

Annexure - 1: Details of Approval for FY 2026-27,

Amount in Rs. (Lakhs)

Pool	FMR Code	Programme/ Theme	S.No.	Scheme/ Activity	Budget Approved for RoP							
					DBT	Infrastructure - Civil Works (I&C)	Equipment (Including Furniture, Excluding Computers)	Drugs and Supplies	Diagnostics (Consumables, PPP, Sample Transport)	Others including operating costs(OOC)	Surveillance, Research, Assessment, Evaluation (SRAE)	Total Amount Approved for FY 2026-27
Jing RI, IPPI, NIDDCP)	RCH.1	Maternal Health	1	Village Health Sanitation & Nutrition Days (VHSNDs)	-	-	-	-	-	19.96	-	19.96
			2	Pregnancy Registration and Ante-Natal Checkups	-	-	-	-	-	-	-	-
			3	Janani Suraksha Yojana (JSY)	58.53	-	-	-	-	0.29	-	58.82
			4	Janani Shishu Suraksha Karyakram (JSSK) (excluding transport)	-	-	-	-	17.15	11.31	-	28.46
			5	Janani Shishu Suraksha Karyakram (JSSK) - Transport	-	-	-	-	-	-	-	-
			6	Pradhan Mantri Surakshit Matritva Abhiyan (PMSMA)	-	-	-	-	-	3.74	-	3.74
			7	Surakshit Matritva Aashwasan (SUMAN)	-	-	-	-	-	0.16	-	0.16
			8	Midwifery	-	-	-	-	-	-	-	-
			9	Maternal Death Review	-	-	-	-	-	0.60	0.21	0.81
			10	Comprehensive Abortion Care	-	-	-	0.10	-	-	-	0.10
			11	MCH Wings	-	-	-	-	-	-	-	-
			12	FRUs	-	-	-	-	-	-	-	-
			13	HDU/ICU - Maternal Health	-	-	-	-	-	-	-	-
			14	Labour Rooms (LDR + NBCCs)	-	-	1.00	-	0.18	0.12	-	1.30
			15	LaQshya	-	-	-	-	-	6.00	-	6.00
			16	Implementation of RCH Portal/ANMOL/MCTS								
			17	Other MH Components	-	-	-	-	-	-	-	-
			18	State specific Initiatives and Innovations								
	RCH.2	PC & PNDT Act	19	PC & PNDT Act	-	-	-	-	-	0.25	-	0.25
			20	Gender Based Violence & Medico Legal Care For Survivors Victims of Sexual Violence	-	-	-	-	-	-	-	-
	RCH.3	Child Health	21	Rashtriya Bal Swasthya Karyakram (RBSK)	-	-	-	-	-	66.40	-	66.40
			22	RBSK at Facility Level including District Early Intervention Centers (DEIC)	-	-	-	-	-	3.86	-	3.86
			23	Community Based Care - HBNC & HBYC	-	-	11.33	-	-	-	-	11.33
			24	Facility Based New born Care	-	-	-	-	-	8.18	-	8.18
			25	Child Death Review	-	-	-	-	-	0.71	-	0.71
			26	SAANS	-	-	-	-	-	-	-	-
			27	Paediatric Care	-	-	-	-	-	3.00	-	3.00
			28	Janani Shishu Suraksha Karyakram (JSSK) (excluding transport)	-	-	-	-	-	-	-	-
			29	Janani Shishu Suraksha Karyakram (JSSK) - Transport	-	-	-	-	-	-	-	-

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RCH Flexible Pool (include)			30	Other Child Health Components	-	-	-	-	-	0.04	-	0.04
			31	State specific Initiatives and Innovations								
	RCH.4	Immunization	32	Immunization including Mission Indradhanush	-	-	-	-	-	25.33	0.28	25.61
			33	Pulse Polio Campaign	-	-	-	-	-	-	-	-
			34	eVIN Operational Cost	-	-	-	-	-	-	-	-
	RCH.5	Adolescent Health	35	Adolescent Friendly Health Centers (AFHCs)	-	-	-	-	-	1.56	-	1.56
			36	Weekly Iron Folic Acid Supplementation (WIFS)	-	-	-	-	-	-	-	-
			37	Menstrual Hygiene Scheme (MHS)	-	-	-	-	-	-	-	-
			38	Peer Education Programme	-	-	-	-	-	5.75	-	5.75
			39	School Health And Wellness Program under Ayushman Bharat	-	-	-	-	-	-	-	-
			40	Other Adolescent Health Components	-	-	-	-	-	-	-	-
			41	State specific Initiatives and Innovations								
	RCH.6	Family Planning	42	Sterilization - Female	-	-	-	-	-	34.67	-	34.67
			43	Sterilization - Male	1.16	-	-	-	-	-	-	1.16
			44	IUCD Insertion (PPIUCD and PAIUCD)	2.72	-	-	-	-	-	-	2.72
			45	ANTARA	0.77	-	-	-	-	-	-	0.77
			46	MPV (Mission Parivar Vikas)	-	-	-	-	-	-	-	-
			47	Family Planning Indemnity Scheme	-	-	-	-	-	-	-	-
			48	FPLMIS	-	-	-	-	-	-	-	-
			49	World Population Day and Vasectomy Fortnight	-	-	-	-	-	-	-	-
			50	Other Family Planning Components	-	-	-	-	-	5.58	-	5.58
			51	State specific Initiatives and Innovations								
	RCH.7	Nutrition	52	Anaemia Mukht Bharat	-	-	-	-	-	-	-	-
			53	National Deworming Day	-	-	-	-	-	-	-	-
			54	Nutritional Rehabilitation Centers (NRC)	-	-	-	-	-	15.00	-	15.00
			55	Vitamin A Supplementation	-	-	-	-	-	-	-	-
			56	Mother's Absolute Affection (MAA)	-	-	-	-	-	-	-	-
			57	Lactation Management Centers	-	-	-	-	-	1.05	-	1.05
			58	Intensified Diarrhoea Control Fortnight	-	-	-	-	-	-	-	-
			59	Eat Right Campaign	-	-	-	-	-	-	-	-
			60	Other Nutrition Components	-	-	-	-	-	-	-	-
			61	State specific Initiatives and Innovations								
	RCH.8	National Iodine Deficiency Disorders Control Programme (NIDDCP)	62	Implementation of NIDDCP	-	-	-	-	-	-	-	-
	RCH Sub Total				63.19	-	12.33	0.10	17.33	213.56	0.49	306.99
	NDCP.1	Integrated Disease Surveillance Programme (IDSP)	63	Implementation of IDSP	-	-	-	-	-	-	-	-

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NDCP Flexi Pool	NDCP.2	National Vector Borne Disease Control Programme (NVBDCP)	64	Malaria	-	-	-	-	-	0.41	-	0.41
			65	Kala-azar	-	-	-	-	-	-	-	-
			66	AES/JE	-	-	-	-	-	0.45	-	0.45
			67	Dengue & Chikungunya	-	-	-	-	-	7.09	1.00	8.09
			68	Lymphatic Filariasis	-	-	-	-	-	15.26	3.10	18.36
	NDCP.3	National Leprosy Eradication Programme (NLEP)	69	Case Detection and Management	-	-	-	0.17	-	2.66	-	2.83
			70	DPMR Services: Reconstructive Surgeries	0.12	-	-	-	1.27	-	-	1.39
			71	District Awards	-	-	-	-	-	-	-	-
			72	Other NLEP Components	-	-	-	-	-	-	-	-
	NDCP.4	National Tuberculosis Elimination Programme (NTEP)	73	Drug Sensitive TB (DSTB)	0.51	-	1.07	-	14.28	1.16	-	17.01
			74	Nikshay Poshan Yojana	28.34	-	-	-	-	-	-	28.34
			75	PPP	1.01	-	-	-	-	72.12	-	73.13
			76	Latent TB Infection (LTBI)	0.17	-	-	-	-	-	-	0.17
			77	Drug Resistant TB(DRTB)	0.05	-	-	-	-	0.11	-	0.16
			78	TB Harega Desh Jeetega Campaign	-	-	-	-	-	8.82	-	8.82
			79	State specific Initiatives and Innovations								
	NDCP.5	National Viral Hepatitis Control Programme (NVHCP)	80	Prevention	-	-	-	-	-	-	-	-
			81	Screening and Testing through Facilities	-	-	-	-	0.40	-	-	0.40
			82	Screening and Testing through Outreach Activities	-	-	-	-	-	1.20	-	1.20
			83	Treatment	-	-	-	-	-	1.00	-	1.00
	NDCP.6	National Rabies Control Programme (NRCP)	84	Implementation of NRCP	-	-	-	-	-	-	-	-
	NDCP.7	Programme for Prevention and Control of Leptospirosis (PPCL)	85	Implementation of PPCL	-	-	-	-	-	-	-	-
	NDCP.9	State specific Initiatives and Innovations	86	Implementation of State specific Initiatives and Innovations								
	NDCP Sub Total				30.20	-	1.07	0.17	15.95	110.28	4.10	161.76
NCD.1		National Program for Control of Blindness and Vision Impairment	87	Cataract Surgeries through Facilities	-	-	-	7.31	-	-	-	7.31
			88	Cataract Surgeries through NGOs	-	-	-	-	-	23.41	-	23.41
			89	Other Ophthalmic Interventions through Facilities	-	-	-	-	-	-	-	-
			90	Other Ophthalmic Interventions through NGOs	-	-	-	-	-	-	-	-
			91	Mobile Ophthalmic Units	-	-	-	-	-	6.05	-	6.05
			92	Collection of Eye Balls by Eye Banks and Eye Donation Centres	-	-	-	-	-	-	-	-

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NCD Flexi Pool		(NPCB+VI)	93	Free Spectacles to School Children	-	-	-	-	-	-	-	-
			94	Free spectacles to Others	-	-	-	-	-	-	-	-
			95	Grant in Aid for the Health Institutions, Eye Bank, NGO, Private Practioners	-	-	-	-	-	-	-	-
			96	Other NPCB+VI components	-	-	-	-	-	-	-	-
	NCD.2	National Mental Health Program	97	Implementation of District Mental Health Plan	-	-	-	1.00	-	6.99	-	7.99
			98	Implementation of TeleMANAS	-	-	-	-	-	0.20	-	0.20
	NCD.3	National Programme for Health Care for the Elderly (NPHCE)	99	Geriatric Care at DH	-	-	10.00	-	-	-	-	10.00
			100	Geriatric Care at CHC/SDH	-	-	-	-	-	2.70	-	2.70
			101	Geriatric Care at PHC/ SHC	-	-	18.88	-	-	-	-	18.88
			102	Community Based Intervention	-	-	-	-	-	0.10	-	0.10
			103	State specific Initiatives and Innovations								
	NCD.4	National Tobacco Control Programme (NTCP)	104	Implementation of COTPA - 2003	-	-	-	-	-	2.48	-	2.48
			105	Implementation of ToEFI Guideline	-	-	-	-	-	2.60	-	2.60
			106	Tobacco Cessation	-	-	2.00	2.00	-	-	-	4.00
	NCD.5	National Programme for Prevention and Control of Non Communicable	107	NCD Clinics at DH	-	-	-	-	-	0.84	-	0.84
			108	NCD Clinics at CHC/SDH	-	-	-	-	-	1.32	-	1.32
			109	Cardiac Care Unit (CCU/ICU) including STEMI	-	-	-	-	28.14	-	-	28.14
			110	Other NP-NCD Components	-	-	-	-	-	-	-	-
			111	State specific Initiatives and Innovations								
	NCD.6	Pradhan Mantri National Dialysis	112	Haemodialysis Services	-	-	-	-	-	60.98	-	60.98
			113	Peritoneal Dialysis Services	-	-	-	-	-	-	-	-
	NCD.7	National Program for Climate Change and Human Health (NPCCHH)	114	Implementation of NPCCHH	-	-	-	-	-	8.00	-	8.00
	NCD.8	National Oral health programme (NOHP)	115	Implementation at DH	-	-	-	-	-	1.50	-	1.50
			116	Implementation at CHC/SDH	-	-	-	-	-	1.80	-	1.80
			117	Mobile Dental Units/Van	-	-	-	-	-	-	-	-
			118	State specific Initiatives and Innovations								
	NCD.9	National Programme on palliative care (NPPC)	119	Implementation of NPPC	-	-	-	-	-	5.00	-	5.00
	NCD.10	National Programme for Prevention and Control of Fluorosis (NPPCF)	120	Implementation of NPPCF	-	-	-	-	-	-	-	-
	NCD.11	National Programme for	121	Screening of Deafness	-	-	-	-	-	-	-	-
			122	Management of Deafness	-	-	5.60	-	-	-	-	5.60

