NATIONAL HEALTH MISSION

TAMIL NADU

51st EXECUTIVE COMMITTEE MEETING

– 2026 –

Date : 17.07.2026

Venue :

4th Floor, Conference Hall,
Health & Family Welfare Department,
Namakkal Kavignar Maligai,
Secretariat, Chennai - 600 009.

PART B

PART - B		
Annexures		**Page No**
I	**Annexure – I:** Copy of the Minutes of the 50th Executive Committee Meeting	1
II	**Annexure – II:** Action Taken Report on 50th Executive Committee Meeting	13
III	**Annexure – III:** Government Orders related to the schemes received after 50th Executive Committee Meeting	27
IV	**Annexure – IV:** Adoption of Proposals approved by the Executive Sub-Committee subsequent to 50th Executive Committee Meeting	158
V	**Annexure – V:** Record of Proceedings for FY 2026-27	195

Annexure – I

Copy of the Minutes of the 50th Executive Committee Meeting

NATIONAL HEALTH MISSION – TAMIL NADU

Minutes of the 50th Executive Committee Meeting

The 50th Executive Committee meeting of the National Health Mission – Tamil Nadu was held under the Chairmanship of Dr. P. Senthilkumar, I.A.S., Additional Chief Secretary to Government, Health and Family Welfare Department on 06.02.2026 at 3.00 P.M on the 4th Floor, Namakkal Kavingnar Maaligai, Secretariat.

The following members attended the meeting:

Sl. No	Name	Designation	Status in the Society
1	Dr. A. Arun Thamburaj, I.A. S	The Mission Director, National Health Mission, Chennai -6	Convener / Executive Secretary
2.	Thiru. G.K. Arun Sundar Thayalan	The Special Secretary to Government, Finance Department, Chennai – 9.	Member
3.	Dr. S. Uma, I.A.S.	The Additional Secretary to Government, Health and Family Welfare Department, Chennai-9.	Member
4.	Thiru. H. Krishnanunni, I.A.S.	The Managing Director, Tamil Nadu Medical Services Corporation, Chennai.	Member
5.	Dr. S. Vineeth, I.A.S.	The Project Director, Tamil Nadu Health Systems Reforms Program (TNHSP), Chennai-6	Member
6.	Tmt. S. Valarmathi, I.A.S.	The Additional Secretary to Government, Social Welfare Department, Lady Willingdon College Campus, Kamarajar Salai, Chennai.	Member
7.	Dr. A. Somasundaram	The Director of Public Health & Preventive Medicine, Chennai -6.	Member
8.	Dr. R. Suganthy Rajakumari	The Director of Medical Education & Research, Chennai -10.	Member
9.	Dr. D.K. Chitra	The Director of Medical and Rural Health Services, Chennai – 6.	Member
10.	Dr. V. Sathya	The Director of Family Welfare, Chennai – 6.	Member
11.	Dr. S.V. Chandra Kumar	The Project Director, Tamil Nadu State Blindness Control Society, Chennai – 8.	Member
12.	Dr. Asha Federick	State TB Officer (Adl.Dir DMS)	Member

Representatives from the following Institutions attended as members in the aforesaid Meeting:

S. No	Designation	Status in the Society
1.	The Additional Chief Secretary to Government, Planning, Development and Special Initiative Department, Chennai – 9.	Member
2.	The Additional Chief Secretary to Government, Rural Development & Panchayat Raj Department, Chennai – 9.	Member
3.	The Additional Chief Secretary to Government, Housing & Urban Rural Development &Chennai – 9.	Member
4.	The Additional Chief Secretary to Government, Municipal Administration & Water supplies Department, Chennai – 9.	Member
5.	The Principal Secretary to Government, Social Welfare and Women Empowerment Department, Secretariat, Chennai – 9.	Member
6.	The Commissioner, Greater Chennai Corporation, Chennai – 2.	Member
7.	The Commissioner of Indian Medicine and Homeopathy, Chennai-106.	Member
8.	The Project Director, Tamil Nadu State AIDS control Society, Chennai – 8.	Member
9.	The Director of Town Panchayats, MRC Nagar, Chennai-28.	Member
10.	The Director of Municipal Administration, MRC Nagar, Chennai-28.	Member
11.	The Chief Engineer (Buildings), Public Works Department, Chennai – 5.	Member

AGENDA NO: 1/50/2026

Sub: Leave of Absence

The 49th Executive Committee resolved to grant leave of absence for the following members:

1.	The Principal Secretary to Government, Municipal Administration and Water Supplies Department, Chennai-9.	Member
2.	The Joint Secretary to Government, Health and Family Welfare, Chennai-9.	Member
3.	The Secretary to Government, Adi-Dravidar & Tribal Welfare Department, Chennai-9.	Member
4.	The Director of Municipal Administration, MRC Nagar, Chennai – 28.	Member
5.	The State Representative, UNICEF office for Tamil Nadu & Kerala, Old No. 2A, New No.1, 3rd Cross St., Raja Garden, Kottivakkam, Chennai -41.	Member

AGENDA NO: 2/50/2026

Sub: Confirmation of the Minutes of the 49th Executive Committee Meeting of the National Health Mission – Tamil Nadu – Submitted for information.

DECISION POINT:

The Executive Committee confirmed the minutes of the 49th Executive Committee Meeting.

AGENDA NO: 3/50/2026

Sub: Action Taken Report (ATR) on the Minutes of the 49th Executive Committee Meeting – Submitted for information.

DECISION POINT:

The Executive Committee recorded the action taken report on the minutes of the 49th Executive Committee Meeting of National Health Mission – Tamil Nadu.

AGENDA NO: 4/50/2026

Sub: Adoption of The Government Orders related to the schemes received after 49th Executive Committee

DECISION POINT:

The Executive Committee recorded the adoption of Government Orders related to the schemes received after 49th Executive Committee Meeting.

AGENDA NO: 5/50/2026

Sub: Adoption of proposal approved by the Executive Committee after the 49th Executive Committee meeting - Submitted for Information.

DECISION POINT:

The Executive Committee recorded the adoption of proposals approved by the Executive Sub-Committee after the 49th Executive Committee meeting.

AGENDA NO: 6/50/2026

Sub: National Health Mission, Tamil Nadu – Programme Implementation Plan 2026-27 - Proposal to be sent to GOI - Submitted for Approval – Regarding

DECISION POINTS:

1. The Mission Director, National Health Mission – Tamil Nadu, is permitted to submit the State Programme Implementation Plan (PIP) for the year 2026–27 to the Ministry of Health & Family Welfare, Government of India, as approved by the Executive Committee. The component wise break-up of the budget is presented in the Table given below.

Programme/Theme	FMR Code	2026-27		
		Budget (Rs. in lakhs)	Ongoing Activities (Rs. in lakhs)	New Activities (Rs. in lakhs)
RCH Sub Total	(1-62)	37179.52	27570.22	9609.30
NDCP Sub Total	(63-86)	14412.62	13288.84	1123.78
NCD Sub Total	(87-126)	34567.27	16969.70	17597.57
HSS (U) Sub Total	(127-149)	20598.94	20451.28	147.66
HSS (R) Sub Total	(150-200)	206600.06	1961630.42	14969.66
HSS Annex Sub Total	(201-206)	16744.05	11801.84	4942.20
Grand Total		**330102.46**	**281712.30**	**48390.17**

2. The Mission Director, National Health Mission is authorized to make necessary changes in the Resource Envelope of NHM based on the directions and suggestions given by GOI during the NPCC meeting and the same shall be submitted to the Executive Committee duly thereafter.

AGENDA NO: 7/50/2026

Sub: NHM–TN – Civil Works – Proposals for construction of new hospital and allied health infrastructure buildings under various programs – Placement of proposals in the Programme Implementation Plan (PIP) for the year 2026–27 – Permission of the Executive Committee requested – Reg.

DECISION POINTS:

1. The Mission Director, National Health Mission – Tamil Nadu is permitted to place the following proposals for construction of new hospital and allied health infrastructure buildings in the Programme Implementation Plan (PIP) for the year 2026–27 as detailed below.

Abstract of Civil Works Proposed for PIP 2026–27 *(Rs. In Lakhs)*

Sl. No.	Type of Buildings / Activity	Units	Total Cost (Rs in Lakhs)	Proposed (Rs in Lakhs)
1	MCH Buildings	9	9,200.00	3,200.00
2	ANM Academic & Hostel Buildings	5	5,198.00	2,189.00
3	Additional Buildings – Sub-District Hospitals	5	4,100.00	1,640.00
4	Additional Buildings – District Hospitals	5	3,785.00	1,392.50
5	Kitchen Buildings	12	1,180.00	1,065.00

Sl. No.	Type of Buildings / Activity	Units	Total Cost (Rs in Lakhs)	Proposed (Rs in Lakhs)
6	Additional Drug Warehouses	3	1,800.00	900.00
7	TB Wards	5	530.00	530.00
8	Eye Wards	3	520.00	360.00
9	Mortuary Buildings	4	280.00	280.00
10	Staff Quarters (SN & MO)	6	220.00	220.00
11	Radiology Block	1	300.00	150.00
12	Regional Vaccine Store	1	228.80	114.40
13	DEIC Building	1	200.00	100.00
14	Laundry Facility	1	70.00	70.00
	Total	**61**	**27,611.80**	**12,210.90**

2. The Mission Director, National Health Mission – Tamil Nadu, Chennai, is permitted to establish / construct the buildings, upon approval of the Government of India, as detailed above, at the cost noted against each of them.
3. The Mission Director, National Health Mission – Tamil Nadu is permitted to remit the necessary funds to the Government Account for execution of the civil works through PWD, as per prevailing Government Orders and financial procedures.
4. The Mission Director, National Health Mission – Tamil Nadu is permitted to take up execution of the approved civil works through the Public Works Department (PWD), adopting existing NHM procedures upon approval of the PIP by the Government of India.
5. The Mission Director, National Health Mission – Tamil Nadu is permitted to send necessary proposals to the Government of Tamil Nadu for obtaining necessary Administrative and Financial Orders, wherever required, subject to approval of Government of India.
6. The Executive Committee directed the Mission Director, National Health Mission – Tamil Nadu, to ensure that the requirement for kitchen equipment is determined based on actual need, following a detailed inspection and gap analysis. The Committee also advised exploring an outsourcing model for dietary services in Government healthcare institutions catering to a higher patient load.
7. It was also directed that a committee may be constituted to standardize and define the kitchen equipment requirements for each level of healthcare facility.
8. The Executive Committee of NHM–Tamil Nadu has directed that, instead of constructing a new building for the DEIC at KGH, Chennai, the available space within the existing building may be remodelled and utilized for providing the required services.

Agenda No: 8/50/2026

Sub: NHM-TN – Procurement of Equipment and Diagnostics to Primary, Secondary and Tertiary Care Institutions through TNMSC for the year 2026-2027 – Inclusion of the Proposal in PIP 2026-2027 – Approval requested

DECISION POINTS:

1. The Mission Director, National Health Mission – Tamil Nadu is permitted to include the proposals to the tune of **Rs. 18724.65 Lakhs** towards procurement of Equipment and Diagnostics in the Programme Implementation Plan (PIP) 2026–27 for seeking necessary permission and sanction from the Government of India as given below.

Sl.No.	Activity	Total Cost (Rs. In lakhs)
1	Equipment	17,642.4
2	Diagnostics	978.32
Total Cost		**18620.72**

2. The Mission Director, National Health Mission – Tamil Nadu is permitted to undertake procurement of the approved items through the Tamil Nadu Medical Services Corporation (TNMSC) and to deposit the required funds to TNMSC for effecting the procurement and supply.

3. The Executive Committee of National Health Mission – Tamil Nadu directed the Project Director, TNHSP, to ensure the availability of Inter-Facility Transfer (IFT) services for the Government Medical College Hospitals at Thanjavur, Nagapattinam, Kallakurichi, and Pudukkottai.

4. The Executive Committee of National Health Mission – Tamil Nadu suggested that, for the establishment of new Haemodialysis Centres, a PPP model may be explored, and that their performance be centrally monitored through the Haemodialysis module of HMIS 3.0.

5. The Managing Director, Tamil Nadu Medical Services Corporation requested procurement of a new CT Scan machine for RGGGH, Chennai, to replace the existing machine which is over 10 years old. The Executive Committee directed that the Mission Director, NHM, may include a proposal for the same in the PIP 2026–27. The Committee further suggested that the existing CT Scan machine proposed for replacement at RGGGH, Chennai, may be relocated and installed in another Government Hospital where there is a requirement.

AGENDA NO: 9/50/2026

Sub: NHM – TN – Drug Proposal submitted for PIP 2026-27 – Submitted for Information – Regarding.

DECISION POINTS:

1. The Mission Director, National Health Mission – Tamil Nadu may be permitted to include the Drug proposal for **Rs. 37235.0 Lakhs** towards Procurement of Ongoing Drugs and **Rs 2329.08 Lakhs for New Drugs** in Programme Implementation Plan of 2026-2027 with the approval of EC.

2. The Mission Director, National Health Mission – Tamil Nadu, was instructed to determine the level of healthcare facilities where the Pneumococcal vaccine will be made available and to assess and finalize the vaccine requirement based on the identified need among vulnerable elderly patients, for procurement through TNMSC.

3. The Executive Committee of NHM–Tamil Nadu directed that a Standard Operating Procedure (SOP) with defined appropriate eligibility criteria and selection mechanisms shall be developed for providing targeted immunotherapy to cancer patients, ensuring that the treatment is extended only to selected priority patients.

AGENDA NO: 10/50/2026

Sub: NHM–TN - Approval for proposal of additional Human Resources - National Health Mission programmes - Programme Implementation Plan (PIP) 2026 –2027- Reg.

DECISION POINTS:

The Executive Committee instructed that the proposal related to additional Human Resources shall be discussed separately with the Finance Department.

AGENDA NO: 11/50/2026

Sub: National Health Mission – Tamil Nadu – Revision of Base salary for contract employees working under NHM-TN – Agenda submitted for approval – Reg.

DECISION POINTS:

The Executive Committee instructed that the proposal related to revision of base salary of contract employees of the NHM-TN shall be discussed separately with the Finance Department.

AGENDA NO: 12/50/2026

Sub: NHM–TN – New Activities / State Specific Initiatives – Proposals for inclusion of New Programme Activities under various components of National Health Mission – Placement of proposals in the Programme Implementation Plan (PIP) for the year 2026–27 – Permission of the Executive Committee requested – Reg.

DECISION POINTS:

1. The Mission Director, National Health Mission – Tamil Nadu is permitted to submit the proposals for New Activities / State Specific Initiatives and New Training Activities in the Programme Implementation Plan for the year 2026–27.

Abstract of Proposals for PIP 2026–27

(Rs. In Lakhs)

Category	Total No. of Activities	Total Cost Proposed
New Activities / State Specific Initiatives	63	13,030.81
New Training Activities	30	645.24
Grand Total		**13,676.05**

2. Post-NPCC approval, the Mission Director, National Health Mission – Tamil Nadu was instructed to present the proposals individually for further consideration.

3. The Mission Director, National Health Mission – Tamil Nadu, was directed that the expansion of the Fluorosis Programme to additional districts shall be done after consultation with the TWAD Board and clearly define the activities to be taken up under the scheme and to ensure that there is no overlap of activities undertaken.

AGENDA NO: 13/50/2026

Sub: NHM – TN – Continuous Ambulatory Peritoneal Dialysis (CAPD) – Procurement of CAPD Bags through TNMSC by utilizing the reimbursed funds accrued from CMCHIS for supply of CAPD Bags under MTM Scheme – Permission – Requested – Reg.

DECISION POINTS:

1. The Mission Director, NHM-TN is permitted to procure and supply CAPD bags to patients through Tamil Nadu Medical Services Corporation (TNMSC) by utilizing the CMCHIS reimbursed amount for ensuing and the forthcoming financial year.

2. The Mission Director, NHM-TN is permitted to remit the accrued interest amount to the State Government Head of Account henceforth.

AGENDA NO: 14/50/2026

Sub: NHM TN – HMIS 3.0 – Extending the implementation of HMIS 3.0 application in 475 Mobile Medical Units, 50 Labour MMU and 50 Mobile Diagnostic Units and other mobile service delivery units established under NHM - requested – Reg.

DECISION POINTS:

1. The Mission Director, NHM is permitted to implement the HMIS 3.0 application in 475 Mobile Medical Units, 50 Labour MMUs, 50 Mobile Diagnostic Units, 38 Women Wellness on wheels vehicles and other mobile service delivery units established under NHM at a cost **of Rs. 14,46,680/- (Rupees Fourteen Lakhs Forty-Six Thousand Six Hundred and Eighty only).**

2. The Mission Director NHM is permitted to develop a Mobile Application towards digitalization of the services of the Health Sub Centres and Healthcare chatbot at a total cost of **Rs. 70,80,000** including GST.

3. The Mission Director, NHM is permitted to utilize the available fund in FMR HSS-12-HMIS-195 under 2025-26 ROP for the above activities.

4. The Mission Director, NHM is permitted to engage C-DAC Chennai to pilot the AI based tool to analyse the digital X-Rays in selected MDUs at free of cost.

AGENDA NO: 15/50/2026

Sub: NHM-TN- Audit Report with Audited Accounts for the Financial Year 2024-25 - Placed before Executive Committee - reg.

DECISION POINT:

The Statutory Audited Annual Accounts of the National Health Mission - Tamil Nadu for the Financial Year 2024-25 has been recorded.

AGENDA NO: 16/50/2026

Sub: Reappointment of Statutory Auditor - M/s. Mahesh C Solanki & Associates as Statutory Auditor for State Health Society, Tamil Nadu for the year 2025-26 – Approval Requested.

Ref:
1. This office Proc. No.2942520/SHS/A3-K/2025, Dated: 17.03.2025.
2. Letter dated: 12-01-2026 of M/s. Mahesh C Solanki & Associates, Chartered Accountants, Chennai.
3. D.O No. G.27034/40/2024-25- NHM Finance dated 31.12.2025, from the Additional Secretary & MD-NHM, MoH & FW, GoI, New Delhi.

DECISION POINT:

The Mission Director, National Health Mission - Tamil Nadu is permitted to re-appoint M/s. Mahesh C Solanki & Associates, Chartered Accountants, Chennai, as Statutory Auditor for carrying out audit on the books of accounts of State Health Society and District Health Societies for the year 2025-26 for Flexible Pool for RCH & Health System Strengthening, National Health Programmes and Urban Health Mission under National Health Mission as well as COVID-l9 Emergency Response and Health System Preparedness Project (ECRP-D and PM-ABHIM for an annual fee of Rs.33,60,300/- (Rupees Thirty Three Lakh Sixty Thousand and Three Hundred only) Including TA/DA + applicable GST, with the GOI TOR of 2025-26.

The Mission Director,
National Health Mission - Tamil Nadu,
Chennai - 600 006.

The Additional Chief Secretary to Government,
Health & Family Welfare Department,
Government of Tamil Nadu,
Secretariat, Chennai – 600 009.

The Special Secretary to Government,
Finance Department,
Government of Tamil Nadu,
Secretariat, Chennai – 600 009.

Annexure – II

Action Taken Report on 50th Executive Committee Meeting

Action Taken Report – 50th Executive Committee Meeting

Agenda No	Subject	Decision Point	Action Taken
1	Leave of Absence	The Executed Committee reviewed and resolved to grant leave of absence to the members who were unable to attend the 49th EC Meeting due to official on personal reasons	Recorded
2	Confirmation of the Minutes of the 49th Executive Committee Meeting of the National Health Mission – Tamil Nadu – Submitted for information.	The Executive Committee confirmed the minutes of the 49th Executive Committee Meeting.	Recorded
3	Action Taken Report (ATR) on the Minutes of the 49th Executive Committee Meeting – Submitted for information.	The Executive Committee recorded the action taken report on the minutes of the 49th Executive Committee Meeting of National Health Mission – Tamil Nadu.	Recorded
4	Adoption of The Government Orders related to the schemes received after 49th Executive Committee.	The Executive Committee recorded the adoption of Government Orders related to the schemes received after 49th Executive Committee Meeting.	Recorded

Agenda No	Subject	Decision Point	Action Taken
5	Adoption of proposal approved by the Executive Committee after the 49th Executive Committee meeting - Submitted for Information.	The Executive Committee recorded the adoption of proposals approved by the Executive Sub-Committee after the 49th Executive Committee meeting.	Recorded
6	National Health Mission, Tamil Nadu – Programme Implementation Plan 2026-27 - Proposal to be sent to GOI - Submitted for Approval – Regarding	1. The Mission Director, National Health Mission – Tamil Nadu, is permitted to submit the State Programme Implementation Plan (PIP) for the year 2026–27 to the Ministry of Health & Family Welfare, Government of India, as approved by the Executive Committee. The component wise break-up of the budget is presented. 2. The Mission Director, National Health Mission is authorized to make necessary changes in the Resource Envelope of NHM based on the directions and suggestions given by GOI during the NPCC meeting and the same shall be submitted to the Executive Committee duly thereafter.	Recorded
7	NHM–TN – Civil Works – Proposals for construction of new hospital and	1. The Mission Director, National Health Mission – Tamil Nadu is permitted to place the	1. The approved proposals have been incorporated in the Programme

Agenda No	Subject	Decision Point	Action Taken
	allied health infrastructure buildings under various programs – Placement of proposals in the Programme Implementation Plan (PIP) for the year 2026–27 – Permission of the Executive Committee requested – Reg.	following proposals for construction of new hospital and allied health infrastructure buildings in the Programme Implementation Plan (PIP) for the year 2026–27. 2. The Mission Director, National Health Mission – Tamil Nadu, Chennai, is permitted to establish / construct the buildings, upon approval of the Government of India, as detailed above, at the cost noted against each of them. 3. The Mission Director, National Health Mission – Tamil Nadu is permitted to remit the necessary funds to the Government Account for execution of the civil works through PWD, as per prevailing Government Orders and financial procedures. 4. The Mission Director, National Health Mission – Tamil Nadu is permitted to take up execution of the approved civil works through the Public Works Department (PWD), adopting existing NHM procedures upon	Implementation Plan (PIP) 2026–27 and submitted to the Government of India. 2. Necessary proposals for issuance of Administrative and Financial Sanction, wherever applicable, are being submitted to the Government. Further, funds will be remitted to the Government account for execution of the approved civil works through the Public Works Department (PWD) as per the prevailing Government procedures. 3. A committee has been constituted to standardize and finalize the kitchen equipment requirements for each level of healthcare facility. 4. Action has been initiated to remodel the available space within the existing building at KGH, Chennai, to accommodate the

Agenda No	Subject	Decision Point	Action Taken
		approval of the PIP by the Government of India. 5. The Mission Director, National Health Mission – Tamil Nadu is permitted to send necessary proposals to the Government of Tamil Nadu for obtaining necessary Administrative and Financial Orders, wherever required, subject to approval of Government of India. 6. The Executive Committee directed the Mission Director, National Health Mission – Tamil Nadu, to ensure that the requirement for kitchen equipment is determined based on actual need, following a detailed inspection and gap analysis. The Committee also advised exploring an outsourcing model for dietary services in Government healthcare institutions catering to a higher patient load. 7. It was also directed that a committee may be constituted to standardize and define the kitchen equipment requirements for each	District Early Intervention Centre (DEIC), in lieu of constructing a new building, as directed by the Executive Committee.

Agenda No	Subject	Decision Point	Action Taken
		level of healthcare facility. 8. The Executive Committee of NHM–Tamil Nadu has directed that, instead of constructing a new building for the DEIC at KGH, Chennai, the available space within the existing building may be remodelled and utilized for providing the required services.	
8	NHM-TN – Procurement of Equipment and Diagnostics to Primary, Secondary and Tertiary Care Institutions through TNMSC for the year 2026-2027 – Inclusion of the Proposal in PIP 2026-2027 – Approval requested	1. The Mission Director, National Health Mission – Tamil Nadu is permitted to include the proposals to the tune of Rs. 18724.65 Lakhs towards procurement of Equipment and Diagnostics in the Programme Implementation Plan (PIP) 2026–27 for seeking necessary permission and sanction from the Government of India 2. The Mission Director, National Health Mission – Tamil Nadu is permitted to undertake procurement of the approved items through the Tamil Nadu Medical Services Corporation (TNMSC) and to deposit the required funds to	1. Recorded. 2. Action has been initiated in accordance with the observations of the Executive Committee. 3. Necessary action has been initiated as per the directions of the Executive Committee. 4. As suggested by the Executive Committee, an additional CT Scanner for RGGGH has been proposed in the Programme Implementation Plan (PIP) and the proposal has been approved.

Agenda No	Subject	Decision Point	Action Taken
		TNMSC for effecting the procurement and supply. 3. The Executive Committee of National Health Mission – Tamil Nadu directed the Project Director, TNHSP, to ensure the availability of Inter-Facility Transfer (IFT) services for the Government Medical College Hospitals at Thanjavur, Nagapattinam, Kallakurichi, and Pudukkottai. 4. The Executive Committee of National Health Mission – Tamil Nadu suggested that, for the establishment of new Haemodialysis Centres, a PPP model may be explored, and that their performance be centrally monitored through the Haemodialysis module of HMIS 3.0. 5. The Managing Director, Tamil Nadu Medical Services Corporation requested procurement of a new CT Scan machine for RGGGH, Chennai, to replace the existing	

Agenda No	Subject	Decision Point	Action Taken
		machine which is over 10 years old. The Executive Committee directed that the Mission Director, NHM, may include a proposal for the same in the PIP 2026–27. The Committee further suggested that the existing CT Scan machine proposed for replacement at RGGGH, Chennai, may be relocated and installed in another Government Hospital where there is a requirement.	
9	NHM – TN – Drug Proposal submitted for PIP 2026-27 – Submitted for Information – Regarding.	1. The Mission Director, National Health Mission – Tamil Nadu may be permitted to include the Drug proposal for Rs. 37235.0 Lakhs towards Procurement of Ongoing Drugs and Rs 2329.08 Lakhs for New Drugs in Programme Implementation Plan of 2026-2027 with the approval of EC. 2. The Mission Director, National Health Mission – Tamil Nadu, was instructed to determine the level of healthcare facilities where the Pneumococcal vaccine will be made available	1. Recorded. 2. The approved proposals have been incorporated in the Programme Implementation Plan (PIP) 2026–27 and submitted to the Government of India.

Agenda No	Subject	Decision Point	Action Taken
		and to assess and finalize the vaccine requirement based on the identified need among vulnerable elderly patients, for procurement through TNMSC. 3. The Executive Committee of NHM–Tamil Nadu directed that a Standard Operating Procedure (SOP) with defined appropriate eligibility criteria and selection mechanisms shall be developed for providing targeted immunotherapy to cancer patients, ensuring that the treatment is extended only to selected priority patients.	
10	NHM–TN - Approval for proposal of additional Human Resources -National Health Mission programmes - Programme Implementation Plan (PIP) 2026 –2027-Reg.	The Executive Committee instructed that the proposal related to additional Human Resources shall be discussed separately with the Finance Department.	As directed by the 50th Executive Committee, the proposal for additional Human Resources was discussed with the Finance Wing and incorporated in the Programme implementation Plan (PIP) 2026–27 for approval by the Government of India.

Agenda No	Subject	Decision Point	Action Taken
11	National Health Mission – Tamil Nadu – Revision of Base salary for contract employees working under NHM-TN – Agenda submitted for approval – Reg.	The Executive Committee instructed that the proposal related to revision of base salary of contract employees of the NHM-TN shall be discussed separately with the Finance Department.	1. As directed by the 50th Executive Committee, the proposal for revision of the base salary of contractual staff working under NHM was discussed with the Finance Wing and incorporated in the Programme Implementation Plan (PIP) 2026–27 for approval by the Government of India. 2. Circulation Note 5/2026 dated: 02-03-2026. (Ref.No. 9035/E/NHM/ 2021, Dated: 02.03.2026)
12	NHM–TN – New Activities / State Specific Initiatives – Proposals for inclusion of New Programme Activities under various components of National Health Mission – Placement of proposals in the Programme Implementation Plan (PIP) for the year 2026–27 – Permission of the Executive Committee requested – Reg.	1.The Mission Director, National Health Mission – Tamil Nadu is permitted to submit the proposals for New Activities / State Specific Initiatives and New Training Activities in the Programme Implementation Plan for the year 2026–27. 2.Post-NPCC approval, the Mission Director, National Health Mission – Tamil Nadu was instructed to present the proposals individually for further consideration.	1. Based on the inputs received from the TWAD Board, proposals for establishment of District Fluorosis Units in four districts, namely Erode, Krishnagiri, Salem and Vellore were incorporated in the Programme Implementation Plan (PIP) 2026-27. 2. The proposal has been approved in the Record of

Agenda No	Subject	Decision Point	Action Taken
		3. The Mission Director, National Health Mission – Tamil Nadu, was directed that the expansion of the Fluorosis Programme to additional districts shall be done after consultation with the TWAD Board and clearly define the activities to be taken up under the scheme and to ensure that there is no overlap of activities undertaken.	Proceedings (RoP) 2026–27 under FMR NCD 10.120.
13	NHM – TN – Continuous Ambulatory Peritoneal Dialysis (CAPD) – Procurement of CAPD Bags through TNMSC by utilizing the reimbursed funds accrued from CMCHIS for supply of CAPD Bags under MTM Scheme – Permission – Requested – Reg.	1. The Mission Director, NHM-TN is permitted to procure and supply CAPD bags to patients through Tamil Nadu Medical Services Corporation (TNMSC) by utilizing the CMCHIS reimbursed amount for ensuing and the forth coming financial year. 2. The Mission Director, NHM-TN is permitted to remit the accrued interest amount to the State Government Head of Account henceforth.	1. Orders have been placed through the Tamil Nadu Medical Services Corporation (TNMSC) for the procurement and supply of Continuous Ambulatory Peritoneal Dialysis (CAPD) bags at a total cost of ₹486.46 crore. Of this, ₹368.23 crore has been approved under the Programme Implementation Plan (PIP), while the remaining ₹118.23 crore will be met from the CMCHIS reimbursed funds.

Agenda No	Subject	Decision Point	Action Taken
14	NHM TN – HMIS 3.0 – Extending the implementation of HMIS 3.0 application in 475 Mobile Medical Units, 50 Labour MMU and 50 Mobile Diagnostic Units and other mobile service delivery units established under NHM - requested – Reg.	1.The Mission Director, NHM is permitted to implement the HMIS 3.0 application in 475 Mobile Medical Units, 50 Labour MMUs, 50 Mobile Diagnostic Units, 38 Women Wellness on wheels vehicles and other mobile service delivery units established under NHM at a cost of Rs. 14,46,680/- (Rupees Fourteen Lakhs Forty-Six Thousand Six Hundred and Eighty only). 2. The Mission Director NHM is permitted to develop a Mobile Application towards digitalization of the services of the Health Sub Centres and Healthcare chatbot at a total cost of Rs. 70,80,000 including GST. 3. The Mission Director, NHM is permitted to utilize the available fund in FMR HSS-12-HMIS-195 under 2025-26 ROP for the above activities. 4. The Mission Director, NHM is permitted to engage C-DAC Chennai to pilot the AI based tool	1. The scope for the Mobile Medical Unit (MMU) application has been finalized and the application development has been completed and further change management to be done. 2. The Mobile Diagnostic Unit (MDU) application has been developed by C-DAC Noida and is currently under pilot implementation at the Chennai MDU unit on a free-of-cost basis. 3. The scope for development of the Labour MMU application is under finalization. Receipt of the Labour MMU vehicle is awaited. 4. The Women Wellness on Wheels application has been developed and is under pilot implementation in

Agenda No	Subject	Decision Point	Action Taken
		to analyse the digital X-Rays in selected MDUs at free of cost.	Kancheepuram district. 5. The Health Sub Centre (HSC) application has been developed and is under pilot implementation in Namakkal district, covering approximately 112 Health Sub Centres. 6. The chatbot has been developed and had been launched by Hon'ble Health Minister on 08-07-2026. 7. C-DAC Chennai has been engaged for pilot implementation at the Chennai unit, and the study on image quality is currently in progress.
15	NHM-TN- Audit Report with Audited Accounts for the Financial Year 2024-25 - Placed before Executive Committee - reg.	The Statutory Audited Annual Accounts of the National Health Mission - Tamil Nadu for the Financial Year 2024-25 has been recorded.	1. The Statutory Audited Annual Accounts of the National Health Mission, Tamil Nadu for the Financial Year 2024–25 were placed before the Executive Committee and the same were recorded in the

Agenda No	Subject	Decision Point	Action Taken
			minutes of the 50th Executive Committee Meeting.
16	Reappointment of Statutory Auditor - M/s. Mahesh C Solanki & Associates as Statutory Auditor for State Health Society, Tamil Nadu for the year 2025-26 – Approval Requested.	The Mission Director, National Health Mission - Tamil Nadu is permitted to re-appoint M/s. Mahesh C Solanki & Associates, Chartered Accountants, Chennai, as Statutory Auditor for carrying out audit on the books of accounts of State Health Society and District Health Societies for the year 2025-26 for Flexible Pool for RCH & Health System Strengthening, National Health Programmes and Urban Health Mission under National Health Mission as well as COVID-l9 Emergency Response and Health System Preparedness Project (ECRP-D and PM-ABHIM for an annual fee of Rs.33,60,300/- (Rupees Thirty Three Lakh Sixty Thousand and Three Hundred only) Including TA/DA + applicable GST, with the GOI TOR of 2025-26.	1. As per Proc. No. 3713303/SHS/A3 -K/2026, dated 11.03.2026, M/s. Mahesh C. Solanki & Associates, Chartered Accountants, Chennai, have been re-appointed as the Statutory Auditors for carrying out the audit of the books of accounts of the State Health Society and District Health Societies for the Financial Year 2025–26, at an annual fee of ₹33,60,300/- (inclusive of TA/DA and applicable GST), in accordance with the Government of India Terms of Reference (ToR) for 2025–26.

Annexure – III

Government Orders related to the schemes received after 50th Executive Committee Meeting

NATIONAL HEALTH MISSION TN
14 JAN 2026
CHE

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ABSTRACT

National Health Mission – 15th Finance Commission Grants for Health for 2025-2026 – Construction of Additional buildings to Government Hospital, Alangudi, Pudukkottai District instead of Government Hospital Tharangambadi, Mayiladuthurai District – Execution of Works through Public Works Department – Administrative Sanction - Accorded – Amendment - Issued.

Health and Family Welfare (F1) Department

G.O.(D). No. 27

Dated: 06.01.2026
விசுவாவசு, மார்கழி–22
திருவள்ளுவர்ஆண்டு–2057

Read:-

1. G.O. (D) No.814, Health and Family Welfare (F1) Department, Dated: 15.07.2025.
2. From the Mission Director, National Health Mission, letter Ref No. HSS-CIVIOOTH/1/2025-CW-NHM-1, Dated 11.11.2025

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ORDER:-

In this circumstances reported by the Mission Director, National Health Mission in the letter second read above, the following amendment is issued to G.O. (D) No.814, Health and Family Welfare (F1.) Department, dated: 15.07.2025.

AMENDMENT

For the existing Paragraph 9 (i) (ii) of G.O. (D) No.814, Health and Family Welfare (F1.) Department, dated: 15.07.2025, the following paragraphs shall be substituted.

9 (i) accord Administrative Sanction for constructing additional building to Government Hospital Alangudi, Pudukkottai District, at a total cost of Rs.350 Lakh, Instead of Government Hospital Tharangambadi, Mayiladuthurai District, which was dropped.

S. No. (1)	District (2)	Institution (3)	Recommended Area (sq.ft) by PMC (4)	Cost Recommended by PMC (Rs In lakh) (5)
1	Coimbatore	GH Vettaikaranputhur	10,000	350
2	Dindigul	GH Pannaikadu	8,500	350
3	Dindigul	GH Pattiveeranpatti	6,000	210
4	Dindigul	GH Ayakudi	10,000	350
5	Dindigul	GH Natham	10,000	350
6	Erode	GH Kodumudi	4,500	300
7	Kanyakumari	GH Arumanai	6,000	210

8	Kanyakumari	GH Senanvilai	6,000	210
9	Karur	GH Aravakurtchi	3,000	105
10	Karur	GH Krishnarayapuram	4,000	180
11	Madurai	GH Peraiyur	10,000	350
12	Madurai	GH Sholavandan	10,000	350
13	Pudukottai	GH Alangudi	10,000	350
14	Mayiladuthurai	GH Poraiyar	10,000	350
15	Nagapattinam	GH Kilvelur	10,000	350
16	Nagapattinam	GH Karuppambalam	10,000	350
17	Namakkal	GH Vennandur	10,000	350
18	Pudukkottai	GH Karambakudi	10,000	350
19	Pudukkottai	GH Subramaniyapuram	10,000	350
20	Ramanathapuram	GH Pannaikulam	4,000	180
21	Ramanathapuram	GH Mudukulathur	15,000	550
22	Ranipet	GH Kalavai	6,000	210
23	Salem	GH Gangavalli	7,000	245
24	Salem	GH Jalakandapuram	6,000	210
25	Salem	GH Nainampatti	10,000	350
26	Sivagangai	GH Kalaiyarkoil	10,000	350
27	Tenkasi	GH Ayikudi	10,000	350
28	Thanjavur	GH Thiruvaiyaru	10,000	350
29	Thanjavur	GH Tiruvidaimarudur	6,000	210
30	Thanjavur	GH Nachiarkoil	6,000	210
31	Thanjavur	GH Tirupanandal	6,000	210
32	Thanjavur	GH Papanasam	6,000	210
33	Thanjavur	GH Aduthurai	5,000	175
34	Thiruvallur	GH Pazhaverkadu	10,000	350
35	Thoothukudi	GH Ettaiyapuram	10,000	350
36	Thoothukudi	GH Kalangudiyiruppu	10,000	350
37	Thoothukudi	GH Ottapidaram	10,000	350
38	Tiruvallur	GH Pallipattu	5,000	175
39	Tiruvallur	GH Podaddurpet	3,000	105
40	Tiruvallur	GH Uthukottai	8,000	280
41	Tiruvannamalai	GH Thanipadi	10,000	350
42	Tiruvannamalai	GH Kalasapakkam	6,000	210
43	Tiruvarur	GH Needamangalam	10,000	350
44	Tiruvarur	GH Kodavasal	10,000	350
45	Villupuram	GH Vanur	6,000	210
			Total	**13005**

(ii) The Public Works Department is permitted to construct additional buildings under the 15th Finance Commission Grants for Health for the FY 2025-26 to Government Hospital Alangudi, Pudukkottai District, at a total cost of Rs.350 Lakh, as permitted by the National and State Level Committee of the 15th Finance Commission Grants for Health.

(BY ORDER OF THE GOVERNOR)

P. SENTHILKUMAR
ADDITIONAL CHIEF SECRETARY TO GOVERNMENT

To

The Mission Director, National Health Mission, Chennai-600 006.
The Director, National Health Mission-I Division, Ministry of Health and Family Welfare, Nirman Bhavan, New Delhi-11.

The Additional Chief Secretary, Finance Department, Chennai -600 009.
The Additional Chief Secretary, Rural Development and Panchayat Raj Department, Chennai-600 009.
The Additional Chief Secretary, Public Works Department, Chennai -600 009.
The Director of Medical and Rural Health Services, Chennai - 600 006.
The Managing Director, Tamil Nadu Medical Services Corporation Limited, Chennai-600 008.
The Project Director, Tamil Nadu Health System Project, Chennai – 600 006.
The Commissioner of Rural Development and Panchayat Raj, Chennai – 600 015.
The Director, Town Panchayats, Chennai – 600 028.
The Engineer-in Chief and Chief Engineer (General), Chennai-600 005.
All Districts Collectors concerned.
All Joint Director of Health Services concerned.
The Accountant General, Chennai – 600 035 /18.
The Pay and Accounts Officer, Secretariat, Chennai – 600 009.
The Treasury Officers concerned.

Copy to:-

The Office of the Hon'ble Chief Minister, Chennai – 600 009.
The Special Personal Assistant to Hon'ble Minister (Health and Family Welfare), Chennai-600 009.
The Health and Family Welfare (Data Cell) Department, Chennai – 600 009.
SF/SC

//Forwarded / By Order//

06/1/26.

SECTION OFFICER

15.30
6/1/2026.

A2/ 1st Pg, PS

NATIONAL HEALTH MISSION TN. 20 JAN 2026 CHENNAI-600 006

ABSTRACT

National Health Mission – Tamil Nadu – Vaccines and other consumables supplied by Government of India as Kind / Commodity Grants to State Government for Routine Immunization Programme and National Tuberculosis Elimination Programme for the year 2025-2026 – Sanction and release of commensurate State Share on SNA-SPARSH platform – Orders – Issued.

Health and Family Welfare (EAP.II/1) Department

G.O.(Ms.).No.08

Dated 19.01.2026
விசுவாவசு, தை – 05
திருவள்ளுவர் ஆண்டு 2057

Read:

1. From the Additional Secretary & Mission Director (NHM), Government of India, Ministry of Health and Family Welfare, D.O. letter No.G.27034/202/2018-NHM-F[E-3195367], dated 19.08.2024.
2. G.O.Ms.No.397, Health and Family Welfare (EAP.II/1) Department, dated 10.09.2025.
3. From the Mission Director, National Health Mission-Tamil Nadu, letter No.004658-4/NHM-TN/A2/2025, dated 24.12.2025.

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ORDER:

The Government of India have approved a sum of Rs.110,42,00,000/- as Kind / Commodity Grant for the year 2025-2026 in RoP 2024-2026 in the letter first read above and supplied Commodity / Kind Grants to the State Government worth about Rs.30,27,77,000/- for the year 2025-2026 for Routine Immunization Programme under Reproductive and Child Health Project. In the Government Order second read above, the Government have sanctioned and released a sum of Rs.20,18,51,333/- as proportionate State Share against the above Kind / Commodity Grants received from the Government of India. In the letter third read above, the Mission Director, National Health Mission-Tamil Nadu has stated that sanction orders have been received from the Government of India towards Commodity/Kind Grants supplied to State Government worth about Rs.88,98,27,000/- for the year 2025-2026 for Routine Immunization Programme and National Tuberculosis Elimination Programme for the year 2025-2026 on SNA SPARSH platform as detailed below:

Sl. No.	Sanction Order & Date	Govt. of India Grant (Kind)	40% State Share
	General Component	Amount in Rupees	
1	Unique Sanction ID: NTEP/IFD/GIA/R/2025-26/179 No.Z.28015/347/2018-TB, Dated 22-10-2025	4,13,47,000/-	2,75,64,667/-

	Cartridges for CBNAAT Machines		
2	Unique Sanction ID: NTEP/IFD/GIA/R/2025-26/182 No.Z.28015/347/2018-TB, Dated 22-10-2025 **Cartridges for CBNAAT Machines & Drugs.**	2,88,75,000/-	1,92,50,000/-
3	Unique Sanction ID: NTEP/IFD/GIA/R/2025-26/185- No.Z.28015/347/2018-TB, Dated 22-10-2025 **NTEP DRUGS**	19,01,43,000/-	12,67,62,000/-
4	F.No.T.13020/02/2025- IMM(037), Dated 06-10-2025	26,60,27,000/-	17,73,51,333/-
5	F.No.Y.11030/01/2013-CC&V(Pt.II)-Part(1)-046, Dated 13-10-2025	1,61,98,000/-	1,07,98,667/-
6	F.No.T.13020/02/2025-IMM-Part(1)-(055), Dated 14-10-2025	13,89,14,000/-	9,26,09,333/-
7	F.No.T.13020/02/2025-IMM-(028), Dated 18-07-2025	3,27,38,000/-	2,18,25,333/-
	Sub-Total General	**71,42,42,000/-**	**47,61,61,333/-**
	Schedule Caste Component		
8	Unique Sanction ID:NTEP/IFD/GIA/R/2025-26/186 No.Z.28015/347/2018-TB, Dated 22-10-2025 **NTEP DRUGS**	5,41,34,000/-	3,60,89,333/-
9	F.No.T.13020/02/2025-IMM-(038), Dated 06.10.2025	6,74,76,000/-	4,49,84,000/-
10	F.No.Y.11030/01/2013-CC&V(Pt.II)-Part(1)-047, Dated 13-10-2025	41,08,000/-	27,38,667/-
11	F.No.T.13020/02/2025-IMM-Part(1)-(056), Dated 14-10-2025	3,52,35,000/-	2,34,90,000/-
12	8-F.No.T.13020/02/2025-IMM-(029), Dated 18-07-2025	83,04,000/-	55,36,000/-
	Sub-Total SCSP	**16,92,57,000/-**	**11,28,38,000/-**
	Schedule Tribe Component		
13	F.No.T.13020/02/2025-IMM-(039), Dated 06-10-2025	37,09,000/-	24,72,667/-
14	F.No.Y.11030/01/2013-CC&V(Pt.II)-Part(1)-048, Dated 13-10-2025	2,26,000/-	1,50,667/-
15	F.No.T.13020/02/2025-IMM-Part(1)-(057), Dated 14-10-2025	19,37,000/-	12,91,333/-
16	F.No.T.13020/02/2025-IMM-(030), Dated 18-07-2025	4,56,000/-	3,04,000/-
	Total STSP	**63,28,000/-**	**42,18,667/-**
	Grand Total	**88,98,27,000/-**	**59,32,18,000/-**

2. The Mission Director, National Health Mission-Tamil Nadu has further stated that the Principal Accountant General-Tamil Nadu has booked the receipt of Commodity / Kind Grants for the amount received from the Government of India. He has further stated that the Additional Director of Medical and Rural Health Services Tuberculosis and State TB Officer, Chennai has certified for having received the commodity grant worth Rs.31,44,99,000/- from Government of India towards National Tuberculosis Elimination Programme for the year-2025-2026 and the Director of Public Health and Preventive Medicine, Chennai has certified for having received the commodity grants worth Rs.57,53,28,000/- towards Routine Immunization Programme for the year 2025-2026. The proportionate 40% State Share against the Kind / Commodity Grants received from Government of India worth about Rs.88,98,27,000/- works out to Rs.59,32,18,000/-

3. The Mission Director, National Health Mission-Tamil Nadu has also stated that the Government of India instructed to create New State Linked Scheme (SLC) code for commodity grants and infrastructure maintenance grants. Based on that a new SLS code was created as TN387 and mapped in PFMS from Government of India. The Government of India have released the Commodity Grants / Kind Grants under SNA SPARSH. He has therefore, requested to open three new Expenditure heads of account towards State Share for the above Scheme and map the same under newly created SLS code TN387 so as to claim the State share in the ratio of (00.100) under SNA SPARSH and sanction and release a sum of Rs.59,32,18,000/- for the drawal of State Share on SNA-SPARSH platform as detailed below:

Component	Amount
General	Rs.47,61,61,333/-
Scheduled Caste	Rs.11,28,38,000/-
Scheduled Tribe	Rs.42,18,667/-

4. The Government, after careful examination, have decided to accord sanction for a sum of Rs.59,32,18,000/- (Rupees fifty nine crore thirty two lakh and eighteen thousand only) towards proportionate State Share against the Kind / Commodity Grants received from Government of India worth about Rs.88,98,27,000/- for Routine Immunization Programme and National Tuberculosis Elimination Programme for the year 2025-2026 on SNA SPARSH platform and order accordingly.

5. The amount sanctioned in paragraph 4 above shall be debited under the following heads of account:-

Sl. No.	Head of Account	Amount
1.	2211-00 Family Welfare – 103 Maternity and Child Health – Schemes Shared between State and Centre – UG Commodity grants and Infrastructure Maintenance grants under National Health Mission – State Share – 309 Grants-in-Aid – 03 Grants for Specific Schemes. [IFHRMS DPC 2211 00 103 UG 30903]	Rs.47,61,61,333/- (By Re-Appropriation Rs.41,49,42,000/- and by ASL Rs.6,12,19,333/-)
2.	2211-00 Family Welfare – 793 Special Central Assistance for Scheduled Caste Component Plan – Schemes Shared between State and Centre – UG Commodity grants and Infrastructure Maintenance grants under National Health Mission – State Share – 309 Grants-in-Aid – 03 Grants for Specific Schemes. [IFHRMS DPC 2211 00 793 UG 30903]	Rs.11,28,38,000/- (By Re-Appropriation)

3.	2211-00 Family Welfare – 794 Special Central Assistance for Tribal Sub-Plan – Schemes Shared between State and Centre - UG Commodity grants and Infrastructure Maintenance grants under National Health Mission – State Share – 309 Grants-in-Aid – 03 Grants for Specific Schemes. [IFHRMS DPC 2211 00 794 UG 30903]	Rs.42,18,667/- (By Re-Appropriation)
	Total	Rs.59,32,18,000/-

6. Necessary funds of Rs.53,19,98,667/- will be provided by the way of Reappropriation as detailed below:

S.No.	From	To	Amount
1.	2211 00 103 UE 30903	2211 00 103 UG 30903	Rs.41,49,42,000/-
2.	2211 00 793 UE 30903	2211 00 793 UG 30903	Rs.11,28,38,000/-
3.	2211 00 794 UE 30903	2211 00 794 UG 30903	Rs.42,18,667/-

Further, an additional funds of Rs.6,12,19,333/- will be provided in FMA 2025-2026. Pending provision of such funds, the Section Officer, Health and Family Welfare (Bills) Department, Secretariat, Chennai is authorized to incur the above sanctioned funds via SNA-SPARSH platform through the Reserve Bank of India (RBI) account under Flexible Pool for Reproductive and Child Health and Health .System Strengthening, National Health Programme and National Urban Health Mission:-

CSS code	:	4063
CSS Name	:	Flexible Pool for RCH & Health System Strengthening, National Health Programme and National Urban Health Mission
SLS Code	:	TN387
SLS Name	:	State Share of Commodity and Infrastructure Maintenance Grants
State Drawing Account No. in Reserve Bank of India	:	01512701484
State Drawing Account Name in Reserve Bank of India	:	01909TN387STATESHAREINFRA

7. The Mission Director, National Health Mission - Tamil Nadu is directed to include this item of expenditure while sending the budget proposal for FMA 2025- 2026 to the Government in Finance (Health-I) Department at an appropriate time without fail.

8. The Mission Director, National Health Mission-Tamil Nadu is also directed to implement the above scheme through SNA-SPARSH fund flow mechanism as mandated by the financial procedure outlined by the Government of India and shall be permitted to revise the targets among the approved components based on requirements. The Government also inform that bills shall be presented in IFHRMS-SNA-SPARSH bill module for 100% under any of the head of above, which will

be divided into Government of India and State share, by the system itself i.e. there will not be concept of separate head of account for State and Government of India share hereafter.

9. The Mission Director, National Health Mission-Tamil Nadu is directed to ensure that the overall expenditure based on this order do not exceed the sanctioned amount together all the Drawing and Disbursing Officers under the scheme, since the expenditure is to be incurred through various drawals as and when expenditure is incurred by various Drawing and Disbursing Officers mapped under the Scheme. He is also directed to strictly adhere the guidelines issued in Government Letters No.573, Finance (PFMS) Department, dated 06.01.2025 and 17.02.2025.

10. This order issues with the concurrence of the Finance (Health-I) Department vide e.file No.12591/2025, dated 19.01.2026 with Additional Sanction Ledger Nos.2026012205 (for Additional Sanction) and 2026012206 (for Re-appropriation).

(BY ORDER OF THE GOVERNOR)

P. SENTHILKUMAR
ADDITIONAL CHIEF SECRETARY TO GOVERNMENT

To
The Mission Director, National Health Mission-Tamil Nadu, Chennai-600 006.
The Section Officer, Health and Family Welfare (Bills) Department,
Chennai-600 009 (2 copies).
The Principal Accountant General (A&E), Chennai-600 018.
The Principal Accountant General (Audit), Chennai-600 018.
The Pay and Accounts Officer, Secretariat, Chennai-600 009.
The Resident Audit Officer, office of the Principal Accountant General, Secretariat,
Chennai-600 009.
Copy to:
The Private Secretary to Additional Chief Secretary to Government, Health and Family Welfare Department, Chennai-600 009.
The Finance (Health-I / BG.II / PFMS / W&M.I) Department, Chennai-600 009.
The Health and Family Welfare (Data Cell) Department, Chennai-600 009.
Stock file / Spare copy.

// FORWARDED / BY ORDER //

19/01/2026
SECTION OFFICER
19/1/26

NATIONAL HEALTH MISSION TN.
22 JAN 2026
CHENNAI-600 006

ABSTRACT

National Health Mission–Tamil Nadu – Establishment of District Early Intervention Centre in District Headquarters Hospital, Mayiladuthurai under Rashtriya Bal Swasthya Karyakram (RBSK) Programme – Administrative and financial sanction accorded – Second and final instalment of financial sanction – Accorded – Orders – Issued.

Health and Family Welfare (EAP.II/1) Department

G.O.(Ms.).No.09 Dated 19.01.2026
விசுவாவசு, தை – 05
திருவள்ளுவர் ஆண்டு 2057

Read:

1. G.O.(Ms.).No.306, Health and Family Welfare (EAP.II/1) Department, dated 03.07.2025.
2. From the Mission Director, National Health Mission-Tamil Nadu, letter No.9511127/NHM/P6/2025, dated 03.10.2025.

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ORDER:

In the Government Order first read above, administrative sanction for a sum of Rs.45,00,000/- and financial sanction for a sum of Rs.15,00,000/- has been accorded for establishment of District Early Intervention Centre in District Headquarters Hospital, Mayiladuthurai under Rashtriya Bal Swasthya Karyakram (RBSK) Programme and directed the Mission Director, National Health Mission–Tamil Nadu to send proposal for financial sanction for the balance fund of Rs.30,00,000/- after remitting the funds into Government account.

2. In the letter second read above, the Mission Director, National Health Mission–Tamil Nadu has stated that the balance fund of Rs.30 lakh out of the total fund of Rs.45 lakh approved for establishment of District Early Intervention Centre in District Headquarters Hospital, Mayiladuthurai has been remitted into Government account vide chellan No.20250901031196, dated 01.09.2025 and requested to sanction the same.

3. The Government, after examination, have decided to accord sanction for a sum of Rs.30,00,000/- (Rupees thirty lakh only) as second and final instalment for establishment of District Early Intervention Centre in District Headquarters Hospital, Mayiladuthurai under Rashtriya Bal Swasthya Karyakram (RBSK) Programme and order accordingly.

4. The expenditure sanctioned in paragraph 3 above shall be debited under the following Head of account: -

"4211 – 00 Capital Outlay on Family Welfare – 103 Maternity and Child Health – State's Expenditure – AA Civil Works under National Health Mission Scheme – 416 Major Works – 01 Major Works."

[IFHRMS DPC 4211 00 103 AA 41601]

5. The Engineer-in-Chief and Chief Engineer (General), Public Works Department, Chepauk, Chennai is authorized to draw and disburse the fund sanctioned above and requested to make provision to ensure compliance with the direction for third party monitoring of civil works and adherence to Indian Public Health Standards following the guidelines and conditionalities stipulated by the Government of India.

6. The Mission Director, National Health Mission-Tamil Nadu is directed to send the utilization certificate for the funds sanctioned above in the prescribed format to the Government of India at the appropriate time.

7. This order issues with the concurrence of the Finance Department, vide e.file No.11838/2025, dated 05.01.2026.

(BY ORDER OF THE GOVERNOR)

P. SENTHILKUMAR
ADDITIONAL CHIEF SECRETARY TO GOVERNMENT

To
The Mission Director, National Health Mission-Tamil Nadu, Chennai-600 006.
The Engineer-in-Chief and Chief Engineer (General), Public Works Department, Chepauk, Chennai-600 005.
The District Collector, Mayiladuthurai.
The Director of Medical Education and Research, Chennai – 600 010.
The Director of Medical and Rural Health Services, Chennai – 600 006.
The Director of Public Health and Preventive Medicine, Chennai – 600 006.
The Principal Accountant General (A&E / Audit), Chennai–600 018.
The Pay and Accounts Officer (South), Chennai-600 035.
The District Treasury Officer, Mayiladuthurai.
The Resident Audit Officer, Office of the Principal Accountant General, Secretariat, Chennai- 600 009.
The District Health Officer, Mayiladuthurai.
The Joint Director of Medical and Rural Health Services, Mayiladuthurai,

Copy to:

The Special Personal Assistant to the Hon'ble Minister (Finance, Environment & Climate Change), Chennai-600 009.
The Special Personal Assistant to the Hon'ble Minister (Health & Family Welfare), Chennai-600 009.
The Private Secretary to Additional Chief Secretary to Government, Health and Family Welfare Department, Chennai – 600 009.
The Special Programme Implementation Department, Chennai – 600 009.
The Finance (Health.I) Department, Chennai-600 009.
The Health and Family Welfare (F / Data Cell) Department, Chennai – 600 009.
Stock file / Spare copy.

// FORWARDED / BY ORDER //

19/01/2026

SECTION OFFICER

19/1/26

ABSTRACT

National Viral Hepatitis Control Programme – Implementation of 3-dose Hepatitis B Vaccination for High-risk groups in Tamil Nadu – Permission accorded – Orders – Issued.

HEALTH AND FAMILY WELFARE (P2) DEPARTMENT

G.O.(Ms.) No. 10 **Dated: 20.01.2026**
விசுவாவசு, தை – 06
திருவள்ளுவர் ஆண்டு – 2056

NATIONAL HEALTH MISSION TN
28 JAN 2026
CHENNAI-600 006

Read:

From the Mission Director, National Health Mission – TN
Letter Ref. No. 6401/P19/NHM/2023, dated: 01.09.2025

P19/P5

.....

ORDER:

In the circumstances stated in the reference read above, the Government, after careful examination, have decided to accept the proposal and hereby accord permission to the Mission Director, National Health Mission, Tamil Nadu to implement the 3-dose Hepatitis B Vaccination at 0, 1, 6 months for high-risk groups at cost of Rs.50 lakhs, as approved in Supplementary NHM ROP 2025-2026, through the Director of Public Health and Preventive Medicine in co-ordination with the concerned Directorates and Tamil Nadu State AIDS Control Society. Priority groups in the initial phase of Hepatitis B vaccination include: (i) Persons who inject drugs (PWID / IDUs); (ii) Female sex workers; (iii) men who have sex with men; and (iv) Transgender individuals, all of whom have been screened negative for Hepatitis B biomarker.

2. The Tamil Nadu Medical Services Corporation Limited shall procure the required vaccines.

3. The Tamil Nadu State AIDS Control Society shall map high-risk populations to nearest Government facilities, in collaboration with NGOs and the concerned Directorates for mobilisation, follow-up, and schedule completion.

(BY ORDER OF THE GOVERNOR)

P. SENTHILKUMAR
ADDITIONAL CHIEF SECRETARY TO GOVERNMENT

To
The Mission Director, National Health Mission, Chennai – 600 006.
The Director of Public Health and Preventive Medicine, Chennai – 600 006.
The Managing Director, Tamil Nadu Medical Service Corporation Limited, No.417, Pantheon Road, Egmore, Chennai – 600 008.
The Resident Audit Officer, Officer of the APG, Secretariat, Chennai – 600 009.
The Pay and Accounts Officer (Concerned), Chennai – 600 035.

The Project Director, Tamil Nadu State AIDS Control Society,
No.417, Pantheon Road, Egmore, Chennai – 600 008.

Copy to

The Senior Private Secretary to Additional Chief Secretary to Government,
Health and Family Welfare Department, Chennai – 600 009.
The Finance (Health-I/BG.I/BG.II/PFMS/W&M-I) Department,
Chennai – 600 009.
The Health and Family Welfare (Data Cell) Department, Chennai – 600 009.
Stock file / Spare copy

//FORWARDED BY ORDER//

S. Elayaraj.
20/1/2026.
SECTION OFFICER

20/1/26

ABSTRACT

National Health Mission-Tamil Nadu – Government District Headquarters Hospital - Construction of a new comprehensive building in Government Hospital, Rasipuram, Namakkal District at a total cost of Rs.53.39 crore – Revised administrative sanction – Accorded - Orders – Issued.

HEALTH AND FAMILY WELFARE (EAP.II/2) DEPARTMENT

G.O.(Ms.).No.14 Dated : 23.01.2026
விசுவாவசு, தை – 09
திருவள்ளுவர் ஆண்டு 2057

Read:

1. G.O.(Ms)No.27, Health and Family Welfare (EAP II-2) Department, dated 24.01.2023.
2. G.O.(Ms) No.184, Health and Family Welfare (EAP II-2) Department, dated 19.06.2023.
3. G.O.(Ms)No.272, Health and Family Welfare (EAP II-2) Department, dated 09.08.2023.
4. From the Mission Director, National Health Mission-Tamil Nadu, letter No.137/NHM/S/2022, dated 28.08.2023, 04.03.2024 and 11.12.2025.

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ORDER:

The Hon'ble Minister for Health and Family Welfare has made the following announcement (Announcement No.01) in the floor of the Tamil Nadu Legislative Assembly during the Assembly Session 2022-2023:-

"புதிய மாவட்ட தலைமை மருத்துவமனை அமைத்தல் மற்றும் மருத்துவமனைகளை மேம்படுத்துதல் திட்டத்தின் கீழ் ரூபாய்.1018.85 கோடி மதிப்பீட்டில் ஜெயங்கொண்டான், தாம்பரம், பழனி, திருக்கோவிலூர், கரூர், ஓசூர், மயிலாடுதுறை, வேதாரண்யம், ராசிபுரம், அறந்தாங்கி, பரமக்குடி, கூடலூர், திருத்தணி, வள்ளியூர், திருப்பத்தூர், காங்கேயம், குடியாத்தம், திண்டிவனம் மற்றும் அருப்புக்கோட்டை ஆகிய 19 அரசு மருத்துவமனைகள், அரசு மாவட்ட தலைமை மருத்துவமனைகளாக தரம் உயர்த்தப்படும் மற்றும் தென்காசி, குளித்தலை, திருச்செங்கோடு, அம்பாசமுத்திரம் மற்றும் இராஜபாளையம் ஆகிய 5 அரசு மருத்துவமனைகளின் கட்டமைப்புகள் மாவட்ட மருத்துவமனைகளுக்கு இணையாக மேம்படுத்தப்படும்."
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2. Based on the above announcement, initially an administrative and financial sanctions have been accorded for a sum of Rs.2350 lakh and Rs.805.11 lakh for upgradation of Government Hospital, Rasipuram as Government District Headquarters Hospital in the Government Order first and third read above respectively. Subsequently, an administrative and financial sanctions have been accorded for a sum of Rs.1300 lakh and Rs.210 lakh respectively for construction of additional building to Government Hospital, Rasipuram in the Government Order second read above.

3. In the letter fourth read above, the Mission Director, National Health Mission-Tamil Nadu has stated that in addition to the amounts already sanctioned (i.e) Rs.2350 lakh and Rs.1300 lakh, a sum of Rs.1689 lakh may be sanctioned for construction of a new comprehensive building in Government Hospital, Rasipuram, Namakkal District taking into account the essential requirements, as the land identified for the hospital is situated in a low-lying area and lacks water facilities.

4. The Mission Director, National Health Mission – Tamil Nadu has also stated that the Executive Committee of State Health Society – Tamil Nadu has approved the above proposal vide Agenda No.15/44/2023 in the 44th Executive Committee Meeting held on 12.05.2023 to provide a comprehensive building at a total cost of Rs.5339 lakh to Government Hospital, Rasipuram. He has also furnished a detailed estimate for construction of a comprehensive building in Government Hospital, Rasipuram, prepared by the Public Works Department based on the schedule of rate for the year 2023-24 and approved by the Engineer-in-Chief, Chief Engineer (General), Public Works Department, Chennai and countersigned by the Head of the user Department (i.e.) Director of Medical and Rural Health Services.

5. The Mission Director, National Health Mission-Tamil Nadu has further stated that the remaining balance fund for execution of civil works at Government Hospital, Rasipuram has fully remitted into Government account as detailed below and requested to issue necessary orders in this regard:-

Sl. No.	Challan No./date in which amount were remitted into Government	Amount remitted (Rs. in lakh)
1.	119, dated 23.10.2022	594.40
2.	56, dated 08.12.2022	120.00
3.	18, dated 05.01.2023	360.00
4.	20231010011606, dated 10.10.2023	1118.72
5.	20240605013340, dated 05.06.2024	160.00
6.	20240605013043, dated 05.06.2024	450.00
7.	20241227019695, dated 27.12.2024	476.04
8.	20241227019723, dated 27.12.2024	405.14
9.	20250701022437, dated 01.07.2025	62.25
10.	20250721015734, dated 21.07.2025	349.74
11.	20250805029643, dated 05.08.2025	86.63
12.	20250908026582, dated 08.09.2025	140.97
	Total	**4323.89**

6. The Government, after careful examination, have decided to accord revised administrative sanction for a sum of Rs.53,39,00,000/- (Rupees Fifty three crore thirty nine lakh only) for upgradation of Government Hospital, Rasipuram, Namakkal District as a District Headquarters Hospital and a financial sanction for a sum of Rs.43,23,89,000/- (Rupees forty three crore twenty three lakh eighty nine thousand only) towards execution of civil works for construction of a new comprehensive building (G+6F) in Government Hospital, Rasipuram through Public Works Department and order accordingly.

7. The expenditure sanctioned in paragraph 6 above shall be debited to the following head of account: -

"4211-00 Capital Outlay on Family Welfare – 103 Maternity and Child Health – State's Expenditure – AA Civil Works under National Health Mission Scheme – 416 Major Works – 01 Major works".

(IFHRMS DPC 4211 00 103 AA 41601).

8. The Engineer-in-Chief and Chief Engineer (General), Public Works Department, Chepauk, Chennai is authorized to draw and disburse the funds sanctioned in paragraph 6 above and directed to make provision to ensure compliance with the directions for third party monitoring of civil works and adherence to Indian Public Health Standards following the guidelines and conditionalities stipulated by the Government of India.

9. This order issues with the concurrence of the Finance Department vide e.file No.4583/2023, dated 21.01.2026.

(BY ORDER OF THE GOVERNOR)

P.SENTHILKUMAR
ADDITIONAL CHIEF SECRETARY TO GOVERNMENT

To
The Mission Director, National Health Mission-Tamil Nadu, Chennai- 600 006.
The Director of Medical and Rural Health Services, Chennai – 600 006.
The Engineer-in-Chief and Chief Engineer (General), Public Works Department, Chennai – 600 005.
The Principal Accountant General, Chennai- 600 018.
The District Collector, Namakkal.
The District Treasury Officer, Namakkal.
The Executive Engineer, Concerned.
The Resident Audit Officer, Office of the Principal Accountant General, Secretariat, Chennai - 600 009.

Copy to:
The Office of the Hon'ble Chief Minister, Chennai – 600 009.
The Special Personal Assistant to the Hon'ble Minister (Finance, Environment and Climate Change), Chennai - 600 009.
The Special Personal Assistant to the Hon'ble Minister (Health and Family Welfare), Chennai - 600 009.
The Joint Director of Medical and Rural Health Services, Namakkal.
The Hospital Superintendent, Government Hospital, Namakkal.

The Public Works (Y) Department, Chennai – 600 009.
The Finance (Health-I) Department, Chennai – 600 009.
The Private Secretary to Additional Chief Secretary to Government,
Health and Family Welfare Department, Chennai – 600 009.
The Health and Family Welfare (F/Data Cell) Department, Chennai- 600 009.
Stock File /Spare Copy.

// FORWARDED / BY ORDER //

N. Latha 23.1.2026

(N.LATHA)
UNDER SECRETARY TO GOVERNMENT

23/01/2026

ABSTRACT

Health and Family Welfare Department – Development of Human Resources for Health Strategy in Tamil Nadu – Constitution of State Level Steering Committee – Orders Issued.

Health and Family Welfare (EAP.II/1) Department

G.O.(Ms.).No.27 Dated 29.01.2026
விசுவாவசு, தை – 15
திருவள்ளுவர் ஆண்டு 2057

Read:

1. Government of India, Ministry of Health and Family Welfare, National Health Mission (NHM-IV), Office Memorandum No.7(58)/2021-NHM-I (Part-I), dated 02.03.2023.
2. The Mission Director, National Health Mission-Tamil Nadu, Proceedings No.9999562/A4/NHM /2025, dated 31.07.2025.
3. From the Mission Director, National Health Mission-Tamil Nadu, letter No.9999562/A4/NHM /2025, dated 31.07.2025.

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ORDER:

The Government of India, Ministry of Health and Family Welfare in the Office Memorandum first read above, has informed that the World Bank supported Enhanced Health Service Delivery Program (EHSDP) has been approved by the World Bank Board on 28th June 2022 and prioritized seven States for State level interventions and results monitoring including Andhra Pradesh, Kerala, Meghalaya, Odisha, Punjab, Tamil Nadu and Uttar Pradesh. The Enhanced Health Service Delivery Program has three key result areas with a combination of Technical interventions related to the provision of Comprehensive Primary Health Care (CPHC) and quality of care and transversal interventions to strengthen governance and accountability and the result areas are as follows:

i) Strengthened service delivery through redesigned CPHC model;
ii) Improved comprehensive quality of care; and
iii) Transformed health sector governance, accountability and institutional and management capacity.

The Program-for-Results (PforR) financing instrument of the World Bank are used to finance activities under Enhanced Health Service Delivery Program, wherein disbursement of funds will be linked to the achievement of key results (the agreed disbursement-linked indicators–DLIs). The development and adoption of State Specific Human Resources for Health (HRH) Strategies for Public Health facilities in the priority

States, which is one of the Nine (9) DLIs and under the Enhanced Health Service Delivery Program approved by the World Bank and implement by the Ministry of Health and Family Welfare is a mandatory requirement and will help identity gaps in recruitment, capacity building, work force distribution and retention. The Government of India has also requested the priority States to adopt the Human Resources for Health Strategy as part of the five-year program from 2022 to 2027.

2. In the letter third read above, the Mission Director, National Health Mission–Tamil Nadu has stated that the implementation of the State Human Resources for Health Strategy follows a structured approach that begins with strong governance, uses Human Resources for Health data for planning, focuses on recruitment and distribution reforms, strengthens training and performance management, ensures sustainable financing and includes regular monitoring and review. This ensures that States can systematically address workforce gaps and improve availability, skills and retention of health workers across public health facilities. He have further stated that the Human Resources for Health strategy will be developed and implemented through a three-tiered, graded approach to ensure comprehensive planning, expert guidance and effective execution that includes:

1. **Technical Working Groups** for micro-level planning, data analysis and drafting;
2. **Technical Advisory Group** for meso-level review, expert inputs and policy refinement; and
3. **State-level Steering Committee** for macro-level decision-making, approval and overall governance.

