.00	Rs 607.00 lakhs approved. State to ensure that there are no duplications.
	Implementation of DVDMS	196	Rs 2.75 lakh for 5 computers for the DVDMS Team at SHQ. The computers earlier were given in 2017	2.75	**2.75**	Approved Rs 2.75 lakhs for Computers (including Printer, UPS) @ 55000 per unit or as per DGS&D rate, whichever is less.
	Snakebite envenoming	200	Funds of Rs 2 Lakhs proposed for: State & Districts for Office Meetings / Expenses & Contingency	2.00	2.00	Approved Rs 2 Lakhs for State & Districts level Meetings / Expenses & Contingency under SBPC **(This is PM Activity. Expenditure for PM activities to be booked under sl no 194)**
	HSS-Rural (including cross cutting activities)			**782.43**	**738.43**	
Grand Total				**1,838.84**	**1,798.70**	

Annexure 7.7: Revalidation for previous years' approvals

Sl.	FMR Code	Activity Description	Year of Original Approval	Amount Approved (Rs. Lakhs)	Balance Amount Sought for Revalidation (Rs. Lakhs)	Justification / Reason for Non-Implementation	Amount approved for revalidation (Rs. Lakhs)	GoI remarks
1	11	MH- MCH Wing Hamirpur	22-24	Rs 4000 lakhs	Rs 2,000 lakhs	The drawings for the MCH Wing at Hamirpur were approved in November 2025. It is proposed to release ₹20 crore to MCH Hamirpur by March, and the remaining ₹20 crore will be revalidated.	Rs 2000 lakhs	**Rs 2,000 lakhs approved as revalidation - MCH Wing Hamirpur**
2	11	MH- MCH Wing Nahan	25-26	Rs 1100 lakhs	Rs 1 lakhs	Rs 1100 lakh for MCH Nahan	Rs 1 lakhs	**Rs 1 lakh approved as revalidation - MCH Wing Nahan**
3	11	MH- Procurement of equipment in 3 MCH Wing (MCH Una, Civil Hospital Sundernagar, and Kamla Nehru Hospital Shimla.)	23-24	Rs 1800 lakhs	Rs 850 lakhs	For the procurement of equipment in 3 MCH Wing	Rs 850 lakhs	**Rs 850 lakhs approved as revalidation - For the procurement of equipment in three MCH Wings (MCH Una, Civil Hospital Sundernagar, and**

Sl.	FMR Code	Activity Description	Year of Original Approval	Amount Approved (Rs. Lakhs)	Balance Amount Sought for Revalidation (Rs. Lakhs)	Justification / Reason for Non-Implementation	Amount approved for revalidation (Rs. Lakhs)	GoI remarks
								Kamla Nehru Hospital Shimla.)
4	15	MH- LaQshya	20-21	Rs 531.35 lakhs	Rs 310 lakhs	Procurement of equipment for labour rooms	Rs 310 lakhs	**Rs 310 lakhs approved as revalidation - procurement of equipment for labour rooms**
5	24	Facility-Based Newborn Care- 11 SNCUs, 16 upgraded NBSUs and 17 New NBSUs	2024-25	11 SNCUS = 759 lacs 16 upgraded NBSUs = 96 lacs 17 (4+13) New NBSUs = 170 lacs	Rs 376.93 lakhs	50% advance payment has been released to the agency and 50% will be released after the work completion. The MoU has been signed in FY 2025-26	Rs 376.93 lakhs	**Rs 376.93 lakhs approved as revalidation for work completion of SNCUs, upgraded NBSUs, New NBSUs .**
6	100	NCD pool- Procurement of equipment for Physiotherapy units	2025-26 (Supple	Rs.30 lakhs	Rs.30 lakhs	Tender for procurement of equipment for Physiotherapy units has been floated on Gem	Rs.30 lakhs	**Rs 30.00 lakhs approved as revalidation for procurement of**

Sl.	FMR Code	Activity Description	Year of Original Approval	Amount Approved (Rs. Lakhs)	Balance Amount Sought for Revalidation (Rs. Lakhs)	Justification / Reason for Non-Implementation	Amount approved for revalidation (Rs. Lakhs)	GoI remarks
			mentary PIP)			Portal, therefore, an amount of Rs.30 lakh is proposed for revalidation in FY 2026-27		**equipment for Physiotherapy units.**
7	115	Implementation at DH - Dental Equipment & Dental Material under NOHP Programme	2025-26	Rs 44.00 lakhs	Rs 44.00 lakhs	Tender is under process for Dental Equipment & Dental Material under NOHP Programme.	Rs 44.00 lakhs	**Rs 44.00 lakhs approved as revalidation -** 22 Dental Clinics for equipment and instruments @Rs 2 lakhs/clinic
8	116	Implementation at CHC/SDH-Diagnostics and IEC & Printing Diagnostics: - Rs 22.00 lakhs - For 22 dental care units @ Rs I lakh/dental care unit Rs 25.5 lakhs - For 85 Muskan dental clinics @Rs 0.3 lakhs/clinic.	2025-26	Rs 47.50 lakhs	Rs 47.50 lakhs	Tender is under process for Dental Equipment & Dental Material under the NOHP Programme.	Rs 47.50 lakhs	**Rs 47.50 lakhs approved as revalidation –** Rs 22.00 lakhs - For 22 dental care units @ Rs 1 lakh/dental care unit Rs 25.5 lakhs - For 85 Muskan dental clinics @Rs 0.3 lakhs/clinic.