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		Prevention and	123	State Specific Initiatives								
	NCD.12	National programme for	124	Support for Burn Units	-	-	-	-	-	-	-	-
			125	Support for Emergency Trauma Care	-	-	-	-	-	-	-	-
	NCD.13	State specific Programme Interventions	126	Implementation of State specific Initiatives and Innovations								
	NCD Sub Total				-	-	36.48	10.31	28.14	123.97	-	198.91
Health System Strengthening (HSS) - Urban	HSS(U). 1	Comprehensive Primary Healthcare (CPHC)	127	Development and Operations of Ayushman Arogya Mandirs - Urban	-	-	-	-	-	-	-	-
			128	Wellness Activities at AAMs- Urban	-	-	-	-	-	0.77	-	0.77
			129	Teleconsultation Facilities at AAMs-Urban	-	-	-	-	-	-	-	-
	HSS(U). 2	Community Engagement	130	ASHA (including ASHA Certification and ASHA benefit package)	-	-	-	-	-	-	-	-
			131	MAS	-	-	-	-	-	3.21	-	3.21
			132	JAS	-	-	-	-	-	-	-	-
			133	RKS	-	-	-	-	-	-	-	-
			134	Outreach Activities	-	-	-	-	-	2.42	-	2.42
			135	Mapping of Slums and Vulnerable Population	-	-	-	-	-	-	-	-
			136	Other Community Engagement Components	-	-	-	-	-	-	-	-
	HSS(U). 3	Public Health Institutions as per	137	Urban PHCs	-	-	-	-	-	2.88	-	2.88
			138	Urban CHCs and Maternity Homes	-	-	-	-	-	-	-	-
	HSS(U). 4	Quality Assurance	139	Quality Assurance Implementation & Mera Aspataal	-	-	-	-	-	1.03	-	1.03
			140	Kayakalp	-	-	-	-	-	-	-	-
			141	Swacch Swasth Sarvatra	-	-	-	-	-	-	-	-
	HSS(U). 5	HRH	142	Remuneration for all NHM HR	-	-	-	-	-	66.23	-	66.23
			143	Incentives (Allowance, Incentives, Staff Welfare Fund)	-	-	-	-	-	19.99	-	19.99
			144	Incentives under CPHC	-	-	-	-	-	2.40	-	2.40
			145	Costs for HR Recruitment and Outsourcing	-	-	-	-	-	-	-	-
	HSS(U). 6	Technical Assistance	146	Planning and Program Management*	-	-	-	-	-	-	-	0.02
	HSS(U). 7	Access	147	PPP	-	-	-	-	-	-	-	-
	HSS(U). 8	Innovation	148	State specific Programme Innovations and Interventions								
	HSS(U). 9	Untied Grants	149	Untied Fund	-	-	-	-	-	8.05	-	8.05
	HSS-Urban Sub Total				-	-	-	-	-	106.98	-	107.00
	HSS.1	Comprehensive Primary Healthcare	150	Development and Operations of Ayushman Arogya Mandirs- Rural	-	-	70.00	-	-	63.32	-	133.32
			151	Wellness Activities at AAMs- Rural	-	-	-	-	-	53.76	-	53.76

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Health System Strengthening (HSS) Rural		(CPHC)	152	Teleconsultation Facilities at AAMs-Rural	-	-	-	-	-	-	-	-
			153	CHO Mentoring	-	-	-	-	-	-	-	-
	HSS.2	Blood Services & Disorders	154	Screening for Blood Disorders	-	-	-	-	-	-	-	-
			155	Support for Blood Transfusion	-	-	-	-	-	12.36	-	12.36
			156	Blood Bank/BCSU/BSU/Thalassemia Day Care Centre	-	-	4.56	-	-	0.48	-	5.04
			157	Blood Collection and Transport Vans	-	-	-	-	-	-	-	-
			158	Other Blood Services & Disorders Components	-	-	-	-	-	-	-	-
	HSS.3	Community Engagement	159	ASHA (including ASHA Certification and ASHA Benefit Package)	-	-	-	-	-	101.47	-	101.47
			160	VHSNC	-	-	-	-	-	1.60	-	1.60
			161	JAS	-	-	-	-	-	1.20	-	1.20
			162	RKS	-	-	-	-	-	-	-	-
			163	Other Community Engagements Components	-	-	-	-	-	-	-	-
	HSS.4	Public Health Institutions as per IPHS norms	164	District Hospitals	-	-	-	-	-	-	-	-
			165	Sub-District Hospitals	-	-	-	-	-	-	-	-
			166	Community Health Centers	-	-	-	-	-	-	-	-
			167	Primary Health Centers	-	86.00	-	-	-	-	-	86.00
			168	Sub-Health Centers	-	-	-	-	-	-	-	-
			169	Other Infrastructure/Civil works/Expansion etc.	-	20.20	-	-	-	-	-	20.20
			170	Renovation/Repair/Upgradation of Facilities for IPHS/NQAS/LaQshya/ MUSQAN/SUMAN Compliance	-	-	-	-	-	-	-	-
	HSS.5	Referral Transport	171	Advance Life Saving Ambulances	-	-	-	-	-	-	-	-
			172	Basic Life Saving Ambulances	-	-	-	-	-	-	-	-
			173	Patient Transport Vehicle	-	-	-	-	-	-	-	-
			174	Other Ambulances	-	-	-	-	-	-	-	-
	HSS.6	Quality Assurance	175	Quality Assurance Implementation & Mera Aspataal	-	-	-	-	0.30	28.05	-	28.35
			176	Kayakalp	-	-	-	-	-	9.30	-	9.30
			177	Swacch Swasth Sarvatra	-	-	-	-	-	-	-	-
	HSS.7	Other Initiatives to improve access	178	Comprehensive Grievance Redressal Mechanism	-	-	-	-	-	17.96	-	17.96
			179	PPP	-	-	-	-	-	13.22	-	13.22
			180	Free Drugs Services Initiative	-	-	-	-	-	12.71	-	12.71
			181	Free Diagnostics Services Initiative	-	-	-	-	111.21	-	-	111.21
			182	Mobile Medical Units	-	-	-	-	-	-	-	-
			183	State specific Programme Interventions and Innovations								
	HSS.8	Inventory management	184	Biomedical Equipment Management System and AERB	-	-	-	-	-	-	-	-
			185	Remuneration for all NHM HR	-	-	-	-	-	1,303.63	-	1,303.63

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	HSS.9	HRH	186	Incentives (Allowance, Incentives, Staff Welfare Fund)	-	-	-	-	-	4.15	-	4.15
			187	Remuneration for CHOs	-	-	-	-	-	211.68	-	211.68
			188	Incentives under CPHC	-	-	-	-	-	71.15	-	71.15
			189	Costs for HR Recruitment and Outsourcing	-	-	-	-	-	-	-	-
			190	Human Resource Information Systems (HRIS)								
	HSS.10	Enhancing HR	191	DNB Courses for Medical Doctors	-	-	-	-	-	-	-	-
			192	Training Institutes and Skill Labs	-	-	-	-	-	-	-	-
	HSS.11	Technical Assistance	193	SHSRC / ILC (Innovation & Learning Centre)	-	-	-	-	-	-	-	-
			194	Planning and Program Management*	-	-	-	-	-	-	-	94.79
	HSS.12	IT interventions and systems	195	Health Management Information System (HMIS)								
			196	Implementation of DVDMS								
			197	eSanjeevani (OPD+HWC)								
	HSS.13	Innovation	198	State specific Programme Innovations and Interventions								
	HSS.14	Untied Grants	199	Untied Fund	-	-	-	-	-	143.98	-	143.98
	HSS.15	Snakebite envenoming	200	Snakebite Prevention and Control (SBPC)	-	-	-	-	-	-	-	-
	HSS.16	Capacity building incl. training	201	Capacity building incl. training (Incl. RCH, NDCP, NCD, HSS-Urban, HSS-Rural)*	-	-	-	-	-	-	-	48.46
	HSS.17	ASHA Incentives	202	ASHA Incentives (Incl. RCH, NDCP, NCD, HSS-Urban, HSS-Rural)*	-	-	-	-	-	-	-	732.81
	HSS.18	IT Interventions and Systems	203	IT interventions (Incl. RCH, NDCP, NCD, HSS-Urban, HSS-Rural - IT software, Laptops etc. for service delivery)*	-	-	-	-	-	-	-	99.15
	HSS.19	IEC & Printing	204	IEC & Printing (Incl. RCH, NDCP, NCD, HSS-Urban, HSS-Rural)*	-	-	-	-	-	-	-	106.56
	HSS.20	Inventory management	205	PSA Plants (funded under PM-CARES)	-	-	-	-	-	-	-	-
	HSS.21	Innovation	206	State-specific Initiatives and Innovations*	-	-	-	-	-	-	-	-
	HSS-Rural Sub Total				-	106.20	74.56	-	111.51	2,050.00	-	3,424.04
GRAND TOTAL					93.38	106.20	124.43	10.58	172.94	2,604.78	4.59	4,198.69
Revalidation of Civil Works						798.42						798.42
Grand Total					93.38	904.62	124.43	10.58	172.94	2,604.78	4.59	4,997.11

RCH-1_Maternal Health

Sl. No.	Scheme/ Activity	Approval 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
	Total RCH-1 (Maternal Health)					119.35	
1	Village Health Sanitation & Nutrition Days (VHSNDs)					19.96	The current MMR (SRS- 2021-23) of the State is 153 per 1 lakh live births which has increased from 119 (SRS 2018-20).As per the state holder consultation meeting there are 10 high focus district which had low output indictors but keeping in view the trend of increasing MMR, it is decided that 30 districts will be considered for implementing special interventions on maternal health. The background information is at Maternal Health Write-up Annexure
1.1	Monthly Village Health and Nutrition Days					19.96	Background: VHSNDs are organised at AWC level once in a month on fixed days by ANM, AWW and ASHA. These platforms are to provide ANC registration, ANC check up and identification high risk pregnancies, identification SAM children counseling to ANC, lactating mothers and mothers of children within age group of 0-5 years. However, in hard to reach areas in which the integrated VHSND and RI sessions are being held on quarterly basis. Current Status: Currently 98% of sessions are held against the planned sessions
1.1.1	Organisation cost for Regular sessions	Per session	100	0.00	19958	19.96	Proposal-1: Organisation cost for Regular sessions in rural areas (on going) Old SC AAMs- 6688 Nos. Newly sanctioned SC AAMs - 1338 Nos Total SC AAM (Old + New)- 8026 Nos. Total sessions: @ 8 sessions per SC AAM x 8026 SC AAMs=64208 sessions per month Total sessions annually- 64208 sessions per month x 12 months= 770496 sessions Budget Proposed for 90% of VHSND sessions= 693446 (Revised target)- As 100% funtionalization of new SC will take some time Organization cost in non-hard to reach area: @Rs. 100/- per session Proposal-2: Organisation cost for Regular sessions in Urban areas (on going)- Proposed under NUHM PIP
1.1.2	Organisation cost for Difficult Area Sessions	Per session	2000	0.02	0	0.00	Proposal: Organisation cost for Difficult Area Sessions (on going) Difficult Notified villages has decreased from 4418 nos. to 3900 nos., in last 2 years due to construction of road which has made village accessible. Difficult notified villages in FY 2024-25 - 3900 nos. Quarterly 4 sessions per Village x 3900 villages= – 15600 sessions (Annually) Budget Proposed for 60% of Difficult area for Integrated VHSND & RI = 9360 sessions (Revised target) Unit Cost Per Session: @Rs. 2000/- (Mobility-Rs. 1500/- + Session organizing cost- Rs. 500/-)
1.1.3	Printing of reporting forms & formats						Proposal-1: Sub centre level monthly reporting format of SC AAM Proposal-2: VHSND/UHSND monitoring format for BPMU/UPHC and DPMU /CPMU (Source of funding: To be met from state specific SAMMPUrNA budget)