At the macro level, the State Human Resources for Health Steering Committee will provide overall policy direction, approve strategic priorities, and ensure alignment with State health goals and national guidance. At the meso level, the Technical Advisory Group, consisting of the State Programme Manager and Additional Director, National Health Mission-Tamil Nadu and the experts from World Bank, National Health System Resource Centre, Medical Council, Medical University and experts from Legal / IT / Labour sectors as nominated by the Chairperson / Convener, will serve as an expert body to review drafts, provide technical and regulatory inputs, integrate insights from medical, nursing and allied health sectors, and ensure that the strategy reflects evidence based and context-specific workforce requirements. At the micro level, the HRH Technical Working Groups, comprising ten groups: (1) Overall Coordination and Review, (2) Policy and Technical Drafting, (3) Preservice Education–Medical and Dental, (4) HRH Welfare and Benefits, (5) Pre-service Education–Nursing and Allied Health, (6) Recruitment, Placement, Retention, Migration and Exit, (7) Performance Management and Career Development, (8) Human Resources under Local Governance, (9) Governance Structure and Finance, and (10) Future Needs Assessment and Planning, will lead the operational aspects of implementation, including data analysis, gap assessment, district-level consultations, cadre-wise planning and preparation of actionable HRH interventions. Together, these three tiers create an integrated governance mechanism that enables coordinated, evidence-driven and accountable rollout of the HRH Strategy across all levels of the health system.

3. The Mission Director, National Health Mission-Tamil Nadu has stated that in the proceedings second read above, Technical Advisory Group (TAG) and Technical Working Groups (TWGs) have been constituted under National Health Mission-Tamil Nadu to ensure timely initiation of the strategy development process and they have been tasked to prepare the technical guidance report and strategy document by coordinating with Technical Experts and the World Bank, submission of draft strategy recommendations for the review and further approvals by Steering Committee. In view of the development of the Human Resources for Health (HRH) Strategy, it is proposed to constitute a State-Level Steering Committee (HRH-SC) chaired by the Additional Chief Secretary to Government, Health and Family Welfare Department to provide strategic leadership, policy alignment and inter departmental coordination for the development and implementation of the Human Resources for Health (HRH) Strategy in Tamil Nadu. He has also detailed the Responsibilities of the Steering Committee as follows:

a. Provide high-level oversight for the development and implementation of the HRH Strategy in Tamil Nadu.

b. Ensure convergence across the departments of Finance, Human Resources Management, Education, Labour Welfare and Skills Development, Law and others.

c. Monitor progress of Technical Advisory Group (TAG) and Technical Working Groups (TWG).

d. Strengthen Intersectoral collaboration for health workforce planning and development.

e. Ensure the HRH strategy is evidence-based, feasible and widely accepted by stakeholders.

f. Review and validate project activities and outputs, including TAG and TWG proceedings.

g. Approve the final HRH Strategy Document based on comprehensive consultations and expert inputs.

h. Recommend the strategy for formal adoption by the Government of Tamil Nadu.

i. Enhance accountability and transparency through structured meetings and documented proceedings.

j. The Committee shall meet once in 2 months.

4. The Mission Director, National Health Mission-Tamil Nadu has requested to constitute a State Level Steering Committee (HRH-SC) under the Chairmanship of Additional Chief Secretary to Government, Health and Family Welfare Department and to ratify his action in having constituted the Technical Advisory Group (TAG) and Technical Working Groups (TWGs) without prior approval of the Government and permit him to develop the State Specific Strategy for Human Resources for Health (HRH) in the State of Tamil Nadu.

5. The Government, after examination, have decided to constitute State Level Steering Committee for development of Human Resources for Health Strategy in Tamil Nadu (HRH-SC) with the following members to ensure systematic planning, coordination and governance of the health workforce across the State and order accordingly:-

1.	The Additional Chief Secretary to Government, Health and Family Welfare Department, Secretariat, Chennai	Chairperson
2.	The Mission Director, National Health Mission-Tamil Nadu, Chennai	Member Secretary / Convenor
3.	The Additional Chief Secretary to Government, Finance Department, Secretariat, Chennai	Members
4.	The Secretary to Government, Human Resources Management Department, Secretariat, Chennai	
5.	The Secretary to Government, Labour Welfare and Skill Development Department, Secretariat, Chennai.	
6.	The Secretary, Social Welfare and Women Empowerment Department, Chennai.	
7.	The Secretary to Government, Law Department, Secretariat, Chennai	
8.	The Commissioner of Food Safety and Drug Administration, Chennai	
9.	The Commissioner of Greater Chennai Corporation, Chennai	
10.	The Managing Director, Tamil Nadu Medical Services Corporation Limited, Chennai.	
11.	The Project Director, Tamil Nadu State AIDS Control Society, Chennai	
12.	The Chairman, Tamil Nadu Medical Services Recruitment Board, Chennai	
13.	The Director of the Indian Medicine and Homoeopathy, Chennai.	
14.	The Director of Medical and Rural Health Services, Chennai	
15.	The Director of Medical Education and Research, Chennai	
16.	The Director of Public Health and Preventive Medicine, Chennai	
17.	The Director of Family Welfare, Chennai	
18.	Representative from State Planning Commission, Chennai	

6. The Mission Director, National Health Mission–Tamil Nadu is permitted to develop the Human Resources for Health (HRH) Strategies for the State of Tamil Nadu.

7. The Government ratify the action of the Mission Director, National Health Mission-Tamil Nadu in having constituted the Technical Advisory Group (TAG) and Technical Working Groups (TWGs) to provide expert guidance and operational support for evidence-based planning, implementation and monitoring of Human Resources for Health (HRH) initiatives in the State, without obtaining prior permission of the Government.

8. The Mission Director, National Health Mission–Tamil Nadu is directed to reconstitute the Technical Advisory Group (TAG) constituted in the proceedings second read above by including the Chief Advisor of the State Health System Resource Centre–Tamil Nadu, a representative from the Tamil Nadu Nursing Council and Tamil Nadu Pharmacy Council.

(BY ORDER OF THE GOVERNOR)

P. SENTHILKUMAR
ADDITIONAL CHIEF SECRETARY TO GOVERNMENT

To
The Mission Director, National Health Mission-Tamil Nadu, Chennai-600 006.
The Additional Chief Secretary to Government, Finance Department, Chennai – 600 009.
The Secretary to Government, Human Resources Management Department, Chennai – 600 009.
The Secretary to Government, Labour Welfare and Skill Development Department, Chennai – 600 009.
The Secretary to Government, Social Welfare and Women Empowerment Department, Chennai- 600 009.
The Secretary to Government, Law Department, Secretariat, Chennai – 600 009.
The Project Director, Tamil Nadu Health Systems Project, Chennai-600 006.
The Commissioner of Food Safety and Drug Administration, Chennai - 600 006.
The Director of Indian Medicine and Homeopathy, Chennai-600 106.
The Chairman, Tamil Nadu Medical Services Recruitment Board, Chennai- 600 006.
The Managing Director, Tamil Nadu Medical Services Corporation Limited, Chennai-600 008.
The Project Director, Tamil Nadu State AIDS Control Society, Chennai – 600 008.
The Commissioner, Greater Chennai Corporation, Chennai- 600 003.
The Member Secretary, State Planning Commission, Ezhilagam, Chepauk, Chennai – 600 005.
The Director of Medical Education and Research, Chennai – 600 010.
The Director of Medical and Rural Health Services, Chennai – 600 006.
The Director of Medical and Rural Health Services (ESI), Chennai – 600 006.
The Director of Public Health and Preventive Medicine, Chennai – 600 006.
The Director of Family Welfare, Chennai-600 006.

The Director of Drugs Control, Chennai - 600 006.
The Director, Tamil Nadu State Health Transport Department, Chennai-600 032.
The Managing Director, Tamil Nadu Medicinal Plant Farms &
Herbal Medicine Corporation Limited, Chennai - 600 106.
The Project Director, Tamil Nadu State Blindness Control Society, Chennai- 600 008.
The Principal Accountant General (A&E / Audit), Chennai – 600 018.
The Resident Audit Officer, Office of the Principal Accountant General,
Secretariat, Chennai-600 009.

Copy to:

The Special Personal Assistant to Hon'ble Minister (Health & Family Welfare),
Chennai-600 009.
The Private Secretary to Additional Chief Secretary to Government,
Health and Family Welfare Department, Chennai – 600 009.
All Deans of Government Medical College and Hospitals.
All Joint Directors of Health Services.
All District Health Officers.
All Sections of Health and Family Welfare Department, Chennai – 600 009.
Stock file / Spare copy.

// FORWARDED / BY ORDER //

SECTION OFFICER

29/1/26

NATIONAL HEALTH MISSION TN
18 FEB 2026
CHENNAI-600 006

ABSTRACT

National Health Mission - Tamil Nadu – Establishment of Modern Kitchen in Districts Headquarters Hospitals, Erode, Cuddalore, Mannargudi, Kovilpatti and Tenkasi – Administrative and financial sanction – Accorded – Orders – Issued.

HEALTH AND FAMILY WELFARE (EAP.II/1) DEPARTMENT

G.O.(Ms.).No.42 Dated 13.02.2026
விசுவாவசு, மாசி – 01 -
திருவள்ளுவர் ஆண்டு 2057

Read:

From the Mission Director, National Health Mission-Tamil Nadu, letter No.HSS-CIVI0OTH/2/2025-CW-NHM, dated 29.10.2025, 21.11.2025 and 09.12.2025.

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ORDER:

The Hon'ble Minister (Health & Family Welfare) while moving the Demand No.19 of the Health and Family Welfare Department on 21.04.2025 has made the following announcement (announcement No.54) on the Floor of the Tamil Nadu Legislative Assembly:-

"நான்கு அரசு மருத்துவமனைகளுக்கு நவீன சமையல் கூடங்கள் ரூ.4.00 கோடி செலவில் அமைக்கப்படும்.'

2. In the letter read above, the Mission Director, National Health Mission-Tamil Nadu has stated that in order to modernize the kitchens in District Headquarters Hospitals on priority basis, a detailed proposal was included in Supplementary PIP.2024-2026 and the same was approved in Supplementary RoP.2024-2026, with budgetary provision of Rs.500 lakh for upgrading the existing facilities to Modern Kitchen in the District Headquarters Hospitals, Cuddalore, Udumalpet, Erode, Mannargudi and Kovilpatti at a unit cost of Rs.100 lakh per hospital. Subsequently, it was proposed to provide the modern kitchen to the following District Headquarters Hospitals, including District Headquarters Hospital, Tenkasi on priority basis, excluding District Headquarters Hospital, Udumalpet.

1. District Headquarters Hospital, Erode, Erode District
2. District Headquarters Hospital, Cuddalore, Cuddalore District
3. District Headquarters Hospital, Mannargudi, Thiruvarur District
4. District Headquarters Hospital, Kovilpatti, Thoothukudi District
5. District Headquarters Hospital, Tenkasi, Tenkasi District
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3. The Mission Director, National Health Mission-Tamil Nadu has further stated that the approval issued in Supplementary RoP.2024-2026 was placed in the 49th Executive Committee meeting of the State Health Society-Tamil Nadu held on 27.05.2025 vide Agenda No.10/49/2025 and the Executive Committee has approved the same and directed that all the works inclusive of procurement of equipment required for establishment of modern kitchen in the above mentioned five District Headquarters Hospitals may be carried out through Public Works Department itself. He has furnished the Detailed Estimates for establishment of Modern Kitchen in the above said five District Headquarters Hospitals approved by the Engineer-in-Chief and Chief Engineer (General), Public Works Department, Chepauk, Chennai and countersigned by the Head of the User Department i.e. the Director of Medical and Rural Health Services and has stated that a sum of Rs.5,00,00,000/- has been remitted into Government Account as detailed below for financial sanction. The Mission Director, National Health Mission-Tamil Nadu has, therefore, requested to accord administrative and financial sanction for a sum of Rs.5,00,00,000/- for establishment of Modern Kitchen in the 5 District Headquarters Hospitals in Erode, Cuddalore, Mannargudi, Kovilpatti and Tenkasi Districts.

Sl. No	Chellan No. & date	Funds Remitted into Government Account (Amount in Rupees)
1.	20250616004750, 16.06.2025	3,50,00,000/-
2.	20250616004521, 16.06.2025	1,50,00,000/-
	Total	5,00,00,000/-

4. The General Abstract of the Detailed Estimates for establishment of modern kitchen in the above District Headquarters Hospitals are as follows:

Sl. No.	Name of the District Headquarters Hospitals	Description of works			Total
		Civil work including GST	Lumpsum Provision		
			Procurement of Kitchen equipment	Electrification provision arrangements, E.B. Service connection charges, etc.	
		(Amount in Rupees)			
1.	District Headquarters Hospital, Erode, Erode District	61,55,953/-	30,00,000/-	8,44,047/-	1,00,00,000/-
2.	District Headquarters Hospital, Cuddalore, Cuddalore District	74,34,684/-	20,00,000/-	5,65,316/-	1,00,00,000/-

3.	District Headquarters Hospital, Mannarkudi, Thiruvarur District	62,96,887/-	30,00,000/-	7,03,113/-	1,00,00,000/-
4.	District Headquarters Hospital, Kovilpatti, Thoothukudi District	61,20,815/-	30,00,000/-	8,79,185/-	1,00,00,000/-
5.	District Headquarters Hospital, Tenkasi, Tenkasi District	59,46,598/-	30,00,000/-	10,53,402/-	1,00,00,000/-
	Total	3,19,54,937/-	1,40,00,000/-	40,45,063/-	5,00,00,000/-

5. The Government, after careful examination, have decided to accord administrative and financial sanction for a sum of Rs.5,00,00,000/- (Rupees five crore only) for establishment of Modern Kitchen in the following five District Headquarters Hospitals @ Rs.1.00 crore per institution as detailed below and order accordingly:-

Sl. No.	Name of the institution	Civil work	Kitchen equipment
		(Amount in Rupees)	
1.	District Headquarters Hospital, Erode, Erode District	70,00,000/-	30,00,000/-
2.	District Headquarters Hospital, Cuddalore, Cuddalore District	80,00,000/-	20,00,000/-
3.	District Headquarters Hospital, Mannarkudi, Thiruvarur District	70,00,000/-	30,00,000/-
4.	District Headquarters Hospital, Kovilpatti, Thoothukudi District	70,00,000/-	30,00,000/-
5.	District Headquarters Hospital, Tenkasi, Tenkasi District	70,00,000/-	30,00,000/-
	Total	**3,60,00,000/-**	**1,40,00,000/-**

6. The expenditure sanctioned in paragraph 5 above shall be debited under the following head of account:-

"4211 – 00 Capital Outlay on Family Welfare – 103 Maternity and Child Health – State's Expenditure - AA Civil Works under National Health Mission Scheme - 416 Major Works – 01 Major Works".

[IFHRMS DPC: 4211 00 103 AA 41601]

7. The Engineer-in-Chief and Chief Engineer (General), Public Works Department, Chepauk, Chennai is authorized to draw and disburse the funds sanctioned in paragraph 5 above and directed to make provision to ensure compliance with the directions for third party monitoring of civil works and adherence to Indian Public Health Standards following the guidelines and conditionalities stipulated by the Government of India.

8. This order issues with the concurrence of Finance Department, vide e.file No.11719/2025, dated 10.02.2026.

(BY ORDER OF THE GOVERNOR)

P. SENTHILKUMAR
ADDITIONAL CHIEF SECRETARY TO GOVERNMENT

To
The Mission Director, National Health Mission- Tamil Nadu, Chennai–600 006.
The Engineer-in-Chief and Chief Engineer (General), Public Works Department, Chennai-600 005.
The Director of Medical and Rural Health Services, Chennai–600 006.
The District Collectors concerned.
The Principal Accountant General (A&E), Chennai–600 018.
The Principal Accountant General (Audit), Chennai–600 018.
The Pay and Accounts Officer (South), Chennai-600 035.
The District Treasury Officers concerned.
The Resident Audit Officer, Office of the Principal Accountant General, Secretariat, Chennai-600 009.

Copy to:
The Private Secretary to Additional Chief Secretary to Government, Health and Family Welfare Department, Chennai – 600 009.
The Special Personal Assistant to Hon'ble Minister (Finance and Human Resources), Chennai-600 009.
The Special Personal Assistant to Hon'ble Minister (Health & Family Welfare), Chennai-600 009.
The Joint Directors of Health Services concerned.
The Hospital Superintendents concerned.
The Finance (Health-I) Department, Chennai - 600 009.
The Health and Family Welfare (F / Data Cell) Department, Chennai-600 009.
Stock file / Spare copy.

// FORWARDED / BY ORDER //

13/02/2026
SECTION OFFICER
13/2/26

ABSTRACT

National Health Mission – Tamil Nadu – Vaccines and other consumables supplied by Government of India as Kind / Commodity Grants to State Government for Routine Immunization Programme for the year 2025-2026 – Sanction and release of commensurate State Share on SNA-SPARSH platform – Orders – Issued.

HEALTH AND FAMILY WELFARE (EAP.II/1) DEPARTMENT

G.O.(Ms.).No.47 Dated 16.02.2026
விசுவாவசு, மாசி – 04
திருவள்ளுவர் ஆண்டு 2057

Read:

1. From the Additional Secretary & Mission Director (NHM), Government of India, Ministry of Health and Family Welfare, D.O. letter No.G.27034/202/2018-NHM-F[E-3195367], dated 19.08.2024.
2. G.O.Ms.No.397, Health and Family Welfare (EAP.II/1) Department, dated 10.09.2025.
3. G.O.(Ms).No.08, Health and Family Welfare (EAP.II/1) Department, dated 19.01.2026.
4. From the Mission Director, National Health Mission-Tamil Nadu, letter No.004658-6/NHM-TN/A2/2025, dated 23.01.2026 and 09.02.2026.

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ORDER:

The Government of India have approved a sum of Rs.110,42,00,000/- as Kind / Commodity Grant for the year 2025-2026 in RoP.2024-2026 in the letter first read above and supplied Commodity / Kind Grants to the State Government worth about Rs.30,27,77,000/- for the year 2025-2026 for Routine Immunization Programme under Reproductive and Child Health Project. In the Government order second read above, the Government have sanctioned and released a sum of Rs.20,18,51,333/- as proportionate State Share. The Government of India has on boarded the Reproductive and Child Health Project onto the SNA-SPARSH platform and released the Commodity / Kind Grants worth about Rs.88,98,27,000/- for the year 2025-2026 under SNA SPARSH. In the Government Order third read above, the Government have released a sum of Rs.59,32,18,000/- as proportionate State Share. In the letter fourth read above, the Mission Director, National Health Mission-Tamil Nadu has stated that sanction orders have been received from the Government of India towards cost adjustment of vaccine supplies worth about Rs.21,11,54,000/- for Routine Immunization Programme for the year 2025-2026 on SNA-SPARSH platform as detailed below:
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Sl. No	Sanction Order & Date	Government of India Grant (Kind)	40% State Share
	General Component	Amount in Rupees	
1	F.No.T.13020/02/2025-IMM(081), dated 18.12.2025	5,21,73,000/-	3,47,82,000/-
2	F.No.T.13020/02/2025-IMM-Part(1)(073), dated 19.12.2025	11,44,07,000/-	7,62,71,333/-
	Sub-Total General	**16,65,80,000/-**	**11,10,53,333/-**
	Schedule Caste Component		
3	F.No.T.13020/02/2025-IMM(082), dated 18.12.2025	1,32,33,000/-	88,22,000/-
4	F.No.T.13020/02/2025-IMM-Part(1)(074), dated 19.12.2025	2,90,19,000/-	1,93,46,000/-
	Sub-Total SCSP	**4,22,52,000/-**	**2,81,68,000/-**
	Schedule Tribe Component		
5	F.No.T.13020/02/2025-IMM(083), dated 18.12.2025	7,27,000/-	4,84,667/-
6	F.No.T.13020/01/2025-IMM-Part(1)(075), dated 19.12.2025	15,95,000/-	10,63,333/-
	Sub-Total STSP	**23,22,000/-**	**15,48,000/-**
	Grand Total	**21,11,54,000/-**	**14,07,69,333/-**

2. The Mission Director, National Health Mission-Tamil Nadu has further stated that the Principal Accountant General-Tamil Nadu has booked the receipt of Commodity / Kind Grants for the amount received from the Government of India. The proportionate 40% State Share against Kind / Commodity Grants received from Government of India worth about Rs.21,11,54,000/- works out to Rs.14,07,69,333/-. However, out of the Kind / Commodity grants orders worth about Rs.21,11,54,000/- received from the Government of India, the Director of Public Health and Preventive Medicine, Chennai has certified receipt of commodities worth Rs.19,84,13,542/- only. Hence, out of the proportionate State Share of Rs.14,07,69,333/-, the Mission Director, National Health Mission-Tamil Nadu has requested to sanction and release a sum of Rs.13,22,75,695/- in FMA 2025-26 for the drawal of State Share on SNA-SPARSH platform. He has further stated that the remaining State Share of Rs.84,93,638/- will be claimed after the certificate received from the User Department.

3. The Government, after careful examination, have decided to accord sanction for a sum of Rs.13,22,75,695/- (Rupees thirteen crore twenty two lakh seventy five thousand six hundred and ninety five only) towards proportionate State Share against the Kind / Commodity Grants received from Government of India worth about Rs.19,84,13,542/- for Routine Immunization Programme for the year 2025-2026 on SNA SPARSH platform and order accordingly.

4. The amount sanctioned in paragraph 3 above shall be debited under the following heads of account:-

Sl. No.	Head of Account	Amount in rupees
1.	2211-00 Family Welfare – 103 Maternity and Child Health – Schemes Shared between State and Centre – UG Commodity grants and Infrastructure Maintenance grants under National Health Mission – State Share – 309 Grants-in-Aid – 03 Grants for Specific Schemes. [IFHRMS DPC 2211 00 103 UG 30903]	10,25,59,695/-
2.	2211-00 Family Welfare – 793 Special Central Assistance for Scheduled Caste Component Plan – Schemes Shared between State and Centre – UG Commodity grants and Infrastructure Maintenance grants under National Health Mission – State Share – 309 Grants-in-Aid – 03 Grants for Specific Schemes. [IFHRMS DPC 2211 00 793 UG 30903]	2,81,68,000/-
3.	2211-00 Family Welfare – 794 Special Central Assistance for Tribal Sub-Plan – Schemes Shared between State and Centre - UG Commodity grants and Infrastructure Maintenance grants under National Health Mission – State Share – 309 Grants-in-Aid – 03 Grants for Specific Schemes. [IFHRMS DPC 2211 00 794 UG 30903]	15,48,000/-
	Grand Total	**13,22,75,695/-**

5. Necessary funds of Rs.13,22,75,695/- will be provided in Final Modified Appropriation 2025-2026. However, this expenditure shall be brought to the notice of the Legislature by way of Specific Inclusion in the Supplementary Estimates 2025-2026. Pending provision of such funds, the Mission Director, National Health Mission-Tamil Nadu is authorized in incur the amount sanctioned in paragraph 3 above.

Single Nodal Agency – SPARSH Account details:

CSS code	:	4063
CSS Name	:	Flexible Pool for RCH & Health System Strengthening, National Health Programme and National Urban Health Mission
SLS Code	:	TN387
SLS Name	:	State Share of Commodity and Infrastructure Maintenance Grants
State Drawing Account No. in Reserve Bank of India	:	01512701484
State Drawing Account Name in Reserve Bank of India	:	01909TN387STATESHAREINFRA

6. The Mission Director, National Health Mission–Tamil Nadu is directed to include this item of expenditure while sending the budget proposals for Final Modified Appropriation 2025-2026 and also send necessary draft explanatory note for inclusion of this expenditure in the Supplementary Estimates 2025-2026 to the Government in Finance (Health-I) Department at an appropriate time without fail.

7. The Mission Director, National Health Mission-Tamil Nadu is also directed to implement the above scheme through SNA-SPARSH fund flow mechanism as mandated by the financial procedure outlined by the Government of India and shall be permitted to revise the targets among the approved components based on requirements. The Government also inform that bills shall be presented in IFHRMS-SNA-SPARSH bill module for 100% under any of the head of above, which will be divided into Government of India and State share, by the system itself i.e. there will not be concept of separate head of account for State and Government of India share hereafter.

8. The Mission Director, National Health Mission-Tamil Nadu is directed to ensure that the overall expenditure based on this order do not exceed the sanctioned amount together all the Drawing and Disbursing Officers under the scheme, since the expenditure is to be incurred through various drawals as and when expenditure is incurred by various Drawing and Disbursing Officers mapped under the Scheme. He is also directed to strictly adhere to the SNA-SPARSH guidelines issued in Government Letter No.573, Finance (PFMS) Department, dated 06.01.2025 and 07.02.2025.

9. The Mission Director, National Health Mission-Tamil Nadu is directed to send proposal for sanction of remaining State Share of Rs.84,93,638/-.

10. This order issues with the concurrence of the Finance Department vide e.file No.1085/2026, dated 14.02.2026 with Additional Sanction Ledger No.2026022502.

(BY ORDER OF THE GOVERNOR)

P. SENTHILKUMAR
ADDITIONAL CHIEF SECRETARY TO GOVERNMENT

To
The Mission Director, National Health Mission-Tamil Nadu, Chennai-600 006.
The Section Officer, Health and Family Welfare (Bills) Department,
Chennai-600 009.
The Principal Accountant General (A&E), Chennai-600 018.
The Principal Accountant General (Audit), Chennai-600 018.
The Pay and Accounts Officer, Secretariat, Chennai-600 009.
The Resident Audit Officer, O/o. the Principal Accountant General, Secretariat,
Chennai-600 009.

Copy to:
The Private Secretary to Additional Chief Secretary to Government, Health and Family Welfare Department, Chennai-600 009.
The Finance (Health-I / BG.II / PFMS / W&M.I) Department, Chennai-600 009.
The Health and Family Welfare (Data Cell) Department, Chennai-600 009.
Stock file / Spare copy.

// FORWARDED / BY ORDER //

16/02/2026
SECTION OFFICER
16/02/2026

P10/C P5, A4

ABSTRACT

Health and Family Welfare Department – Revamping of State Health Systems Resource Centre-Tamil Nadu – Orders Issued.

Health and Family Welfare (EAP.II/1) Department

G.O. (Ms.).No.55 **Dated 19.02.2026**

விசுவாவசு வருடம், மாசி – 07

திருவள்ளுவர் ஆண்டு–2057

Read:

1. G.O.(Ms).No.128, Health and Family Welfare (EAP.II/1) Department, dated 12.04.2018.
2. G.O.(Ms.).No.453, Health and Family Welfare (EAP.II/1) Department, dated 28.09.2018.
3. G.O.(Ms).No.15, Health and Family Welfare (EAP.II/1) Department, dated 25.01.2019.
4. From the Mission Director, National Health Mission-Tamil Nadu, letter No.11632/P10/NHM/2021, dated 27.06.2025, 29.06.2025, 05.08.2025, 23.10.2025 and 11.11.2025.
5. From the Mission Director, National Health Mission-Tamil Nadu, letter No.11632/P10/NHM/2021, dated 29.06.2025 addressed to the Director, Indian Institute of Technology Madras, Chennai and copy marked to the Government.

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ORDER:

In the letter fourth read above, the Mission Director, National Health Mission-Tamil Nadu has stated that the Government of India, recommended the establishment of State Health Systems Resource Centres (SHSRCs) across States, to achieve universal access to equitable, affordable and quality healthcare by strengthening health systems, institutions and governance capacities, modelled after the National Health Systems Resource Centre (NHSRC) at the National level, which is a key technical support agency to the Ministry of Health and Family Welfare and State Governments, offering evidence-based inputs to enhance Public Health outcomes. Accordingly, in the Government Orders first to third read above, the Mission Director, National Health Mission-Tamil Nadu was permitted to establish the State Health Systems Resource Centre at Indian Institute of Technology Madras, Chennai. Subsequently, a Memorandum of Understanding (MoU) was signed between the Mission Director, National Health Mission-Tamil Nadu and the Director, Indian Institute of Technology Madras (IIT Madras), to formalize this initiative. Despite these approvals, the State Health Systems Resource Centre (SHSRC) has remained non-operational with initiatives not getting rolled out through IIT Madras despite various deliberations and inputs received thereafter to fine-tune and prune the proposal further.
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The Mission Director, National Health Mission-Tamil Nadu has further stated that given the increasing complexity of Public Health needs, the rising disease burden and the growing scope of National Health Mission interventions, operationalizing a functional State Health Systems Resource Centre has become an important and strategic imperative and therefore, it is proposed to revamp the State Health Systems Resource Centre as an independent, State-level technical institution under the Department of Health and Family Welfare. In this regard, the proposal for establishment of State Health Systems Resource Centre in National Health Mission-Tamil Nadu in the DMS Campus has been approved in–principal by the Executive Committee of Tamil Nadu State Health Society in 49th Executive Committee meeting vide agenda No.22/49/2025 and subsequently, the above proposal has been approved by the Executive Sub-Committee vide Circulation Note No.5/2025-2026, dated 27.06.2025.

2. The Mission Director, National Health Mission-Tamil Nadu has also stated that the revamped State Health Systems Resource Centre will serve as a key technical and strategic resource centre for strengthening the overall Tamil Nadu Health System and function through four strategic divisions viz. Health Systems Strengthening Division, Health Programmes and Innovations Division, Knowledge Management Division and Digital Health and Analytics Division, with the following objectives and scopes:-

i. Providing strategic planning and institutional capacity building support across all health directorates to drive sector-wide reforms and improvements.
ii. The centre will be an advisory body serving as a vital link across all Directorates functioning under the Department of Health & Family Welfare.
iii. Facilitating the planning, implementation, evaluation of health programmes and evidence-based policy analysis at the State and District levels, encompassing National Health Mission-Tamil Nadu and other State health initiatives.
iv. Offering technical expertise in the design, execution and assessment of diverse health interventions to improve quality and efficiency with clear understanding of Health System gaps.
v. Supporting comprehensive programme review and monitoring across health systems, including National Health Mission-Tamil Nadu and State-specific health programmes.
vi. Play a key role in guiding Human Resources management as a key to meeting up within raise in demands and the required changes needed in composition and enhancement.
vii. Enhancing Public Health workforce capabilities through targeted training, mentoring and continuous professional development.
viii. Conducting health systems and implementation research to generate evidence that informs policy decisions and programme strategies.
ix. Developing and deploying tools, methodologies and frameworks for effective monitoring, improvement evaluation and performance improvement.
x. Supporting advocacy, communication and stakeholder engagement efforts to promote public health priorities and awareness.
xi. Building and sustaining partnerships with academic institutions, Government agencies, civil society organizations and development partners for collaborative health system strengthening, robust Healthcare financing and Health budgetary system.

xii. Providing technical guidance and support for emergency preparedness, disaster response and health system resilience.
xiii. Though modelled after National Health Systems Resource Centre (NHSRC), the practice areas of State Health Systems Resource Centre (SHSRC) will be based on the local context and State priorities as guided by the State's Health challenges and priority issues.

3. The Mission Director, National Health Mission-Tamil Nadu has furnished the details of the Organizational Structure of the proposed State Health Systems Resource Centre and has stated that the governing body will provide strategic guidance and policy direction, while an executive committee will oversee implementation and institutional management. He has also stated that under the Record of Proceedings (ROP) 2024-26, a sum of Rs.250 lakh has been sanctioned under FMR Code HSS.11.193 SHSRC Head, to support the human resources and core operational activities of the revamped State Health Systems Resource Centre in Tamil Nadu. This allocation is intended to cover both Human Resources remuneration and essential operational expenses. However, funds can be mobilized alternatively on need basis. The research studies will be proposed in addition from the Programme specific FMRS / Budget Heads under National Health Mission with the approval of Government of India. The deliverables / expected outcomes from the State Health Systems Resource Centre is as follows:

1. Key Deliverables

a. Policy and Strategic Support

- Formulate and review state health policies, strategies and operational plans.
- Provide technical inputs for health sector reforms and program design.
- Support alignment of state initiatives with national health goals and frameworks.

b. Technical and Programmatic Assistance

- Offer technical guidance for implementation of health programs under the National Health Mission (NHM) and other state health initiatives.
- Develop frameworks, tools and protocols for program monitoring and quality assurance.
- Provide on-demand technical support to districts and program divisions.

c. Capacity Building and Institutional Strengthening

- Conduct training and workshops for health managers, program officers and staff.
- Develop and disseminate training manuals, standard operating procedures (SOPs) and resource materials.
- Build institutional capacity for evidence-based planning and management.

d. Research, Monitoring and Evaluation (M&E)

- Undertake operational research and health system studies.
- Support periodic program reviews, impact assessments and data analysis.
- Generate analytical reports and policy briefs for informed decision-making.

e. Knowledge Management and Innovation

- Document best practices, innovations and success stories from the field.
- Facilitate cross-learning and knowledge-sharing platforms within the State and nationally.
- Maintain a digital repository of research, reports and resources.

2. Expected Outcomes

a. Strengthened Health Governance and Planning

- Improved policy formulation, strategic planning and decision-making processes.
- Enhanced interdepartmental coordination and policy coherence.

b. Enhanced Program Implementation and Efficiency

- Increased effectiveness and accountability in program delivery.
- Better utilization of financial, human and technical resources.

c. Improved Human Resource Competence

- Strengthened technical and managerial capacities at state and district levels.
- Institutionalization of continuous learning and capacity development mechanisms.

d. Evidence-Based Health Systems Development

- Data-driven decision-making and prioritization of interventions.
- Greater use of research evidence for policy and program improvement.

e. Sustainable Institutional Framework

- Establishment of SHSRC as a State-level centre of excellence for health systems strengthening.
- Long-term sustainability through skilled human resources, partnerships and innovation.

4. The Mission Director, National Health Mission-Tamil Nadu has, therefore, requested to revamp the State Health Systems Resource Centre as an independent entity with vested powers to provide Technical Support to the Health and Family Welfare Department, Government of Tamil Nadu with the following proposed staffing pattern and associated costs as follows and furnished the details of qualifications and mode of engagement along with their duties and responsibilities:-

Sl. No.	Particulars	Total Posts	Monthly Remuneration (Rs. in Lakh)	Annual Cost (Rs. in Lakh)
1.	Chief Advisor	1	3	36.00
2.	Advisor	4	2	96.00
3.	Consultant	10	0.6	72.00
4.	Intern	12	0.15	21.60
	Total	27		225.60
5.	Technical Programme Officer	4	Time Scale of pay in Level 22, Rs.56100-205700	State fund
6.	Operational Expenses	-	2	24.00
	Grand Total	31		**249.60**

5. The Government, after examination, have issue the following orders:-

i. The State Health Systems Resource Centre-Tamil Nadu established in the Government Orders first to third read above is revamped as an independent entity in the DMS Campus, Teynampet, Chennai with the following four core divisions with vested powers to provide Technical Support to the Health and Family Welfare Department, Government of Tamil Nadu:-

   a. Health Systems Strengthening Division;
   b. Health Programmes and Innovations Division;
   c. Knowledge Management Division; and
   d. Digital Health and Analytics Division.

ii. The Governing Body and Executive Committee of the State Health Systems Resource Centre-Tamil Nadu are constituted under the Chairmanship of Chief Secretary to Government and Additional Chief Secretary to Government, Health and Family Welfare Department respectively along with its members as shown in Annexure-I and II to this order.

iii. The Mission Director, National Health Mission-Tamil Nadu is designated as the Executive Director of the State Health Systems Resource Centre-Tamil Nadu;

iv. Sanction is accorded for creation of 4 (four) posts of Technical Programme Officer in the cadre of Assistant Surgeon on time scale of pay in Level 22 Rs.56100-205700 on temporary basis. The details of expenditure for creation of the above 4 posts is as follows:

Name of the Post	Pay (Rs.)	DA 58% (Rs.)	HRA (Rs.)	CCA (Rs.)	MA (Rs.)	Total		
						Per month (Rs.)	Per Year (Rs.)	For 4 Posts (Rs.)
Technical Programme Officer (TPO)	56,100	32,538	7,500	1200	300	97,638	11,71,656	46,86,624 (Forty six lakh eighty six thousand six hundred and twenty four)

v. The Mission Director, National Health Mission-Tamil Nadu is permitted to fill up the posts of Technical Programme Officer on deputation basis from among the eligible Medical Officers in the cadre of Assistant Surgeon working in the Directorates of Health and Family Welfare Department.

vi. The Mission Director, National Health Mission-Tamil Nadu is permitted to engage the following Human Resources for the State Health Systems Resource Centre. The qualification, mode of engagement and monthly remuneration for the posts are as shown in Annexure-III to this order.

Name of the Post	Number of Posts
Chief Advisor	1
Advisor	4 (each one post for each Division)
Technical Programme Officer (TPO)	4 (each one post for each Division)
Consultant	10 (8 for Public Health, 1 for Health Technology and 1 for Information Technology)
Intern	12 (3 for each division)

vii. The Mission Director, National Health Mission-Tamil Nadu is permitted to relax the qualification, experience, etc. for the posts sanctioned to the State Health Systems Resource Centre-Tamil Nadu based on the necessity.

viii. The Mission Director, National Health Mission-Tamil Nadu is permitted to utilize the funds sanctioned under FMR Code HSS.11.193 (SHSRC) in National Health Mission ROP.2024-2026 to cover the remuneration for the Human Resources and the operational expenses of State Health Systems Resource Centre-Tamil Nadu.

6. The expenditure for the posts sanctioned in paragraph 5(iv) above shall be debited under the following new head of account:

"2210 – Medical and Public Health – 06 Public Health – 001 Direction and Administration – State's Expenditure – AV Establishment of State Health Systems Resource Centre – Tamil Nadu (SHSRC) – 309 Grants-in-Aid – 01 Grants for Current Expenditure"

[IFHRMS DPC 2210 06 001 AV 30901]

7. Necessary additional funds will be provided in Final Modified Appropriation 2025-2026. Pending provision of such funds, the Director of Public Health and Preventive Medicine is authorized to draw and disburse the amount sanctioned in paragraph 5(iv) above. The Director of Public Health and Preventive Medicine is directed to include this item of expenditure while sending the budget proposal for Final Modified Appropriation 2025-2026 to the Government in Finance (Health-I) Department at an appropriate time without fail.

8. This order issues with the concurrence of Finance Department vide e.file No.2123/2022, dated 16.02.2026 with PSL No.202602PSL0032.

(BY ORDER OF THE GOVERNOR)

P. SENTHILKUMAR
ADDITIONAL CHIEF SECRETARY TO GOVERNMENT

To
The Mission Director, National Health Mission – Tamil Nadu, Chennai - 600 006.
The Additional Chief Secretary to Government, Finance Department, Chennai – 600 009.
The Member Secretary, State Planning Commission, Chennai – 600 005.
The Commissioner, Greater Chennai Corporation, Chennai – 600 003.
All Heads of Department of Health and Family Welfare Department.
The Principal Accountant General (A&E/Audit), Chennai- 600 018.
The Pay and Accounts Officer, Secretariat, Chennai-600 009.
The Pay and Accounts Officer (South), Chennai-600 035.
The Resident Audit Officer, Office of the Principal Accountant General, Secretariat, Chennai - 600 009.

Copy to:

The Office of the Hon'ble Chief Minister, Chennai – 600009.
The Special Personal Assistant to the Hon'ble Minister (Finance, Environment & Climate Change), Chennai - 600 009.
The Special Personal Assistant to the Hon'ble Minister (Health & Family Welfare), Chennai - 600 009.
The Senior Private Secretary to Chief Secretary to Government, Chennai-600 009.
The Private Secretary to Additional Chief Secretary to Government, Health and Family Welfare Department, Chennai-600 009.
The Finance (Health-I/Pay Cell-I / BG.I / BG.II) Department, Chennai – 600 009.
The Health and Family Welfare (A / B / Data Cell) Department, Chennai – 600 009.
Stock File /Spare Copy.

// FORWARDED / BY ORDER //

19/02/2026
SECTION OFFICER

19/02/2026

Annexure-I to G.O.(Ms).No.55, Health and Family Welfare (EAP.II/1) Department, dated 19.02.2026

i) Governing Body:

1.	The Chief Secretary to Government	Chairman
2.	The Additional Chief Secretary to Government, Health and Family Welfare Department, Chennai	Vice Chairman
3.	The Mission Director, National Health Mission-Tamil Nadu, Chennai	Member Secretary / Convener
4.	The Additional Chief Secretary to Government, Finance Department, Chennai.	Official Members
5.	The Member Secretary, State Planning Commission, Chennai	
6.	The Commissioner, Greater Chennai Corporation, Chennai.	
7.	The Managing Director, Tamil Nadu Medical Services Corporation Limited, Chennai	
8.	The Project Director, Tamil Nadu Health Systems Project, Chennai	
9.	The Director of Medical Education and Research, Kilpauk, Chennai	
10.	The Director of Medical and Rural Health Services, Chennai	
11.	The Director of Public Health and Preventive Medicine, Chennai	
12.	The Director of Indian Medicine and Homeopathy, Chennai	
13.	The Chief Advisor, State Health Systems Resource Centre, Chennai	
14.	Prof. T. Sundararaman, Former Executive Director, National Health System Resource Centre	Non-Official Members
15.	Any other nominees by the Mission Director, National Health Mission-Tamil Nadu	

P. SENTHILKUMAR
ADDITIONAL CHIEF SECRETARY TO GOVERNMENT

// TRUE COPY //

19/02/2026
SECTION OFFICER

19/02/2026

Annexure-II to G.O.(Ms).No.55, Health and Family Welfare (EAP.II/1) Department, dated 19.02.2026

ii) Executive Committee:

1	The Additional Chief Secretary to Government, Health and Family Welfare Department, Chennai	Chairman
2	The Mission Director, National Health Mission-Tamil Nadu, Chennai	Member Secretary / Convener
3	The Additional Chief Secretary to Government, Finance Department, Chennai.	Official Members
4	The Project Director, Tamil Nadu Health Systems Project, Chennai	
5	The Managing Director, Tamil Nadu Medical Service Corporation Limited, Chennai	
6	The Director, Indian Medicine and Homeopathy, Chennai	
7	The Chairman, Tamil Nadu Medical Services Recruitment Board, Chennai	
8	The Commissioner of Food Safety and Drug Control Administration, Chennai	
9	The Joint Commissioner (Health), Greater Chennai Corporation, Chennai	
10	The Project Director, Tamil Nadu State AIDS Control Society, Chennai	
11	The Director of Medical Education and Research, Chennai	
12	The Director of Medical and Rural Health Services, Chennai	
13	The Director of Medical and Rural Health Services (ESI), Chennai	
14	The Director of Public Health and Preventive Medicine, Chennai	
15	The Director of Family Welfare, Chennai	
16	The Director, Tamil Nadu State Health Transport, Chennai	
17	The Director of Drugs Control, Chennai	
18	The Chief Advisor, State Health Systems Resource Centre, Chennai	
19	Joint Director (SBHI), Directorate of Public Health and Preventive Medicine, Chennai	

20	Representative from Indian Institute of Technology Madras, Chennai	Non-Official Members
21	Representative from National Institute of Epidemiology, Indian Council of Medical Research, Chennai	
22	Representative from National Institute for Research in Tuberculosis, Indian Council of Medical Research, Chennai	
23	Representative from Anna Administrative Staff College, Chennai.	
24	Any experts nominated by the Mission Director, National Health Mission-Tamil Nadu	

P. SENTHILKUMAR
ADDITIONAL CHIEF SECRETARY TO GOVERNMENT

// TRUE COPY //

19/02/2026
SECTION OFFICER
19/02/2026

Annexure-III to G.O.(Ms).No.55, Health and Family Welfare (EAP.II/1) Department, dated 19.02.2026

Name of the post	Division / Role	Qualification	Mode of engagement	Monthly Remuneration
Chief Advisor	Overall incharge of SHSRC	A. **Educational Qualification:** Postgraduate Qualification in Public Health / Health Management / Health Policy / Public Policy / Public Administration / Social Sciences / Health Economics / Epidemiology or any relevant qualifications **Experience:** Minimum 25 years post qualification experience Minimum 10 years in Public Health or Health Systems in a leadership role **Desirable / Additional Requirements** Demonstrated experience in planning and strategy development with policy. Working in strengthening State or district level health systems Strong leadership and strategic advisory skills B. **Age:** 65 years and below	On hiring basis as per the prevailing Government Orders.	Rs.3 lakh. If any retired Government servants are engaged, the monthly remuneration will be last pay drawn minus pension.
Advisor	Health Systems Strengthening	A. **Educational Qualification:** Postgraduate	On hiring basis as per the prevailing	Rs.2 lakh. If any retired Government

	(HSS) Division	Qualification in Public Health / Health Management / Health Policy / Public Policy / Public Administration / Social Sciences / Health Economics / Epidemiology or any relevant qualifications **Experience:** Minimum 10 years post qualification experience in health systems, policy, planning or reforms Leadership roles in District / State / National roles **Desirable / Additional Requirements** Experience in Monitoring & Evaluation, operational research, NHM Strong communication and analytical skills B. **Age:** 65 years and below	Government Orders.	servants are engaged, the monthly remuneration will be last pay drawn minus pension.
Advisor	Health Programmes and Innovations (HPI) Division	A. **Educational Qualification:** Postgraduate Qualification in Public Health / Health Management / Health Policy / Public Policy / Public Administration / Social Sciences / Health Economics / Epidemiology or any relevant qualifications **Experience:**	On hiring basis as per the prevailing Government Orders.	Rs.2 lakh. If any retired Government servants are engaged, the monthly remuneration will be last pay drawn minus pension.

		Minimum 10 years experience in programme planning, implementation, innovation, field level operations, Engagement with partners and stakeholders. **Desirable / Additional Requirements** Recognized contributions in innovative practices Strong mentoring and policy framing abilities. B. **Age:** 65 years and below		
Advisor	Knowledge Management Division (KMD)	A. **Educational Qualification:** Postgraduate Qualification in Public Health / Health Management / Health Policy / Public Policy / Public Administration / Social Sciences / Health Economics / Epidemiology or any relevant qualifications **Experience:** Minimum 10 years experience in health systems research, policy, documentation, capacity building. **Desirable / Additional Requirements** Health Technology Assessment Experience, Knowledge on	On hiring basis as per the prevailing Government Orders.	Rs.2 lakh. If any retired Government servants are engaged, the monthly remuneration will be last pay drawn minus pension.

		emerging Health Technologies. Proficiency in writing, evidence synthesis, knowledge curation **B. Age:** 65 years and below		
Advisor	Digital Health & Analytics (DHA) Division	**A. Educational Qualification:** Minimum 10 years experience in health data management, analytics, digital platforms, Experience with HMIS, evaluation systems_ **Experience:** Minimum 10 years experience in health data management, analytics, digital platforms, Experience with HMIS, evaluation systems_ **Desirable / Additional Requirements** Proficiency in R/STATA/Power BI- Experience in surveillance and digital innovations **B. Age:** 65 years and below	On hiring basis as per the prevailing Government Orders.	Rs.2 lakh. If any retired Government servants are engaged, the monthly remuneration will be last pay drawn minus pension.
Technical Programme Officer (TPO)	One for each Division (HSS, HPI, KMD, DHA) - 4 Posts	**Educational Qualification:** Postgraduate in Public Health / Health Administration / MD Community Medicine OR Equivalent from reputed institutions **Experience:** Relevant experience in public health programme	On deputation basis from among the eligible Medical Officers in the cadre of Assistant Surgeon working in the Directorates	Time Scale of pay in Level 22 Rs.56100-205700

		Management and systems **Desirable / Additional Requirements** Working knowledge of Tamil Nadu's health infrastructure and programmes	of Health and Family Welfare Department.	
Consultant - Public Health	HSS (3), HPI (3), KMD (1), DHA (1) - 8 Posts	A. **Educational Qualification:** PG Degree / Diploma in Preventive & Social Medicine, Public Health, Epidemiology, Community Nursing, or Public Policy **Experience:** 3 to 4 years post qualification experience in program planning, implementation or health systems **Desirable / Additional Requirements** State / District level experience desirable. MS Office and Presentation Skills. Data Analysis and Data Visualization, Good writing and policy engagement skills B. **Age:** 45 years and below	On hiring basis as per the prevailing Government Orders.	Rs.0.6 lakh
Consultant - Health Technology	KMD Division - 1 Post	A. **Educational Qualification:** M.Tech. in Biomedical Engineering with experience on Health Systems (or) B.Tech / M.Tech. BME with Post Graduate	On hiring basis as per the prevailing Government Orders.	Rs.0.6 lakh

		qualification in Public Health / Health Administration. **Experience:** 2 + years experience in devices / diagnostics validation, clinical research, or systematic reviews **Desirable / Additional Requirements** Publications in relevant field desirable Proficiency in evaluation new technologies and methodologies **B. Age:** 45 years and below		
Consultant - IT	DHA Division - 1 Post	**A. Educational Qualification:** Graduate in Engineering (IT / Computer Science) with Postgraduate qualification in Public Health / Health Administration or M.Tech. in Information Technology / Computer Science or Master of Computer Applications (MCA) **Experience:** 5 years post qualification experience in IT support, network management **Desirable / Additional Requirements** Experience in health IT systems preferred. Good	On hiring basis as per the prevailing Government Orders.	Rs.0.6 lakh

		English and Tamil communication skill. **B. Age:** 45 years and below		
Consultant - Finance (If required)	Across Divisions- 1 Post (Merged option)	**A. Educational Qualification:** Chartered Account ant (CA) or MCA or Master's in Finance **Experience:** Relevant experience in public financial management or health finance **B. Age:** 45 years and below	To be engaged on hiring basis based on specific requirement raised by any, by utilizing one post of Consultant from the above mentioned 10 Consultant posts.	Rs.0.6 lakh
Intern	12 (3 for each division)	**A. Educational Qualification:** Candidates pursuing or completed MPH / MHA Course from reputed institutions **Experience:** Freshers or ongoing students **Desirable / Additional Requirements** Exposure to public health systems and research methodologies	--	0.15 lakh

P. SENTHILKUMAR
ADDITIONAL CHIEF SECRETARY TO GOVERNMENT

// TRUE COPY //

19/02/2026
SECTION OFFICER

19/02/2026

ABSTRACT

National Health Mission – Tamil Nadu – Provision of additional amenities to the Government Peripheral Hospital, Sholinganallur, Chennai – Administrative and financial sanction accorded – Orders Issued.

Health and Family Welfare (EAP.II/1) Department

G.O.(Ms.)No.57 Dated 20.02.2026
விசுவாவசு, மாசி – 08
திருவள்ளுவர் ஆண்டு 2057

NATIONAL HEALTH MISSION TN
23 FEB 2026
CHENNAI-600 006

Read:

1. G.O.(Ms.).No.113, Health and Family Welfare (EAP.II/2) Department, dated 03.04.2023.
2. From the Mission Director, National Health Mission, letter Ref. No.11181/NHM/S/2022, dated: 23.10.2025.

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ORDER:

In the Government Order first read above, orders were issued for establishment of 100 bedded Trauma and Critical Care Hospital, Sholinganallur, Chennai, at a total cost of Rs.60.05 crore as detailed below:

Fund Source	Civil Works	Equipment	Furniture	Total
	(Rs.in lakh)			
PMABHIM	3400	500	105	4005
NUHM	1700	250	50	2000
Total	5100	750	155	6005

2. In the letter second read above, the Mission Director, National Health Mission-Tamil Nadu has stated that the construction of new building for establishment of Trauma and Critical Care Hospital, Sholinganallur had been fully completed. The hospital premises are situated in a low-lying area and during the construction phase and subsequent monsoon periods, it has been observed that rainwater stagnation and waterlogging occur around the building, frequently impeding access to the facility. Therefore, it was decided to provide additional amenities such as an approach road, compound wall, biomedical waste room, earth filling and required electrical arrangements. These amenities are indispensable for operationalizing the hospital in compliance with Indian Public Health Standards and to ensure a safe, patient friendly environment which are essential for normal functioning of the institution.

3. The Mission Director, National Health Mission-Tamil Nadu has also stated that the Public Works Department has sent a detailed estimate prepared based on the schedule of rate for the year 2025-2026 and prevailing market rate for providing additional amenities to the Trauma and Critical Care Hospital, Sholinganallur, Chennai at a total cost of Rs.760 lakh. The above detailed estimate has been approved by the Engineer-in-Chief and Chief Engineer (General), Public Works Department and countersigned by the Head of the user Department i.e. the Director of Medical Education and Research, Chennai. He has further stated that out of Rs.905 lakh allocated for procurement of equipment and furniture to the above Government Hospital, a sum of Rs.605 lakh has already been released to the Tamil Nadu Medical Services Corporation Limited for procurement of equipment and furniture. Further, it was decided to re-appropriate and utilize the balance amount of Rs.300 lakh for providing the additional amenities to the Trauma and Critical Care Hospital, Sholinganallur, Chennai. He has also certified that there is no further requirement of equipment and furniture to the above Government Hospital. Necessary permissions were obtained from the Executive Sub-Committee of the State Health Society, Tamil Nadu vide Circulation Note No.13/2025, dated 28.10.2025, for provision of additional amenities to the Government Hospital, Sholinganallur, Chennai at a total cost of Rs.760 lakh, by utilizing unspent funds Rs.300 lakh under National Urban Health Mission, which was remitted into the Government account vide Challan No.20250919007957, dated 19.09.2025 and Rs.460 lakh from State funds. The Mission Director, National Health Mission-Tamil Nadu has therefore, requested to accord administrative and financial sanction for a sum of Rs.7,60,00,000/- for providing additional amenities to the Government Peripheral Hospital, Sholinganallur, Chennai. The General Abstract of the Detailed Estimate is as follows:

Sl. No.	Description	Amount in Rupees
1.	Civil works including GST	6,57,39,036/-
2.	i) Lumpsum provision: ii) Provision of Electrical arrangements iii) CMWSSB new water connection and water line arrangements, etc.	1,02,60,964/-
	Total	7,60,00,000/-

4. The Government, after examination, have decided to accord sanction for a sum of Rs.7,60,00,000/- (Rupees seven crore and sixty lakh only) for providing additional amenities to the Government Peripheral Hospital, Sholinganallur, Chennai by reallocation of Rs.3,00,00,000/- from the funds allocated for provision of equipment and furniture to the Government Peripheral Hospital, Sholinganallur, Chennai under National Urban Health Mission and order accordingly.

5. The expenditure sanctioned in paragraph 4 above shall be debited under the following heads of account:-

"4211 – 00 Capital Outlay on Family Welfare – 103 Maternity and Child Health – State's Expenditure – AA Civil Works under National Health Mission Scheme – 416 Major Works – 01 Major Works".

[IFHRMS DPC 4211 00 103 AA 41601] - [Rs.3,00,00,000/-]

"4210 Capital Outlay on Medical and Public Health – 01 Urban Health Services – 110 Hospitals and Dispensaries (Including Pharmacy) – State's Expenditure – JA Buildings – 416 Major Works – 01 Major Works".

[IFHRMS DPC 4210 01 110 AA 41601] - [Rs.4,60,00,000/-]

6. The Engineer-in-Chief and Chief Engineer (General), Public Works Department, Chepauk, Chennai is authorized to draw and disburse the funds sanctioned in paragraph 4 above and directed to make provision to ensure compliance with the directions for third party monitoring of civil works and adherence to Indian Public Health Standards following the guidelines and conditionalities stipulated by the Government of India.

7. The Mission Director, National Health Mission-Tamil Nadu is directed to send the utilization certificate for the funds sanctioned above under National Health Mission in the prescribed format to the Government of India at the appropriate time.

8. This order issues with the concurrence of Finance Department, vide e.file No.9834/2025, dated 19.02.2026.

(BY ORDER OF THE GOVERNOR)

P. SENTHILKUMAR
ADDITIONAL CHIEF SECRETARY TO GOVERNMENT

To
The Mission Director, National Health Mission- Tamil Nadu, Chennai–600 006.
The Commissioner, Greater Chennai Corporation, Chennai-600 003.
The Engineer-in-Chief and Chief Engineer (General), Public Works Department, Chennai-600 005.
The Director of Medical Education and Research, Chennai–600 010.
The Director of Medical and Rural Health Services, Chennai-600 006.
The District Collector, Chengalpattu.
The Principal Accountant General (A&E), Chennai–600 018.
The Principal Accountant General (Audit), Chennai–600 018.
The Pay and Accounts Officer (North/South), Chennai-600 001/600 035.
The District Treasury Officer, Chengalpattu, Kancheepuram.
The Resident Audit Officer, Office of the Principal Accountant General, Secretariat, Chennai-600 009.
Copy to:
Office of the Hon'ble Chief Minister, Chennai-600 009.
The Private Secretary to Additional Chief Secretary to Government, Health and Family Welfare Department, Chennai–600 009.
The Special Personal Assistant to Hon'ble Minister (Finance and Human Resources), Chennai-600 009.
The Special Personal Assistant to Hon'ble Minister (Health & Family Welfare), Chennai-600 009.
All Head of Departments.

The Dean, Government Medical College and Hospital, Omandurar Government Estate, Chennai-600 002.
The Hospital Superintendent, Government Peripheral Hospital, Sholinganallur, Chennai.
The Finance (Health-I / Health.II / BG.II / W&M.I) Department, Chennai-600 009.
The Health and Family Welfare (E / Data Cell) Department, Chennai-600 009.
Stock file / Spare copy.

// FORWARDED / BY ORDER //

20/02/2026

SECTION OFFICER

20/2/26

P21

NATIONAL HEALTH MISSION TN. 26 FEB 2026 CHENNAI-600 006

ABSTRACT

Health and Family Welfare Department – Renaming of Health Management Information System (HMIS) 3.0 as இ–நலம் (E-Health) - Orders - Issued.

HEALTH AND FAMILY WELFARE (EAP.II/2) DEPARTMENT

G.O.(Ms.).No.60 Dated 24.02.2026
விசுவாவசு, மாசி – 12
திருவள்ளுவர் ஆண்டு 2057

Read:

1. G.O.(Ms).No.367, Health and Family Welfare (EAP.II/2)Department, dated 15.11.2023.
2. G.O.(Ms).No.01, Health and Family Welfare (EAP.II/2) Department, dated 02.01.2025.
3. G.O.(Ms).No.337, Health and Family Welfare (EAP.II-2) Department, dated 23.07.2025.
4. From the Mission Director, National Health Mission-Tamil Nadu, letter No.6075945/NHM/HMIS/P21/2025, dated 01.02.2026.

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ORDER:

In the Government Order first read above, orders were issued for the implementation of the Health Management Information System (HMIS) 3.0 on a pilot basis at Government Kilpauk Medical College, Chennai and the Government Medical Institution at Poonamallee Health Unit District by engaging Centre for Development of Advance Computing (C-DAC). Subsequently, it has been extended to all Government Medical facilities throughout the State in the Government Order third read above.

2. In the letter fourth read above, the Mission Director, National Health Mission - Tamil Nadu has stated that the implementation of HMIS 3.0 is in process in a phased manner as detailed below:-

Phase I	Namakkal, Krishnagiri, Kallakurichi, Virudhunagar, Ramanathapuram, Tirunelveli, Salem, Tenkasi Districts
Phase II	Nagapattinam, Tiruppur, Ariyalur, Perambalur, Ranipet, Kancheepuram, Tiruvallur, Tiruvannamalai Districts
Phase III	Dindigul, Mayiladuthurai, Tirupattur, Kanniyakumari, Chengalpattu Districts
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Phase IV	Coimbatore, Karur, Erode, Vellore, Madurai, Dharmapuri, Thoothukudi, Villupuram Districts
Phase V	Pudukottai, The Nilgiris, Theni, Tiruvarur, Sivagangai, Cuddalore, Thanjavur, Trichy Districts

3. The Mission Director, National Health Mission - Tamil Nadu has further stated that currently Health Management Information System (HMIS) 3.0 is being implemented in 835 Government Medical Institutions across the State and the implementation in other institutions are under process. It has now been observed that the term "Health Management Information System" is commonly used by both Government and Private Hospitals, which may lead to ambiguity. Hence, it is proposed to assign a distinct brand name to HMIS 3.0 as "இ–நலம் (E-Health)" and requested the orders of the Government.

4. The Government, after examination, have decided to accept the proposal of the Mission Director, National Health Mission - Tamil Nadu. Accordingly, the "Health Management Information System (HMIS) 3.0" implemented in Government Medical facilities be renamed as "இ–நலம் (E-Health)".

(BY ORDER OF THE GOVERNOR)

P.SENTHILKUMAR
ADDITIONAL CHIEF SECRETARY TO GOVERNMENT

To
The Mission Director, National Health Mission-Tamil Nadu, Chennai-600 006.
The Project Director, Tamil Nadu Health Systems Project, Chennai-600 006.
The Commissioner of Food Safety and Drug Administration, Chennai -600 006.
The Director of Indian Medicine and Homeopathy, Chennai-600 106.
The Chairman, Medical Services Recruitment Board, Chennai- 600 006.
The Managing Director, Tamil Nadu Medical Services Corporation Limited, Chennai-600 008.
The Project Director, Tamil Nadu State AIDS Control Society, Chennai -600 008.
The Director of Medical Education and Research, Chennai 600 010.
The Director of Medical and Rural Health Services, Chennai-600 006.
The Director of Medical and Rural Health Services (ESI), Chennai 600 006.
The Director of Public Health and Preventive Medicine, Chennai - 600 006.
The Director of Family Welfare, Chennai-600 006.
The Director of Drugs Control, Chennai - 600 006.
The Director, Tamil Nadu State Health Transport, Chennai-600 032.
The Managing Director, Tamil Nadu Medicinal Plant Farms and Herbal Medicine Corporation Limited, Chennai 600 106.
The Project Director, Tamil Nadu State Blindness Control Society, Chennai- 600 008.
The Commissioner, Greater Chennai Corporation, Chennai- 600 003.
All District Collectors.

The Principal Accountant General (A&E / Audit), Chennai - 600 018.
The Resident Audit Officer, Office of the Principal Accountant General, Secretariat, Chennai-600 009.
Copy to:
The Special Personal Assistant to Hon'ble Minister (Health & Family Welfare), Chennai-600 009.
The Private Secretary to Additional Chief Secretary to Government, Health and Family Welfare Department, Chennai 600 009.
All Departments of the Secretariat, Chennai - 600 009.
All Sections of the Health and Family Welfare Department, Chennai - 600 009.
Stock file / Spare copy.

// FORWARDED / BY ORDER //

24/02/2026
SECTION OFFICER
24/2/26

P14/ 85

ABSTRACT

National Health Mission–Tamil Nadu – Establishment of Master Dental Check-up Unit (MDCU) in the Tamil Nadu Government Dental College and Hospital, Chennai – Administrative and financial sanction accorded – Orders Issued.

HEALTH AND FAMILY WELFARE (EAP.II/1) DEPARTMENT

G.O.(Ms.).No.62 Dated 26.02.2026
விசுவாவசு, மாசி – 14
திருவள்ளுவர் ஆண்டு 2057

28 FEB 2026

Read:

1. G.O.(Ms.).No.27, Health and Family Welfare (EAP.II/2) Department, dated 24.01.2023.
2. G.O.(Ms.).No.272, Health and Family Welfare (EAP.II/2) Department, dated 09.08.2023.
3. G.O.(Ms.).No.102, Health and Family Welfare (EAP.II/1) Department, dated 21.04.2025.
4. From the Mission Director, National Health Mission–Tamil Nadu, letter No.10441724/P14/NHM/2025, dated 09.12.2025.

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ORDER:

The Hon'ble Minister (Health & Family Welfare) while moving the Demand No.19 of the Health and Family Welfare Department on 21.04.2025 has made the following announcement (announcement No.92) on the Floor of the Tamil Nadu Legislative Assembly:-

"சென்னையிலுள்ள தமிழ்நாடு அரசு பல் மருத்துவக் கல்லூரி மருத்துவமனையில் முழுமையான பல் நல பரிசோதனை (Master Dental Health Check Up) பிரிவு தொடங்கப்படும்."

2. In the letter fourth read above, the Mission Director, National Health Mission-Tamil Nadu has stated that the Government of India, in Supplementary RoP.2024-2026 under FMR code NCD.8.118, has approved a sum of Rs.26.16 lakh and Rs.0.45 lakh for procurement of equipment and consumables respectively for establishment of the Master Dental Check-up Unit. However, the Government of India has not approved funds for civil and electrical works for the above purpose. He has also stated that a sum of Rs.25.41 lakh out of the funds approved in the Supplementary RoP.2024-2026 for procurement of required equipment was released to the Tamil Nadu Medical Services
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Corporation Limited, Chennai in Proceedings No.10441724/P14/NHM/2025, dated 19.05.2025 and the balance funds Rs.1.20 lakh shall be utilized for procurement of equipment and consumables required on gap analysis. A sum of Rs.45,000/- approved for procurement of Dental Consumables has also been released to the Principal, Tamil Nadu Government Dental College and Hospital in Proceedings No.10441724/P14/NHM/2025, dated 19.05.2025 and the remaining amount of Rs.75,000/- will be released to Electronic Corporation of Tamil Nadu for procurement of Desktop Computer.

3. The Mission Director, National Health Mission-Tamil Nadu has also stated that on evaluating the necessity, operational feasibility and human resources availability, it was decided to establish the Master Dental Check-up Unit in Tamil Nadu Government Dental College and Hospital, Chennai. Accordingly, the Director of Medical Education and Research has submitted a proposal for establishment of a dedicated Master Dental Check-up Unit (MDCU) in the Tamil Nadu Government Dental College and Hospital, Chennai and to accommodate the same in the Old Oral Diagnosis Sciences (ODS) Department in the existing building with required modifications as detailed below:

Sl. No.	Component	Description	Proposed Cost (Rs.in lakh)
1.	Civil Infrastructure	Partitioning, plumbing, flooring, seating, signage, storage	20.00
2.	Electrical Requirements	Internal wiring, ACs, UPS, lighting, power points for equipment	10.00
3.	Equipment	Fully equipped dental chair units, dental X-ray with RVG, autoclave, computer	23.40
4.	Consumables (3 months)	Filling materials, PPE kits, sterilization items, disposables	3.00
		Total	56.40

He has further stated that necessary permission of the Executive Committee of the State Health Society-Tamil Nadu was obtained in the 49th Executive Committee meeting held on 27.05.2025, for establishment of Master Dental Check-up Unit in Tamil Nadu Government Dental College and Hospital, Chennai and to utilize a sum of Rs.30 lakh from the available unspent funds approved for construction of additional building to Government Hospital, Karur, for modification works in the Old ODS Department of Tamil Nadu Government Dental College and Hospital, Chennai vide Agenda No.18/49/2025.

4. The Mission Director, National Health Mission-Tamil Nadu has furnished the detailed estimates approved by the Engineer-in-Chief and Chief Engineer (General), Public Works Department, Chennai for executing the modification works for establishment of Master Dental Check-up Unit in Tamil Nadu Government Dental College and Hospital, Chennai based on the schedule of rate for the year 2025-2026 and countersigned by the Director of Medical Education and Research, Chennai. The general abstract of the detailed estimates is as follows:

Sl. No.	Description of Works	Amount (Rupees in lakh)
1.	Civil modification works	22.00
2.	Electrical works	08.00
	Total	30.00

5. The Mission Director, National Health Mission-Tamil Nadu has stated that a sum of Rs.1000 lakh approved for construction of additional building to Government Hospital, Karur has been remitted into Government account as per the administrative sanction accorded in the Government Order first read above as detailed below and requested the orders of the Government for establishment of Master Dental Check-up Unit in Tamil Nadu Government Dental College and Hospital, Chennai by utilizing a sum of Rs.30 lakh from the approved unspent balance funds for construction of additional building to Government Hospital, Karur.

Year of RoP	Challan No& Date	Amount (Rs.in lakh)
2022-23	120 /03.10.2022 for Rs.12,84,79,600/-	68.52
	05 / 10.07.2023 for Rs.51,39,18,400/-	274.08
2023-24	20241028007820 / 28.10.2024 for Rs.2,56,90,000/-	256.90
2024-25	20241227019663 / 27.12.2024 for Rs.36,46,29,000/-	202.57
2025-26	20250701022437 / 01.07.2025 for Rs.19,40,00,000/- 20250721015734 / 21.07.2025 for Rs.109,00,00,000/- 20250805029643 / 05.08.2025 for Rs. 27,00,00,000/- 20250908026582 / 08.09.2025 for Rs.43,93,50,000/-	197.93
	Total	**1000**

The administrative and financial sanction accorded for construction of additional building to Government Hospital, Karur at a total cost of Rs.1000 lakh in the Government order first and second read above has been cancelled in the Government Order third read above and reallocated for various civil works as detailed below:

Details of Civil Works	G.O.No. & Date	Amount (Rupees in lakh)
Modernization and upgradation of two Female Wards and Kitchen of the Institute of Mental Health, Chennai	G.O.(Ms.).No.102, Health and Family Welfae Department, dated 21.04.2025	498
Provision of Modular Operation Theatre Arrangement, Manifold Room and other additional amenities to the Maternal Child Health Services Building in Institute of Social Obstetrics and Government Kasturba Gandhi Hospital for Women and Children, Chennai	G.O.(Ms.).No.366, Health and Family Welfae Department, dated 12.08.2025	232
Construction of Nursing Students Hostel (Residential) Building in Lady Lawley Campus Institute of Obstetrics and Gyneacology and Government Hospital for Women and Children, Chennai	G.O.(Ms.).No.380, Health and Family Welfae Department, dated 22.08.2025	101
	Total funds utilized	831

6. The Government, after examination, have decided to accord sanction for a sum of Rs.30,00,000/- (Rupees thirty lakh only) towards execution of civil and electrical works for establishment of Master Dental Check-up Unit in Tamil Nadu Government Dental College and Hospital, Chennai through Public Works Department by utilizing a sum of Rs.30 lakh from the approved unspent balance funds for construction of additional building to Government Hospital, Karur and order accordingly.

7. The expenditure sanctioned in paragraph 6 above shall be debited under the following head of account:-

"4211 – 00 Capital Outlay on Family Welfare – 103 Maternity and Child Health – State's Expenditure – AA Civil Works under National Health Mission Scheme – 416 Major Works – 01 Major Works".

[IFHRMS DPC 4211 00 103 AA 41601]

8. The Engineer-in-Chief and Chief Engineer (General), Public Works Department, Chepauk, Chennai is authorized to draw and disburse the funds sanctioned in paragraph 6 above and directed to make provision to ensure compliance with the directions for third party monitoring of civil works and adherence to Indian Public Health Standards following the guidelines and conditionalities stipulated by the Government of India.

9. The Mission Director, National Health Mission-Tamil Nadu is directed to obtain ratification orders from the Government of India in having reallocated the funds approved for construction of additional building to Government Hospital, Karur, for establishment of Master Dental Check-up Unit in Tamil Nadu Government Dental College and Hospital, Chennai and send the utilization certificate for the funds sanctioned above in the prescribed format to the Government of India at the appropriate time.