Sl.	FMR Code	Activity Description	Year of Original Approval	Amount Approved (Rs. Lakhs)	Balance Amount Sought for Revalidation (Rs. Lakhs)	Justification / Reason for Non-Implementation	Amount approved for revalidation (Rs. Lakhs)	GoI remarks
9	118		2025-26	Rs 8.40 lakh	Rs 8.40 lakh	Tender is under process for Dental Equipment & Dental Material under NOHP Programme.	Rs 8.40 lakh	**Rs 8.40 lakh approved for revalidation –** Rs: 8.40 lakhs for procurement of consumables for 28 new dental clinics @ Rs 0.3 lakhs/clinic
10	107	NCD Flexible Pool & NCD Clinics at DH - Procurement of Equipment for Nirog Clinics at DH	2024-25	Rs 233.93 lakh	Rs 74 lakh	An amount of Rs 233.93 lakh was approved for equipment in NCD clinics in FY 24-25. Out of this amount the districts were given funds for smaller equipment and furniture. A requisition for Rs 74 lakh for equipment was given to HP Medical Corporation Limited. Tender has been floated. The amount could not be committed in FY 24-25 as no unspent balance was available. Accordingly, Rs 74 lakh is	Rs 74 lakh	**Rs 74 lakhs approved for revalidation** in FY 26-27 for equipment in DH NCD clinics

Sl.	FM R Code	Activity Description	Year of Original Approval	Amount Approved (Rs. Lakhs)	Balance Amount Sought for Revalidation (Rs. Lakhs)	Justification / Reason for Non-Implementation	Amount approved for revalidation (Rs. Lakhs)	GoI remarks
						proposed for revalidation of the same in FY 26-27		
11	108	NCD Flexible Pool & NCD Clinics at CHC/SDH - Procurement of Equipment for Nirog Clinics at CHC	2024-25	Rs 148.32 lakh	Rs 92 lakh	An amount of Rs 148.32 lakh was approved for equipment in NCD clinics in FY 24-25. Out of this amount the districts were given funds for smaller equipment and furniture. A requisition for Rs 92 lakh for equipment was given to HP Medical Corporation Limited. Tender has been floated. The amount could not be committed in FY 24-25 as no unspent balance was available. Accordingly Rs 92 lakh is proposed for revalidation of the same in FY 26-27	Rs 92 lakh	**Rs 92 lakhs approved** for revalidation in FY 26-27 for equipment in CHC NCD clinics
12	110	NCD Flexible Pool & other NP-NCD Component-Establishment /upgradation of 18	2025-26	Rs 303.48 lakh	Rs 146.79 lakh	The work of establishment /upgradation of 18 DCCCs across the state has been awarded to HLL Life Care Limited, and as per the MOU 50% advance has	Rs 146.79 lakh	**Rs 146.79 lakhs approved** for revalidation for /upgradation of 18 DCCCs across the state.

Sl.	FMR Code	Activity Description	Year of Original Approval	Amount Approved (Rs. Lakhs)	Balance Amount Sought for Revalidation (Rs. Lakhs)	Justification / Reason for Non-Implementation	Amount approved for revalidation (Rs. Lakhs)	GoI remarks
		DCCCs across the state				been released to HLL and rest will be release on completion of work, as such an amount of Rs146.79 lakh is proposed for revalidation in FY 2026-27		
13	195	Comprehensive Call center-104	2025-26	Rs 205.84 Lakh	Rs 25.40 Lakh	104-Call Centre is functional with 37 seats against the approval of 42 seats. 5 Seats are proposed to be added in 2026-27 (As per requirement)	Nil	Not approved for revalidation, as the current call centre is a 37-seater call centre, and the proposed 42-seater call centre operational cost is recommended for approval in NPCC discussions 2026-27.
14	NCD .6/11 2	NCD Flexi Pool/ Haemodialysis Services -In-house mode to cater for the additional dialysis demand with	2025-26	Rs 2744.00 lakhs	Rs 1768 lakhs	The work of the establishment of Dialysis Centres in 29 Adarsh Swasthya Sansthan is already under process & 50% advance given to	Rs 1768 lakhs	As discussed in NPCC meeting, the amount of INR 1768 Lakhs for scaling up the dialysis services

Sl.	FM R Code	Activity Description	Year of Original Approval	Amount Approved (Rs. Lakhs)	Balance Amount Sought for Revalidation (Rs. Lakhs)	Justification / Reason for Non-Implementation	Amount approved for revalidation (Rs. Lakhs)	GoI remarks
		procurement of 147 HD machines at 49 centres @45.90L per HD centre, amounting to INR 2249 Lakhs. State had also proposed the operational cost for these in house 49 HD centres @INR 1000 per session for a total of 25000 dialysis sessions, amounting to 250 lakhs. The remaining amount of INR 245 Lakhs for infrastructure and HR.				HLL & remaining Rs. 7.50 Crore & rest remaining 20 Adarsh Swasthya Sansthans HD Centers Equipment & Civil work for Rs. 10.18 Crore the amount of 17 Crores 68 Lakhs is being revalidated for the FY 2026-27		through in-house mode at 49 health facilities is recommended. The same was also recommended in RoP 2025-26. **Rs 1768 Lakhs approved as revalidation.**
					Rs 5774.02 lakhs		**Rs 5,748.62 lakhs**	

Note: Revalidation amount is deducted from the FY 2026-27 Resource Envelope. Only activities approved in earlier RoPs and not yet implemented are eligible. Activities lapsed due to policy change are not eligible.