Sl. No.	Scheme/ Activity	Approval 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
1.1.4	Strengthening of VHSND and UHSND						New Activity: Proposal/Budget: Proposal-1: Procurement of equipment and logistics for VHSND and UHSND session sites Proposal-2: Establishment of Mini Skill lab at selected CHCs for continuing skill practices Detail Proposal is placed at Maternal Health Write-up Annexure folder (Source of funding: To be met from state specific SAMMPUrNA budget)
1.1.5	ASHA Incentive for mobilising and attending VHSND						Budget Approved under HSS-17_ASHA Incentive_SI.No.202
2	Pregnancy Registration and Ante-Natal Checkups					-	
2.1	Printing						Activity: 1. Printing proposed for Mother & Child Protection Card (MCP Card) Out of NHM fund & Family 2. Couple Counseling Booklet (Nirapada Matrutwa) out of State Specific Budget Budget Approved under HSS-19_IEC & Printing_SI.No.204
2.2	ASHA Incentive Preparation of due list of Pregnant Women & updated on monthly basis						Budget Approved under HSS-17_ASHA Incentive_SI.No.202
3	Janani Suraksha Yojana (JSY)					58.82	Expected target : 2026-27 Institutional delivery expected to be same as 2024-25- 418883 Rural JSY- 383738 (ID in Rural area (90% of Public + Accrediated Private) Urban JSY- 42638 ID in Urban area (10% of Public + Accrediated Private)
3.1	Home deliveries	Per beneficiary	500	0.01	3	0.02	Background: Home delivery cases belonging to BPL category are incetivised @ Rs. 500/- under JSY
3.2	Institutional deliveries					58.51	Background: Institutional delivery in public health facilities and accredited private health facilities are incentivised @ Rs. 1400 for rural areas beneficiaries and Rs. 1000/- for Urban area beneficiaries Current Status: During 2025-26 (April to Aug 2025), 161738 nos of deliveries conducted and reported in public health facilities & 2838 delivery conducted in accredited private health facilities = 164576 deliveries Expected target : 2026-27 Reported Instutuional delivery in 2024-25- 418883, same no. of institutional delivery expected during 2026-27 (i.e 418883) Total No. of deliveries in public health facility (418883) + Total no. of deliveries in Accrediated Private facility (7491) = 426374, Rural JSY: 90% of institutional delivery in Public & Accrediated Private Hospitals Urban JSY: 10% of institutional delivery in Public & Accrediated Private Hospitals
3.2.1	Rural	Per beneficiary	1400	0.01	3798	53.17	
3.2.2	Urban	Per beneficiary	1000	0.01	422	4.22	

Sl. No.	Scheme/ Activity	Approval 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
3.2.3	Hiring experts for C-sections					1.12	Ongoing Activity: Proposal: Incentive to Govt/ Pvt O&G Specialist for conducting C Section. 5 % of total C section delivery at public health facility will be done by hired specialists and deputed specialists 1. Revised Proposed Norms and Modalities for hiring experts from Pvt. Sector for C Section 1.1 Incentive for Hiring Private Practitioners (O&G Specialists / Anesthetists) for FRUs @ Rs. 3000/- per case, As per existing JSY guidelines. 1.2. Additional support for Mobility@ Rs. 2,000/- (Maximum) per visit (subject to actual expenditure) to cover travel expenses for hired experts Total Cost: Rs. 5000/- per C Section .
3.2.3.1	Hiring experts from Public Health Facilities for C Section	Per case	3000	0.03	14	0.42	2. Deployment of Government Specialists beyond Duty Hours Modalities for deployment: In facilities where adequate O&G Specialists/ EmOC trained doctor and Anesthetists/ LSAS trained doctors are available in the public health system (MCH/DHH/Non FRU facilities), they shall be deputed to other FRUs beyond regular duty hours to conduct C-section deliveries. 2.1 Incentive: Rs. 1,000/- per C-section conducted beyond regular duty hours. 2. 2. Mobility Support: Rs. 2,000/- per visit (maximum) (subject to actual expenditure) Total Cost: Rs. 3000/- per C Section Budget is proposed for 5% of expected CS at public health facilities (out of which 50% by private doctors and 50% by O &G spl from the public health system)
3.2.3.2	Hiring experts from Pvt. Sector for C Section	Per case	5000	0.05	14	0.70	
3.3	JSY Administrative Expenses	Lumpsum	29,264	0.29	1	0.29	Administrative Cost: 0.5% of total JSY Budget excluding ASHA Incentive
3.4	ASHA Incentive under JSY			-		0.00	Budget Approved under HSS-17_ASHA Incentive_Sl.No.202
4	Janani Shishu Suraksha Karyakram (JSSK) (excluding transport)					28.46	
4.1	Free Diet	Lumpsum				11.31	Ongoing Activity Proposal 1. Free diet under PMSMA and e PMSMA During 2024-25-ANC cases visited under PMSMA and e PMSMA- 409691 (65% of ANC including multiple time HRP visits) Expected beneficiaries during 2026-27 - 90% of reported 624277 ANC including multiple time HRP visits = @Rs.110/- per day x 1 day 2.Diet to beneficiaries admitted at SC & PHC (N) Delivery Points where sanctioned beds are not available. Reported Delivery in SC & PHC (N) in 2024-25 - 36330 & expected same number in 2026-27 Proposed for 30% of expected deliveries in 2026-27- 10899 Budget Proposed:@Rs.110/- per day x 2 days
4.1.1	For PMSMA beneficiaries	Per day	110	0.00	10286	11.31	3. Diet for other insts. having sanctioned bed strength has been provisioned under State budget.
4.1.2	Expected deliveries at SC & PHC(N) DP	Per day	110	0.00	0	0.00	Justification for Targeted beneficiaries: Previous year achievement trend. Justification for unit cost: prevailing rate of diet in public health intuitions for general patients (GoO Notification No.18461 dtd.03.08.2023)

Sl. No.	Scheme/ Activity	Approval 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
4.2	Free Blood Transfusion						Budget Approved in HSS-2 Blood Services
4.3	Free Diagnostic Services	Per case	500	0.01	3429	17.15	Ongoing Activity Background: AS per mandate of PMSMA all ANC beneficiaries should have at least one ultrasound during the pregnancy period. In order to have maximum coverage for ultrasound, the private ultrasound units are empanelled for the purpose. These units will provide free of cost ultrasound services to beneficiaries and the funds @ Rs.350/- per beneficiary is reimbursed to the empanelled unit. Current Status: During the year 2024-25 -1,71,220 Pregnant Women have received ultrasound services in empanelled clinic Proposal: This activity will target coverage of ultrasound for all pregnant woman. The ultrasound facility is available in both public and private facilities. The budget provision is done for private empanelled ultrasound facilities . The referral cases from PMSMA clinic and from the public health facilities which do not have USG machines will be covered in the empanelled private USGs clinic. The unit cost per USG is proposed @ Rs. 500/- per case (Unit cost revised from Rs. 350/- to Rs. 500/- as per the recommendation during NPCC Meeting) for private empanelled facilities only Expected to be covered in private clinics 30% of ANC cases
4.4	Free Drugs and Consumables					0.00	Source of Fund: State Health Budget
4.4.1	IFA tablets for Pregnant & Lactating Mothers	Per tab	0.12	0.00		0.00	Ongoing Activity Background: All pregnant woman will be given 1 tab IFA for 180 days from 2nd trimester and all PNC cases will be given 1 tab of IFA for 180 days after delivery as prophylactic dose. Incase of anemic pregnant woman or lactating mother double dose of IFA is provided. Current Status: 95% of PW and 81% of PNC mothers are provided 180 IFA tabs during pregnancy and PNC period. Proposal: Drugs Specification (Revised in the current year) : 60 mg elemental Iron + 500 mcg Folic Acid Level at which the item would be used : SC/ PHC/ CHC/ SDH/ DH Total pregnant women - 624277 Total PNC - 565975 1. Procurement of 214245360 red IFA red tablets for prophylactic treatment of 1190252 pregnant (624277) and lactating women (565975) 2. Procurement of 27043029 IFA red tablets for therapeutic management of 15% of ANC cases (93642 nos) & 10% PNC cases (56598)= 150239 anemic pregnant and lactating women Total Budget Requirement: 241288389 IFA Red tablets (prophylactic+therapeutic) @Rs 0.12 per tablet Budget proposed under RCH-7 Nutrition, Source of Fund: State Health Budget

Sl. No.	Scheme/ Activity	Approval 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
4.4.2	Calcium Tablets	Per tab	0.2	0.00		0.00	Ongoing Activity Background: All pregnant woman will be given 2 tabs of calcium daily for 180 days from 2nd trimester and all PNC cases will be given 2 tab of calcium for 180 days after delivery as prophylactic dose . Current Status 2024-25: 77 % of PW and 100 % of PNC mothers are provided 360 calcium tabs during pregnancy and PNC period. Proposal: Calcium supplementation during pregnancy is implemented in all 30 districts. Training at all levels has been completed. Drugs Specification : 500 mg elemental Calcium & 250 IU Vitamin D3 Level at which the item would be used : SC/ PHC/ CHC/ SDH/ DH Total pregnant women- 6,24,277 Total PNC - 5,65,975 Total Beneficiaries : 11,90,252 Provisioned for 2 tabs for all PW & all PNC mother for 180 days= 42,84,90,720 tabs. + Buffer 10%=4,28,49,072 Total Requirement of Tablets:47,13,39,792 tabs. Source of Fund: State Health Budget
4.4.3	Albendazole tablets	Per tab	1.5	0.00		0.00	Ongoing Activity Background: De-worming during pregnancy is implemented in all 30 districts. Training at all levels has been completed. All pregnant woman will be given one albendazole during 2nd trimester. Proposal: Drugs Specification : 400 mg , chewable Level at which the item would be used : SC Total Expected pregnant women - 624277 Provisioned of 1 tablet per PW for all PW = 624277+ 62427 (10 % buffer)= 686704 Nos Budget proposed under RCH-7 Nutrition, SL NO. 52 Source of Fund: State Health Budget
4.4.4	Other Drugs & Consumables			0.00		0.00	To be met out of state supply
5	Janani Shishu Suraksha Karyakram (JSSK) - Transport					-	
5.1	Free Referral Transport - JSSK for Pregnant Women	Per case	500	0.01	0	0.00	Ongoing Activity Background: As mandate of JSSK all pregnant woman and Complicated PNC cases up to 42 days of delivery will be provided free referral transportation to the public health facility. Hence free transportation is provisioned as one of the entitlements under JSSK. Current status : During the year 2024-25: 4,74,520 beneficiaries have availed free referral transportation from home to facility and referral for higher facility. Proposal: keeping in view the increasing demand of 108 Jananni Express, the Ambulance will cover transportation of delivery cases, complicated PNC cases, sick infant, NRC drop back transportation of high risk ANC cases and interfacility referral Targeted beneficiaries in 2026-27 - 4,75,000 as per the last year availed beneficiaries
6	Pradhan Mantri Surakshit Matritva Abhiyan (PMSMA)					3.74	