10. This order issues with the concurrence of Finance Department, vide e.file No.12326/2025, dated 25.02.2026.

(BY ORDER OF THE GOVERNOR)

P. SENTHILKUMAR
ADDITIONAL CHIEF SECRETARY TO GOVERNMENT

To
The Mission Director, National Health Mission- Tamil Nadu, Chennai–600 006.
The Engineer-in-Chief and Chief Engineer (General), Public Works Department, Chennai-600 005.
The Director of Medical Education and Research, Chennai–600 010.
The Director of Medical and Rural Health Services, Chennai-600 006.
The District Collector concerned.
The Principal Accountant General (A&E), Chennai–600 018.
The Principal Accountant General (Audit), Chennai–600 018.

The Pay and Accounts Officer (South), Chennai-600 035.
The Resident Audit Officer, Office of the Principal Accountant General, Secretariat, Chennai-600 009.

Copy to:

The Private Secretary to Additional Chief Secretary to Government, Health and Family Welfare Department, Chennai – 600 009.
The Special Personal Assistant to Hon'ble Minister (Finance, Environment & Climate Change), Chennai-600 009.
The Special Personal Assistant to Hon'ble Minister (Health & Family Welfare), Chennai-600 009.
The Principal, Tamil Nadu Government Dental College and Hospital, Chennai, Chennai-600 003.
The Finance (Health-I) Department, Chennai - 600 009.
The Public Works Department, Chennai-600 009.
The Health and Family Welfare (E / F / Data Cell) Department, Chennai-600 009.
Stock file / Spare copy.

// FORWARDED / BY ORDER //

26/02/2026

SECTION OFFICER

26/2/26

ABSTRACT

National Health Mission – Tamil Nadu – Vaccine and other consumables supplied by Government of India as Kind / Commodity Grants to State Government for Routine Immunization Programme under Reproductive and Child Health Project and National Tuberculosis Elimination Programme for the Financial Year 2025-2026 – Sanction and release of commensurate State Share on SNA-SPARSH platform – Orders – Issued.

HEALTH AND FAMILY WELFARE (EAP.II/1) DEPARTMENT

G.O.(Ms).No.68

Dated 27.02.2026
விசுவாவசு, மாசி – 15
திருவள்ளுவர் ஆண்டு 2057

Read:

1. From the Additional Secretary & Mission Director (NHM), Government of India, Ministry of Health and Family Welfare, D.O. letter No.G.27034/202/2018-NHM-F[E-3195367], dated 19.08.2024.
2. G.O.(Ms).No.397, Health and Family Welfare (EAP.II/1) Department, dated 10.09.2025.
3. G.O.(Ms).No.08, Health and Family Welfare (EAP.II/1) Department, dated 19.01.2026.
4. G.O.(Ms).No.47, Health and Family Welfare (EAP.II/1) Department, dated 16.02.2026
5. From the Mission Director, National Health Mission-Tamil Nadu, letter No.004658-10/NHM-TN/A2/2025, dated 17.02.2026.

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ORDER:

The Government of India have approved a sum of Rs.110,42,00,000/- as Kind / Commodity Grant for the year 2025-2026 in RoP 2024-2026 in the letter first read above and supplied Commodity / Kind Grants to the State Government worth about Rs.30,27,77,000/- for the financial year 2025-2026 for Routine Immunization Programme under Reproductive and Child Health Project. In the Government order second read above, the Government have sanctioned and released a sum of Rs.20,18,51,333/- as proportionate State Share. The Government of India has onboarded the Reproductive and Child Health Project onto the SNA-SPARSH platform
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and released the commodity / Kind Grants worth about Rs.88,98,27,000/- and Rs.21,11,54,000/- under SNA-SPARSH and in the Government Orders third and fourth read above, the Government have released a sum of Rs.59,32,18,000/- and Rs.13,22,75,695/- respectively as proportionate State Share. In the letter fifth read above, the Mission Director, National Health Mission-Tamil Nadu has stated that sanction orders have been received from the Government of India towards cost adjustment of vaccine supplies worth about Rs.77,38,05,000/- for Routine Immunization Programme under Reproductive and Child Health Project and National Tuberculosis Elimination Programme for the year 2025-2026 on SNA-SPARSH platforms detailed below:

Sl. No.	Sanction Order & Date	Govt. of India Grant (Kind)	40% State Share
General Component		Amount in Rupees	
1	F.No.T-13020/02/2025-IMM(064), Dated 11.11.2025	4,33,30,000/-	2,88,86,667/-
2	No.Z.28015/347/2018-TB (Pt.), Dated 10.12.2025 Unique Sanction ID: NTEP/IFD/GIA/R/2025-26/243	2,68,80,000/-	1,79,20,000/-
3	No.Z.28015/347/2018-TB(Pt.), Dated 10.12.2025 Unique Sanction ID: NTEP/IFD/GIA/R/2025-26/244	23,96,00,000/-	15,97,33,333/-
	Total General	**30,98,10,000/-**	**20,65,40,000/-**
Schedule Caste Component			
4	F.No.T-13020/02/2025-IMM(065), Dated 11.11.2025	1,09,90,000/-	73,26,667/-
5	No.Z.28015/347/2018-TB (Pt.), Dated 10.12.2025 Unique Sanction ID: NTEP/IFD/GIA/R/2025-26/245	38,46,78,000/-	25,64,52,000/-
	Total SCSP	**39,56,68,000/-**	**26,37,78,667/-**
Schedule Tribe Component			
6	F.No.T-13020/02/2025-IMM(066), Dated 11.11.2025	6,04,000/-	4,02,667/-
7	No.Z.28015/347/2018-TB (Pt.), Dated 10.12.2025 Unique Sanction ID: NTEP/IFD/GIA/R/2025-26/246	6,73,00,000/-	4,48,66,666/-
8	No.Z.28015/347/2018-TB, Dated 22.10.2025 Unique Sanction ID: NTEP/IFD/GIA/R/2025-26/187	4,23,000/-	2,82,000/-
	Total STSP	**6,83,27,000/-**	**4,55,51,333/-**
	Grand Total	**77,38,05,000/-**	**51,58,70,000/-**

2. The Mission Director, National Health Mission-Tamil Nadu has further stated that the Principal Accountant General-Tamil Nadu has booked the receipt of commodity/ kind Grants for the amount received from the Government of India. The Additional Director of Medical and Rural Health Services and State TB Officer has certified for having received commodity grants worth about Rs.71,88,81,000/- from Government of India towards National Tuberculosis Elimination Programme and the Director of Public Health and Preventive Medicine, Chennai has certified for having received commodity grants worth about Rs.5,49,24,000/- towards Routine Immunization Programme. The

proportionate 40% State Share against Kind / Commodity Grants received from Government of India worth about Rs.77,38,05,000/- works out to Rs.51,58,70,000/-.

3. As sufficient funds are not available in the respective heads of account, the Mission Director, National Health Mission-Tamil Nadu has requested to sanction and release a sum of Rs.51,58,70,000/- (Rupees fifty one crore fifty eight lakh and seventy thousand only) for the drawal of State Share on SNA-SPARSH platform by reappropriation of funds.

4. The Government, after careful examination, have decided to accord sanction for a sum of Rs.51,58,70,000/- (Rupees fifty one crore fifty eight lakh and seventy thousand only) towards proportionate State Share against the Kind / Commodity Grants received from Government of India worth about Rs.77,38,05,000/- for Routine Immunization Programme under Reproductive and Child Health Project and National Tuberculosis Elimination Programme for the year 2025-2026 on SNA SPARSH platform and order accordingly.

5. The amount sanctioned in paragraph 4 above shall be debited under the following heads of account:-

Sl. No.	Head of Account	Amount in Rupees
1.	2211-00 Family Welfare – 103 Maternity and Child Health – Schemes Shared between State and Centre – UG Commodity grants and Infrastructure Maintenance grants under National Health Mission – State Share – 309 Grants-in-Aid – 03 Grants for Specific Schemes. [DPC 2211 00 103 UG 30903]	20,65,40,000/-
2.	2211-00 Family Welfare – 793 Special Central Assistance for Scheduled Caste Component Plan – Schemes Shared between State and Centre – UG Commodity grants and Infrastructure Maintenance grants under National Health Mission – State Share – 309 Grants-in-Aid – 03 Grants for Specific Schemes. [DPC 2211 00 793 UG 30903]	26,37,78,667/-
3.	2211-00 Family Welfare – 794 Special Central Assistance for Tribal Sub-Plan – Schemes Shared between State and Centre - UG Commodity grants and Infrastructure Maintenance grants under National Health Mission – State Share – 309 Grants-in-Aid – 03 Grants for Specific Schemes. [DPC 2211 00 794 UG 30903]	4,55,51,333/-
	Grand Total	**51,58,70,000/-**

6. Necessary funds of Rs.51,58,70,000/- will be provided by way of reappropriation as detailed below. The Mission Director, National Health Mission-Tamil Nadu is authorized to incur the amount sanctioned in para 4 above.

Sl. No	Reappropriation From heads of Accounts	Reappropriation to heads of account	Amount
1	2211 00 103 UD 30903	2211 00 103 UG 30903	20,65,40,000/-
2	2211 00 793 UD 30903	2211 00 793 UG 30903	26,37,78,667/-
3	2211 00 794 UD 30903	2211 00 794 UG 30903	4,55,51,333/-
	Total		51,58,70,000/-

Single Nodal Agency – SPARSH Account details:

CSS code	:	4063
CSS Name	:	Flexible Pool for RCH & Health System Strengthening, National Health Programme and National Urban Health Mission
SLS Code	:	TN387
SLS Name	:	State Share of Commodity and Infrastructure Maintenance Grants
State Drawing Account No. in Reserve Bank of India	:	01512701484
State Drawing Account Name in Reserve Bank of India	:	01909TN387STATESHAREINFRA

7. The Mission Director, National Health Mission-Tamil Nadu is also directed to implement the above scheme through SNA-SPARSH fund flow mechanism as mandated by the financial procedure outlined by the Government of India and shall be permitted to revise the targets among the approved components based on requirements. The Government also inform that bills shall be presented in IFHRMS-SNA-SPARSH bill module for 100% under any of the head of above, which will be divided into Government of India and State share, by the system itself i.e. there will not be concept of separate head of account for State and Government of India share hereafter.

8. The Mission Director, National Health Mission-Tamil Nadu is directed to ensure that the overall expenditure based on this order do not exceed the sanctioned amount together all the Drawing and Disbursing Officers under the scheme, since the expenditure is to be incurred through various drawals as and when expenditure is incurred by various Drawing and Disbursing Officers mapped under the Scheme. He is also directed to strictly adhere to the SNA-SPARSH guidelines issued in Government Letter No.573, Finance (PFMS) Department, dated 06.01.2025 and 07.02.2025.

9. This order issues with the concurrence of the Finance Department vide e.file No.1985/2026, dated 26.02.2026 with Additional Sanction Ledger No.2026022533.

(BY ORDER OF THE GOVERNOR)

P. SENTHILKUMAR
ADDITIONAL CHIEF SECRETARY TO GOVERNMENT

To
The Mission Director, National Health Mission-Tamil Nadu, Chennai-600 006.
The Section Officer, Health and Family Welfare (Bills) Department,
Chennai-600 009 (2 copies).
The Principal Accountant General (A&E), Chennai-600 018.
The Principal Accountant General (Audit), Chennai-600 018.
The Pay and Accounts Officer, Secretariat, Chennai-600 009.
The Resident Audit Officer, O/o. the Principal Accountant General, Secretariat,
Chennai-600 009.

Copy to:
The Private Secretary to Additional Chief Secretary to Government, Health and Family Welfare Department, Chennai-600 009.
The Finance (Health-I / BG.II / PFMS / W&M.I) Department, Chennai-600 009.
The Health and Family Welfare (Data Cell) Department, Chennai-600 009.
Stock file / Spare copy.

// FORWARDED / BY ORDER //

27/02/2026
SECTION OFFICER
27/2/26

NATIONAL HEALTH MISSION-TN
03 MAR 2026
CHENNAI-600 006
P18

ABSTRACT

National Health Mission – Tamil Nadu – Provision of additional amenities to Tamil Nadu Institute of Mental Health and Neuro Sciences (TNIMHANS), Chennai – Sanction accorded – Orders Issued.

HEALTH AND FAMILY WELFARE (EAP.II/1) DEPARTMENT

G.O.(Ms.).No.69

Dated 27.02.2026
விசுவாவசு, மாசி – 15
திருவள்ளுவர் ஆண்டு 2057

Read:

1. G.O.(Ms.).No.106, Health and Family Welfare (EAP.I/2) Department, dated 30.03.2023.
2. From the Mission Director, National Health Mission-Tamil Nadu, letter No.2474-1/P18/NHM/2022, dated 13.12.2025.

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ORDER:

In the Government Order first read above, orders were issued for establishment of Tamil Nadu Institute of Mental Health and Neuro Sciences (TNIMHANS), Chennai, at a total cost of Rs.40.00 crore as detailed below based on the approval given by the Government of India in RoP.2022-2024 and financial sanction was accorded for a sum of Rs.8.00 crore only, for execution of civil works through the Public Works Department:

Civil Works	Rs.35,00,00,000/-
Equipment	Rs.5,00,00,000/-
Total	Rs.40,00,00,000/-

2. In the letter second read above, the Mission Director, National Health Mission-Tamil Nadu has stated that the construction of new building for Tamil Nadu Institute of Mental Health and Neuro Sciences, Chennai with GF+6 floors had been completed. However, during the visits made by National Health Mission officials and review meetings conducted for operationalization the TNIMHANS, it was suggested to provide Effluent Treatment Plant arrangements, Fire arrangements, lightening arrester, Street light and other essential requirements as additional amenities such as power generator, power distribution (essential and non-essential), etc., so as to ensure the safety and welfare of patients, due to the speciality of the services to be provided to the patients. Consequently, it was decided to provide the essential additional requirements and amenities. The Director of Medical Education and Research has submitted a detailed proposal to National Health Mission-Tamil Nadu requesting fund to the tune of Rs.2.50 crore, for the additional amenities to TNIMHANS building at Institute of Mental Health, Kilpauk, Chennai. It was decided to reallocate a sum of Rs.2.50 crore from the funds previously earmarked for provision of equipment and furniture to the Tamil Nadu Institute of Mental Health and Neuro Sciences at a total cost of Rs.5.00 crore under
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National Health Mission, as the requirement of equipment and furniture were finalized at Rs.2.50 crore on gap analysis, since, certain equipment have already been provided to the above institution under XV Finance Commission and Non-Communicable Diseases Programme funds and a sum of Rs.2,80,09,895/- has been released to the Tamil Nadu Medical Services Corporation Limited for procurement of equipment to the above institution.

3. The Mission Director, National Health Mission-Tamil Nadu has further stated that the Executive Committee of the State Health Society-Tamil Nadu has given its approval for providing additional amenities to Tamil Nadu Institute of Mental Health and Neuro Sciences at a total cost of Rs.2.50 crore through Public Works Department by reallocating the funds approved for provision of equipment to the above institution in the 49th Executive Committee meeting held on 27.05.2025 vide Agenda No.12/49/2025. Based on the above approval, a sum of Rs.2.50 crore had been remitted into the Government account vide Challan No.20250919007723, dated 19.09.2025 for financial sanction. He has furnished the Detailed Estimate for provision of additional amenities to Tamil Nadu Institute of Mental Health and Neuro Sciences, Chennai prepared based on the schedule of rate for the year 2024-25 and approved by the Engineer-in-Chief and Chief Engineer (General), Public Works Department, Chepauk, Chennai and countersigned by the Head of the User Department i.e. the Director of Medical Education and Research, Chennai. The Mission Director, National Health Mission-Tamil Nadu has, therefore, requested to accord administrative and financial sanction for a sum of Rs.2.50 crore for provision of additional amenities to the Tamil Nadu Institute of Mental Health and Neuro Sciences (TNIMHANS) through the Public Works Department.

4. The general abstract of the detailed estimate for provision of additional amenities to the TNIMHANS is as follows:

Sl. No.	Description of works	Amount in Rupees
1.	Civil work including GST	96,95,716/-
2.	Electrical works including GST (250 KV Generator, Raising main power and lighting, etc.)	1,41,43,124/-
3.	Lumpsum Provision (TANGEDCO charges, etc.)	11,61,160/-
	Total	2,50,00,000/-

5. The Government, after examination, have decided to accord sanction for a sum of Rs.2,50,00,000/- (Rupees two crore and fifty lakh only) for provision of additional amenities to the Tamil Nadu Institute of Mental Health and Neuro Sciences (TNIMHANS) through the Public Works Department, by reallocation of funds approved for procurement of equipment to the above institution and order accordingly.

6. The expenditure sanctioned in paragraph 5 above shall be debited under the following head of account:-

"4211 – 00 Capital Outlay on Family Welfare – 103 Maternity and Child Health – State's Expenditure – AA Civil Works under National Health Mission Scheme – 416 Major Works – 01 Major Works".

[IFHRMS DPC 4211 00 103 AA 41601]

7. Necessary funds for the above sanctioned expenditure has already been provided in Final Modified Appropriation for the year 2025-2026. The Engineer-in-Chief and Chief Engineer (General), Public Works Department, Chepauk, Chennai is authorized to draw and disburse the funds sanctioned in paragraph 5 above and directed to make provision to ensure compliance with the directions for third party monitoring of civil works and adherence to Indian Public Health Standards following the guidelines and conditionalities stipulated by the Government of India.

8. The Mission Director, National Health Mission-Tamil Nadu is directed to send the utilization certificate for the funds sanctioned above under National Health Mission in the prescribed format to the Government of India at the appropriate time.

9. This order issues with the concurrence of Finance Department, vide e.file No.12325/2025, dated 26.02.2026.

(BY ORDER OF THE GOVERNOR)

P. SENTHILKUMAR
ADDITIONAL CHIEF SECRETARY TO GOVERNMENT

To
The Mission Director, National Health Mission- Tamil Nadu, Chennai – 600 006.
The Engineer-in-Chief and Chief Engineer (General), Public Works Department, Chennai - 600 005.
The Director of Medical Education and Research, Chennai – 600 010.
The Principal Accountant General (A&E), Chennai – 600 018.
The Principal Accountant General (Audit), Chennai – 600 018.
The Pay and Accounts Officer (North/South), Chennai - 600 001 / 600 035.
The Resident Audit Officer, Office of the Principal Accountant General, Secretariat, Chennai - 600 009.

Copy to:
The Private Secretary to Additional Chief Secretary to Government, Health and Family Welfare Department, Chennai – 600 009.
The Special Personal Assistant to Hon'ble Minister (Finance, Environment & Climate Change), Chennai - 600 009.
The Special Personal Assistant to Hon'ble Minister (Health & Family Welfare), Chennai - 600 009.
The Dean, Madras Medical College and Rajiv Gandhi Government General Hospital, Chennai - 600 003.
The Director, Tamil Nadu Institute of Mental Health and Neuro Sciences, Chennai-600 010.
The Finance (Health-I / BG.II) Department, Chennai - 600 009.
The Health and Family Welfare (E / Data Cell) Department, Chennai - 600 009.
Stock file / Spare copy.

// FORWARDED / BY ORDER //

27/02/2026

SECTION OFFICER

27/2/26

NATIONAL HEALTH MISSION
25 MAR 2026
CHENNAI-600 006

P3

சுருக்கம்

சங்கங்கள் – பதிவுத்துறை – 1975–ஆம் ஆண்டைய தமிழ்நாடு சங்கங்கள் பதிவுச் சட்டப் பிரிவின் கீழ் மாநிலம் முழுவதிலும் பதிவு செய்யப்பட்டுள்ள மாவட்ட சுகாதார சங்கம் மற்றும் நோயாளிகள் நலச் சங்கம் (District Health Society and Patient Welfare Society) ஆகிய சங்கங்களுக்கு 2005–2006 ஆண்டு முதல் 2025–2026 வரையிலான நிதியாண்டுகளில் புதுப்பிக்க தவறிய காலத்திற்கு புதுப்பிக்க ஒரு முறை விலக்களித்து – ஆணை வெளியிடப்படுகிறது.

வணிகவரி மற்றும் பதிவுத் (எம்.1) துறை

அரசாணை (டி) எண்.70

நாள் 02.03.2026
விசுவாவசு, மாசி–18,
திருவள்ளுவர் ஆண்டு, 2057.
படிக்க:

1. குழும இயக்குநர், தமிழ்நாடு தேசிய சுகாதார இயக்ககம், சென்னை கடித எண்.246/P3/NHM/2025, நாள் 28.01.2026.
2. அரசு கடிதம் எண்.12806479/M1/2025–2, வணிகவரி மற்றும் பதிவுத்துறை, நாள் 06.02.2026.
3. பதிவுத்துறை தலைவரின் கடிதம் எண்.6011/ஐ1/2026, நாள் 12.02.2026.

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ஆணை:

மேலே முதலாவதாக படிக்கப்பட்ட தமிழ்நாடு தேசிய சுகாதார இயக்கக குழும இயக்குநரிடமிருந்து பெறப்பட்ட கடிதம் தொடர்பாக மேலே மூன்றாவதாக படிக்கப்பட்ட கடிதத்தில் பதிவுத்துறை தலைவர் பின்வருமாறு தெரிவித்துள்ளார்:–

தமிழ்நாடு தேசிய சுகாதார இயக்ககத்தின் கீழ், 38 மாவட்டங்களிலும் பதிவு செய்யப்பட்டுள்ள சங்கங்களின் பெயர்கள், பதிவு எண் மற்றும் அச்சங்கங்களால் இறுதியாக கோர்வை செய்யப்பட்ட நிதியாண்டின் விபரம் ஆகிய விபரங்களுடன் கூடிய பட்டியல் பெறப்பட்டு, அம்முன்மொழிவு பரிசீலிக்கப்பட்டது.

(த.பி.பா)

தமிழகம் முழுவதிலும், தமிழ்நாடு சங்கங்கள் பதிவு சட்டம் 1975-ன் கீழ் பதிவு மேற்கொள்ளப்பட்டுள்ள District Health Society and Patient Welfare Society ஆகிய சங்கங்களுக்கு, 2005-2006 முதல் 2025-2026 ஆகிய நிதியாண்டுகள் வரை ஆண்டுதோறும் கோர்வை செய்யப்பட வேண்டிய கோர்வைகள் தாக்கல் செய்யப்படுவதிலிருந்து விலக்கு கோரியும், அவ்வாறு விலக்கு அளிக்கப்படின், சங்கப்பதிவிற்கு பின்னர் தங்களது கோர்வைகள் ஏற்கப்பட்டதாக கருதி அதன் தொடர்ச்சியாக 2026-2027 நிதியாண்டு முதல் சங்கங்களின் கோர்வைகளை தாக்கல் செய்ய இயலும் என தெரிவித்து, தமிழ்நாடு தேசிய சுகாதார இயக்கக குழும இயக்குநரால் கேட்டுக் கொள்ளப்பட்டது என்றும், பொது சுகாதாரம் மற்றும் மருத்துவப் பணிகளுக்காக அரசு மேற்கொள்ளும் முன்னெடுப்புகளின் முக்கியத்துவத்தை கருத்தில் கொண்டும், மேற்கண்ட திட்டங்களின் கீழ் உருவாக்கப்பட்டுள்ள சங்கங்களின் நோக்கங்கள் மற்றும் செயல்பாடுகளை கருத்தில் கொண்டும், அரசின் National Health Mission திட்டத்தின் கீழ் மாநிலம் முழுவதிலும் கடந்த 2005 ஆம் ஆண்டு முதல் பதிவு செய்யப்பட்டுள்ள அனைத்து மாவட்ட சுகாதார சங்கம் மற்றும் நோயாளிகள் நலச் சங்கம் (District Health Society and Patient Welfare Society) சங்கங்களை பொருத்து கீழ்கண்ட இனங்களுக்கு முற்றிலுமாக விலக்களிக்க வேண்டியுள்ளது:-

* தமிழ்நாடு சங்க பதிவு சட்டம், 1975, பிரிவு 26(1) இன்படி ஆண்டுக்கு ஒரு பொதுக்குழு கூட்டமாவது கூட்டப்பட வேண்டும் என்பதிலிருந்தும்,

* தமிழ்நாடு சங்க பதிவு விதிகள், 1978, விதி 22 இன்படி ஒவ்வொரு நிதியாண்டு முடிவடைந்த ஆறு மாத காலத்திற்குள் தணிக்கை செய்யப்பட்ட கணக்குகள், பொதுக்குழுவின் ஒப்புதலுக்காக தாக்கல் செய்யப்பட வேண்டும் என்பதிலிருந்தும், பொதுக்குழு கூட்டம் நிறைவடைந்ததிலிருந்து ஆறு மாத காலத்திற்குள் சங்கங்களின் பதிவாளரிடம் பிரிவு 16(3)(b) இன் கீழான அறிக்கைகளை கோர்வைக்கு தாக்கல் செய்ய வேண்டும் என்பதிலிருந்தும்,

* பிரிவு 16(3)(b) இன் கீழ் சங்கங்களின் பதிவாளரிடம் காலமுறையாக தாக்கல் செய்யப்பட வேண்டிய ஆண்டு அறிக்கைகளை கோர்வை செய்வதிலிருந்தும்,

* பிரிவு 15(2) இன் கீழ் சங்க உறுப்பினர்கள் மாற்றம் மற்றும் நிர்வாகிகள் மாற்றம் தொடர்பாக சங்கங்களின் பதிவாளரிடம் காலமுறையாக தாக்கல் செய்ய வேண்டிய படிவம் Vil அறிவிப்புகளை கோர்வை செய்வதில் இருந்தும், 2005-2006 முதல் 2025-2026 வரையிலான நிதியாண்டுகளுக்கு சிறப்பு நிகழ்வாக கருதி முற்றிலுமாகவும்,

மாநிலம் முழுவதிலும் கடந்த 2005 ஆம் ஆண்டு முதல் பதிவு செய்யப்பட்டுள்ள அனைத்து District Health Society மற்றும் Patient Welfare Society சங்கங்களை பொருத்தும், தமிழ்நாடு சங்கங்கங்கள் பதிவுச்சட்டம் பிரிவு 15(2), 16(3)(b), 26(1) மற்றும் தமிழ்நாடு சங்கங்கள் பதிவும் விதி 22 ஆகியவற்றிற்கு விலக்களிக்கலாம் எனவும், மேலும், 2005-2006 முதல் 2025-2026 வரையிலான நிதியாண்டுகளில் சங்கத்தின் முகவரி மாற்றம், பெயர் மாற்றம், துணைவிதி திருத்தம் உள்ளிட்ட நிகழ்வுகள் ஏதேனும் இருப்பின்

அவற்றை கோர்வை செய்ய அனுமதிக்கலாம் எனவும் பதிவுத்துறை தலைவர் அரசுக்கு பரிந்துரை செய்துள்ளார்.

3. மேற்கண்ட சூழ்நிலையில், பதிவுத்துறை தலைவரின் பரிந்துரையினை அரசு கவனமுடன் ஆய்வு செய்து, அதனை ஏற்று, 1975-ஆம் ஆண்டைய தமிழ்நாடு சங்கங்கள் பதிவுச் சட்டம் (தமிழ்நாடு சட்டம் 27/1975) பிரிவு 54-இன் கீழ் அரசுக்கு வழங்கப்பட்டுள்ள அதிகாரத்தின்படி, தமிழ்நாடு ஆளுநர் அவர்களால், தமிழ்நாடு தேசிய சுகாதார இயக்ககம் மாநிலம் முழுவதிலும் கடந்த 2005-ஆம் ஆண்டு முதல் 1975-ஆம் ஆண்டைய தமிழ்நாடு சங்கங்கள் பதிவுச் சட்டத்தின் கீழ் பதிவு செய்யப்பட்டு இணைப்பில் உள்ள அனைத்து மாவட்ட சுகாதார சங்கம் மற்றும் நோயாளிகள் நலச் சங்கம் (District Health Society and Patient Welfare Society) ஆகிய சங்கங்களை பொருத்து, 2005-2006 முதல் 2025-2026 வரையிலான நிதியாண்டுகளில் பொதுக்குழு கூட்டத்தை கூட்டாமைக்கு, 1975-ஆம் ஆண்டைய தமிழ்நாடு சங்கங்கள் பதிவுச் சட்டப் பிரிவு 26(1)ற்கு விலக்களித்தும், வரவு செலவு ஆண்டறிக்கைகளை பொதுக்குழுவில் வைத்து ஒப்புதல் பெறவும், ஒப்புதல் பெற்ற ஆண்டறிக்கைகளை மாவட்டப் பதிவாளரிடம் தாக்கல் செய்யவும், பொதுக்குழு மற்றும் நிர்வாகக்குழு மாற்றம் தொடர்புடைய படிவம்-VII ஆகியவற்றை மேற்படி விதிகளில் வரையறுக்கப்பட்ட காலவரையறைக்குள் கோர்வைக்கு தாக்கல் செய்வதிலிருந்தும், மேற்படி சட்டப் பிரிவு 16(3)(b), 15(2) அதன் விதிகளில், விதி 22-லிருந்து விலக்களித்தும் மற்றும் 2005-2006 ஆண்டு முதல் 2025-2026 வரையிலான நிதியாண்டுகளில் சங்கத்தின் முகவரி மாற்றம், பெயர் மாற்றம், துணைவிதி திருத்தம் உள்ளிட்ட நிகழ்வுகள் இருப்பின் அவற்றை கோர்வை செய்ய இதை சிறப்பு நிகழ்வாக கருதி அரசு அனுமதியளித்து ஆணையிடுகிறது.

(ஆளுநரின் ஆணைப்படி)

ஷில்பா பிரபாகர் சதீஷ்
அரசு செயலாளர்

பெறுநர்:

பதிவுத்துறை தலைவர், சென்னை - 28.
குழும இயக்குநர், தமிழ்நாடு தேசிய சுகாதார இயக்ககம்,
தேனாம்பேட்டை, சென்னை-6.
(பதிவுத்துறை தலைவர், சென்னை-28 வழியாக)
அனைத்து மாவட்டப்பதிவாளர்கள்.
(பதிவுத்துறை தலைவர், சென்னை-28 வழியாக)

நகல்:

முதுநிலை நேர்முக உதவியாளர், மாண்புமிகு அமைச்சர்
(வணிகவரி மற்றும் பதிவு), அலுவலகம் சென்னை-9.
செயலாளரின் முதுநிலை தனிச் செயலர்,
வணிகவரி மற்றும் பதிவுத்துறை, சென்னை-9.

அரசு கூடுதல் தலைமைச் செயலரின் தனிச்செயலர்,
மருத்துவம் மற்றும் மக்கள் நல்வாழ்வுத் துறை, சென்னை–9.
இருப்புக் கோப்பு / உதிரி.

//ஆணைப்படி அனுப்பப்படுகிறது//

பிரிவு அலுவலர்

NATIONAL HEALTH MISSION TN
05 MAR 2026
CHENNAI-60

ABSTRACT

National Health Mission–Tamil Nadu – Provision of new Mortuary Building to Government Hospital, Singampunari, Sivagangai District – Administrative and financial sanction – Accorded – Orders Issued.

HEALTH AND FAMILY WELFARE (EAP.II/1) DEPARTMENT

G.O.(Ms.).No.72

Dated 03.03.2026
விசுவாவசு, மாசி – 19
திருவள்ளுவர் ஆண்டு 2057

Read:

1. G.O.(Ms).No.205, Health and Family Welfare (EAP.II/1) Department, dated 08.05.2024.
2. From the Mission Director, National Health Mission-Tamil Nadu, letter No.839/NHM/S/2022, dated 02.09.2025.

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ORDER:

In the letter second read above, the Mission Director, National Health Mission-Tamil Nadu has stated that based on the announcement made by the Hon'ble Minister (Health & Family Welfare) on the Floor of the Tamil Nadu Legislative Assembly on 18.04.2023, administrative and financial sanction was accorded in Government Order first read above, for provision of new mortuary to the following medical institutions as detailed below:-

Sl. No.	Name of Districts	Name of the Institution	Administrative sanction per Unit	Financial Sanction per Unit
			(Rs. in lakh)	
1.	Chengalpattu	Government Hospital, Cheyyur	63	60
2.	Pudukottai	Government Hospital, Valaiyapatti	63	60
3.	Salem	Government Hospital, Attur	63	60
4.	Sivagangai	Government Hospital, Kandanur	63	60
5.	Tenkasi	Government Hospital, Kadayanallur	63	60
6.	Tenkasi	Government Hospital, Sivagiri	63	60
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7.	The Nilgiris	Government Hospital, Coonoor	63	60
8.	Namakkal	Government Hospital, Kolli Hills	63	60
9.	Chengalpattu	Government Medical College Hospital, Chengalpattu	150	150
10.	Chennai	Government Kilpauk Medical College Hospital, Kilpauk	150	150
11.	Vellore	Government Medical College Hospital, Vellore	150	150
	Total		954	930

2. The Mission Director, National Health Mission–Tamil Nadu has further stated that the Directorate of Medical and Rural Health Services has proposed to provide new mortuary to Government Hospital, Singampunari, Sivagangai District instead of Government Hospital, Kandanur, Sivagangai District, as suitable site is not available in the premises of Government Hospital, Kandanur. He has further stated that necessary permission was obtained from the Executive Sub-Committee of the Tamil Nadu State Health Society to provide new mortuary to Government Hospital, Singampunari, Sivagangai District instead of Government Hospital, Kandanur, Sivagangai District vide Circulation Note No.09/2025, dated 04.09.2025.

3. The Mission Director, National Health Mission–Tamil Nadu has also stated that a sum of Rs.24 lakh had been remitted into Government Account vide Chellan No.20240605013598, dated 13.06.2024 in addition to the amount of Rs.930 lakh already remitted into Government account vide Chellan No.20231031010861, dated 07.11.2023, for financial sanction for providing new mortuary building with Cold Storage and allied other infrastructure to the eight (8) institutions mentioned in Sl.No.1 to 8 at paragraph 1 above through the Public Works Department.

4. The Mission Director, National Health Mission–Tamil Nadu has furnished the detailed estimate prepared based on the schedule of rate for the year 2024-2025 and prevailing market rate for providing new mortuary to the Government Hospital, Singampunari, Sivagangai District at the total cost of Rs.63 lakh. The above detailed estimate has been approved by the Engineer-in-Chief and Chief Engineer (General), Public Works Department, Chennai and countersigned by the Head of the user department i.e. the Director of Medical and Rural Health Services, Chennai. The Mission Director, National Health Mission-Tamil Nadu has, therefore, requested to issue amendment to Government Order second read above for change of institution for providing new mortuary to Government Hospital, Singampunari instead of Government Hospital, Kandanur in Sivagangai District and to accord financial sanction for a sum of Rs.24,00,000/- as remaining amount for providing new mortuary to the Eight (8) institutions mentioned in Sl.No.1 to 8 at paragraph 1 above.

5. The General Abstract of the Detailed Estimate for construction of new mortuary to the Government Hospital, Singampunari, Sivagangai District is as follows:

Sl. No.	Description of Works	Amount
1.	Civil work including GST	Rs.40,04,743/-
2.	Lumpsum Provision including GST (Electrical arrangements, Cold Storage, etc.,)	Rs.22,95,257/-

6. The Government, after careful examination, have decided to issue the following orders:-

i) Administrative sanction is accorded for provision of new Mortuary to Government Hosptial, Singampunari, Sivagangai District at a total cost of Rs.63,00,000/- (Rupees sixty three lakh only) instead of Government Hospital, Kandanur in Sivagangai District, already sanctioned in Government Order first read above; and

ii) financial sanction is accorded for a sum of Rs.24,00,000/- (Rupees twenty four lakh only) for construction of new mortuary building in the following Government Hospitals in addition to the financial sanction already accorded in the Government Order first read above:-

Sl. No.	Name of Districts	Name of the Institution	Administrative sanction accorded per unit	Second and final instalment sanction
			(Rupees in lakh)	
1.	Chengalpattu	Government Hospital, Cheyyur	63.00	3.00
2.	Pudukottai	Government Hospital, Valaiyapatti	63.00	3.00
3.	Salem	Government Hospital, Attur	63.00	3.00
4.	Sivagangai	Government Hospital, Singampunari	63.00	3.00
5.	Tenkasi	Governement Hospital, Kadayanallur	63.00	3.00
6.	Tenkasi	Government Hospital, Sivagiri	63.00	3.00
7.	The Nilgiris	Government Hospital, Coonoor	63.00	3.00
8.	Namakkal	Government Hospital, Kolli Hills	63.00	3.00
		Total	954.00	24.00

7. The expenditure sanctioned in paragraph 6 above shall be debited under the following head of account:-

"4211 – 00 Capital Outlay on Family Welfare – 103 Maternity and Child Health – State's Expenditure - AA Civil Works under National Health Mission Scheme - 416 Major Works – 01 Major Works".

[IFHRMS DPC 4211 00 103 AA 41601]

8. Necessary funds has been provide in Final Modified Appropriation for the year 2025–2026. The Engineer-in-Chief and Chief Engineer (General), Public Works Department, Chepauk, Chennai is authorized to draw and disburse the funds sanctioned in paragraph 5(ii) above and to make provision to ensure compliance with the directions for third party monitoring of civil works and adherence to Indian Public Health Standards following the guidelines and conditionalities stipulated by the Government of India.

9. This order issues with the concurrence of Finance Department, vide e.file No.10643/2025, dated 02.03.2026.

(BY ORDER OF THE GOVERNOR)

P. SENTHILKUMAR
ADDITIONAL CHIEF SECRETARY TO GOVERNMENT

To
The Mission Director, National Health Mission- Tamil Nadu, Chennai–600 006.
The Engineer-in-Chief and Chief Engineer (General), Public Works Department, Chennai-600 005.
The Director of Medical and Rural Health Services, Chennai–600 006.
The District Collectors concerned.
The Principal Accountant General (A&E), Chennai–600 018.
The Principal Accountant General (Audit), Chennai–600 018.
The Pay and Accounts Officer (South), Chennai-600 035.
The District Treasury Officers concerned.
The Executive Engineer concerned.
The Resident Audit Officer, Office of the Principal Accountant General, Secretariat, Chennai-600 009.

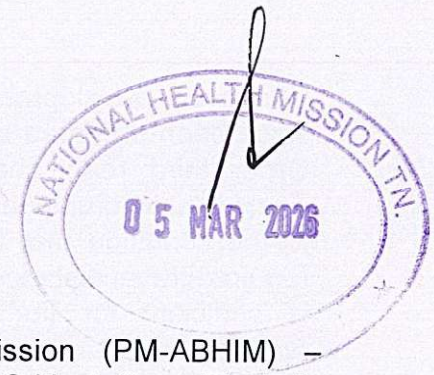
Copy to:
The Special Personal Assistant to Hon'ble Minister (Finance, Environment & Climate Change), Chennai-600 009.
The Special Personal Assistant to Hon'ble Minister (Health & Family Welfare), Chennai-600 009.
The Private Secretary to Additional Chief Secretary to Government, Health and Family Welfare Department, Chennai – 600 009.
The Joint Director of Health Services concerned.
The Chief Medical Officer of Government Hospitals concerned.
The Finance (Health-I) Department, Chennai - 600 009.
The Health and Family Welfare (F / Data Cell) Department, Chennai-600 009.
Stock File /Spare copy.

// FORWARDED / BY ORDER //

03/03/2026

SECTION OFFICER

3/3/26



ABSTRACT

Prime Minister Ayushman Bharat Health Infrastructure Mission (PM-ABHIM) – Construction of additional two (2) staircases in 50 bedded Critical Care Block in Government Medical College Hospital, Sivagangai at a total cost of Rs.1,05,60,000/- – Administrative and financial sanction – Accorded - Orders – Issued.

HEALTH AND FAMILY WELFARE (EAP.II/2) DEPARTMENT

S/u 175

G.O.(Ms.).No.73

Dated 03.03.2026
விசுவாவசு, மாசி – 19
திருவள்ளுவர் ஆண்டு 2057

Read:

1. G.O.(Ms).No.295, Health and Family Welfare (EAP-II-2) Department, dated 07.09.2023.
2. G.O.(Ms).No.105, Health and Family Welfare (EAP-II-2) Department, dated 24.04.2025.
3. G.O.(3D).No.63, Housing and Urban Development (UD 5(1)) Department, dated 11.07.2025.
4. From the Mission Director, National Health Mission-Tamil Nadu, letter No.11362264/NHM/S/2025-2, dated 21.11.2025.

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ORDER:

In the Government Order first read above, administrative and financial sanction has been accorded for construction of 50 bedded Critical Care Block in Government Medical College Hospital, Sivagangai for a sum of Rs.2000 lakh and Rs.1929 lakh respectively under Prime Minister Ayushman Bharat Health Infrastructure Mission (PM-ABHIM) scheme for the year 2022-2023.

2. In the letter fourth read above, the Mission Director, National Health Mission-Tamil Nadu has stated that the new buildings are constructed with G+3 floors with total plinth area of 7165.20 Sq.Mts. through Public Works Department, for accommodating required service delivery units for 50 bedded Critical Care Block in Government Medical College Hospital, Sivagangai. While applying for the DTCP approval for new building of 50 bedded Critical Care Block in Government Medical College Hospital, Sivagangai by the Dean of the said Medical College, it was rejected on the grounds that Rule (1) under Annexure-IX and Rule 53(4) of the Tamil Nadu
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Combined Development and Building Rules, 2019 were violated, and an appeal has since been prepared by the Dean. After examination of the appeal, in the Government Order third read above, the regulation of Annexure-IX(1) under Rule 35(23) of Tamil Nadu Combined Development and Building Rules, 2019 has been relaxed subject to the condition that two additional exits should be provided to satisfy the minimum required travel distance to reach the exit, since the width of the ramp in the new Building is sufficient for the movement of stretchers. Considering the necessity of the requirements, it is proposed to utilize the balance funds available under PM-ABHIM with National Health Mission for construction of two additional staircases to the Critical Care Block building in Government Medical College Hospital, Sivagangai, which were allotted for execution of civil works of District Integrated Public Health Laboratories (DIPHL) under FMR-ABHIM 4.1 of 2023-2024 and 2025-2026. Out of the total allocation for four (4) District Integrated Public Health Laboratories (DIPHL), only Rs.222 Lakh has been remitted to the Government Account based on the requirement, and the same was sanctioned in the Government Order second read above as detailed below:

Sl. No	Name of the District	Name of the Institution	Details of Works	Amount approved in RoP for civil works	Administrative Sanction issued by Government for Civil works	Balance available in NHM
				(Rs.in lakh)		
1.	Krishnagiri	Government Hospital Hosur	District Integrated Public Health Laboratory	100	56	44
2.	Villupuram	Government Hospital Tindivanam	District Integrated Public Health Laboratory	100	41	59
3.	Karur	Government Hospital Kulithalai	District Integrated Public Health Laboratory	100	57	43
4.	Pudukkottai	Government Hospital Aranthangi	District Integrated Public Health Laboratory	100	68	32
			Total	400	222	178

3. The Mission Director, National Health Mission-Tamil Nadu has stated that out of the above balance funds of Rs.178 lakh available under Prime Minister Ayushman Bharat Health Infrastructure Mission (PM-ABHIM), Rs.105.60 lakh may be utilized for provision of additional two (2) staircases to the Critical Care Block in Government Medical College Hospital, Sivagangai, as necessitated by the assessed requirements.

4. The Mission Director, National Health Mission-Tamil Nadu has also stated that necessary permissions has been obtained for the above proposal from the Executive Sub-Committee of National Health Mission-Tamil Nadu in Circulation Note No.14/2025,

dated 03.11.2025. He has also furnished the detailed estimate for construction of additional two (2) staircases in newly constructed 50 bedded Critical Care Building in Government Medical College Hospital, Sivagangai prepared based on the schedule of rate for the year 2025-26 and approved by the Engineer-in-Chief and Chief Engineer (General), Public Works Department, Chennai and countersigned by the Heads of the User Department i.e. the Director of Medical Education and Research and stated that a sum of Rs.105.60 lakh has been remitted into Government account vide Challan No.20251203007980, dated 03.12.2025 for financial sanction so as to execute the above said works through the Public Works Department. The Mission Director, National Health Mission-Tamil Nadu has, therefore, requested to accord administrative and financial sanction for a sum of Rs.105.60 lakh for provision of additional two (2) staircases to the new 50 bedded Critical Care Block in Government Medical College Hospital, Sivagangai.

5. The General Abstract of the detailed estimate for the above work is as follows:-

Sl. No.	Description of works	Amount (in Rupees)
1.	Civil works including GST	94,38,336/-
2.	Lumpsum Provision (PS Charges and other contingencies, Unforseen items, advertisement charges, etc.)	1,61,664/-
3.	10% escalation for the year 2024-2025	9,60,000/-
	Total	1,05,60,000/-

6. The Government, after careful examination, have decided to accord administrative and financial sanction for a sum of Rs.1,05,60,000/- (Rupees one crore five lakh and sixty thousand only) for provision of additional two (2) staircases to the new 50 bedded Critical Care Block in Government Medical College Hospital, Sivagangai through Public Works Department by utilizing the unspent amount available under PM-ABHIM scheme 2021-2026 and order accordingly.

7. The expenditure sanctioned in paragraph 6 above shall be debited to the following head of account: -

"4211-00 Capital Outlay on Family Welfare – 103 Maternity and Child Health – State's Expenditure – AA Civil Works under National Health Mission Scheme – 416 Major Works – 01 Major works".

[IFHRMS DPC 4211 00 103 AA 41601]

8. Necessary funds has been provided in Final Modified Appropriation for the year 2025-2026. The Engineer-in-Chief and Chief Engineer (General), Public Works Department, Chepauk, Chennai is authorized to draw and disburse the funds

sanctioned in paragraph 6 above and directed to make provision to ensure compliance with the directions for third party monitoring of civil works and adherence to Indian Public Health Standards following the guidelines and conditionalities stipulated by the Government of India.

9. This order issues with the concurrence of the Finance Department vide e.file No.11310/2025, dated 02.03.2026.

(BY ORDER OF THE GOVERNOR)

P.SENTHILKUMAR
ADDITIONAL CHIEF SECRETARY TO GOVERNMENT

To
The Mission Director, National Health Mission-Tamil Nadu, Chennai- 600 006.
The Director of Medical and Rural Health Services, Chennai – 600 006.
The Engineer-in-Chief and Chief Engineer (General), Public Works Department, Chennai – 600 005.
The Principal Accountant General, Chennai- 600 018.
The District Collector, Sivagangai.
The District Treasury Officer, Sivagangai.
The Executive Engineer concerned.
The Resident Audit Officer, Office of the Principal Accountant General, Secretariat, Chennai - 600 009.

Copy to:

The Special Personal Assistant to the Hon'ble Minister (Finance, Environment and Climate Change), Chennai - 600 009.
The Special Personal Assistant to the Hon'ble Minister (Health and Family Welfare), Chennai - 600 009.
The Private Secretary to Additional Chief Secretary to Government, Health and Family Welfare Department, Chennai – 600 009.
The Joint Director of Medical and Rural Health Services, Sivagangai.
The Hospital Superintendent, Government Hospital, Sivagangai.
The Public Works (Y) Department, Chennai – 600 009.
The Finance (Health-I) Department, Chennai – 600 009.
The Health and Family Welfare (F / Data Cell) Department, Chennai- 600 009.
Stock File /Spare Copy.

// FORWARDED / BY ORDER //

03/03/2026

SECTION OFFICER

3/3/26

NATIONAL HEALTH MISSION T...
06 MAR 2026
CHENNAI-600 006

ABSTRACT

Maternity Leave – Sanction of Maternity Leave benefits to all the contract nurses under National Health Mission for a maximum period of 26 weeks as per the Maternity Benefit Act - Orders - Issued.

HEALTH AND FAMILY WELFARE (AA1) DEPARTMENT

G.O.(Ms).No.81

Dated: 05.03.2026
Thiruvalluvar Aandu: 2057
Visuvavasu, Maasi 21

Read:

1. Orders of the Hon'ble High Court of Madras dated 18.10.2024 in W.P.No.27556/2018 filed by Medical Services Recruitment Board Nurses Empowerment Association.
2. From the Director of Medical and Rural Health Services Letter Ref.No.2677/N1/3/2021, dated 30.06.2025.
3. From the Mission Director, National Health Mission Letter No.1144/A4/NHM/2022, dated 15.07.2025.

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ORDER:

The Tamil Nadu Medical Services Recruitment Board Nurses Empowerment Association has filed a Writ Petition (W.P.No.27556/2018) before the High Court of Madras with a prayer to direct the respondents to extend the maternity benefits including that 270 days of paid maternity leave in accordance with the provisions of Maternity Benefit Act, 1961 to all Staff Nurses working under the National Rural Health Mission Scheme in the State of Tamil Nadu with immediate effect. In its orders first read above, the Hon'ble High Court of Madras has ordered as follows:-

"7. Therefore, by virtue of Section 27, the provisions of the 1961 Act will prevail over contractual conditions denying or offering less favourable maternity benefits. Consequently, the reliance by the respondents on condition 6 of the Appointment and Posting Order to deny maternity benefits is untenable.

All pending and fresh applications for maternity benefits from NRHM nurses employed on contractual basis shall be considered and disposed

of in terms of section 5 of the 1961 Act within 3 months from the date of receipt of a copy of this order (as regards pending applications) or 3 months from the date of receipt of fresh applications, as the case may be, after making adjustments, if any, towards payments made earlier.

xxxxxxxxxxxxx"

2. The Director of Medical and Rural Health Services has, further, stated that the Advocate General of Tamil Nadu has opined among others that it is not a fit case for filing an appeal and requested the Government to issue necessary instructions to proceed further in this regard.

3. In his letter third read above, the Mission Director, National Health Mission has stated among others that the National Health Mission-Tamil Nadu is bound to fulfil the requirements of the orders passed in the Writ Petition (W.P.No.27556 of 2018) by the Hon'ble High Court of Madras, so as to avoid any potential contempt of Court. He has therefore, requested the Government to issue orders on the following points.

i. The Mission Director, National Health Mission Tamil Nadu may be permitted to extend the provision of Maternity Leave as per the Maternity Benefit (Amendment) Act, 2017 to the all concerned.

ii. The Mission Director, National Health Mission-Tamil Nadu may be permitted to utilize the available funds under the HR Salary Component allocated in the FMR HSS. 185/RoP 2024-2026.

iii. The Mission Director, National Health Mission – Tamil Nadu may be permitted to issue suitable instructions to all the Directorates concerned to accord sanction of Maternity Leave through the District Health societies in accordance with Maternity Benefit (Amendment) Act 2017.

4. The Government have examined the proposals of the Director of Medial and Rural Health Services and the Mission Director, National Health Mission in detail. The Government after careful consideration of the proposals have taken a policy decision to sanction Maternity Leave Benefits to all the contract Nurses, who are working under the control of National Health Mission, for a maximum period of 26 weeks, as per the Maternity Benefit Act. The Government do hereby sanction Maternity Leave Benefits to all the contract Nurses, who are working under the control of National Health Mission, for a maximum period of 26 weeks, as per the Maternity Benefit Act from the date of issue of the order and to utilize the available funds under the HR salary component.

5. The Government also directs the Mission Director, National Health Mission to sanction the Maternity Leave Benefits to those who have filed writ petitions before the Court of Law and got orders in their favour to sanction Maternity Leave Benefits and availed leave on loss of pay from the date of

delivery of baby and the actual leave period availed on loss of pay for taking care of their babies at the maximum of 26 weeks, in accordance with the provisions of the Maternity Benefit Act.

(BY ORDER OF THE GOVERNOR)

P.SENTHILKUMAR
ADDITIONAL CHIEF SECRETARY TO GOVERNMENT

To
The Mission Director, National Health Mission, Chennai-600 006.
The Director of Medical and Rural Health Services, Chennai-600 006.
The Principal Accountant General (A&E), Chennai - 600 018/35.
The Pay and Accounts Officers concerned.
The District Treasury Officers concerned.

Copy to
The Hon'ble Chief Minister's Office, Secretariat, Chennai-09.
The Additional Special Personal Assistant to Hon'ble Minister
(Health and Family Welfare) Department, Chennai – 600 009.
The Principal Private Secretary to Additional Chief Secretary to Government,
Health and Family Welfare Department, Chennai – 600 009.
The Health and Family Welfare (Data Cell) Department, Chennai – 600 009.
Stock File/Spare Copy.

// FORWARDED / BY ORDER //

5/3/2026

SECTION OFFICER

5/3/26

NATIONAL HEALTH MISSION
08 APR 2026
CHENNAI-600 006

ABSTRACT

Child Health – Infant Mortality Rate – Reduction of Infant Mortality Rate (IMR) in Tamil Nadu – Revamping of State Level Task Force Committee and District Level Task Force Committee for reduction of Infant Mortality Rate – Orders – Issued.

HEALTH AND FAMILY WELFARE (R2) DEPARTMENT

G.O.(Ms) No.86 **Dated:06.03.2026**

திருவள்ளுவர் ஆண்டு – 2057

விசுவாவசு வருடம், மாசி – 22

P15/4 P5

Read:

1. G.O (Ms) No.418, Health and Family Welfare (R1) Department, Dated: 30.12.2009.
2. From the Mission Director, National Health Mission, Chennai, letter Ref. No. 12476447/P15/NHM/2025, Dated: 07.12.2025.

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ORDER:

In the letter second read above, the Mission Director, National Health Mission has stated that Infant Death Review (IDR) is a critical strategy outlined under the National Health Mission for strengthening Newborn and Child Health Surveillance & Response. It serves as an essential mechanism to improve the quality of neonatal and infant care and reduce infant mortality. The importance of Infant Death Review lies in its ability to provide detailed insights on factors operating at the facility, community, district, regional and State levels that contribute to infant deaths. Systematic analysis of these deaths helps identify the clinical, systemic and social delays that lead to preventable infant mortality and enables targeted remedial measures to bridge the existing gaps. Tamil Nadu has been implementing Infant Death Review as an established intervention, linking data from Special Newborn Care Units, Newborn Stabilization Units, delivery points, and community-based platforms.

2. He has further stated that the value of Infant Death Surveillance is realized only when the identified causes, delays, and systemic gaps are promptly addressed with co-ordinated corrective and preventive action at all levels of healthcare from community to tertiary facilities. Strengthening this loop of review, response and accountability is essential for accelerating the reduction of infant mortality in the State. The top causes of Infant Deaths which together contribute to the majority of infant mortality in the State (April 2025 – August 2025) are as follows:

1) Prematurity (30%)
2) Sepsis (17%)
3) Birth Asphyxia (14%)
4) Congenital Heart Disease (8%)
5) Multiple Congenital Anomalies (6%)
6) Pneumonia (4%)

3. He has stated that more than 75-80% of infant deaths are preventable and it is observed that the Infant Deaths occurring in the districts are largely avoidable through improvements in early identification, prompt referral, and availability of timely neonatal care. Without immediate and co-ordinated interventions, these preventable deaths may hinder the State's goal of achieving single-digit IMR across all districts.

4. Hence, he has stated that the State Level Task Force Committee for Reduction of Infant Mortality Rate be revamped with the following composition and terms of reference:

State Level Task force Committee for Reduction of Infant Mortality Rate

Sl.No	Designation / Institution	Role
1.	The Additional Chief Secretary to Government, Department of Health & Family Welfare, Secretariat	Chairperson
2.	The Mission Director, National Health Mission	Member Secretary & Convenor
3.	The Director cum Mission Director, Integrated Child, Development Services	Member
4.	The Director, Children Welfare and Special Services	Member
5.	Commissioner for Welfare of the Differently Abled, Commissionerate for Welfare of the Differently Abled	Member
6.	The Director of Public Health and Preventive Medicine	Member
7.	Director of Medical Education & Research	Member
8.	Director of Medical and Rural Health Services	Member
9.	Director of Family Welfare	Member
10.	Director, Institute of Child Health (ICH), Chennai	Member
11.	Joint Director, Directorate of School Education	Member
12.	Joint Director, Child Welfare, Directorate of Social Welfare	Member
13.	Chief, UNICEF, Tamil Nadu	Member
14.	President, Indian Academy of Pediatrics, Tamil Nadu	Member
15.	President, National Neonatology Forum, Tamil Nadu	Member
16.	Consultant, World Health Organization, Tamil Nadu	Member
17.	Other Experts as nominated by the Chairperson	Member

Terms of Reference of the State Level Task Force Committee for Reduction of Infant Mortality Rate

1. The State Level Task Force will meet under the Chairmanship of the Additional Chief Secretary to Government, Health and Family Welfare Department, to review the implementation of Infant Death Review (IDR) and district-wise IMR trends every month.

2. The Convener shall present the regional disparities in IMR, including the lapses identified from Infant Death Reviews and findings from the district level reviews conducted during the previous month.

3. The Members of the State Task Force Committee shall share operational issues and feedback related to their respective departments. Members may also present successful models, lessons learned and best practices that have proven effective in improving neonatal and infant survival and strengthening RMNCHA+N services.

4. The Committee shall discuss the action points emerging from Infant Death Review findings and recommend appropriate policy, programmatic and strategy level interventions.

5. The Committee shall analyze issues and barriers related to access, equity, timeliness, referral, transport and quality of newborn and infant care at all levels of the health system.

6. The Committee Members may review the availability and distribution of essential human resources-Pediatricians, Neonatologists, Medical Officers, Staff Nurses, Paramedics and rationalize deployment to high-need Special Newborn Care Units, New Born Stabilization Units, and delivery points.

7. The Committee shall guide the development of strengthened neonatal and infant care architecture across the State by fostering convergence among Directorates and addressing systemic issues that hinder progress in reducing infant mortality. Mechanisms will be created to enable districts to learn from successful approaches and past challenges.

8. The Committee shall ensure that Infant Mortality Rate is recognized as a key indicator of health system performance. The Committee will facilitate the inclusion of IMR as a quality indicator in all relevant health reviews, planning processes and monitoring platforms.

9. The Committee shall suggest practical, evidence-based solutions to address disparities and causes of infant deaths. It shall promote inter-sectoral and intra-sectoral co-ordination to achieve significant and sustained reduction in IMR.

10. The Committee will maintain a strong focus on research, evidence generation, technical guidance, program evaluation and continuous monitoring of interventions related to newborn and infant health.

Further the District Level Task Force Committee for reduction of Infant Mortality Rate shall be revamped with the following composition:

District Level Task Force Committee for Reduction of Infant Mortality Rate:

1.	The District Collector	Chairperson of the Task force
2.	The District Health officer	Convener – Member Secretary
3.	The Dean of the Medical College Hospital	Member
4.	The Joint Directors of Medical and Rural Health Services	Member
5.	The Head of Department of the Pediatric Department, Medical College Hospital	Member
6.	The Special Newborn Care Unit Nodal Officer	Member
7.	The District Early Intervention Centre Nodal Officer	Member
8.	Assistant Director, Differently Abled Department	Member
9.	The District Programme Officer, Integrated Child Development Scheme	Member
10.	The District Maternal and Child Health Officer	Member
11.	Representative from Indian Academy of Pediatrics / National Neonatology Forum	Member

The District Level Task Force Committee will implement the following strategy:-

i. Work under the overall guidance of the State Task Force as per the guidelines issued vide G.O. (Ms) No.418, Health and Family Welfare (R1) Department, dated: 30.12.2009.
ii. Ensure continuum of care to all Children attending Government and Private sector institution.
iii. Monthly conduction of sample of Infant death Review to be conducted by District Collector.
iv. Monitoring of Sex ratio at Birth. Regular monitoring of female infant mortality patterns. Compulsory Review of all female infant home deaths to rule out social causes.
v. The District Health Officer to ensure that the verbal autopsy is conducted meticulously and accurately document details for all child death cases.
vi. Preparedness of the institution in tackling emergencies.
vii. Utilize the Maternal, Perinatal, Child Death Surveillance and Response (MPCDSR) portal of GOI for effective child death review by all the Institutions.
viii. Ensure Conduction of Community-Based Child Death Review (CBCDR) for home, transit or private deaths by the Block Medical Officer.
ix. Strengthening of child protection mechanisms.
x. Empowering the children through School Education.
xi. Stringent enforcement of Pre-Conception and Pre-Natal Diagnostic Techniques Act.

5. The Mission Director, National Health Mission, has therefore requested the Government to issue orders in line with the guidelines as in para 4 above, for the constitution of revamped "State Level Task Force Committee on Reduction of Infant Mortality Ratio".

6. The Government, after careful examination have decided to accept the proposal of the Mission Director, National Health Mission for revamping the State and District Level Task Force Committees on Reduction of Infant Mortality Rate (IMR) with revised composition and Terms of Reference and accordingly reconstitute the District Level Task Force Committee as indicated in para 5 above.

(BY ORDER OF THE GOVERNOR)

P. SENTHILKUMAR
ADDITIONAL CHIEF SECRETARY TO GOVERNMENT

To
The Mission Director, National Health Mission, Chennai – 600 006.
The Project Director, Tamil Nadu Health System Project, Chennai – 600 006.
The Director cum Mission Director, Integrated Child Development Services, Chennai – 600 113.
The Director, Children Welfare and Special Services, Chennai – 600 010.
The Commissioner for Welfare of the Differently Abled, Chennai – 600 005.
The Director of Medical Education & Research, Chennai – 600 010.
The Director of Medical and Rural Health Services, Chennai - 600 006.
The Director of Public Health and Preventive Medicine, Chennai - 600 006.
All District Collectors / All District Health Officers.
All Deans of Government Medical Colleges.
The Director of Family Welfare, Chennai – 600 006.

The Director, Institute of Child Health (ICH), Chennai – 600 008.
The Joint Director, Directorate of School Education, Chennai - 600 006.
The Joint Director, Child Welfare, Directorate of Social Welfare – 600 005.
All Joint Directors of Director of Medical and Rural Health Services.
All Nodal Officers, Special Newborn Care Unit.
All Nodal Officers, District Early Intervention Centre.
The Chief, UNICEF, Chennai – 600 020.
The President, Indian Academy of Pediatrics, Chennai – 600 008.
The President, National Neonatology Forum, Tamil Nadu.
The Consultant, World Health Organization, Tamil Nadu.
Other Experts as nominated by the Chairperson.

Copy to:-
The Health and Family Welfare (Data Cell) Department, Chennai – 600 009.
Stock File / Spare Copy.

//FORWARDED BY ORDER//

10/03/2026
SECTION OFFICER
10-3-26

ABSTRACT

National Health Mission – Tamil Nadu – Vaccines and other consumables supplied by Government of India as Kind / Commodity Grants to State Government for Routine Immunization and Pulse Polio Immunization Programmes under Reproductive and Child Health Project and National Tuberculosis Elimination Programme for the Financial Year 2025-2026 – Sanction and release of commensurate State Share on SNA-SPARSH platform – Orders – Issued.

HEALTH AND FAMILY WELFARE (EAP.II/1) DEPARTMENT

G.O.(Ms).No.95

Dated 11.03.2026
விசுவாவசு, மாசி – 27
திருவள்ளுவர் ஆண்டு 2057

A2/w P12 P5

Read:

1. From the Additional Secretary & Mission Director (NHM), Government of India, Ministry of Health and Family Welfare, D.O. letter No.G.27034/202/2018-NHM-F[E-3195367], dated 19.08.2024.
2. G.O.(Ms).No.397, Health and Family Welfare (EAP.II/1) Department, dated 10.09.2025.
3. G.O.(Ms).No.08, Health and Family Welfare (EAP.II/1) Department, dated 19.01.2026.
4. G.O.(Ms).No.47, Health and Family Welfare (EAP.II/1) Department, dated 16.02.2026.
5. G.O.(Ms).No.68, Health and Family Welfare (EAP.II/1) Department, dated 27.02.2026.
6. From the Mission Director, National Health Mission-Tamil Nadu, letter No.004658/NHM-TN/A2/2025, dated 04.03.2026.

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ORDER:

The Government of India have approved a sum of Rs.110,42,00,000/- for Kind / Commodity Grant for the year 2025-2026 in RoP 2024-2026 in the letter first read above and supplied Commodity / Kind Grants to the State Government worth about Rs.30,27,77,000/- for the financial year 2025-2026 for Routine Immunization Programme under Reproductive and Child Health Project. In the Government order second read above, the Government have sanctioned and released a sum of Rs.20,18,51,333/- as proportionate State Share. The Government of India has
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onboarded the Reproductive and Child Health Project onto the SNA-SPARSH platform and released the Commodity / Kind Grants worth about Rs.187,47,86,000/- under SNA-SPARSH platform. Out of the proportionate State share of Rs.124,98,57,333/- against the above Commodity Grants received from Government of India, the State Government have released a sum of Rs.124,13,63,695/- in the Government Orders third to fourth read above and directed the Mission Director, National Health Mission-Tamil Nadu to send proposal for sanction of remaining State Share of Rs.84,93,638/-. In the letter sixth read above, the Mission Director, National Health Mission-Tamil Nadu has stated that sanction orders have been received from the Government of India towards cost adjustment of vaccine supplies worth about Rs.61,21,83,000/- for Routine Immunization and Pulse Polio Immunization Programmes under Reproductive and Child Health Project and National Tuberculosis Elimination Programme for the year 2025-2026 on SNA-SPARSH platform as detailed below:

Sl. No.	Sanction Order & Date	Govt. of India Grant (Kind)	40% State Share
General Component		Amount in Rupees	
1	No.Z.28015/347/2018-TB (Pt.), Dated 23.01.2026 Unique Sanction ID: NTEP/IFD/GIA/R/2025-26/295	58,10,20,000/-	38,73,46,667/-
2	F.No.T.13020/02/2025-IMM(089), Dated 20.01.2026	1,73,34,000/-	1,15,56,000/-
3	F.No.T.13020/02/2025-IMM-097, Dated 10.01.2026	72,50,000/-	48,33,333/-
	Total General	**60,56,04,000/-**	**40,37,36,000/-**
Schedule Caste Component			
4	F.No.T.13020/02/2025-IMM(090), Dated 20.01.2026	43,97,000/-	29,31,333/-
5	F.No.T.13020/04/2020-IMM-098, Dated 10.02.2026	18,39,000/-	12,26,000/-
	Total SCSP	**62,36,000/-**	**41,57,333/-**
Schedule Tribe Component			
6	F.No.T-13020/02/2025-IMM-(091), Dated 20.01.2026	2,42,000/-	1,61,333/-
7	F.No.T-13020/04/2020-IMM-099, Dated 10.02.2026	1,01,000/-	67,334/-
	Total STSP	**3,43,000/-**	**2,28,667/-**
	Grand Total	**61,21,83,000/-**	**40,81,22,000/-**

2. The Mission Director, National Health Mission-Tamil Nadu has further stated that the Principal Accountant General-Tamil Nadu has booked the receipt of Commodity / Kind Grants for the amount received from the Government of India for Rs.61,21,83,000/-. The Additional Director of Medical and Rural Health Services (TM) and State TB Officer has certified for having received commodity grants worth about Rs.58,10,20,000/- from Government of India towards National Tuberculosis Elimination Programme and the Director of Public Health and Preventive Medicine, Chennai has certified for having received commodity grants worth about Rs.3,11,63,000/- towards

Routine Immunization and Pulse Polio Immunization Programmes. The proportionate 40% State Share against Kind / Commodity Grants received from Government of India worth about Rs.61,21,83,000/- works out to Rs.40,81,22,000/-. He has further stated that the Director of Public Health and Preventive Medicine, Chennai has also furnished the certificate for the receipt of Commodity Grants received from the Government of India worth about Rs.1,27,40,458/- as per the earlier sanction orders. Therefore, the Mission Director, National Health Mission-Tamil Nadu has requested to sanction and release a sum of Rs.41,66,15,638/- (Rupees forty one crore sixty six lakh and fifteen thousand six hundred and thirty eight only) including the remaining of State share Rs.84,93,638/- for the previous grants, for the drawal of State Share on SNA-SPARSH platform.

3. The Government, after careful examination, have decided to accord sanction for a sum of **Rs.41,66,15,638/-** (Rupees forty one crore sixty six lakh fifteen thousand six hundred and thirty eight only) towards proportionate State Share against the Kind / Commodity Grants received from Government of India for Routine Immunization and Pulse Polio Immunization Programmes under Reproductive and Child Health Project and National Tuberculosis Elimination Programme for the year 2025-2026 on SNA SPARSH platform and order accordingly.

4. The amount sanctioned in paragraph 3 above shall be debited under the following heads of account:-

Sl. No.	Head of Account	Amount in Rupees
1.	2211-00 Family Welfare – 103 Maternity and Child Health – Schemes Shared between State and Centre – UG Commodity grants and Infrastructure Maintenance grants under National Health Mission – State Share – 309 Grants-in-Aid – 03 Grants for Specific Schemes. [DPC 2211 00 103 UG 30903]	41,22,29,638/-
2.	2211-00 Family Welfare – 793 Special Central Assistance for Scheduled Caste Component Plan – Schemes shared between State and Centre – UG Commodity grants and Infrastructure Maintenance grants under National Health Mission – State Share – 309 Grants-in-Aid – 03 Grants for Specific Schemes. [DPC 2211 00 793 UG 30903]	41,57,333/-

3.	2211-00 Family Welfare – 794 Special Central Assistance for Tribal Sub-Plan – Schemes shared between State and Centre - UG Commodity grants and Infrastructure Maintenance grants under National Health Mission – State Share – 309 Grants-in-Aid – 03 Grants for Specific Schemes. [DPC 2211 00 794 UG 30903]	2,28,667/-
3.	2211-00 Family Welfare – 794 Special Central Assistance for Tribal Sub-Plan – Schemes shared between State and Centre - UG Commodity grants and Infrastructure Maintenance grants under National Health Mission – State Share – 309 Grants-in-Aid – 03 Grants for Specific Schemes. [DPC 2211 00 794 UG 30903]	2,28,667/-
	Grand Total	**41,66,15,638/-**

5. Necessary funds of Rs.41,66,15,638/- will be provided by way of reappropriation as detailed below. The Mission Director, National Health Mission-Tamil Nadu is authorized to incur the amount sanctioned in paragraph 3 above.

Sl. No	Reappropriation From heads of Accounts	Reappropriation to heads of account	Amount in Rupees
1	2211 00 103 UD 30903	2211 00 103 UG 30903	41,22,29,638/-
2	2211 00 793 UD 30903	2211 00 793 UG 30903	41,57,333/-
3	2211 00 794 UD 30903	2211 00 794 UG 30903	2,28,667/-
	Total		41,66,15,638/-

Single Nodal Agency – SPARSH Account details:

CSS code	:	4063
CSS Name	:	Flexible Pool for RCH & Health System Strengthening, National Health Programme and National Urban Health Mission
SLS Code	:	TN387
SLS Name	:	State Share of Commodity and Infrastructure Maintenance Grants
State Drawing Account No. in Reserve Bank of India	:	01512701484
State Drawing Account Name in Reserve Bank of India	:	01909TN387STATESHAREINFRA

6. The Mission Director, National Health Mission-Tamil Nadu is also directed to implement the above scheme through SNA-SPARSH fund flow mechanism as mandated by the financial procedure outlined by the Government of India and shall be permitted to revise the targets among the approved components based on requirements. The Government also inform that bills shall be presented in IFHRMS-SNA-SPARSH bill module for 100% under any of the head of above, which will be divided into Government of India and State share, by the system itself i.e. there will not be concept of separate head of account for State and Government of India share hereafter.

