

Department of Health and Family Welfare

1. Establishment and Strengthening of NCDC Branches and Health Initiatives, Inter-sectoral coordination for preparation and Control of Zoonotic Diseases and other neglected Tropical Diseases, National Viral Hepatitis Surveillance Programme, and Anti-Microbial Resistance Containment Programme (CS)

| FINANCIAL OUTLAY (Rs in Cr) | OUTPUT 2019-20 | | | OUTCOME 2019-20 | | |
|------------------------------------|--|--|---|------------------------|-------------------|------------------------|
| 2019-20 | Output | Indicators | Targets 2019-20 | Outcome | Indicators | Targets 2019-20 |
| | (i) Establishment and Strengthening of NCDC Branches and Health Initiatives | | | | | |
| 49 | 1. Construction of NCDC branches | 1.1.To construct buildings for NCDC branch where the State has allotted land | Construction of 10 branches will be started with whom MoU has been signed viz. Jharkhand, Nagaland, Manipur, Himachal Pradesh, Bihar, Kerala, Arunachal Pradesh, Tripura, Gujarat and Madhya Pradesh 2. MoU will be signed with other remaining States | | | |
| | (ii) Strengthening Inter-sectoral coordination for preparation and Control of Zoonotic Diseases and other neglected Tropical Diseases | | | | | |

| FINANCIAL OUTLAY (Rs in Cr) | OUTPUT 2019-20 | | | OUTCOME 2019-20 | | | |
|---|----------------|--|---|-----------------|---|---|---|
| | 2019-20 | Output | Indicators | Targets 2019-20 | Outcome | Indicators | Targets 2019-20 |
| | | 1. Improved capacity of States and district level manpower for prevention and control of zoonosis diseases | 1.1.Number of Training workshops conducted | 5 | 1. Professionals Trained in joint regional workshops through regional co-ordinators | 1.1.Number of professionals trained in joint regional workshops | 300 professionals trained |
| iii) National Viral Hepatitis Surveillance Programme | | | | | | | |
| | | 1. Surveillance system for hepatitis established | 1.1.Number of regional labs doing enhanced case reporting for hepatitis | 15 | 1. Surveillance system for hepatitis established | 1.1.Surveillance system for hepatitis established | Increase in capacity to undertake surveillance for hepatitis in 15 sites. |
| | | | 1.2.Number of districts reporting on acute hepatitis surveillance | 15 | | | |
| iv) Anti-Microbial Resistance Containment Programme | | | | | | | |
| | | 1. Establish AMR Surveillance lab network | 1.1.Number of labs reporting AMR Surveillance data | 20 | 1. AMR surveillance data analysed and made available on NCDC website | 1.1. Number of labs whose AMR Surveillance data is included in National data made available on NCDC website | 20 |

2. Pharma co-vigilance Programme of India (PvPI) (CS)

| FINANCIAL OUTLAY (Rs in Cr) | OUTPUT 2019-20 | | | OUTCOME 2019-20 | | |
|-----------------------------------|---|---|---|---|---|---|
| | 2019-20 | Output | Indicators | Targets 2019-20 | Outcome | Indicators |
| 12 | 1. Recognition of Medical College-Hospitals/District hospitals as Adverse Drug Reactions (ADRs) Monitoring Centres (AMCs) | 1.1.Number of AMCs where ADRs reporting established | 325 ADR Monitoring Centres (AMCs) & Medical Device Monitoring Centres (MDMCs) (Cumulative | 1. To create a nation wide system to report ADRs for patient-safety | 1.1.Reporting of ADRs is expected to increase by 10- 12%. | 12-14% (Approx increase in reporting of ADRs) |

3. Development of Nursing Services (CS)

| FINANCIAL OUTLAY (Rs in Cr) | OUTPUT 2019-20 | | | OUTCOME 2019-20 | | |
|-----------------------------------|---|---|--|---|---|---|
| | 2019-20 | Output | Indicators | Targets 2019-20 | Outcome | Indicators |
| 15 | 1. To conduct courses of Training and to update the knowledge & Skills of Nursing personnel | 1.1.Number of nurses training course | To conduct 160 courses of training of nurses | 1. To update the knowledge & Skills of Nursing personnel in Nursing Education, administration | 1.1.Number of Nurses trained | To train 4800 nurses |
| | 2. Upgradation of School of Nursing (SON) into College of Nursing | 2.1. Number of nursing schools upgraded to Nursing colleges | 3 Schools to be upgraded into Colleges | 2. Increase in availability of Graduate nurses | 2.1.Increase in number of seats of graduate | To increase 90 seats of Graduate Nurses |

| | | | | | | |
|--|--|--|--|--|--------|--|
| | | | | | nurses | |
|--|--|--|--|--|--------|--|

4. Health Sector Disaster Preparedness and Response and Human Resources Development for Emergency Medical Services (CS)

| FINANCIAL OUTLAY (Rs in Cr) | OUTPUT 2019-20 | | | OUTCOME 2019-20 | | | |
|-----------------------------------|----------------|---|---|-----------------|---|---|---|
| | 2019-20 | Output | Indicators | Targets 2019-20 | Outcome | Indicators | Targets 2019-20 |
| 130 | | 1. Setting up of Skill Centres | 1.1 Skill Centres initiated | 40 | 1. Skill Centres made functional | 1.1. Number of Skill Centres made functional | 30 |
| | | 2. Training of Doctors, Nurses and Paramedics | 2.1 Number of training workshops to be held | 60 | 2. Doctors, Nurses and paramedics trained in Emergency Life support | 2.1. Number of Doctors, nurses and paramedics trained in Emergency Life Support | 1280 doctors, nurses and paramedics to be trained |

5. National Organ Transplant Programme (NOTP) (CS)

| FINANCIAL OUTLAY (Rs in Cr) | OUTPUT 2019-20 | | | OUTCOME 2019-20 | | | |
|-----------------------------------|----------------|--|--|--------------------------------|------------------------|----------------------------------|-----------------|
| | 2019-20 | Output | Indicators | Targets 2019-20 | Outcome | Indicators | Targets 2019-20 |
| 41 | | 1. To increase awareness on organ donation | 1.1.No. of Organ donation pledges received | 1 lakh (cumulative 14.5 lakh) | 1. Organ Donation Rate | 1.1.No. of deceased organ donors | 1000 |