Sl. No.	Scheme/ Activity	Approval 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
6.1	PMSMA & Extended PMSMA activities at State/ District level						Ongoing Activity: Background: PMSMA clinic day is organised 9th of every month with aim to ensure each pregnant woman must get at least one check up by O & G Spl or trained MBBS doctor so that high risk condition can be screened and appropriate management of high risk condition can be done. Private practitioners are also encouraged under the programme as volunteer. All there services , investigations, ultrasound etc along with diet are provided free of cost. Extended PMSMA (E-PMSMA) are the days organised other than 9th of the Month for check up of Antenatal Cases and high risk pregnancy cases. Each high risk cases are provided support for maximum of three visits also with provision of ASHA to accompany. Current status: During the year 2024-25, 65% of ANC cases attended PMSMA & E-PMSMA Clinic Proposal: Proposed for United funds for districts, and transportation cost for ASHA and high risk cases to attend PMSMA & E-PMSMA clinic days. 1.00 Proposed untied Budget: 1. Rs.0.50 lakhs per dist with <=5 blocks x 4 = Rs. 2.00 Lakhs 2.Rs.1.00 lakh with 6 to 10 block x 13 = Rs. 13.00 Lakhs 3. Rs.1.50 lakhs with 11 to 15 blocks x 10= Rs. 15.00 Lakhs 3. Rs.2.00 lakhs with > = 16 blocks x 3= Rs. 6.00 Lakhs Total Proposed: Rs. 36.00 Lakhs, The fund will be released to institutions for taking of following activities as per need. 1. Transportation of private practitioners 2. Meeting with various stakeholders at State and District level 3. Award and refreshment to volunteers & others 4. Mobility cost to doctors and paramedical staff those are deployed from other facilities for the Clinic day 5. IEC at institution level for wide publicity of the programme
6.1.1	At District level (<= 5 blocks)	Per dist	50000	0.50	0	0.00	Ongoing Activity
6.1.2	At District level (6 to 10 blocks)	Per dist	100000	1.00	1	1.00	Ongoing Activity
6.1.3	At District level (11 to 15 blocks)	Per dist	150000	1.50	0	0.00	Ongoing Activity
6.1.4	At District level (>=16 blocks)	Per dist	200000	2.00	0	0.00	Ongoing Activity
6.2	Special Package for HRP Management					2.74	
6.2.1	Transportation cost to High Risk Pregnancy (HRP)	per visit	100	0.00	2743	2.74	Ongoing Activity 20% of expected ANC to be the HRP's Transportation cost to Each HRP will be supported for maximum of 3 visits Budget proposed @ Rs. 100/- per visit per HRP for 40% of expected visits as all HRP's may not claim for transport cost.

Sl. No.	Scheme/ Activity	Approval 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
6.2.2	Hiring of specialist manpower for conducting PMSMA/ e PMSMA session	Lumpsum	2664000	26.64		0.00	New Activity: Hiring of specialist manpower for conducting PMSMA/ e PMSMA session • Mobility Support for O & G spl./ BEmOC trained doctor / private O G spl @ Rs. 2000/- per visit to attend PMSMA and e PMSMA clinic day • Budget proposed for 20% of 577 facilities = 111 facilities x Rs. 2000/- for 12 months = Rs. 26.64 Lakhs Proposed as part of Special Strategy for Accelerated Reduction of MMR, placed at HSS-21, State-specific Initiatives and Innovations, SI No-206
6.2.3	ASHA Incentive						Budget Approved under HSS-17_ASHA Incentive_SI.No.202
7	Surakshit Matritva Aashwasan (SUMAN)					0.16	SUMAN NOTIFICATION Background: The SUMAN programme aims at zero preventable maternal and newborn death. Under SUMAN programme the facilities providing maternal and new born services are categorized under 3 packages, SUMAN Basic, SUMAN BEmOC and SUMAN CEmOC package. the facilities are notified as per the service availability. Total target upto 2025-26: 311 - CEMoC, 311- BEmOC and 3498 - Basic facilities ; Total- 3907 Achievement upto Aug 2025: 3243 i.e. CEmOC-93, BEmOC-313, Basic-2837 (It is expected to achieve 100% by March 2026) Total target for 2026-27: 1000 Institutions for notification under basic package
7.1	Self assessment and notification of SUMAN						Non Budgeted Activity
7.2	Training of SUMAN volunteers						Budget Approved under HSS-16_Capacity Building Incl. Training_SI.No.201
7.3	Incentive as first responder of maternal death under SUMAN						Budget Approved under HSS-17_ASHA Incentive_SI.No.202
7.4	CoE MH & SUMAN					0.00	Ongoing Activity Current Status: COE MH and SUMAN is functioning at O & G deptt of SCB MCH. Proposal: 1. Mentoring visit expenses : Mentoring visit will be given by mentors selected by CoE to FRUs/DPs and medical colleges for providing hand holding support to the service providers in the LR, MOT, ANC ward, OG OPD and PNC wards to improve the maternal health services. 62 nos of facilities have been identified those have either LaQshya certified or in the process of LaQshya certification. The mentors are in a team with one clinical mentor and one management mentor from Medical colleges, developmental partners and consultants. Budget: Each of the facility will be provided 1 quarterly visit , i.e., 62 facilities X 4 visits Rs. 4000 –TA, Rs. 2250- DA and accommodation and Rs 4000 - Honorarium per visit X 62 facilities for 4 visits= Rs. 25.42 Lakhs. Budgeted for 60% = Rs. 15.25 lakhs 2. Coordinating expenses for mentoring- This includes internet charges, office expenses for mentoring activities etc. Budget: @ Rs. 6000/- per Month x 12 months= Rs. 0.72 Lakhs
7.4.1	Mentoring visit expenses	Lumpsum	1525200	15.25	0	0.00	
7.4.2	Coordinating expenses for mentoring	Lumpsum	72000	0.72	0	0.00	

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7.5	Reward to SUMAN volunteers	Per Block	2000	0.02	8	0.16	New Activity: Reward to SUMAN volunteers SUMAN volunteers are selected from the villages who are working as motivators and support for the maternal and child health program and extend support to the pregnant woman, parents of new born and PNC mother up to 6 months to get appropriate services. They are pure volunteers without and incentive and financial remuneration. In order to encourage them and help then continue their work, a small reward may be given to them in form of appreciation at block level. Appreciation will be done annually in the existing block level forum. Funds @ Rs 2000 to be kept for each block in which 3 best SUMAN volunteers will be felicitated Budget Approved: @ Rs. 2000/- per block
8	Midwifery						-
8.1	NMTI (National Midwife Training Institute)					0.00	Ongoing Activity: Head of Expenses: 1. Training Of Midwifery Educators at NMTI: Budget Proposed under HSS-16_Capacity Building Incl. Training_SI.No.201
8.2	Training of Nurse Practitioners in Midwifery					0.00	Ongoing Activity: Head of Expenses: 1. Training Cost (Contingency & Consumables , Organisational cost, Vehicle hiring cost & PoL, Procurement of study materials, ONMEB registration, examination charges, Fooding, Accommodation, Mentoring vist etc) Budget Approved under HSS-16_Capacity Building Incl. Training_SI.No.201 2. Incentive to Midwifery Educator & Programme Coordinators- Budget Approved under HSS-9_HRH_SI.No.186
9	Maternal Death Review					0.81	
9.1	Maternal Death Review Trainings			0.00		0.00	Not Proposed as dedicated training on MDSR was conducted for Nodal Officers, O&G Specialists, DMRCHs & Hospital Managers during FY 2024-25
9.2	Maternal Death Review (both in institutions and community)	Lumpsum		-		0.81	

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9.2.1	Maternal Death Review	Per case	450	0.00	17	0.08	Ongoing Activity Background: For every reported maternal death, community based verbal autopsy is to be done. A team of three members will visit the community and collect information as per the appropriate annexure and each of the member is provided with Rs. 150 for conducting verbal autopsy. Current Status: 149 nos. of maternal deaths were reported during 2025-26 (1st qtr.) and it is expected that around 961 deaths will be reported by March 2026 and all maternal deaths will be investigated in community level by CB MDR committee. Proposal: During the year 2026-27 also 961 deaths are expected to be reported as the MMR has increased to 153 per 1 lakh live births Review of Maternal deaths at community level by CBMDR committee- @ Rs. 150 per person for 3 persons X 961 Expected Maternal deaths (Considering MMR-153 & Expected Live Birth-627916 (2025-26). Budget Approved for- Honorarium to investigators @Rs. 450/- (@Rs.150/- per person x 3 persons) for Community based maternal death investigation. Budget proposed for 80% of expected deaths.
9.2.2	State / District level meeting of Confidential enquiry and other MDR related meeting as per MDSR guideline.	Lumpsum	10000	0.10	1	0.10	Ongoing Activity Background: MDR at State and District level is held regularly as per MDSR guidelines. Current Status: During 2024-25, 70% of reported maternal deaths are reviewed at district level. Proposal: Budget Proposed @ Rs. 10,000 per district per year for 30 districts & Rs.3.00 lakhs for State level per year as per MDSR guideline State level meeting: 4 times confidential review meeting attended by Experts from MCHs/ Programme Officers etc., 4 times State Monitoring and Review Committee attended by Programme Officers, experts from MCH & District MDR Nodal Officers and 1 State Task force meeting are being conducted with this provision of Fund.
9.2.3	Mobility cost to Family Members of Maternal Death case to attend Collector Review Meeting	@Rs.200/- per person for 2 person	400	0.00	8	0.03	Ongoing Activity Background: Sample maternal death cases are reviewed by District collector in the presence of family members Proposal: During each year 2026-27, the total estimated deaths in State are 961 (SRS 153) and expected to be covered 80% i.e., 768 numbers. Budget proposed for mobility cost to 2 nos. of family members (@200/- each) of deceased mother to attend Collector Review meeting at district level - (@Rs.200/- per person x 2 persons) Mobility cost to family members for MDR @ Rs. 200/- per member X 2 members=Rs.400 X No of deaths (50% of total MDs)

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9.2.4	State level monitoring of MDR process	Per visit	10000	0.10	6	0.60	New Activity Keeping in view the increasing maternal deaths, it is decided that there will be strong monitoring of the MDSR process so that quality review will lead to proper determination of corrective action which in turn will help in reducing maternal deaths by taking appropriate action in time. Monitoring of MDR process by State level observers is proposed in the PIP. The observers will be clinical persons from O&G, Paediatrics & Public health experts. Each district will be visited once in two months by designated observer to support the process followed by the MDSR committee and conduct quality review. The observer will also review child death & still birth along with maternal deaths during the visit. Total No. of visits: @ 6 visits per dist per annum Budget Proposed: Lumpsum Rs. 10,000/- per visit
9.2.5	ASHA Incentive for reporting all women death within the age group of 15-49 years						Budget Approved under HSS-17_ASHA Incentive_SI.No.202
9.3	Printing of MDR formats						Printing of Maternal Death Surveillance & Response (MDSR) formats are required to ensure regular and timely reporting from various levels (Source of funding: To be met from state specific SAMMPUrNA budget)
10	Comprehensive Abortion Care					0.10	Status : Presently there are 418 Public Health Facilities are in readiness with trained manpower, Drugs and Equipment to provide Services
10.1	Equipment (MVA /EVA) for Safe Abortion Services	Per unit	3200	0.03	0	0.00	MVA equipment for 2026-27: Equipment (MVA /EVA) for Safe Abortion Services: 95 numbers will procured for newly trained CAC MOs (To be distributed in the training) @ Rs. 3200/- per MVA Out of 95, 50 nos for Mos attending 12 days certification training and 45 nos will be for refresher training providers . The distribution will be done at CAC training venues.
10.2	Drugs for Safe Abortion (MMA)	Per pack	40	0.00	250	0.10	Ongoing Activity 2. Drugs Specification : Misoprostol 4 Tablets (200 Mcg) + Mifepristone 1 Tablet (200 mg) comb pack Level at which the item would be used : PHC/CHC/ SDH/ DH with trained doctor or O G Spl Total pregnant women - 624277 (reported) Expected for abortion: 10% of PW Expected Induced abortion: 40% of expected abortion cases Expected abortion by Medical Method (MMA): 50% of Expected abortion + 10% as buffer Budget Approved: MMA pack @ Rs. 40/- per pack
10.3	Training & Capacity Building						Budget Approved under HSS-16_Capacity Building Incl. Training_SI.No.201
10.4	ASHA Incentive for Comprehensive Abortion Care (CAC)						Budget Approved under HSS-17_ASHA Incentive_SI.No.202
10.5	Printing under Comprehensive Abortion Care Services			-		0.00	(Source of funding: To be met from state specific SAMMPUrNA budget) Detail Proposal at HSS-19_IEC & Printing_SI.No.204
11	MCH Wings						
12	FRUs					-	
12.1	LSAS Training						Budget Approved under HSS-16_Capacity Building Incl. Training_SI.No.201
12.2	Training for CS & Management of Basic complication						Budget Approved under HSS-16_Capacity Building Incl. Training_SI.No.201