7. The Mission Director, National Health Mission-Tamil Nadu is directed to ensure that the overall expenditure based on this order do not exceed the sanctioned amount together all the Drawing and Disbursing Officers under the scheme, since the expenditure is to be incurred through various drawals as and when expenditure is incurred by various Drawing and Disbursing Officers mapped under the Scheme. He is also directed to strictly adhere to the SNA-SPARSH guidelines issued in Government Letter No.573, Finance (PFMS) Department, dated 06.01.2025 and 07.02.2025.

8. This order issues with the concurrence of the Finance Department vide e.file No.2593/2026, dated 11.03.2026 with Additional Sanction Ledger No.2026032551.

(BY ORDER OF THE GOVERNOR)

P. SENTHILKUMAR
ADDITIONAL CHIEF SECRETARY TO GOVERNMENT

To
The Mission Director, National Health Mission-Tamil Nadu, Chennai-600 006.
The Section Officer, Health and Family Welfare (Bills) Department, Chennai-600 009.
The Principal Accountant General (A&E), Chennai-600 018.
The Principal Accountant General (Audit), Chennai-600 018.
The Pay and Accounts Officer, Secretariat, Chennai-600 009.
The Resident Audit Officer, O/o. the Principal Accountant General, Secretariat, Chennai-600 009.

Copy to:
The Private Secretary to Additional Chief Secretary to Government, Health and Family Welfare Department, Chennai-600 009.
The Finance (Health-I / BG.II / PFMS / W&M.I) Department, Chennai-600 009.
The Health and Family Welfare (Data Cell) Department, Chennai-600 009.
Stock file / Spare copy.

// FORWARDED / BY ORDER //

N. Latha 11.3.2026

(N.LATHA)
UNDER SECRETARY TO GOVERNMENT

11/3/26

A2

ABSTRACT

National Health Mission–Tamil Nadu – Sanction and release of State Share against the Grants-in-Aid released by the Government of India towards liquidation of arrears for the year 2024-2025 on SNA-SPARSH platform for implementation of Infrastructure Maintenance during the year 2025-2026 – Orders – Issued.

HEALTH AND FAMILY WELFARE (EAP.II/1) DEPARTMENT

G.O.(Ms.).No.101

Dated 13.03.2026
விசுவாவசு, மாசி – 29
திருவள்ளுவர் ஆண்டு 2057

Read:

1. From the Ministry of Health and Family Welfare, Government of India, letter F.No.10(2)/2023-NHM.I, dated 11.03.2024.
2. From the Ministry of Health and Family Welfare, Government of India, D.O.letter No.G.27034/202/2018-NHM-F[E-3195367], dated 19.08.2024.
3. G.O.(Ms.).No.343, Health and Family Welfare (EAP.II/1) Department, dated 30.07.2025.
4. G.O.(Ms.).No.398, Health and Family Welfare (EAP.II/1) Department, dated 10.09.2025.
5. From the Ministry of Health and Family Welfare, Government of India, letter No.G.27017/4(22)/2013-NRHM(Finance)/FTS-136180, dated 27.02.2026.
6. From the Mission Director, National Health Mission-Tamil Nadu, letter No.987-14/NHM-TN/A2/2025, dated 04.03.2026.

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ORDER:

The Government of India, Ministry of Health and Family Welfare in the RoP.2024-2026 first read above, have approved Grants-in-Aid for National Health Mission and subsequently, in the letter second read above, the Government of India, Ministry of Health and Family Welfare have revised the Resource Envelope (RE) and Maximum Permissible Resource Envelope (MPRE) for National Health Mission for the financial year 2024-2025 and 2025-2026. Accordingly, the Government of India have approved a sum of Rs.576.15 crore as Grants-in-Aid for National Health Mission-Tamil Nadu for the financial year 2025-2026 under Infrastructure Maintenance (4064), a Centrally Sponsored Plan Scheme and released a sum of Rs.556,55,00,000/- during the year 2025 in two instalments. In the Government orders third and fourth read above, the
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State Government have released the commensurate 40% Sate Share of Rs.371,03,33,333/- in two instalments. The Government of India has onboarded the Infrastructure Maintenance scheme onto the SNA-SPARSH platform and in the letter fifth read above released a sum of Rs.45,00,00,000/- for the ongoing schemes of National Health Mission as detailed below:

Sl. No.	Components	Budget Head	Grants-in-Aid released by Government of India (Rs.)	Proportionate State Share (Rs.)
1	Maintenance of State / District Family Welfare Bureaux	3601-06-101-17-01-31	79,01,000/-	52,67,333/-
2	Sub-Centre	3601-06-101-85-02-31	1,53,11,000/-	1,02,07,333/-
		Total (General)	**2,32,12,000/-**	**1,54,74,666/-**
3	Maintenance of State / District Family Welfare Bureaux	3601-06-789-05-01-31	39,42,000/-	26,28,000/-
4	Sub-Centres	3601-06-789-05-02-31	1,28,02,000/-	85,34,667/-
		Total (SCSP)	**1,67,44,000/-**	**1,11,62,667/-**
5	Maintenance of State / District Family Welfare Bureaux	3601-06-796-05-01-31	10,00,25,000/-	6,66,83,333/-
6	Sub-Centres	3601-06-796-05-02-31	29,80,00,000/-	19,86,66,667/-
7.	Urban FW-Centre	3601-06-796-05-03-31	1,20,19,000/-	80,12,667/-
		Total (STSP)	**41,00,44,000/-**	**27,33,62,667/-**
		Grand Total	**45,00,00,000/-**	**30,00,00,000/-**

2. In the letter sixth read above, the Mission Director, National Health Mission-Tamil Nadu has stated that the proportionate 40% State Share against the 60% Central Share of Rs.45,00,00,000/- works out to Rs.30,00,00,000/-. He has further stated that the Government of India totally released a sum of Rs.601.55 crore so far for the above scheme for the financial year 2025-2026. The Mission Director, National Health Mission-Tamil Nadu has therefore requested to sanction and release a sum of Rs.30,00,00,000/- as proportionate 40% State Share on SNA-SPARSH platform against the Central share of Rs.45,00,00,000/- released by the Government of India towards liquidation of arrears for the year 2024-2025 for implementation of Infrastructure Maintenance, a Centrally Sponsored Plan Scheme during the year 2025-2026.

3. The Government, after careful examination, have decided to sanction a sum of Rs.30,00,00,000/- (Rupees thirty crore only) as proportionate 40% State Share against the Central Share of Grants-in-Aid of Rs.45,00,00,000/- released by the Government of India towards liquidation of arrears for the year 2024-2025 for implementation of Infrastructure Maintenance during the year 2025-2026 on SNA-SPARSH platform and order accordingly.

4. The funds sanctioned in paragraph 3 above shall be debited under the following heads of account:-

Sl. No.	Head of Account	Amount in Rupees
1.	2211-00 Family Welfare – 103 Maternity and Child Health – Schemes shared between State and Centre – UG Commodity grants and Infrastructure Maintenance grants under National Health Mission – State Share – 309 Grants-in-Aid – 03 Grants for Specific Schemes. [DPC 2211 00 103 UG 30903]	1,54,74,666/-
2.	2211-00 Family Welfare – 793 Special Central Assistance for Scheduled Caste Component Plan – Schemes shared between State and Centre – UG Commodity grants and Infrastructure Maintenance grants under National Health Mission – State Share – 309 Grants-in-Aid – 03 Grants for Specific Schemes. [DPC 2211 00 793 UG 30903]	1,11,62,667/-
3.	2211-00 Family Welfare – 794 Special Central Assistance for Tribal Sub-Plan – Schemes shared between State and Centre - UG Commodity grants and Infrastructure Maintenance grants under National Health Mission – State Share – 309 Grants-in-Aid – 03 Grants for Specific Schemes. [DPC 2211 00 794 UG 30903]	27,33,62,667/-
	Grand Total	**30,00,00,000/-**

5. Necessary funds of Rs.30,00,00,000/- will be provided by way of reappropriation as detailed below. The Mission Director, National Health Mission-Tamil Nadu is authorized to incur the amount sanctioned in paragraph 3 above.

Sl. No.	Reappropriation from heads of Accounts	Reappropriation to heads of account	Amount in Rupees
1.	2211 00 103 UD 30903	2211 00 103 UG 30903	1,54,74,666/-
2.	2211 00 793 UD 30903	2211 00 793 UG 30903	1,11,62,667/-
3.	2211 00 794 UD 30903	2211 00 794 UG 30903	3,23,06,000/-
4.	2211 00 103 UD 30903	2211 00 794 UG 30903	24,10,56,667/-
		Total	30,00,00,000/-

Single Nodal Agency – SPARSH Account details:

CSS code	:	4063
CSS Name	:	Flexible Pool for RCH & Health System Strengthening, National Health Programme and National Urban Health Mission
SLS Code	:	TN387

SLS Name	:	State Share of Commodity and Infrastructure Maintenance Grants
State Drawing Account No. in Reserve Bank of India	:	01512701484
State Drawing Account Name in Reserve Bank of India	:	01909TN387STATESHAREINFRA

6. The Mission Director, National Health Mission-Tamil Nadu is directed to implement the above scheme through SNA-SPARSH fund flow mechanism as mandated by the financial procedure outlined by the Government of India. The Government also inform that bills shall be presented in IFHRMS-SNA-SPARSH bill module for 100% under any of the head of above, which will be divided into Government of India and State share, by the system itself i.e. there will not be concept of separate head of account for State and Government of India share hereafter.

7. The Mission Director, National Health Mission-Tamil Nadu is directed to ensure that the overall expenditure based on this order do not exceed the sanctioned amount together all the Drawing and Disbursing Officers under the scheme, since the expenditure is to be incurred through various drawals as and when expenditure is incurred by various Drawing and Disbursing Officers mapped under the Scheme. He is also directed to strictly adhere to the SNA-SPARSH guidelines issued in Government Letter No.573, Finance (PFMS) Department, dated 06.01.2025 and 07.02.2025.

8. This order issues with the concurrence of Finance Department vide e.file No.2582/2026, dated 12.03.2026 with Additional Sanction Ledger No.2026032556.

(BY ORDER OF THE GOVERNOR)

P. SENTHILKUMAR
ADDITIONAL CHIEF SECRETARY TO GOVERNMENT

To
The Mission Director, National Health Mission-Tamil Nadu, Chennai-600 006.
The Section Officer, Health and Family Welfare (Bills) Department,
Chennai-600 009.
The Principal Accountant General (A&E), Chennai-600 018.
The Principal Accountant General (Audit), Chennai-600 018.
The Pay and Accounts Officer, Secretariat, Chennai-600 009.
The Resident Audit Officer, O/o. the Principal Accountant General, Secretariat,
Chennai-600 009.

Copy to:
The Private Secretary to Additional Chief Secretary to Government, Health and Family Welfare Department, Chennai-600 009.
The Finance (Health-I / BG.I / BG.II / PFMS / W&M.I) Department, Chennai-600 009.
The Health and Family Welfare (Data Cell) Department, Chennai-600 009.
Stock file / Spare copy.

// FORWARDED / BY ORDER //

13/3/26
SECTION OFFICER

13/03/2026

ABSTRACT

National Health Mission-Tamil Nadu – Construction of Sewage Treatment Plant and Effluent Treatment Plant at Government Hospital, Tiruchengode, Namakkal District – Administrative and financial sanction – Accorded – Orders issued.

HEALTH AND FAMILY WELFARE (EAP.II/1) DEPARTMENT

G.O.(Ms.).No.120 Dated 14.03.2026
விசுவாவசு, மாசி – 30
திருவள்ளுவர் ஆண்டு 2057

Read:

1. G.O.(Ms.).No.27, Health and Family Welfare (EAP.II/2) Department, dated 24.01.2023.
2. G.O.(Ms.).No.272, Health and Family Welfare (EAP.II/2) Department, dated 09.08.2023.
3. G.O.Ms.102, Health and Family Welfare (EAP.II/1) Department, dated 21.04.2025.
4. From the Mission Director, National Health Mission–Tamil Nadu, letter.No.11199717/NHM/S/2025, dated 09.01.2026.

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ORDER:

In the letter fourth read above, the Mission Director, National Health Mission-Tamil Nadu has stated that in the Government Order first read above, sanction has been accorded for a sum of Rs.23.00 crore for construction of additional building to upgrade the Government Hospital, Tiruchengode, Namakkal District on par with District Headquarters Hospital and the construction works had been completed. He has further stated that the lumpsum provisions for Rs.15 lakh and Rs.40 lakh considered in the estimate of new buildings sanctioned in the Government Order first read above had been utilized for external water supply and sanitary arrangement, diversion of sewer lines and drainage arrangements, which does not include construction and installation of Sewage Treatment Plant and Effluent Treatment Plant. Further, the institution is upgraded on par with District Headquarters Hospital with the bed capacity of 300 beds and there is no Sewage Treatment Plant and Effluent Treatment Plant existing in the premises for treatment of sewage and effluents. As per the norms prescribed by Indian Public Health Standard / National Building Code of India / Central Public Health Engineering and Environmental Organization, Sewage Treatment Plant and Effluent Treatment Plant are essential to the above medical facility. Hence, it is proposed for construction of 100 KLD Sewage Treatment Plant and 10 KLD Effluent Treatment Plant for the treatment of sewage through Sequencing Batch Reactor (SBR) process in the institution.
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2. The Mission Director, National Health Mission-Tamil Nadu has further stated that the Public Works Department has sent a proposal with detailed estimate for construction of 100 KLD Sewage Treatment Plant (STP) and 10 KLD Effluent Treatment Plant (ETP) for the treatment of sewage through Sequencing Batch Reactor (SBR) process, for the Government Hospital, Tiruchengode, Namakkal District, based on the requirements presented by user entities. The detailed estimate has been prepared and approved by the Engineer-in-Chief and Chief Engineer (General), Public Works Department, Chennai and countersigned by the Head of the user Department i.e. the Director of Medical and Rural Health Services. The estimate has been arrived at Rs.88,25,000/- for the year 2024-2025 and Rs.97,07,500/- for the year 2025-2026. The General Abstract of the detailed estimate for construction of Sewage Treatment Plant and Effluent Treatment Plant at the Government Hospital, Tiruchengode, Namakkal District for the year 2024-25 is as follows:

Sl. No.	Description of works	Amount in Rupees
1.	Civil Works including GST @ 18%	79,35,358/-
2.	Lumpsum provisions including GST	
	Provision of Electrical arrangement to STP & ETP	5,60,000/-
	Provision for advertisement charges	54,000/-
	Provision for PS charges, contingencies for Civil works at 1.25%	93,696/-
	Provision for unforeseen items	93,696/-
3.	Provision for Labour Welfare fund at 1.00 %	88,250/-
	Total	88,25,000/-

3. The Mission Director, National Health Mission-Tamil Nadu has further stated that there are no separate approvals under National Health Mission funds in any RoP. for the above said activity. Hence, it has been suggested that the unspent balance funds available out of the funds approved for Government Hospital, Karur, Karur District, may be utilized for the Sewage Treatment Plant and Effluent Treatment Plant to Government Hospital, Tiruchengode, Namakkal District. In this regard, necessary permissions from the Executive Sub Committee of the State Health Society-Tamil Nadu has been obtained vide Circulation Note No.7/2025, dated 11.08.2025.

4. The Mission Director, National Health Mission-Tamil Nadu has stated that a sum of Rs.1000 lakh approved for construction of additional building to Government Hospital, Karur has been remitted into Government account as per the administrative sanction accorded in the Government Order first read above, as detailed below:

Year of RoP	Chellan No. & Date	Rupees in lakh
2022-23	120 /03.10.2022 for Rs.12,84,79,600/-	68.52
	05 / 10.07.2023 for Rs.51,39,18,400/-	274.08
2023-24	20241028007820 / 28.10.2024 for Rs.2,56,90,000/-	256.90

2024-25	20241227019663 / 27.12.2024 for Rs.36,46,29,000/-	202.57
2025-26	20250701022437 / 01.07.2025 for Rs.19,40,00,000/-	19.26
	20250721015734 / 21.07.2025 for Rs.1,09,00,00,000/-	108.23
	20250805029643/ 05.08.2025 for Rs.27,00,00,000/-	26.81
	20250908026582 / 08.09.2025 for Rs.43,93,50,000/-	43.63
	Total	**1000.00**

The administrative and financial sanction accorded for construction of additional building to Government Hospital, Karur at a total cost of Rs.1000 lakh in the Government Orders first and second read above has been cancelled in the Government Order third read above and reallocated for various civil works as detailed below:

Details of Civil Works	G.O.No. & Date	Amount (Rupees in lakh)
Modernization and upgradation of two Female Wards and Kitchen of the Institute of Mental Health, Chennai	G.O.(Ms.).No.102, Health and Family Welfare Department, dated 21.04.2025	498.00
Provision of Modular Operation Theatre Arrangement, Manifold Room and other additional amenities to the Maternal Child Health Services Building in Institute of Social Obstetrics and Government Kasturba Gandhi Hospital for Women and Children, Chennai	G.O.(Ms.).No.366, Health and Family Welfare Department, dated 12.08.2025	232.00
Construction of Nursing Students Hostel (Residential) Building in Lady Lawley Campus, Institute of Obstetrics and Gyneacology and Government Hospital for Women and Children, Chennai	G.O.(Ms.).No.380, Health and Family Welfare Department, dated 22.08.2025	101.00
Establishment of Master Dental Check-up Unit in Tamil Nadu Government Dental College and Hospital, Chennai	G.O.(Ms.).No.62, Health and Family Welfare Department, dated 26.02.2026.	0.30
	Total funds utilized	831.30
	Balance Available	168.70

5. The Mission Director, National Health Mission-Tamil Nadu has, therefore, requested to accord administrative and financial sanction for a sum of Rs.97,07,500/- for construction of 100 KLD Sewage Treatment Plant and 10 KLD Effluent Treatment Plant to Government Hospital, Tiruchengode, Namakkal District, through the Public Works Department.

6. The Government, after careful examination, have decided to accord administrative and financial sanction for a sum of Rs.97,07,500/- (Rupees ninety seven lakh seven thousand and five hundred only) for construction of 100 KLD Sewage Treatment Plant and 10 KLD Effluent Treatment Plant to Government Hospital, Tiruchengode, Namakkal District, through the Public Works Department, by reallocation of the unspent balance from the non-executed civil works at Government Hospital, Karur and order accordingly.

7. The expenditure sanctioned in paragraph 6 above shall be debited under the following Head of account:-

"4211 – 00 Capital Outlay on Family Welfare – 103 Maternity and Child Health – State's Expenditure – AA Civil Works under National Health Mission Scheme – 416 Major Works – 01 Major Works."

[IFHRMS DPC 4211 00 103 AA 41601]

8. Necessary funds has already been provided in Final Modified Appropriation 2025-2026. The Engineer-in-Chief and Chief Engineer (General), Public Works Department, Chennai is authorized to draw and disburse the fund sanctioned in paragraph 6 above and directed to ensure compliance with the direction for third party monitoring of civil works and adherence to Indian Public Health Standards following the guidelines and conditionalities stipulated by the Government of India.

9. The Mission Director, National Health Mission-Tamil Nadu is directed to obtain ratification orders from the Government of India in having reallocated the funds approved for construction of additional building to Government Hospital, Karur, for construction of 100 KLD Sewage Treatment Plant and 10 KLD Effluent Treatment Plant to Government Hospital, Tiruchengode, Namakkal District and send the utilization certificate for the funds sanctioned in paragraph 6 above in the prescribed format to the Government of India at the appropriate time.

10. This order issues with the concurrence of Finance Department in e.file No.587/2026, dated 13.03.2026.

(BY ORDER OF THE GOVERNOR)

P. SENTHILKUMAR
ADDITIONAL CHIEF SECRETARY TO GOVERNMENT

To

The Mission Director, National Health Mission-Tamil Nadu, Chennai–600 006.
The Engineer-in-Chief and Chief Engineer (General), Public Works Department, Chennai-600 005.
The Director of Medical Education and Research, Chennai–600 010.
The District Collector, Namakkal.
The Principal Accountant General (A&E), Chennai–600 018.
The Principal Accountant General (Audit), Chennai–600 018.
The Pay and Accounts Officer (South), Chennai-600 035.
The District Treasury Officer concerned.

The Resident Audit Officer, Office of the Principal Accountant General, Secretariat, Chennai-600 009.

Copy to:

The Special Personal Assistant to Hon'ble Minister (Finance, Environment & Climate Change), Chennai-600 009.
The Special Personal Assistant to Hon'ble Minister (Health & Family Welfare), Chennai-600 009.
The Private Secretary to Additional Chief Secretary to Government, Health and Family Welfare Department, Chennai – 600 009.
The Joint Director of Health Services, Namakkal.
The Chief Civil Surgeon, Government Hospital, Tiruchengode, Namakkal District.
The Finance (Health-I) Department, Chennai - 600 009.
The Public Works Department, Chennai-600 009.
G.O.(Ms.).No.27, Health and Family Welfare (EAP.II/2) Department, dated 24.01.2023.
G.O.(Ms.).No.272, Health and Family Welfare (EAP.II/2) Department, dated 09.08.2023.
G.O.(Ms.).No.102, Health and Family Welfare (EAP.II/1) Department, dated 21.04.2025.
The Health and Family Welfare [F / Data Cell] Department, Chennai – 600 009.
Stock file / Spare copy.

// FORWARDED / BY ORDER //

14/03/2026

SECTION OFFICER

14/03/2026

NATIONAL HEALTH MISSION
27 APR 2026
CHENNAI-600 006

ABSTRACT

National Health Mission – Tamil Nadu – Vaccines, consumables and other materials supplied by Government of India as Kind / Commodity Grants to State Government for Routine Immunization Programme, Pulse Polio Immunization Programme and National Tuberculosis Elimination Programme for the year 2025-2026 and National Viral Hepatitis Control Programme for the year 2019 to 2024-2025 – Sanction and release of commensurate State Share on SNA-SPARSH platform – Orders – Issued.

HEALTH AND FAMILY WELFARE (EAP.II/1) DEPARTMENT

G.O.(Ms).No.131 Dated 24.04.2026
பராபவ, சித்திரை – 11
திருவள்ளுவர் ஆண்டு 2057

A2

Read:

1. From the Additional Secretary & Mission Director (NHM), Government of India, Ministry of Health and Family Welfare, D.O. letter No.G.27034/202/2018-NHM-F[E-3195367], dated 19.08.2024.
2. G.O.(Ms).No.397, Health and Family Welfare (EAP.II/1) Department, dated 10.09.2025.
3. G.O.(Ms).No.08, Health and Family Welfare (EAP.II/1) Department, dated 19.01.2026.
4. G.O.(Ms).No.47, Health and Family Welfare (EAP.II/1) Department, dated 16.02.2026.
5. G.O.(Ms).No.68, Health and Family Welfare (EAP.II/1) Department, dated 27.02.2026.
6. G.O.(Ms.).No.95, Health and Family Welfare (EAP.II/1) Department, dated 11.03.2026
7. From the Mission Director, National Health Mission-Tamil Nadu, letter No.987/NHM-TN/A2/2025, dated 05.04.2026.

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ORDER:

In the letter first read above, the Government of India have approved a sum of Rs.110,42,00,000/- as Kind / Commodity Grant for the year 2025-2026 in RoP 2024-2026. Subsequently, the Government of India has transitioned all Centrally Sponsored Schemes (CSS), including the Reproductive and Child Health Project, to the SNA-SPARSH platform to ensure "Just-in-Time" fund flow and releasing the funds through the same. The Government of India have released Kind / Commodity grants worth about Rs.278,97,46,000/- so far and the Government have released Rs.185,98,30,666/- as the proportionate State Share in the Government Orders second to sixth read above.
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2. In the letter seventh read above, the Mission Director, National Health Mission - Tamil Nadu has stated that sanction orders have been received from the Government of India towards cost adjustment of Vaccines, consumables and other materials worth about Rs.90,50,03,744/- for Routine Immunization Programme, Pulse Polio Immunization Programme and National Tuberculosis Elimination Programme for the year 2025-2026 and National Viral Hepatitis Control Programme for the year 2019 to 2024-2025 on SNA-SPARSH platforms detailed below:

Sl. No.	Sanction Order & Date	Government of India Grant (Kind) (in Rs.)
1.	F.No.T.13020/02/2025-IMM-Part(1)(105), Dated.17-02-2026	7,52,09,000/-
2.	F.No.Y-11030/02/2022-CC&V-(113), Dated.17-02-2026	67,03,000/-
3.	Unique Sanction ID: NTEP/IFD/GIA/R/2025-26/346 No.Z.28015/347/2018-TB, Dated.11-03-2026	37,40,17,000/-
4.	Unique Sanction ID: NTEP/IFD/GIA/R/2025-26/349 No.Z.28015/347/2018-TB, Dated.11-03-2026	14,03,85,000/-
5.	F.No.T.13020/02/2025-IMM-(121), Dated.13-03-2026	6,49,83,000/-
6.	F.No.M.12069/03/11/2019-Hep (NVHCP)-Part(1)FTS no.8055370, Dated.28-01-2026	97,94,280/-
	Total General	**67,10,91,280/-**
7.	F.No.Y-11030/02/2022-CC&V-(114), Dated.17-02-2026	17,00,000/-
8.	F.No.T.13020/02/2025-IMM-Part(1)(106), Dated.17-02-2026	1,90,77,000/-
9.	Unique Sanction ID: NTEP/IFD/GIA/R/2025-26/347 No.Z.28015/347/2018-TB, Dated.11-03-2026	3,57,78,000/-
10.	Unique Sanction ID: NTEP/IFD/GIA/R/2025-26/356 No.Z.28015/347/2018-TB, Dated.13-03-2026	15,62,05,000/-
11.	F.No.T.13020/02/2025-IMM-(122), Dated.13-03-2026	1,64,83,000/-
12.	F.No.M.12069/03/11/2019-Hep (NVHCP)-Part(1)FTS no.8055370, Dated.28-01-2026	24,84,705/-
	Total SCSP	**23,17,27,705/-**
13.	F.No.Y-11030/02/2022-CC&V-(115), Dated.17-02-2026	93,000/-
14.	F.No.T.13020/02/2025-IMM-Part(1)(107), Dated.17-02-2026	10,49,000/-
15.	F.No.T.13020/02/2025-IMM-(123), Dated.13-03-2026	9,06,000/-
16.	F.No.M.12069/03/11/2019-Hep (NVHCP)-Part(1)FTS No.8055370, Dated.28-01-2026	1,36,759/-
	Total STSP	**21,84,759/-**
	Grand Total	**90,50,03,744/-**

3. The Mission Director, National Health Mission-Tamil Nadu has further stated that the Principal Accountant General-Tamil Nadu has booked the receipt of Commodity / Kind Grants for the amount received from the Government of India and the respective user departments have furnished certificates for having received Commodities / Goods from Government of India. He has also stated that the corresponding 40% State Share against Kind / Commodity Grants received from Government of India worth about Rs.90,50,03,744/- works out to Rs.60,33,35,829/- and requested to sanction and release a sum of Rs.60,33,35,829/- (Rupees sixty crore thirty three lakh thirty five thousand eight hundred and twenty nine only) for the drawal of State Share on SNA-SPARSH platform.

4. The Government, after careful examination, have decided to accord sanction for a sum of Rs.60,33,35,829/- (Rupees sixty crore thirty three lakh thirty five thousand eight hundred and twenty nine only) towards proportionate State Share against the Kind / Commodity Grants received from Government of India worth about Rs.90,50,03,744/- for Routine Immunization Programme, Pulse Polio Immunization Programme and National Tuberculosis Elimination Programme for the year 2025-2026 and National Viral Hepatitis Control Programme for the year 2019 to 2024-2025 on SNA SPARSH platform and order accordingly.

5. The amount sanctioned in paragraph 4 above shall be debited under the following heads of account:-

Sl. No.	Head of Account	Amount in Rupees
1.	2211-00 Family Welfare – 103 Maternity and Child Health – Schemes Shared between State and Centre – UG Commodity grants and Infrastructure Maintenance grants under National Health Mission – State Share – 309 Grants-in-Aid – 03 Grants for Specific Schemes. [IFHRMS DPC 2211 00 103 UG 30903]	44,73,94,187/-
2.	2211-00 Family Welfare – 793 Special Central Assistance for Scheduled Caste Component Plan – Schemes Shared between State and Centre – UG Commodity grants and Infrastructure Maintenance grants under National Health Mission – State Share – 309 Grants-in-Aid – 03 Grants for Specific Schemes. [IFHRMS DPC 2211 00 793 UG 30903]	15,44,85,136/-
3.	2211-00 Family Welfare – 794 Special Central Assistance for Tribal Sub-Plan – Schemes Shared between State and Centre - UG Commodity grants and Infrastructure Maintenance grants under National Health Mission – State Share – 309 Grants-in-Aid – 03 Grants for Specific Schemes. [IFHRMS DPC 2211 00 794 UG 30903]	14,56,506/-
	Grand Total	**60,33,35,829/-**

6. The Mission Director, National Health Mission-Tamil Nadu is authorized to incur the amount sanctioned in para 4 above through the Reserve Bank of India under the following Single Nodal Agency – SPARSH Account:-

CSS code	:	4063
CSS Name	:	Flexible Pool for RCH & Health System Strengthening, National Health Programme and National Urban Health Mission
SLS Code	:	TN387

SLS Name	:	State Share of Commodity and Infrastructure Maintenance Grants
State Drawing Account No. in Reserve Bank of India	:	01512701484
State Drawing Account Name in Reserve Bank of India	:	01909TN387STATESHAREINFRA

7. The Mission Director, National Health Mission-Tamil Nadu is also directed to implement the above scheme through SNA-SPARSH fund flow mechanism as mandated by the financial procedure outlined by the Government of India and shall be permitted to revise the targets among the approved components based on requirements. The Government also inform that bills shall be presented in IFHRMS-SNA-SPARSH bill module for 100% under any of the head of above, which will be divided into Government of India and State share, by the system itself i.e. there will not be concept of separate head of account for State and Government of India share hereafter.

8. The Mission Director, National Health Mission-Tamil Nadu is directed to ensure that the overall expenditure based on this order do not exceed the sanctioned amount together all the Drawing and Disbursing Officers under the scheme, since the expenditure is to be incurred through various drawals as and when expenditure is incurred by various Drawing and Disbursing Officers mapped under the Scheme. He is also directed to strictly adhere to the SNA-SPARSH guidelines issued in Government Letter No.573, Finance (PFMS) Department, dated 06.01.2025 and 07.02.2025.

9. This order issues with the concurrence of the Finance Department vide e.file No.4344/2026, dated 24.04.2026.

(BY ORDER OF THE GOVERNOR)

P. SENTHILKUMAR
ADDITIONAL CHIEF SECRETARY TO GOVERNMENT

To
The Mission Director, National Health Mission-Tamil Nadu, Chennai-600 006.
The Section Officer, Health and Family Welfare (Bills) Department, Chennai-600 009.
The Principal Accountant General (A&E), Chennai-600 018.
The Principal Accountant General (Audit), Chennai-600 018.
The Pay and Accounts Officer, Secretariat, Chennai-600 009.
The Resident Audit Officer, O/o. the Principal Accountant General, Secretariat, Chennai-600 009.

Copy to:
The Private Secretary to Additional Chief Secretary to Government, Health and Family Welfare Department, Chennai-600 009.
The Finance (Health-I / PFMS) Department, Chennai-600 009.
The Health and Family Welfare (Data Cell) Department, Chennai-600 009.
Stock file / Spare copy.

// FORWARDED / BY ORDER //

24/04/2026

SECTION OFFICER

24/4/26

NATIONAL HEALTH MISSION TN. 04 MAY 2026 CHENNAI-600 006

ABSTRACT

National Health Mission–Tamil Nadu – Revalidation of unspent balance available in State Share of Grants-in-Aid sanctioned against the vaccines, consumables and other materials supplied by Government of India as Kind / Commodity Grants to State Government for Routine Immunization Programme, Pulse Polio Immunization Programme and National Tuberculosis Elimination Programme in the year 2025-2026 – Orders issued.

HEALTH AND FAMILY WELFARE (EAP.II/1) DEPARTMENT

G.O.(Ms).No.132

Dated 30.04.2026
பராபவ, சித்திரை – 17
திருவள்ளுவர் ஆண்டு 2057

Read:

1. From the Ministry of Health and Family Welfare, Government of India, letter F.No.10(2)/2023-NHM-I, dated 11.03.2024.
2. From the Ministry of Health and Family Welfare, Government of India, D.O. letter No.G.27034/202/2018-NHM-F[E-3195367], dated 19.08.2024.
3. G.O.(Ms.).No.397, Health and Family Welfare (EAP.II/1) Department, dated 10.09.2025.
4. G.O.(Ms.).No.343, Health and Family Welfare (EAP.II/1) Department, dated 30.07.2025.
5. G.O.(Ms.).No.398, Health and Family Welfare (EAP.II/1) Department, dated 10.09.2025.
6. G.O.(Ms.).No.08, Health and Family Welfare (EAP.II/1) Department, dated 19.01.2026.
7. G.O.(Ms.).No.47, Health and Family Welfare (EAP.II/1) Department, dated 16.02.2026.
8. G.O.(Ms.).No.68, Health and Family Welfare (EAP.II/1) Department, dated 27.02.2026.
9. G.O.(Ms.).No.95, Health and Family Welfare (EAP.II/1) Department, dated 11.03.2026.
10. G.O.(Ms).No.101, Health and Family Welfare (EAP.II/1) Department, dated 13.03.2026.
11. From the Mission Director, National Health Mission-Tamil Nadu, letter No.987/NHM-TN/A2/2025, dated 09.04.2026.

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ORDER:

The Government of India, Ministry of Health and Family Welfare in the RoP.2024-2026 first read above, have approved Grants-in-Aid for National Health Mission. Subsequently, in the letter second read above, the Government of India,
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Ministry of Health and Family Welfare, have revised the Resource Envelope (RE) and Maximum Permissible Resource Envelope (MPRE) for National Health Mission for the financial years 2024-2025 and 2025-2026. Accordingly, the Government of India have approved a sum of Rs.110,42,00,000/- as Kind / Commodity Grant and Rs.576,15,00,000/- as Infrastructure Maintenance Grant for the year 2025-2026.

2. Out of the approved amount of Rs.110,42,00,000/- under the Kind / Commodity Grant, the Government of India has released commodities worth about Rs.30,27,77,000/- under Routine Immunization Programme (Reproductive and Child Health) for the year 2025-2026. Subsequently, the commensurate State share of Rs.20,18,51,333/- has been released to the Single Nodal Agency (SNA) Account of the National Health Mission - Tamil Nadu in the Government order third above. Further, the Government of India has released a sum of Rs.556,55,00,000/- during the financial year 2025-2026 in two instalments under the Infrastructure Maintenance Grant and the proportionate State Share of Rs.371,03,33,333/- has also been released to the Single Nodal Agency (SNA) Account of the National Health Mission-Tamil Nadu in the Government order fourth and fifth read above.

3. In the meantime, the Government of India has transitioned all Centrally Sponsored Schemes (CSS), including the Reproductive and Child Health Project and Infrastructure Maintenance, to the SNA-SPARSH platform to ensure "Just-in-Time" fund flow and release of funds through the same. After onboarding to SNA-SPARSH, the Government of India released commodities worth about Rs.88,98,27,000/-, Rs.21,11,54,000/-, Rs.77,38,05,000/- and Rs.61,21,83,000/- as 1st, 2nd, 3rd and 4th release respectively under Kind Grant towards the Routine Immunization Programme and National Tuberculosis Elimination Programme on the SNA-SPARSH platform. Further, a sum of Rs.45,00,00,000/- was released towards the Infrastructure Maintenance Scheme for the Financial year 2025-2026. The proportionate State Share of Rs.59,32,18,000/-, Rs.13,22,75,695, Rs.51,58,70,000/-, Rs.41,66,15,638/- and Rs.30,00,00,000/- respectively has also been released in the Government Orders seventh to tenth read above respectively based on the certification received from the concerned Heads of the Department.

4. In the letter eleventh read above, the Mission Director, National Health Mission-Tamil Nadu has stated that out of the total sanctioned State Share of Rs.195,79,79,333/-, a sum of Rs.5,56,67,209/- is available as unspent balance as detailed below:

Sl. No.	G.O. No and Date	State Share released	Unspent balance available
		(Amount in Rupees)	
1.	G.O.(Ms.).No.68, Health and Family Welfare (EAP.II/1) Department, dated 27.02.2026	51,58,70,000/-	57,36,250/-
2.	G.O.(Ms.).No.95, Health and Family Welfare (EAP.II/1) Department, dated 11.03.2026	41,66,15,638/-	1,01,25,074/-
3.	G.O.(Ms).No.101, Health and Family Welfare (EAP.II/1) Department, dated 13.03.2026	30,00,00,000/-	3,98,05,885/-

	Total	123,24,85,638/-	Rs.5,56,67,209/-

5. The Mission Director, National Health Mission-Tamil Nadu has stated that the Government of India in D.O. letter No.G.27034/05/2025-26/NHM(F)-8334261, dated 02.02.2026 has informed that the 1st Mother Sanction for the year 2026-2027 can only be processed only after getting the drawing limit for the matching State Share against the Commodity Grants and Infrastructure Maintenance sanctions issued during the Financial Year 2026-2027 and instructed the States to submit an undertaking as a precondition that the corresponding State share for Kind Grant and Infrastructure Maintenance will be drawn and utilized by end of quarter-1 of Financial Year 2026-2027. He has furnished the provisional utilization certificate for Flexible Pool for Reproductive and Child Health and Health System Strengthening, National Health Programme and National Urban Health Mission for the financial year 2025-2026. He has further stated that sufficient funds are available in BE.2026-2027 under the General Head of account only. Therefore, the Mission Director, National Health Mission-Tamil Nadu has requested the orders of the Government for drawal of the above unspent balance State Share of Rs.5,56,67,209/- by reappropriation of funds.

6. The Government, after careful examination, have decided to revalidate the unspent balance of Rs.5,56,67,209/- (Rupees five crore fifty six lakh sixty seven thousand two hundred and nine only) out of the sanction of Rs.123,24,85,638/- already accorded during the financial year 2025–2026 and accordingly order that the said amount be revalidated for the financial year 2026–2027 under the following Heads of Account as detailed below:-

Head of Account	3rd release under Kind Grant in SNA SPARSH	4th release under Kind Grant in SNA SPARSH	1st release under Infrastructure Maintenance in SNA SPARSH	Total Amount
	G.O.(Ms.).No.68, dated 27.02.2026	G.O.(Ms.).No.95, dated 11.03.2026	G.O.(Ms).No.101, dated 13.03.2026	
	(Amount in Rupees)			
2211-00-103-UG-30903	0	59,67,741/-	1,54,74,666/-	2,14,42,407/-
2211-00-793-UG-30903	57,36,250/-	41,57,333/-	1,11,62,667/-	2,10,56,250/-
2211-00-794-UG-30903			1,31,68,552/-	1,31,68,552/-
Total	57,36,250/-	1,01,25,074/-	3,98,05,885/-	5,56,67,209/-

7. The expenditure sanctioned in paragraph 6 above shall be debited under the following heads of account:-

Sl. No.	Head of Account	Amount in rupees
1.	2211-00 Family Welfare – 103 Maternity and Child Health – Schemes Shared between State and Centre – UG Commodity grants and Infrastructure Maintenance grants under National Health Mission – State Share – 309 Grants-in-Aid – 03 Grants for Specific Schemes. [IFHRMS DPC 2211 00 103 UG 30903]	2,14,42,407/-

2.	2211-00 Family Welfare – 793 Special Central Assistance for Scheduled Caste Component Plan – Schemes Shared between State and Centre – UG Commodity grants and Infrastructure Maintenance grants under National Health Mission – State Share – 309 Grants-in-Aid – 03 Grants for Specific Schemes. [IFHRMS DPC 2211 00 793 UG 30903]	2,10,56,250/-
3.	2211-00 Family Welfare – 794 Special Central Assistance for Tribal Sub-Plan – Schemes Shared between State and Centre - UG Commodity grants and Infrastructure Maintenance grants under National Health Mission – State Share – 309 Grants-in-Aid – 03 Grants for Specific Schemes. [IFHRMS DPC 2211 00 794 UG 30903]	1,31,68,552/-
	Grand Total	**5,56,67,209/-**

8. Necessary funds of Rs.2,01,27,444/- will be provided by the way of re-appropriation as detailed below:

Sl. No.	Reappropriation from heads of Accounts	Reappropriation to heads of account	Amount in Rupees	After Re-appropriation of funds under 103 UG Head of Account
1	2211 00 103 UG 30903	2211 00 793 UG 30903	1,32,31,386/-	
2	2211 00 103 UG 30903	2211 00 794 UG 30903	68,96,058/-	
		Total	2,01,27,444/-	11,39,01,962/- (Rs.13,40,29,406 (-) Rs.2,01,27,444)

Single Nodal Agency – SPARSH Account details:

CSS code	:	4063
CSS Name	:	Flexible Pool for RCH & Health System Strengthening, National Health Programme and National Urban Health Mission
SLS Code	:	TN387
SLS Name	:	State Share of Commodity and Infrastructure Maintenance Grants
State Drawing Account No. in Reserve Bank of India	:	01512701484
State Drawing Account Name in Reserve Bank of India	:	01909TN387STATESHAREINFRA

9. The Mission Director, National Health Mission-Tamil Nadu is directed to include this item of expenditure while sending the budget proposal for Revised Estimate / Final Modified Appropriation 2026-2027 to the Government in Finance (Health-I) Department at the appropriate time without fail.

10. The Mission Director, National Health Mission-Tamil Nadu is also directed to implement the above scheme through SNA-SPARSH fund flow mechanism as mandated by the financial procedure outlined by the Government of India and shall be permitted to revise the targets among the approved components based on requirements. The Government also inform that bills shall be presented in IFHRMS-SNA-SPARSH bill module for 100% under any of the head of above, which will be divided into Government of India and State share, by the system itself i.e. there will not be concept of separate head of account for State and Government of India share hereafter.

11. The Mission Director, National Health Mission-Tamil Nadu is directed to ensure that the overall expenditure based on this order do not exceed the sanctioned amount together all the Drawing and Disbursing Officers under the scheme, since the expenditure is to be incurred through various drawals as and when expenditure is incurred by various Drawing and Disbursing Officers mapped under the Scheme. He is also directed to strictly adhere to the SNA-SPARSH guidelines issued in Government Letter No.573, Finance (PFMS) Department, dated 06.01.2025 and 07.02.2025.

12. This orders issues with the concurrence of the Finance Department vide e.file No.4508/2026, dated 30.04.2026 with Additional Sanction Ledger No.0037 (Thirty seven) (IFHRMS ASL No.2026040037).

(BY ORDER OF THE GOVERNOR)

P. SENTHILKUMAR
ADDITIONAL CHIEF SECRETARY TO GOVERNMENT

To
The Mission Director (FAC), National Health Mission-Tamil Nadu, Chennai-600 006.
The Section Officer, Health and Family Welfare (OP.II) Department, Chennai-600 009.
The Principal Accountant General (A&E), Chennai-600 018.
The Principal Accountant General (Audit), Chennai-600 018.
The Pay and Accounts Officer, Secretariat, Chennai-600 009.
The Resident Audit Officer, O/o. the Principal Accountant General, Secretariat, Chennai-600 009.

Copy to:
The Private Secretary to Additional Chief Secretary to Government, Health and Family Welfare Department, Chennai-600 009.
The Finance (Health-I / BG.I / BG.II / PFMS / W&M.I) Department, Chennai-600 009.
The Health and Family Welfare (Data Cell) Department, Chennai-600 009.
Stock file / Spare copy.

// FORWARDED / BY ORDER //

G. Sudha 30/4/26
SECTION OFFICER
30/4/26

A2/U PD

ABSTRACT

National Health Mission-Tamil Nadu – Sanction and release of First Mother Sanction and proportionate State Share for Grants-in-Aid under Flexible Pool for Reproductive and Child Health and Health System Strengthening, National Health Programme and Urban Health Mission under National Health Mission for the financial year 2026-2027 on SNA-SPARSH platform – Orders – Issued.

HEALTH AND FAMILY WELFARE (EAP.II/1) DEPARTMENT

G.O.(Ms).No.149 Dated 25.05.2026

பராபவ, வைகாசி – 11

திருவள்ளுவர் ஆண்டு 2057

Read:

1. From the Government of India, Ministry of Health and Family Welfare, letter No.G.27017/23/2026-27/NHM-F(E-8399959), dated 23.04.2026
2. From the Mission Director (FAC), National Health Mission–Tamil Nadu, letter No.987-1/NHM-TN/A2/2026, dated 25.04.2026.

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ORDER:

In the letter second read above, the Mission Director (FAC), National Health Mission–Tamil Nadu has stated that the Government of India has released a sum of Rs.381,80,00,000/- in the letter first read above as first Mother Sanction for Grants-in-Aid under "Flexible Pool for Reproductive and Child Health and Health System Strengthening, National Health Programme and Urban Health Mission under National Health Mission" for the financial year 2026-2027 on SNA-SPARSH as detailed below and the proportionate 40% State Share against the above Central Share works out to Rs.254,53,33,333/-:

Sl. No.	Name of the Scheme	Budget Head	Grants-in-Aid released by Govt. of India	Proportionate State Share	Total
			(Amount in Rupees)		
1	Flexible Pool for RCH & Health System Strengthening, National Health Programme and Urban Health Mission under National Health Mission	3601-06-101-16-06-31 (GBS)	247,26,00,000/-	164,84,00,000/-	412,10,00,000/-
2		3601-06-101-16-06-35 (GBS)	29,36,00,000/-	19,57,33,333/-	48,93,33,333/-
		General	**276,62,00,000/-**	**184,41,33,333/-**	**461,03,33,333/-**
3		3601-06-789-80-01-31 (GBS)	87,79,00,000/-	58,52,66,667/-	146,31,66,667/-
4		3601-06-789-80-01-35 (GBS)	7,40,00,000/-	4,93,33,333/-	12,33,33,333/-
		Total SCSP	**95,19,00,000/-**	**63,46,00,000/-**	**158,65,00,000/-**
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5		3601-06-796-86-01-31 (GBS)	3,04,00,000/-	2,02,66,667/-	5,06,66,667/-
6		3601-06-796-86-01-35 (GBS)	26,00,000/-	17,33,333/-	43,33,333/-
		Total STSP	**3,30,00,000/-**	**2,20,00,000/-**	**5,50,00,000/-**
7		3601-06-796-86-04-31 (PM-JANMAN)	5,41,00,000/-	3,60,66,667/-	9,01,66,667/-
8		3601-06-796-86-04-35 (PM-JANMAN)	60,00,000/-	40,00,000/-	1,00,00,000/-
		Total STSP – PM-JANMAN	**6,01,00,000/-**	**4,00,66,667/-**	**10,01,66,667/-**
9		3601-06-796-86-05-31 (DA-JGUA)	61,00,000/-	40,66,667/-	1,01,66,667/-
10		3601-06-796-86-05-35 (DA-JGUA)	7,00,000/-	4,66,666/-	11,66,666/-
		Total STSP – DAJGUA	**68,00,000/-**	**45,33,333/-**	**1,13,33,333/-**
		Grand Total	**381,80,00,000/-**	**254,53,33,333/-**	**636,33,33,333/-**

2. The Mission Director (FAC), National Health Mission–Tamil Nadu has further stated that sufficient funds are available only in the General and SCSP components in both Central and State Share heads of account in BE 2026-2027 and Rs.1000/- only allocated as token provision for the STSP component under the Pradhan Mantri Janjati Adivasi Nyaya Maha Abhiyan (PM-JANMAN) and Dharti Aaba Janjatiya Gram Utkarsh Abhiyan (DA-JGUA). As the Government of India have released the above Grants in-Aid to the State Government for drawal of funds through SNA-SPARSH platform and sufficient funds are available only in the General and SCSP components in both Central and State Share heads of account in BE 2026-2027, the Mission Director (FAC), National Health Mission-Tamil Nadu has requested to sanction and release the First Mother Sanction of Rs.381,80,00,000/- released by the Government of India and proportionate 40% State Share of Rs.254,53,33,333/- towards Grants-in-Aid for Flexible Pool for Reproductive and Child Health and Health System Strengthening, National Health Programme and Urban Health Mission under National Health Mission for the financial year 2026-2027 on SNA-SPARSH platform by providing additional sanction of Rs.11,15,00,000/- in RBE 2026-2027.

3. The Government, after careful examination, have decided to accord sanction for a sum of Rs.636,33,33,333/- (Rupees six hundred thirty six crore thirty three lakh thirty three thousand three hundred and thirty three only). Which is include of Rs.381,80,00,000/- as first mother sanction and Rs.254,53,33,333/- as proportionate 40% State Share towards Grants-in-Aid for the Flexible Pool for Reproductive and Child Health and Health System Strengthening, National Health Programme and Urban Health Mission under National Health Mission during the financial year 2026-2027 on SNA-SPARSH platform and order accordingly.

4. The amount sanctioned in paragraph 3 above shall be debited under the following heads of account:-

Sl. No.	Head of Account	Amount in Rupees
1.	2211-00 Family Welfare 103 Maternity and Child Health Schemes shared between State and Centre – UA National Health Mission Schemes – 309 Grants-in-Aid – 03 Grants for Specific Schemes. [DPC 2211 00 103 UA 30903]	276,62,00,000/-
2.	2211-00 Family Welfare 793 Special Central Assistance for Scheduled Caste Component Plan – Schemes shared between State and Centre – UA National Health Mission Schemes under special component plan – 309 Grants-in-Aid – 03 Grants for Specific Schemes. [DPC 2211 00 793 UA 30903]	95,19,00,000/-
3.	2211-00 Family Welfare 794 Special Central Assistance for Tribal Sub-Plan – Schemes shared between State and Centre – UA National Health Mission Schemes under Tribal Sub-Plan – 309 Grants-in-Aid – 03 Grants for Specific Schemes. [DPC 2211 00 794 UA 30903]	3,30,00,000/-
4.	2210 Medical and Public Health – 06 Public Health 794 Special Central Assistance for Tribal Sub- Plan – Schemes shared between State and Centre – UC Pradhan Mantri Janjati Adivasi Nyaya Maha Abhiyan (PM-JANMAN) – 309 Grants-in-Aid – 02 Grants for creation of Capital Assets. [DPC 2210 06 794 UC 30902]	6,01,00,000/- (ASL)
5.	2210 Medical and Public Health – 06 Public Health – 794 Special Central Assistance for Tribal Sub-Plan – Schemes shared between State and Centre – UE Dharti Aaba Janjatiya Gram Utkarsh Abhiyan (DA-JGUA) – 309 Grants-in-Aid – 03 Grants for Specific Schemes. [DPC 2210 06 794 UE 30903]	68,00,000/- (ASL)
	Sub-Total	**381,80,00,000/-**
6.	2211-00 Family Welfare 103 Maternity and Child Health Schemes shared between State and Centre – UD National Health Mission Schemes – State Share – 309 Grants-in-Aid – 03 Grants for specific schemes. [DPC 2211 00 103 UD 30903]	184,41,33,333/-

7.	2211-00 Family Welfare 793 Special Central Assistance for Scheduled Caste Component Plan – Schemes shared between State and Centre – UD National Health Mission Schemes under Special Component Plan – State Share – 309 Grants-in-Aid – 03 Grants for Specific Schemes. [DPC 2211 00 793 UD 30903]	63,46,00,000/-
8.	2211-00 Family Welfare 794 Special Central Assistance for Tribal Sub-Plan – Schemes shared between State and Centre – UD National Health Mission Schemes under Tribal Sub Plan – State Share – 309 Grants-in-Aid – 03 Grants for Specific Schemes. [DPC 2211 00 794 UD 30903]	2,20,00,000/-
9.	2210 Medical and Public Health – 06 Public Health 794 Special Central Assistance for Tribal Sub-Plan – Schemes shared between State and Centre – UD Pradhan Mantri Janjati Adivasi Nyaya Maha Abhiyan (PM-JANMAN) State Share – 309 Grants-in-Aid – 02 Grants for creation of Capital Assets [DPC 2210 06 794 UD 30902]	4,00,66,667/- (ASL)
10.	2210 Medical and Public Health – 06 Public Health – 794 Special Central Assistance for Tribal Sub-Plan – Schemes shared between State and Centre – UF Dharti Aaba Janjatiya Gram Utkarsh Abhiyan (DA-JGUA) – State Share – 309 Grants-in-Aid – 03 Grants for Specific Schemes. [DPC 2210 06 794 UF 30903]	45,33,333/- (ASL)
	Sub-Total	**254,53,33,333/-**
	Grand Total	**636,33,33,333/-**

5. Necessary funds of Rs.11,15,00,000/- over and above the Interim Budget Estimate provisions will be provided in Revised Budget Estimate 2026-2027. Pending provision of such funds, the Mission Director, National Health Mission- Tamil Nadu is authorized to incur the expenditure sanctioned in para 3 above through the Reserve Bank of India under the following Single Nodal Agency – SPARSH Account. The expenditure shall be brought to the notice of the Legislature by Specific Inclusion in the Supplementary Estimates 2026-2027. The Mission Director, National Health Mission-Tamil Nadu is directed to include the above item of expenditure while sending the budget proposals for Revised Budget Estimate 2026-2027 to the Government in Finance (BG-I / Health-I / B-coord) Department at the appropriate time without fail.

Central Scheme Code	:	4063
CSS Name	:	Flexible Pool for RCH & Health System Strengthening

State Linked Scheme (SLS) Code	:	TN 238
State Linked Scheme (SLS) Name		TN-RURAL HEALTH MISSON
State Drawing Account No. in Reserve Bank of India	:	01512701409
State Drawing Account Name in Reserve Bank of India	:	01909TN238TNNHM

6. The Mission Director, National Health Mission-Tamil Nadu is also directed to implement the above scheme through SNA-SPARSH fund flow mechanism as mandated by the financial procedure outlined by the Government of India and shall be permitted to revise the targets among the approved components based on requirements. The Government also inform that bills shall be presented in IFHRMS-SNA-SPARSH bill module for 100% under any of the head of above, which will be divided into Government of India and State share, by the system itself i.e. there will not be concept of separate head of account for State and Government of India share hereafter.

7. The Mission Director, National Health Mission-Tamil Nadu is directed to ensure that the overall expenditure based on this order do not exceed the sanctioned amount together all the Drawing and Disbursing Officers under the scheme, since the expenditure is to be incurred through various drawals as and when expenditure is incurred by various Drawing and Disbursing Officers mapped under the Scheme. He is also directed to strictly adhere to the SNA-SPARSH guidelines issued in Government Letter No.573, Finance (PFMS) Department, dated 06.01.2025 and 07.02.2025.

8. This order issues with the concurrence of the Finance Department vide e.file No.4942/2026, dated 18.05.2026 with Additional Sanction Ledger No.2026050073.

(BY ORDER OF THE GOVERNOR)

DAREZ AHAMED
SECRETARY TO GOVERNMENT

To
The Mission Director, National Health Mission-Tamil Nadu, Chennai-600 006.
The Principal Accountant General (A&E), Chennai-600 018.
The Principal Accountant General (Audit), Chennai-600 018.
The Pay and Accounts Officer, Secretariat, Chennai-600 009.
The Resident Audit Officer, O/o. the Principal Accountant General, Secretariat, Chennai-600 009.

Copy to:
The Private Secretary to the Secretary to Government, Health and Family Welfare Department, Chennai-600 009.
The Finance (Health-I / BG.I / BG.II / PFMS / W&M.I) Department, Chennai-600 009.
The Health and Family Welfare (Data Cell) Department, Chennai-600 009.
Stock file / Spare copy.

// FORWARDED / BY ORDER //

N. Latha 25/5/2026

(N.LATHA)
UNDER SECRETARY TO GOVERNMENT

25/5/26

NATIONAL HEALTH MISSION TN.
04 JUN 2026
CHENNAI-600 006

ABSTRACT

Health and Family Welfare - Maternal Health – 5th State Task Force Committee Meeting – Inclusion of Project Director Tamil Nadu State AIDS Control Society as Member in the State Task Force Committee for Reduction of Maternal Mortality Ratio in Tamil Nadu – Amendment order - Issued.

HEALTH AND FAMILY WELFARE (R2) DEPARTMENT

G.O.(Ms) No.157 **Dated:03.06.2026**

திருவள்ளுவர் ஆண்டு–2057
பராபவ வருடம், வைகாசி –20

Read:

1. G.O (Ms)No.289, Health and Family Welfare(R1) Department, Dated:01.10.2024.
2. From the Mission Director, National Health Mission, Chennai, letter Ref.No.3864822/P1/NHM/2022, Dated: 07.12.2025 and 19.11.2025.

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ORDER:

In the circumstances reported by the Mission Director, National Health Mission, Chennai in the letter second read above Government issue the following amendment to G.O. (Ms) No.289, Health and Family Welfare (R1) Department, dated 01.10.2024.

AMENDMENT

In paragraph 6 of the said G.O. (Ms). No.289, Health and Family Welfare (R1) Department dated 01.10.2024 after the existing entries, the following shall be added.

"The Project Director, TANSACS – Member"

The Government also reiterates that a State Level Task Force and District Level Task Forces have been constituted in all Districts for reduction of Maternal Mortality Ratio (MMR) in Tamil Nadu

(BY ORDER OF THE GOVERNOR)

DAREZ AHAMED
SECRETARY TO GOVERNMENT

To
The Principal Secretary to Government, Municipal Administration and Supply Department, Chennai-09.

The Secretary, Social Welfare and Women Empowerment Department, Chennai-600 009.
The Mission Director, National Health Mission, Chennai-600 006.
The Project Director, Tamil Nadu Health Systems Project, Chennai-600 006.
All District Collectors
The Director of Public Health and Preventive Medicine, Chennai-600 006.
The Director of Medical and Rural Health Services, Chennai-600 006.
The Director of Medical Education and Research, Chennai -600 010.
The Director of Family Welfare, Chennai-06.
All Joint Directors of Public Health and Preventive Medicine/Medical and Rural Health Services.
All Deputy Directors of Medical and Rural Health Services and Family Welfare.
The Director, Institute of Obstetrics and Gynaecology, Chennai-600 008.
The Director, Institute of Social Obstetrics, Kasturba Gandhi Hospital for Women and Children, Chennai-600 005.
The Superintendent, Raja Sir Ramasamy Mudhaliyar (RSRM) Hospital, Chennai -13.
The Head of the Department, Obstetrics and Gynaecology, Christian Medical College (CMC) Vellore - 632 004.
The Chief, UNICEF, Old No. 2A, New No. 1, 3rd Cross Street, Valmiki Nagar, Raja Garden, Kottivakkam, Chennai-600 041.
Consultant, WHO, Tamil Nadu.
The Secretary, Obstetrics and Gynaecological Society of Southern India (OGSSI).
The Indian Medical Association, Head Quarters Building, Doctors Colony, Bharathi Nagar, West Tambaram, Chennai-600 045.
The ASHWINI, Non-Governmental Organization, 10/147, G2, G3, Kotherayal, Gudalur, Tamil Nadu 643 212.

Copy to:

The Principal Private Secretary to Chief Secretary to Government, Chennai-600 009.
The Private Secretary to Principal Secretary to Government, Municipal Administration and Water Supply Department, Chennai-600 009.
The Private Secretary to Secretary to Government, Social Welfare and Women Empowerment Department, Chennai-600 009.
The Special Personal Assistant to the Hon'ble Minister (Health & Family Welfare), Chennai-09.
The Private Secretary to Secretary to Government, Health and Family Welfare Department, Chennai - 9.
The Health and Family Welfare (Data Cell) Department, Ch-9.
The Personal Assistant to Deputy Secretary to Government, Health and Family Welfare Department, Chennai-9.
Stock File / Spare Copy.

//FORWARDED BY ORDER//

03/06/26

SECTION OFFICER

03/06/2026

NATIONAL HEALTH MISSION TN.
27 JUN 2026
CHENNAI-600 006

ABSTRACT

National Health Mission – Tamil Nadu – Vaccines, consumables and other materials supplied by Government of India as Kind / Commodity Grants to State Government for Routine Immunization Programme, National Tuberculosis Elimination Programme and National Viral Hepatitis Control Programme for the year 2025-26 – Sanction and release of commensurate State Share on SNA-SPARSH platform – Orders – Issued.

HEALTH AND FAMILY WELFARE (EAP.II/1) DEPARTMENT

G.O.(Ms.).No.168 Dated 25.06.2026
பராபவ, ஆனி – 11
திருவள்ளுவர் ஆண்டு 2057

Read:

1. From the Additional Secretary & Mission Director (NHM), Government of India, Ministry of Health and Family Welfare, D.O. letter No.G.27034/202/2018-NHM-F[E-3195367], dated 19.08.2024.
2. G.O.(Ms).No.397, Health and Family Welfare (EAP.II/1) Department, dated 10.09.2025.
3. G.O.(Ms).No.08, Health and Family Welfare (EAP.II/1) Department, dated 19.01.2026.
4. G.O.(Ms).No.47, Health and Family Welfare (EAP.II/1) Department, dated 16.02.2026.
5. G.O.(Ms).No.68, Health and Family Welfare (EAP.II/1) Department, dated 27.02.2026.
6. G.O.(Ms.).No.95, Health and Family Welfare (EAP.II/1) Department, dated 11.03.2026.
7. G.O.(Ms.).No.131, Health and Family Welfare (EAP.II/1) Department, dated 24.04.2026.
8. From the Mission Director, National Health Mission-Tamil Nadu, letter No.987-3/NHM-TN/A2/2025, dated 08.06.2026.

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ORDER:

In the letter first read above, the Government of India have approved a sum of Rs.110,42,00,000/- for Kind / Commodity Grant for the year 2025-2026 in RoP. 2024-2026. Subsequently, the Government of India has transitioned all Centrally Sponsored Schemes (CSS), including the Reproductive and Child Health Project, to
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the SNA-SPARSH platform to ensure "Just-in-Time" fund flow and releasing the funds through the same. In the Government of India have released Kind / Commodity grants worth about Rs.369,47,49,744/- so far and the Government have released Rs.246,31,66,495/- as the proportionate State Share in the Government Orders second to seventh read above.

2. In the letter eighth read above, the Mission Director, National Health Mission-Tamil Nadu has stated that sanction orders have been received from the Government of India towards cost adjustment of Vaccines, consumables and other materials worth about Rs.15,88,64,364/- for Routine Immunization Programme, National Tuberculosis Elimination Programme and National Viral Hepatitis Control Programme for the year 2025-26 on SNA-SPARSH platform detailed below:

Sl. No	Sanction order No and Date	Government of India Share	Matching State Share
		(Amount in Rupees)	
1	Unique Sanction ID:NTEP/IFD/GIA/R/2025-26/376 No.Z.28015/347/2018-TB, dated 23.03.2026	2,12,76,000/-	1,41,84,000/-
2	F.No.T.13020/02/2025-IMM-Part(1)(128), dated 19.03.2026	9,46,94,000/-	6,31,29,333/-
3	F.No.M.12069/03/11/2019-Hep(NVHCP)-Part(1)FTS No.8055370, dated 19.03.2026	60,89,946/-	40,59,964/-
4	F.No.M.12069/03/11/2019-Hep(NVHCP)-FTS No.8035794, dated 20.03.2026	77,59,563/-	51,73,042/-
	Total General	**12,98,19,509/-**	**8,65,46,339/-**
5.	F.No.T.13020/02/2025-IMM-Part(1)-129, dated 19.03.2026	2,40,18,000/-	1,60,12,000/-
6.	No.M.12069/03/11/2019-Hep(NVHCP)-Part(1)FTS No.8055370, dated 19.03.2026	16,29,989/-	10,86,659/-
7.	F.No.M.12069/03/11/2019-Hep(NVHCP)-FTS No.8035794, dated 20.03.2026	20,76,866/-	13,84,578/-
	Total SCSP	**2,77,24,855/-**	**1,84,83,237/-**
8.	F.No.T.13020/02/2025-IMM-Part(1)-130, dated 19.03.2026	13,20,000/-	8,80,000/-
	Total STSP	**13,20,000/-**	**8,80,000/-**
	Grand Total	**15,88,64,364/-**	**10,59,09,576/-**

3. The Mission Director, National Health Mission-Tamil Nadu has further stated that the Principal Accountant General-Tamil Nadu has booked the receipt of Commodity / Kind Grants for the amount received from the Government of India and the respective user departments have furnished certificates for having received commodities / goods from Government of India. The corresponding 40% State Share against Kind / Commodity Grants received from Government of India worth about Rs.15,88,64,364/- works out to Rs.10,59,09,576/-. As sufficient funds are not

available in the SCSP and STSP component heads of account, the Mission Director, National Health Mission-Tamil Nadu has requested to sanction and release a sum of Rs.10,59,09,576/- for the drawal of State Share on SNA-SPARSH platform, by reappropriation of funds for SCSP and STSP components from the General component head of account.

4. The Government, after careful examination, have decided to accord sanction for a sum of Rs.10,59,09,576/- (Rupees ten crore fifty nine lakh nine thousand five hundred and seventy six only) towards proportionate State Share against the Kind / Commodity Grants received from Government of India worth about Rs.15,88,64,364/- for Routine Immunization Programme, National Tuberculosis Elimination Programme and National Viral Hepatitis Control Programme for the year 2025-26 on SNA SPARSH platform and order accordingly.

5. The expenditure sanctioned in paragraph 4 above shall be debited under the following heads of account:-

Sl. No.	Head of Account	Amount in Rupees
1.	2211-00 Family Welfare – 103 Maternity and Child Health – Schemes shared between State and Centre – UG Commodity grants and Infrastructure Maintenance grants under National Health Mission – State Share – 309 Grants-in-Aid – 03 Grants for Specific Schemes. [IFHRMS DPC 2211 00 103 UG 30903]	8,65,46,339/-
2.	2211-00 Family Welfare – 793 Special Central Assistance for Scheduled Caste Component Plan – Schemes shared between State and Centre – UG Commodity grants and Infrastructure Maintenance grants under National Health Mission – State Share – 309 Grants-in-Aid – 03 Grants for Specific Schemes. [IFHRMS DPC 2211 00 793 UG 30903]	1,84,83,237/-
3.	2211-00 Family Welfare – 794 Special Central Assistance for Tribal Sub-Plan – Schemes Shared between State and Centre - UG Commodity grants and Infrastructure Maintenance grants under National Health Mission – State Share – 309 Grants-in-Aid – 03 Grants for Specific Schemes. [IFHRMS DPC 2211 00 794 UG 30903]	8,80,000/-
	Grand Total	**10,59,09,576/-**

6. Necessary funds of Rs.1,93,63,237/- will be provided by way of reappropriation as detailed below:

Sl. No.	Reappropriation from heads of Account	Reappropriation to heads of account	Amount appropriated (Amount in Rupees)
1.	2211 00 103 UG 30903	2211 00 793 UG 30903	1,84,83,237/-
2.	2211 00 103 UG 30903	2211 00 794 UG 30903	8,80,000/-
		Total	1,93,63,237/-

Single Nodal Agency – SPARSH Account:

CSS code	:	4063
CSS Name	:	Flexible Pool for RCH & Health System Strengthening, National Health Programme and National Urban Health Mission
SLS Code	:	TN387
SLS Name	:	State Share of Commodity and Infrastructure Maintenance Grants
State Drawing Account No. in Reserve Bank of India	:	01512701484
State Drawing Account Name in Reserve Bank of India	:	01909TN387STATESHAREINFRA

7. The Mission Director, National Health Mission - Tamil Nadu is directed to include this item of expenditure while sending the budget proposal for Revised Estimate / Final Modified Appropriation 2026-2027 to the Government in Finance (BG-I / Health-I) Department at the appropriate time, without fail.

8. The Mission Director, National Health Mission-Tamil Nadu is also directed to implement the above scheme through SNA-SPARSH fund flow mechanism as mandated by the financial procedure outlined by the Government of India and shall be permitted to revise the targets among the approved components based on requirements. The Government also inform that bills shall be presented in IFHRMS-SNA-SPARSH bill module for 100% under any of the head of above, which will be divided into Government of India and State share, by the system itself i.e. there will not be concept of separate head of account for State and Government of India share hereafter.

9. The Mission Director, National Health Mission-Tamil Nadu is directed to ensure that the overall expenditure based on this order do not exceed the sanctioned

amount together all the Drawing and Disbursing Officers under the scheme, since the expenditure is to be incurred through various drawals as and when expenditure is incurred by various Drawing and Disbursing Officers mapped under the Scheme. He is also directed to strictly adhere to the SNA-SPARSH guidelines issued in Government Letter No.573, Finance (PFMS) Department, dated 06.01.2025 and 07.02.2025.

10. This order issues with the concurrence of the Finance Department vide e.file No.6676/2026, dated 25.06.2026 with Additional Sanction Ledger No.0156 (One Hundred Fifty Six) (IFHRMS ASL No.2026060156)

(BY ORDER OF THE GOVERNOR)

DAREZ AHAMED
SECRETARY TO GOVERNMENT

To
The Mission Director, National Health Mission-Tamil Nadu, Chennai-600 006.
The Section Officer, Health and Family Welfare (OP.II) Department, Chennai-600 009.
The Principal Accountant General (A&E), Chennai-600 018.
The Principal Accountant General (Audit), Chennai-600 018.
The Pay and Accounts Officer, Secretariat, Chennai-600 009.
The pay and Accounts Officer, (South), Chennai – 600 035.
The Resident Audit Officer, O/o. the Principal Accountant General, Secretariat, Chennai-600 009.

Copy to:
The Private Secretary to Secretary to Government, Health and Family Welfare Department, Chennai-600 009.
The Finance (Health-I / PFMS / BG.I / BG.II / W&M.I) Department, Chennai-600 009.
The Health and Family Welfare (Data Cell) Department, Chennai-600 009.
Stock file / Spare copy.

// FORWARDED / BY ORDER //

25/6/26
SECTION OFFICER
25/6/26

NATIONAL HEALTH MISSION TN. 27 JUN 2026 CHENNAI-600 006

ABSTRACT

National Health Mission – Tamil Nadu – Sanction and release of first Mother Sanction and proportionate State Share for Grants-in-Aid for Pradhan Mantri Ayushman Bharat Health Infrastructure Mission for the Financial Year 2026-2027 on SNA SPARSH platform – Orders – Issued.