6. Pradhan Mantri Swasthya Suraksha Yojana (CS)

| FINANCIAL OUTLAY (Rs in Cr) | OUTPUTS 2019-20 | | | OUTCOME 2019-20 | | |
|-----------------------------------|---|---|---|-------------------|--|--|
| | 2019-20 | Output | Indicators | Targets 2019-20 | Outcome | Indicators |
| 4000 | 1. Increased accessibility to AIIMS and AIIMS like Institutes | 1.1. No. of beds / Bed capacity added across various new / existing institutions under the purview of the scheme- Overall and specialty/ Super-specialty wise | 6000 in 8 AIIMS | 1. Not Applicable | 1.1. Average No. of patients visiting in 6 functional AIIMS: IPD patients/month & OPD patients /day (Six AIIMS together) | 12000 IPD patients/month 15000 OPD patients/day |
| | | 1.2. No. of specialty departments added across all the new and existing institutions under the purview of the scheme | 240 in 8 AIIMS | | 1.2. No. of Medical Graduates (Overall as well as specialty/ Super specialty wise) graduating in a year | 1000 |
| | | 1.3. Increase in number of seats: a) UG b) PG c) Nursing (B.Sc), etc. | (a) 1000 UG seats in 14 AIIMS (100 each in 6 AIIMS + 50 each in Nagpur, Guntur+ 50 each in 6 new AIIMS) (b) 750 PG Seats | | 1.3. Utilization of beds Bed occupancy) | 80% |

| FINANCIAL OUTLAY (Rs in Cr) | OUTPUTS 2019-20 | | | OUTCOME 2019-20 | | |
|-----------------------------------|--|---|--|-----------------|------------|-----------------|
| | Output | Indicators | Targets 2019-20 | Outcome | Indicators | Targets 2019-20 |
| | | | in 6 AIIMS (c) No change | | | |
| | 2. Availability of Affordable /reliable tertiary care and Medical Education. | 2.1. Creation of Physical Infrastructure with Medical Equipment, furniture, etc. for facilitating addition of following by the GMC/State (a) Super Specialty Departments (b) PG Seats (c) Operation Theatres (OTs) (d) Beds | a) 300 Super Specialties in 53 GMCs b) 800 PG Seats in 53 GMCs c) 300 OTs in 53 GMCs. d) Appox 10,000 hospital beds in 57 GMCs. | - | - | - |

7. National AIDS and STD Control Programme (CS)

| FINANCIAL OUTLAY | OUTPUTS 2019-20 | | | OUTCOME 2019-20 | | | | |
|---------------------|-----------------|--|--|--------------------|---------|---|---|-----|
| | 2019-20 | Output | Indicators | Targets 2019-20 | Outcome | Indicators | Targets 2019-20 | |
| 2500 | 1. | Coverage of High Risk Group (Female Sex Workers, Men who have Sex with Men, Hijra/Transgender people, Injecting Drug Users) and Bridge Population (Truckers & Migrants) through Targeted Interventions | 1.1. No. of High Risk Group and Bridge Population covered through Targeted Interventions | 62.52 lakh | 1. | People living with HIV who know their HIV Status | 1.1. Percentage of people living with HIV who know their HIV status | 85% |
| | 2. | Coverage of High Risk Groups and Vulnerable Population through Link Worker Scheme (LWS) | 2.1. No. of High Risk Groups & Vulnerable population covered through LWS | 18.53 Lakh | 2. | People living with HIV who know their HIV Status and are on ART | 2.1. Percentage of people who know their HIV Positive status and are on ART | 80% |
| | 3. | Testing of General Clients for HIV | 3.1. No. of General Clients tested for HIV | 230.00 Lakhs | | | | |
| | 4. | Testing of Pregnant Women for HIV | 4.1 No. of Pregnant women tested for HIV | 230.00 Lakhs | | | | |
| | 5. | Blood units collection in NACO | 5.1 No. of Blood unit collected in | 80.00 Lakhs | | | | |

| FINANCIAL OUTLAY | OUTPUTS 2019-20 | | | OUTCOME 2019-20 | | | |
|---------------------|-----------------|---|--|--------------------|---------|------------|---------------------|
| | 2019-20 | Output | Indicators | Targets 2019-20 | Outcome | Indicators | Targets 2019- 20 |
| | | supported blood banks | NACO supported blood banks | | | | |
| | 6. | Blood units collection through Voluntary Blood Donation | 6.1 No. of Blood Units collected through Voluntary Blood Donation | 71.00 lakh | | | |
| | 7. | Management of STI/RTI patients | 7.1 No. of STI/RTI patients managed | 100.00 lakh | | | |
| | 8. | People living with HIV (PLHIV) on ART | 8.1 No. of PLHIV on ART (Cumulative) | 15.50 lakh | | | |

8. Family Welfare Schemes (CS)

| FINANCIAL OUTLAY | OUTPUT 2019-20 | | | OUTCOMES 2019-20 | | | |
|---------------------|--|---|--|---------------------------------|---------------|--|---------------------------------|
| | 2019-20 | Output | Indicator(s) | Target 2019-20 | Outcome | Indicator(s) | Target 2019-20 |
| 700 | (i) Population Research Centres | | | | | | |
| | | 1. No. of research studies completed by the PRCs | 1.1. No. of research studies completed by the PRCs | 96 | - | - | - |
| | ii) Free Distribution of Contraceptives | | | | | | |
| | | 1. Procurement of contraceptives and supply to States/UTs | 1.1. Free distribution of contraceptives – Condoms –MPcs | 378.115490 Condoms – MPcs | 1. To achieve | 1.1 Procurement of contraceptives and supply | 378.115490 Condoms – MPcs |