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					Quantity/ Target	Budget (Rs. Lakhs)	
13	HDU/ICU - Maternal Health					-	
13.1	Establishment & functionalisation of Obstetric HDUs						Background: Obstetric HDUs: Functional-6 (DHH Keonjhar, DHH Kandhamal, DHH Bhawanipatna, Capital Hospital Bhubaneswar, DHH Puri & DHH Dhenkanal) No New Proposal in this year Recurring expenditure for functionalisation of Obstretics HDU (To be met from state specific SAMMPUrNA budget)
13.2	Establishment & functionalisation of Obstetric Hybrid ICUs						Hybrid ICUs: Functional-3 (SCB MCH, MKCG MCH, VSS MCH) No New Proposal in this year Recurring expenditure for functionalisation of Obstetric Hybrid ICUs (To be met from state specific SAMMPUrNA budget)
14	Labour Rooms (LDR + NBCCs)					1.30	
14.1	SBA Training						Budget Approved under HSS-16_Capacity Building Incl. Training_Sl.No.201
14.2	BEmOC training						Budget Approved under HSS-16_Capacity Building Incl. Training_Sl.No.201
14.3	Dakshata training						Budget Approved under HSS-16_Capacity Building Incl. Training_Sl.No.201
14.3.3	Onsite Mentoring for DAKSHATA	per visit	2000	0.02	6	0.12	Mentoring visit proposed for CHC and PHC-N DPs with delivery more than 10 and less than 50 per month . 285 facilities identified having with delivery more than 10 and less than 50 per month from HMIS 2024-25. Each facility will be given 4 visits in a year. Total facilities Identified : 243 No of visits = 285 * 4 = 1140 visits Cost for each visit @Rs.2000/- , Budget proposed for 50% of visits.
14.4	Disposable Kelley's Pad						1 per each delivery + 10% buffer. Expected deliveires in 2026-27- 565975 + 56597(10% buffer)= 622572 (Source of funding: To be met from state specific SAMMPUrNA budget)
14.5	Reusable patients gown for delivery cases	Per Gown	300	0.0030	61	0.18	Ongoing Activity Use of patients gown for all delivery cases will reduced incidence of sepsis as in many rural area the delivery cases usages old and turn out clothes due to risulalestic and cultural tabuoos. The provision of sterials / autoclave gown will at least provide asepsis clothing to the delivery cases during the stay at hospital. this will also reduced cross infection scope. Provision: Per day delivery of expected delivery (565975): 2005 * 2 gown + 10% buffer = 4411 gowns Budget: @Rs.300/- per Gown
14.6	Logistics for Birth Companion Scheme						Ongoing Activity 1. @Rs. 40,000/- per MCH (Reusable Gown - @ Rs 300X 100nos. = 30000, Slipper Rs. 10000/-) for 14 MCH = Rs. 5,60,000 2. @ Rs. 20,000/- per DHH (Reusable Gown - @ Rs 300X 50nos. = 15000, Slipper Rs. 5000/-)for 22 DHH = Rs. 4,40,000 3. @ Rs. 10,000/- per SDH and CHC (Reusable Gown - @ Rs 300X 20nos. = 6000, Slipper Rs. 4000/-) for 62 facilities = Rs. 6.20.000
14.6.1	For MCHs						
14.6.2	For DHHs						

Sl. No.	Scheme/ Activity	Approval 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
14.6.3	For SDHs & CHCs						Total- Rs. 16.20 lakhs per Annum (Source of funding: To be met from state specific SAMMPUrNA budget)
14.7	Printing of Labour Room register						(Source of funding: To be met from state specific SAMMPUrNA budget) Detail Proposal at HSS-19_IEC & Printing_Sl.No.204
14.8	Printing of Delivery Case sheet						(Source of funding: To be met from state specific SAMMPUrNA budget) Detail Proposal at HSS-19_IEC & Printing_Sl.No.204
14.9	Strengthening Intra-Natal Care						New Activity: There are 390 functional delivery points in the State (Apr-June 2025-26). An assessment of labour rooms of delivery points and MOT of FRUs was undertaken to assess the gaps and as per assessment the list of major equipment will be procured. The list is attached at MH Write-up Annexure folder Budget: LR equip – Rs. 200.09 Lakhs MOT Equip- Rs. 40.90 Lakhs (Source of funding: To be met from state specific SAMMPUrNA budget)
14.10	Provision of CTG Machines for Early Fetal Distress Detection and Stillbirth Reduction	Per unit	100000	1.00	1	1.00	New Activity: Background: According to Sample Registration System (SRS) data for 2022–23, Odisha’s stillbirth rate is 15 per 1,000 births, one of the highest among Indian states. Additionally, NFHS-5 (2019–21) reports that around 13% of last pregnancies in Odisha ended in fetal loss—including miscarriage, abortion, or stillbirth. This shows that many pregnancies are lost, with stillbirths being a significant portion. Providing CTG (Cardiotocography) machines at Medical Colleges and District Hospitals will help detect fetal distress early during labor. This enables timely medical care, which can significantly reduce preventable stillbirths. Assessment was conducted across 38 facilities, including all district hospitals and medical colleges. Of these, 27 facilities gave the status. Based on the minimum requirement of two CTG machine per labour room, there is a deficit of 31 CTG machines. It is assumed that the 11 non-responding facilities have adequate availability as per the requirement. • Procurement of CTG machine for 21 facilities LR – 31 nos. (list attached at annexure- B) • Installing and Demonstrations of staff on use of CTG machine. Budget: Re-Proposed for 19 CTG Machines at DHH Level @ Rs. 1.00 Lakh per Machine under NHM PIP & rest for MC&H fund shall be mobilised out of State Budget
15	LaQshya					6.00	Ongoing Activity: Background: To improve the quality of labour room and OT services, the LR and OT will be LaQshya certified. State has taken target of 98 facilities. Current Status: Out of the target of 74 targeted FRUs by Aug 2025 26 LR and 26 MOT have been nationally certified.
15.1	Mentoring visit by State team						Budget to be met out of Sl.No. 7_Surakshit Matritva Aashwasan (SUMAN) under CoE MH & SUMAN
15.2	Mentoring by district coaching team	Per Visit	2700	0.03		0.00	Background: The district coaching team will visit the LaQshya targeted facilities at lest quarterly

Sl. No.	Scheme/ Activity	Approval 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
15.3	State and National assessment for LaQshya certification					0.00	once. The district coaching team will visit the LaQshya targeted facilities at least quarterly once.
15.3.1	State level assessment of MCH, DHH and SDH	Per MCH/ DHH/ SDH	89500	0.90		0.00	Already certified facilities to be visited quarterly once for maintaining the status Up to 2024-25, 26 facilities have been certified-
15.3.2	State level assessment of CHCs	Per CHC	63000	0.63		0.00	Proposal: 2026-27 Total Targeted institutions: 26 + 12 = 38
15.3.3	National level assessment of MCH, DHH and SDH	Per MCH/DHH/SD	210000	2.10		0.00	One institution to be visited 4 times (two visits for LR & MOT) in a year by mentor. Total visit per annum - 38*4 = 152 visits
15.3.4	National level assessment of CHCs	CHC	146000	1.46		0.00	Budget dropped as LaQshya Certification of LR & OT shall be certified under NQAS from 2026-27 onwards.
15.4	State level assessment for LaQshya surveillance					0.00	
15.4.1	State level assessment of MCH, DHH , SDH & CHC	Per MCH/DHH/SD H	45000	0.45	0	0.00	Budget recommended for surveillance assessment for 3 facilities both department LR & MOT @0.45L per Deptt
15.4.2							
15.5	Incentives as per LaQshya guideline					6.00	Status of National level LaQshya Certification before 2025-26 Total LR certified: 26 (DHH-20, SDH-4, CHC-2) Total OT certified: 26 (DHH-21, SDH-4, CHC-1) To be Certified during 2025-26 Total LR : 6 (MCH-1, DHH-4, SDH-2, CHC-1) Total MOT : 6 (MCH-1, DHH-4, SDH-2, CHC-1) Target of National level LaQshya Certification before 2026-27 Total LR certified: 32 (MCH-1, DHH-24 SDH-6, CHC-3) Total OT certified: 32 (MCH-1, DHH-25, SDH-6, CHC-2) (As all the LR/MOT of co located DHH with MCH will be considered as LR/MOT of DHH not MCH because the MCH will function in separate building)
15.5.1	Incentives for certification of current certified institutions:	Lumpsum	600000	6.00	1	6.00	For already certified facilities before 2026-27 2026-27- Budgeted for 100% MCH, 70% DHH, 70% SDH, 100% CHC Incentive to be provided based on the financial norms.
15.5.2	Incentives for certification of proposed institutions	Lumpsum		0.00			Proposal for certification 2026-27: Total LR certified: 12 (MCH-3, DHH-5 SDH-2, CHC-2) Total OT certified: 12 (MCH-3, DHH-5 SDH-2, CHC-2) Budget will be proposed after certification in the supplementary PIP
16	Implementation of RCH Portal/ ANMOL/ MCTS						Budget Proposed under HSS-18_IT Interventions and Systems_SI.No.203
17	Other MH Components					-	
17.1	Incentive & Other allowance					0.00	

Sl. No.	Scheme/ Activity	Approval 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
17.1.1	Transportation of HIV/ Syphilis combo kit to VHND sites by maintaining cold chain	Per case	75	0.00		0.00	Ongoing Activity Background: Under universal screening of all PW for HIV and Syphilis, screening have been started in VHSND and UHSND sessions. Hence to maintain cold chain of the combo kit AVD system is adopted for carrying the combo kit in cold chain. Hence the person supporting in AVD is provided transportation cost per session. Status: About 80% of VHSND & UHSND sessions were supported with AVD volunteers transportation cost Proposal: Transportation of HIV/ Syphilis combo kit to VHSND& UHSND sites by maintaining cold chain. Total Annual VHSND& UHSND sessions -743558 (693446+ 50112) sessions AVD cost for HIV/ Syphilis Kit transportation proposed for 70% sessions : 520490 AVD cost @ Rs.75 per session Budget to be met out of NIDAAN (State Specific Diagnostic Services)/ Balance fund under XV_FC
17.1.2	ASHA Incentive						Budget Approved under HSS-17_ASHA Incentive_SI.No.202
17.2	Drugs & Supplies for Maternal Health					0.00	
17.2.1	RTI /STI drugs and consumables	Per test		0.00		0.00	Supply from State Budget
17.2.2	Glucose pouch for Screening (GDM)	Per Pouch	10	0.00		0.00	Ongoing Activity Glucose packet is not a part of EDL. 75gm glucose packet is required for testing of blood sugar for PW under GDM programme. This programme is Implemented in all 30 districts. Training has been completed for all service providers Proposal for FY 2026- 27: Procurement - Drugs Specification : 75gm/packet Level at which the item would be used : SC/ PHC/ CHC/ SDH/ DH Expected Pregnancies- 624277 Expected GDM Cases (14% of Expected ANC) - 97399 No. of GDM cases requiring Metformin Tab & Inj. Insulin (3% of GDM cases) - 2622 Requirement of Glucose packet (75 gm) for screening (Expected PPW 665678 X 2) -12,48,554 Requirement of additional Glucose packet for PW under Metformin Tab & Inj. Insulin (@20 glucose packet) - 52,440 Total Requirement of Glucose - 13,00,994 @Rs.10/- per packet Budget to be met out of State Drug Budget