HEALTH AND FAMILY WELFARE (EAP.II/1) DEPARTMENT

G.O.(Ms.).No.169

Dated 25.06.2026
பராபவ, ஆனி – 11
திருவள்ளுவர் ஆண்டு 2057

Read:

1. From the Government of India, Ministry of Health and Family Welfare, letter No.G.27018/21/2026-2027/NHM-F(FTS-8399490), dated 28.04.2026.
2. From the Mission Director (FAC), National Health Mission-Tamil Nadu, letter No.987-2/NHM-TN/A2/2025, dated 11.05.2026.

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ORDER:

In the letter second read above, the Mission Director (FAC), National Health Mission–Tamil Nadu has stated that in the letter first read above, the Government of India has released a sum of Rs.112,50,00,000/- towards first mother sanction for the Pradhan Mantri Ayushman Bharat Health Infrastructure Mission for the year 2025-26 and the details of first Mother sanction released by the Government of India and the proportionate State Share are as detailed below:

Sl. No.	Name of the Scheme	Budget Head	Government of India Share	Proportionate State Share
			(Amount in Rupees)	
1.	Pradhan Mantri Ayushman Bharat Health Infrastructure Mission (PM–ABHIM)	3601-06-101-94-01-31	7,48,83,000/-	4,99,22,000/-
2.		3601-06-101-94-01-35	66,66,70,000/-	44,44,46,667/-
3.		3601-06-102-37-01-31	1,24,08,000/-	82,72,000/-
4.		3601-06-102-37-01-35	11,04,65,000/-	7,36,43,333/-
		Total – General	**86,44,26,000/-**	**57,62,84,000/-**
5.		3601-06-789-75-01-31	2,46,31,000/-	1,64,20,667/-
6.		3601-06-789-75-01-35	22,18,01,000/-	14,78,67,333/-
		Total – SCSP	**24,64,32,000/-**	**16,42,88,000/-**
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7.		3601-06-796-79-01-31	14,38,000/-	9,58,667/-
8.		3601-06-796-79-01-35	1,27,04,000/-	84,69,333/-
		Total – STSP	**1,41,42,000/-**	**94,28,000/-**
		Grand Total	**112,50,00,000/-**	**75,00,00,000/-**

2. As the Government of India have released the above Grants-in-Aid to the State Government for drawal of funds through SNA-SPARSH platform, the Mission Director, National Health Mission-Tamil Nadu has requested to sanction and release the first Mother Sanction of Rs.112,50,00,000/- released by the Government of India and proportionate State Share of Rs.75,00,00,000/- towards Grants-in-Aid for the Pradhan Mantri Ayushman Bharat Health Infrastructure Mission for the year 2026-2027 on SNA-SPARSH platform.

3. The Government, after careful examination, have decided to accord sanction for a sum of Rs.187,50,00,000/- (Rupees one hundred eighty seven crore and fifty lakh only) which includes Rs.112,50,00,000/- as first Mother Sanction and Rs.75,00,00,000/- as the proportionate State Share towards Grants-in-Aid for the Pradhan Mantri Ayushman Bharat Health Infrastructure Mission for the financial year 2026-2027 on SNA-SPARSH platform for implementation of the Pradhan Mantri Ayushman Bharat Health Infrastructure Mission and order accordingly.

4. The expenditure sanctioned in paragraph 3 above shall be debited under the following heads of account:-

Sl. No.	Head of Account for Central Share	Amount in Rupees
1.	2210 Medical and Public Health – 06 Public Health - 800 Other Expenditure - Schemes shared between State and Centre – UB PM Ayushman Bharat Health Infrastructure Mission – 309 Grants-in-Aid – 02 Grants for Creation of Capital Assets. [DPC 2210 06 800 UB 30902]	144,07,10,000/-
2.	2210 Medical and Public Health – 06 Public Health 793 Special Central Assistance for Scheduled Caste Component Plan – Schemes shared between State and Centre – UA Prime Minister Ayushman Bharat Health Infrastructure Mission (PM-ABHIM) – 309 Grants-in-Aid – 02 Grants for Creation of Capital Assets. [DPC 2210 06 793 UA 30902]	41,07,20,000/-

3.	2210 Medical and Public Health – 06 Public Health 794 Special Central Assistance for Tribal Sub-Plan – Schemes shared between State and Centre – UA Prime Minister Ayushman Bharat Health Infrastructure Mission (PM-ABHIM) – 309 Grants-in-Aid – 02 Grants for Creation of Capital Assets. [DPC 2210 06 794 UA 30902]	2,35,70,000/-
	Total	**187,50,00,000/-**

5. Necessary funds of Rs.42,48,00,000/- will be provided by way of re-appropriation as detailed below. The Mission Director, National Health Mission-Tamil Nadu is authorized to incur the expenditure sanctioned in paragraph 3 above through the Reserve Bank of India under the following

Sl. No	Re-Appropriation (From Head of Account)	Re-Appropriation (To Head of Account)	Amount in Rupees
1.	2210 06 800 UC 30902	2210 06 800 UB 30902	30,95,54,000/-
2.	2210 06 793 UB 30902	2210 06 793 UA 30902	10,61,78,000/-
3.	2210 06 794 UB 30902	2210 06 794 UA 30902	90,68,000/-
	Total		42,48,00,000/-

Single Nodal Agency – SPARSH Account details:

Central Scheme Code	:	3991
CSS Name	:	Pradhan Mantri Ayushman Bharat Health Infrastructure Mission (PM-ABHIM)
State Linked Scheme (SLS) Code	:	TN 271
State Linked Scheme (SLS) Name		Pradhan Mantri Ayushman Bharat Health Infrastructure Mission (PM-ABHIM) – Tamil Nadu
State Drawing Account No. in Reserve Bank of India	:	01512701410
State Drawing Account Name in Reserve Bank of India	:	01909TN271TNPMABHIM

6. The Mission Director, National Health Mission-Tamil Nadu is directed to implement the above scheme through SNA-SPARSH fund flow mechanism as mandated by the financial procedure outlined by the Government of India and shall be permitted to revise the targets among the approved components based on requirements. The Government also inform that bills shall be presented in IFHRMS-

SNA-SPARSH bill module for 100% under any of the head of above, which will be divided into Government of India and State share, by the system itself i.e. there will not be concept of separate head of account for State and Government of India share hereafter.

7. The Mission Director, National Health Mission-Tamil Nadu is also directed to ensure that the overall expenditure based on this order do not exceed the sanctioned amount together all the Drawing and Disbursing Officers under the scheme, since the expenditure is to be incurred through various drawals as and when expenditure is incurred by various Drawing and Disbursing Officers mapped under the Scheme. He is further directed to strictly adhere to the SNA-SPARSH guidelines issued in Government Letter No.573, Finance (PFMS) Department, dated 06.01.2025 and 07.02.2025.

8. This order issues with the concurrence of the Finance Department vide e.file No.5534/2026, dated 18.06.2026 with Additional Sanction Ledger Number.2026060134.

(BY ORDER OF THE GOVERNOR)

DAREZ AHAMED
SECRETARY TO GOVERNMENT

To
The Mission Director, National Health Mission-Tamil Nadu, Chennai-600 006.
The Section Officer, Health and Family Welfare (OP.II) Department, Chennai-600 009.
The Principal Accountant General (A&E), Chennai-600 018.
The Principal Accountant General (Audit), Chennai-600 018.
The Pay and Accounts Officer, Secretariat, Chennai-600 009.
The pay and Accounts Officer, (South), Chennai – 600 035.
The Resident Audit Officer, O/o. the Principal Accountant General, Secretariat, Chennai-600 009.

Copy to:
The Private Secretary to Secretary to Government, Health and Family Welfare Department, Chennai-600 009.
The Finance (Health-I / PFMS / BG.I / BG.II / W&M.I) Department, Chennai-600 009.
The Health and Family Welfare (Data Cell) Department, Chennai-600 009.
Stock file / Spare copy.

// FORWARDED / BY ORDER //

25/6/26
SECTION OFFICER
25/6/26

ABSTRACT

National Health Mission – Tamil Nadu – Change of nomenclature of the post of Medical Officers sanctioned to District Early Intervention Centres – Orders – Issued.

HEALTH AND FAMILY WELFARE (EAP.II/1) DEPARTMENT

G.O.(Ms.).No.180 Dated 07.07.2026
பராபவ, ஆனி – 23
திருவள்ளுவர் ஆண்டு 2057

Read:

1. G.O.(Ms).No.123, Health and Family Welfare (EAP.II/1) Department, dated 09.05.2014.
2. G.O.(Ms.).No.248, Health and Family Welfare (EAP.II/1) Department, dated 10.07.2017.
3. G.O.(Ms).No.582, Health and Family Welfare (EAP.II/1) Department, dated 28.12.2021.
4. G.O.(Ms).No.53, Health and Family Welfare (EAP.II/1) Department, dated 14.02.2022.
5. G.O.(Ms).No.38, Health and Family Welfare (EAP.II/1) Department, dated 18.02.2025.
6. G.O.(Ms).No.62, Health and Family Welfare (EAP.II/1) Department, dated 13.03.2025.
7. From the Mission Director, National Health Mission-Tamil Nadu, letter No.6434647/P6/NHM/2024, dated 28.06.2025.
8. From the Director of Medical Education and Research, letter No.81935/E3/3/2025, dated 08.10.2025.
9. From the Director of Medical and Rural Health Services, letter No.565/P&D3/1/2025, dated 19.12.2025.
10. From the Mission Director, National Health Mission-Tamil Nadu, letter No.RCH-ADOLORBSK/5/NHM/P6/2025, 26.12.2025.

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ORDER:

In the Government order first read above, the Rashtriya Bal Swasthya Karyakram (RBSK) Programme has been implemented under National Health Mission, aiming at early detection and management of the '4Ds' prevalent among Children between 0-18 years – viz. Defects at Birth, Diseases in Children, Deficiency conditions, and Developmental delays including Disabilities, with a view to develop a healthy and
~~~~~

competent Society. Under this Programme, 39 District Early Intervention Centres (DEICs) have been established in 37 districts as per the Government Orders first to third and fifth read above with required Human Resources, to provide referral support to Children detected with '4Ds' during screening.

2. In the letter seventh read above, the Mission Director, National Health Mission - Tamil Nadu has stated that the following Medical Officers posts, among others, have been placed at 39 District Early Intervention Centres and these centres function with a 12-member medical and paramedical team headed by a Paediatrician to provide treatment and care for children with the above conditions.

Sl. No.	Name of the post	No. of posts	Scale of pay
1.	Assistant Surgeon (Paediatrician)	39	Rs.15,600-39100 + 5400 GP
2.	Assistant Surgeon (General)	39	
3.	Assistant Surgeon (Paedodontist - Dental)	39	

3. The Mission Director, National Health Mission – Tamil Nadu has also stated that various review meetings have highlighted the essential role of Paediatricians in the examination, confirmatory diagnosis and treatment of children identified under the '4Ds' Programme (Defects at Birth, Diseases in Children, Deficiency Conditions and Developmental Delays including Disabilities). The Paediatricians posted in the District Early Intervention Centres handle a high outpatient load of around 70–80 new cases daily and attend to RBSK referrals, private referrals, self-referrals, Special Newborn Care Unit cases and delivery point screenings. They also play a key role in confirmatory diagnosis and treatment of children identified with the '4Ds' and conduct monthly coordination meetings with RBSK Medical Officers, Integrated Child Development Services and the Department for the Welfare of Differently Abled Persons, besides providing training for effective screening of children. The services rendered by Paediatricians are also counted towards teaching experience, whereas the services of Medical Officers (General) in DEICs are not considered for the same.

4. In the letter tenth read above, the Mission Director, National Health Mission - Tamil Nadu has further stated that both Medical Officer (General) and Medical Officer (Paediatrics) belong to the Assistant Surgeon cadre and carry the same scale of pay. Hence, it has been proposed to redesignate the post of Assistant Surgeon (General) sanctioned to the District Early Intervention Centres as Assistant Surgeon (Paediatrics) in all the 39 DEICs without any financial implications, so as to strengthen the services provided to children under the RBSK Programme. He has also stated that the approval of the Executive Sub-Committee of the State Health Society, Tamil Nadu has been obtained for the above proposal vide Circulation Note No.17/2025, dated 08.12.2025 and has therefore, requested the Government to redesignate the post of Medical Officer / Assistant Surgeon (General) sanctioned to the 39 District Early Intervention Centres as Assistant Surgeon (Paediatrics).

5. In the letters eighth and ninth read above, the Director of Medical Education and Research and the Director of Medical and Rural Health Services have stated that

the District Early Intervention Centre (DEIC) is a crucial facility for early detection, early intervention and prevention of childhood disabilities through newborn screening programmes, specialized health camps for children and developmental assessment clinics. Children screened under the Rashtriya Bal Swasthya Karyakram (RBSK) from schools and Anganwadi centres are referred to the DEICs for specialist opinion and continuation of treatment. They have further stated that the services of a single Paediatrician in the DEIC are heavily burdened and that the role of Assistant Surgeon (General) with MBBS qualification is largely supportive rather than involving specific responsibilities. Hence, it has been suggested that two posts of Assistant Surgeon (Paediatrics) may be provided in the DEICs for their effective functioning and to achieve the objectives of the programme.

6. The Government, after careful examination of the proposal of the Mission Director, National Health Mission-Tamil Nadu, issue the following amendment to the Government Orders first and second read above:-

AMENDMENT

"The nomenclature of the posts of Paediatrician / Medical Officer / Assistant Surgeon (General) / Assistant Surgeon (Paediatric) sanctioned to the 34 District Early Intervention Centres established in the Government Orders first and second read above shall be read as Senior Resident (Paediatric) in respect of District Early Intervention Centres functioning in the institutions under the control of the Directorate of Medical Education and Research and Assistant Surgeon (Paediatric) in respect of District Early Intervention Centres functioning in the Government Headquarters Hospitals under the control of Directorate of Medical and Rural Health Services."

7. The Director of Medical Education and Research and the Director of Medical and Rural Health Services are directed to divert two Paediatricians each to the District Early Intervention Centres established in the Government orders third and fifth read above and functioning under their control, instead of each one Medical Officer in the speciality of General and Paediatrics as ordered therein.

8. This order does not require the concurrence of Finance Department as per G.O.(Ms).No.43, Finance (Budget General-I) Department, dated 19.02.2026.

(BY ORDER OF THE GOVERNOR)

DAREZ AHAMED
SECRETARY TO GOVERNMENT

To
The Mission Director, National Health Mission-Tamil Nadu, Chennai-600 006.
The Director of Medical Education and Research, Chennai-600 010.
The Director of Medical and Rural Health Services, Chennai-600 006.
The Director of Public Health and Preventive Medicine, Chennai-600 006.

All District Collectors.
All Deans of Government Medical College and Hospitals.
All Joint Director of Health Services.
All District Health Officers.
The Principal Accountant General (A&E), Chennai-600 018.
The Principal Accountant General (Audit), Chennai-600 018.
The Pay and Accounts Officer, Secretariat, Chennai-600 009.
All District Treasury / Sub-Treasury Officers.
The Resident Audit Officer, O/o. the Principal Accountant General, Secretariat, Chennai-600 009.

Copy to:

The Private Secretary to Secretary to Government, Health and Family Welfare Department, Chennai-600 009.
The Health and Family Welfare (A / B / E / J / F / Data Cell) Department, Chennai-600 009.
G.O.(Ms).No.123, Health and Family Welfare (EAP.II/1) Department, dated 09.05.2014.
G.O.(Ms.).No.248, Health and Family Welfare (EAP.II/1) Department, dated 10.07.2017.
G.O.(Ms).No.582, Health and Family Welfare (EAP.II/1) Department, dated 28.12.2021.
G.O.(Ms).No.38, Health and Family Welfare (EAP.II/1) Department, dated 18.02.2025.
Stock file / Spare copy.

// FORWARDED / BY ORDER //

7/7/26

SECTION OFFICER

7/7/26

Annexure – IV

Adoption of Proposals approved by the Executive Sub-Committee subsequent to 50th Executive Committee Meeting

NATIONAL HEALTH MISSION - TAMIL NADU

CIRCULATION NOTE NO. 1/2026, Dt. 09-01-26

R. No: HSS-CIVIOOTH/2/2025-CW-NHM

Sub: NHM-TN – Civil Works - Announcement No. 54/2025-26 of the Hon'ble Health Minister – Establishment of modern kitchen in 5 District Headquarters Hospitals a total cost of Rs.5,00,00,000/- - Change of institution from DHQH Udumalpet to DHQH Tenkasi - Permissions requested - Reg.

Ref:
1. Announcement No. 54 / 2025-26 made by the Hon'ble Health Minister on 21.04.2025
2. Supplementary PIP 2024-26
3. F.No.10(2)/2023-NHM-I/E-8252479, GoI – MoHFW (NHM-III Section), dt. 02.05.2025 – Supplementary RoP 2024-26
4. Agenda No. 10/49/2025 of the 49th EC Meeting held on 27.05.2025
5. Minutes of the 49th EC Meeting held on 27.05.2025
6. R. No: HSS-CIVIOOTH/2/2025-CW-NHM, dt. 29.10.2025 of this office.
7. R. No: HSS-CIVIOOTH/2/2025-CW-NHM, dt. 21.11.2025 of this office.
8. R. No: HSS-CIVIOOTH/2/2025-CW-NHM, dt. 09.12.2025 of this office.

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The Hon'ble Minister for Health and Family Welfare made the following Announcement on the floor of the Legislative Assembly on 21.04.2025, during the Budget Session 2025–26:

Ann No.	அறிவிப்புகள்	Announcements
54	நான்கு அரசு மருத்துவமனைகளுக்கு நவீன சமையல் கூடங்கள் ரூ.4.00 கோடி செலவில் அமைக்கப்படும்.	Modern kitchens will be provided to 4 Government Hospitals at a cost of Rs.4.00 crore.

In this regard, in order to establish modern kitchen in District Headquarters Hospitals (DHQHs) on priority basis, a detailed proposal had been included in Supplementary PIP 2025-26.

The proposal was approved in Supp. RoP 2025–26, with budgetary provision of Rs.500 Lakh for establishment of modern kitchen in the following 5 District Headquarters Hospitals (DHQHs), at a unit cost of Rs.100 lakh per institution.

S.No.	DISTRICT	INSTITUTION
1	Cuddalore	DHQH Cuddalore
2	Erode	DHQH Erode
3	Tiruppur	DHQH Udumalpet
4	Thiruvarur	DHQH Mannarkudi
5	Thoothukudi	DHQH Kovilpatti

During the Announcement Review Meeting held on 19.05.2025 in the chamber of the Mission Director, NHM-TN, as per the suggestion made by the Additional Director of Medical & Rural Health Services (DMS), it was discussed & decided to provide modern kitchen to DHQH Tenkasi, Tenkasi District, instead of DHQH Udumalpet, Tiruppur District, considering the requirements of the institution.

Accordingly, it was proposed to establish modern kitchen in the following facilities at Rs.100 Lakh per unit.

S.NO	DISTRICT	INSTITUTION
1	Cuddalore	DHQH Cuddalore
2	Erode	DHQH Erode
3	Tenkasi	DHQH Tenkasi
4	Thiruvarur	DHQH Mannarkudi
5	Thoothukudi	DHQH Kovilpatti

Further, the proposals for establishment of modern kitchen in the above mentioned 5 DHQHs had been presented to the Executive Committee of NHM-TN, vide Agenda No. 10/49/2025 of the 49th EC Meeting held on 27.05.2025, for necessary permissions & ratifications, inclusive of permissions for change of institution from DHQH Udumalpet, Tiruppur District to DHQH Tenkasi, Tenkasi District. The Agenda was approved.

Subsequently, in the refs. 6th to 8th cited, the detailed proposals had been sent to Government, requesting Administrative & Financial Sanction Orders, for executing all the works through PWD, for establishment of modern kitchen in the above mentioned 5 DHQHs.

The Government Orders are still awaited.

In this regard, the necessary permissions are requested as detailed below:

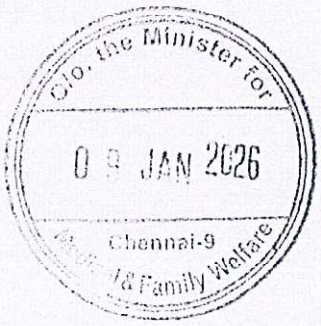
Decision Points:

The Mission Director, National Health Mission – Tamil Nadu, may be permitted to establish modern kitchen in 5 District Headquarters Hospitals - DHQH Erode, DHQH Cuddalore, DHQH Mannarkudi, DHQH Kovilpatti, and DHQH Tenkasi (instead of DHQH Udumalpet), at the total cost of Rs.500 Lakh (Rs. 100 lakh X 5) with change of institution from DHQH Udumalpet, Tiruppur District to DHQH Tenkasi, Tenkasi District.

6/1/26

The Mission Director,
National Health Mission – Tamil Nadu,
Chennai – 600 006.

The Additional Chief Secretary to Government,
Health & Family Welfare Department,
Government of Tamil Nadu,
Secretariat, Chennai – 600 009.



09/01/26.

The Hon'ble Minister,
Health & Family Welfare Department,
Secretariat, Chennai – 600 009.

NATIONAL HEALTH MISSION – TAMIL NADU
Circulation Note No. 08 /2026 dt 12/03/26
Submitted to the Governing Body of NHM-TN

Sub: NHM–TN – Audit Report along with Audited Accounts for the Financial Year 2024–25 – Submitted to the Governing Body for adoption and approval – Reg.

*****

As per the guidelines issued by the Ministry of Health & Family Welfare, Government of India, the accounts of the National Health Mission, Tamil Nadu (NHM–TN) are required to be audited annually by a Chartered Accountant firm. The audited accounts, along with the Audit Report and Utilization Certificates, are placed before the Executive Committee for approval and thereafter submitted to the Government of India every financial year.

For the Financial Year 2024–25, the Government of India has directed that a consolidated Audit Report covering all programmes under NHM–TN be furnished. Accordingly, the accounts for the Financial Year 2024–25 were audited by *M/s. Mahesh C. Solanki & Associates, Chartered Accountants, Chennai – 112.*

The audited accounts and Audit Report, along with the details of the Receipts & Payments Account, Income & Expenditure Account and Balance Sheet, have been submitted to the Government of India. An abstract of the audited accounts is provided below, and the detailed statements are enclosed in the Annexure for perusal.

ABSTRACT OF AUDITED ACCOUNTS – FY 2024–25

Particulars	Amount (Rs. in Cr.)
Opening Bank Balance	378.18
Funds Received	2,444.57
Accrued Bank Interest	9.33
Total Funds	**2,832.08**
Expenditure	2,556.77
Remittance of Bank Interest to Government	8.18
Closing Balance	267.13
Percentage of Expenditure	**90%**

The Statutory Audited Annual Accounts of the National Health Mission, Tamil Nadu for the Financial Year 2024–25 were placed before the 50th Executive Committee Meeting held on 06.02.2026 and adopted.

The same is now placed before the Governing Body for adoption and approval.

12/3/26

The Mission Director,
National Health Mission – Tamil Nadu,
Chennai – 600 006.

The Additional Chief Secretary to Government,
Health & Family Welfare Department,
Government of Tamil Nadu,
Secretariat, Chennai – 600 009.

The Additional Chief Secretary to Government,
Finance Department,
Government of Tamil Nadu,
Secretariat, Chennai – 600 009. 12/3/26

12/3/2026

The Chief Secretary to Government,
Government of Tamil Nadu,
Secretariat, Chennai – 600 009. 12/3/26

12/03/26

The Hon'ble Minister,
Health & Family Welfare Department,
Government of Tamil Nadu,
Secretariat, Chennai – 600 009.

NATIONAL HEALTH MISSION TAMIL NADU

ACCOUNTS

2024- 25

Mahesh C. Solanki & Co.
Chartered Accountants

INDEPENDENT AUDITOR'S REPORT

To

THE MISSION DIRECTOR,
NATIONAL HEALTH MISSION – TAMIL NADU,
STATE HEALTH SOCIETY TAMIL NADU,
No.359, Anna Salai, DMS Complex,
Teynampet, Chennai – 600006

Report on the Audit of the Financial Statements of National Health Mission, Tamil Nadu

Opinion

We have audited the Balance Sheet and the accompanying Consolidated Financial Statements (hereinafter referred to as "Financial Statements") of **National Health Mission Tamil Nadu / State Health Society Tamil Nadu** ("the Society"). These Financial statements comprise the audited Balance Sheet as at 31st March 2025, the Income & Expenditure Account and Receipts & Payments Account for the period then ended, and other explanatory information & Notes to these Financial Statements, including a summary of Key Accounting Policies & Disclosures of the respective accounting units (a) State Health Society (SHS), (b) District Health Societies (DHS & HUDs) and (c) NHM funding agencies of State level & District level for various programmes of RCH Phase-II, Routine Immunization, Pulse Polio Immunization, & additionalities under NHM including National Rural Health Mission (NRHM) & National Urban Health Mission (NUHM), and all the National Disease Control Programmes (NDCPs) implemented through the National Health Mission, Tamil Nadu / State Health Society Tamil Nadu ("the Society").

In our opinion and to the best of the information explanations given to us, the accompanying Consolidated Financial Statements (CFS) of the Society give the information in the manner required and give a true and fair view of the financial position of the Mission as on 31st March 2025,

a) In the case of the Balance Sheet – of the state of affairs of the Society as at 31st March, 2025.

b) In the case of the Income and Expenditure Account – of the excess of income over expenditure for the year ended on that date.

c) In case of Receipts and Payments Account – of the receipts and payments during the year ended on that date.

MAHESH C. SOLANKI & CO. Chennai 600 006 Chartered Accountants

No. 6/2, 4th Floor, Willingdon Crescent, Dr. S.S. Badrinath Road, Nungambakkam, Chennai - 600 006
Mobile : +91 98842 79661 Email : vinay.kumar@mcsca.com Web : www.mcsca.com
Mumbai | Gurgaon (NCR) | Indore | Surat | Bhopal | Chittorgarh | Chennai

Basis for Opinion

We conducted our audit in accordance with the Standards on Auditing issued by the Institute of Chartered Accountants of India. Those Standards require that we comply with ethical requirements, and plan and perform the audit to obtain reasonable assurance about whether the Financial Statements are free from any material misstatement. Our responsibility is to express an opinion on these Financial Statements based on our audit. We have considered the guidelines prescribed, the accounting and auditing standards and matters which are required to be included in the audit report. We are independent of the Society in accordance with the Code of Ethics issued by the ICAI and we have fulfilled our other ethical responsibilities in accordance with these requirements and the ICAI's Code of Ethics. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the Financial Statements, and also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall Financial Statement presentation. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion on the Financial Statements.

Emphasis of Matter

We draw attention to the "Key Accounting Policies, Disclosures and Notes to Accounts" on Financial Statements and account closing procedures / formats & annexure as specified:

- As highlighted in the "1.0 Key Accounting Policies and Disclosures", there are deviations from the Accounting Standards (AS) prescribed by the Accounting Standards Board (ASB) of the Institute of Chartered Accountants of India (ICAI) on following the policies stated in the Operational Guidelines for Financial Management.

- As highlighted in the "2.0 Notes to Accounts", there are deviations in the preparation of the Financial Statements from the 'Framework for the Preparation and Presentation of Financial Statements' issued by the Accounting Standards Board (ASB) of the Institute of Chartered Accountants of India on following the policies stated in the Operational Guidelines for Financial Management.

- We draw attention to the matters pending paras reported in the Report of the Accountant General.

- We draw attention to the "Letter to Management" annexed to this Report.

MAHESH C. SOLANKI & CO. * Chartered Accountants * Chennai 600 006

No 6/2, 4th Floor, Willingdon Crescent, Dr. S S Badrinath Road, Nungambakkam, Chennai 600 006
Mobile +91 98842 72661 Email vinay.kumar@mcsca.com Web www.mcsca.com
Mumbai Gurgaon (NCR) Indore Surat Bhopal Chittorgarh Chennai

Responsibilities of Management

The Society's Management are responsible for the preparation and presentation of the Financial Statements that give a true and fair view of the financial position & financial performance and Receipts & Payments Account in accordance with the accounting principles generally accepted in India, including the Accounting Standards specified. This responsibility also includes maintenance of adequate accounting records in accordance with the provisions of the Act for safeguarding the assets of the Society and for preventing and detecting frauds and other irregularities; selection and application of appropriate accounting policies, making judgments and estimates that are reasonable and prudent and design, implementation and maintenance of adequate internal financial controls, that were operating effectively to ensure the accuracy and completeness of the accounting records, relevant to the preparation and presentation of the Financial Statements that give a true and fair view and are free from material misstatement, whether due to fraud or error. The Society's Management as the implementing agency is responsible for overseeing the Society's financial reporting process.

Auditor's Responsibilities for Audit of the Financial Statements

An audit involves performing procedures to obtain audit evidence about the amounts and the disclosures in the Financial Statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal financial controls relevant to the Society's preparation of the Financial Statements that give a true and fair view in order to design audit procedures that are appropriate in the circumstances. An audit also includes evaluating the appropriateness of the accounting policies used and the reasonableness of the accounting estimates made by the Society's Management as the implementing agency, as well as evaluating the overall presentation of the Financial Statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion on the Financial Statements.

As part of an audit in accordance with SAs, we exercised professional judgement and maintained professional skepticism throughout the audit.

We also,

- Identify and assess the risks of material misstatements in the Financial Statements, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.

MAHESH C. SOLANKI & CO. Chennai 600 006 Chartered Accountants

No. 6/2, 4th Floor, Willingdon Crescent, Dr. S.S Badrinath Road, Nungambakkam, Chennai - 600 006
Mobile : +91 98842 72661 Email : vinay.kumar@mcsca.com Web : www.mcsca.com
Mumbai Gurgaon (NCR) Indore Surat Bhopal Chittorgarh Chennai

- Obtain an understanding of internal financial controls relevant to the audit in order to design audit procedures that are appropriate in the circumstances. We are also responsible for expressing our opinion on whether the Society has adequate internal financial controls system in place and the operating effectiveness of such controls.

- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by the Management

- Conclude on the appropriateness of management's use of the going concern basis of accounting and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the Society's ability to continue as a going concern. If we conclude that material uncertainty exists, we are required to draw attention in our Auditor's Report to the related disclosures in the financial statements or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditor's report. However, future events or conditions may cause the Society to cease to continue as a going concern.

- Evaluate the overall presentation, structure and content of the financial statements, including the disclosures, and whether the financial statements represent the underlying transactions and events in a manner that achieves fair presentation.

We consider quantitative materiality and qualitative factors in (i) planning the scope of our audit work and in evaluating the results of our work, and (ii) evaluating the effect of any identified misstatements in the financials.

We communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.

We also provide those charged with governance with a statement that we have complied with relevant ethical requirements regarding independence, and to communicate with them all relationships and other matters that may reasonably be thought to bear on our independence, and where applicable, related safeguards.

From the matters communicated with those charged with governance, we determine those matters that were of most significance in the audit of the current period and we describe these matters in our Auditor's Report unless law or regulation precludes public disclosure about the matter or when, in extremely rare circumstances, we determine that a matter should not be communicated in our Report because the adverse consequences of doing so would reasonably be expected to outweigh the public interest / benefits of such communication.

MAHESH C. SOLANKI & CO. Chennai 600 006 Chartered Accountants

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Mumbai Gurgaon (NCR) Indore Surat Bhopal Chittorgarh Chennai

Report on Other Legal and Regulatory Requirements

Further to our opinion on the Financial Statement we further report that:

a. We have sought and obtained all the information and explanations which to the best of our knowledge and belief were necessary for the purposes of our audit;

b. In our opinion, proper books of accounts have been kept by the implementing agency for Project purposes so far as appears from our examination of those books;

c. The Financial Statements dealt with by this Report is in agreement with the books of accounts;

d. The expenditures so claimed are eligible for financing under the credit agreement;

e. Procurement of goods and services has been carried out as per the Procurement Manual by the concerned division of the Govt. of India.

The accompanying Financial Statements dealing with this report include funds received from the Asian Development Bank under "Supporting National Urban Health Mission – Results Based Lending", Loan #3257 dated July 28, 2015", and amounts claimed under the loan are eligible for financing under the credit arrangements.

The Project has an adequate internal financial control system, and such controls were operating effectively as of March 31, 2025, except as stated in the ***"Emphasis of Matter"*** and the Project complies with the provisions on financial management contained in the Operational Guidelines for Financial Management, in all material aspects.

For **Mahesh C Solanki & Co.**
Chartered Accountants
FRN: 006228C

MAHESH C. SOLANKI & CO. Chennai 600 006 Chartered Accountants

CA Vinay Kumar Jain
Partner
Membership No: 232058
UDIN: 25232058BMKUWU3482

Place: Chennai
Date: 11.08.2025

NATIONAL HEALTH MISSION - TAMIL NADU

Balance Sheet as on 31-03-2025

Amount in Rupees

Previous Yr. At 31-03-24	Liabilities	Sch. Ref.	Current Yr. At 31-03-25	Previous Yr. At 31-03-24	Assets	Sch. Ref.	Current Yr. At 31-03-25
	Reserve & Surplus						
-	Opening Balance (Surplus)	I	-	41,95,63,575	**Fixed Assets**	II-A	38,39,27,162
-	Add :Transfer/Refund to Govt.	I	-				
-			-				
	Unspent Grant				**Loan & Advances**		
-	RCH-I	I-A	-		RCH-I	IV-A	
	NHM Flexible Pool				**NRHM-RCH Flexible Pool**		
3,78,18,54,594	Flexible Pool for RCH & Health System Strengthening, National Health Programme and Urban Health Mission	I-B	2,68,58,48,765	89,05,762	Flexible Pool for RCH & Health System Strengthening, National Health Programme and Urban Health Mission	IV-B	23,78,651
	EC SIP	I-D			EC SIP	IV-C	
	Non-NHM Funds	I-C			**Non-NHM Funds**	IV-D	
68,36,34,730	ECRP COVID-19 - II		6,28,42,904	68,36,34,730	ECRP COVID-19 - II		6,28,42,904
1,00,10,33,335	PM-ABHIM			1,00,10,33,335	PM-ABHIM		
-	Leptospirosis			-	Leptospirosis		
-	Anti Rabies			-	Anti Rabies		
41,95,63,575	**Fixed Assets Reserves Fund A/C**	II	38,39,27,162	1,61,21,398	Other Current Assets	V	1,40,35,243
					Closing Balances :		
6,82,383	**Current Liabilities**	III	19,13,301	-	Cash in Hand	VI	
				3,75,75,09,817	Bank Balance	VI	2,67,13,48,175
					Cheques/Draft in Hand	VII	
5,88,67,68,617	**Total**		**3,13,45,32,135**	**5,88,67,68,617**	**Total**		**3,13,45,32,135**

For Mahesh C. Solanki & Co.,
Chartered Accountants
Firm Regn. No.006228C

Vinay Kumar Jain
Partner, M.No.232058

Financial Advisor & Chief Accounts Officer

As Per our report on even date
Place : Chennai
Date :11.08.2025

Mission Director

NATIONAL HEALTH MISSION - TAMIL NADU

Income & Expenditure For The Year Ending 31-03-2025

Amount in Rupees

Previous Yr. At 31-03-24	Expenditure	Sch. Ref.	Current Yr. At 31-03-25	Previous Yr. At 31-03-24	Income	Sch. Ref.	Current Yr. At 31-03-25
	RCH-I	I-A			**Grant Received** RCH-I	I-A	
	NHM Flexible Pool				**NHM Flexible Pool**		
21,42,74,29,651	Flexible Poo for RCH & Health System Strengthening, National Health Programme and Urban Health Mission	I-B	25,57,27,01,391	21,42,74,29,651	Flexible Pool for RCH & Health System Strengthening, National Health Programme and Urban Health Mission	I-B	25,57,27,01,391
-	EC SIP	I-D	-	-	EC SIP	I-D	-
	Non-NHM Funds	I-C			**Non-NHM Funds**	I-C	
33,19,23,944	ECRP COVID-19 - II		60,55,57,243	33,19,23,944	ECRP COVID-19 - II		60,55,57,243
3,89,36,66,665	PM-ABHIM		5,12,33,33,334	3,89,36,66,665	PM-ABHIM		5,12,33,33,334
	Others (Please specify)			14,86,58,117	**Interest Earned**	VIII	10,13,95,928
14,86,58,117	**Income Over Expenditure (Surplus)**		10,13,95,928				
					Expenditure Over Income (Deficit)		
25,80,16,78,377	**Total**		**31,40,29,87,895**	**25,80,16,78,377**	**Total**		**31,40,29,87,895**

As Per our report on even date
Place : Chennai
Date :11.08.2025

For Mahesh C. Solanki & Co.,
Chartered Accountants
Firm Regn. No.006228C

SOLANKI & CO. Chennai 600 006 Chartered Accountants

Vinay Kumar Jain
Partner, M.No.232058

Financial Advisor & Chief Accounts Officer

Mission Director

NATIONAL HEALTH MISSION - TAMIL NADU

Receipts & Payments Account for the Year Ended 31-03-2025

Amount in Rupees

RECEIPTS

Sl. No.	Name of the district	Opening Balance: Cash	Opening Balance: Bank	Sub-Total	Grant-in-aid received during the year (including cheque received or to be received from GOI)	Other Grants	State Contribution	Misc. Receipts (includes refund of EMD/SD)	Amount of Advances refunded/adjusted against exp.during the year	Interest	Grand Total
1	2	3	4	5	6	7		8	9	10	11
State Level:		-	3,75,75,09,817	3,75,75,09,817	12,96,92,67,327	2,23,71,518	-	45,73,36,362	1,70,42,164	10,13,95,928	17,32,49,23,115
District Level:											
1	Ariyalur	-	-	-	15,27,39,858	-	-	-	12,840	-	15,27,52,698
2	Chennai	-	-	-	2,01,59,64,132	-	-	11,61,205	-	-	2,01,71,25,337
3	Coimbatore	-	-	-	33,30,19,844	-	-	97,323	2,43,057	-	33,32,90,224
4	Cuddalore	-	-	-	36,62,91,551	-	-	-	74,725	-	36,63,66,277
5	Dindigul	-	-	-	32,31,35,275	-	-	1,10,168	3,21,018	-	32,35,66,461
6	Dharmapuri	-	-	-	24,01,00,889	-	-	60,250	3,59,406	-	24,05,30,545
7	Erode	-	-	-	31,55,44,362	-	-	19,900	2,93,592	-	31,58,57,854
8	Karur	-	-	-	17,40,52,499	-	-	19,550	1,06,773	-	17,41,78,822
9	Kanchipuram	-	-	-	16,23,96,209	-	-	29,000	11,350	-	16,24,36,559
10	Krishnagiri	-	-	-	29,38,93,490	-	-	-	2,51,528	-	29,41,45,018
11	Madurai	-	-	-	34,59,33,066	-	-	-	4,29,719	-	34,63,62,785
12	Nagapattinam	-	-	-	13,67,73,122	-	-	-	1,70,628	-	13,69,43,750
13	Nagarkoil	-	-	-	23,22,46,918	-	-	-	59,410	-	23,23,06,328
14	Namakkal	-	-	-	27,64,14,596	-	-	18,633	2,91,576	-	27,67,24,805
15	Perambalur	-	-	-	14,22,54,404	-	-	-	4,479	-	14,23,58,883
16	Pudukottai	-	-	-	30,71,65,595	-	-	94,494	2,92,165	-	30,75,52,254
17	Ramanathapuram	-	-	-	29,65,39,464	-	-	-	1,57,877	-	29,66,97,342
18	Salem	-	-	-	41,72,29,678	-	-	15,169	2,55,975	-	41,76,00,822
19	Sivaganga	-	-	-	24,87,49,166	-	-	1,20,700	49,546	-	24,89,19,412
20	Thanjavur	-	-	-	32,05,13,838	-	-	4,500	4,65,621	-	32,09,83,959
21	Theni	-	-	-	19,33,25,378	-	-	18,000	1,62,383	-	19,35,05,761
22	Tiruvellur	-	-	-	29,88,62,010	-	-	-	84,637	-	29,89,46,647
23	Tiruvarur	-	-	-	19,78,05,742	-	-	4,214	43,376	-	19,78,53,332
24	Tiruvannamalai	-	-	-	39,37,25,729	-	-	-	44,766	-	39,37,70,495
25	Tirunelveli	-	-	-	23,62,86,956	-	-	-	1,01,752	-	23,63,88,708
26	Tiruchirapalli	-	-	-	32,77,18,271	-	-	17,700	1,23,036	-	32,78,59,007
27	Tuticorin	-	-	-	31,10,33,765	-	-	-	1,40,301	-	31,11,74,069
28	Udhagamandalam	-	-	-	21,61,87,821	-	-	-	53,231	-	21,62,51,052
29	Vellore	-	-	-	21,19,22,468	-	-	-	57,112	-	21,19,79,580
30	Villupuram	-	-	-	28,76,60,779	-	-	74,360	6,23,304	-	28,83,58,443
31	Virudhunagar	-	-	-	33,08,13,441	-	-	18,700	1,94,481	-	33,10,26,622
32	Tiruppur	-	-	-	26,74,12,557	-	-	-	1,55,254	-	26,75,67,811
33	Mayiladuthirai	-	-	-	12,98,12,719	-	-	72,007	19,888	-	12,99,04,614
34	Kallakurichi	-	-	-	20,92,86,751	-	-	19,500	23,950	-	20,93,30,201
35	Tenkasi	-	-	-	18,93,14,263	-	-	-	59,892	-	18,93,74,155
36	Ranipet	-	-	-	15,36,80,502	-	-	-	15,673	-	15,36,96,175
37	Tirupattur	-	-	-	16,70,60,099	-	-	-	87,311	-	16,71,47,410
38	Chengalpattu	-	-	-	19,84,25,269	-	-	-	1,51,364	-	19,85,76,633
39	Chennai Corporation	-	-	-	6,12,489	-	-	-	-	-	6,12,489
40	Training Institute	-	-	-	5,65,33,991	-	-	64,320	-	-	5,65,98,311
	Grand Total	-	3,75,75,09,817	3,75,75,09,817	24,44,57,06,285	2,23,71,518	-	45,93,06,055	2,30,55,161	10,13,95,928	28,80,93,44,765

For Mahesh C. Solanki & Co.,
Chartered Accountants
Firm Regn. No.006228C

Vinay Kumar Jain
Partner, M.No.232058

Financial Advisor & Chief Accounts Officer

As Per our report on even date
Place : Chennai
Date :11.08.2025

Mission Director

NATIONAL HEALTH MISSION - TAMIL NADU

Receipts & Payments Account for the Year Ended 31-03-2025

Amount in Rupees

		PAYMENTS									
								Closing Balance			
Sl. No.	Name of the district	Funds utilized/expenses during the year (other than fixed assets) as shown in the Income & Expenditue a/c	Purchase of fixed assets	Advances given during the year	Refund of EMD/SD	Grant Refunded to GOI/SHS :	Others	Cash	Bank	Funds in Transit -	Total
1	2	3	4	5	6	7		8	9	10	11
State Level:		14,10,19,17,263	-	45,18,41,062	-	7,86,76,016	2,11,40,600	-	2,67,13,48,174	-	17,32,49,23,115
District Level:											
1	Arivalur	15,27,27,718	-	12,840	-	12,140	-	-	-	-	15,27,82,698
2	Chennai	2,01,48,02,927	-	23,22,410	-	-	-	-	-	-	2,01,71,25,337
3	Coimbatore	33,27,63,461	-	2,70,380	-	2,56,383	-	-	-	-	33,32,90,224
4	Cuddalore	36,62,16,825	-	74,726	-	74,726	-	-	-	-	36,63,66,277
5	Dindigul	32,27,24,089	-	4,31,186	-	4,11,186	-	-	-	-	32,33,68,461
6	Dharmapuri	23,96,79,461	-	4,29,656	-	4,21,428	-	-	-	-	24,05,30,548
7	Erode	31,52,31,570	-	3,13,492	-	3,12,793	-	-	-	-	31,58,57,854
8	Karur	17,39,26,176	-	1,26,323	-	1,26,323	-	-	-	-	17,41,78,822
9	Kanchipuram	16,23,56,459	-	40,350	-	39,750	-	-	-	-	16,24,36,559
10	Krishnagiri	29,36,41,962	-	2,51,528	-	2,51,528	-	-	-	-	29,41,45,018
11	Madurai	34,55,38,997	-	4,29,719	-	3,94,062	-	-	-	-	34,63,62,785
12	Nagapattinam	13,66,02,794	-	1,70,628	-	1,70,323	-	-	-	-	13,69,43,750
13	Nagarkoil	23,21,87,508	-	59,410	-	59,410	-	-	-	-	23,23,06,328
14	Namakkal	27,61,06,487	-	3,10,209	-	3,08,103	-	-	-	-	27,67,24,808
15	Perambalur	14,22,51,325	-	4,479	-	3,073	-	-	-	-	14,22,58,883
16	Pudukottai	30,68,29,436	-	3,86,659	-	3,36,193	-	-	-	-	30,78,52,954
17	Ramanathapuram	29,63,81,588	-	1,57,877	-	1,57,877	-	-	-	-	29,66,97,342
18	Salem	41,69,87,230	-	2,71,144	-	2,42,443	-	-	-	-	41,75,00,822
19	Sivaganga	24,65,79,620	-	1,70,246	-	1,69,545	-	-	-	-	24,69,19,410
20	Thanjavur	32,00,43,717	-	4,70,121	-	4,70,121	-	-	-	-	32,09,83,959
21	Theni	19,31,47,695	-	1,80,383	-	1,77,683	-	-	-	-	19,35,05,761
22	Tiruvallur	29,87,78,073	-	84,637	-	83,937	-	-	-	-	29,89,46,647
23	Tiruvarur	19,77,62,652	-	47,590	-	43,093	-	-	-	-	19,78,53,332
24	Tiruvannamalai	39,36,87,569	-	44,766	-	38,160	-	-	-	-	39,37,70,495
25	Tirunelveli	23,62,10,204	-	1,01,752	-	76,752	-	-	-	-	23,63,88,708
26	Tiruchirapalli	32,75,77,541	-	1,40,736	-	1,40,736	-	-	-	-	32,78,59,007
27	Tuticorin	31,68,96,274	-	1,40,301	-	1,37,494	-	-	-	-	31,71,74,069
28	Udhagamandalam	21,61,24,591	-	63,231	-	63,230	-	-	-	-	21,62,51,052
29	Vellore	21,18,68,756	-	57,112	-	53,712	-	-	-	-	21,19,79,580
30	Villupuram	28,69,66,615	-	6,97,664	-	6,94,164	-	-	-	-	28,80,58,443
31	Virudhunagar	33,06,00,260	-	2,13,181	-	2,13,181	-	-	-	-	33,10,26,622
32	Tiruppur	26,93,44,058	-	(19,30,901)	-	1,54,654	-	-	-	-	26,75,67,811
33	Mayiladuthirai	12,97,20,824	-	91,895	-	91,895	-	-	-	-	12,99,04,614
34	Kallakurichi	20,92,43,301	-	43,450	-	43,450	-	-	-	-	20,93,30,201
35	Tenkasi	18,92,61,457	-	59,892	-	52,806	-	-	-	-	18,93,74,155
36	Ranipet	15,36,64,829	-	15,673	-	13,673	-	-	-	-	15,38,96,173
37	Tirupattur	16,69,72,788	-	87,311	-	87,311	-	-	-	-	16,71,47,410
38	Chengalpattu	19,62,73,905	-	1,51,364	-	1,51,364	-	-	-	-	19,63,76,633
39	Chennai Corporation	6,12,489	-	-	-	-	-	-	-	-	6,12,489
40	Training Institute	5,64,69,671	-	64,320	-	64,320	-	-	-	-	5,65,98,311
	Grand Total	25,57,26,80,165	-	45,88,98,802	-	8,52,77,024	2,11,40,600	-	2,67,13,48,174	-	28,80,93,44,765

For Mahesh C. Solanki & Co.,
Chartered Accountants
Firm Regn. No.006228C

Vinay Kumar Jain
Partner, M.No.232058

Financial Advisor & Chief Accounts Officer

As Per our report on even date
Place : Chennai
Date : 11.08.2025

Mission Director

NATIONAL HEALTH MISSION – TAMIL NADU

Circulation Note No. 3/2026, Dt: 05.02.2026

R. No. 12084786/NHM/S/2025

Sub: NHM–TN – PMABHIM – Establishment of one 100 bedded CCB at Government Rajaji Hospital, Madurai and one 50 bedded CCB at GMCH Kallakurichi approved by GoI – Remittance of funds into Government Account for executing Civil Works through PWD – Permission requested – Reg.

Ref:
1. Circulation Note No.15/2025 dated 17.11.2025 of NHM-TN
2. 12084786/NHM/S/2025, dated: 21.11.2025 of this office
3. F. No. Z-18015/70/2025-NHM-II, GoI, MoHFW (NHM-II Division), dated 27.01.2026.

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As per the references 1st and 2nd cited, under the Prime Minister Ayushman Bharat Health Infrastructure Mission (PM-ABHIM) scheme, National Health Mission–Tamil Nadu had submitted a detailed proposal to the Government of India seeking approval for the establishment of **three (3) Critical Care Blocks (CCBs)** in high load health care institutions as given in the table below, with the objective of strengthening critical care infrastructure and improving preparedness for management of severe and emergency cases.

Sl. No.	Name of Institution	Proposed Capacity	Approved Cost (Rs. in crore)
1	Rajiv Gandhi Government General Hospital & MMC, Chennai	100 bedded CCB	43.18
2	Government Rajaji Hospital, Madurai	100 bedded CCB	43.18
3	Government Medical College Hospital, Kallakurichi	50 bedded CCB	25.26
	Total		**111.63**

However, the MOHFW-GOI vide reference 3rd cited, has issued approval for only two (2) Critical Care Blocks out of the three proposed, for the reason that as per the decision of the National Steering Committee meeting held on 24.09.2024, establishment of a **maximum of two CCBs in a single district is permissible**, and hence, the third CCB proposed for Chennai was not recommended, as two Critical Care Blocks have already been approved for Chennai district.

Accordingly, the approvals have been issued by Government of India for establishment of Critical Care Blocks in the following two institutions, at the cost noted against each of them, with the condition that State has to bear the recurring cost from its own budget.

Sl. No.	Name of Institution	Capacity	Approved Cost (Rs. in crore)
1	Government Rajaji Hospital, Madurai	100 bedded CCB	43.18
2	Government Medical College Hospital, Kallakurichi	50 bedded CCB	23.75
	Total		**66.93**

Further, the funds required for execution of the approved Critical Care Blocks are to be met out from the available funds under PM-ABHIM, including reappropriated and unutilized balances already permitted by the Executive Sub Committee vide ref. 1st cited.

However, instead of the pended approval for one more 100 Bedded CCB for Rajiv Gandhi Government General Hospital (RGGGH), Chennai, it is proposed to provide new buildings to Health Sub Centres that are Buildingless by utilizing the unspent funds.

As per the operational guidelines, activities approved under PMABHIM shall be implemented, adopting existing NHM procedures.

Hence, it is proposed that the civil works for the approved Critical Care Blocks could be executed through the Public Works Department.

In order to facilitate execution of the projects, it is proposed that the funds Rs.57 Crore for Civil Works may be remitted into Government Account, as per the directions issued in the Govt Orders, vide G.O. (Ms) No.116, H&FW (EAP II-2) Dept., Dt.25.03.2011. Besides, the other Infrastructure required for the CCBs have to be provided at a total cost of Rs.9.93 Crore through TNMSC / user entities, as the case may be.

In view of the above, the receipt of approval from Government of India for two Critical Care Blocks is submitted the Executive Sub Committee for information, and necessary permissions are requested, as follows.

(2/2)

DECISION POINTS:

1. The Mission Director, National Health Mission – TN, Chennai may be permitted to establish one 100 bedded Critical Care Block in Government Rajaji Hospital, Madurai and one 50 bedded Critical Care Block in Government Medical College Hospital, Kallakurichi as detailed below at the cost as noted against each of them.

Sl. No.	Name of Institution	Capacity	Civil & Electrical Works (Rs. in Lakhs)	Equipment & Furniture (Rs. in Lakhs)	Approved Cost (Rs. in Lakhs)
1	Government Rajaji Hospital, Madurai	100-bedded CCB	3700	618	4318
2	Government Medical College Hospital, Kallakurichi	50-bedded CCB	2000	375	2375
	Total		**5700**	**993**	**6693**

2. The Mission Director, National Health Mission – TN, Chennai may be permitted to execute the Civil Works through PWD at a total cost of Rs.5700 Lakh for the buildings at the rates as noted against each of them.

3. The Mission Director, National Health Mission –TN, Chennai may be permitted to supply equipment and other items through TNMSC and concerned institutions at a cost as noted against each of them.

4. The Mission Director, National Health Mission – TN, Chennai may be permitted to rationalize the supply of equipment and other items, based on gap analysis and priority of requirements on the approval of funds by Government of India.

5. The Mission Director, National Health Mission – TN, Chennai, may be permitted to remit the funds for the construction of the above facilities into Government Account for executing the civil works through PWD.

6. The Mission Director, National Health Mission – TN, Chennai may be permitted to send necessary proposals to Government for obtaining Administrative and Financial Sanction Orders.

(3/4)

7. The Mission Director, National Health Mission – TN, Chennai, may be permitted to request the user entities to provide the recurring cost for the CCBs from the State funds as stipulated by GoI.

8. The Mission Director, National Health Mission – TN, Chennai, may be permitted to address GoI for provision of new buildings to HSCs by utilizing the unspent balance funds that was earmarked for one additional 100 bedded CCB at RGGGH Chennai.

The Mission Director,
National Health Mission - Tamil Nadu,
Chennai - 600 006.

The Additional Chief Secretary to Government,
Health & Family Welfare Department,
Government of Tamil Nadu,
Secretariat, Chennai – 600 009.

The Additional Chief Secretary to Government,
Finance Department,
Government of Tamil Nadu,
Secretariat, Chennai – 600 009.

National Health Mission – Tamil Nadu

Circulation Note.No. 05 /2026 02.03.2026

Ref.No.9035/NHM/E/2021 **dt.** 07.02.2026

Sub: National Health Mission – Tamil Nadu – Revision of Base salary for contract employees working under NHM-TN – Circulation Note submitted for approval of the Subcommittee – Reg.

Read: 1. RC.No.9035/E/NHM/2021 of the Mission Director, NHM-TN, dated:26.07.2022 addressed to all Deans, JDHS and DHOs

2. Minutes of the Expert HR Committee meeting held on dt.31.01.2026

3. PIP for the year 2026-27

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This circulation note is submitted to seek approval of the Subcommittee on the proposal herein submitted for revising the existing base pay structure of contract employees working under National Health Mission – Tamil Nadu.

National Health Mission – TN functions under the administrative control of the Health Department of the State to deliver the Primary, Secondary & Tertiary health care services. About 56,000 contract employees have been engaged by the National Health Mission across the State for the purpose. The Human Resource includes Medical, Paramedical, Non-Medical and support staff cadres taken under various NHM programmes and Program Management units across the state and districts.

As per the Government of India's Guidelines issued in Record of Proceedings (RoP), States / UTs are permitted to revise the base pay based on local requirements subject to the approval of the Executive Committee.

The existing base structure for whole of contract employees was last approved by the 42nd Executive Committee and has been in effect from

01.05.2021. At the time of approval, the EC had also observed that the exercise of pay revision shall be undertaken once in every five years.

With the completion of five years since the last revision was effected and taking into account the aspects of

- Rising cost of living
- Prevailing inflation and
- Existing pay disparities across cadres

there is a sharp & practical need to revise the base pay structure for contractual employees.

This apart, NHM-TN has to place on record that in recent times, multiple representations have been received from Employees' Association and Unions seeking revision of contractual salaries to mitigate inflationary pressure and to ensure their sustained contribution and performance as NHM Contractual staff.

In addition, some sections of contractual employees have also resorted to collective protests raising demand for salary revision as one of their major agenda.

With a view to addressing the stated concerns and ensure administrative efficiency, NHM-TN constituted an Expert Committee to review and recommend a revision of base pay and the outcome is as given below:

Expert Committee's Recommendations:

The Expert Committee has submitted a base pay revision Report, in compliance with the Government of India's guidelines stipulated in the HR annexure of the RoP.

- The Committee has recommended a revision of the base pay structure, with proposed enhancements across various cadres.

- The proposed revision aligns with GoI norms with ensured fiscal prudence and administrative feasibility.

- Considering employees' welfare, staff morale and overall programme efficiency, NHM-Tamil Nadu proposes to implement the revised pay structure recommended by the Expert Committee.

- The Revised base pay structure for:
    - District Programme Management Unit (DPMU) staff and State Programme Management unit (SPMU) staff is enclosed in Annexure-I and Annexure – II, respectively.

    - The Financial implication on account of the revision is estimated to be **Rs.169.32 crore** for which a proposal was included in the State PIP for FY:2026-2027 and has been approved in principle.

Annexure – I

Revised pay structure for DPMU staff

S. NO	Category	Total No. of Posts	Current Base Pay 2021	Revised pay Fy-2026
1	Hospital Worker / Security / Cleaner / Lab Assistant / Attender	5348	8,500	11,000
2	Dental Assistant	496	13,800	16,000
3	Dental Technician	39	12,600	17,000
4	Radiographer / X Ray Technician	82	13,300	17,000
5	Driver	470	13,500	17,500
6	Tribal Counsellor	10	13,300	15,000
7	DRTB Counsellor	13	13,300	15,000
8	TB Health Visitor	424	13,300	15,000
9	OT Assistant	83	11,200	15,000
10	Lab technician	2583	13,000	17,000
11	ANM	2150	14,000	17,500
12	Health Inspector	3156	14,000	17,500
13	Ophthalmic Assistant	76	14,000	17,500
14	Pharmacist	2187	15,000	18,000
15	Physiotherapist	489	13,000	23,000
16	Staff Nurse	15170	18,000	21,000
17	MLHP	4848	18,000	21,000

S. NO	Category	Total No. of Posts	Current Base Pay 2021	Revised pay Fy-2026
18	Counsellor	658	18,000	21,000
19	MCHO - RTI	36	19,000	22,000
20	Early Intervention Cum Special Educator	39	17,000	20,000
21	Audiometric Assistant	32	17,250	20,000
22	Audiologists	65	23,000	32,000
23	Psychologist	89	23,000	27,000
24	Social Worker	83	23,800	27,000
25	Sector Health Nurse	115	25,000	27,000
26	Data Entry Operator	1203	15,500	17,500
27	Computer Assistant	32	14,500	17,500
28	Accounts Assistant	578	16,000	19,000
29	Accounts Assistant	30	20,000	23,000
30	Data Manager /System Manager RTI /Data Processing Assistant/System Analyst	118	20,000	25,000
31	IT Coordinator	133	21,000	27,500
32	Refrigeration Mechanic	32	21,000	24,000
33	Cold Chain Manager	46	23,000	26,500
34	STLS/STS / Supervisor (LAB)	609	19,800	23,000
35	Senior Lab Technician	30	25,000	27,500
36	Dental Surgeons	534	34,000	40,000
37	AYUSH Doctor	475	34,000	40,000
38	District Consultant (Tobacco)	20	35,000	40,000
39	Consultant (Quality)	38	40,000	44,000
40	Micro Biologist	45	40,000	44,000
41	Junior Microbiologist	1	40,000	44,000
42	Medical Officer - RTI	12	53,000	58,000
43	Regional Consultant - RTI	7	53,000	58,000
44	Fluorosis Consultant	1	53,000	56,000
45	Medical Officer	169	60,000	63,000
46	Epidemiologist	34	60,000	63,000
47	Medical Officer	708	60,000	63,000
48	Sr. Biologist	1	60,000	63,000
49	Administrative / Administrative Assistant	47	18,000	20,000
50	Statistical Assistant	39	26,000	29,000

S. NO	Category	Total No. of Posts	Current Base Pay 2021	Revised pay Fy-2026
51	Senior Dots plus TB - HIV Supervisor	33	26,500	29,000
52	District PPM Coordinator / Programme Coordinator/PPM/ACM Coordinator / CRS State Coordinator/RKSK	122	26,500	29,000
53	Medical Officer TB / Tribal	53	60,000	63,000
54	Consultant Training	1	43,500	47,500
55	State Leprosy Consultant	1	52,900	58,000
56	Veterinary Consultant	1	53,000	58,000
57	Public Health Manager (Entomologist @ Corporation)	10	25,000	30,000
58	Public Health Manager (GCC)	15	46,000	48,000

Revised pay structure for SPMU staff

Annexure-II

S. NO	Category	Total No. of Posts	Current Base Pay 2021	Revised pay Fy-2026
1	Office Assistant	10	13,000	15,000
2	Watchman	1	13,000	15,000
3	Record Assistant	2	15,000	16,500
4	Data Entry Operator	32	15,500	18,500
5	Driver	10	18,000	21,000
6	Tally Assistant	5	19,000	22,000
7	Accountant AYUSH	1	14,000	17,000
8	PFMS Computer	1	17,000	22,000
9	Assistant (SPMU/EMOC/IMCI/NLEP/ NPCB)	30	20,000	22,500
10	IT Coordinator	1	21,000	27,500
11	Statistical Assistant	11	28,000	30,500
12	Data Analyst	1	27,000	30,500
13	Data Manager	1	27,000	30,500
14	Superintendent	1	30,000	32,500
15	State Finance Consultant	4	35,000	40,000
16	System Manager	2	35,000	37,500
17	Designer Consultant	1	40,000	45,000

S. NO	Category	Total No. of Posts	Current Base Pay 2021	Revised pay Fy-2026
18	HRMIS Coordinator	1	40,000	43,000
19	HMIS Specialist	1	65,000	68,000
20	Data Base Administrator	1	50,000	52,500
21	Software Programmer	3	47,500	50,000
22	Server Administrator	6	40,000	42,500
23	Senior System Analysist	1	46,000	48,500
24	Consultant Secretariat	2	39,500	42,000
25	Jr.Consultant Non Medical (Probationer)	1	47,500	50,000
26	Jr.Consultant Medical (Probationer)	1	50,000	52,500
27	Jr.Consultant Non Medical	1	52,000	55,000
28	Jr.Consultant Medical	1	55,000	60,000
29	Consultant	21	57,500	62,500
30	Consultant Medical	5	60,000	65,000
31	Sr. Consultant	2	90,000	95,000
32	System Analyst - RBSK	1	18,200	23,000
33	Accountant TB	2	33,000	35,500
34	Finance Consultant - Vertical Scheme - IDSP & NLEP /Budget Officer NPCB /	3	35,000	37,500
35	Data Analyst TB	1	26,000	28,500
36	Entomologist - IDSP	1	33,000	35,500
37	Technical Officer/State PPM Coordinator/Treatment/Procurement & Logistic Officer / Monitor/State ACM Officer	6	33,000	35,500
38	Project Coordinator IMNCI/RCC	3	33,000	35,500

In light of the foregoing submissions, the Core of the Executive Committee is requested to accord approval to the following proposals.

1. The Mission Director, National Health Mission – Tamil Nadu may be permitted to enhance the base salary of all contract employees working under NHM as proposed in Annexure -I and II.

2. The Mission Director, National Health Mission – Tamil Nadu may be permitted to revise the Employees' Provident Fund (EPF) contributions of both employer and employees (existing and new enrollment) in accordance with the revised base pay.

3. The Mission Director, National Health Mission – Tamil Nadu may be permitted to accord sanction for the release of revised base salary along with the increments drawn currently bearing the cost of expenditure from ROP approved funds.

17/2/26

Mission Director,
National Health Mission –TamilNadu
Chennai – 600 006.

26

The Additional Chief Secretary to Government,
Health and Family Welfare Department,
Government of TamilNadu
Chennai -600009

Agreed subject to the condition that GoI approval & Fund sanction be obtained & w.e.f. 1.5.26 it may be implemented. No state fund shall be given except the mandated State share.

23/3/26

The Special Secretary to Government,
Finance Department,
Government of TamilNadu
Chennai – 600009

NATIONAL HEALTH MISSION – TAMIL NADU

Circulation Note No: 06/2025-26

Sub: NHM–TN- NCD – **Makkalai Thedi Maruthuvam-** Incentives for Women Health Volunteers (WHVs) - Release through TNCDW – the monthly incentive for WHVs to be enhanced from Rs. 5,500/- to Rs. 6,500/- approval of Executive Sub Committee – Requested

Ref:
1. G.O (Ms.) No. 340 Health and Family Welfare (EAP II-1) Dept dt-3.8.2021
2. G.O (Ms.) No. 393 Health and Family Welfare (EAP II-1) Dept dt-31.8.2021.
3. PIP proposal for the year 2026-27

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Background:

. As per reference 1st cited, Government has issued orders for implementing the 'Makkalai Thedi Maruthuvam' scheme with the Field level team which includes Women Health Volunteers (WHV) under PBS activity, Village Health Nurse (VHN), Mid-Level Health Provider (MLHP), Palliative Care Nurse, Physiotherapist and Health Inspector (HI) for this scheme.

This pioneering scheme was launched on 05.08.2021 in 50 UHC blocks across the State. In Corporations, the scheme was initially implemented in one zone each of Coimbatore Corporation, Tirunelveli Corporation and Greater Chennai Corporation (GCC). At present, the programme is being scaled up across the entire State of Tamil Nadu by engaging WHVs as the key field functionaries through TNCDW.

As per the reference 2nd cited, the Mission Director, NHM is permitted to engage Women Health Volunteers through self-help group network under TNCDW in all 8,713 in rural HSCs areas and 2,256 in urban areas in Tamil Nadu and also permitted to pay performance-based incentives for WHVs.

Subsequently, the incentives provided to Women Health Volunteers (WHVs) have been enhanced in a phased manner from the year 2017 onwards.

- Initially, from 24th August 2017 to 31st August 2021, WHVs were paid a performance-based incentive of ₹3,500/- per month, comprising ₹3,000/- as incentive and ₹500/- as travel support.
- Subsequently, from 1st September 2021 to 31st May 2022, the incentive was increased to ₹4,500/- per month, with an additional ₹1,000/- being provided for their performance under the MTM Scheme.
- Further, with effect from 2nd June 2022 and continuing till date, the WHVs' monthly incentive has been revised to ₹5,500/-, incorporating an additional ₹1,000/- per month paid as Team-Based Incentive.

Present Proposal

In the PIP 2026–27, the monthly incentive for WHVs has been proposed to be enhanced from Rs. 5,500/- to Rs. 6,500/-. The same was approved in the National Programme Coordination Committee meeting held on 12.02.2026. Accordingly, it is proposed to implement the revised incentive of Rs. 6,500/- per month from April 2026 for WHVs upon receipt of RoP approval for the year 2026–27.

In this regard, the annual expenditure will increase from Rs. 72.40 Crores (Rs. 5,500 × 12 × 10,969) to Rs. 85.56 Crores (Rs. 6,500 × 12 × 10,969). Thus, the total additional financial implication will be Rs. 13.16 Crores per annum, representing an increase of 18% over the existing allocation.

In this regard, the E.C - Sub – Committee may kindly approve to utilize the required amount from the approval of RoP 2026-2027.

Decision Points:

1. The Mission Director, National Health Mission, Tamil Nadu may be permitted to enhance WHVs incentive from Rs. 5,500/- to Rs. 6,500/- per month from April 2026 to 10,969 WHVs in all 8,713 in rural HSCs areas and 2,256 in urban areas in Tamil Nadu.

14/3/2026

Mission Director
National Health Mission – Tamil Nadu
Chennai -06

14/3/26

Additional Chief Secretary to Government,
Health and Family Welfare Department,
Government of Tamil Nadu,
Chennai -09

Additional Chief Secretary to Government,
Finance Department, Government of Tamil Nadu,
Chennai -09

(14/3/26)

NATIONAL HEALTH MISSION – TAMIL NADU

Circulation Note No. 07/2026

File.No.2980/P16/NHM/2021 **Dated: 13.03.2026**

Sub: NHM – TN – Blood – Equipment for Blood Centres based on gap analysis for a sum for **Rs.19,52,05,066** /- approval of the subcommittee – Requested - Reg.

Ref:
1. G.O.(Ms) No.302 H & FW (EAP II – 2) Dept dated 24.7.2018 - State Blood Policy and Implementation framework
2. Proc. No. 2980/P16/NHM/2022 dated 13.12.2024
3. Ref No 3500/TNSBTC/BS/B1/2025 dated 16.09.2025
4. Blood Committee R.No 8990122/P16/NHM/ 2022 dated 24.02.2026 (Meeting on 09.01.2026)
5. Supplementary RoP 25-26 (F.No 10(2)/2023-NHM – I / E – 8252479 / NHM – III Section) dated 2nd May 2025
6. R.No 504/K/2026 dated 05.02.2026

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Background:

Blood is a vital component for maintenance of life and timely Blood Transfusion is quintessential for saving life. In the ref 1st cited, the State of Tamil Nadu has come up with "State Blood Policy and Implementation Framework", to improve access to quality of blood transfusion services provided by blood storage centres established across the state.

The policy requires the establishment of a sufficient number of Blood Banks and Blood Storage Centres, ensuring an adequate inventory of blood and its components for universal accessibility. Regarding service provision, facilities are categorized as Blood Centres (BC), Blood Component Separator Units (BCSU) established in higher level facilities like MCH and District Hospitals and Blood Storage Units (BSU) at ground level facilities like PHCs, CHCs and SDHs. Blood Centres handle whole Blood collection, storage and transfusion, while BCSUs facilitate whole Blood collection, component separation (packed red cells, platelets, plasma, cryoprecipitate), storage and

transfusion. Blood Storage Units serve as fundamental facilities dedicated to storing whole blood and its components provided the license is obtained for the later.

In Tamil Nadu, there are a total of 99 Blood Centres (BC), 44 Blood Component Separator Units (BCSU) in the Secondary and Tertiary care centres and 264 Blood Storage Units (BSU) available in the CHCs. As per the ref 2nd cited, an expert committee was constituted for technical support and decision making on Equipment required for Blood Centres, Component Separator Units and Blood Storage Units.

Present Proposal

As per the ref 3rd cited, PD TANSACS has done a gap analysis throughout the Government Blood Centres and has requested for Equipment required for various Blood Centres across the State.

The same was placed in the Expert Committee for Blood held on 09.01.2026. The committee has recommended the procurement of Equipment through TNMSC for the strengthening of the existing Blood Centres across the State.

The amount required for the procurement of the Equipment for Blood Centres is **Rs.19,52,05,066 /- (Rupees Nineteen Crore Fifty Two Lakh Five Thousand and Sixty Six only)** through Tamil Nadu Services Corporation Limited, Chennai.

It is submitted that only Rs.1.42 Crore fund is available for the procurement of Equipment for Blood Centre / Blood Storage Unit approved in XV Finance Commission and the same has been already spent/booked for Equipment.

It is submitted that out of Rs.59.67 Crore sanctioned for Haemophilia drugs for 2025-2026 Rs.40 Crore has already been released for Haemophilia Drugs. The balance amount of Rs.19.67 Crore approved in Supplementary ROP 2025 – 2026 which was approved for Haemophilia shall be re-allocated for the procurement of Equipment required for the Government Blood Centres based on gap analysis.

Decision Points:

1) The Mission Director NHM may be permitted to release the sum of **Rs.19,52,05,066/-** to TNMSC towards the procurement of the Equipment for Blood Centres as per the list in the Annexure -I.
2) The Mission Director NHM may be permitted to utilize the amount of **Rs.19,52,05,066/-** from the Haemophilia Drug budget approved in Supplementary ROP FMR Code **(HSS.2.154.B-6.2.7.1-B.35.10.1)** of 2025 – 2026 towards the procurement of Equipment required for the Government Blood Centres based on gap analysis.

Enclosure: (i) Annexure – I – Abstract of Equipment
(ii) Annexure II – List of the facilities vs Equipment required

Mission Director,
National Health Mission-TN,
Chennai – 06

Additional Chief Secretary to Government, 13/3/26
Health and Family Welfare Department,
Secretariat,
Chennai -09

13/3/26

The Special Secretary to Government,
Finance Department,
Secretariat,
Chennai -09 (13/3/26)

Annexure – I (Abstract list of Equipment)

Equipment for Blood Centre based on gap analysis							
S. No	Equipment	No of Equipment	Price of Equipment	GST %	GST (in Rs)	Equipment +GST	Total cost (in Rs.)
1	DONOR COUCH	61	2,30,600	18%	41,508	2,72,108	1,65,98,588
2	BLOOD COLLECTION MONITOR	98	1,04,300	5%	5,215	1,09,515	1,07,32,470
3	TUBE SEALER	53	1,38,680	5%	6,934	1,45,614	77,17,542
4	BLOOD BANK REFRIGERATOR-600L	31	3,04,920	18%	54,885.60	3,59,805.60	1,11,53,973.60
5	DEEP FREEZER-40	10	3,00,000	18%	54,000	3,54,000	35,40,000
5	DEEP FREEZER-80	14	6,50,000	18%	1,17,000	7,67,000	1,07,38,000
6	REFRIGERATED CENTRIFUGE	14	30,33,492	18%	5,46,028.56	35,79,520.56	5,01,13,287.84
7	PLATELET INCUBATOR WITH AGITATOR	27	4,33,171	5%	21,658.55	4,54,829.55	1,22,80,397.85
8	ELISA READER	40	91,000	5%	4,550	95,550	38,22,000
	ELISA WASHER	40	89,000	5%	4,450	93,450	37,38,000
9	PLASMA THAWING BATH	9	1,56,729	5%	7,836.45	1,64,565.45	14,81,089.05
10	VDRL ROTATOR	19	19,940	18%	3,589.20	23,529.20	4,47,054.80
11	STERILE CONNECTING DEVICE	35	15,61,433	5%	78,071.65	16,39,504.65	5,73,82,662.75
12	CELL SEPARATOR	1	52,00,000	5%	2,60,000	54,60,000	54,60,000
					TOTAL	1,35,18,992.01	19,52,05,065.89

NATIONAL HEALTH MISSION – TAMIL NADU

Circulation Note No. 9/2026

R.No. 14190221/P5/NHM/2026, dt. 17-06-2026

Sub: NHM–Tamil Nadu – Financial Assistance to States/UTs for Public Health Infrastructure during FY 2026-27 – Incentive Assistance eligible to Tamil Nadu under the notified performance indicators- Claim Proposal submitted to Government of India – Approval of Project Proposals for utilization of Incentive Assistance – Approval of Executive Sub Committee – Requested – Reg.

Ref:
1. F.No.44(2)/PF-S/2026-27 (HSNS), Department of Expenditure, Ministry of Finance, Government of India, dated 25.03.2026.
2. F.No.2.28015/9/2026-NHM-I, Ministry of Health & Family Welfare, Government of India, dated 27.05.2026.
3. Claim Proposal submitted by National Health Mission, Tamil Nadu vide R.No.14190221/P5/NHM/2026, dated 02.06.2026.

*****

The Ministry of Health and Family Welfare, Government of India, has issued guidelines for providing Financial Assistance to States/UTs for strengthening Public Health Infrastructure during FY 2026-27 vide reference 2nd cited. Under the scheme, incentive assistance is admissible to States and Union Territories achieving specified improvements in key health system performance indicators.

As per the guidelines, incentive assistance is intended to support strengthening of public health infrastructure with emphasis on capital investments, infrastructure creation, equipment augmentation and health systems strengthening interventions that result in long-term improvements in service delivery capacity.

Tamil Nadu has consistently demonstrated significant improvements across key health indicators and has achieved the prescribed performance benchmarks under all the four indicators notified by Government of India, namely:

i. Infant Mortality Rate (IMR)

ii. Maternal Mortality Ratio (MMR)

iii. Tuberculosis Mortality Reduction

iv. National Quality Assurance Standards (NQAS) Certification

Based on the performance achieved during the reference period, Tamil Nadu has become eligible for incentive assistance amounting to Rs.450.00 Crore.

Accordingly, the claim proposal of the Government of Tamil Nadu was submitted to the Government of India by the Mission Director, National Health Mission, Tamil Nadu vide reference 3rd cited on 02.06.2026 requesting sanction and release of the eligible incentive assistance.

The details of the claim submitted are furnished below:

Indicator	Achievement by Tamil Nadu	Incentive Amount (Rs. in Crore)	Source
Infant Mortality Rate (IMR)	Reduction from 12 (SRS 2023) to 11 (SRS 2024)	50	SRS 2022-24
Maternal Mortality Ratio (MMR)	Reduction from 35 (SRS 2023) to 25 (SRS 2024)	100	SRS 2022-24
TB Mortality Rate	Reduction from 7.38% to 4.91% (2.47% reduction)	100	NIKSHAY
NQAS Certification	Total Facilities – 7,802; Certified in 2023 – 1,310 (16.8%); Certified in 2024 – 3,333 (42.72%); Increase – 25.93%	200	NQAS Records
TOTAL		**450**	

The Government of India has stipulated that States shall submit a list of approved projects for utilization of the incentive assistance before 30th June 2026. Accordingly, National Health Mission, Tamil Nadu has undertaken a comprehensive assessment of infrastructure gaps, service delivery requirements, disease burden priorities and strategic health system strengthening needs across the State.

Based on the assessment, a comprehensive proposal has been developed with a total project outlay of Rs.493.16 Crore. The proposal has been structured to maximize long-term public health impact through investments in infrastructure creation, advanced medical equipment, emergency preparedness, critical care services, cancer care, tuberculosis control, maternal and child health services and quality improvement initiatives.

The proposal has been designed in alignment with the Government of India guidelines, with emphasis on capital infrastructure creation and strengthening of public health institutions.

The thematic investment framework proposed is summarized below:

Sl. No.	Thematic Mission	Amount (Rs. Crore)
1	Comprehensive Oncology Access: Cancer Care Strengthening Initiative	103.20
2	Emergency Care Readiness Mission	106.50
3	Critical Care Readiness and Blood Services Strengthening	67.24
4	End TB Tamil Nadu Initiative	80.10
5	Healthy Beginnings: Child Survival and Neonatal Care Strengthening Initiative	45.50
6	FRU Strengthening and Emergency Obstetric Response Mission	65.25
7	Future Ready Health Systems for Quality Healthcare	25.37
TOTAL		**493.16**

The detailed list of interventions proposed under each thematic mission is enclosed in Annexure.

Considering the importance of securing the eligible incentive assistance from Government of India and the substantial public health benefits expected through the proposed investments, the matter is placed before the Executive Sub Committee for approval.

DECISION POINTS

1. The Executive Sub Committee may ratify the submission of the claim proposal made by National Health Mission, Tamil Nadu to the Government of India vide R.No.14190221/P5/NHM/2026 dated 02.06.2026 for availing incentive assistance of Rs.450.00 Crore.
2. The Executive Sub Committee may approve the proposed investment framework amounting to Rs.493.16 Crore for strengthening public health infrastructure in Tamil Nadu as detailed in Annexure.
3. The Executive Sub Committee may approve submission of the approved project proposals to the Ministry of Health and Family Welfare, Government of India for consideration under the scheme.

4. The Executive Sub Committee may authorize the Mission Director, National Health Mission – Tamil Nadu, to undertake modifications, rationalization, reprioritization or reallocation among approved components as may be required during appraisal by Government of India, without altering the overall objectives of the proposal.

Mission Director
National Health Mission – Tamil Nadu
Chennai – 600 006

Secretary to Government
Health & Family Welfare Department
Government of Tamil Nadu
Chennai – 600 009.

Additional Chief Secretary to the Government,
Finance Department,
Government of Tamil Nadu
Chennai – 600 009.

Annexure – V

Record of Proceedings for FY 2026-27

MINISTRY OF HEALTH
AND
FAMILY WELFARE

RECORD OF PROCEEDING - FY 2026-27

State/UT: Tamil Nadu

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)

सत्यमेव जयते

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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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.M-11011/12016-NHM-III

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

Kartavya Bhawan I, New Delhi
Dated: 19th June 2026

To,

Dr. S. Aneesh Sekhar, IAS,
Mission Director, (NHM),
Department of Health & Family Welfare,
Government of Tamil Nadu,
No.359, Anna Salai, 5th Floor, DMS Annex Building,
Teynampet, Chennai-600006.

Subject: Approval of NHM State Programme Implementation Plan for the State/UT of Tamil Nadu for the FY 2026-27.

Ma'am/Sir,

This refers to the Programme Implementation Plan (PIP) for FY 2026-27 submitted by the State/UT of **Tamil Nadu** and subsequent discussions in the NPCC meeting held on **12th February 2026** at Kartavya Bhawan I, New Delhi.

Administrative approval is hereby accorded for an amount of **Rs.3930.68** Crore against a Resource Envelope of **Rs.2900.31 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):

Sr. No	Particulars	FY 2026-27
A.	GoI Support (Flexible Pool for RCH & Health System Strengthening, National Health Programme and Urban IIealth Mission under National Health Mission including Cash and Kind)	1363.70
B.	GoI Support for Incentive Pool based on previous year performance (assuming no incentive/ reduction on account of performance)	145.51
C.	GoI Support (Infrastructure Maintenance)	230.98
D.	GoI Support (Immunization Kind Grants)	423.06
E.	Total GoI Support (A + B + C)	1740.18
F.	State Share (40% / 10%)	1160.12
G.	Total Resource Envelope (D + E)	2900.31
	Note: Unspent balances will NOT be carried forward (SNA SPARSH)	

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

Sr.no	Particulars	FY 2026-27
A.	Total GoI Allocation	1740.18
B.	Proportionate State Matching Share (40% / 10%)	1160.12
C.	Total Allocation (a + b)	2900.31
D.	Less: GoI support - Infrastructure Maintenance	230.98
E.	Less: (Kind Grants)	423.06
F.	Eligible amount for fresh approval other than IM and Immunization Kind Grant (c – d – e)	2246.27
G.	Permissible Limit (1.25 times of above)	2807.84
D.	Add: Infrastructure Maintenance (IM)	230.98
E.	Add: (Kind Grants)	423.06
H.	Maximum Permissible Resource Envelope (g + d + e)	3461.87

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 7.7. 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 approved 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,

Dr. Saroj Kumar
Director (NHM- III)

Annexure 1: SDG & Disease Elimination Targets Plan

States and UTs are required to complete this annexure to report on progress toward SDG 3 targets and national disease elimination goals, and to outline short-term and long-term strategies for improvement.

Section A: SDG Health Indicator Progress

Sl.	SDG / Health Indicator	SDG 2030 Target	National status (NFHS-6/SRS 22-24)	State Current Status (NFHS-6/SRS 23-24)
1	Maternal Mortality Ratio (MMR) per 1,00,000 LB	< 70	87	25
2	Neonatal Mortality Rate (NMR) per 1,000 LB	≤ 12	18	5
3	Under-5 Mortality Rate (U5MR) per 1,000 LB	≤ 25	28	14
4	Full Immunization Coverage (%)	≥ 90 %	82.6%	89.7
5	Reduction in premature mortality from Non-Communicable Diseases through prevention, treatment, and promotion.	30% Reduction	-	-

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-171 Mortality-22	• 100% coverage of screening among vulnerable populations annually • X-ray examination among all symptomatic and asymptomatic vulnerable populations needs to be improved • Sustain upfront NAAT testing for all identified presumptive cases (symptomatic / X-ray abnormal & suggestive of TB) • 100% assessment of all notified TB patients for differentiated TB care and intensified care & management of all high-risk TB cases • 100% coverage of TB Preventive treatment to all eligible household

Sl.	Disease Elimination Programme	National Target (Year)	State Status	Key Gap
				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)-0.004	• 15 reporting units across 5 districts (Chennai, Perambalur, Thiruvarur, Thrippur and Tuticorin) have "Never Reported" on IHIP in 2025. State to ensure reporting on IHIP
3	Lymphatic Filariasis Elimination	2027	100% (25/25) endemic districts <1 Mf rate	0%
4	Kala-Azar Elimination (<1case/10,000 pop.)	2023 (ongoing)	NA	NA
5	Leprosy Elimination (<1case/10,000 pop.)	Sustained	State of Tamil Nadu has achieved elimination Status (i.e PR<1case/10,000 pop) Tamil Nadu PR-0.30	-
6	Viral Hepatitis Elimination (B & C)	2030	-	-
7	Sickle Cell Disease Elimination Mission	2047	98.83	Prioritise screening for sickle cell disease in districts/ blocks where high prevalence of sickle cell disease and traits has been detected. All individuals detected with sickle cell disease are to be put on the treatment/follow-up portal in the sickle cell module to enable continuity of care. Sickle cell cards to be issued to all sickle cell diseased and traits.

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 in 1st trimester of pregnancy (within12 weeks)	% of PW registered for ANC in 1st trimester Numerator: Total number of PW registered in 1st Trimester Denominator: Total number of PW registered for ANC	Percentage	HMIS	90%
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	At least 15%
3	Output	Maternal Health	Maternal death review mechanism	% of maternal deaths reviewed against the reported maternal deaths. Numerator: Total no. of maternal deaths reviewed Denominator: Total no. of maternal deaths reported	Percentage	IIMIS	100%
4	Output	Child Health	SNCU successful discharge rate	SNCU successful discharge rate out of total admission (%) Numerator: No. of sick and small newborns	Percentage	FBNC MIS Online Portal	>90%

Sl No.	Indicator Type	Division	Indicator Statement	Indicator	Unit	Source of data	Target for FY 2026-27
				discharged successfully (Unsuccessful denotes Death, LAMA and referral) Denominator: Total no. of sick newborns admitted in SNCUs			
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% (8413 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	<5 Per 1000 Births
7	Output	Child Health (RBSK)	Screening of Children in Government & Government aided schools and Anganwadi Centre	Percentage of children screened and managed by RBSK MHTs Numerator: Number of Children in Government & Government aided schools	Percentage	Quarterly State Report	100% 0-6 Years 2 Visit - (65,50,452) 6-18 Years (77,13,476)

Sl No.	Indicator Type	Division	Indicator Statement	Indicator	Unit	Source of data	Target for FY 2026-27
				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	Output	Child Health (RBSK)	Secondary/ Tertiary management of Conditions specified under RBSK	Number of beneficiaries received Secondary/ Tertiary management against RoP approval (for surgical intervention specified under RBSK).	Nos.	Quarterly State Report	3000
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	Percentage	HMIS	>95%

Sl No.	Indicator Type	Division	Indicator Statement	Indicator	Unit	Source of data	Target for FY 2026-27
				children under one year of age			
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	75%
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	95%
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 MHT, using	Percentage	RBSK dashboard U-WIN	50%

Sl No.	Indicator Type	Division	Indicator Statement	Indicator	Unit	Source of data	Target for FY 2026-27
				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	Percentage	CAC Annual & Quarterly Report	• District Hospital, CHCs (FRUs) & Other Sub District Level Hospitals and above: 100% • Non FRU CHCs & 24*7 PHCs: 50% • Other PHCs: 40% 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
				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			
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	100
16	Output	Adolescent Health	Ayushman Bharat	Percentage of Health &	Percentage	State reports	

Sl No.	Indicator Type	Division	Indicator Statement	Indicator	Unit	Source of data	Target for FY 2026-27
			School Health & Wellness Programme implementation	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			95%
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)	Couple Protection Rate (CPR) for modern methods (Spacing methods + Limiting methods) Numerator: Estimated Number of Couples protected by modern contraceptives	Percentage	Numerator: HMIS/Janani portal Denominator: TGPP report-2020	27 %

Sl No.	Indicator Type	Division	Indicator Statement	Indicator	Unit	Source of data	Target for FY 2026-27
				Denominator: Total No. of Currently Married Women of Reproductive Age Group (15-49 years age group) Base Year: 2025			
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	>90%
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%
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	>90%
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% (2000)

Sl No.	Indicator Type	Division	Indicator Statement	Indicator	Unit	Source of data	Target for FY 2026-27
23	Output	National Viral Hepatitis Control Programme (NVHCP)	Management of Hepatitis B –under the program	Percentage of Hepatitis B Patients benefited i.e. number who received treatment against target	Percentage	NVHCP MIS Portal	100% (2725)
24	Outcome	Integrated Disease Surveillance Programme (IDSP)	Improved Capacity of Districts to detect and respond disease outbreaks	Reporting % of P form	Percentage	IDSP IHIP	92%
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	38
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	38
27	Output	National Vector Borne Disease Control programme (NVBDCP)	Malaria Reduction in API at District level	Annual blood Examination Rate (ABER) *ABER= Number of Blood smear/Rapid Diagnostic Test examined in a year x 100 / total population	Percentage	MES report, NVBDCP	>10%
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	<1%

Sl No.	Indicator Type	Division	Indicator Statement	Indicator	Unit	Source of data	Target for FY 2026-27
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	<1%
32	Output	National Rabies Control Program (NRCP)	Availability of Anti-Rabies Vaccine (ARV) and Anti- Rabies Serum (ARS) both till PHC level Health facilities	ARV available at the Health Facilities as per Essential Medical List Numerator- Total No. of Health Facility till PHC level having stocks of ARV and ARS both (Source- DVDMS Portal/State Monthly report) Denominator- Total No. of Health Facilities till PHC level (Source- Rural Health Statistic- MoHFW)	Percentage	DVDMS Portal/State Monthly report Rural Health Statistic- MoHFW)	100%
33	Output	Program for Prevention and Control of Leptospirosis (PPCL)	Suspected Leptospirosis cases tested in the state endemic for leptospirosis	Percentage of suspected Leptospirosis cases tested (screened and confirmed) in the state as per PPCL guidelines Numerator: Number of suspected Leptospirosis cases that were	Percentage	State Monthly Report	90%

Sl No.	Indicator Type	Division	Indicator Statement	Indicator	Unit	Source of data	Target for FY 2026-27
				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			
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 PIIC 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	NA
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	Percentage	State Report	50%

Sl No.	Indicator Type	Division	Indicator Statement	Indicator	Unit	Source of data	Target for FY 2026-27
				districts in the State			
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: **30,52,300** hypertensive individuals under control which is 25% of the estimated hypertension prevalence of 1,22,09,200)*
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: **30,23,175** Diabetic individuals under control which is 25% of the estimated Diabetes prevalence of 1,20,92,700)*
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 number of people 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	State/HMIS Report	5%

Sl No.	Indicator 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	11500
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	3,50,000
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 HD patients from previous year
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	Target – 6,822 5% increase in the number of children examined from FY 2025-26
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	20250
46	Output	National Programme for Health Care of Elderly (NPHCE)	Provision of primary and secondary Geriatric healthcare services at District Hospital and below	Number of older persons (=/>60 years of age) availing services at DH and CHC	Number	HMIS	20,00,000

Sl No.	Indicator Type	Division	Indicator Statement	Indicator	Unit	Source of data	Target for FY 2026-27