| FINANCIAL OUTLAY | OUTPUT 2019-20 | | | OUTCOMES 2019-20 | | |
|---------------------|---|---|--------------------------------------|----------------------------------|--|--------------------------------------|
| | 2019-20 | Output | Indicator(s) | Target 2019-20 | Outcome | Indicator(s) |
| | as per the requirement of Family Planning Programme | 1.2. Free distribution of Contraceptives - OCPs- Lakh Cycles | 591.64562 OCPs- Lakh Cycles | Family Planning 2020 Goal | to States/ UTs as per the requirement of Family Planning Programme | 591.64562 OCPs- Lakh Cycles |
| | | 1.3. Free distribution of Contraceptives - IUCDs- Lakh Pcs | 87.73422 IUCDs- Lakh Pcs | | | 87.73422 IUCDs- Lakh Pcs |
| | | 1.4. Free distribution of Contraceptives - Tubal Rings - Lakh Pairs | 18.80240 Tubal Rings - Lakh Pairs | | | 18.80240 Tubal Rings - Lakh Pairs |
| | | 1.5. Free distribution of Contraceptives - EC Pills - Lakh packs | 195.75047 EC Pills - | | | 195.75047 EC Pills - |
| | | 1.6. Free distribution of Contraceptives - PT Kits - Lakh Kits | 293.2790PT Kits - | | | 293.2790PT Kits - |
| | | 1.7. Free distribution of Contraceptives Injectable contraceptive-Lakh doses | 31.54371 lakh doses | | | 31.54371 lakh doses |
| | | 1.8. Free distribution of Contraceptives Centchroman contraceptive- lakh strips | 142.25404 Centchroman lakh strips | | | 142.25404 Centchroman lakh strips |
| | | (iii) Health Surveys & Research Studies | | | | |
| | 1. Completion of NFHS-5 main | 1.1. Completion of main Survey field work in | Y | 1. Release of NFHS-5 data in | 1.1. Release of NFHS-5 data in phased manner | Y |

| FINANCIAL OUTLAY | OUTPUT 2019-20 | | | OUTCOMES 2019-20 | | | |
|--|----------------|---|--|-----------------------|---|--|-----------------------|
| | 2019-20 | Output | Indicator(s) | Target 2019-20 | Outcome | Indicator(s) | Target 2019-20 |
| | | survey field work in Phase I States | Phase I States(Y/N) | | phased manner | (Y/N) | |
| | | 2. Release of Rural Health Statistics 2018-19 | 2.1. Release of Rural Health Statistics 2018-19 (Y/N) | Y | 2. Release of Rural Health Statistics 2018- 19(October 2019) | 2.1. Rural and tribal areas of India are to be made available in the public domain | Y |
| (iv) IEC (Information, Education and Communication) (Renamed as Swastha Nagrik Abhiyan) (SNA) | | | | | | | |
| | | 1. Increase in number of media campaign | 1.1 percentage increase in Media campaigns | 5 % | 1. Increase in awareness level | 1.1. Increase in awareness level | Increase in awareness |
| (v) Social Marketing of Contraceptives | | | | | | | |
| | | 1. Procurement of contraceptive and supply to States/UTs as per Family Planning Programme | 1.1. Social Marketing of Contraceptives- Condoms - MPcs | 520 MPcs | 1. Procurement of contraceptive and supply to States/UTs as per Family Planning Programme | 1.1. Procurement and Supply Contraceptives to SMOs as per their requirement | 520 MPcs |
| | | | 1.2. Social Marketing of Contraceptives- OCPs- Lakh Cycles | 198 OCPs- Lakh Cycles | | | 198 OCPs- Lakh Cycles |

9. National Rural Health Mission (CSS)

| FINANCIAL OUTLAY (Rs in Cr) | OUTPUT 2019-20 | | | OUTCOME 2019-20 | | |
|--|--|---|---|---|--|---|
| | Output | Indicators | Targets 2019-20 | Outcome | Indicators | Targets 2019-20 |
| (i) Health systems strengthening under NRHM | | | | | | |
| 27039.00 | 1. Expanded basket of primary care services provided by Health & Wellness Centers (HWCs) | 1.1. Number of functional HWCs (SHCs, PHCs and UPHCs) | Cumulative Target- 40,000 | 1. Improved utilization of primary care services and screening & management of NCDs | 1.1. Number of total 30+ population screened for NCDs | 1.5 Crore population screened for NCDs |
| | 2. Implementation of IT system backed procurement management and logistics systems for provision of Free Drugs at the public health facilities | 2.2. Number of States implementing IT system backed procurement management and logistics systems under Free Drugs Services Initiative | 30 States/UTs (As on 31 st March 2019, 29 States/UTs have implemented IT system backed procurement management and logistics systems under Free Drugs Services Initiative) | 2. Increased availability of drugs and diagnostics at public health facilities | 2.1. Increase in annual footfalls (no. of OPD and IPD) in public health facilities | 5% increase in annual footfalls (no. of OPD & IPD) in public health facilities in FY 2019-20 as compared to FY 2018-19 (HMIS) |
| | 3. Implementation of NHM Free Diagnostics Services Initiative at the public health facilities | 3.1 Number of States implementing Free Diagnostics Services Initiative | 33 States/UTs (As on 31 st March 2019, 31 States/UTs have implemented the Free Diagnostics Services Initiative) | 3. Improved utilization of public health facilities | 3.1 Reduction in OOPE on health in public health facilities (proxy- child birth) | 5% reduction in OOPE on health (proxy- child birth; Target- Rs 707.31 ²⁴) on |

²⁴ *Calculation basis for 5% reduction in OOPE during child birth in public health facilities in FY 2019-20: Target: Rs 707.31 (average OOPE during child birth as per MCTFC report in FY 2018-19 multiplied by 0.95 (Rs.744.54 x 0.95). Baseline for 2018-19 figure has been calculated by making 5% reduction in average OOPE during child birth in 2017-18 i.e. Rs.783.73, since, currently, data is available for 2017-18 from MCTFC).