Sl. No.	Scheme/ Activity	Approval 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
17.2.3	Safe Delivery Kit for HIV	Per Kit	600	0.01	0	0.00	Ongoing Activity Background: Safe Delivery Kits are required to be kept in all functional delivery kits to meet the requirement and use by the health care service providers at DP while providing services to HIV positive mother approaches for delivery as per the protocol of labour room standardization. Proposal: Specification : 1pkt/5 kit (For 4 service providers , 1 for baby) Level at which the item would be used : SC/ PHC/ CHC/ SDH/ DH (DP only) Requirement is for 407 functional delivery point @ 3 kit per DP + 220 ICTCs @ 5 kit per ICTCs + @10 kits per MCH for 14 MCH & @5 kit for BBSR Municipality Hosp.=2466 Kits The cost per kit will be around Rs 600/-
17.2.4	Inj. Ferric Carboxy Maltose	Per inj		0.00		0.00	Budget Proposed under RCH-7 Nutrition
17.3	Training & Capacity Building					0.00	Budget Approved under HSS-16_Capacity Building Incl. Training_Sl.No.201
17.4	IEC/BCC activities under MH	Lumpsum		0.00		0.00	Budget Approved under HSS-19_IEC & Printing_Sl.No.204
17.5	Printing activities under MH					0.00	(Source of funding: To be met from state specific SAMMPUrNA budget) Detail Proposal at HSS-19_IEC & Printing_Sl.No.204
17.6	Strengthening Implementation of Assisted Reproductive Technology (Regulation) Act, 2021 and Surrogacy (Regulation) Act,2021						Background /Proposal • The Assisted Reproductive Technology (Regulation) Act, 2021 has come into force on 18th December 2021 and Surrogacy (Regulation) Act, 2021 came into force on 25th December 2021. Both the Acts are health related laws. • The ART Act regulates assisted reproductive technology clinics/banks, prevention of misuse, safe and ethical practice of assisted reproductive technology services for addressing the issues of reproductive health • Accordingly, the State Government has constituted the State Assisted Reproductive Technology and Surrogacy Board. • Meetings of the Statutory Bodies are conducted regularly. • Maintenance of the documentation of all ART procedures, donors, surrogates and children born through these methods facilitates legal procedure and prevent malpractice. • As it is new Endeavour, training is proposed for the members of State Appropriate Authority, key officials & stakeholders. • Regular inspections and monitoring of the ART facilities is essential to ensure compliance with ethical and medical standards & Hence District Nodal Officers are proposed to be trained and created scope for field inspection.
17.6.1	Training / Sensitization of members from the State Appropriate Authority, Key officials & stakeholders						Budget Approved under HSS-16_Capacity Building Including Training_Sl.No. 201
17.6.2	Training/ Sensitization of ADPHO (FW)-cum- District Nodal Officer, ART & Surrogacy & AM-LAIS						Budget Approved under HSS-16_Capacity Building Including Training_Sl.No. 201

Sl. No.	Scheme/ Activity	Approval 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
17.6.3	Field Inspection, monitoring and supportive supervision by State Inspection and Monitoring Team, ART & Surrogacy.						Budget to be met out of HSS-11_Technical Assistance_ SI.No.194 out of pooled fund
17.7	Incentives and Allowances						Budget Approved under HSS-9_HRH_SI.No.186
17.8	Planning and M&E						Activities: 1. Review Meetings: 1.1. State Level Review Meeting- Integrated with RMNCHAN Quarterly Review Meeting 1.2.District Level Review meetings -Integrated District Level Monthly Meeting 2. Monitoring & Supportive Supervision: Budget to be met out of Pooled fund placed at HSS-11_Technical Assistance_ SI.No.194
18	State specific Initiatives and Innovations						Not Proposed
	Total RCH-1 (Maternal Health)					119.35	

RCH-2_PC & PNDT Act

Sl. No.	Scheme/ Activity	Approval 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
	Total RCH-2_PC & PNDT Act					0.25	
19	PC & PNDT Act					0.25	Background : The SRB reportedly stand at 913 girls(2023) per 1000 boys in Odisha . The lower SRB reflects increased incidence of Sex- selective abortions & misuse of diagnostic/prenatal technologies & thus the PIP reflects neasessary measures to address the given issues . In order to address the issues based on the gravity of the situation, Districts have been categorised in red & Orange Zone (i.e. Hot Spots areas) for special interventions 1. Red Zone Districts (4 districts whose SRB < 875 , high density of USG clinics and history of past PCPNDT violations)/2. 15 districts in orange Zone whose SRB is les than 930. Total -19 districts Strategy/ Activities: 0.25 1. Strict enforcement of PC-PNDT Rules- Mandatory registration, renewal & geo-tagging of all Ultrasound Machines , achieve 100% digital Form F submission , Quarterly Inspection & Monitoring by SAC/DAC, Special interventions in Hot Spot Districts i.e. Deploy Flying Squads , Decoy Operation etc. 2. Community Mobilisation & Participation - Targeted Awareness Campaign i.e. Informer's incentives across the state and Social Influencer (Sarpanch) Meet/Sensitiation in Hot spot districts. 3. Develop Annual SRB Status Report for public & Administrative decision making (process-Triangulation of data from HMIS , Birth registration system, tracking MTPs beyond 12 weeks, referral patterns etc.)
19.1	Enforcement of PC-PNDT Rules						
19.1.1	Inspection/ Monitoring						Ongoing Activity
19.1.1.1	Inspection/ Monitoring bt SAC/DAC/ Flying Squads	Per Visit	5000	0.05	5	0.25	Proposal: Inspection/ Monitoring bt SAC/DAC/ Flying Squads Proposal : Quarterly Inspection & Monitoring by SAC/DAC in all 30 districts (30 districts X 4 times=120 times)& spl. flying squared movement in 19 districts (Hot Spot Districts) over & above quarterly monitoring/ inspection. (min 30 expected) Budget : @ Rs.5000/- per visit
19.1.1.2	Mobility support for appearance in the Court / Follow up of PCPNDT cases for case building	Lumpsum	250000	2.50	0	0.00	Proposal: Mobility support for appearance in the Court / Follow up of PCPNDT cases for case building As per the Strategic Pillars of National SRB Action Plan, Prosecution & Legal Processes needs to be strengthened by-a. Strengthening digital evidence collection b.Follow-up on convictions, appeals, quashed cases. Gap analysis of acquitted & quashed cases may be conducted through Director of Public Prosecution Further, there is a need of mobility support for appearance in Court for PC PNDT Cases (Total pending PCPNDT Cases - 34) Budget: Lumpsum 2.50 lakhs

Sl. No.	Scheme/ Activity	Approval 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
19.1.2	Decoy Operations						As per Strategic pillars of National SRB Action Plan it is essential to strengthen PCPNDT enforcement by use of decoy patients in high-risk districts. Decoy operations are required for apprehending the clinics and persons involved in sex selection and to take stringent legal action against the violators Proposal : @ 5 decoy operation proposed as approved last year
19.1.2.1	Vehicle operation, Decoy incentive, Attendant incentive, miscellaneous expenses etc. for Decoy Operation	Per Decoy	100000	1.00	0	-	Average @Rs.100,000/- per decoy operation Head of Expences: Vehicle Hiring Cost, Decoy incentive, Attendant incentive, support service & miscellaneous expenses.
19.1.2.2	Accessories for Decoy			-		-	Accessories like Spy Camera & Voice recorder has already been provided to districts. Hence, no new proposal proposed in the current year.
19.1.3	Capacity Building & Training						Budget Approved under HSS-16_Capacity Building Including Training_SI.No. 201
19.2	Community Mobilisation & Participation						
19.2.1	Informers' incentive	Lumpsum	25000	0.25	0	-	Ongoing Activity. Informers' Incentive is provided @ Rs.25000/- per case for (a) women who lodges a complaint about being pressured by family members to undergo sex selection/determination, (b) For reporting cases on abortion or MTP of cases, (c) For Confirmed information on registered, unregistered, or portable USG facilities involved in sex selection or sex determination. Incentive shall be provided in 3 installments ; a) 1st installment: Rs. 10,000 to the informer on validation of information b) 2nd installment: Rs. 10,000 released by the DAA upon filing of the prosecution report. c) 3rd installment: Rs. 5,000 released by the DAA after the informer provides evidence in support of the prosecution, as per Rule 18A(5)(i).
19.2.2	District Level Orientation/ Sensitization Meeting for Strengthening Community Participation	40/ Per Batch		-		0.00	Name of the Training: Orientation/ Sensitization Meeting for Sarpanchs & Counselors of 19 selected districts (hot spot areas) Justification: The proposed Orientation/ Sensitization Meeting shall prepare each sarpanch and counselors for addressing local issues with regards to Sex-selective abortions & missuse of pre-natal technology. Total Participants: 5340 (in 19 focused districts) Targeted for 2026-27: 2670 (50% of total requirement) Batch Size: 40 Total Batches: 66 Level of Training: District Budget Shifted to HSS-16, Capacity building incl. training SI No 201 as per discussion in the NPCC Meeting
19.3	Other Activities						
19.3.1	Digitization of Data Base						Budget Proposed under HSS-18_IT Interventions and System_SI.No.203
19.4	Annual SRB Status Report						Non Budgeted Activity
19.5	IEC/BCC & Printing						Budget Approved under HSS-19_IEC & Printing_SI.No.204

Sl. No.	Scheme/ Activity	Approval 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
19.6	Planning & M&E						Activities: 1. Review Meetings: 1.1. State Level Review Meeting- Integrated with RMNCHAN Quarterly Review Meeting 1.2.District Level Review meetings -Integrated District Level Monthly Meeting 2. Monitoring & Supportive Supervision: Budget to be met out of Pooled fund placed at HSS-11_Technical Assistance_ SI.No.194
20	Gender Based Violence & Medico Legal Care For Survivors Victims of Sexual Violence						-
20.1	Provision of SAEC (Sexual Assault Evidence Collection) Kit to Public Health Facilities	Per Kit	6800	0.07	0	-	New Activity: Background & Justification: Prescribed in MOHFW, GoI, Guidelines and Protocols. State has ensured standardized measures of evidence collection in all Public Health Facilities up to CHC Level. Progress: • Following Protocol for Medico – Legal Examination of Sexual Assault, Ministry of Home Affairs, 616 facility based SAFE Kits procured under the branding of NHM and sample distributed to all Public Health Facilities • Facility Based GBV MLC Standardized Reporting Format, Register, Case Sheets, printed and supplied to all Public Health facilities up to CHC Level Proposal: Budget norm: Rs 6800/- per set is proposed as per State Forensic Sciences laboratory) for Medical Examination of Sexual Violence
20.2	Capacity Building & Training						Budget Approved under HSS-16_Capacity Building Including Training_SI.No.201
	Total RCH-2_PC & PNDT Act					0.25	