47	Output	National Programme for Palliative Care (NPPC)	Palliative care services	Number of beneficiaries availing palliative services from DH	Number	HMIS	1,00,000
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 ycar) x100	Percentage	AAM Portal/ HMIS Portal	5%
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	Percentage	DVDMS Central Dashboard	70%

Sl No.	Indicator Type	Division	Indicator Statement	Indicator	Unit	Source of data	Target for FY 2026-27
				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			
51	Output	Free Diagnostic Service Initiative	Diagnostic Tests Availability in Aspirational blocks	Percentage of aspirational block provided with free lab diagnostic services (Calculated as total number of aspirational blocks providing free lab diagnostic services divided by the total number of aspirational blocks operational X 100	Percentage	ODK Tool Kit	100%
52	Output	Blood Services & Disorders	Treatment to individuals with Sickle Cell Disease	% of diseased patients on Treatment Numerator: Total Number of individuals with Sickle Cell Disease put on Treatment in the State/UT. Denominator: Individuals confirmed with Sickle Cell Disease in the State/UT.	Percentage	Sickle Cell Portal (Follow up module)	100%

Sl No.	Indicator Type	Division	Indicator Statement	Indicator	Unit	Source of data	Target for FY 2026-27
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	Percentage	AAM Portal	80%

Sl No.	Indicator Type	Division	Indicator Statement	Indicator	Unit	Source of data	Target for FY 2026-27
				- 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)			
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	10%
57	Output	Human Resource for IIealth	HRH Availability as per IPIIS	% 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	Percentage	NHSRC HRH Division	1.MPW (Male +Female): 100% 2.Staff Nurses: 70% 3.Lab Technicians: 90% 4.Pharmacists: 90% 5.Medical Officer- MBBS: 80% 6.Clinical Specialists: 90%

Sl No.	Indicator Type	Division	Indicator Statement	Indicator	Unit	Source of data	Target for FY 2026-27
				been outsourced) 4. Pharmacists 5. Medical Officer-MBBS 6. Clinical specialists			
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	o Audiologist at DH: 95% o Dentist up to CHC: 85% o Physiotherapist up to CHC: 85% o Radiographer up to CHC: 100% o Clinical Psychologist up to CHC: 35% o Entomologist at District Level: 100%
59	Output	Human Resource for Health	HRH Training	% of the trainings program conducted against total trainings approved in ROP	Number	State Report	60%
60	Output	Biomedical equipment Management & Maintenance Program (BEMMP)	Equipment CAMC/AMC	% of Equipment Covered under Comprehensive Maintenance Contract/ Annual Maintenance Contract/ BEMMP Calculated as total number of equipment covered under	Percentage	BEMMP Dashboard/ State Equipment Inventory Software (e-upkaran)	100%

Sl No.	Indicator Type	Division	Indicator Statement	Indicator	Unit	Source of data	Target for FY 2026-27
				CMC/AMC divided by total number of equipment available at The facility(Average of all Facilities in percentage)			
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	Percentage	State Progress Report	1. 50% of District Hospitals 2. 50% of District Hospitals

Sl No.	Indicator Type	Division	Indicator Statement	Indicator	Unit	Source of data	Target for FY 2026-27
				Cities recording AQI >200 Denominator (Second part)- Number of DH in the cities where AQI > 200			
63	Outcome	Public Health Infrastructure	IPHS compliance	%Of healthcare facilities achieved IPHS compliance.	Percentage	IPHS Dashboard	100%
64	Output	Public Health Infrastructure	National Ambulance Services	Average No. of Patients Transferred Per Month Per ambulance	Number	State Report	150
65	Output	Public Health Infrastructure	MMU	Average No. of camps held per MMU and average footfall per Camp	Numbers	State Report	Av. camps per MMU/month- 44 Average footfall/day - 70

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**	<u>Total Calls</u> 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 - USH C	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 Opcrational 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 - USH C	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 - USH C	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,

9.12.25

(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

Budget Summary

Budget Approved under NHM	(in lakhs)	
	NHM	NUHM
Service Delivery (SD) HRH	84,589.52	13,341.00
Programme Management (PM) HRH	4,388.98	270.00
Budget for Data Entry Operation (DEO)	1,831.06	372.30
Budget for engaging support services on outsource basis/ Support Staff at facility level (SS-F)	6,613.96	1,789.93
Budget for engaging support services on outsource basis/ Support Staff in Offices (SS-O)	109.68	-
Annual Increment and Rationalization budget for SD and SS-F	6,522.54	998.86
Annual Increment and Rationalization budget for PM, DEO and SS-O	534.47	47.95
EPF* for SD and SS-F	2,692.09	689.44
EPF* for PM, DEO and SS-O	301.18	13.18
Sub Total	**1,07,583.48**	**17,522.66**
CHO	10,911.42	
Annual Increment and Rationalisation budget for CHO ongoing positions	-	
Sub Total	**10,911.42**	
Total Budget	**1,18,494.90**	**17,522.66**

** (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	Ongoing Posts FY 2025-26	New Posts FY 2026-27	Total No. of Approved Posts FY 2026-27
		(a)	(b)	(c=a+b)
S. No. 185 and 187 – HSS Rural				
Service Delivery/Training/Others				
8.1.1.1	ANMs	675	25	700
8.1.1.2	Staff Nurse	10618	1746	12364
8.1.1.3.1	Psychiatric Nurses	226		226
8.1.1.3.2	Staff Nurse	382		382
8.1.1.3.3	Mentor Staff Nurse	192		192
8.1.1.4	Supervisory Health Nurse	223		223
8.1.1.5.1	Lab technician	1208	4	1212
8.1.1.5.2	Sr. Lab technician	426		426
8.1.1.7	Lab Technician (Pathology)	10		10
8.1.1.8	Pharmacists	520		520
8.1.1.9	Radiographers	299		299
8.1.1.10	Physiotherapist	65	6	71
8.1.2.1	OBGY	238		238
8.1.2.1	EmOC Trained	138		138
8.1.2.2	Paediatricians	142		142
8.1.2.3	Anaesthetists	161		161
8.1.2.4	Surgeons	179		179
8.1.2.5	Radiologists	18		18
8.1.2.6	Pathologists	14		14
8.1.3.1	Consultant medicine/ Physician	64	8	72
8.1.3.2	Psychiatrists	109	7	116
8.1.4.1	Dental Surgeons	3		3
8.1.4.2	Dentist	506		506
8.1.4.3.3	Dental assistant	506		506
	Dental Hygienist	2		2
	Dental Technician	2		2
8.1.5	Medical Officers	2099		2099
8.1.6.1	Medical Officers AYUSH	475		475
8.1.6.2	Pharmacist - AYUSH	444		444
8.1.6.2	Therapeutic Assistant	31		31
8.1.7.1.2	MBBS Medical Officer - RBSK	803		803
8.1.7.1.3	Staff Nurse - RBSK	403		403
8.1.7.1.4	ANM - RBSK	385		385
8.1.7.1.5	Pharmacists - RBSK	788		788
8.1.7.2.1	Paediatricians	39	2	41
8.1.7.2.2	MO, MBBS	39		39
8.1.7.2.3	MO, Dental	39	1	40
8.1.7.2.4	Staff Nurses	26		26

Old FMR	Name of Post	Ongoing Posts FY 2025-26	New Posts FY 2026-27	Total No. of Approved Posts FY 2026-27
		(a)	(b)	(c=a+b)
8.1.7.2.5	Physiotherapist	39	1	40
8.1.7.2.6	Audiologist & speech therapist	39	1	40
8.1.7.2.7	Psychologist	39	1	40
8.1.7.2.8	Optometrist	39	1	40
8.1.7.2.9	Early Interventionist cum special educator	39	1	40
8.1.7.2.11	Lab technician	39	1	40
8.1.7.2.12	Dental technician	39	1	40
8.1.8.2	Staff Nurse	44	21	65
8.1.8.5	Feeding Demonstrator	11		11
8.1.9.2	Medical Officers for SNCU	125		125
8.1.9.3	Staff Nurse	1569	37	1606
8.1.9.4	SN CLMC (MC/DH)	20		20
8.1.9.5	SN LMU (DH/SDH/CHC)	16		16
8.1.11.1	Medical Officers (Tribal MMU)	415	1	416
8.1.11.2	Staff Nurse/ ANM (Tribal MMU)	415	1	416
8.1.11.4	Lab technician (Tribal MMU)	415	1	416
8.1.13.1	Counsellor	679	147	826
8.1.13.2	Psychologist	75	45	120
8.1.13.4	Microbiologists	45		45
8.1.13.5	Audiologist	31		31
8.1.13.6	Community health worker/ Multi rehab worker	37		37
8.1.13.7	Rehabilitation Therapist	385		385
8.1.13.8	Social Worker	160	2	162
8.1.13.10	TBHV	428		428
8.1.13.12	OT Assistant	82		82
8.1.13.16	Ophthalmic asst	32		32
8.1.13.18	Audiometric Assistant	31		31
8.1.13.19	Instructor for Hearing Impaired/ Speech Therapist	31		31
8.1.13.22	Health Inspector for HWC	4848		4848
8.1.14.1	Pathologists	10		10
8.1.14.2	Staff Nurse	10		10
8.1.14.4	Blood Bank technician	27		27
8.1.14.5	Component Lab technician	4		4
8.1.15.7	Case Registry Asst.	37		37
8.1.16.2	Refrigerator Mechanic	32		32
9.1.4.1	Nursing Mentor Tutor	2		2
9.1.4.2	Medical Officer	12		12
9.1.4.2	Maternal and Child Health Officer (MCHO)	32		32
14.1.1.2	Pharmacist DWH	17		17
14.1.1.2	Store Assistant (SDS)	3		3

Old FMR	Name of Post	Ongoing Posts FY 2025-26	New Posts FY 2026-27	Total No. of Approved Posts FY 2026-27
		(a)	(b)	(c=a+b)
16.4.1.3.7	Bio Medical Engineer	1		1
16.4.1.4.1	Asst Programme Officer/Epidemiologist	1		1
16.4.1.4.2	State Epidemiologist	1		1
16.4.1.4.2	State Microbiologist	1		1
16.4.1.4.2	State Entomologist	1		1
16.4.1.5.1	Epidemiologist	1		1
16.4.2.2.1	District Epidemiologists	38		38
16.4.2.3.1	Epidemiologist/ Public Health specialist	38		38
16.4.1.4.2	State Veterinary Consultant	1		1
16.4.3.2.6	Sr Treatment Supervisor (STS)	462		462
CHO/MLHP				
8.1.12.1	CHO/MLHP	7291		7291
Support Services – Facility Level				
8.1.6.3	Support Staff	Lump sum (475)		Lump sum (475)
8.1.8.3	Cook/Caretaker for NRC	Lump sum (11)	Lump sum (7)	Lump sum (18)
8.1.8.6	Hospital workers	Lump sum (25)		Lump sum (25)
8.1.9.6	Hospital workers/ MPHW	Lump sum (546)		Lump sum (546)
8.1.11.5	Driver & Attendants	Lump sum (810)		Lump sum (810)
8.1.13.11	Lab Attendant	Lump sum (49)		Lump sum (49)
8.1.14.3	Support Staff	Lump sum (10)		Lump sum (10)
8.1.15.12.1	Driver	Lump sum (24)	Lump sum (1)	Lump sum (25)
8.1.16.1	Hospital Attendants	Lump sum (2431)	Lump sum (65)	Lump sum (2496)
8.1.16.4	Security Guard	Lump sum (227)		Lump sum (227)
8.1.16.7	Support Staff	Lump sum (278)		Lump sum (278)
9.1.4.2	Lab Attendant	Lump sum (1)		Lump sum (1)
Programme Management				
9.1.4.1	Programme Coordinator	1		1
9.1.4.2	Statistical Assistant	6		6
9.1.4.2	System Managers	13		13
9.1.4.2	Training Supervisor	1		1
9.1.4.2	Lab Supervisor	1		1
16.4.1.1	JD, DD, CAO and MO	17		17
16.4.1.1	Accounts Officer	2		2
16.4.1.1	Asst Accounts Officer	1		1
16.4.1.1	Additional Director-Finance & Accounts	1		1
16.4.1.1	HR Manager	1		1
16.4.1.3.1	State Programme Manager	1		1
16.4.1.3.1	State Finance Manager	1		1
16.4.1.3.1	CRS Programme Manager	1		1
16.4.1.3.1	State Data Manager	1		1

Old FMR	Name of Post	Ongoing Posts FY 2025-26	New Posts FY 2026-27	Total No. of Approved Posts FY 2026-27
		(a)	(b)	(c=a+b)
16.4.1.3.1	SNCU data manager	1		1
16.4.1.3.1	CRS Data Manager	2		2
16.4.1.3.2	Consultants	25		25
16.4.1.3.2	QA State Consultant	3		3
16.4.1.3.2	QA Regional Consultant	7		7
16.4.1.3.2	RBSK Consultant	2		2
16.4.1.3.2	IT Coordinator	1		1
16.4.1.3.2	Technical Supervisors (State Blood Cell)	2		2
16.4.1.3.2	Secretariat	1		1
16.4.1.3.2	NIDDCP Technical Officer	2		2
16.4.1.3.2	IMNCI /RCC Pro Coordinator	2		2
16.4.1.3.2	HWC Consultant	2		2
16.4.1.3.2	TAEI Consultants	3		3
16.4.1.3.2	State HRMIS Coordinator	1		1
16.4.1.3.2	State EPF & ESI coordinator	1		1
16.4.1.3.2	AEFI Consultant	1		1
16.4.1.3.4	Programme Assistants	20		20
16.4.1.3.4	Tally Assistant	4		4
16.4.1.3.4	Statistical Assistant	4		4
16.4.1.3.4	Field Auditors	7		7
16.4.1.3.4	SNCU Clinical Care Auditor	1		1
16.4.1.3.4	TAEI Assistant	2		2
16.4.1.3.4	Assistant for Hepatitis programme	2		2
16.4.1.3.4	Programme Assistants (QA)	8		8
16.4.1.3.5	SPM IMNCI cell	1		1
16.4.1.3.5	State Coordinator for Blood Cell	1		1
16.4.1.3.5	State RKSK Coordinator	1		1
16.4.1.3.5	State Blood Bank Coordinator	1		1
16.4.1.3.5	Nursing Coordinator RCC	1		1
16.4.1.3.6	IT Support at state level	Lump sum (20)		Lump sum (20)
16.4.1.3.8	Accounts officer	4		4
16.4.1.3.8	Consultant CPSM	1		1
16.4.1.3.8	Assistant Accounts officer	1		1
16.4.1.3.8	Superintendent	1		1
16.4.1.3.8	Accountant	1		1
16.4.1.3.8	Accounts officer	1		1
16.4.1.3.8	Accounts assistant	4		4
16.4.1.3.12	Medical Officer	1		1
16.4.1.3.12	Medical Officer	2		2
16.4.1.3.12	Statistical Assistant	1		1
16.4.1.3.12	Additional Director (Universal Health Coverage)	1		1

Old FMR	Name of Post	Ongoing Posts FY 2025-26	New Posts FY 2026-27	Total No. of Approved Posts FY 2026-27
		(a)	(b)	(c=a+b)
16.4.1.3.12	Assistant Director	1		1
16.4.1.3.12	MCH Officer with B.Sc. (Nursing) qualification	1		1
16.4.1.3.12	Statistical Assistant	3		3
16.4.1.3.12	Senior Project Officer EVIN	1		1
16.4.1.4.1	Technical Officer – Procurement & Logistics	1		1
16.4.1.4.1	State ACSM Officer	1		1
16.4.1.4.1	Climate Change Consultant	2		2
16.4.1.4.1	Medical Officer	1		1
16.4.1.4.2	State Leprosy Consultant	1		1
16.4.1.4.2	State Consultant (Training)	1		1
16.4.1.4.3	NLEP Assistant	1		1
16.4.1.4.4	DRTB Coordinator	1		1
16.4.1.4.4	TB/HIV Coordinator	1		1
16.4.1.4.4	Treatment Monitor TB	1		1
16.4.1.4.4	State PPM Coordinator	1		1
16.4.1.4.5	State level-Data Analyst	1		1
16.4.1.4.5	State Data Manager	1		1
16.4.1.4.7	State Consultant (Finance/Procurement) IDSP	2		2
16.4.1.4.7	BFO cum Admn. Officer NLEP	1		1
16.4.1.4.7	Accounts Officer /State Accountant RNTCP	2		2
16.4.1.4.8	Secretarial Assistant RNTCP	1		1
16.4.1.5.2	Consultant (NPPCD)	1		1
16.4.1.5.2	Consultant (NPPC)	1		1
16.4.1.5.2	State Consultant (NTCP)	1		1
16.4.1.5.2	Legal Consultant/ Finance Consultant	1		1
16.4.1.5.3	Programme Assistant	3		3
16.4.1.5.4	State Programme coordinator	1		1
16.4.1.5.7	Finance cum logistics consultant	1		1
16.4.1.5.7	Budget and Finance Officer	1		1
16.4.2.1.1	DEIC Manager (31 for Revenue Districts and 3 for Chennai Corporation)	39	1	40
16.4.2.1.1	Hospital Manager/ Quality Manager	114		114
16.4.2.1.1	DPM	37		37
16.4.2.1.1	DAM	37		37
	District Consultant - NCD	18		18
16.4.2.1.1	Cold Chain Manager EVIN	46		46
16.4.2.1.1	Project Officer EVIN	6		6
16.4.2.1.3	Quality Assurance Assistant	38		38

Old FMR	Name of Post	Ongoing Posts FY 2025-26	New Posts FY 2026-27	Total No. of Approved Posts FY 2026-27
		(a)	(b)	(c=a+b)
16.4.2.1.4	IT coordinator HUD level	14		14
16.4.2.1.4	Dist. RKSK coordinators	9		9
	District Adolescent Health and Nutrition Coordinators	0	29	29
16.4.2.1.5	IT Support at district level	Lump sum (158)	Lump sum (7)	Lump sum (165)
16.4.2.1.6	Statistician (DNB Course)	25		25
16.4.2.1.7	Accountant/ Accounts Assistant	148		148
16.4.2.1.8	Jr Administrative Officer	31		31
16.4.2.2.5	DRTB Centre Statistical Assistant	8		8
16.4.2.2.5	District Data Manager	38		38
16.4.2.2.6	Senior DOTS plus TB – HIV Supervisor	38		38
16.4.2.2.7	Accountant	36		36
16.4.2.3.2	District Consultant (NTCP)	30		30
16.4.2.3.2	District Consultant (NPPF)	1		1
	District Consultant (NCD)	0	4	4
16.4.2.3.4	PPM/ACSM Coordinator	38		38
16.4.2.3.4	Programme Coordinator TB	37		37
	Accounts assistant	38		38
16.4.3.1.7	Accountants	385		385
16.4.3.2.6	Sr Treatment Lab Supervisor (STLS)	146		146
Data Entry Operation				
8.1.16.6	Facility based Data Entry Operation	Lump sum (18)		Lump sum (18)
16.4.1.3.10	DEO	Lump sum (166)		Lump sum (166)
16.4.1.3.12	DEO	Lump sum (3)		Lump sum (3)
16.4.1.4.9	DEO	Lump sum (12)		Lump sum (12)
16.4.1.5.9	DEO	Lump sum (5)		Lump sum (5)
16.4.2.1.9	DEO	Lump sum (289)	Lump sum (12)	Lump sum (301)
16.4.2.2.9	DEO	Lump sum (115)		Lump sum (115)
16.4.2.3.9	DEO	Lump sum (100)		Lump sum (100)
16.4.3.1.9	DEO	Lump sum (385)		Lump sum (385)
Support Services – PMU/ Offices				
16.4.1.3.11	Support Staff	Lump sum (33)		Lump sum (33)
16.4.1.4.10	Support Staff	Lump sum (2)		Lump sum (2)
16.4.1.5.10	Support Staff	Lump sum (1)		Lump sum (1)
16.4.2.2.10	Support Staff	Lump sum (25)		Lump sum (25)
S. No. 142 – HSS Urban				
Service Delivery/Training/Others				
Metro				
U 8.1.1.1	ANM-UPHC	382	9	391
U.8.1.1.2	ANM-UCHC	2		2
U 8.1.2.1	Staff Nurses - UPHC	391		391

Old FMR	Name of Post	Ongoing Posts FY 2025-26	New Posts FY 2026-27	Total No. of Approved Posts FY 2026-27
		(a)	(b)	(c=a+b)
U 8.1.2.1	Staff Nurses UMMU	5		5
U 8.1.2.2	Staff Nurses - UCHC	57		57
U 8.1.2.2	Staff Nurses - UCHC	39		39
U 8.1.2.3	Staff Nurses - Maternity Homes	6		6
U 8.1.3.1	Lab Technicians	82		82
U 8.1.3.1	Lab Technicians UMMU	5		5
U 8.1.3.2	Lab Technicians - UCHC	28		28
U 8.1.3.3	Lab Technicians - Maternity Home	3		3
U 8.1.4.1	Pharmacists	83		83
U 8.1.4.2	Pharmacists - UCHC	16		16
U 8.1.5.1	X-ray Technicians	16		16
U 8.1.5.2	OT Assistant	9		9
U 8.1.5.3	Ophthalmic Assistant	5		5
U 8.1.6.1	OBGY	21		21
U 8.1.6.2	Paediatrician	19		19
U.8.1.6.3	Anaesthetists	5		5
U 8.1.6.4	Surgeon	16		16
U 8.1.6.7	Other Specialists	18		18
U 8.1.7.1	Dentists	16		16
U 8.1.8.1.1	Medical Officers	84		84
U 8.1.8.1.1	Medical Officers UMMU	5		5
U 8.1.8.3.1	Medical Officers - UCHC	23		23
U.8.1.10.2	STS	7		7
U.16.4.3.1	Epidemiologist	1	2	3
	Microbiologist	7		7
	Physiotherapist	0	15	15
Non-Metro				
U 8.1.1.1	ANM	851		851
U 8.1.2.1	Staff Nurses	1212		1212
U 8.1.2.1	Staff Nurses RBSK	20		20
U 8.1.2.1	Staff Nurses UMMU	5		5
U.8.1.10.2	Sector Health Nurse	115		115
U 8.1.2.2	Staff Nurses - UCHC	21		21
U 8.1.3.1	Lab Technicians	331		331
U 8.1.3.1	Lab Technicians UMMU	5		5
U 8.1.4.1	Pharmacists	299		299
U 8.1.4.1	Pharmacists RBSK	20		20
U 8.1.8.1.1	Medical Officers - UPHC & UMMU	129		129
U 8.1.8.1.1	Medical Officers RBSK	20		20
U.8.1.8.3.1	Medical Officers - UCHC	56		56
U.8.1.10.2	STS	3		3
	Microbiologist	28		28

Old FMR	Name of Post	Ongoing Posts FY 2025-26	New Posts FY 2026-27	Total No. of Approved Posts FY 2026-27
		(a)	(b)	(c=a+b)
	Physiotherapist	0	63	63
Metro/Non-Metro				
	MPW (Male)	500		500
	Staff Nurse	500		500
	Medical Officer	500		500
Support Services – Facility Level				
Metro				
U 8.1.5.3	Drivers UMMU	Lump sum (5)		Lump sum (5)
U 8.1.10.1	Support Staff	Lump sum (319)		Lump sum (319)
	Lab Attendant	Lump sum (7)		Lump sum (7)
Non-Metro				
U 8.1.5.3	Drivers UMMU	Lump sum (5)		Lump sum (5)
U 8.1.10.1	Support Staff	Lump sum (606)		Lump sum (606)
	Lab Attendant	Lump sum (28)		Lump sum (28)
Metro/Non-Metro				
	Support Staff	Lump sum (500)		Lump sum (500)
Programme Management				
Metro				
U 8.1.9.2	Public Health Managers	8		8
U.16.4.3.1	Accounts Officer	1		1
U.16.4.3.1	Urban Health Data Manager	1		1
U.16.4.3.1	Accounts Assistant	1		1
U.16.4.3.1	State Consultant Quality Assurance	1		1
Non-Metro				
U.8.1.9.1.1/U.16.4.3.1	Public Health Managers	15		15
U.16.4.1.1	State Urban Health Consultant	1		1
U.16.4.1.1	State Consultant Quality Assurance	1		1
U.16.4.1.1	Statistical Assistant	1		1
U.16.4.1.1	Assistant	1		1
U.16.4.1.1	Steno typist	1		1
U.16.4.1.1	Data analyst	1		1
U.16.4.1.1	Accountant	1		1
U.16.4.1.1	Account Assistant	1		1
U.16.4.1.1	Tally assistant	1		1
U.16.4.1.2	Accounts Officer	1		1
U.16.4.1.2	Medical Officer	2		2
	City Programme Managers	0	7	7
U.16.4.1.2	Deputy Director of Health Services	1		1
U.16.4.1.2	State Urban Health Manager	1		1
U.16.4.2.1	Assistant Accounts officer	31		31
U.16.4.3.1	Accounts assistant	14		14
U.16.4.3.1	Statistical Assistant	10		10

Old FMR	Name of Post	Ongoing Posts FY 2025-26	New Posts FY 2026-27	Total No. of Approved Posts FY 2026-27
		(a)	(b)	(c=a+b)
Data Entry Operation				
Metro				
U 8.1.10.2	DEO cum Accountant	Lump sum (115)		Lump sum (115)
U.16.4.3.1	DEO	Lump sum (2)		Lump sum (2)
Non-Metro				
U.16.4.1.1	DEO	Lump sum (2)		Lump sum (2)
U.16.4.2.1	Assistant cum DEO	Lump sum (31)		Lump sum (31)
U.16.4.3.1	Assistant cum DEO	Lump sum (29)		Lump sum (29)

HRH Budget Summary and List of Positions under TeleMANAS (S. No. 98) for FY 2026-27

Number of TeleMANAS Cells	**2**
HRH Budget Approved (in lakhs)	**243.58**
HRH Posts	**Total No. of Approved Posts FY 2026-27**
Senior Consultant (MD/ DNB/ Diploma in Psychiatry + min 3 years experience)	2
Consultant (MD/ DNB/ Diploma in Psychiatry)	4
Clinical Psychologist	6
Counsellor	40
Data Entry Operator	4

**EPF (Employer's contribution) @ 13.36% is approved 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)	35,814.44	36,982.77
NDCP Flexible Pool (RNTCP, NVHCP, NVBDCP, NLEP, IDSP, NRCP, PPCL)	13,726.85	13,726.85
NCD Flexible Pool (NPCB&VI, NMHP, NPHCE, NTCP, NPCDCS, PMNDP, NPPCCHH)	32,924.65	27,562.55
NUHM Flexible Pool	22,651.82	22,119.93
Health System Strengthening (HSS) under NRHM	2,31,322.04	2,27,247.59
Revalidation	24.11	24.11
Total	3,36,463.92	3,27,663.80
Infrastructure Maintenance (IM)	23,098	23,098
Immunization Kind Grants	42,306	42,306
Grand Total (including IM & kind grants)	**4,01,867.92**	**3,93,067.80**

Annexure 6 B: Summary of budget approved across various themes (RoP 2026-27)

Sl. No.	Pool	Proposed Amount (In Lakhs)	Approved Amount (In Lakhs)	% Approved pool wise out of total approved
1	Capacity Building/Training	2605.05	2284.15	0.70%
2	ASHA Incentives	6017.79	6017.79	1.84%
3	IEC	1643.70	1377.4	0.42%
4	IT Interventions	4,979.12	3632.07	1.11%
5	Innovations	3,907.61	3901.61	1.19%
6	Drugs	38,534.96	34,942.37	10.66%
7	Diagnostics	12531.76	10521.94	3.21%
8	HRH	1,42,823.99	1,41,974.34	43.33%
9	Programme Management Activities	12880.95	12880.95	3.93%
10	RCH	35814.44	36982.77	11.29%
11	NCD	32924.65	27562.55	8.41%
12	NDCP	13726.85	13726.85	4.19%
13	Other proposals	28048.94	31834.9	9.72%
14	Revalidation	24.11	24.11	0.01%
Total		**336463.92**	**327663.80**	**100%**

Annexure 7: PIP Proposals

RCH Flexible Pool (including RI, IPPI, NIDDCP)

Amount in Rs. (Lakhs)

FMR Code	S.No	Scheme/ Activity	Amount Proposed (In Lakhs)	Amount Approved (In Lakhs)	GoI Remarks for RoP
II.1	1	Village Health Sanitation & Nutrition Days (VHSNDs)	-	-	-
	2	Pregnancy Registration and Ante-Natal Checkups	163.02	163.02	**Approved Rs.163.02 lakhs** for 8,90,799 dual testing kits @ Rs. 18.3 per kit.
	3	Janani Suraksha Yojana (JSY)	2,988.74	2,988.74	**Approved Rs.2988.74 lakhs** details are as under: (1) Under JSY DBT: Rs 2,965.00 lakh is approved for [i.e. Rs. 2275.00 lakh for 3,25,000 number of Rural institutional deliveries @ Rs 700 per case; Rs 690.00 lakh for 1,15,000 number of Urban institutional deliveries @ Rs 600 per case. (2) Administrative Expenses: Rs. 23.74 Lakh is approved for JSY administrative expenses as per the Provision of Administrative Expenses in the JSY guidelines [Upto 4 % and 1% of the fund released could be utilized towards administrative expenses for implementation of JSY by the district and state authorities respectively]. (This is PM Activity. Expenditure for PM activities to be booked under sl no 194) 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)	4,848.83	4,780.71	**Approved Rs.4780.71 lakhs** details are as under: Activity 1: Rs. 3451.85 lakhs for drugs and consumables for approx. 2,68,836 Normal deliveries @ Rs. 466/PW = Rs. 1252.78 lakhs; and for approx. 2,19,907 C-Section

FMR Code	S.No	Scheme/ Activity	Amount Proposed (In Lakhs)	Amount Approved (In Lakhs)	GoI Remarks for RoP
					deliveries @ Rs. 1000/PW = Rs. 2199.07 lakhs. = 1252.78+2199.07 = Rs. 3451.85 lakhs. Activity 2: Rs. 107.52 lakh for the procurement of 9,77,486 Glucose Sachets @ Rs. 11/sachet for approx. 4,88,743 PW for two times during the ANC. Activity 3: Rs 66.48 Lakh for Inj Iron Sucrose for moderate -severe anemia in 195497 PW/LM @Rs 8.501/ampoule for 4 ampoule /PW or LM **(shifted to S.No 52 under Anemia Mukt Bharat)** Activity 4: Rs. 1221.34 lakhs for the diet of the pregnant women @ Rs. 102 per day for 2,68,836 normal deliveries i.e. 268836*102*2 = Rs. 548.43 lakhs and @ Rs. 102 per day for 2,19,907 Caesarean Section deliveries i.e. 219907*102*3 = Rs. 672.92. State to ensure adequate hospital stay after delivery.
	5	**Janani Shishu Suraksha Karyakram (JSSK) - Transport**	**1,000.72**	**1,000.72**	**Approved Rs. 1000.72 lakhs** for the transport (To and Fro and inter-facility transfer) of 2,00,144 PW for institutional delivery at the government facilities @ Rs. 500 per pregnant women
	6	**Pradhan Mantri Surakshit Matritva Abhiyan (PMSMA)**	-	-	-
	7	**Surakshit Matritva Aashwasan (SUMAN)**	-	-	-
	8	**Midwifery**	**73.00**	**73.00**	**Approved Rs.73 lakhs** Details are as under: Activity 1:Rs. 25 lakhs for the establishment of Midwifery Led Care Unit (MLCU) at GRH Madurai. The State to follow the National Guidelines. Activity 2:Rs. 48 lakhs for the establishment of State Midwifery Training Institute (SMTI) at the College of Nursing, Madurai Medical College, Madurai, along with the establishment of Skill Lab for SMTI @Rs. 20 lakhs for Civil Works, Rs. 25 lakhs for Mannequins & equipment @

FMR Code	S.No	Scheme/ Activity	Amount Proposed (In Lakhs)	Amount Approved (In Lakhs)	GoI Remarks for RoP
					Rs.3 Lakhs for teaching & learning materials . The State to follow the National Guidelines of Skill Lab.
	9	**Maternal Death Review**	-	-	-
	10	**Comprehensive Abortion Care**	**21.00**	**21.00**	**Approved Rs. 21 Lakhs** for procurement of 30,000 MMA Combipack Kits @ Rs. 70 /- per MMA Kit 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 MVA Kit at the facilities providing safe abortion services.
	11	**MCH Wings**	**3,800.04**	**3,800.04**	**Approved Rs.3800.04 lakhs** details are as under: Activity 1: Rs.600 lakhs for remaining funds for the ongoing construction of the additional building/extension of the MCH wing / at GMCH Villupuram (CEmONC centre) approved in RoP 2025-26 at the total cost of Rs. 1200 lakhs. Rs. 600 was already approved in RoP 2025-26. Activity 2: Rs.3200.04 lakhs for establishment of MCH wing at GH Dharmapuri, GH Dindugal, GH Kanniyakumari, GH Nagapattinam, GH Tiruppur, Madurakatam GH, DHQH Kovilpatti, GH Pollachi and GH Thiruvallu.
	12	**FRUs**	**178.66**	**178.66**	**Approved Rs.178.66 lakhs** for procurement of 206 LDR cots (20 for CHCs/PHCs and 186 for CEmONC Centre).
	13	**HDU/ICU - Maternal Health**	**461.88**	**461.88**	**Approved Rs.461.88 lakhs** details are as under: Activity 1 - Procurement of 259 Volume Infusion Pumps for HDUs of CEmONC and labour rooms. Activity 2-Procurement of 259 Syringe Infusion Pumps for HDUs of CEmONC and labour rooms. Activity 3-Procurement of 50 defibrillators for Obstetric ICUs at 37 District Hospitals and 13 MCHs centres.

FMR Code	S.No	Scheme/ Activity	Amount Proposed (In Lakhs)	Amount Approved (In Lakhs)	GoI Remarks for RoP
					Activity 4- Procurement of Thromboelastography (TEG) for 15 CEmONC centres.
	14	**Labour Rooms (LDR + NBCCs)**	**0.00**	**0.00**	-
	15	**LaQshya**	**678.23**	**678.23**	**Approved Rs 678.23 lakhs** for the following activities: 1. Rs. 554.0 Lakhs for incentives of following facilities : Rs. 432.0 lakhs for 36 MCH (LR & MOT) @ 6 lakhs/ department (36*6*2) Rs 18.0 Lakhs for 3 DH (LR& MOT) @ 3 lakhs/ department (3*3*2) for Surveillance II Rs. 80.0 Lakhs for 20 SDH (LR & MOT) @ 2 lakhs/department (20*2*2 for Surveillance I & II Rs. 24.0 Lakhs for 6 CHC (LR & MOT) @ 2 lakhs/department (6*2*2) for Surveillance I & II 2. Rs. 89.00 lakhs for procurement of Chemical & Biological Indicators for 156 (35 DH, 62 CHC, 59 SDH) high delivery CEmONC and BEmONC centres across the State. 3. Rs.35.23 Lakhs for NQAS Assessment of the following facilities: Rs. 3.90 lakhs for State assessment (recertification) of 26 MCH @ of 15000/facility Rs. 23.66 lakhs for National assessment (recertification) of 26 MCH @ of 91000/facility Rs. 1.5 lakhs for the surveillance assessment I of 2 MCH, 6SDH, and 2CHCs @15000/facility Rs. 4.05 lakhs for the surveillance assessment II of 6 MCH, 3DH, 14SDH, 4CHC @ of 15000/facility Rs. 0.30 lakhs for the state assessment of 2 MCH @ of 15000/facility Rs. 1.82 lakhs for the national assessment of 2 MCH @ of 91000/facility

FMR Code	S.No	Scheme/ Activity	Amount Proposed (In Lakhs)	Amount Approved (In Lakhs)	GoI Remarks for RoP
	16	Implementation of RCH Portal/ANMOL /MCTS			
	17	Other MH Components	-	-	-
	18	State specific Initiatives and Innovations			
RCH.2	19	PC & PNDT Act	-	-	No proposal under PC&PNDT Act. A. State is requested to convene District Advisory Committee Meeting regularly. As per Rule 15 of the PC&PNDT Rules 1996 "The intervening period between any two meetings of Advisory Committees constituted under sub-section (5) of section 17 to advise the Appropriate Authority shall not exceed sixty days." B. Further, state may organize 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	0	0	-
RCH.3	21	Rashtriya Bal Swasthya Karyakram (RBSK)	3,988.00	3,987.64	**Approved Rs. 3987.64 Lakhs** for RBSK-MHTs, as per following details: (1). Equipment: Rs. 40.40 Lakh for RBSK Tool kit @ Rs 5000/ RBSK team for 808 RBSK MHTs (2). OOC (Ongoing Activity): (a) Rs 3927.85 Lakh for Mobility Support including GPS tracking @ Rs. 40,510/ per month for 808 RBSK MHTs (b) Rs. 19.39 lakh For CUG connection for 808 MHT @ Rs. 2400/ Year. Approval has been given for 808 functional MHTs against proposal of 823 MHTs

FMR Code	S.No	Scheme/ Activity	Amount Proposed (In Lakhs)	Amount Approved (In Lakhs)	GoI Remarks for RoP
	22	**RBSK at Facility Level including District Early Intervention Centers (DEIC)**	**1,810.71**	**1,810.71**	**Approved Rs. 1810.71 Lakh** under RBSK-DEIC, as per following details: 1. Infrastructure: Rs.100 lakh for Construction of new DEIC building at KGH,Chennai in 2026-27. Rest 60 Lakh may be approved in 2027-28 2. Infrastructure: Rs 15 lakh @ Rs 3 lakh per DEIC Sensory Integration park establishment in 5 DEICs at KMC-Chennai, The Nilgiris , Ramnad, Thootukudi and Pentland-Vellore 3. Equipment: Rs.53.39 lakh for procurement of equipment to DEIC at Mayiladuthurai 4. OOC: Rs. 48.00 lakh as an Operational cost of 40 DEICs @ Rs.10000/- per month for 12 Months as ongoing activity. 5. OOC: Rs.100 lakh for Referral support for RBSK referred children for management at Secondary and Tertiary Care Centre. 6. OOC: Rs. 0.96 lakh For CUG connection for 40 DEICs @ Rs.2400/- per year per DEIC 7. Drugs and Diagnostics: Rs 1493.36 lakh for growth hormone dispensed at DEICs {Rs 327.27 lakh (24 mg somatogron = for 234 beneficiaries = Total 3330 vials @ Rs.9828 each)and Rs1166.09 (60mg somatogron for 289 beneficiaries = Total 4746 vials @ Rs.24570 each)
	23	**Community Based Care - HBNC & HBYC**	**26.50**	**26.50**	**Approved Rs. 26.50 Lakh** for procurement of HBNC kits for 2650 ASHAs @Rs. 1000 per ASHA. State to book expenditure as per actuals following due process and norms.
	24	**Facility Based New born Care**	**4,203.47**	**4,203.47**	**Approved Rs. 4203.47 Lakh** under Facility Based Newborn Care (FBNC) as per following details: (1) Rs. 200 lakh for Establishment of MNCU at (1) Salem , (2) Vellore , (3) Tuticorin, (4) Tiruppur, (5) Virudhunagar, (6) Chengalpattu, (7) Thanjavur and (8) Tirupathur DHQ @ Rs. 25.00 Lakhs each MNCU as per FBNC guideline.

FMR Code	S.No	Scheme/ Activity	Amount Proposed (In Lakhs)	Amount Approved (In Lakhs)	GoI Remarks for RoP
					(2) Rs. 40 lakh for repair/ renovation of Upgrading the 4 NBSUs (Tirukoilore, Rasipuram, Sirkali, Vedaranyam) to SNCUs (3) Rs. 213.12 lakh for upgradation of the NBSU to SNCU at (1) Tirukoilore, (2) Rasipuram, (3) Sirkali, (4) Vedaranyam to SNCU for procurement of equipment @ Rs. 53.28 Lakh per unit for 4 SNCU. State to ensure upgradation in MNCU and ensure stay of mothers along with sick newborns following the GoI FBNC Op guidelines 2025. (4) Rs. 477.26 lakh for procurement of equipment for 8 MNCUs at Salem, Vellore, Tuticorin, Tiruppur, Virudhunagar, Chengalpattu, Thanjavur and Tirupathur DHQ @ Rs.59.66 Lakhs per MNCU as per revised FBNC Op guideline. (5) Rs. 2207.68 lakh for procurement of equipment for 92 newborn care units based on gap analysis as proposed by the State as per FBNC guideline. (6) Rs.966 Lakhs as operational cost for 92 SNCUs @ Rs.10.50 Lakhs per SNCU. (7) Rs. 0.5 lakh as operational cost for State Newborn Resource Center ICH Chennai. (8) Rs. 21 Lakh for establishment of new NBSUs at Nanguneri GH , Vijayapuram GH, Jamunamaruthur PHC Tiruvannamalai @ Rs. 7 Lakh per NBSU. (9) Rs. 17.97 Lakh for procurement of equipment for 3 new NBSUs at Nanguneri GH , Vijayapuram GH, Jamunamaruthur PHC Tiruvannamalai @ Rs. 5.99 Lakh each. (10) Rs. 60 Lakh as Operational Cost for 146 NBSUs @ Rs. 41096 per annum per NBSU.
	25	**Child Death Review**	-	-	-
	26	**SAANS**	**131.00**	**131.00**	**Approved Rs. 131 Lakh** for procurement of ORS and Zinc for STOP Diarrhoea 2026 Campaign as per following details:

FMR Code	S.No	Scheme/ Activity	Amount Proposed (In Lakhs)	Amount Approved (In Lakhs)	GoI Remarks for RoP
					(1) Rs. 124.4 lakh for procurement of 5182713 ORS packets @ Rs. 2.4 per packet (2) Rs. 6.617 lakh for procurement of 5514406 Zinc tablets @ Rs. 0.12 per tablet
	27	**Paediatric Care**	**881.60**	**881.60**	**Approved Rs. 881.60 Lakhs** as per following details: Ongoing Activity: Rs. 275 lakhs as Operational Cost for 55 PICUs/ PHDUs @ Rs. 5 lakh each per annum following GoI norms. **New Activity:** Rs. 606.60 Lakh for procurement of 22 NIV-BIPAP, 53 HFNC Airflow, 47 Multipara Monitor for 20 Paediatric IIDUs/ PICUs as per Gap Analysis. **State to book expenditure as per actuals following due norms and procedure.**
	28	**Janani Shishu Suraksha Karyakram (JSSK) (excluding transport)**	**2,090.26**	**2,090.26**	Ongoing Activity: **Approved Rs. 2090.26 lakh** under JSSK free drugs and diagnostics as follows: 1. Rs.807.18 Lakhs for procurement of Iron drops Vitamin D3, Multivitamin drops to LBW babies discharged from Facilities 2. Rs. 1283.08 Lakhs for a. Rs.1194.91 Lakhs drugs and consumables for 58913 Preterm infants towards surfactant @ Rs 2028.26 and b. Rs.88.17 Lakhs - Procurement of Inj. Caffeine at a cost of Rs. 149.66 for 58913 sick children **State to follow GoI JSSK guideline and book the expenditure as per actual and ensure JSSK reporting on HMIS portal.**
	29	**Janani Shishu Suraksha Karyakram (JSSK) - Transport**	-	-	-
	30	**Other Child Health Components**	-	**994.31**	**Approved Rs.994.31 lakhs** for procurement of drugs and consumables for T1DM Patients **(Shifted from Sr.no 110)**
	31	**State specific Initiatives and Innovations**			

FMR Code	S.No	Scheme/ Activity	Amount Proposed (In Lakhs)	Amount Approved (In Lakhs)	GoI Remarks for RoP
RCH.4	**32**	**Immunization including Mission Indradhanush**	**1,595.32**	**1,595.32**	**Approved Rs. 1,595.32 lakhs** for Immunization including Mission Indradhanush as per the following details: 1. Drugs and Supplies: Rs. 14.73 lakhs for Purchase of Anti Diphtheria Serum and Benzathine Penicillin @ Rs.1134.50/ vials. 2.Diagnostics (Consumables, PPP, Sample Transport) - Rs. 67.43 lakhs for purchase for 2247648 Bags 3. Rs. 108.06 lakh for procurement of (Hub Cutter/Puncture proof Rs.750 per Site) for 14,408 sessions site Other Operational Costs (OOCs) - 4. Rs. 144.9 lakhs for hiring alternate vaccinators as per norms @ 2100Rs/month/vacant sub centre. 5. Rs. 36.29 lakhs for Alternate Vaccine Delivery charges in plain and urban areas. 6. Rs. 636.74 lakhs for alternate vaccine delivery in accessible HSCs. **7. New Activity:** Rs. 227.14 lakh for hiring alternate vaccinators for Rural vacant HSCs. 8. Rs. 200.41 lakhs for AVD for Rs. 200 per session for 52 sessions for 1927 hard to reach HSCs (Vaccine Lifting charges). 9. Rs. 58 lakhs for POL for vaccine delivery for the following activities: Rs.46 lakhs. Proposed for 46 HUD per year for POL for vaccine delivery and Rs.12 lakhs for State Vaccine Store to 9 Regional Vaccine Store. 10. Rs. 41.05 lakhs for cold chain maintenance @ Rs.1527 per Cold Chain Point for 2690 points 11. Rs. 11.72 lakhs for developing microplan at sub-centre level @ Rs.1000 per SHC

FMR Code	S.No	Scheme/ Activity	Amount Proposed (In Lakhs)	Amount Approved (In Lakhs)	GoI Remarks for RoP
					12. Rs. 5.24 lakhs for consolidation of micro plans at block level and district level @ Rs.1000 / block for 388 block and Rs.2000 per revenue district for 46 Districts (This is PM Activity. Expenditure for PM activities to be booked under sl no 194) 13. Rs. 13.27 lakhs towards Support for Quality Management System for AEFI Surveillance in District of Thoothukudi and Cuddalore and State level for Assessment, Training and Mentoring. State to exclude external assessment and include internal assessment at state and district level. **14. New Activity:** Rs.30.36 lakhs for HPV campaign cost @ Rs.66000 per HUD for 46 Districts.
	33	**Pulse Polio Campaign**	**260.00**	**260.00**	**Approved Rs. 260 lakhs** for operational cost of Pulse Polio Campaign
	34	**eVIN Operational Cost**	**360.27**	**350.57**	**Approved Rs. 350.57 lakh** details are as under: (A)HR cost -proposed in HRH, approved in principle. (B)Operational Cost of eVin–Rs. 223.72 lakhs (i) Data Sim Cards for CCH, VCCM – Rs. 99.96 lakh (This is PM Activity. Expenditure for PM activities to be booked under sl no 194) (ii) Data Sim Cards for Temperature Loggers - Rs. 114.89 lakh (iii) Printing of eVIN register - Rs. 8.88 lakhs (C) Mobility Support - Rs. 61.92 lakh (This is PM Activity. Expenditure for PM activities to be booked under sl no 194) (i) Staff travel cost – Rs. 28.80 lakh (@Rs. 30,000 per month for 8 PO/SPO) (ii)Travel cost for VCCM – Rs. 33.12 lakh (Rs. 6000/month for 46 VCCMS) (D) Training – Rs. 43.64 lakh

FMR Code	S.No	Scheme/ Activity	Amount Proposed (In Lakhs)	Amount Approved (In Lakhs)	GoI Remarks for RoP
					(E) = (B+C+D) = 329.28 lakh (F)(1% of E)-Rs. 3.29 lakh Miscellaneous cost (G)Temperature Loggers @18000/- for 100 nos = Rs. 18 lakh **(H)Not approved** Management Cost-H (3% of E+ G)-Rs. 10,92,066
RCH.5	**35**	**Adolescent Friendly Health Centers (AFHCs)**	**9.00**	**9.00**	**Approved Rs 9 lakh** for operational cost of 300 AFHCs @Rs 3000/ AFHC/ year
	36	**Weekly Iron Folic Acid Supplementation (WIFS)**	**1,245.13**	**639.04**	**Approved Rs 639.04 Lakh** for procurement of prophylactic Weekly Blue IFA tablets @Rs 0.1438 paisa per tablet for 52 IFA tablets for 8546119 adolescents (government/ government aided/ private schools). **Approved Rs.605.85 lakhs (shifted to S.No 52)** 1.Rs 278.44 lakh for 52 prophylactic WIFS pink IFA tablets for 48.68 lakh children 5-9 years in schools @Rs 0.11/tablet 2.Rs 327.41 lakh for 52 prophylactic Red IFA tablets for 53.36 lakh WRA @ Rs0.118/tablet
	37	**Menstrual Hygiene Scheme (MHS)**	**0.00**	**0.00**	-
	38	**Peer Education Programme**	**805.84**	**991.80**	**Approved Rs. 991.80 lakhs** as per the details under: 1. Rs 619.88 lakhs for organising Adolescent Health and Wellness Days (AH&WDs) in 15497 schools quarterly @ Rs 1000/ AHWD/quarter for four quarters. 2. Rs 185.96 lakhs for organising monthly Adolescent Health club meetings in 15497 schools @Rs 100/ month for 12 months. Ongoing activity. 3. Rs.185.96 Lakhs for non monetary incentives @Rs 50/Peer Educator/ month for 12 months for 2 Peer Educators/school in 15,497 schools. (Only to be given in non monetary form.) **(Shifted from S.no 186)**

FMR Code	S.No	Scheme/ Activity	Amount Proposed (In Lakhs)	Amount Approved (In Lakhs)	GoI Remarks for RoP
	39	School Health And Wellness Program under Ayushman Bharat	0.00	0.00	-
	40	Other Adolescent Health Components	0.00	0.00	-
	41	State specific Initiatives and Innovations			
RCH.6	42	Sterilization - Female	1,714.85	1,714.85	**Approved Rs 1714.85 Lakh** as per the details as under: (i) Rs. 1600.00 lakh for 1.6 lakh sterilizations in public facilities @ Rs. 1000/- per case (ii)Rs. 114.85 lakh for 1552 FDS (1 FDS per quarter in 388 blocks) @ Rs. 7,400/- per FDS.
	43	Sterilization - Male	44.82	44.82	**Approved Rs 44.82 Lakh** as per the details as under: (i)DBT: Rs. 15.00 lakh for 1000 sterilizations @ Rs. 1500 per case. (ii) OOC: Rs. 29.82 lakh for 403 FDS (388 FDS in blocks & 15 in Chennai zone) @ Rs. 7,400/- per FDS.
	44	IUCD Insertion (PPIUCD and PAIUCD)	601.26	601.26	**Approved Rs 601.26 Lakh** as per the details as under: DBT: Rs. 601.26 lakh (i) Rs. 600.00 Lakh for 2,00,000 PPIUCD beneficiaries @ Rs 300/- per insertion ii) Rs. 1.26 Lakh for 420 PAIUCD beneficiaries @ Rs 300/-per insertion.
	45	ANTARA	0.00	0.00	-
	46	MPV (Mission Parivar Vikas)	0.00	0.00	-
	47	Family Planning Indemnity Scheme	118.74	118.74	**Approved Rs 118.74 Lakh** under Family Planning Indemnity Scheme (FPIS)
	48	FPLMIS	-	-	

FMR Code	S.No	Scheme/ Activity	Amount Proposed (In Lakhs)	Amount Approved (In Lakhs)	GoI Remarks for RoP
	49	World Population Day and Vasectomy Fortnight	0.00	0.00	-
	50	Other Family Planning Components	5.56	5.56	**Approved Rs 5.56 lakh** as per the details as under: Surveillance: Rs 5.56 Lakh (i) Rs 0.28 Lakh for 1 Death Panel Committee meeting (Death Audit). (ii) Rs 4.56 lakh for Quarterly DQAC/DISC meetings @ Rs 12,000/- per district (38 districts). (This is PM Activity. Expenditure for PM activities to be booked under sl no 194) (iii) Rs 0.72 Lakh for 6 FP Sub Committee meeting @ Rs 12,000/-per meeting.
	51	State specific Initiatives and Innovations			
RCH.7	52	Anaemia Mukt Bharat	637.43	1,309.76	**Approved Rs 1309.76 lakh for the following:** 1. Rs 424.95 lakh for HB testing with DIH for 2833026 school children of class 6,9,11 under Anemia Mukt Bharat @Rs 15/Hb test 2. Rs 212.48 Lakh for follow-up Hb testing of 50% of 2833026 i.e 1416513 school children @Rs 15/HB test.**(Shifted from S.No 4 to S.No 52)** 3.Rs 66.48 Lakh for Inj Iron Sucrose for moderate -severe anemia in 195497 PW/LM @Rs 8.501/ampoule for 4 ampoule /PW or LM **(Shifted from S.No 36 to S.No 52)** 4.Rs 278.44 lakh for 52 prophylactic WIFS pink IFA tablets for 48.68 lakh children 5-9 years in schools @Rs 0.11/tablet 5.Rs 327.41 lakh for 52 prophylactic Red IFA tablets for 53.36 lakh WRA @ Rs0.118/tablet

FMR Code	S.No	Scheme/ Activity	Amount Proposed (In Lakhs)	Amount Approved (In Lakhs)	GoI Remarks for RoP
	53	**National Deworming Day**	**506.80**	**506.80**	**Approved Rs.506.80 lakhs** as per details below: 1.Rs.121.83 lakh for bi-annual albendazole for 4685675 children (1-5 years) @Rs 1.3 / tablet 2. Rs.133.54 lakh for 5136278 children (5-9 years)@ 1.3/Tablet 3. Rs.140.86 lakh for 5417841adolescents (10-19 years)in and out of school @ 1.3 /Tablet 4. Rs.110.56 lakh for 4252428 WRA(20-30 years) @ Rs 1.3/ tablet
	54	**Nutritional Rehabilitation Centers (NRC)**	**174.14**	**174.14**	**Approved Rs.174.14 lakhs** as per details below: 1.Rs 84 lakhs for Establishment of NRC in 6 facilities Salem, Villupuram, Thoothukudi, Kanchipuram, Tiruppur and Tirupathur at Rs.14 lakhs per centre. 2. 1. Rs.90.14 lakh for Operational cost of 12 functional NRCs (ten bedded) @ Rs. 7.512 Lakhs/ NRC .
	55	**Vitamin A Supplementation**	**122.43**	**122.43**	**Approved Rs.122.43 lakhs** as per details below: 1. Rs 13.60 lakh for procurement of Vitamin A bottle for 9,42,311 children (0-1 years) @Rs 72.18/100 ml bottle 2. Rs 108.83 lakh for procurement of Vitamin A bottle for 37,69,246 children (2-5 years) @Rs 72.18/100ml bottle
	56	**Mother's Absolute Affection (MAA)**	**0.00**	**0.00**	-
	57	**Lactation Management Centers**	**256.00**	**256.00**	**Approved Rs.256 lakhs** as per details below: 1. Rs 66 lakh for establishment of 6 new LMUs @Rs 11lakh/LMU 2. Rs. 160 lakh for procurement of pasteurizers for CLMCs @ Rs.10 lakhs. for 13 existing CLMCs and 3 LMUs for upgradation to CLMC. 3. Rs 30 Lakh for Procurement of 20 breast pumps for existing 20 LMUs @Rs 1.5 lakh each

FMR Code	S.No	Scheme/ Activity	Amount Proposed (In Lakhs)	Amount Approved (In Lakhs)	GoI Remarks for RoP
	58	Intensified Diarrhoea Control Fortnight	0.00	0.00	-
	59	Eat Right Campaign	0.00	0.00	-
	60	Other Nutrition Components	0.00	0.00	-
	61	State specific Initiatives and Innovations			
RCH.8	62	Implementation of NIDDCP	11.19	11.19	**Approved Rs.11.19 lakhs** as per details below: 1.As per norms, Rs. 8.69 Lakh for procurement of STK.(Drugs & supplies) 2.As per norms, Rs 2.50 lakh (@ 0.50 lakh x 5 nos.) for survey in 5 districts. (SRAE)
RCH Sub Total			35,814.44	36,982.77	
NDCP FLEXIPOOL					
NDCP.1	63	Implementation of IDSP	69.18	69.18	**Approved Rs 69.18 lakhs** as per details below: 1. Ongoing activity: Rs. 3.80 lakhs for recurring costs, including consumables, kits, and miscellaneous expenses at 38 DPHLs, calculated @ Rs. 10,000 per DPHL. 2. Ongoing activity. Rs. 6.5 lakhs for reimbursement-based payments for laboratory tests across 13 referral labs. 3. Ongoing activity: Rs. 47.88 lakhs for VPD sample collection materials at Rs. 1.26 lakhs per district. 4. Ongoing Activity:Rs.11.00 Lakhs for Transport and shipment of VPD samples to Salem & King Institute, Guindy.
NDCP.2	64	Malaria	69.56	69.56	**Approved Rs 69.56 lakhs** as per details below: 1. Infrastructure Civil works (I&C): 2.80 Lakhs for maintenance of hatcheries 2. Drugs and Supplies :18.18 Lakhs for:

FMR Code	S.No	Scheme/ Activity	Amount Proposed (In Lakhs)	Amount Approved (In Lakhs)	GoI Remarks for RoP
					1,05,000 antimalarial drug - chloroquine (Rs 2.1 Lakhs) 2,40,000 antimalarial drug - Primaquine 2.5 mg (Rs 6 Lakhs) 1,68,000 antimalarial drug Primaquine 7.5 mg (Rs 10.08) 3. Others including operating costs(OOC) :Rs.48.58 lakhs for indoor residual spray activity for malaria endemic districts.
	65	**Kala-azar**	**0.00**	**0.00**	-
	66	**AES/JE**	**9.70**	**9.70**	**Approved Rs.9.70 lakhs** as per details below: 1.Ongoing Activity: Drugs & Supplies:33 IgM-kits @Rs. 11150 = Rs 3.68/- lakhs (Approved in kind supply from GOI) 2.Equipment (Including Furniture, Excluding Computers):Rs. 9.7 Lakhs for repairing of fogging machines spares needed 492 pulse fog and 335 mini fogging machines
	67	**Dengue & Chikungunya**	**316.80**	**316.80**	**Approved Rs.316.80 lakhs** as per details below: 1.Equipment (Including Furniture, Excluding Computers): Procurement of 100 portable fogging machines @ Rs. 0.84 lakhs/-. Total Rs. 84.00 Lakhs. 2.Others including operating costs (OOC): DBCs @ Rs. 200 per day for 120 days. Total Rs. 232.80 Lakhs.
	68	**Lymphatic Filariasis**	**100.55**	**100.55**	**Approved Rs.100.55 lakhs** as per details below: 1.Drug and Supplies: Ongoing activity: Rs. 95.35 lakhs for MMDP kits support) , Budget need to shift in OOC 2.SRAE Ongoing activity: Post MDA Surveillance in 26 TAS Passed districts (Rs.5.20 Lakhs)

FMR Code	S.No	Scheme/ Activity	Amount Proposed (In Lakhs)	Amount Approved (In Lakhs)	GoI Remarks for RoP
NDCP.3	69	Case Detection and Management	2,757.51	2,757.51	**Approved Rs 2757.51 lakhs** for: Ongoing activity. 1. 18.24 Lakhs towards Supportive drugs, lab. Reagents. 2. Rs.2671.54 lakhs for 1st Round for Rs.1759.27 Lakhs for all the 385 Rural Blocks and 142 Urban Blocks and 2nd Round for Rs.912.27 Lakhs for 193 Rural and 71 Urban Block. 3. Case detection & Management: Services in Urban Areas. Rs.1.58 Lakhs per urban for 43 urban areas, totalling to Rs.67.73 Lakhs
	70	DPMR Services: Reconstructive Surgeries	123.56	123.56	**Approved Rs 123.56 lakhs for:** 1.Ongoing activity, Welfare allowance to patients for RCS. Rs.12,000 per patient. Total cost is Rs.18 lakhs for 150 patients. 2. For purchase of Hand stick, Goggles, Gloves, Plaster of Paris (POP), Splints. Total cost is Rs.33.57 lakhs 3. Procurement of Special MCR units at Rs.500 per unit for units. Total cost is Rs.9,90,500 4. Procurement of MCR footwear for eligible patients at Rs. 400 per unit, totalling Rs. 62.088 lakhs.
	71	District Awards	0.00	0.00	-
	72	Other NLEP Components	0.00	0.00	-
NDCP.4	73	Drug Sensitive TB (DSTB)	1,492.58	1,492.58	**Approved Rs 1492.58 lakhs** as per details below: 1) DBT – Treatment supporter Honorarium – Rs 10 lakh 2) Infra –Construction of new TB wards in 5 district @ 1.38 crore – Rs 530 lakh 3) Equipment – Procurement of equipment for 84 health facilities & Equipment maintenance – Rs 397.74 lakh 4) Drug & supplies – Drug transportation - Rs 72 lakh 5) OOC – Operational costs for 48 mobile X-ray vans – Rs 410.70 lakh 6) SRAE – Involvement of Community Volunteers—TB Champions and WHVs, Support for consultancy and studies &

FMR Code	S.No	Scheme/ Activity	Amount Proposed (In Lakhs)	Amount Approved (In Lakhs)	GoI Remarks for RoP
					Support for consultancy and studies – Rs 72.14 lakh
	74	Nikshay Poshan Yojana	6,000.00	6,000.00	**Approved Rs 6000 lakhs** for Ni-kshay poshan yojana to TB patients @1000 per month till treatment completion
	75	PPP	150.00	150.00	**Approved Rs 150 lakh** for private sector incentive i.e. Rs 500 for notification & Rs 500 for outcome
	76	Latent TB Infection (LTBI)	77.00	77.00	**Approved Rs 77 lakh** for procurement of TPT drugs and ILR under Latent TB Infection Management
	77	Drug Resistant TB(DRTB)	113.78	113.78	**Approved Rs 113.78 lakh** for emergency procurement of drug
	78	TB Harega Desh Jeetega Campaign	-	-	-
	79	State specific Initiatives and Innovations			
NDCP.5	80	Prevention	-	-	Nil budget proposed. The state has informed that HBIG (as per estimated targets) will be procured from 15th Finance Commission Grants for Health.
	81	Screening and Testing through Facilities	-	-	Diagnostics (Consumables, PPP, Sample Transport): **Approved Rs.52.5 Lakhs** as kind grant for central supply of viral load kits. Nil budget proposed. The state has informed that HBV RCT, HCV RCT, HBV Viral Load Kits, HCV Viral Load kits and other lab consumables will be procured from 15th Finance Commission Grants for Health.

FMR Code	S.No	Scheme/ Activity	Amount Proposed (In Lakhs)	Amount Approved (In Lakhs)	GoI Remarks for RoP
	82	**Screening and Testing through Outreach Activities**	**40.00**	**40.00**	Others including operating costs(OOC): **Approved Rs 40 Lakhs** for outreach activity as per NVHCP norms. There should not be duplication of incentives and the cost of kits. (Outreach activity under NVHCP is conducted through the health system at a rate of Rs. 5000 per camp with at least 50 persons screened for hepatitis B and/or C per camp at the Targeted intervention sites or in area with hotspots/ reported increased number of cases). The program division advocates that the outreach activity has to be organised through the health system and under constant monitoring and supervision of the state nodal officer for increasing the capacities and sustainability. The fund should not be passed to any agency to accomplish the task as confidentiality must be maintained.
	83	**Treatment**	**6.64**	**6.64**	**Approved Rs.6.64 lakhs** as per the details below: 1. Drugs and Supplies: a. Rs. 2.02 lakh as CASH grant for procurement of Tab Ribavirin 200 mg and Daclatasvir 30 mg. b. Rs 288.6 lakh as KIND grant for central supply of drugs for management of viral hepatitis. 2. Diagnostics (Consumables, PPP, Sample Transport): Rs 4.62 lakh for Management of Hepatitis A and E as proposed.
NDCP.6	**84**	**Implementation of NRCP**	**2,390.00**	**2,390.00**	**Approved Rs 2390 Lakh** for Procurement of Anti Rabies Drug(ARV)
NDCP.7	**85**	**Implementation of PPCL**	**10.00**	**10.00**	**Approved Rs.10 Lakhs** for procurement of diagnostic kit for Leptospirosis
NDCP.9	**86**	**Implementation of State specific Initiatives and Innovations**			
NDCP Sub Total			**13,726.85**	**13,726.85**	

FMR Code	S.No	Scheme/ Activity	Amount Proposed (In Lakhs)	Amount Approved (In Lakhs)	GoI Remarks for RoP
NCD FLEXIPOOL					
NCD.1	87	Cataract Surgeries through Facilities	1,250.00	1,250.00	**Approved Rs.1250 Lakhs** for 125000 cataract surgeries
	88	Cataract Surgeries through NGOs	4,000.00	4,000.00	**Approved Rs.4,000 Lakhs** are proposed for incentives @ Rs.2,000 per cataract surgery for 200,000 surgeries performed by NGOs.
	89	Other Ophthalmic Interventions through Facilities	0.00	0.00	-
	90	Other Ophthalmic Interventions through NGOs	0.00	0.00	-
	91	Mobile Ophthalmic Units	0.00	0.00	-
	92	Collection of Eye Balls by Eye Banks and Eye Donation Centres	110.00	110.00	**Ongoing activity: Approved Rs.110 Lakhs** for incentives of Rs.1,000 per eyeball collection for 11,000 collections.
	93	Free Spectacles to School Children	629.30	629.30	**Ongoing activity: Approved Rs.629.30 Lakhs** for provision of 310,000 pairs of spectacles at Rs.203 per pair.
	94	Free spectacles to Others	129.96	129.96	**Ongoing activity: Approved Rs.129.96 Lakhs** for provision of 152,000 spectacles (32,000 bifocal and 120,000 readymade reading spectacles) at an average cost of Rs.85.50 per pair.
	95	Grant in Aid for the Health Institutions, Eye Bank, NGO, Private Practioners	1,625.41	1,625.41	**Approved Rs.1625.41 lakhs** as per the details below: 1. **New activity.** Rs.300 Lakhs for Construction of Eye Wards in DH Mannargudi, GH Chengalpattu and GH Tenkasi @ Rs.100.00 lakhs each, totalling to Rs.300.00 lakhs. 2.Rs.1125.41 Lakhs for Procurement of Ophthalmic Equipment for institutions

FMR Code	S.No	Scheme/ Activity	Amount Proposed (In Lakhs)	Amount Approved (In Lakhs)	GoI Remarks for RoP
					based on Gap Analysis at Rs.31.26 lakhs per centre. 3. **New activity.** Rs. 200 Lakhs for Procurement of Ophthalmic Equipment for new Government Hospitals: 1. DH Vedaranyam, DH Pennagaram & DH Jayamkondan @ Rs.40 Lakhs per unit, totalling to Rs.120 Lakhs 2. SDH Saidapet, SDH Kudankulam & SDH Bhavani @ Rs.20 Lakhs, totalling to Rs.60 Lakhs 3. Eye Bank Vellore @ Rs.20 Lakhs per unit.
	96	**Other NPCB+VI components**	**0.00**	**0.00**	-
NCD.2	**97**	**Implementation of District Mental Health Plan**	**658.04**	**502.24**	**Approved Rs.502.24 lakhs** as per the details below: Activity 1: Procurement of Drugs: Rs. 133 Lakhs (Rs. 3.50 Lakhs* 38 Districts) Activity 2: Emergency Care and Recovery Centre: Rs. 28.50 Lakhs (Rs. 0.75 Lakhs* 38). Activity 3: Drugs & Supplies for De-addiction Centre: Rs. 21 Lakhs (Rs. 0.75* 28). Activity 4: Targeted interventions: Rs. 22.80 Lakhs (Rs. 0.60 Lakhs* 38Districts) Activity 5: Mobility Support : Rs. 209 Lakhs (Rs. 5.5 Lakhs per District) Activity 6: Operational Cost: Rs. 3.80 Lakhs (Rs. 10,000* 38 Districts) Activity 7: Diets and contingency to De-addiction Centres: Rs. 84.14 Lakhs (Rs. 6.01 Lakhs * 14 De-addiction Centres)
	98	**Implementation of TeleMANAS**	**255.58**	**255.58**	**Approved Rs.255.58 lakhs** as per the details below: A lump sum amount of Rs 243.58 lakhs for remuneration for staff posted in the State Tele MANAS cells. 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

FMR Code	S.No	Scheme/ Activity	Amount Proposed (In Lakhs)	Amount Approved (In Lakhs)	GoI Remarks for RoP
					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)). **OOC:** Approved @ Rs. 12.00 lakhs p.a. for 2 State cells for following activities - Amount of Rs 9.6 lakhs for 2 State Tele MANAS cells for contingency and miscellaneous for 2 State Tele MANAS cell for 12 months Amount of Rs 2.4 lakhs for 2 State Tele MANAS cells for Internet and Telecom Vendor to State for 12 months.State to ensure linkage between DMHP & Tele MANAS and every month to review Tele MANAS at State level.
NCD.3	99	Geriatric Care at DH	180.00	180.00	**Approved Rs 180 Lakh** as per the details below: Activity 1: Rs 120 Lakh for Establishment (infrastructure) of New Geriatric units in 6 Districts @ Rs.20 lakhs per district 1. Mayiladuthurai 2. Tirupathur 3.Kancheepuram 4. Ranipet 5. Tenkasi 6. Kallakurichi Activity 2: Rs 60 Lakh for Establishment (equipment) of New Geriatric units in 6 Districts at Rs.10 lakhs per district 1. Mayiladuthurai 2. Tirupathur 3.Kancheepuram 4. Ranipet 5. Tenkasi 6. Kallakurichi
	100	Geriatric Care at CHC/SDH	0.00	0.00	-
	101	Geriatric Care at PHC/ SHC	0.00	0.00	-
	102	Community Based Intervention	0.00	0.00	-

FMR Code	S.No	Scheme/ Activity	Amount Proposed (In Lakhs)	Amount Approved (In Lakhs)	GoI Remarks for RoP
	103	State specific Initiatives and Innovations		-	
NCD.4	104	Implementation of COTPA - 2003	83.00	83.00	**Approved Rs 83 Lakh** as per the details below: **1.New activity:**Rs.45 lakhs for establishment of Tobacco Cessation centre in 18 districts @ Rs.2.5 lakhs per district. 2.Ongoing activity:Rs.38 lakhs for operational cost for Enforcement Squads @ Rs.1 lakh per district.
	105	Implementation of ToEFI Guideline	0.00	0.00	-
	106	Tobacco Cessation	76.00	76.00	Ongoing activity: **Approved Rs. 76 Lakhs** proposed towards Procurement of Drugs for already existing 20 districts, and newly approved 18 districts for Pharmacotherapy drugs for Nicotine Replacement Therapy (NRT) such as Nicotine Patches and Nicotine Gums, Bupropion and Varenicline based on their addiction level to quit the tobacco usage
NCD.5	107	NCD Clinics at DH	0.00	0.00	-
	108	NCD Clinics at CHC/SDH	0.00	0.00	-
	109	Cardiac Care Unit (CCU/ICU) including STEMI	3,200.00	3,200.00	**Approved Rs.3200 lakhs** for procurement of Cath Lab @ Rs.800 lakhs each to DH Tiruppur, Kallakurichi, Dindigul and Krishnagiri.

FMR Code	S.No	Scheme/ Activity	Amount Proposed (In Lakhs)	Amount Approved (In Lakhs)	GoI Remarks for RoP
	110	**Other NP-NCD Components**	**14,329.15**	**9,123.84**	**Approved Rs. 9,123.84 lakh** as per the details below: 1.Rs.3200 Lakhs for Procurement of LINAC at Kalaignar Hospital, Guindy, Chennai **2. Rs.3650 lakhs is not approved** for procurement of LINAC for DH Tiruvannamalai 3.Rs 385.80 Lakhs for procurement of USG with Sheer Wave Elastography management across 10 districts @ Rs 30 lakhs/DH and @ Rs 15,000 per PHC (BMI assessment (Weighing Scale, Height Stand, Measuring Tape).**Rs. 111 lakhs is not approved for BMI Measuring devices at Spoke(CHC and PHC level) across 10 selected Districts @ Rs 50,000 per CHC/SDH (BMI Kiosk)** 4. Rs 142.36 lakhs for establishment of Cough Clinics in 11 pilot districts 5. Rs.76 Lakhs for COPD drugs for 38 districts. 6. Rs. 1622.52 Lakhs for Targeted Immunotherapy for cancer patients for 18 centres. 7. Rs 994.31 lakhs for procurement of drugs and consumables for T1DM Patients under Child health Division **(Shifted to Sr.no 30)** 8.Rs.340.89 Lakhs for procurement of reagents and Consumables for cancer screening at HSC-HWC 9.Rs.1710 Lakhs for drugs and supplies for oncology/ CCU / ICU/ Day care for 38 Districts 10.Rs. 6.47 Lakhs for procurement of Glucometer Strips for 647 SHCs 11.Rs. 1666.80 lakhs for Mobility support for Population based screening across Rural & Urban.
	111	**State specific Initiatives and Innovations**			

FMR Code	S.No	Scheme/ Activity	Amount Proposed (In Lakhs)	Amount Approved (In Lakhs)	GoI Remarks for RoP
NCD.6	112	Haemodialysis Services	1,128.73	1,128.73	**Approved Rs. 1128.73 lakh** as per the details below: Activity 1: **New Activity** : Rs.700 Lakhs for procurement of 100 hemodialysis machines @ Rs. 7 Lakhs per machine Activity 2: Ongoing Activity: Rs.368.23 Lakhs for drugs and consumables Activity 3: Ongoing Activity: Rs. 60.50 Lakhs for operational cost of hemodialysis sessions for 135 dialysis centres
	113	Peritoneal Dialysis Services	856.28	856.28	Ongoing Activity : **Approved Rs.856.28 lakh** for procurement of CAPD bags as per existing RC @ Rs. 304.66 each for 281060 bags
NCD.7	114	Implementation of NPCCHH	79.94	79.94	**Approved Rs 79.94 Lakh** for establishment of Heat Stroke Management Units at Selected Medical College Hospital and District Hospital of Tamil Nadu for procurement of equipment and logistics- Unit Costs: 1. One Cold Tub @ Rs. 50,000 2. Two Rectal Thermometer (Adult) @Rs 300 each 3. Two Rectal Thermometer Paediatric @Rs. 300 each 4. One Rectal Temperature probe (for multi-parameter monitor) @Rs. 1,500 5. One Deep Freezer @ Rs. 1 Lakh 6. One Tarpaulin Sheet @Rs. 5000 7. Four Multi-parameter monitor @ Rs. 60,500 Total @ Rs. 3,99,700 per Facility for 20 Facilities, covering a total of 19 Districts of the State at a total cost of Rs. 79.94 Lakhs **The State should ensure optimal preparedness at PHCs and Block level facilities of these 19 districts and in all facilities of other districts of the state as well, leveraging resources from other sources.**
NCD.8	115	Implementation at DH	7.20	7.20	Ongoing activity. **Approved Rs.7.2 lakh** for Dental Materials & Consumables / Month - Rs.60,000/-

FMR Code	S.No	Scheme/ Activity	Amount Proposed (In Lakhs)	Amount Approved (In Lakhs)	GoI Remarks for RoP
	116	Implementation at CHC/SDH	175.00	175.00	**Approved Rs.175.00 Lakhs** for procurement of 50 dental chairs at Rs.3.50 Lakhs per unit.
	117	Mobile Dental Units/Van	0.00	0.00	-
	118	State specific Initiatives and Innovations			
NCD.9	119	Implementation of NPPC	30.00	30.00	**Approved Rs 30 Lakhs** for Establishment of Palliative Care Centres in - Mayiladuthurai and Tirupathur @ Rs.15 lakhs per center as per NPPC norms
NCD.10	120	Implementation of NPPCF	7.47	7.47	**Approved Rs.7.47 lakh** as per the details below: 1.As per norms, Rs. 0.75 lakh for diagnostic related requirements for 1 ongoing district. 2.An amount of Rs. 6.72 lakhs (@ Rs. 1.68 lakhs per district) for new laboratories to be established in 4 (four) new districts (Erode, Krishnagiri, Salem, and Vellore).
NCD.11	121	Screening of Deafness	380.00	380.00	**Approved Rs 380 Lakhs** for modification of infrastructure and equipment procurement in one block of each district.
	122	Management of Deafness	0.00	0.00	-
	123	State Specific Initiatives			
NCD.12	124	Support for Burn Units	251.57	251.57	**Approved Rs. 251.57 lakhs as per the details below:** **1.Infrastructure: New activity:** Rs 78 lakh for refurbishing of existing surgical wards into 4-bedded burn injury units under health system strengthening @ Rs 3L per unit for 26 units (3*26= 78L) **2.Equipment's: New activity:** Rs 173.57 lakh for purchase of equipment's under health system strengthening 1.Rs 130 L for purchase of equipment at 26 units @ Rs 5 L per unit (5*26= 130 L) 2.Rs 43.57 L for purchase of equipment for the skin bank at Sivakasi GH.

FMR Code	S.No	Scheme/ Activity	Amount Proposed (In Lakhs)	Amount Approved (In Lakhs)	GoI Remarks for RoP
	125	**Support for Emergency Trauma Care**	**3,482.03**	**3,481.03**	**Approved Rs 3481.03 lakhs** as per the details below: **1.Infrastructure: New activity:** Rs 153.34 lakh for establishing 4 new PREM (paediatric emergency care) centres and strengthening of 7 PREM units under health system strengthening 1.Rs 55.76 L for establishing 4 new PREM centres at Nanguneri, Thiruthuraipoondi, Nannilam, and Srivilliputhur to reduce long-distance referrals @ Rs 13.94 L per unit (13.94*4= 55.76 L) 2.Rs 97.58 L for strengthening of 7 PREM units at Kuzhithurai, Rajapalayam, Usilampatti, Pennagaram, Harur, and Mannargudi to manage high-acuity cases locally @ Rs 13.94 L per unit (13.94*7= 97.58 L **2.Equipment: New activity:** Rs 3081.54 lakh for procurement of equipment's at various centers under health system strengthening. 1.Rs 128.18 L for procurement of equipment for newly constructed 2 TAEI wards at Wallajahbad and Uthiramerur GH, Kancheepuram District @ Rs 64.09 L per unit. (64.09*2 = 128.18L) 2.Rs 2282.52 L for strengthening of trauma facilities at 4 Hub hospitals at a cost of Rs. 570.63 lakhs per centre (570.63*4= 2282.52 L) 3.Rs 388.28 L for strengthening of 4 Neurotrauma services through procurement of equipment in RGGGH Chennai, Thanjavur GH,Thiruvarur GH & Salem GH. @97.07 L per center (97.07*4= 388.28 L) 4.Rs 195 L procurement of Arthroscopy equipment for 3 units @ Rs.65 lakhs per unit (65 *3=195L) 5.Rs 75.56 L for procurement of C Arm at 3 units @ Rs.25.52 lakhs per unit. (25.52*3=75.56L) 6.Rs 12 L for procurement of F FAST equipment at Sankagiri GH for management of Trauma patients.

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					Other operating cost: Total Amount of Rs 246.15 lakh as operational cost as ongoing activity 1.Rs 246.15 L as ongoing activity for effective in-hospital care is ensured in 113 TAEI centers @ Rs 2.18 L as operational cost per unit (2.18*113=246.15)
NCD.13	**126**	**Implementation of State specific Initiatives and Innovations**		-	
NCD Sub Total			**32,924.65**	**27,562.55**	
Health System Strengthening (HSS) - Urban					
HSS(U).1	**127**	**Operationalisation of Ayushman Arogya Mandirs(AAM) - Urban**	**212.40**	-	**Rs. 212.40 lakhs is not approved** as operational costs for 708 USHC AAM @ Rs.2500/- per USHC for 12 months.
	128	**Wellness Activities at AAMs- Urban**	-	-	-
	129	**Teleconsultation Facilities at AAMs-Urban**	-	-	-
HSS(U).2	**130**	**ASHA (including ASHA Certification and ASHA benefit package)**	**710.64**	**710.64**	**Approved Rs.710.64 lakhs** for following activities: 1. Rs. 676. 80 lakhs for filling CBAC form @ Rs. 10 for 3000 no per WHV for 2256 WHVs. 2. Rs.33.84 lakhs for Uniforms for WHV @ Rs.1500 per field staff for 2 sets of uniform, for 2256 WHVs
	131	**MAS**	**167.45**	-	**Approved Rs 167.45 lakhs** as Untied grants for 3349 MAS Groups @Rs.5000/MAS Group.**(Shifted to Untied Funds Sr.no 149)**
	132	**JAS**	-	-	-
	133	**RKS**	-	-	-

FMR Code	S.No	Scheme/ Activity	Amount Proposed (In Lakhs)	Amount Approved (In Lakhs)	GoI Remarks for RoP
	134	Outreach Activities	-	-	-
	135	Mapping of Slums and Vulnerable Population	-	-	-
	136	Other Community Engagement Components	-	-	-
HSS(U).3	137	Urban PHCs/ Polyclinics	373.72	94.12	**Approved Rs. 94.12 Lakhs** for following activities: 1.Rs.4.80 lakhs towards Rent for 4 UPHCs at Rs.10000 per month for 12 months for two PHCs each in Karur, Tiruvannamalai & Chennai Districts 2.Rs.89.32 lakhs towards Specialist Hiring charges for 154 Polyclinics 3.**Rs.279.60 lakhs is not approved** for Operational Expenses @ Rs.5000/Month/UPHC for 466 UPHCs for 12 months
	138	Urban CHCs and Maternity Homes	39.90	-	**Rs.39.90 lakhs is not approved** towards Operational Expenses for 39 UCHCs @ Rs 1 lakh per UCHC for year
HSS(U).4	139	Quality Assurance Implementation & Mera Aspataal	1,697.49	1,697.49	**Approved Rs.1697.49 lakhs** for the following activities: 1. Rs. 12.50 lakhs for designing and supply of display board on NQAS certified facilities for 250 urban facilities, including UPHC, UCHC, and UHWC NQAS certified facilities @ of Rs. 5000/facility. 2. Rs.600.95 lakhs for Certifications, Re-certification (National & State Certification) under NQAS (a) Rs.480.2 Lakhs for NQAS External assessment of 10 UCHC, 100UPHC,and 360UHWCs (b) Rs. 120.75 Lakhs for NQAS State assessment of 15 UCHC, 200 UPHC, and 500 UHWC 3. Rs.14.04 lakhs for SQAU visit to target facilities. (This is a PM Activity. Expenditure to be booked under sl no 194)

FMR Code	S.No	Scheme/ Activity	Amount Proposed (In Lakhs)	Amount Approved (In Lakhs)	GoI Remarks for RoP
					4. Rs. 1070 lakhs for incentivisation of 10 UCHC, 250 UPHC, and 360 UHWCs on attainment of NQAS Certification.
	140	**Kayakalp**	**536.68**	**536.68**	**Approved Rs.536.68 lakhs** for FY 2026-27 for the following activities. 1. Rs.431.40 for Kayakalp award money for 867 facilities. 2. Rs. 105.28 lakhs for Kayakalp peer and external assessment
	141	**Swacch Swasth Sarvatra**			
HSS(U).5	**142**	**Remuneration for all NHM HR**	**17,522.66**	**17,522.66**	**DBT: Approved Rs 17,522.66 lakhs is for:** • 6055 positions of service delivery staff and 103 programme management staff • Lump sum budget for engaging support staff and for data entry operations • Annual Increment as per the principles mentioned in the HRH Guidelines • EPF (Employer's contribution) @ 13.36% for staff drawing salary <= Rs 15000 pm as on/ after 1st April 2015. The State Administrative Officer looking after salary must ensure proper calculation and disbursal as mentioned in JS (P)'s letter dated 8 March 2016 (D.O.No.G.27034-8/2015-NHM(F)). All posts are approved for 12 months in principle. Details of the approved posts and budget are provided in HRH Annexure. Individual salaries are to be

FMR Code	S.No	Scheme/ Activity	Amount Proposed (In Lakhs)	Amount Approved (In Lakhs)	GoI Remarks for RoP
					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-NIIM-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)**	**147.66**	**147.66**	**Approved Rs. 147.66 lakhs** for performance-based incentives for UHNs on RCH indicators.
	144	**Incentives under CPHC**	**270.72**	**270.72**	**Approved Rs. 270.72 lakhs** as Team Based Incentives @ Rs.1000/Month per WHV for 2256 WHVs
	145	**Costs for HR Recruitment and Outsourcing**	**-**	**-**	-
HSS(U). 6	**146**	**Planning and Program Management***	**62.21**	**62.21**	**OOC:** **Approved Rs 62.21 lakhs** for the activities approved under sl no 146 as per the details mentioned in the PM Annexure. State to ensure that the budget approved under this head is not utilised for construction, engaging HR and purchasing vehicle. State to also ensure that overall expenditure under PM and M&E, including PM-HRH is within 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.

FMR Code	S.No	Scheme/ Activity	Amount Proposed (In Lakhs)	Amount Approved (In Lakhs)	GoI Remarks for RoP
HSS(U).7	147	PPP	-	-	-
HSS(U).8	148	State specific Programme Innovations and Interventions			
HSS(U).9	149	Untied Fund	910.30	1,077.75	**Approved Rs. 1077.75 lakhs** as Untied fund for following activities: 1. Rs. 424.80 lakhs as untied fund for JAS for 708 USHC-AAM @ Rs. 60,000 per facility per year. 2. Rs. 466.0 lakhs as untied fund for JAS for 466 UPHCs @ 1 lakh per facility per year. 3. Rs. 19.5 Lakhs as untied fund for RKS for 39 UCHCs @ Rs. 50,000 per facility per year. 4. Rs 167.45 lakhs as Untied grants for 3349 MAS Groups @Rs.5000/MAS Group. **(Shifted from Sr. no. 131)**
HSS-Urban Sub Total			**22,651.82**	**22,119.93**	
Health System Strengthening (HSS) Rural					
HSS.1	150	Operationalisation of Ayushman Arogya Mandirs (AAM) - Rural	2,000.08	1,998.89	**Approved Rs. 1998.89 lakhs** for the following activities:- 1. Rs. 833.20 lakhs as a one-time cost for upgradation of 2083 SHCs to AAM-SHC @Rs. 0.40 lakh per facility. (Rs. 0.40*2083= Rs. 833.20 lakhs) 2. Rs. 1148.18 lakhs for conducting Ayushman Arogya Shivir: - A) Rs. 681.48 lakhs for 1893 PHC/UPHC @Rs. 3,000 per month per PHC/UPHC B) Rs. 466.70 lakhs for 5,556 SHC @Rs. 700 per month per SHC 3. Rs. 17.51 lakh for Certificate course in Community health- Bridge course, for 1020 MLHPs in 17 batches @Rs. 1.03 lakh per batch (as per GoI norms)
	151	Wellness Activities at AAMs- Rural	-	-	-

FMR Code	S.No	Scheme/ Activity	Amount Proposed (In Lakhs)	Amount Approved (In Lakhs)	GoI Remarks for RoP
	152	Teleconsultation Facilities at AAMs-Rural	-	-	-
	153	CHO Mentoring	23.76	23.76	**Approved Rs. 23.76 lakhs** for incentive of 55 state mentors under CHO Mentoring @Rs. 100 per CHO mentored per month for 12 months (One state mentor is mentors 36 CHOs)
HSS.2	154	Screening for Blood Disorders	6,227.84	6,065.94	**Approved Rs.6065.94 lakhs** as per the details below: 1. Rs.60.89 Lakhs for procurement of Hydroxyurea tablet 500 mg @ Rs. 3.5/tablet for 573 patients, Folic Acid @ Rs. 1/tablet for 573 patients, Deferasirox 400 mg @ Rs. 15/tablet for 473 patients and Deferprione 250 mg @ Rs. 12/tablet for 73 patients. Rs. 90.816 Lakhs approved for Leucodepleted filter @ Rs. 1200 each for 473 patients (20 transfusions per patient per year). 2. Rs. 3979.22 lakhs for procurement of Factor VIII @ Rs. 5.04/IU for 22579200 Units, Factor IX @Rs. 6.18/IU for 8460000 Units, APPC @ Rs. 56/IU for 1680000 Units, Factor VII @ Rs. 41000/mg for 3360 mg. 3. Rs. 1773.50 lakhs for 400 children (250 children - 210 children for Haemophilia A and 40 children for Haemophilia B) and extended the 150 children (140 children for Haemophilia A and 50 children for Haemophilia B) for procurement of Factor VIII @ Rs. 7.854/IU and Factor IX @ Rs. 6.18 for Haemophilia Prophylaxis. 4. Rs. 161.51 Lakhs for hemoglobinopathy screening using HPLC machines at DH level. The target population is 64604 pregnant women attending ANC. State to upload all screening data on SCD National Portal.
	155	Support for Blood Transfusion	9.24	9.24	**Approved Rs 9.24 Lakhs**, @Rs.1,200 per camp for 770 camps. State to register data on national portal.

FMR Code	S.No	Scheme/ Activity	Amount Proposed (In Lakhs)	Amount Approved (In Lakhs)	GoI Remarks for RoP
	156	Blood Bank/BCSU/BSU/Thalassemia Day Care Centre	-	-	-
	157	Blood Collection and Transport Vans	48.00	-	Rs. 48 lakhs is not approved as Dte.GHS supports this activity
	158	Other Blood Services & Disorders Components	625.00	30.00	1. Approved Rs 30 Lakhs for Consumables for Coagulation Labs: testing of 2500 Haemophilia patients at 03 Coagulation Labs @ Rs. 10 Lakh each lab. 2. New Activity:Rs.595 Lakhs for implementation of NAAT testing is pending for approval as pending for HTA norms.

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HSS.3	159	**ASHA (including ASHA Certification and ASHA Benefit Package)**	**2,822.77**	**2,822.72**	**Approved Rs. 2822.72 lakhs for the following activities:-** 1. Rs.39.75 Lakhs for ASHA uniforms at Rs.1500 per ASHA for 2 sets of uniform for 2,650 ASHAs. 2.Rs.130.70 Lakhs for Uniforms for WHV (working as Rural ASHA) @ Rs.1500 per field staff for 2 sets of uniform, for 8713 WHVs. 3. Rs. 9.71 lakh towards reimbursement of annual premium under Pradhan Mantri Jeevan Jyoti Bima Yojana (PMJJBY) for 2,226 ASHAs @ Rs.436 per ASHA per year. 4. Rs. 43,160 towards reimbursement of annual premium under Pradhan Mantri Suraksha Bima Yojana (PMSBY) for 2,158 ASHAs @ Rs.20 per ASHA per year. 5. Rs. 28.23 lakh towards reimbursement of annual premium under Pradhan Mantri Shram Yogi Mandhan (PMSYM) for 1650 ASHAs @ Rs.1711 per ASHA per year. 6. Rs. 2613.90 lakh as incentive for filling of CBAC form for 8713 WHV (working as Rural ASHAs) @ Rs. 10 per CBAC form filled per WHV (working as Rural ASHAs), one WHV fills 3000 CBAC forms.
	160	**VHSNC**	-	-	-
	161	**JAS**	-	-	-
	162	**RKS**	-	-	-
	163	**Other Community Engagements Components**	**349.20**	**349.20**	**Approved Rs. 349.20 lakhs** for Ayushman Arogya Shivir at 388 CHCs @Rs 7500 per CHC per month

FMR Code	S.No	Scheme/ Activity	Amount Proposed (In Lakhs)	Amount Approved (In Lakhs)	GoI Remarks for RoP
HSS.4	164	**District Hospitals**	**1,392.50**	**1,392.50**	**New activity.** **Approved Rs 1392.50 lakhs** for construction of additional buildings at 5 district hospitals: • DH Cuddalore and GH Kancheepuram (Cuddalore District): Total project cost approved is Rs.1,200.00 lakhs, with Rs.400.00 lakhs (33% of total) each is approved for FY 2026–27 • DH Chengalpattu (Chengalpattu District) and DH Padmanabapuram (Kanyakumari): Total project cost approved is Rs.500.00 lakhs each, with Rs.200.00 lakhs (40% of total) each is approved in FY 2026–27. • DH Thoothukudi - Extension of Old Block (Thoothukudi District): Total project cost approved is Rs Rs.385.00 lakhs, with Rs.192.50 (50% of total) is approved for FY 2026–27.
	165	**Sub-District Hospitals**	**2,840.00**	**2,840.00**	**Approved Rs.2840 lakhs** as per the details below: 1. Ongoing activity. Approved remaining amount of Rs 600 lakhs in FY 2026-27 for Construction of additional building at Polur SDH, Tiruvannamalai district and Thiruthuraipoondi SDH, **2. New activity.** Approved total project cost of Rs 4100 lakhs for the Construction of Additional Buildings at 5 Sub District Hospitals. Amount approved for FY 2026-27 is Rs 1640 lakhs for: • GH Gandharvakottai: Total project cost approved is Rs.1,200.00 lakhs, with Rs.400.00 lakhs approved for 2026–27 (33%). • GH Devakottai and GH Srivilliputhur: Total project cost approved is Rs.900.00 lakhs each, with Rs.400.00 lakhs each approved for 2026–27 (44%). • GH Veerakelam Puthur: Total project cost approved is Rs.500.00 lakhs, with

FMR Code	S.No	Scheme/ Activity	Amount Proposed (In Lakhs)	Amount Approved (In Lakhs)	GoI Remarks for RoP
					Rs.200.00 lakhs approved for 2026–27 (40%). • GH Ponneri (Thiruvallur District): Total project cost approved is Rs.600.00 lakhs, with Rs.240.00 lakhs approved for 2026–27 (40%). **New Activity** Activity 3: Rs.600 Lakhs for the procurement of equipment for 6 SDH (Chengam, Tirumangalam and Sathyamangalam, Athur, Polur and Tiruthuraipoondi) @ Rs. 100 Lakhs each SDH.
	166	**Community Health Centers**	**2,729.36**	**2,729.36**	**Approved Rs. 2729.36 lakhs** as per the details below: **1. New Activity:** Rs 265 lakhs for procurement of physiotherapy equipment for 388 centres @Rs 68,300 per centre as part of CHC strengthening 2. Ongoing activity. Rs 2,464.36 lakhs for Payment to CTF
	167	**Primary Health Centers**	**220.02**	**220.00**	**New activity.** **Approved Rs.220.00 lakhs for:** 1. Construction of SN Quarters at Hongalvady, Perumparai, Valparai, and Vathalmalai PHCs @ Rs.40.00 lakhs each. 2. Construction of MO Quarters at Gudiyalathur and Hongalvady PHCs @ Rs.30.00 lakhs each.
	168	**Sub-Health Centers**	**338.16**	**338.16**	Ongoing activity. **Approved Rs 338.16 lakhs** as rent for 1,409 Ayushman Arogya Mandir functioning in rented buildings @Rs 2000 per month for 12 months.

FMR Code	S.No	Scheme/ Activity	Amount Proposed (In Lakhs)	Amount Approved (In Lakhs)	GoI Remarks for RoP
	169	**Other Infrastructure/ Civil works/Expansion etc.**	**7,116.55**	**7,116.55**	**Approved Rs.7116.55 lakhs as per the details below:** 1. Ongoing activity. Approved for remaining amount of Rs 900 lakhs for Construction of additional drug ware house at Thanjavur, Tirunelveli and Madurai. **2. New activity.** Total Project cost approved for Construction of Kitchen Buildings is Rs. 1,180.00 lakhs out of which Rs 1065 lakhs is approved for FY 2026-27 for 12 hospitals: • IOG Chennai and Raja Mirasudhar Hospital, Thanjavur @ Rs.200.00 lakhs each • DHQH Gudiyatham, DHQH Padmanabhapuram, GH Ponneri, and GH Kanchipuram @ Rs.100.00 lakhs each • DH Usilampatti, GH Vedaranyam, GH Thiruvanamalai, DH Tindivanam and DH Tirukovilur @ Rs.30.00 lakhs each • DH Tiruthani: @ Rs.230.00 lakhs out of which Rs.115.00 lakhs approved for 2026-27 **3. New activity.** Approved Rs 70 lakhs for Construction of a Laundry facility in Erode DHQH **4. New activity:** Approved Rs 280 lakhs for Construction of Mortuary Blocks. at GH Melur, GH Sankaran Kovil, DH Kulithalai, and GH Kangeyam @ Rs.70.00 lakhs each. **5. New activity.** Total cost of Rs.228.80 lakhs with 50% of the cost Rs.114.40 lakhs is approved for Construction of Regional Vaccine Store at Trichy. **6. New activity.** Approved amount of Rs. 5198 lakhs as total project cost for construction of hostel and academic buildings for ANM Schools in 5 districts. Out of the total project cost Rs 2189 lakhs is approved for FY 2026-27:

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					• Academic Building for ANM Training School at DH Cuddalore (Cuddalore District): Total amount approved is Rs.900.00 lakhs, with Rs.400.00 lakhs approved for 2026–27 (44%). • Academic Building for ANM Training School at Govt. Kilpauk Hospital (Chennai District): Total amount approved is Rs.2,000.00 lakhs, with Rs.800.00 lakhs approved for 2026–27 (40%). • Hostel Building for ANM Training School - Madurai (Madurai District): Total amount approved is Rs.698.00 lakhs, with Rs.349.00 lakhs approved for 2026–27 (50%). • Hostel Building for ANM Training School at Govt. Kasturba Gandhi Hospital (Chennai District): Total amount approved is Rs.800.00 lakhs, with Rs.320.00 lakhs approved for 2026–27 (40%). • Hostel Building for ANM Training School at DH Kancheepuram (Kanchipuram District): Total amount approved is Rs.800.00 lakhs, with Rs.320.00 lakhs approved for 2026–27 (40%). **7. New activity :** Approved total project cost of Rs 300 lakhs with 50% amount of 150 lakhs for FY 2026-27 for Construction of a Radiology Block in Govt. Raja Mirasudhar Hospital at Thanjavur **8. New activity**: Approved total project cost of Rs 1800 lakhs for 3 drug warehouse units. Out of which with 50% of total amount i.e 900 lakhs is approved for FY 2026-27 **9. New activity:** Approved Rs 451.49 lakhs to install and upgrade fire detection and suppression systems **10. New activity.** Approved Rs 519 lakhs for procuring Mechanised laundry equipment at 87 institutions across the State based on gap analysis. **11. New activity**

FMR Code	S.No	Scheme/ Activity	Amount Proposed (In Lakhs)	Amount Approved (In Lakhs)	GoI Remarks for RoP
					Approved Rs 176.78 lakhs for CSSD to 64 institutions across the State based on gap analysis: • 50 Vertical Autoclaves @ Rs.1.21 Lakhs per unit • 12 Horizontal Autoclaves @ Rs.4.69 Lakhs per unit • 2 Full Set of CSSD Equipment @ Rs.30 Lakhs per unit. **12. New activity.** Approved Rs 185 lakhs for provision of Generator Back up for Uninterrupted Power Supply in Rural, Hilly & Tribal Areas in 22 PHCs @ Rs.8.41 Lakhs per unit. **13.New Activity** Approved Rs.115.87 lakhs for provision of Microwave Ablation Machine for Radiology Centres in four Government Hospitals across the State @ Rs.23.17 Lakhs
	170	**Renovation/Repair/Upgradation of Facilities for IPHS/NQAS/LaQshya/ MUSQAN/SUMAN Compliance**	-	-	-
HSS.5	**171**	**Advance Life Saving Ambulances**	**1,360.00**	**1,360.00**	**Approved Rs.1360 lakhs** as opex cost for 310 ALS @Rs.4,38,7,097 per ALS vehicle.
	172	**Basic Life Saving Ambulances**	**4,420.00**	**4,420.00**	**Approved Rs 4420 lakhs** as opex cost for 1043 BLS @Rs.4,23,778 per BLS vehicle.
	173	**Patient Transport Vehicle**	-	-	-
	174	**Other Ambulances**	-	-	-

FMR Code	S.No	Scheme/ Activity	Amount Proposed (In Lakhs)	Amount Approved (In Lakhs)	GoI Remarks for RoP