| FINANCIAL OUTLAY (Rs in Cr) 2019-20 | OUTPUT 2019-20 | | | OUTCOME 2019-20 | | |
|--|---|--|--|--|---|---|
| | Output | Indicators | Targets 2019-20 | Outcome | Indicators | Targets 2019-20 |
| | | | | | | account of free drugs and diagnostics in FY 2019-20 as compared to FY 2018-19 |
| | 4. PHCs functioning as per IPHS norms | 4.1 Number of PHCs functioning as per IPHS norms | 10% increase in number of PHCs functioning as per IPHS norms in FY 2019-20 as compared to FY 2018-19 {Number of PHCs functioning as per IPHS norms on 31.03.2019 (3052 as per RHS 2018) multiplied by 1.1 = 3357, increase of 305 PHCs} | - | - | - |
| | 5. NQAS/ LaQshya certified public health facilities | 5.1 Number of NQAS/ LaQshya certified public health facilities | 50% increase in number of NQAS/ LaQshya certified public health facilities in FY | 4. Strengthening of public health facilities to provide quality healthcare services Improved utilization of NQAS/ LaQshya certified public health facilities | 4.1 Increase in annual footfalls (no. of OPD and IPD) in NQAS/ LaQshya certified public | 10% increase in annual footfalls |

| FINANCIAL OUTLAY (Rs in Cr) | OUTPUT 2019-20 | | | OUTCOME 2019-20 | | |
|--|--|--|---|---|--|--|
| | Output | Indicators | Targets 2019-20 | Outcome | Indicators | Targets 2019-20 |
| 2019-20 | | | 2019-20 as compared to FY 2018-19 (No. of NQAS/ LaQshya certified public health facilities as on 31.03.2019 multiplied by 1.5) | and FRUs | health facilities and FRUs | (no. of OPD & IPD) in NQAS/ LaQshya certified public health facilities and FRUs in FY 2019-20 as compared to FY 2018-19 (HMIS) |
| | 6. Operationalization of First Referral Units (FRUs) | 6.1 Number of FRUs operational | Number of FRUs operationalized as on 31.03.2019 plus 50 | 5. Improved access to emergency obstetric care services | 5.1 Increase in number of FRUs providing access to emergency obstetric care services | 50 additional FRUs providing access to emergency obstetric care services |
| | 7. Dialysis sessions held under free dialysis services | 7.1 % increase in number of dialysis sessions in public health facilities | 10% increase over previous year in dialysis Sessions held under Free Dialysis Services | 6. Patients receiving free dialysis care | 6.1 Percentage increase in Patients receiving free dialysis care | 10% increase in Patients receiving free dialysis care |
| ii) RCH flexipool including Routine Immunization Programme, Pulse Polio Immunization Programme, National Iodine Deficiency Disorders control Programme etc. | | | | | | |
| | 1. Increase in number of PW(Pregnant women) who received 4 ANC's from year 2017-18 | 1.1. % of pregnant women who received 4 ANC's out of total ANC's Registered. | 2% increase from 2018-19 | 1. Reduction of MMR to 100 by 2022 | 1.1. Maternal Mortality Ratio (MMR) | 100 by 2020 |

| FINANCIAL OUTLAY (Rs in Cr) | OUTPUT 2019-20 | | | OUTCOME 2019-20 | | |
|-----------------------------------|--|--|--|--|---|--|
| | Output | Indicators | Targets 2019-20 | Outcome | Indicators | Targets 2019-20 |
| 2019-20 | 2. Increase per year in SBA deliveries from 2016-17-(67%) | 2.1. % of SBA (Skill Birth Attendant) deliveries to total ANC's registered | 1% increase from 2018-19 | 2. Reduction of MMR to 100 by 2022 | 2.1. Maternal Mortality Ratio (MMR) | 100 by 2020 |
| | 3. Increase in Full Immunization Coverage to 90 | 3.1. Full Immunization Coverage (FIC) | 5 % Increase in FIC in the current year, as compared to baseline year NFHS- 4. | 3. Increase in Full Immunization Coverage to 90% | 3.1. Under Five Mortality Rate (U5MR) | 33 per 1000 live births by 2020 |
| | 4. Increase in modern method contraceptive prevalence rate (mCPR) | 4.1. Use of Modern methods of contraceptive MIS QPR | 0.3% increase from baseline | 4. Reduction in Total Fertility Rate to 2.1 by 2020 | 4.1. Total Fertility Rate (TFR) | 2.2 |
| | (iii) National Iodine Deficiency Disorders Control Programme (NIDDCP) | | | | | |
| | 1. Review of implementation of NIDDCP | 1.1. No. of States/UTs Reviewed for Programme implementation | 20 States/UTs to be reviewed | 1. Improvement in quality of implementation of NIDDCP in all States/ UTs. | 1.1. Implementation of NIDDCP in the entire country. | NIDDCP to be implemented in all 36 States/UTs in the country |
| | 2. Monitoring of availability and consumption of adequately iodized salt in all States/UTs | 2.1. Availability of adequately Iodized salt in the country (>30 ppm at production level, | Production of adequately Iodized salt (>30ppm) more than 60 Lakh Metric Tonnes and supplied to all State/UTs | 2. Enhancement of availability of adequately iodized salt in the States/UTs and its consumption by the community | 2.1. Iodized salt conforming to Standards (iodine content > 15 ppm) consumed by community at National/ State level. | Consumption of adequately Iodized salt (>15ppm) by at least 85% population in the country. |