RCH-3_Child Health

Sl. No.	Scheme/ Activity	Approval 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
	Total Child Health					93.51	
21	Rashtriya Bal Swasthya Karyakram (RBSK)					66.40	Background & Current Status: RBSK was rolled out in the State in the year 2013-14 and implemented in all 30 districts of Odisha. Till date a total of 632 MHTs out of 640 sanctioned and 32 DEICs are functional. Referral services to DEIC & Higher facility continued as per RBSK mandate. The State has empanelled & tied up various Health institutions including Govt. MC&Hs, AIIMS, BBSR, AYJNISHD, Khurda, 5 Hospitals Under Narayana Hrudayalaya Pvt. Ltd, LV Prasad Eye Institute, BBSR, Mission Hospital, Durgapur, Apollo Children's Hospital, Chennai, Medicaover Hospitals, Visakhapatnam, Kalinga Hospital, BBSR, CIIT, Smile Train India Trust, Etc. In addition to treatment at RBSK empanelled Hospital under RBSK referral cost, children are provided free treatment services through Govt. MC&H & PMJAY/ GJAY empanelled hospitals in the State as per the existing norm of the scheme. New Born Screening is continuing in all functional DPs and functional linkage between DEIC & SNCU has been established in all districts. For better convergence with Line departments, Convergence meeting were conducted periodically at district Level. Proposal 2026-27: All the ongoing activities of PIP 2024-26 will be continued and strengthened.
21.1	Mobile Health Team Operational Cost						
21.1.1	Hiring Cost Including POL/ DOL	Per team per Month	34000	0.34	16	65.28	Ongoing Activity with revised unit cost Background: In PIP 2024-25, the mobility support cost per MHT per month approved was Rs.31000/-. Which includes both Vehicle Hiring & Fuel cost. Progress: During 2024-25, 97% of expenditure is incurred under the head. Proposal For FY 2026-27: Vehicle hiring cost proposed per MHT per Month increased from Rs.31000/- to Rs.34000/- (10% increase from last year looking into hike in hiring charges of vehicles).
21.1.2	Equipment/ Instruments- Replenishment	Per MHT		0.00		-	Ongoing Activity Funds for Procurement of Equipment/ Instruments for RBSK Mobile health team was sanctioned in 2024-26 PIP. Hence, no new proposal proposed in 2026-27.
21.1.3	Drugs & Supplies	Per team		0.00		-	Prescribed drugs for MHT shall be supplied from State Health Budget.

Sl. No.	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2026-27		State Remarks
					Quantity/ Target	Budget (Rs. Lakhs)	
21.1.4	Contingency & Consumables	Per MHT	7000	0.07	16	1.12	Ongoing Activity with revised unit cost Last Year's approval : Rs.5000/- per MHT per annum Progress: More than 100% expenditure incurred towards Operational cost for MHT in 2024-25. Proposal For FY 2026-27: Budget increased from @Rs.5000/- to @ Rs. 7000/- per MHTs per annum Detailed expenditure: 1. Data Pack Support for Reporting under RBSK MIS: Cost increased from Rs. 1000/- to Rs.3000/- (@Rs.250/- X 12= Rs.3000/- per annum) on the basis of revised data pack cost. 2. Minor refilling/ replacement/ repairing of kits (carry bag, Head Circumference Tape, MUAC tape, BP cuff, charts, torch, anti virus and battery replacement of laptop, etc): Rs.3000/- per annum 3. Stationeries for reporting & documentation (Annual and Monthly updated plan, case study/ success story,etc : @Rs.1000/- per annum
21.2	Capacity Building/ Training under RBSK						Budget Approved under HSS-16_Capacity building incl. training_SI.No.201
21.3	Printing of RBSK Card and Registers						Budget Approved under HSS-19_IEC & Printing_SI.No.204
21.4	ASHA incentive for mobilising 0-3yr children for screening					-	Budget Approved under HSS-17_ASHA Incentives_SI.No.202
21.5	Planning & M&E						Activities: 1. Review Meetings: 1.1. State Level Review Meeting- Integrated with RMNCHAN Quarterly Review Meeting 1.2.District Level Review meetings -Integrated District Level Monthly Meeting 2. Monitoring & Supportive Supervision: Budget to be met out of Pooled fund placed at HSS-11_Technical Assistance_ SI.No.194
22	RBSK at Facility Level including District Early Intervention Centers (DEIC)					3.86	
22.1	Equipment / Instruments	Lumspsum	27300000	273.00	0	-	Ongoing Activity Background & Justification: 32 DEIC are functional in the State. Few items under Vision, Psychological Assessment & other proprietary items could not be procured in spite of repeated Tenders, Vacancy of Optometrist and non availability of space at DEIC. Now the required readiness i.e. HR and Space at DEIC is in place. For complete functionalisation of all DEICs in the State, in the year 2026-27, the pending items along with no. of units required are proposed to be procured: RVG- 12, Dental X-ray- 12, Pediatric Ophthalmic refraction Chair unit – 10, Streak Retinoscope-10, Direct Ophthalmoscope- 10, Handheld Slit Lamp-10, Vision Assessment Tools for 10 DEICs, Psychological Assessment Tools (pending for procurement)- 32 DEICs, Sensory integration Unit-28 & Speech Software- 32 DEICs. Detailed calculation attached at RBSK Write-up Annexure Activity is recommended in Principle

Sl. No.	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2026-27		State Remarks
					Quantity/ Target	Budget (Rs. Lakhs)	
22.2	Operational Cost	Per DEIC	336000	3.36	1	3.36	Ongoing Activity: Background & Justification: 32 DEICs are established in the State. For smooth operation of these DEICs, the operational cost has been approved. Proposal for FY 2026-27: Operational cost of DEIC proposed as per last year's approval (Including attendant hiring on out sourcing for required cleanliness) Budgeted @Rs.28,000/- Per DEIC Per Month X 12 Months: Rs.3.36 Lakhs Activity is shifted to OOC head as recommended by NPCC
22.3	Printing of Forms & Formats						Budget Approved under HSS-19_IEC & Printing_Sl.No.204
22.4	Capacity Building/ Training			-		-	Not Proposed
22.5	Support for Secondary/ Tertiary Care Treatment/ Management						Ongoing Activity: Background & Justification: As per RBSK mandate, the children identified with prescribed birth defect conditions are to be treated at Tertiary level facilities. Under RBSK, 5 private cardiac Hospitals under Narayan Hrudayalaya Ltd., Mission Hospital, Durgapur, Applo children's hospital, Chennai, Medicovert Hospital, Visakhapatnam & Kilinga Hospital Bhubaneswar) and 2 Private Hospital is empanelled for treatment of Eye defect cases (LVPEI, BBSR & Trilochan Netryalaya, Sambalpur). Also children are referred to Govt. Tertiary facilities like SCB MC&H, Cuttack, MKCG MC&H, Berhampur, VSS MC&H, Burla & AIIMS, BBSR. Plan to cover following cases through empanelled Hospitals during 2026-27: 1. Neural Tube Defect -50 2. Talipes (Club foot) - Not proposed. 3. Development Dysplasia of the hip- 25 4. Congenital Cataract - 400 5. Congenital Deafness -250 children below 2 years who require trail for confirmation of congenital deafness. 6. Congenital Heart Disease - 400 7. Retinopathy of prematurity - 250 8. Rheumatic Heart Disease- 10 9. Vision Impairment (Strabismus) -200 10. Cleft Lip + Cleft Palate- Agencies tied up are SCB MCH, MKCG MCH, Smile Train & Mission Smile empanelled hospitals - Free of cost 11. Cochlear Implantation- 27. As per RBSK mandate 27 children (<= 2 years) are planned to undergo CI during 2026-27. Rs.1.40 Crore (@Rs.5.20 Lakh per case X 27 cases) is required for CI surgery of 27 Proposed cases may be provisioned under PM-Cares / State Budget RBSK referral support is a demand driven activity. Funds are available under this head at state PIP. However , district to spend & book expenditure under this line item following the RBSK referral treatment cost guideline issued by GoI & communicated to districts from time to time. Proposal for FY 2026-27: Budgeted for 1990 birth defect cases (NTD- 50, DDH-25, Congenital Cataract-400, CHD- 400, RHD-10, Strabismus-200, RoP-250 Cases & Cochlear Implantation- 50). The amount Proposed for treatment in 2026-27= Rs. 870.50 lakh. The detail budget/ justification is given against each health Condition for which proposal is submitted. Details is at RBSK write-up annexure
22.5.1	Neural Tube Defect	Per Case	35000	0.35	0	-	Ongoing Activity: Background & Justification: Neural Tube Defect - Agencies tied up are SCB MCH & AIIMS BBSR Progress: During 2024-25,45 NTD cases were treated. Budget proposed@Rs.35000/- per case

Sl. No.	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2026-27		State Remarks
					Quantity/ Target	Budget (Rs. Lakhs)	
22.5.2	Talipes (Club foot)	Per Case	3000	0.03		-	To be taken-up out of existing supply from State Budget & special shoes will be provided by CIIT. Agencies tied up are CIIT Delhi. Club foot clinic operational in 11 facilities
22.5.3	Development Dysplasia of the hip- Agencies tied up are SCB MCH, SBNIRTAR & AIIMS BBSR	Per Case	60000	0.60	0	-	Ongoing Activity: Proposal for FY 2026-27: Development Dysplasia of the hip- Agencies tied up are SCB MCH, SBNIRTAR & AIIMS BBSR.
22.5.4	Congenital Cataract	Per Case	20000	0.20	0	-	Ongoing Activity: Background & Justification: Congenital cataract is covered under RBSK and LVPEI, BBSR is tied up under RBSK for treatment of Eye Defect conditions under RBSK. Budget proposed @Rs.20000/- per case
22.5.5	Congenital Deafness- Provisioning of Hearing Aid	Per Case	10000	0.10	0	-	Ongoing Activity: Background & Justification: For early trial of Hearing Aid for Profound Hearing Loss children below 2 Years children, Hearing aid is proposed for 250 children during 2026-27. Budget proposed @Rs.10000/- per case
22.5.6	Congenital Heart Disease	Per Case	160000	1.60	0	-	Ongoing Activity: Background & Justification: Under RBSK, treatment provision for CHD cases is covered. Treatment of CHD cases is conducted at SCB MC&H , Cuttack, Capital Hospital, BBSR (Device Closure cases only) and Private empanelled Hospitals. Progress: During the Year 2024-26, 335 CHD cases have been treated under RBSK and 1401 cases provided treatment at Govt. & Private empanelled Hospitals under RBSK and other schemes. Budget proposed @Rs.160000/- per case (on average basis)
22.5.7	Retinopathy of prematurity	Per Case	10000	0.10	0	-	Ongoing Activity: Background & Justification: RoP is one of the Health condition covered under RBSK. Under RBSK Model Costing, Funds for RoP laser therapy is also suggested. Prior to RBSK, RoP screening was conducted at Capital Hospital, BBSR and with support of RBSK, the RoP screening services extended to 3 MC&Hs and 10 District Hospitals. Annually around 250 cases are being identified with RoP who require timely laser Therapy to prevent blindness among such high risk category. The activity is an Ongoing activity under RBSK. Progress: During the year 2024-25, 240 RoP Laser therapy done. Payment is not made. Budget proposed @Rs.10000/- per case
22.5.8	Rheumatic Heart Disease	Per Case	110000	1.10	0	-	Ongoing Activity: Background & Justification: Rheumatic Heart Disease is covered under RBSK. Hospitals have been empanelled for treatment of RHD cases under RBSK. Agencies tied up are SCB MCH & Narayana Hrudalaya Ltd. Budget proposed @Rs.110000/- per case