HSS.6	175	Quality Assurance Implementation & Mera Aspataal	8,536.00	8,519.83	**Approved Rs. 8519.83 lakhs** for the following activities: 1. Rs. 117.50 lakhs for designing and supply of display board on 2350 NQAS certified facilities, including AAM-SHC, AAM-PHC, CHC, SDH, and DH NQAS certified facilities @ of Rs. 5000/facility. Rs 38 lakh for gap closure activities of 12 newborn and paediatric facilities to achieve NQAS Certification 2. Rs.23.40 lakhs for SQAU visit to target facilities @ Rs.11,700 per visit per facility per head of SQAU for 3 days x 120 target facilities in a year per visit by SQAU (This is a PM Activity. Expenditure to be booked under sl no 194) 3. Rs.55.68 lakhs for RC & DC mentoring visits. 4. Rs. 2147.25 lakhs for NQAS External and State assessment of public health facilities as mentioned below: - Rs. 1680.5 lakhs for NQAS External assessment of 90 DH/SDH, 50 CHC, 500 AAM-PHC, 1700 AAM-SHC, and 560 facilities recertification. - Rs. 466.75 lakhs for NQAS state assessment of 86 DH/SDH, 75 CHC, 750 AAM-PHC, and 1650- AAM-SHC. Calculation error- amount should be 2147.25 (1680.5+466.75) instead of 2115.25 lakhs 5. Rs. 5895 lakhs for incentives for 12DH, 75 SDH, 75 CHC, 750 AAM-PHC, and 1500 AAM-SHC. 6. Rs. 243 lakhs for incentive under MusQan certification for the following activities : - Rs 84.00 lakhs for 7 MCH - Rs. 72 lakhs first surveillance incentive for 1MCH, 4DH & 4 SDH and - Rs. 87 lakhs second surveillance for 7DH, 2 MCH.

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	176	**Kayakalp**	**3,210.80**	**3,210.80**	**Approved Rs 3210.80 lakhs** for the following activities: 1. Rs. 671.10 lakhs for Kayakalp peer and external assessment of facilities 2.Rs.2,539.70 lakhs for Kayakalp incentives.
	177	**Swacch Swasth Sarvatra**			
HSS.7	178	**Comprehensive Grievance Redressal Mechanism**	**280.22**	**280.22**	Ongoing activity. **Approved Rs.280.22 lakhs** as per the details below: 1. Rs 253 lakhs as operational cost for Comprehensive Grievance Redressal Mechanism and Centralised Control for Comprehensive Grievance Redressal Mechanism. 2. Rs.27.22 for operational cost of a Centralised Control Room at the State level to monitor RBSK and MMU operations.
	179	**PPP**	**116.40**	-	**Rs.116.40 lakhs** is not approved for the following: 1. Ongoing activity. **Rs.41.40 Lakhs is not approved** for implementation of screening and treatment activities through 3 NGOs @ Rs.13.80 Lakhs per NGO. 2. Ongoing activity. Tribal Bed Grant Scheme through NGOs – **Rs.75.00 Lakhs is not approved** for implementation of the Tribal Bed Grant Scheme through 2 NGOs at Rs.37.50 Lakhs per NGO.
	180	**Free Drugs Services Initiative**	**16,307.95**	**16,307.95**	**Approved Rs. 16307.95 lakhs** for following activities: 1.Rs.4000.00 lakhs for procurement of free medicines for 2336 PHCs. 2.Rs.506.25 lakhs for procurement of essential medicines for 405 units (40 camps/MMU/month) @ Rs. 1.25 lakhs/MMU. 3.Rs. 2500.00 lakhs for procurement of free medicines for 299 District Hospitals and Sub-District Hospitals.

FMR Code	S.No	Scheme/ Activity	Amount Proposed (In Lakhs)	Amount Approved (In Lakhs)	GoI Remarks for RoP
					4.Rs. 25.00 lakhs for procurement of medicine for 25 MPCs @ 1.00 lakhs/MPCs. 5.Rs.708.00 lakhs for procurement of medicines for 708 urban health facilities @ Rs. 1.00 lakhs/facility. 6.Rs 1398.00 lakhs for procurement of free medicines for 466 UPHCs @Rs.3.00 lakhs/UPHC. 7.Rs. 156.00 lakhs for procurement of EDL & NCD medicines for 39 UCHCs @ Rs.4.00 lakhs/UCHC. 8.Rs. 1443.00 lakhs for procurement of NCD medicines & supplies for 1443 PHCs @ Rs.1.00 lakh/PHC. 9.Rs. 1399.50 lakhs for procurement of NCD medicines & supplies for 9330 HSCs @ Rs.15000/HSC. 10.Rs. 38.00 lakhs for procurement of NPHCE medicines for 38 districts @ Rs.1.00 lakh/district. 11.Rs. 38.00 lakhs for procurement of Oral Morphine Tablet for 38 districts @ Rs.1.00 lakh/district. 12.Rs.380.00 lakhs for procurement of NCD medicines for NCD clinics in 38 districts. 13.Rs. 3393.00 lakhs for NCD medicines & supplies for District 388 CHC and 262 SDH @ Rs.5.22 lakhs/facility. 14.Rs. 323.20 lakhs for RBSK medicines @ Rs. 0.4 lakhs/ unit for 808 unit. Medicines is subject to following conditions: * The medicines should be from IPHS EMLs. * The medicines should be procured for DH, SDH, CHC, UCHC, PHC, UPHC, UAAM and AAM- SHC. *The medicines should be quality tested from NABL accredited labs.

FMR Code	S.No	Scheme/ Activity	Amount Proposed (In Lakhs)	Amount Approved (In Lakhs)	GoI Remarks for RoP
	181	**Free Diagnostics Services Initiative**	7,943.36	7,609.36	**Approved Rs.7609.36 lakhs as per the details below:** **New Activity** Activity 1: Rs. 522.25 Lakhs for procurement of 25 X-ray machines(300 mA) and CR Systems @ Rs. 20.89 Lakhs each unit. Activity 2: Rs. 255 Lakhs for procurement of 03 Digital Radiography machines for Apex Hospitals @ Rs. 85 Lakhs each. (Unit cost Rs. 69 Lakhs plus CAMC on turnkey project) Activity 3: State has proposed Rs. 594 Lakhs for procurement of 02 CT Scan machine (16 Slice) at DH Vedaranyam and DH Koilpatti. However, there is a calculation error and the proposal was approved for Rs. 500 Lakhs. Accordingly, an amount of Rs. 500 Lakhs (IN 250 Lakhs x 2) is approved. Rs. 400 Lakhs for procurement of additional CT Scan machine (64 slice) at Apex Hospital Chennai is approved. Activity 4: Rs. 262.95 Lakhs for procurement of pathology department equipment (Histopathology equipment) for 15 DH @ Rs. 17.53 Lakhs each DH. The proposal is as per the FDSI guidelines. Activity 5: Rs. 24 Lakhs for procurement of Fluoroscope for GH Karur @ Rs. 24 Lakhs.The proposal is for replacement of old unserviceable equipment. **Activity 6: Rs. 240 Lakhs is not approved** for procurement of Digital Mammography Unit at DH Palani, DH Tirukovilur, DH Tiruthani and DH Cheyyar @ Rs. 60 Lakhs. The state may utilize PM-CARES Funds for this activity. Ongoing Activity Activity 7: The amount of Rs. 4948.23 Lakhs for procurement of reagents and consumable is approved. Activity 8: Rs. 39.37 Lakhs for procurement of LIMS consumables (Printer, barcode label roll and thermal wax ribbon) for 37 units is approved.

FMR Code	S.No	Scheme/ Activity	Amount Proposed (In Lakhs)	Amount Approved (In Lakhs)	GoI Remarks for RoP
					Activity 9: Rs. 450 Lakhs for sample transportation @ Rs. 06 per KM and an honorarium of Rs. 100 for sample transporters is approved. Activity 10:Rs. 78.75 Lakhs for procurement for 35 Urban- PHCs @ Rs. 2.25 Lakhs each is approved. Activity 11: Rs. 25 Lakhs for procurement of rapid diagnostic kit reagents and consumables for NCD programme and equipment for RBSK screening for 25 Multi-Purpose Centres (MPC)@Rs. 1 Lakh each is approved. Activity 12: Rs. 103.81 Lakhs for implementation of EQAS for District Hospitals, Sub-District Hospitals, CHCs, PHCs and SHCs is approved
	182	**Mobile Medical Units**	**1,099.65**	**1,099.65**	**Approved Rs.1099.65 lakhs** as per the details below: 1.Ongoing activity. Rs.1,012.50 Lakhs for operational cost of 405 MMUs, including Rs.2.40 Lakhs per unit for mobility and Rs.10,000 per unit for contingency. 2. Ongoing activity Rs.84.00 Lakhs as operational cost for Tribal Mobile Medical Units operated through 20 NGOs in 15 districts at Rs.4.20 Lakhs per unit. **3. New activity** Rs.3.15 Lakhs for establishment of a Tribal Mobile Medical Unit in Tiruppur.
	183	**State specific Programme Interventions and Innovations**		**-**	
HSS.8	**184**	**Biomedical Equipment Management System and AERB**	**1,676.32**	**1,676.32**	Ongoing Activity: **Approved Rs.1676.32 lakhs** as per the details below: Activity 1:Rs. 5 Lakhs for maintenance of ophthalmic equipment Activity 2:Rs. 1671.32 Lakhs for maintenance of medical equipment for an asset value of Rs. 102.89 Cr

FMR Code	S.No	Scheme/ Activity	Amount Proposed (In Lakhs)	Amount Approved (In Lakhs)	GoI Remarks for RoP
HSS.9	185	**Remuneration for all NHM HR**	**1,08,224.88**	**1,07,583.48**	**DBT: Approved Rs 1,07,583.48 lakhs** as per the details below: • 35456 positions of service delivery staff and 1602 programme management staff • Lump sum budget for engaging support staff and for data entry operations • Lump sum budget of Rs 400 lakhs for engaging specialists. State to refer to the D.O. letter (D.O.No.Z.18015/6/2016-NHM-II (Pt. III)) from AS&MD dated 30 June 2017 for details. • 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)). All posts are approved for 12 months in principle. Details of the approved posts and budget are provided in HRH Annexure. Individual salaries are to be calculated by the State based on principles mentioned in the HRH Guidelines. 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.
	186	**Incentives (Allowance, Incentives, Staff Welfare Fund)**	**2,816.56**	**2,630.59**	**Approved Rs.2630.59 lakhs** as per the details below: **DBT:** 1. Rs 360.22 lakhs for performance-based incentives to 10,969 WHVs for cancer screening and referral for FY 2026-27. 2. Ongoing activity. Rs 361.14 Lakhs for incentives for 463 Physiotherapists for

FMR Code	S.No	Scheme/ Activity	Amount Proposed (In Lakhs)	Amount Approved (In Lakhs)	GoI Remarks for RoP
					home-based palliative care and physiotherapy services for FY 2026-27. 3. Ongoing activity. Rs 361.14 Lakhs for incentives for 463 Staff Nurses for home-based palliative care services for FY 2026-27. 4. Ongoing activity: Rs. 75.60 Lakh for incentives of peer support incentives for 42 Treatment sites as per NVHCP norms (Rs.15,000 per month per treatment site). The treatment services under NVHCP has to be scaled up to 74 treatment sites 5. Rs.17.64 Lakhs for incentives under NVHCP for Medical Officers, Pharmacists, Data Entry Operators and Lab Technicians of treatment site under NVHCP as per NVHCP norms. 6. Ongoing Activity. Rs 376 lakhs for follow-up visits for children. . 7. Ongoing activity. Rs 108.97 Lakhs for incentives for frontline workers. 8. Ongoing Activity. Rs 54.48 Lakhs for prophylactic distribution of ORS under STOP Diarrhoea 2026 Campaign. **OOC:** 9. Ongoing activity. Rs 805 lakhs for all service delivery HRH and Rs 105 lakhs for all programme management HRH under NHM and NUHM as staff welfare fund for FY 2026-27. States may explore the modalities through which Bihar/ Chhattisgarh have provided insurance to the NHM HRH. 10.Ongoing activity. Rs.185.96 Lakhs for non monetary incentives @Rs 50/Peer Educator/ month for 12 months for 2 Peer Educators/school in 15,497 schools. (Only to be given in non monetary form.) **(Shifted to RCH 5.0 at S.No 38 Peer Education in OOC)** **11. New activity:** Rs. 5.40 Lakh for three new Treatment Centres with high case load of Hepatitis B & C @Rs.1.8 Lakhs per annum as per NVHCP norms (Rs.15,000 per month per treatment site).

FMR Code	S.No	Scheme/ Activity	Amount Proposed (In Lakhs)	Amount Approved (In Lakhs)	GoI Remarks for RoP
					The treatment services under NVHCP has to be scaled up to 74 treatment sites
	187	**Remuneration for CHOs**	**10,911.42**	**10,911.42**	**DBT: Approved** Rs 10,911.42 lakhs for 7291 MLHPs 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**	**2,384.37**	**2,384.37**	**Approved Rs. 2384.37 lakhs** for the following activities:- 1.Rs. 655.05 lakhs for Performance based incentive for total 7291 MLHPs/ CHOs. Rs. 581.76 lakhs for 4848 CHO @Rs. 1000 per month for 12 months and Rs. 73.29 lakhs for 2443 CHOs @Rs. 1000 per month for 3 months. 2. Rs. 365.76 lakh as team-based incentive for total 4848 MPW-Male/ Grade-2 health inspectors. Rs. 293.76 lakhs to 2448 MPW-Male/ Grade-2 health inspectors @Rs. 1000 per month for 12 months and Rs. 72 lakhs for 2400 MPW-Male/ Grade-2 Health inspectors @Rs. 1000 per month for 3 months 3. Rs. 318 lakh for Team based incentive for 2650 Rural ASHAs @Rs. 1000 per month/ ASHA for 12 months. 4. Rs. 1045.56 lakh for Team based incentive for 8713 WHV (working as Rural ASHAs) @Rs. 1000 per month/WHV for 12 months.
	189	**Costs for HR Recruitment and Outsourcing**	**545.72**	**523.44**	DBT: **Approved Rs.523.44 lakhs** as per the details below: 1.Budget of Rs 431.12 lakhs for hiring of echocardiography and radiography services for FY 2026-27. **2.Rs. 19.44 lakhs for hiring of counsellors is not approved.** The State may utilize the existing manpower in DH for the same. 3.Ongoing activity. Budget of Rs 44.32 lakhs for hiring of IT developer services for maintenance of PICME application for FY 2026-27. (This is PM Activity.

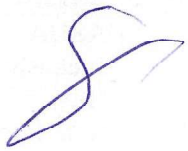
FMR Code	S.No	Scheme/ Activity	Amount Proposed (In Lakhs)	Amount Approved (In Lakhs)	GoI Remarks for RoP
					Expenditure for PM activities to be booked under sl no 194) 4.Budget of Rs 48 lakhs for hiring of radiology services for PACS tele-radiology hub for FY 2026-27.
	190	**Human Resource Information Systems (HRIS)**			
HSS.10	**191**	**DNB Courses for Medical Doctors**	**1,058.51**	**1,058.51**	**Approved Rs.1058.51 lakhs** as per the details below: **1.New activity.** Rs 80 lakhs for Infrastructure Development for DNB Training as per GOI norms for provision of classrooms, demo rooms, library, hostel facilities, furniture, and training materials at Virudhachalam GH and Paramakudi GH at Rs.40 Lakhs per centre **OOC:** Ongoing activity 2.Budget of Rs 441.31 lakhs for FY 2026-27 for the stipend of DNB candidates for 26 seats. The stipend must be provided as per NBE norms or basic stipend according to state government policy/norms. 3.Budget of Rs 537.2 lakhs for FY 2026-27 for the stipend of NBEMS Post MBBS PG Diploma candidates for 43 seats. The stipend must be provided as per NBE norms or basic stipend according to state government policy/norms.
	192	**Training Institutes and Skill Labs**	**15.00**	**15.00**	**New activity. Approved Rs. 15 Lakhs** for establishing a furnished computer and digital lab for training Institute.

FMR Code	S.No	Scheme/ Activity	Amount Proposed (In Lakhs)	Amount Approved (In Lakhs)	GoI Remarks for RoP
HSS.11	193	**SHSRC / ILC (Innovation & Learning Centre)**	**250.00**	**250.00**	**Approved Rs. 250 Lakh** for SHSRC HR cost and other operational cost : A. HR Cost @ 174 Lakhs for 1. Rs. 30 lakhs for 1 Chief Advisor @ Rs.2.5 lakh/ per month 2. Rs. 18 Lakh for Advisor – Health Systems Strengthening @ 1.5L/month 3. Rs. 18 Lakh for Advisor – Health Programmes & Innovations @ 1.5L/month 4. Rs. 18 Lakh for Advisor – Knowledge Management @ 1.5L/month 5. Rs. 18 Lakh for Advisor – Digital Health & Analytics @ 1.5L/month 6. Rs. 72 lakhs for 10 Public Health Consultants @ Rs 60, 000 /per month B. Rs. 76 L for other operational cost 1. Rs 24 L for Office Operations / Administrative Support @ Rs 2 L/ month 2. Rs. 40 L for Workshops, review meetings, technical consultations with Directorates, districts and partners 3. Rs. 12 L for Field assessments, evaluations, policy briefs, reports, publications and dissemination
	194	**Planning and Program Management***	**5,059.40**	**5,047.60**	**OOC:** **Approved** Rs. 8,214.85 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 4603.89 lakhs for PM and M&E activities 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

FMR Code	S.No	Scheme/ Activity	Amount Proposed (In Lakhs)	Amount Approved (In Lakhs)	GoI Remarks for RoP
					programme management from State budget. An amount of Rs. 443.71 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	195	Health Management Information System (HMIS)		-	
	196	Implementation of DVDMS		-	
	197	eSanjeevani (OPD+HWC)		-	
HSS.13	198	State specific Programme Innovations and Interventions		-	
HSS.14	199	Untied Fund	7,132.90	7,132.90	**Approved Rs. 7,132.90 Lakhs** as untied funds as per details below: 1. Ongoing activity: Rs 111 lakhs for 37 District Hospitals @ Rs 3 lakhs per District Hospital 2. Ongoing activity: Rs.524 Lakhs for 262 Sub District Hospitals @ Rs 2 lakhs per Sub District Hospital 3. Ongoing activity: Rs.776 Lakhs for 388 CHCs @ Rs 2 lakhs per CHC Approved Rs. 5721.90 lakh for the following activities:- 4. Rs. 1443 lakh as Untied fund for 1443 PHCs @Rs. 1 lakh per PHC per year 5. Rs. 2777.40 lakhs as JAS untied fund @Rs. 37,500 for 5208 AAM-SHC and @Rs. 20,000 for 4122 non-AAM SHCs 6. Rs.1501.50 lakhs as VHSNC untied fund @Rs. 10,000/VHSNC for 15015 VHSNC(ensuring minimum 10 meeting/year)
HSS.15	200	Snakebite Prevention and Control (SBPC)	-	-	-

FMR Code	S.No	Scheme/ Activity	Amount Proposed (In Lakhs)	Amount Approved (In Lakhs)	GoI Remarks for RoP
HSS.16	201	Capacity building incl. training (Incl. RCH, NDCP, NCD, HSS-Urban, HSS-Rural)*	2,605.05	2,284.15	Details in annexure 7.1 (Capacity Building)
HSS.17	202	ASHA Incentives (Incl. RCH, NDCP, NCD, HSS-Urban, HSS-Rural)*	6,017.79	6,017.79	Details in annexure 7.2 (ASHA Incentives)
HSS.18	203	IT interventions (Incl. RCH, NDCP, NCD, HSS-Urban, HSS-Rural - IT software, Laptops etc. for service delivery)*	4,979.12	3,632.07	Details in annexure 7.3 (IT Interventions)
HSS.19	204	IEC & Printing (Incl. RCH, NDCP, NCD, HSS-Urban, HSS-Rural)*	1,643.70	1,377.40	Details in annexure 7.4 (IEC & Printing)
HSS.20	205	PSA Plants (funded under PM-CARES)	2,076.82	2,076.82	**New Activity:** **Approved Rs.2076.82 lakhs** as per details below: Rs. 1261.87 Lakhs for one time repair and Rs. 814.95 Lakhs for CAMC of 70 PSA plants. State is advised to use the model tender document and benchmark 5 to 7 % of the asset value as CAMC cost for the PSA plants supplied by DRDO/HITES under PM CARES.
HSS.21	206	State-specific Initiatives and Innovations*	3,907.61	3,901.61	Details in annexure 7.5 (State-specific Initiatives and Innovations)
HSS-Rural Sub Total			2,31,322.04	2,27,247.59	
Total			3,36,439.81	3,27,639.68	

FMR Code	S.No	Scheme/ Activity	Amount Proposed (In Lakhs)	Amount Approved (In Lakhs)	GoI Remarks for RoP
		Revalidation	24.11	24.11	Details in annexure 7.7 (Revalidation)
GRAND TOTAL			3,36,463.92	3,27,663.80	



Annexure 7.1: Capacity Building

Note: Amount for the trainings approved under integrated modules/trainings to be utilized from the budget allocated for integrated trainings only and not from specialized ones.

Integrated Trainings

Capacity Building (Details of trainings proposed under Sl. No. 201)					
S. No.	**Programme/ Theme**	**Proposed Training/Activity**	**Amout Proposed(In Lakhs)**	**Amount Approved(In Lakhs)**	**GoI Remarks**
A. Integrated Training of Core Cadres					
1	Integrated Training	Integrated Refresher training of Medical Officers	330.00	330.00	**Approved Rs. 330 lakhs** for 6-day Integrated training of 3600 Medical Officers for 120 batches @Rs. 2.75 lakh per batch as per RCH training norms. State to correct the batch no. as per the details mentioned under column 'no. of batches'
2	Integrated Training	Integrated Refresher training of Staff Nurse	133.10	133.10	**Approved Rs. 133.10 lakhs** for 5+5 day Integrated training of 3300 Staff Nurses for 110 batches @Rs. 1.21 lakh per batch as per RCH training norms. State to correct the batch no. and per batch cost as per the details mentioned under column 'no. of batches' and 'Unit batch cost'
3	Integrated Training	Integrated Refresher training of VHN/ANM	120.45	120.45	**Approved Rs. 120.45 lakhs** for 5+5 day Integrated training 3000 CHN/SHN/ANM/VHN/UHN for 100 batches @Rs. 1.20 lakh per batch as per RCH training norms.
4	Integrated Training	Integrated Induction training of CHO/MLHP	175.50	175.50	**Approved Rs. 175.50 lakhs** for 5+5 day Integrated training 2820 MLHPs/CHOs for 94 batches @Rs. 1.87 lakh per batch as per RCH training norms.
5	Integrated Training	Integrated training for ASHAs	36.32	36.32	**Approved Rs 36.32 Lakhs** for Integrated Training for ASHAs. Rs.36.32 lakhs towards Refresher training ASHAs @ Rs.2.27 Lakhs per Batch for 16 Batches in 7 RTIs.
	Total		795.37	795.37	
B. Specific Packages (If any, e.g. RBSK team, FBNC, CEmONC etc.)					
RCH					

Capacity Building (Details of trainings proposed under Sl. No. 201)					
S. No.	**Programme/ Theme**	**Proposed Training/Activity**	**Amout Proposed(In Lakhs)**	**Amount Approved(In Lakhs)**	**GoI Remarks**
5	Maternal Health	Other MH components (EmOC Training)	12.87	12.87	Ongoing Activity - **Approved Rs. 12.87 lakhs** for one batch (8 participants) of CEmONC training of 25 weeks and a ToT CEmONC training programme for Medical officer. The State to follow the RCH training norms.
6	Maternal Health	Other MH components (LSAS Training)	25.19	25.19	Ongoing Activity - **Approved Rs. 25.19 lakhs** for one batch (24 Medical Officer) of LSAS training of 24 weeks.
7	Maternal Health	Other MH Component (MLCU training)	0.00	0.00	-
8	Maternal Health	Midwifery Training for (NPM & ME)	66.77	66.77	Ongoing Activity - **Approved Rs. 66.77 lakhs** for following activity: 1. Rs. 64.8 lakhs for Boarding and Lodging of NPM and Midwifery Educator (36 Staff nurse) @ Rs. 500 for 360 days. i.e. 36*360*500 = Rs. 64.8 lakhs. 2. Rs. 1.97 lakhs as the cost of ME training for 6 MEs.
9	Maternal Health	ECHO training	0.00	0.00	-

Capacity Building (Details of trainings proposed under Sl. No. 201)					
S. No.	Programme/ Theme	Proposed Training/Activity	Amout Proposed(In Lakhs)	Amount Approved(In Lakhs)	GoI Remarks
10	Maternal Health	USG training	7.20	7.20	**Approved Rs 7.2 Lakhs** for USG Training of Medical officers for FY 2026-27. State plans to train 36 Medical Officers on "The Fundamentals in Abdomino-Pelvic Ultra Sonography: Level One for M.B.B.S. Doctors" during FY 2026-27. As per the "fee structure for training" laid out under Rule 10 (1) of The Pre-conception and Pre-natal Diagnostic Techniques (Prohibition of Sex Selection) (Six Months Training) Rules, 2014, the following budget is approved: Rs. 7.20 Lakhs approved @ 36 Medical officers * 20,000 per MO for FY 2026-27 The amount is approved with the following conditionalities: - The 6 months training rules, 1994 to be complied to, in terms of eligibility, accredited institutes, staff faculty ratio etc. and components as laid out in Schedule I & Schedule II of the said Rules. - The State to submit a compliance report after the completion of training for FY 2026-27. - Further State to comply with the regulatory aspects as per rules laid out under PC&PNDT Act.
11	Maternal Health	Pre Service training to Tutors of ANM and GNM Nursing	0.00	0.00	**Approved** as a part of integrated training
14	NSCAP	Training for Genetic counselling for Counsellors	1.50	1.50	**Approved Rs.1.50 lakhs** for Training for Genetic counselling for Counsellors on NSCAP. The State is required to share the training report upon completion.
15	NSCAP	Training for General Medicine & Paediatrician	1.50	1.50	**Approved Rs.1.50 lakhs** for Training for General Medicine & Paediatrician. The State is required to share the training report upon completion.

Capacity Building (Details of trainings proposed under Sl. No. 201)					
S. No.	Programme/ Theme	Proposed Training/Activity	Amout Proposed(In Lakhs)	Amount Approved(In Lakhs)	GoI Remarks
16	LaQshya	LaQshya Refresher Training	14.90	9.59	**Approved Rs. 9.59 Lakhs** for Training for LAQSHYA can be merged with NQAS trainings. The LaQshya has been subsumed under the NQAS. Hence, the certification process related part of the NQAS is not approved and to be kept under the NQAS. However, Rs. 9.59 lakhs is approved for conducting 16 batches (15 participants per batch) of skill based training for the Staff/MO/Specialist of 120 FRU-SUMAN Centre @ Rs. 0.59950 lakhs per batch.
17	Comprehensive Abortion Care	MTP training to Doctors from SDHs / CHCs / PHCs/ UPHCs	14.20	14.20	**Approved Rs. 14.2 Lakhs** for FY 2026-27 for MTP Training for 100 MBBS Doctors in 20 batch (Duration : 12 days & batch size: 5 MBBS doctors per batch) @ Rs. 0.71 Lakhs/- per batch 1. All training should follow RCH training norms and bookings to be done as per actuals. 2. All the MTP trainings to be conducted as per protocols mentioned in "CAC Training & Service Guidelines-2023" available on NHM Website, which may be accessed from the link below. https://nhm.gov.in/images/pdf/programmes/maternal-health/guidelines/CAC_Training_&_Service_Guidelines_2023.pdf
18	Comprehensive Abortion Care	MMA Training to Medical Officer	24.43	24.43	**Approved Rs. 24.43 Lakhs** for MMA Training for 630 MBBS Doctors in 63 batch (Duration : 3 days & batch size: 10MBBS doctors per batch) @ Rs. 38775/- 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

Capacity Building (Details of trainings proposed under Sl. No. 201)					
S. No.	**Programme/ Theme**	**Proposed Training/Activity**	**Amout Proposed(In Lakhs)**	**Amount Approved(In Lakhs)**	**GoI Remarks**
19	Family Planning	Laparoscopic Training to MO	12.62	12.62	Ongoing activity: **Approved Rs 12.62 lakh** for laparoscopic training for FY 2026-27 Total No. of Batch: 20 Participants: maximum 4 participants per batch Duration: 12 days/batch Unit Cost: Rs 63,140/- per batch
20	Family Planning	Minilap Training MO - Refresher	5.52	5.52	**Approved Rs 5.52 Lakh** for Minilap Refresher Training Total No. of Batch: 26 Participants: 4 per batch Duration: 3 days/batch Unit Cost: Rs 21,230/- per batch
21	Family Planning	IUCD & Antara Training	19.23	19.23	Ongoing activity: **Approved Rs 19.23 lakh** for Integrated IUCD & Antara training of MOs for FY 2026-27 Total No. of batch: 38 Participants: Maximum 10 participants /batch Duration: 5 days/batch Cost: Rs 50,600/-per batch
22	Family Planning	IUCD & Antara Training	19.23	19.23	Ongoing Activity: **Approved Rs. 19.23 Lakh** for Integrated IUCD-Antara Training of SN/LHV/ANM for FY 2026-27 Total No. of batch: 38 Participants: Maximum 10 participants /batch Days: 5 days/batch Cost: Rs 50,600/-per batch
24	Adolescent Health	State Level Master Training under School Health and Wellness Programme	4.44	4.44	**Approved Rs. 4.44 lakhs** for refresher SRG training for SHWP in 4 batches @Rs 1.11 lakhs per batch at State level.

Capacity Building (Details of trainings proposed under Sl. No. 201)					
S. No.	Programme/ Theme	Proposed Training/Activity	Amout Proposed(In Lakhs)	Amount Approved(In Lakhs)	GoI Remarks
25	Adolescent Health	District Level Training of School Health and Wellness Program for School Teachers of 6th to 12th standard.	201.76	201.76	**Approved Rs. 201.76 lakhs** for refresher DRG training for SHWP in 388 batches of 40-50 each @Rs 52000 per batch at district level.
26	Child Health	Facility Based Newborn Carc/ Observership Training at RCC	54.94	54.94	**Approved Rs. 54.94 Lakhs** for 4 + 14 days FBNC observership training for doctors and staff of SNCUs in 18 batches at 3 Training sites @ Rs 3.0522 lakh per batch with 20 participants per batch.
27	Immunization	District Level Orientation Training for ANM, VHN, SHN, CHN, Health Worker etc. for two days on Immunization Activities including AEFI, VPDs & UWIN in RTIs & Sensitization on Health Workers Manual on Immunization.	76.00	0.00	**Approved** as a part of integrated training.
28	Immunization	District Level Orientation Training for Medical Officers for two days on Immunization Activities including AEFI, VPDs & UWIN in RTIs	96.00	0.00	**Approved** as a part of integrated training.

Capacity Building (Details of trainings proposed under Sl. No. 201)					
S. No.	Programme/ Theme	Proposed Training/Activity	Amout Proposed(In Lakhs)	Amount Approved(In Lakhs)	GoI Remarks
		& Sensitization on Medical Officers Manual on Immunization			
29	Immunization	Training for Cold Chain Handlers on Vaccine and Cold Chain Management at Block Level for 2 days at RTIs	59.90	59.90	**Approved Rs. 59.90 Lakhs** for capacity building of CCH as per RCH norms.
30	Immunization	Training on HPV vaccination	25.46	25.46	**Approved Rs. 25.46 Lakhs** for capacity building for HPV campaigns as per norms.
31	Nutrition	SAM - MAM Free District - Training	10.00	10.00	**Approved Rs 10 Lakhs** for 2 batches of F-SAM technical Training of MOs/ SN / Nutrition Counsellor teams for NRC @Rs 5 lakh/batch
	RCH Total		753.65	576.34	
NDCP					
32	NVHCP	Hands on Training on Viral load testing	2.00	2.00	**Approved Rs. 2 Lakh** for training of Lab technicians as per NVHCP norms
33	NVHCP	NVHCP Refresher Training	2.00	2.00	**Approved Rs. 2 Lakh** for training of Medical Officers and district Nodal Officers as per NVHCP norms
34	NVHCP	MIS portal and NVHCP refresher Training	1.00	1.00	**Approved Rs. 1 Lakh** for training of Peer Supports as per NVHCP norms

Capacity Building (Details of trainings proposed under Sl. No. 201)					
S. No.	Programme/ Theme	Proposed Training/Activity	Amout Proposed(In Lakhs)	Amount Approved(In Lakhs)	GoI Remarks
35	NLEP	Capacity building under NLEP - Medical Officers	39.60	39.60	**Approved Rs. 39.6 Lakh** for Capacity building under NLEP - Medical Officers. 132 batches (30 per batch) will be trained at a batch cost of Rs. 0.30 Lakhs.
36	NTEP	Refresher TOT Training for BMOs on NTEP Program Updates	1.01	1.01	Ongoing activity - **Approved Rs 1.01 Lakh** for Refresher TOT Training for BMOs on NTEP Program Updates. - Rs.1.01 lakh towards two days training for Medical Officers@ 0.34 lakh per batch of 33 participants as per NHM training norms for 3 batches.
37	NTEP	Refresher TOT Training for BMOs on NTEP Program Updates	2.75	2.75	Ongoing activity - **Approved Rs. 2.75 Lakh** for Refresher TOT Training for BMOs on NTEP Program Updates @ 0.28 lakh per batch of 30 participants as per NHM training norms for 10 batches. Total cost is Rs.2.75 lakhs.
38	NTEP	Nikshay Aushadhi and Nikshay Shivir Implementation Training	0.34	0.34	Ongoing activity - **Approved Rs. 0.34 Lakh** for Nikshay Aushadhi and Nikshay Shivir Implementation Training, towards two days training for DPCs@ 0.34 lakh per batch of 36 participants as per NHM training norms for 1 batch.
39	NTEP	Refresher Training on TB Case Notification and Public Private Coordination	0.34	0.34	Ongoing activity - **Approved Rs. 0.34 Lakh** for Refresher Training on TB Case Notification and Public Private Coordination, towards two days training for DPPMCs@ 0.34 lakh per batch of 36 participants as per NHM training norms for 1 batch.
40	NTEP	Refresher TOT on PMDT Updates	0.34	0.34	Ongoing activity - **Approved Rs. 0.34 Lakh** for Refresher TOT on PMDT , towards two days training for DPPMCs@ 0.34 lakh per batch of 36 participants as per NHM training norms for 1 batch.
41	NTEP	Refresher / Induction training on Differentiated TB Care / B.Palm Regimen / TB Free Panchayat	43.80	43.80	Ongoing activity - **Approved Rs. 43.8 Lakh** towards various training for Various category of Staff@ 0.10 lakh per batch of 20 participants as per NHM training norms for 438 batch.

Capacity Building (Details of trainings proposed under Sl. No. 201)					
S. No.	Programme/ Theme	Proposed Training/Activity	Amout Proposed(In Lakhs)	Amount Approved(In Lakhs)	GoI Remarks
42	NTEP	To strengthen capacity building and uniform implementation of NTEP guidelines across Medical colleges	5.00	5.00	**Approved Rs 5 Lakh** for capacity building and uniform implementation of NTEP guidelines across Medical colleges.
43	PPCL	Training on Prevention & Control of leptospirosis	7.60	7.60	**Approved Rs 7.60 lakh** for district level Training and capacity building of Medical Officer/Health Inspector/Laboratory Technician on PPCL @ 0.20 lakh per District/year for 38 districts
44	IDSP	IDSP-IHIP & VPD-IHIP Orientation Training	13.02	13.02	**Approved Rs 13.02 Lakh** for one day Training on IHIP for 1246 participants @ 0.42 lakh per batch for 31 batches. Total cost is Rs.13.02 for 31 batches
	DCP Total		118.80	118.795	
NCD					
46	NP-NCD	Training of Trainers on NCD (Comprehensive)	7.80	7.80	**Approved Rs. 7.80 lakhs** for State Level ToT to DTTMO, DPO NCD and DNOs in NCDs and Expanded Packages /DPO-NCD 38 /DTTMO (46) /NHM Co-ordinators (38) /DME Co- ordinators (38)/Batch cost 1.21 Lakhs per batch at RTI for 6 batches
47	NP-NCD	Comprehensive Training on NCD to Staff Nurses including NP-NCD, MASLD, CKD, Diabetic Foot, NPCB&VI, NPPCD, COPD, NPHCE, NPPC, NOHP and DMHP	86.31	86.31	**Approved Rs. 86.31 lakhs** for Training to SN on NCD including NP-NCD, MASLD, CKD, Diabetic Foot, NPCB&VI, NPPCD, COPD, NPHCE, NPPC and DMHP and Expanded Packages/ Staff Nurses (3420 no's) to be trained @ Rs. 64,463 per batch for 114 batches.

Capacity Building (Details of trainings proposed under Sl. No. 201)					
S. No.	Programme/ Theme	Proposed Training/Activity	Amout Proposed(In Lakhs)	Amount Approved(In Lakhs)	GoI Remarks
48	NP-NCD	Comprehensive Training on NCD to Medical Officer including NP-NCD, MASLD, CKD, Diabetic Foot, NPCB&VI, NPPCD, COPD, NPHCE, NPPC, NOHP and DMHP	56.02	56.02	**Approved Rs . 56.02 Lakhs** for training of Mos on NCD including NP-NCD, MASLD, CKD, Diabetic Foot, NPCB&VI, NPPCD, COPD, NPHCE, NPPC and DMHP and Expanded Packages/DHQHs /MCHs/ Block PHC/ Medical Officers (2100 no's) to be trained @ Rs. 65,025 per batch for 70 batches
49	NP-NCD	WHVs Orientation/refreshment training	76.86	0.00	**Approved** as a part of integrated training.
50	NPNCD-Cancer	District Level Training	38.82	0.00	**Approved** as a part of integrated training.
51	NPNCD-Cancer	National Level training - High precision surgical techniques	8.82	8.82	**Approved Rs. 8.82 Lakh** for Training for Surgical Oncologist
52	NPNCD-Cancer	60-Days Hands-on Training in Endoscopy for Surgeons in MCHs	51.68	51.68	**Approved Rs. 51.68 Lakh** for Training in Endoscopy for Surgeons in MCHs
53	NPNCD-Cancer	30-Days Hands-on Training in Paediatric Hemato-Oncology services for Medical Oncologists at ICH, Egmore	4.52	4.52	**Approved Rs 4.52 Lakh** for Hands-on Training in Paediatric Hemato-Oncology services for Medical Oncologists

Capacity Building (Details of trainings proposed under Sl. No. 201)					
S. No.	Programme/ Theme	Proposed Training/Activity	Amout Proposed(In Lakhs)	Amount Approved(In Lakhs)	GoI Remarks
54	NPNCD-Cancer	5-Day Hands-on Refresher Training on Day Care Chemotherapy services in MCHs at districts	3.89	3.89	**Approved Rs. 3.89 Lakh** for Hands-on Refresher Training for General physicians and Staff nurses on chemotherapy
55	NPNCD-Cancer	National Level Training - high precision RT	12.60	12.60	**Approved Rs. 12.60 Lakh** for Training for Radiation Oncologist
56	Mental Health	Training on Mental Health screening and follow-up	15.68	0.00	**Approved** as part of integrated training.
57	Mental Health	Velli Manasu - Training for Students & Teachers in schools	80.74	80.74	**Approved Rs 80.74 Lakh** for Training of Students & Teachers: Rs. 80.74 Lakhs (Rs. 1000*8074 Schools)
58	NPHCE	Refresher Training to Palliative Care SN on NPPC/NPHCE	5.56	5.56	**Approved Rs 5.56 Lakh** for training to palliative care SN (463 no's) @ Rs.14621 per participant.
59	NPHCE	Integrated NPHCE & NPPC Training to Staff Nurses - Skill Lab	6.26	0.00	**Approved** as part of integrated training.
60	NPPCD	Training for ENT Surgeons	1.00	1.00	**Approved Rs 1 Lakh** for training ENT Surgeons working in District NPPCD units for Training on Temporal Bone Dissection.
61	NPPC	Refresher Training to Physiotherapist on NPPC/NPHCE	5.56	5.56	**Approved Rs 5.56 Lakh** for training of physiotherapist (463 number) @ Rs. 14621 per participant.

Capacity Building (Details of trainings proposed under Sl. No. 201)					
S. No.	Programme/ Theme	Proposed Training/Activity	Amout Proposed(In Lakhs)	Amount Approved(In Lakhs)	GoI Remarks
62	NPCCHH	Heat stroke management training	0.76	0.76	**Approved Rs 0.76 Lakh** for State level skill-based training on climate sensitive illnesses with focus on Heat Stroke Management for DHO, CHO, MHO and Epidemiologists)for total of 138 participants in 3 batches @Rs. 25,593 per batch.
63	NPCCHH	Sensitization Workshop of State Program Officers and District Health Officers.	23.99	23.99	Ongoing activity- **Approved Rs 23.99 Lakh** for Sensitization workshops for State Program Officers and District Health Officials including DNOs, Epidemiologists, Specialists, Medical Officers, AYUSH MOs, CHOs, and Community Health Workers across 38 districts and 1 State level. Workshops to be conducted offline in batches of 25 participants during all four quarters. Cost includes venue, food, and stationery @ Rs.61500 per batch.
64	NTCP	Capacity building including training - DTCC	28.50	28.50	**New activity: Approved Rs 28.5 Lakh** as per NTCP PIP Guideline for Capacity building including training - DTCC
65	NTCP	Training under NTCP at District Level	3.80	3.80	**Approved Rs 3.8 Lakh** as per NTCP PIP Guideline for Training under NTCP at District Level
66	NTCP	Training Under NTCP at State Level	2.50	2.50	**Approved Rs 2.5 Lakh** as per NTCP PIP Guideline for Training Under NTCP at State Level
67	NPCB	Training to PMOA	2.00	2.00	**Approved Rs. 2 Lakh** for Training and Capacity Building for PMOAs at District Level. Rs.25000 per batch. Total cost is Rs.2 lakhs for 8 batches
	NCD Total		**523.66**	**386.05**	
HSS-Urban- No activity Proposed					
	IISS-Urban Total		0.00	0.00	
HSS-Rural					

Capacity Building (Details of trainings proposed under Sl. No. 201)					
S. No.	Programme/ Theme	Proposed Training/Activity	Amout Proposed(In Lakhs)	Amount Approved(In Lakhs)	GoI Remarks
68	Quality	Orientation Training for Districts on NQAS (2 Days)	22.50	22.50	**Approved Rs.22.50 lakh** for 9 batches of 2 days NQAS training @ Rs.2.5 lakhs
69	Quality	Kayakalp Training	10.00	7.50	**Approved Rs. 7.5 lakh** for 2 days Kayakalp training @ Rs. 1.5 lakhs for 5 batches
70	MUSQAN	MusQan Orientation Training	0.00	0.00	-
71	Quality	Orientation Training for Districts on NQAS (2 Days)	22.50	22.50	**Approved Rs.22.50 lakh** for 9 batches of 2 days NQAS training @ Rs.2.5 lakhs
72	Quality	State Level Training of Service Provider (3 Days)	28.00	28.00	**Approved Rs. 28.00 lakh** for 8 batches of IA cum SPT training @ of 3.5 lakh/batch
73	Quality	Kayakalp Training	14.00	10.50	**Approved Rs. 10.5 lakh** for 7 batches of Kayakalp training @ Rs.1.5 lakhs
74	Health Systems Strengthening	Emergency management Training	238.00	238.00	**Approved Rs 238 lakh** for training on emergency management training for 680 batches (30 per batch) inclusive of TAEI skill grading, PREM, Poison management for doctors, nurses and paramedical staff @ 35000 per batch
75	National Program for Prevention and Control of Snakebite Envenoming (NPSE)	State Level Training & Capacity Building on Case Management	5.42	5.42	**Approved Rs 5.42 lakh** for State level Training and capacity building on snakebite management of Mos

Capacity Building (Details of trainings proposed under Sl. No. 201)					
S. No.	Programme/ Theme	Proposed Training/Activity	Amout Proposed(In Lakhs)	Amount Approved(In Lakhs)	GoI Remarks
76	National Program for Prevention and Control of Snakebite Envenoming (NPSE)	District Level Training & Capacity Building on Case Management	7.42	7.42	**Approved Rs 7.42 lakh** for District level Training and capacity building on snakebite management of health professionals
77	Programme Management	Finance Training	38.80	38.80	**Approved Rs 38.8 lakhs** for finance training of DAMs and Accounts Assistants in 40 batches @ 0.97 lakh @ per batch
78	Programme Management	Refresher Training to APM/NHM Coordinator	4.00	4.00	**Approved Rs. 4 Lakh** for refresher training of APM/NHM Coordinators for FY 2026-27.
79	HMIS	HMIS Training	12.15	12.15	**Approved Rs. 12.15 Lakh** for HMIS training on IHIP portal for all health staff from the facilities.
80	HMIS	MCCD Training	10.80	10.80	**New activity- Approved Rs.10.80 Lakh** for MCCD training to Medical Officers of the Health facilities.
81	HSS Rural Total		413.58	407.59	
Total			**2,605.05**	**2,284.15**	

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

Annexure 7.2: ASHA Incentives (Details of proposal under Sl. No. 202)					
S. No	Programme/ Theme	Activity Proposed	Amount Proposed (In Lakhs)	Amount Approved In Lakhs)	GoI Remarks
RCH					
1	Maternal Health	ASHA Incentive for ensuring Antenatal care & facilitating institutional deliveries	254.40	254.40	**Approved Rs 254.4 Lakh** for ASHA Incentives for ensuring ANC and facilitating institutional deliveries for ASHA incentive. 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 institutional deliveries and Rs. 400/- in Urban areas for 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	ASHA incentive for Mobilizing High risk pregnant mother and achieving healthy outcome	84.80	84.80	Ongoing Activity - **Approved Rs. 84.8 lakhs** for achieving healthy outcome of mother at the 45 days of delivery @ Rs. 500 and @ Rs. 300 (@ Rs. 100 per visit) for HRP mobilization for 4 mothers/ASHA for 2650

Annexure 7.2: ASHA Incentives (Details of proposal under Sl. No. 202)					
S. No	Programme/ Theme	Activity Proposed	Amount Proposed (In Lakhs)	Amount Approved In Lakhs)	GoI Remarks
					ASHAs. i.e. 800*2650*4 = Rs. 84.8 lakhs
3	Maternal Health	ASHA Incentive for Identification and mobilization of IIigh-risk mother in post natal period	26.50	26.50	Ongoing Activity - **Approved Rs. 26.5 lakh** under optimization of Post natal care programme @ Rs. 250 for 4 mothcrs/ASHA for 2650 ASHAs. i.e. 250*2650*4 = Rs. 26.5 lakhs
4	Child Health	ASHA Incentive for Home Based Newborn Care programme) Undertaking six (in case of institutional deliveries) and seven (for home deliveries) home –visits for the care of the new born and post-partum mother. (Day 1,3,7,14,21,28,42)	106.00	106.00	Ongoing activity: **Approved Rs. 106.00 lakh** as incentive for ASHAs under HBNC after completion of 6/7 home visits for 42,400 newborns @Rs. 250/- per newborn.
5	Child Health	Home Based Young Child (HBYC) Care 5 House visit of the New born after 42 days of life – Rs.50 per visit	79.50	79.50	Ongoing activity: **Approvcd Rs. 79.50 lakh** as incentive for ASHAs under HBYC for completion of 5 quarterly home visits for 31,800 children @Rs. 250/- per child (3-15 months).
6	Immunization	ASHA incentive for ensure Immunization for Children	89.44	89.44	**Approved Rs. 89.44 Lakh** for ASHA incentive as per norms.

Annexure 7.2: ASHA Incentives (Details of proposal under Sl. No. 202)					
S. No	Programme/ Theme	Activity Proposed	Amount Proposed (In Lakhs)	Amount Approved In Lakhs)	GoI Remarks
7	Immunization	Social Mobilization for Immunization	63.60	63.60	**Approved Rs. 63.60 lakh** for mobilization @ Rs 200/- per Immunization Session (norms) for 2650*12 (31800 sessions).
8	Immunization	ASHA incentive for Mobilization of Children for OPV immunization under Pulse Polio Programme	0.00	0.00	-
9	Adolescent Health	Adolescent Health Day - Adolescent Health Day to be organized in the village once in every quarter on a convenient day preferably on a Friday after 3 pm during 4th week at Anganwadi centre.	21.20	21.20	**Approved Rs 21.2 lakh** for ASHA incentive for Mobilization of all adolescents for 4 Adolescent Health and Wellness Days in community @ Rs.200/- per AHWD for 2650 ASHAs.
10	Family Planning	Family Planning Escorting or facilitating beneficiary to the health facility for the PPICUD insertion	55.65	55.65	Ongoing activity: **Approved Rs. 55.65 lakh** under ASHA incentive for PPIUCD/PAIUCD – 37,100 PPIUCD/PAIUCD insertions, @ Rs 150 per ASHA for FY 2026–27.
11	Family Planning	Family Planning - Counselling and escorting beneficiary for ANTARA injection	63.60	63.60	Ongoing Activity: **Approved Rs. 63.6 lakh** under ASHA incentive for Antara for 63,600 Antara doses @ ₹100 per dose for FY 2026–27.
12	Comprehensive Abortion Care	Incentives for mobilization of patients for CAC	15.90	15.90	**Approved Rs. 15.90 Lakhs** for FY 2026-27, for ASHA Transportation Incentive for accompanying women for Safe Abortion Services (as

Annexure 7.2: ASHA Incentives (Details of proposal under Sl. No. 202)					
S. No	Programme/ Theme	Activity Proposed	Amount Proposed (In Lakhs)	Amount Approved In Lakhs)	GoI Remarks
					per norms) for 5300 cases as per norms at public health facilities, the bifurcation is as follows: 1. Rs. 5,30,000/- for 2650 cases by surgical methods @Rs. 200/- per surgical abortion 2. Rs. 10,60,000 /- for 2650 cases by medical methods of abortion @Rs. 400/- per MMA case with mandatory 2 visits.
13	Nutrition	Anaemia Mukth Bharath-Ensuring Weekly Iron and Folic Acid Supplementation to the Non-Pregnant Women in the Reproductive Age group	15.90	15.90	**Approved Rs 15.90 Lakh** for FY 2026-27, for ASHA incentive for mobilising WRA for IFA consumption under AMB for 2650 ASHA @Rs 50/Month/ASHA
14	Nutrition	Anaemia Mukth Bharat - Mobilizing the all Children in the age group and Ensuring Weekly Iron and Folic Acid Supplementation	31.80	31.80	**Approved Rs 31.80 lakh** for FY 2026-27, ASHA incentive for mobilising children 6-59 months for IFA syp consumption under AMB @Rs 100/ASHA/Month for 2650 ASHAs
15	Nutrition	National Deworming Day For mobilizing out of school children.	5.30	5.30	**Approved Rs 5.30 Lakh** for FY 2026-27, for 2650 ASHAs for incentive to support bi-annual deworming rounds @Rs 100/ASHA/round

Annexure 7.2: ASHA Incentives (Details of proposal under Sl. No. 202)					
S. No	Programme/ Theme	Activity Proposed	Amount Proposed (In Lakhs)	Amount Approved In Lakhs)	GoI Remarks
16	Nutrition	Screening and Referral of Severe Acute Malnutrition (SAM) and Moderate Acute Malnutrition (MAM) Children	47.70	47.70	**Approved Rs 47.70 lakh** for referral and follow-up of Moderate and Severe Acute Malnutrition children @ Rs300 per child, considering six children with MAM+SAM per ASHA for 2650 ASHAs
17	Nutrition	Mother's Absolute Affection (MAA) For conduction of Mothers meeting every quarter preferably on AN clinic day at AWC / HSC on Outreach session as per the Fixed tour plan of VHN	10.60	10.60	**Approved Rs 10.6 Lakh** for FY 2026-27 for ASHA incentive for conducting Quarterly mothers meeting under MAA programme @Rs 100/quarter/ASHA for 2650 ASHAs to promote early and exclusive breastfeeding.
18	Nutrition	IDCF- For prophylactic distribution of ORS to family with under five children.	2.65	2.65	Ongoing Activity: **Approved Rs. 2.65 Lakh** for ASHA Incentive @ Rs. 100 per ASHA for 2650 ASHAs for STOP Diarrhoea 2026 Campaign.
19	National Iodine Deficiency Disorder Control Programme (NIDDCP)	National Iodine Control Programme – Spot Testing of samples	7.95	7.95	**Approved Rs. 7.95 Lakh** for ASHA incentives- National Iodine Control Programme – Spot Testing of samples
NDCP					
20	National Vector Borne Disease Control Programme	ASHA incentive for Source reduction & IEC activities for prevention & Control of Vector borne diseases	63.60	63.60	**Approved Rs 63.6 Lakh** for activity for Dengue and Chikungunya engagement of ASHAs @ Rs. 200/- per month.

Annexure 7.2: ASHA Incentives (Details of proposal under Sl. No. 202)					
S. No	Programme/ Theme	Activity Proposed	Amount Proposed (In Lakhs)	Amount Approved In Lakhs)	GoI Remarks
21	National Vector Borne Disease Control Programme	Preparing blood slides - Rs.15/Slide Providing complete treatment for RdT positive Pf cases and Providing complete radical treatment to positive Pf and Pv case detected by blood slide, as per drug regimen - Rs.75	47.86	47.86	**Approved Rs. 47.86 Lakh** for Preparing blood slides @ Rs.15/Slide for Providing complete treatment for RdT positive Pf cases and Providing complete radical treatment to positive Pf and Pv case detected by blood slide, as per drug regimen
22	National Leprosy eradication Programme	ASHA incentive for Leprosy Case Detection Campaign	0.00	0.00	-
23	National Leprosy eradication Programme	Incentive for ASHA/AWW/Volunteer/etc for detection of Leprosy (Rs 250 for detection of an early case before onset of any visible deformity, Rs 200 for detection of new case with visible deformity in hands, feet or eye)	1.25	1.25	**Approved Rs. 1.25 Lakh** for Incentive for ASHA/AWW/Volunteer/etc for detection of Leprosy.
24	National Leprosy eradication Programme	ASHA Incentive for Treatment completion of PB cases (@ Rs 400)	2.00	2.00	**Approved Rs 2 Lakh** for ASHA Incentive for Treatment completion of PB cases
25	National Leprosy eradication Programme	ASHA Incentive for Treatment completion of MB cases (@ Rs 600)	3.00	3.00	**Approved Rs 3.00 Lakh** for ASHA Incentive for Treatment completion of MB cases.
26	National Viral Hepatitis Programme	ASHA Incentives for follow-up of Hepatitis B & C	6.80	6.80	**Approved Rs. 6.80 Lakh** for ASHA incentives as per NVHCP norms.

Annexure 7.2: ASHA Incentives (Details of proposal under Sl. No. 202)					
S. No	Programme/ Theme	Activity Proposed	Amount Proposed (In Lakhs)	Amount Approved In Lakhs)	GoI Remarks
27	National Tuberculosis Control Programme	ASHA Incentive for House to House survey	7.95	7.95	**Approved Rs. 7.95 Lakh** for ASHA Incentive for House to House survey
NCD-No activity Proposed					
HSS-Urban					
28	Community Engagement	Incentives for Routine Recurrent Activities	541.44	541.44	**Approved Rs. 541.44 lakhs** as routine and recurring incentive for 2256 WHVs (working as Urban ASHA) @Rs. 2000 per WHV per month for 12 months
29	Community Engagement	Expanded Services Package under CPHC component	270.72	270.72	**Approved Rs. 270.72 lakhs** towards ASHA incentive for delivery of expanded package of services for 2256 WHVs (working as Urban ASHAs) @Rs. 1000 per WHV per month for 12 months.
HSS-Rural					
30	Community Engagement	Incentives for Routine Recurrent Activities	636.00	636.00	**Approved Rs. 636 lakhs** as routine and recurring incentive for 2650 ASHAs @Rs. 2000 per ASHA per month for 12 months
31	Community Engagement	Expanded Services Package under CPHC component	318.00	318.00	**Approved Rs. 318 lakhs** towards ASHA incentive for delivery of expanded package of services for 2650 ASHAs @Rs. 1000 per ASHA per month for 12 months.

Annexure 7.2: ASHA Incentives (Details of proposal under Sl. No. 202)					
S. No	**Programme/ Theme**	**Activity Proposed**	**Amount Proposed (In Lakhs)**	**Amount Approved In Lakhs)**	**GoI Remarks**
32	Community Engagement	ABHA ID Creation	0.00	0.00	-
33	Community Engagement	Incentives for Routine Recurrent Activities	2,091.12	2,091.12	**Approved Rs. 2091.12 lakhs** as routine and recurring incentive for 8713 WHVs (working as Rural ASHA) @Rs. 2000 per WHV per month for 12 months
34	Community Engagement	Expanded Services Package under CPHC component	1,045.56	1045.56	**Approved Rs. 1045.56 lakhs** towards ASHA incentive for delivery of expanded package of services for 8713 WHVs (working as Rural ASHAs) @Rs. 1000 per WHV per month for 12 months.
Total Budget			**6,017.79**	**6,017.79**	

Annexure 7.3- IT Interventions (Details of proposal under Sl. No. 203)					
S. No.	Programme/ Theme	Proposed Training/Activity	Amount Proposed (In Lakhs)	Amount Approved (In Lakhs)	GoI Remarks
RCH					
1	**Maternal Health**	VHN Data card charges	335.88	335.88	**Approved Rs. 335.88 Lakhs** for towards VHN Data Charges @unit cost of Rs.300 for 9330 VHNs.
NDCP					
2	**NTEP**	Tablet to field health staff	229.60	229.60	**Approved Rs 229.60 lakh** for tablet to field health staff: Procurement of Tablet to field health staff at Rs.20000. Total cost is Rs.229.60 lakhs
NCD – No activity Proposed					
HSS-Urban – No activity Proposed					
HSS-Rural					
3	**HRIS**	Human Resource Information System	9.00	9.00	**Approved Rs. 9 Lakhs** towards Maintenance of HRMIS Application
4	**Teleconsultation facilities at AAMs-Rural**	IT interventions (Incl. RCH, NDCP, NCD, HSS-Urban, HSS-Rural - IT software, Laptops etc. for service delivery)	174.53	174.53	Ongoing activity **-Approved Rs. 174.53 Lakhs** for IT interventions (Incl. RCH, NDCP, NCD, HSS-Urban, HSS-Rural - IT software, Laptops etc. for service delivery)
5	**Technical Assistance**		-	-	-
6	**HMIS**	Connectivity Charges	397.81	397.81	**Approved Rs. 397.81 Lakh** towards connectivity charges for 336 facilities
7	HMIS	UPS cabling	1,165.00	46.70	**Approved Rs. 46.70 Lakh** for UPS cabling as per GoI norms
8	HMIS	Operational cost for HMIS	345.55	116.80	**Approved Rs. 116.80 Lakh** for Operational cost for HMIS as per GoI norms
9	HMIS	Maintenance of other Application and Hosting Charges	36.70	36.70	**Approved Rs. 36.70 Lakh,** towards maintenance, server cost and Hosting charges of existing NHM applications and

Annexure 7.3- IT Interventions (Details of proposal under Sl. No. 203)					
S. No.	**Programme/ Theme**	**Proposed Training/Activity**	**Amount Proposed (In Lakhs)**	**Amount Approved (In Lakhs)**	**GoI Remarks**
					Digital Attendance Monitoring System.
10	HMIS	CAMC of IT Hardware and Server	300.00	300.00	**Approved Rs. 300 Lakh** towards CAMC for IT hardware
11	HMIS	Additional Development, Server Maintenance and PMU team maintenance for HMIS 3.0	1457.83	1457.83	**Approved Rs. 1457.83 Lakh** for Additional Development, Server Maintenance and PMU team maintenance for HMIS 3.0
11	HMIS	SMS Charges for beneficiaries registered in HMIS and other applications	50.00	50.00	**Approved Rs. 50 Lakh** for SMS Charges for beneficiaries registered in HMIS and other applications
13	HMIS	Mobile charges to ASHAs	47.70	47.70	**Approved Rs. 47.70 lakhs** for mobile charges of ASHAs @Rs. 150/ASHA/month for 2650 ASHAs as per GoI guideline
14	HMIS	Centralized PACS system to be established in NHM-TN	429.52	429.52	**Approved Rs. 429.52 Lakh** for the establishment of a Centralized Picture Archiving & Communication System for Teleradiology.
Total Budget			**4,979.12**	**3,632.07**	

Annexure 7.4 - IEC & Printing (Details of proposal under Sl. No. 204)					
S. No	Programme/ Theme	Activity Proposed	Amount Proposed (In Lakhs)	Amount Approved (In Lakhs)	GoI Remarks
Major pool-specific IEC					
RCH					
1	Adolescent Health	Printing of IEC Materials for Schools	69.74	69.74	**Approved Rs 69.74 lakh** for creation of locally relevant digital IEC materials related to School Health and Wellness programme @Rs 450/ school for target 15497 schools.
2	Adolescent Health	Printing of School Health and Wellness Modules:	30.99	30.99	**Approved Rs 30.99 lakh** for training material for School Health and Wellness programme @Rs 200/ school for target 15497 schools.
3	Nutrition	Printing of IEC Banners and Materials for National Deworming Day	44.84	44.84	**Approved Rs. 44.84 lakh** for translation of IEC material for digital display , reporting formats and booklets for schools and AWC for conducting bi-annual deworming rounds in the state @Rs 1.18 lakh/ district for 38 districts
4	LaQshya	Printing of LaQshya Case Sheets and Registers	200.45	200.45	**Approved Rs. 200.45 lakhs** as under: 1. Rs. 144.36 lakhs for the printing of 14,08,486 Labour Room case sheets @ Rs. 10.25 per case sheet and 2. Rs. 56.08 lakhs for 22,435 Labour Room Registers @ Rs. 250/- per register = Rs. 56.08 lakhs. Total = Rs. 200.45 lakhs
5	Maternal Health	Printing of AN Booklets and AN Yoga Booklets:	0.00	0.00	-

Annexure 7.4 - IEC & Printing (Details of proposal under Sl. No. 204)					
S. No	Programme/ Theme	Activity Proposed	Amount Proposed (In Lakhs)	Amount Approved (In Lakhs)	GoI Remarks
		World Population Day' celebration for State and District level activities	15.50	15.50	Ongoing activity: **Approved Rs 15.50 Lakh** under IEC for FY 2026-27: (i) Rs 2 lakh for IEC & Promotional activities during WPD for State level. (ii) Rs 13.49 lakh for IEC & Promotional activities during WPD for District level @ Rs 29347/- per unit (for 46 Health unit districts).
		Vasectomy Fortnight celebration at District level activities	15.50	15.50	Ongoing activity: **Approved Rs 15.50 lakh** for Vasectomy Fortnight district activities @ Rs 40,789 per district for 38 districts for FY 2026–27.
6	Family Welfare	Printing and IEC for Family Welfare including CAC Services:	78.47	76.73	Ongoing activity: **Approved Rs. 76.73 lakh** as following activities: (a) Printing: Rs 35.90 lakh (i) Rs. 4.99 lakh – 2,49,950 Sterilization consent forms @ Rs. 2/ per Form (ii) Rs. 14.99 lakh – 2,49,950 Medical record & sterilization checklists @ Rs. 6/-per checklist (iii) Rs. 0.037 lakh – 3,750 Sterilization certificates @ Rs. 1/-per certificate (iv) Rs. 0.019 lakh – 950 Indemnity claim forms @ Rs. 2/-per form (v) Rs. 2.70 lakh – Post-Operative instruction cards @ Rs. 1/-per card (vi) Rs. 0.25 lakh – 25,050 Client exit interview forms @ Rs. 1/-per form (vii) Rs. 0.75 lakh – 25,070 MPA client cards @ Rs. 3/-per card (viii) Rs. 7.44 lakh – 2,48,050 IUCD cards @ Rs. 3/-per card (ix) Rs. 0.073 lakh – 2,450 Implant cards @ Rs. 3/-per card

Annexure 7.4 - IEC & Printing (Details of proposal under Sl. No. 204)					
S. No	**Programme/ Theme**	**Activity Proposed**	**Amount Proposed (In Lakhs)**	**Amount Approved (In Lakhs)**	**GoI Remarks**
					x) Rs. 1.32 lakh – 530 Sterilization registers @ Rs. 250/-per register xi) Rs. 1.80 lakh – 720 IUCD/PPIUCD/PAIUCD insertion & follow-up registers @ Rs. 250/-per register xii)Rs. 0.26 lakh – 107 RMNCHA+N counselling registers @ Rs. 250/-per register xiii)Rs. 1.25 lakh – 500 Antara registers @ Rs. 250/-per register xiv) Rs. 0.027 lakh – 11 Implant registers @ Rs. 250/-per register (b) Rs. 31.92 lakh for awareness on teenage pregnancy among college students in five districts with high teenage fertility rates (c) Rs 3.00 lakh for Trade Fair activities. Ongoing Activity: For FY 2026-27, Rs 5.9 Lakhs is approved for Medical Termination of Pregnancy Act Forms/Formats Printing. (CAC Printing Details: 1. RMP Opinion Form I: Quantity 1,00,000 forms @ Rs. 1/- per form ; 2. Form C/Consent Form : Quantity 1,05,000 forms @ Rs. 1/- per form ; 3. Form II: Quantity 72000 forms @ Rs. 1/- per form; 4. RMP Opinion Form (between 20-24 weeks) – Form E: Quantity 5000 forms @ Rs. 1/- per form ; 5. Form – III MTP Register: Quantity 960 forms @ Rs. 250/- per booklet; 6. MMA Client Card: Quantity 33,825 forms @ Rs. 2/- per form; 7. Form D: Quantity 350 forms @ Rs. 1/- per form)
Sub total			**455.49**	**453.75**	
NDCP					

Annexure 7.4 - IEC & Printing (Details of proposal under Sl. No. 204)					
S. No	Programme/ Theme	Activity Proposed	Amount Proposed (In Lakhs)	Amount Approved (In Lakhs)	GoI Remarks
7	IDSP	Printing of CIF and Lab forms	3.00	3.00	**Approved Rs 3 lakhs** for printing case investigation forms and lab forms for 4 National Polio Surveillance Network (NPSN) units at Rs. 75,000 per unit.
8	VBDCP	IEC activities for Malaria along with activities for anti malaria month celebration	10.12	10.12	**Approved Rs. 10.12 lakhs** for IEC activities related to malaria and anti-malaria month celebrations at Rs. 21,800 per HUD for 46 HUDs.
9	VBDCP	IEC for Vector Borne Diseases incl. Dengue & Chikungunya.	24.48	24.48	**Approved Rs. 24.48 Lakh** for Anti-Dengue Day celebrations and IEC displays.
10	NLEP	IEC/BCC: Mass media, Outdoor media, Rural media, Advocacy media for NLEP	39.52	39.52	**Approved Rs 39.52 Lakh** for LED boards, scrolling boards, posters, banners for all PHCs, advertisements, handbills, and mike announcements at medical colleges, Directorate, etc. Includes SLAC activities.
11	NLEP	Printing Works for NLEP	7.60	7.60	**Approved Rs. 7.60 Lakh** for printing suspect case registers, treatment cards, drug stock registers, disability registers, monthly reporting forms, flash cards, pamphlets, special activity forms, and MPR forms.
12	NVHCP	Printing of NVHCP Treatment cards and IEC activities for World Hepatitis Day	8.40	8.40	**Approved Rs 8.4 Lakh** for Printing of NVHCP Treatment cards and IEC activities for World Hepatitis Day for IEC activities at Rs. 20,000 per treatment centre for 42 centres.
13	NTEP	ACSM for NTEP	90.00	90.00	**Approved Rs 90.00 Lakh** for ACSM Activities across the state.
13	NTEP	Printing (ACSM) for NTEP	10.50	10.50	**Approved Rs 10.50 Lakh** for printing of screening registers, patient clinic cards, HTDM follow-up registers, three types of patient ID cards, lab registers, and patient dispensed registers @ Rs.10.50 Lakhs.

Annexure 7.4 - IEC & Printing (Details of proposal under Sl. No. 204)					
S. No	**Programme/ Theme**	**Activity Proposed**	**Amount Proposed (In Lakhs)**	**Amount Approved (In Lakhs)**	**GoI Remarks**
Sub total			**193.62**	**193.62**	
NCD					
14	NOHP	IEC Activities for World Oral Health Day	15.03	15.03	**Approved Rs 15.03 Lakh** for IEC and outreach activities for World Oral Health Day across Tamil Nadu, covering State-level IEC at Rs. 2.5 lakhs and facility-level IEC at Rs. 2,500 per SDH/CHC for 500 units, totalling Rs. 15 lakhs.)
15	Mental Health	IEC Activities for Mental Health	59.36	59.36	**Approved Rs 59.36 Lakh** for digital IEC Awareness activities for Health Observance Days (World Mental Health Day, World Schizophrenia Day, World Suicide Prevention Day) through radio jingles, advertisements, posters at Block PHCs, HSCs, Additional PHCs, and observance programs in Medical Colleges and District Hospitals.
16	Mental Health	IEC for Telemanas	32.67	32.67	**Approved Rs 32.67 Lakh** for Telemanas IEC in all GH and Block PHCs across the state for digital IEC
16	NPHCE	Community Based Intervention-IPC,Group activities and mass media for NPHCE	19.00	19.00	**Approved Rs. 19 Lakh** for printing IEC materials to enhance awareness, promote behaviour change, and improve community participation in programme activities. Accordingly, a provision of Rs. 0.50 lakh per district for 38 districts, to support district-specific IEC printing and effective community outreach.
17	NTCP	Implementation of ToEFI guideline-Coverage of Public School and Private School & ToEFI	11.20	11.20	**Approved Rs. 11.2 Lakh** for Implementation of ToEFI guideline- Coverage of Public School and Private School & ToEFI Certificate Printing

Annexure 7.4 - IEC & Printing (Details of proposal under Sl. No. 204)					
S. No	Programme/ Theme	Activity Proposed	Amount Proposed (In Lakhs)	Amount Approved (In Lakhs)	GoI Remarks
		Certificate Printing			
18	NTCP	Tobacco Cessation- IEC/BCC for Districts	38.00	38.00	**Approved Rs. 38 Lakh** for Tobacco Cessation- IEC/BCC for Districts
19	NP-NCD	State specific Initiatives and Innovations- IEC/BCC for State NCD Cell	10.00	10.00	**Approved Rs. 10 Lakh** for IEC activities to support NCD programs at State level to strengthen awareness and community engagement
20	NP-NCD	State specific Initiatives and Innovations- IEC/BCC for District NCD Cell	47.50	47.50	**Approved Rs. 47.50 Lakh** for IEC activities to support NCD programs at District level to strengthen awareness and community engagement
21	NP-NCD	Printing activities for Universal Screening for NCD	0.00	0.00	-
23	NP-NCD	SBCC - Print materials - Posters	0.00	0.00	-
24	NPPCF	IEC materials for NPPCF	3.00	3.00	**Approved Rs. 3 lakh** for Health Education and Publicity activities for the NPPCF program at State and District levels to enhance awareness and community engagement
25	NPCB	IEC for NPCB Activities	20.00	20.00	**Approved Rs. 20 Lakh** for the IEC for Conducting Screening Eye Camps, Eye Donation Fortnight, Glaucoma awareness and World Sight day.
26	NPCCHH	IEC on Climate Sensitive Diseases	20.21	12.00	**Approved Rs 12 Lakh** for following activities : 1) Observation of Important Climate Change and Health Days as per NPCCHH norms through IEC, printing @Rs 0.25 Lakh per HDU for 46 HDU 2) Observation of Important Climate Change and Health Days

Annexure 7.4 - IEC & Printing (Details of proposal under Sl. No. 204)					
S. No	Programme/ Theme	Activity Proposed	Amount Proposed (In Lakhs)	Amount Approved (In Lakhs)	GoI Remarks
					as per NPCCHH norms through IEC and printing @ Rs. 0.50 Lakhs for state level. IEC at both levels will be on climate-sensitive diseases—including air pollution and heat.
Sub total			**275.97**	**267.76**	
HSS-Urban					
26	**Quality**	Printing SOPs , Forms and Formats	39.75	39.75	**Approved Rs.39.75 lakhs** for 300 UHWCs, 225 UPHCs and 15 UCHCs for printing SOPs, registers, forms, and formats
27	**Quality**	Printing of SOPs / Registers / Case Sheets for Paediatric OP / Ward / Signage	0.00	0.00	-
Sub-total			**39.75**	**39.75**	
HSS-Rural					
28	HMIS 3.0	IEC for HMIS 3.0	36.38	19.92	**Approved Rs. 19.92 lakhs** for printing of new HMIS formats
29	NIDDCP	Awareness program for double fortified salt	41.04	14.40	**Approved Rs. 14.40 lakh** for IEC activities.
30	HMIS	Printing of HMIS format to the health facilities as per HMIS-IHIP formats.	19.92	19.92	**Approved Rs. 19.92 lakhs** for printing of new HMIS formats
31	MUSQAN	Printing of SOPs / Registers / Case Sheets for	90.00	0.00	**Rs.90 lakhs is not approved** for Printing of SOPs / Registers / Case Sheets for Paediatric OP / Ward / Signage. MusQan is now integrated under NQAS.

Annexure 7.4 - IEC & Printing (Details of proposal under Sl. No. 204)					
S. No	Programme/ Theme	Activity Proposed	Amount Proposed (In Lakhs)	Amount Approved (In Lakhs)	GoI Remarks
		Paediatric OP / Ward / Signage			Activity may be merged with NQAS
32	NQAS	Printing of SOPs / Registers / Case Sheets for Paediatric OP / Ward / Signage	123.25	0.00	**Rs. 123.25 lakhs is duplication of the budget** as already approved under serial no. 175
33	NQAS	Printing of SOPs / Registers / Case Sheets for Paediatric OP / Ward / Signage	197.20	197.20	**Approved Rs. 197.20 lakh** for printing SOPs, registers, forms and formats for 2465 rural health facilities
34	Planning and Programme Management	Printing of Accounts register	171.08	171.08	**Approved Rs. 171.08 Lakh** for Printing of accounts registers for health facilities.
	HSS-R Total		**678.87**	**422.52**	
	Grand Total		**1643.70**	**1377.3965**	

Note: As per recent IEC guidelines, the maximum expenditure for IEC to be restricted to 2% of the resource envelope & IEC Guidelines to be followed.

Annexure 7.5 - State-specific Initiatives and Innovations (Details of proposal under Sl. No. 206)					
S. No	**Programme/ Theme**	**Activity Proposed**	**Amount Proposed (In Lakhs)**	**Amount Approved (In Lakhs)**	**GoI Remarks**
RCH					
1	Maternal Health	Tribal Birth Waiting Room	57.12	57.12	Ongoing Activity: **Approved Rs. 57.12 lakhs** as recurring expenditure for 21 Tribal Birth Waiting Homes @ Rs. 2.72 lakhs per unit.
2	Maternal Health	Administration of Inj. Ferric Carboxymaltose to Anaemic Mothers	183.27	183.27	**New activity: Approved Rs 183.27 lakh** for Procurement of Inj FCM for 122186 Pregnant woman @Rs 150/injection
3	Maternal Health	Establishment of Level 1 ART Centre for IUI	0.00	0.00	-
4	Child Health	Establishment of Neo-Genesis ICU Unit at IOG, Chennai	306.00	306.00	**New activity: Approved Rs. 306 Lakh** for setting up Neo-Genesis ICU Unit for extremely low birth weight babies, including Rs.30.00 Lakhs for civil and electrical modifications for extremely low birth weight babies.
5	Child Health	Comprehensive New Born Screening Programme (CNBS) for all Govt. delivered babies through Placement Model	699.90	699.90	**New activity: Approved Rs. 699.90 Lakh** for the procurement of consumables for the Comprehensive New Born Screening in Hub and Spoke Model.
NDCP					
6	National Tuberculosis Elimination Program (NTEP)	Tribal Patient Support and Transportation Charges	14.73	14.73	Ongoing activity: **Approved Rs. 14.73 Lakhs**, to be booked under DSTB head

Annexure 7.5 - State-specific Initiatives and Innovations (Details of proposal under Sl. No. 206)					
S. No	**Programme/ Theme**	**Activity Proposed**	**Amount Proposed (In Lakhs)**	**Amount Approved (In Lakhs)**	**GoI Remarks**
7	NRCP	Post-Exposure Prophylaxis (PEP) for High-Risk Groups	222.02	222.00	**New activity: Approved Rs 222 lakh** for Procurement of Anti rabies Vaccine & Syringes for Pre exposure Prophylaxis for Rabies to 1.65 lakh Animal Handlers and Sanitation workers in campaign mode @ Rs 135 (3 dose vaccine @45 Rs per dose) per person.
NCD					
8	National Oral Health Programme	Dental Specialty Referral Centres	360.00	360.00	Ongoing activity : **Approved Rs 360 Lakh** for recurring expenditure for Dental Speciality Referral units @ Rs.12.86 Lakhs per unit for 28 PHCs, totalling to Rs.360 Lakhs
9	National Mental Health Programme (NMHP)	Operational Cost for Emergency Care and Recovery Centres	280.89	280.89	Ongoing activity **: Approved Rs 280.89 Lakh** for Operationalization of Emergency Care and Recovery Centre: Rs. 280.89 Lakhs (Rs. 7.392 Lakhs * 38 Districts)
10	National Oral Health Programme	School-Based Orthodontic Treatment Scheme	180.00	180.00	**New activity: Approved Rs.180.00 Lakhs** for orthodontic treatment of 1,500 children across 5 districts from government and government-aided schools
11	National Mental Health Programme (NMHP)	Mobile Mental Health Units	15.25	15.25	**New activity: Approved Rs. 15.25 Lakhs** for Mobile Mental Health Unit
12	National Mental Health Programme (NMHP)	Mental Health Wellness Sessions in Schools	0.00	0.00	-

Annexure 7.5 - State-specific Initiatives and Innovations (Details of proposal under Sl. No. 206)					
S. No	Programme/ Theme	Activity Proposed	Amount Proposed (In Lakhs)	Amount Approved (In Lakhs)	GoI Remarks
13	NPHCE	Procurement of PCV13 Vaccine for Elderly patients	0.00	0.00	-
14	NPHCE	Establishment of integrated block level Elderly and Palliative care services	223.00	223.00	**New activity : Approved Rs. 223 Lakh** for Establishment of integrated block level Elderly and Palliative care services @ Rs.22.30 lakhs per block.
15	NP-NCD	Survivorship Oncology Support	32.75	32.75	**New activity : Approved Rs. 32.75 lakhs** for Establishment of support systems at 10 major treating institutions.
16	NP-NCD	HPV DNA Test for Cervical Cancer Screening in 4 High Burden Districts.	869.50	869.50	**Approved Rs. 869.50 Lakhs** for the implementation of HPV DNA testing for cervical cancer among women of 35 years of age in four high burden districts- Villupuram,Thiruvanamala, Perambalur and Ariyalur
17	NPCCH	Sepsis - Action for Future! (SAFF) -Every Life Matters.	6.00	0.00	**Rs 6.00 lakhs is not approved** as amount is proposed for medical colleges.
18	NPCCH	To study the correlation between pathogen behaviour and climate variables (Virus, Bacteria, Fungi, and Parasite) in Six Selected Districts of Tamil Nadu. (The Nilgiris, Coimbatore, Theni,	0.00	0.00	-

Annexure 7.5 - State-specific Initiatives and Innovations (Details of proposal under Sl. No. 206)					
S. No	**Programme/ Theme**	**Activity Proposed**	**Amount Proposed (In Lakhs)**	**Amount Approved (In Lakhs)**	**GoI Remarks**
		Tirunelveli, Kanyakumari, Namakkal)			
19	NPCCH	Ecological - Niche Modelling of Bats& Dogs under Climate & Forage Stress to predict Zoonotic spill-Over risk in South India in selected districts	0.00	0.00	-
20	NPCCH	Health & Climate Research Integrated Data Centre	0.00	0.00	-
21	NP-NCD	Nutritional support for cancer patients	277.20	277.20	**New Activity: Approved Rs 227.20 Lakh** for nutritional support of cancer patients @ Rs.700/ pack - 6 packs for 1.5months per patient)to be provided for inpatients on Radiotherapy, Post-op care (60% of 11,000 patients - previous year caseload in Govt, institutions) at Rs.4200 per patient.
HSS-Urban		-	-	-	-
HSS-Rural					
22	Trauma Care	Procurement of PLEX machine	180.00	180.00	**New Activity** **Approved Rs 180 Lakh** for procurement of Plasma Exchange machine (Apheresis) – Qty -03 units @ Rs.60 Lakhs per unit (Rate Contract) for the three health facilities
Total Budget			**3,907.61**	**3,901.61**	

Annexure 7.6 - Programme Management Activities (Details of Proposal under Sl. Nos. 146 and 194)

Annexure 7.6 - Programme Management Activities (Details of Proposal under Sl. Nos. 146 and 194)				
S. No	**Programme/ Theme**	**Amount Proposed (In Lakhs)**	**Amount Approved (In Lakhs)**	**GoI Remarks**
Sl. No. 146	**HSS-Urban**			
	HSS-Urban	26.30	26.30	**Approved Rs 26.30 Lakh** and state to ensure that there are no duplications.
	HSS-Urban	9.60	9.60	**Approved Rs. 9.60 Lakh** and state to ensure that there are no duplications.
	HSS-Urban	26.30	26.30	**Approved Rs. 26.30 Lakh** and state to ensure that there are no duplications.
	HSS-Urban Sub-Total	**62.21**	**62.21**	
	RCH			
	TA - Adolescent Health-Planning and Program Management	0.86	0.86	**Approved Rs 0.86 Lakh** for mobility and communication support for RKSK counsellors for 9 districts @ Rs.100 /visit for 8 visits/month for 12 months. (This is not a PM Activity. Expenditure may be booked under sl no 40)
	TA- Family Planning-Planning and Program Management	5.01	-	Rs.5.01 lakhs is duplication of the budget as already approved under serial no. 50
	Immunization	138.00	138.00	**Approved Rs. 138 lakhs** for Mobility support for supervision of district and block-level officers as per norms
	Immunization	5.40	5.40	**Approved Rs. 5.4 lakh** for mobility support for supervision at State level as per norm.

Annexure 7.6 - Programme Management Activities (Details of Proposal under Sl. Nos. 146 and 194)				
S. No	**Programme/ Theme**	**Amount Proposed (In Lakhs)**	**Amount Approved (In Lakhs)**	**GoI Remarks**
Sl. No. 194	Immunization	5.52	5.52	**Approved Rs. 5.52 lakh** for Provision of consumables as per norms. (This is not a PM Activity. Expenditure may be booked under sl no 32)
	Immunisation	12.09	12.09	**Approved Rs. 12.09 Lakh** for Quarterly review meetings exclusive for RI as per norms.
	Immunisation	55.32	55.32	**Approved Rs. 55.32 Lakh** for Quarterly review meetings exclusive for RI at block level as per norms
	Immunisation	4.10	4.10	**Approved Rs. 4.10 Lakh** for Support for Quarterly State level review meetings of district officer
	Immunisation	62.50	61.00	**Approved Rs. 61 Lakhs** for Procurement of spare parts for maintenance of Cold chain equipment as per norms (1.5 lakh/SVS and RVS and 1 lakh/DVS). (This is not a PM Activity. Expenditure may be booked under sl no 32)
	Immunisation	0.00	0.00	-
	Family Planning	0.00	0.00	-
	RCH Sub-Total	**288.80**	**282.29**	
	NDCP			
	NLEP	4.80	4.80	**Approved Rs. 4.8 lakhs** for Mobility support at state level
	NLEP	76.00	76.00	**Approved Rs. 76 lakhs** for Mobility support at district level @ Rs.2.00 lakhs per district

Annexure 7.6 - Programme Management Activities (Details of Proposal under Sl. Nos. 146 and 194)				
S. No	Programme/ Theme	Amount Proposed (In Lakhs)	Amount Approved (In Lakhs)	GoI Remarks
	NLEP	6.00	6.00	**Approved Rs. 6.00 lakhs** as travel expenses for regular and contractual staff at state level under the NLEP scheme.
	NLEP	1.90	1.90	**Approved Rs.1.90 lakhs** for State and district-level meetings to review NLEP implementation.
	NLEP	1.50	1.50	**Approved Rs. 1.50 lakhs** to meet out monthly expenses, telephone charges, courier charges, wages etc for NLEP Cell at State Level.
	NLEP	13.30	13.30	**Approved Rs.13.30 lakhs** for office operation & Maintenance - District Cell under NLEP.
	IDSP	13.68	13.68	**Approved Rs.13.68 Lakhs** for travel, POL, and related expenses during outbreak investigations and field visits for 38 DSUs, at Rs.3,000 per month each. (This is not a PM Activity. Expenditure may be booked under sl no 63)
	IDSP	5.60	5.60	**Approved Rs 5.60 Lakh** for state and district mobility support
	Dengue & Chikungunya	5.00	5.00	**Approved Rs. 5.00 lakhs** for epidemic preparedness. (This is not a PM Activity. Expenditure may be booked under sl no 67)
	NTEP	7.20	7.20	**Approved Rs. 7.20 lakhs** for Support to STF and Core Committee to Medical colleges at Rs.10000 per facility. (This is not a PM Activity. Expenditure may be booked under sl no 73)
	NTEP	263.30	263.30	**Approved Rs.263.30 lakhs** for Mobility support to STS, STLS, DPPM, Radiographer, etc. (Mobility for Service Delivery Staff- STS, Radiographer etc. (This is not a PM Activity. Expenditure may be booked under sl no 73)
	NTEP	72.00	72.00	**Approved Rs. 72.00 lakhs** for Mobility support to district level officials.

Annexure 7.6 - Programme Management Activities (Details of Proposal under Sl. Nos. 146 and 194)				
S. No	Programme/ Theme	Amount Proposed (In Lakhs)	Amount Approved (In Lakhs)	GoI Remarks
	NTEP	6.60	6.60	**Approved Rs. 6.60 lakhs** for Mobility support to State level officials.
	NTEP	26.50	26.50	**Approved Rs. 26.50 lakhs** for POL charges for existing vehicle
	NTEP	196.38	196.38	**Approved Rs.196.38 Lakhs** for Supervision and monitoring charges for district-level officials under the NTEP program
	NTEP	168.00	168.00	**Approved Rs. 168.00 lakhs** for Office Operational cost for district and state level.
	NVHCP	2.00	2.00	**Approved Rs 2.00 lakh** for State lab - meeting cost/ contingency/ operational expenses as per NVHCP norms as proposed (Rs 1 lakh per lab for 2 state labs). (This is not a PM Activity. Expenditure may be booked under sl no 81)
	NVHCP	0.90	0.90	**Approved Rs 0.9 lakh** for Treatment centre - meeting cost/ contingency/ operational expenses as per NVHCP norms. (Rs 0.3 lakh per treatment centre for 3 new treatment centres). (This is not a PM Activity. Expenditure may be booked under sl no 83)
	NVHCP	1.50	1.50	**Approved Rs 1.5 lakh** for MTC - meeting cost/ contingency/ operational expenses as per NVHCP norms as proposed (Rs 0.75 lakh per lab for 2 MTC). (This is not a PM Activity. Expenditure may be booked under sl no 83)
	NVHCP	12.00	12.00	**Approved Rs 12.00 lakh** for Treatment Centre - meeting cost/ contingency/ operational expenses as per NVHCP norms. (Rs 0.3 lakh per treatment centre for 40 treatment centres). (This is not a PM Activity. Expenditure may be booked under sl no 83)
	NVHCP	5.70	5.70	**Approved Rs 5.7 lakh** for DVHMU - meeting cost/ contingency/ operational expenses as per NVHCP norms as proposed (Rs 0.15 lakh per district for 38 districts).

Annexure 7.6 - Programme Management Activities (Details of Proposal under Sl. Nos. 146 and 194)				
S. No	Programme/ Theme	Amount Proposed (In Lakhs)	Amount Approved (In Lakhs)	GoI Remarks
	NVHCP	1.00	1.00	**Approved Rs 1.00 lakh** for SVHMU-meeting cost/ contingency/ operational expenses as per NVHCP norms.
	NVBDCP	20.00	20.00	**Approved Rs.20.00 lakhs** for annual Inter-Departmental Coordination Meeting and State-Task Force meetings. (This is not a PM Activity. Expenditure may be booked under sl no 65)
	NDCP Sub-Total	**910.86**	**910.86**	
	NCD			
	NPCB	20.00	20.00	**Approved Rs.20 lakhs** for Management of Blindness Control Society at both state and district level.
	NP-NCD	43.29	38.00	**Approved Rs. 38 Lakhs** for mobility, Miscellaneous & Contingencies @ Rs 1 Lakhs per District. (This is not a PM Activity. Expenditure may be booked under sl no 110)
	NP-NCD	182.40	182.40	**Approved Rs.182.40 Lakhs** for Mobility support for NCD District Programme Officers across the State @ Rs.4.8 lakhs per district.
	NP-NCD	22.80	22.80	**Approved Rs 22.80 lakhs** for District level contingency for 38 districts.
	NPPCF	0.60	0.60	**Approved Rs. 0.60 lakhs** for mobility support for 1 ongoing district.
	Mental Health	6.75	6.75	**Approved Rs 6.75 Lakhs** towards organising and management of the conference on World Mental Health Day. (This is not a PM Activity. Expenditure may be booked under sl no 98)
	NCD Sub-Total	**275.84**	**270.55**	
	HSS-Rural (including cross cutting activities)			
	Programme Management	190.00	190.00	**Approved Rs. 190 lakhs** and State to ensure that there are no duplications.

Annexure 7.6 - Programme Management Activities (Details of Proposal under Sl. Nos. 146 and 194)				
S. No	Programme/ Theme	Amount Proposed (In Lakhs)	Amount Approved (In Lakhs)	GoI Remarks
	Programme Management	25.50	25.50	**Approved Rs. 25.50 lakhs** and State to ensure that there are no duplications.
	Programme Management	2000.00	2,000.00	**Approved Rs. 2000.00 lakhs** and State to ensure that there are no duplications.
	Programme Management	499.74	499.74	**Approved Rs. 499.74 lakhs** and State to ensure that there are no duplications.
	Programme Management	658.26	658.26	**Approved Rs. 658.26 lakhs** and State to ensure that there are no duplications.
	Programme Management	6.00	6.00	Ongoing Activity: **Approved Rs 6.00 Lakh** for contingency in 10 DNB DH institutions.(This is not a PM Activity. Expenditure may be booked under sl no 191)
	Programme Management	2.00	2.00	**Approved Rs. 2.00 lakh** and State to ensure that there are no duplications.
	Programme Management	4.80	4.80	**Approved Rs. 4.80 lakh** and State to ensure that there are no duplications.
	Programme Management	177.60	177.60	**Approved Rs. 177.60 lakh** and State to ensure that there are no duplications.
	CPHC	20.00	20.00	**Approved Rs. 20 lakhs** for monitoring and evaluation of Ayushman Arogya Mandir
	Mobility charges to ASHAs	0.00	0.00	-
	HSS-Rural Sub-Total	**3583.90**	**3,583.90**	-
Total Budget		**5121.61**	**5,109.81**	-

Annexure 7.7: Revalidation for Previous Years' Approvals

Sl.no	FMR Code	Activity Description	Year of Original Approval	Amount Approved (Rs. Lakhs)	Balance Amount Sought for Revalidation (Rs. Lakhs)	GoI Remarks
1	159	ASHA certification programme under NIOS	2025-26	20.20	3.51	**Approved Rs. 3.51 lakhs** for registration of ASHAs for ASHA certification @Rs. 878/ ASHA for 400 ASHAs
2	159	ASHAs towards attending External examination at RTIs	2025-26	4.00	0.60	**Approved Rs. 0.60 lakhs** for TA/DA of ASHA for external examination @Rs. 150/ ASHA for 400 ASHAs
3	159	ASHA certification for RMNCH+A certification	2025-26	66.25	20.00	**Approved Rs. 20 lakhs** for ASHA Certification Incentive (RMNCH+A) @Rs. 5000/ASHA for 400 ASHAs
Grand Total					**24.11**	

NATIONAL HEALTH MISSION

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