| FINANCIAL OUTLAY (Rs in Cr) 2019-20 | OUTPUT 2019-20 | | | OUTCOME 2019-20 | | |
|---|---|--|--------------------|---|--|--------------------|
| | Output | Indicators | Targets 2019-20 | Outcome | Indicators | Targets 2019-20 |
| | | >15ppm at consumption level | | | | |
| iii. Disease Control Programme | | | | | | |
| (a) National Vector Borne Diseases Control Programme | | | | | | |
| | 1. Malaria: Reduction in number of cases | 1.1 Percentage reduction in number of cases as compared to corresponding period in the previous year | 12% reduction | 1. Malaria: Reduction in API | 1.1. Percentage reduction in API at national level | 12% reduction |
| | 2. Kala azar: Reduction in PKDL cases | 2.1 Percentage reduction in PKDL cases as compared to previous year | 50% reduction | 2. Kala azar: Kala azar elimination | 2.1. Reduction in Number of endemic blocks reporting >1 KA case/10000 population at Block level. | 54 blocks |
| | 3. Japanese Encephalitis (JE) / Coverage of JE in Routine immunization at the national level | 3.1 Percentage of population covered under routine immunization | 90% | 3. JE: Reduction in JE cases | 3.1. Percentage reduction in JE cases | 20% reduction |
| | 4. Lymphatic Filariasis: Protect the population by Mass Drug Administration (MDA) in LF Endemic Districts | 4.1 No. of LF endemic Districts observing MDA in eligible population | 140 districts | 4. Lymphatic Filariasis Stop MDA in Endemic Districts through TAS(Transmission Assessment: Survey) verification | 4.1. Number of LF Endemic Districts achieved Mf Rate <1% verified by TAS | 22 districts |

| FINANCIAL OUTLAY (Rs in Cr) 2019-20 | OUTPUT 2019-20 | | | OUTCOME 2019-20 | | |
|--|---|---|--------------------------------|--|---|---|
| | Output | Indicators | Targets 2019-20 | Outcome | Indicators | Targets 2019-20 |
| | b.) National Viral Hepatitis Control Programme | | | | | |
| | 1. Hepatitis C - Functional labs reporting under the program | 1.1. No of serological tests done for diagnosis of viral hepatitis C | 100000 | 1. Free treatment of hepatitis C available | 1.1. No of new patients completed treatment of HCV | 45,000 |
| | 2. Hepatitis C - Functional treatment sites reporting under the program | 2.1. No of new patients initiated on treatment of hepatitis C | 50000 | - | - | - |
| | 3. Hepatitis B- Functional labs reporting under the program | 3.1. No of serological tests done for diagnosis of viral hepatitis B | 100000 | 3. Free treatment of hepatitis B available | 3.1 No of patients who put on treatment continuing on treatment | 1000 |
| | 4. Hepatitis B-Functional treatment sites reporting under the program | 4.1. No of new patients initiated on treatment of hepatitis B | 1000 | 4. Enhanced coverage of birth dose hepatitis B vaccine | 4.1 % coverage birth dose hepatitis B vaccine | ≥ 75% of live births |
| | (c) National Leprosy Eradication Programme | | | | | |
| | 1. Decline in percentage of Grade II Disability (G2D) cases among new cases | 1.1. Reduction in percentage of detection of new Grade II (G2D) disability cases among new cases at the national level | To be reduced to 2.5% or below | 1. Elimination of Grade II disability (G2D) due to leprosy | 1.1. Grade II disability (G2D) per million population at national level | To be reduced to 2.25 case per million population or below. |

| FINANCIAL OUTLAY (Rs in Cr) | OUTPUT 2019-20 | | | OUTCOME 2019-20 | | |
|--|--|--|---|---|---|-----------------|
| | Output | Indicators | Targets 2019-20 | Outcome | Indicators | Targets 2019-20 |
| 2019-20 | | | | | | |
| (d) Revised National Tuberculosis Control Programme (RNTCP) | | | | | | |
| | 1. Increase in TB case notification | 1.1. Percentage increase in TB case notification (Public & Private) from 2018 | 8% 23.22 Lakh new cases | 1. Successful treatment of patients detected in 2018 | 1.1. Percentage of patients whose outcomes are successful (among those whose outcomes are reported) | >85% |
| | 2. Expansion of rapid molecular diagnostics for TB | 2.1. Number of blocks with rapid molecular diagnostics | 1500 | 2. Increased detection of drug resistant TB cases | 2.2. Percentage increase in DR-TB cases from 2018 | 15% |
| | | 2.3. % of eligible TB patients tested for Rifampicin resistance | 70% | | | |
| (e) Integrated Disease Surveillance Programme (IDSP) | | | | | | |
| | 1. Improved capacity of Districts to detect and respond to disease outbreaks | 1.1. District Public Health Labs (DPHLs) strengthened for diagnosis/testing of epidemic prone diseases | 300 DPHLs strengthened for diagnosis/testing of epidemic prone diseases | 1. Laboratory confirmation of outbreak prone diseases under IDSP | 1.1. Number of Laboratory generating L (Laboratory) form under IDSP | 70% |
| iv) Non Communicable Disease Programme | | | | | | |
| a) National Programme for Prevention and Control of Cancer, diabetes, Cardiovascular diseases and Stroke (NPCDCS) | | | | | | |
| | 1. Additional NCD-Clinics to be set up at District Hospitals. | 1.1. NCD Clinics to be set up at District | Additional 50 NCD-Clinics to be set up at District Hospitals | 1. Relative reduction in overall mortality from Cardiovascular diseases | 1.1. Relative reduction in mortality. | 10% |

| FINANCIAL OUTLAY (Rs in Cr) | OUTPUT 2019-20 | | | OUTCOME 2019-20 | | |
|--|---|---|---|--|--|-----------------|
| | Output | Indicators | Targets 2019-20 | Outcome | Indicators | Targets 2019-20 |
| 2019-20 | | Hospitals. | | cancer, diabetes, chronic respiratory diseases by 2020 (baseline of 2010) | | |
| | 2. Additional NCD clinics to be set up at CHCs. | 2.1. NCD Clinics to be set up at CHCs. | Additional 300 NCD-Clinics to be set up at CHCs | | | |
| | 3. Screening for High Blood pressure & High Blood Sugar. | 3.1. No. of Persons Screened for High blood pressure & High Blood Sugar - 10% increase over last year | Screening for High blood pressure & High Blood Sugar 10% increase over last year. | 4. Early detection of High Blood Pressure & High Blood Sugar | 2.1. Screened persons diagnosed with High Blood Pressure & High Blood Sugar | * |
| b. National Mental Health Programme | | | | | | |
| | 1. Provision of Mental Health services under District Mental Health Programme (DMHP) | 1.1. Number of districts with a District Mental Health Programme | 630 | 1. Improved coverage of Mental Health Services | 1.1. Increased registrations of people with mental disorders at District Mental Health Units | 5% |
| | | 1.2. Number of District Mental Health Units operationalized | 590 | | | |
| c. National Blindness Control Programme | | | | | | |
| | 1. Eye care services under NPCB&VI provided at primary, secondary at District level and below level | 1.1. Cataract Surgeries | 67 lakhs cataract surgeries | 1. Reduction in cases of blindness due to cataract, refractive errors and other eye diseases including glaucoma by taking appropriate initiatives. | 1.1. Reduction in prevalence of blindness | * |

| FINANCIAL OUTLAY (Rs in Cr) | OUTPUT 2019-20 | | | OUTCOME 2019-20 | | |
|--|---|---|--------------------------|---|--|---|
| | Output | Indicators | Targets 2019-20 | Outcome | Indicators | Targets 2019-20 |
| 2019-20 | | | | Improvement in surgical skills and quality. | | |
| | | 1.2. Collection of donated eyes for corneal transplantation | 70,000 Cornea collection | 2. Increase in number of trained Medical Officers and PMAO | 2.1. Number of Medical officers and ophthalmic assistants trained | 5000 (4000 Medical officers and 1000 ophthalmic assistants) |
| 1.3. Number of sensitization training sessions for trachoma elimination in previously endemic States | 250 Training sessions (for medical officers and Para medical ophthalmic assistants) | | | | | |
| d. National Programme for Health Care of Elderly | | | | | | |
| | 1. Provision of primary and secondary Geriatric health care services at District Hospital and below | 1.1. No. of District Hospitals with geriatric OPD services | 425 | 1. Geriatric patients provided treatment at District Hospitals and CHCs | 1.1. Percentage increase in number of geriatric patients imparted geriatric OPD, In -patient care, physiotherapy and laboratory services in district hospitals | 10% |

| FINANCIAL OUTLAY (Rs in Cr) 2019-20 | OUTPUT 2019-20 | | | OUTCOME 2019-20 | | |
|--|--|---|--------------------|---|---|---|
| | Output | Indicators | Targets 2019-20 | Outcome | Indicators | Targets 2019-20 |
| | | 1.2 Number of DH with at least 10beds reserved for elderly patients | 425 | | 1.2. Percentage increase in the number of geriatric patients imparted geriatric OPD, Physiotherapy services in CHCs | 10% |
| | | 1.3 Number of District Hospitals with physiotherapy services | 425 | | | |
| | | 1.4 Number of district hospitals with laboratory services | 425 | | | |
| | | 1.5 No of CHCs with geriatric OPD services | 1200 | | | |
| | | 1.6 No. of CHCs with geriatric physiotherapy services | 1200 | | | |
| | 2. Provision of tertiary Geriatric health care services at District Hospital and below | 2.1. Establishment of regional geriatric centers in selected medical colleges | 19 | 2. Provision of geriatric OPD, 30 bedded ward, research activities, imparting training. Development of training material and creation of infrastructure to enable 02 PG seats in geriatric medicine | 2.1. Number of beds in RGCs | 500 (cumulative) |
| | | | | | 2.2. Number of PG seats in geriatric medicine | 0 (MCI has rejected the proposals of two RGC's for PG seats in 2019-20) |
| | 3. Provision of tertiary Geriatric | 3.1. Establishment of NCA at | 2 | 2. Each NCA will have provision of geriatric | 3.1. Number of beds in NCA | 100 |

| FINANCIAL OUTLAY (Rs in Cr) 2019-20 | OUTPUT 2019-20 | | | OUTCOME 2019-20 | | |
|---|---|---|--|---|--|--------------------|
| | Output | Indicators | Targets 2019-20 | Outcome | Indicators | Targets 2019-20 |
| | health care services at NCA | AIIMS Delhi, and MMC, Chennai | | healthcare delivery with specialty OPD, 200 beds, teaching and training facilities for health professionals, research activities, development of 15 PG seats in geriatric medicine | Chennai | |
| | | | | | 3.2. Number of PG seats in geriatric medicine | 0 |
| | e. Tobacco Control Programme & Drug De-addiction Programme | | | | | |
| | 1. Increase in availability of Tobacco Cessation Services available | 1.1. Additional No. of districts with Tobacco Cessation Centres | 60 | 1. Improved access for Tobacco Cessation Services | 1.1. No. of People availed tobacco cessation services in 2019-20 | 13,00,000 |
| 2. Increase in facilities for treatment of Drug Addiction | 2.1. No. of new drugs dependence treatment centre with IPD facilities | 3 | 2. Improved access to drug dependence treatment services | 2.1. No. of people availed treatment facilities in 2019-20 | New Registration =40,000 Follow-up cases=2,00,0 00 IPD=2500 | |
| | 2.2. No. of new Drug Treatment Clinics | 10 With OPD facilities | | | | |

* Nature of indicator is not amenable for fixing numeric targets

10. National Urban Health Mission - Flexible Pool (CSS)

| FINANCIAL OUTLAY (Rs in Cr) | OUTPUT 2019-20 | | | OUTCOME 2019-20 | | |
|--|---|--|--|--|--|--|
| 2019-20 | Output | Indicators | Targets 2019-20 | Outcome | Indicators | Targets 2019-20 |
| 950.00 | 1. Improving access to Healthcare in Urban India | 1.1. Number of UPHCs and UCHCs providing comprehensive primary health care services with adequate staff. | 25000 PHCs including urban PHCs & Sub Centres to be providing comprehensive primary health care services | Improved access to quality healthcare in Urban India | Percentage increase in annual OPD in Public Health facilities. | 5% increase from the previous financial year |
| | | 1.2. Number of deliveries carried out at public health facilities in urban India | 5% increase from previous year | | | |
| | 2. Providing quality healthcare services in Urban India | 2.1. Number of women getting at least 4 ANC visits at all Urban Health Facilities | 2% increase from the previous year | Reduction in Maternal Mortality Ratio (MMR) | Maternal Mortality Ratio (MMR) | Under NHM |
| | | 2.2. Number of children getting full immunization at all Urban Health Facilities | 2% increase from the previous year | Reduction in Infant Mortality Ratio (IMR) | Infant Mortality Ratio (IMR) | Under NHM |
| | | 2.3. Number of UHNDs (Urban Health & Nutrition days) Outreach/Special Outreach conducted by UPHCs | 2% increase from the previous year | - | - | - |

11. Human Resources for Health and Medical Education (CSS)

| FINANCIAL OUTLAY (Rs in Cr) | OUTPUT 2019- 20 | | | OUTCOME 2019-20 | | |
|-----------------------------------|--|---------------------------|----------------|---|---|--|
| | 2019-20 | Output | Indicators | Targets 2019-20 | Outcome | Indicators |
| | a. District Hospitals - Upgradation of State Govt Medical Colleges (PG seats) | | | | | |
| 4250 | 1. District Hospitals Upgradation of State Govt - Medical Colleges (PG seats) | 1.1 Number of PG seats | 1000 PG seats | 1. To increase the availability of specialist doctors | 1.1. No. of PG seats created ¹²⁵ by upgrading District Hospitals | 1000 PG seats |
| | | | | | 1.2. Total number of PG seats overall | Permission for PG seats/ courses is given as per statutory provisions. Currently there are approx. 45,000 PG seats in the country including DNB, INIs, CPS |
| | | | | | 1.3. Total number of enrolled PG students overall | * |
| | b. Strengthening of Govt Medical Colleges (UG Seats) and Central Govt Health Institutions | | | | | |
| | 1. Strengthening of Govt Medical Colleges (UG Seats) and Institutions | 1.1. MBBS seats under 10A | 800 MBBS seats | 1. To increase the availability of doctors | 1.1. No. of MBBS seats created ²⁶ | 800 MBBS seats |

²⁵ The creation of PG and UG seats is a time consuming process and allowed under Section 10A of IMC Act, 1956 after completion of all formalities by the concerned colleges.

²⁶ Therefore, it is not feasible to provide this information in advance

| FINANCIAL OUTLAY (Rs in Cr) | OUTPUT 2019-20 | | | OUTCOME 2019-20 | | | |
|--|----------------|---|---|---------------------|--|---|---|
| | 2019-20 | Output | Indicators | Targets 2019-20 | Outcome | Indicators | Targets 2019-20 |
| | | Central Govt Health | | | | 1.2. Total number of MBBS seats | Permission for MBBS seats is given as per statutory provisions. Currently there are 70,412 MBBS seats in the country. |
| | | | | | | 1.3. Total number of enrolled MBBS students overall | .* |
| c. Establishment of New Medical Colleges (Upgrading District Hospitals) | | | | | | | |
| | | 1. Establishment of New Medical Colleges (Upgrading District Hospitals) | 1.1. Number of new Medical Colleges added under the scheme | 15 Medical Colleges | 1. To increase the availability of medical seats | 1.1. No. of UG seats added under the scheme | <ul style="list-style-type: none"> • 15 Medical Colleges • 1500 seats • Tertiary level services • Increased availability of medical seats |
| d. Upgradation/strengthening of Nursing Services (ANM/GNM) | | | | | | | |
| | | 1. To make 40 ANM/ GNM schools functional. To provide financial assistance to the State Government for establishment of ANM/GNM Schools | 1.1. To provide financial assistance to the State Government for establishment of ANM/GNM | 25 ANM/GNM Schools | 1. To increase the number of nurses for healthcare | 1.1. Operationalization of ANM/ GNM Schools | 50 ANM/GNM Schools to be operationalized |

| FINANCIAL OUTLAY (Rs in Cr) | OUTPUT 2019-20 | | | OUTCOME 2019-20 | | | |
|-----------------------------------|--|--|--|--|---------------------------------|-----------------------|--------------------|
| | 2019-20 | Output | Indicators | Targets 2019-20 | Outcome | Indicators | Targets 2019-20 |
| | | | Schools Number of ANM/ GNM School functional | | | | |
| | e. Setting up of State Institutions of Para-Medical Sciences in States and Setting up of Colleges of Para-medical Education | | | | | | |
| | 1. Creation of UG& PG Seats in Allied Health stream | 1.1. UG&PG Seats in allied health stream | 130 UG & PG Seats | 1. To increase the availability of Allied Health Professionals | 1.1. UG/PG seats creation | 130 UG/PG seats | |

*Target for this indicator cannot be fixed since, it is a demand driven scheme

12. Ayushman Bharat – Pradhan Mantri Jan Arogya Yojana (AB - PMJAY)(CSS)

| FINANCIAL OUTLAY (Rs in Cr) | OUTPUTS 2019-20 | | | OUTCOME 2019-20 | | |
|-----------------------------------|----------------------------------|--|------------------------|---|---|------------|
| | 2019-20 | Output | Indicators | Targets 2019-20 | Outcome | Indicators |
| 6400.00 | 1. Hospital Admissions | 1.1. Hospital admission (Cumulative) | 50 lakhs (approx..) | 1. Reduction in health expenditur e | 1.1 Proportion of households incurring catastrophic health expenditure | * |
| | 2. Beneficiary Identification | 2.1. Estimated number of golden cards issues to individuals beneficiaries (Cumulative) | 5 Crores (approx) | | 1.2 Percentage of out of pocket health expenditure incurred by beneficiaries | |
| | 3. Claim Payment | 2.2. Claims to be settled within 30 days after submission of claims | 4000 Crore | | 1.3 Average out of pocket expenditure incurred by beneficiaries | |
| | 4. Hospital Empanelment | 3.1. Total number of Public and Private Hospitals emplaneled | 16,500 | | | |

* This is a recently launched scheme

13. Tertiary Care Programs (CSS)

| FINANCIAL OUTLAY (Rs in Cr) | OUTPUT 2019- 20 | | | OUTCOME 2019-20 | | |
|-----------------------------------|---|--|---|--|--|--|
| | 2019-20 | Output | Indicators | Targets 2019-20 | Outcome | Indicators |
| | a. National Mental Health Programme | | | | | |
| | 1. Improved Coverage of Mental Health Services | 1.1 Number of students graduating with a PG in mental health specialty in 2019-20 | 1211 | 1. Improved availability of mental health professionals | 1.1 Increased availability of mental health professionals | 2% |
| | b. Assistance for Capacity Building of Trauma Centres (1. Trauma Centres,; 2. Prevention of Burn Injury) | | | | | |
| 550 | 1. Making identified Trauma care facilities (Level I, II, III) functional | 1.1. Number of Trauma Care Facilities made functional (Level I, II, III) | 10 more TCFs will be made functional | 1. Strengthened Trauma Care Facilities and burn units for enhanced quality care to trauma and burn victims | 1.1. Provision of quality services to the victims of trauma by reducing deaths and disabilities | Provision of quality services in 10 TCFs |
| | 2. Developing Burn Units in Tertiary Health Care Institutes. | 2.1. Number of Burn units developed out of total to be established | 10 more burn units will be developed and made functional | | 1.2. Provision of quality services to the victims of Burn injuries by reducing deaths and disabilities | Provision of quality services in 10 Burn Units |
| | 3. Developing National Injury Surveillance Trauma Registry and Capacity Building Centre | 3.1. National Injury Surveillance Trauma Registry and Capacity Building Centre made functional | National Injury Surveillance Trauma Registry and Capacity | 1.3. Establishment of burns registry in hospitals | 15 Hospitals | |

| c. National Programme for Health Care of Elderly | | | | | |
|---|---|-------------|---|---|--|
| 1. Provision of tertiary geriatric care services at Regional Geriatric Centres | 1.1. Establishment of Regional Geriatric Centres in the selected medical colleges | 19 | 1. Provision of geriatric OPD, 30 bedded ward, research activities, imparting training, development of training material and creation of infrastructure to enable 02 PG seats in geriatric medicine | 1.1. Beds in the RGCs | 530 cumulative |
| | | | | 1.2. Number of PG seats in Geriatric medicine | 0 (MCI has rejected the proposals of two RGCs for PG seats in 2019-20) |
| 2. Provision of tertiary geriatric care services at NCA Development of training | 2.1. Establishment of NCA at AIIMS Delhi and MMC, Chennai | 2 | 2. Each NCA will have provision of geriatric healthcare delivery with specialty OPD, 200 beds, teaching and training facilities for health professionals, research activities, development of 15 PG seats in geriatric medicine | 2.1. Number of beds in NCA | 200 |
| | | | | 2.2. Number of PG seats in Geriatric medicine | 5 |
| d. National Programme for Control for Blindness | | | | | |
| 2.1. Strengthening of Regional Institutes of Ophthalmology (RIOs), Central Government Hospitals and Medical Colleges of States, Training of Eye | 1.1. No. of Training session for Eye Surgeons | 20 training | 1. Increase in number of trained eye surgeons | 1.1. No. of eye surgeons trained | 20 eye surgeons trained for cataract surgery. |

| | | | | | |
|--|---|---|--|---|---|
| Surgeons, Supply of MK medium (corneal storage medium) to various eye banks in the country | | | | | |
| 2.2. Number of sensitization training sessions for trachoma elimination in previously endemic states for Trachoma | 2.1. Training sessions of State & District Programme officers and Ophthalmologists | 14 trainings | 2. Increase in number of trained SPOs and Ophthalmologists | 2.1. Number of State & District Programme Officers and Ophthalmologists | 250 State & District Programme Officers and Ophthalmologists |
| e. Tele medicine | | | | | |
| 1. National Medical College Network (NMCN): Availability of Doctors for Specialist Consultation, availability of ICT infrastructure for Tele-Education | 1.1. Number of Medical Colleges with Tele- Medicine, Tele- Education Infrastructure | 1000 Lectures for continuous Medical Education (CME), 100 Live Surgery transmission over National Medical College Network (NMCN) from 50 Medical Colleges. Providing Tele- education service to 5000 students of these 50 colleges and online streaming on NMCN Website for students from other Medical Colleges. | 1. Improved health care service delivery, accessibility and affordability Adoption of Tele- Education services in Medical Colleges by Students | 1.1. Number of students utilizing tele-education services in medical colleges | Availability of e- Content for approximately 1,00,000 medical students of Govt. Medical Colleges for anytime anywhere access, self paced learning, availability of live surgery video and lectures, a 2. Short term courses for skill enhancement of Field level functionaries such as ASHA, ANMs, etc. and continuous Medical Education (|

| | | | | | |
|--|---|---|--|--|-------------------------------------|
| <p>2. Availability of eLearning content for Students/Doctors</p> | <p>2.1. Number of Tele Consultations and Lectures over Tele Education service</p> | <p>Development of Online Medical Education Portal for Students with online/offline lectures and short term courses for field level functionaries.</p> | | | <p>CME) of Field level doctors.</p> |
|--|---|---|--|--|-------------------------------------|

| f. Tobacco Control & Drugs De-addiction Programme | | | | | |
|--|---|---|--|---|---|
| 1. Increase in availability of Tobacco Cessation Services | 1.1. Additional No. of districts with Tobacco Cessation Centres | 60 | 1.Improved access for Tobacco Cessation services | 1.1 No. of People avail tobacco cessation services in 2019-20 | 13,00,000 |
| 2. Increase in facilities for treatment of drug addiction | 2.1. No. of new drug dependence treatment centers with IPD facilities | 3 | 2. Improved access to drug dependence treatment services | 1.1 No. of people who avail treatment services in 2019-20 | New Registration=40,000 Follow-up cases=2,00,000 IPD=2,500 |
| | 2.2. Number of new Drug Treatment Clinics with OPD services | 10 | | | |
| g. NPCDCS | | | | | |
| 1. Approval for Setting up of State Cancer Institutes (SCI) | 1.1. Setting up of State Cancer Institutes | Approval for setting up of State Cancer Institute-4 Nos | 1. Increase in availability of Radio therapy machines | 1.1. Availability of Radio therapy machines | Addition of radiotherapy machines in public sector in health care Institutions. |
| | 1.2. Number of new drug treatment clinical with OPD services | 10 | | | |