Sl. No.	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2026-27		State Remarks
					Quantity/ Target	Budget (Rs. Lakhs)	
22.5.9	Vision Impairment (Strabismus)	Per Case	8500	0.09	0	-	Ongoing Activity: Background & Justification: Treatment of Strabismus is covered under RBSK and Prescribed rate chart is available under RBSK Model Costing. Agencies tied up are AIIMS BBSR & LVPEI BBSR Proposal for FY 2026-27: Budget proposed @Rs.8500/- per case
22.6	Any other equipment (please specify)	Per DEIC				-	
22.6.1	Mentoring Support	Per DEIC	50000	0.50	1	0.50	Background & Justification: Mentoring support to DEIC staff by different Thematic experts is required to strengthen and standardize proper Assessment, Therapeutic Intervention and Follow up care of Developmental delay children. In this regard, required coordination has been made with National Institutes like NIMHANS, Bangalore & SVNIRTAR, Olatpur for extending mentoring visits to DEICs and Organize Capacity Building Programme for DEIC staff in line with the training needs as per DEIC guideline. Progress: Functional DEIC: 32 Coordination established with NIMHANS, Bangalore & SVNIRTAR, Cuttack, Odisha. Proposed Activities: To standardize assessment, Therapeutic Intervention and progress tracking, following activities will be carried out : 1) Mentoring Visits by Multidisciplinary team of NIMHANS & SVNIRTAR & extend handholding support during visit. 2) Assessment of gaps & guide for Positive Practices for further improvement. 3) Based on assessment, Suggest for the strengthening of DEIC services. Budget proposed for Mentoring support by National Institutes @ Rs. 0.50 Lakhs per DEIC
22.6.2	Procurement of Laptop for MHTs						Proposed under HSS-18_IT Interventions and Systems_Sl.No.203
22.6.3	Branding of MHT Vehicles	Per MHT	6000	0.06	0	-	Branding of MHT vehicle is a mandate under RBSK. The MHT vehicles are engaged on hired basis. Due to withdrawal of vehicles by Vehicle Owners, about 40 % of vehicles are required branding every year. Budget : @ Rs.6000/- per MHT vehicle Budget Shifted from HSS-19_IJC & Printing_Sl.No.204 as per recommendation of NPCC

Sl. No.	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2026-27		State Remarks
					Quantity/ Target	Budget (Rs. Lakhs)	
22.6.4	New born screening- Inborn error of metabolism (Under diagnostic Head)	per kit	450	0.00		-	Inborn Error of Metabolism Screening for New Born at MC&H & DHH Level Justification: The early identification and intervention under IEM can enhance proper care, quality of life and the burden of Developmental delay among the identified children. State has been piloting IEM screening among New Borns at SCB Medical College & Hospital from June 2022 focusing on treatable metabolic disorders like CH, CAH, PKU & G6PD. Out of nearly 3000 New Borns screened on the above 4 cited parameters, 3.27 % of children are identified with metabolic disorders that means in every 30 new born screened one child is identified with metabolic disorder. Implementation strategy: • This initiative is viable as it is based on two important criterions , i. e the investment yields more result in terms of its outcome in the affected child's life and it is focused on selected health conditions which can be treatable in the existing system. • Keeping in view of the institutional readiness, i.e establishment of DPHL and availability of Elisa reader at MC&H & DHH, the IEM screening for New borns is feasible at MC&Hs and DHHs. • Standard Operating Procedure for implementation of IEM screening and development of Standardized training modules is under process in consultation with MC&H. For Training and Post training hand holding support, District will be tagged with Medical Colleges including AIIMS. BBSR for a initial period of One Year. • During 2026-27, 40% of total live Birth occurred at DHHs & MCHs (2024-25 total delivery govt facilities - 409211 and targeted new born to be screened- 163688 say 1,60,000) will be targeted under IEM screening. • DEIC will be the Hub of documenting the Line listing and Follow up of the identified children. Budget Proposed under HSS-21, State-specific Initiatives and Innovations, Sl. No. 206
22.6.5	Establishment of Mini Early Intervention Center						Budget Proposed under HSS-21, State-specific Initiatives and Innovations, Sl.No.206
23	Community Based Care - HBNC & HBYC					11.33	Child Data 2026-27: Estimated live birth: 627916 Estimated Infants: 611249 Estimated Under 5 Children: 3301597
23.1	ASHA Incentive for Home Based New-born Care						Budget Approved under HSS-17, ASHA Incentives, Sl.No.202
23.2	ASHA Incentive for quarterly visits under HBYC						Budget Approved under HSS-17, ASHA Incentives, Sl.No.202
23.3	ASHA HBNC Kits	Per Kit	2500	0.03		-	Ongoing Activity with revised unit cost Background: ASHAS are provided with HBNC & HBYC kits which are used during their HBNC & HBYC home visits, for assessment of newborns & young children. Since ASHAS are making home visits to all newborns with prioritized visits to LBW and high risk newborns, it is proposed to supply a KMC bag in addition to existing contents of the kits procured under SAMMPurNA. KMC bags if supplied will help them to demonstrate KMC to all mothers/ caregivers of newborns. Demonstration of KMC at community level will also promote a family centred care approach in LBW babies that will help in newborn survival. Progress: HBNC kits was provided to ASHAS two years back. On assessment, it was observed that many of the kit contents are not functional and thus there is a need of providing new HBNC kits to all ASHAS. The same is being procured under SAMMPurNA scheme. Budgeted under State Specific Programme SAMMPurNA.

Sl. No.	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2026-27		State Remarks
					Quantity/ Target	Budget (Rs. Lakhs)	
23.4	ASHA HBYC kits	Per Kit	1000	0.01	1133	11.33	Ongoing Activity Background: ASHAs are to use HBYC-ECD kit, containing different age appropriate toys and tools, while making home visits for assessing developmental milestones of young children. Progress: Since HBYC kits were supplied two years back and many of the items in the kits have now been damaged as per field level observations, it is proposed to replenish HBYC kits of all ASHAs for the upcoming year. Budget: Once HBYC-ECD kit per ASHA @Rs.1000/-
23.5	Printing of HBNC format for ASHA						Budget Approved under HSS-19_IEC & Printing_Sl.No.204
23.6	Printing of HBYC format for ASHA						Budget Approved under HSS-19_IEC & Printing_Sl.No.204
23.7	Training under Community Based Care - HBNC & HBYC						Budget Approved under HSS-16_Capacity building incl. training_ Sl.No.201
24	Facility Based New Born Care					8.18	
24.1	Establishment cost of New Born Care Units (SNCU/ NBSU/ NBCC/ KMC/ MNCU)					-	
24.1.1	Equipment for new MNCU	Per unit	1305000	13.05		-	Ongoing Activity: Background: The establishment of Mother & Newborn Care Units (MNCUs) in every medical college is crucial to achieving zero separation of mothers and sick newborns, especially, in view of bridging the gap between routine care in ward and intensive care at NICUs, as SNCU is not provisioned in some of the medical colleges. This initiative directly addresses the critical need to improve neonatal outcomes and foster maternal involvement in care. By situating these units in all medical we can provide immediate, specialized care for at-risk newborns. This proximity ensures that mothers can remain with their infants, promoting breastfeeding, bonding, and active participation in the care process, which is vital for the infant's recovery and long-term health. Progress: Currently, 3 MNCUs are under progress in the State and are expected to be functional by March 2026. Proposal: It is proposed to establish a 20 bedded MNCU in all medical colleges in a phased manner. Currently 3 are under progress and another 8 (SVPPGIP, VIMSAR, SLN MCH, DDMCH, SJ MCH, BB MCH, FM MCH, GMCH Sundergarh) are planned to be established over two years. The same is to be proposed under State budget.

Sl. No.	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2026-27		State Remarks
					Quantity/ Target	Budget (Rs. Lakhs)	
24.1.2	Equipment for SNCU	Lumpsum	80040000	800.40	-		New Activity Background: Odisha has a high NMR and 60% of all U5 deaths are neonates, strengthening facility based newborn care is a priority. The State has 45 functional SNCUs with about 80000 admissions and a 83% discharge rate. Therefore, proposal is to strengthen NNIV in SNCUs by provisioning CPAP machines with reusable circuits and HFNC to all SNCUs. Proposal A: For existing SNCUs at DHH & MCH level i. Procurement of CPAP machines @Rs. 6.00 lakhs per unit : 6 SNCUs x 1 CPAP machines = 6 machines x Rs.6 lakhs= Rs.36 lakhs ii. Reusable circuits for CPAP @Rs.0.30 lakhs per unit: 4 re-usable circuits per CPAP machines for 2 machines each in all 36 SNCUs = 36 x 2 x 4=288 units X Rs.0.30 lakhs =Rs. 86.40 lakhs iii. Procurement of HFNCs @3.00 lakhs per unit: 2 machines per SNCU X 36 SNCU = 72 x Rs.3 lakhs = Rs. 216 lakhs Sub Total Proposal(A) : Rs. 338.40 Lakhs Budget to be proposed under State budget. Proposal B: Tele Consultation at existing SNCUs: As per PIP 22-24, each SNCU was provided with a teleconsultation unit for providing facility based follow up services to the SNCU graduates in connection to their nearest AAM centre. However, over the years, these units have been worn out in 10 SNCUs. Budget Proposed under HSS-18, IT Interventions and Systems, SL No-203 Proposal C: For expansion of 7 SNCUs (Rs. 66 Lakhs for expansion of 12 beds x 7 units = Rs.462 Lakhs, Equipment proposed from State Budget, however, civil cost proposed under NHM PIP)- Budget to be proposed under State budget.
24.1.3	Equipment for NBSU	Per Unit	275000	2.75	-		New Activity Background: As per annual delivery load and based on geographic difficulties, it is observed that 5 non-FRUs have an annual delivery load of >1000. The average annual load in the proposed institutions in the past 3 years is CHC Chandragiri (1194), CHC Daringbadi (980), CHC Banspal (1199), CHC Kashipur (1213), CHC Lahunipara (1120). Therefore, it is proposed to establish 4 new NBSUs and shift one existing NBSU at CHC G. Udayagiri (non-FRU) in Kandhamal to CHC Daringbadi (non-FRU) in Kandhamal based on performance. CHC G. Udayagiri an average annual delivery load of 160 and an average admission of 46 only in the last 3 years. Therefore, it may be shifted to CHC Daringbadi (annual delivery load-980) for better utilization of resources. Progress: Currently, 67 NBSUs are functional and 5 are under rprocess which are expected to be functional by March 2026. However, there is a need to establish 4 new NBSUs at the above institutions. Proposal: Accordingly, equipment cost @Rs.2.75 Lakhs is proposed for establishing 4 new NBSUs. 4 NBSUs x Rs. 2.75 lakhs = Rs.11.00 Lakhs. Budget to be proposed under State budget.

Sl. No.	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2026-27		State Remarks
					Quantity/ Target	Budget (Rs. Lakhs)	
24.1.4	Equipment for NBCC	Lumpsum	12182000	121.82	-	-	New Activity Background: The State has the 4th highest NMR in the country with neonatal mortality contributing to 60% of all under five deaths. Newborn care corners in the LR's & OTs serve as the first point of care for all sick neonates at the facility level. Therefore, it is imperative to strengthen all the NBCCs at the delivery points so as to ensure prompt service delivery and reduce neonatal mortality. Proposal: A. Procurement of essential NBCC equipment as per gap assessment: i. Radiant warmer@Rs.43000 x 49 = Rs.21,07,000 ii. Foot operated Suction machine@Rs5000 x 120 = Rs.6,00,000 iii. Ambubag @Rs.3000 x 169 units =Rs.5,07,000 B. Procurement of neonatal digital weighing scale with storage facility in all functional LR's & OTs = 407 LR's & 54 OTs = 461 @Rs.8000 = Rs.36,88,000 C. Procurement of T-piece resuscitator for 44 LR's & 44 OTs (32 DHH & 12 MCH) @Rs.2 lakhs per unit = 88 x 0.60 Lakhs = Rs.52.80 Lakhs Total budget: Rs.121.82 Lakhs Budget to be proposed under State budget.
24.1.5	Equipment for KMC	Per unit	100000	1.00	-	-	New Activity Proposal 1: Establishment of KMC unit alongside SNCUs & NBSUs (already saturated) Background: KMC units are set up alongside each SNCU & KMC for provision of KMC services to all LBW SNCU & NBSU admissions. Currently, there are 105 KMC units alongside each SNCU & NBSU Progress: Of 105 approved units, 103 are currently functional & 2 are under process, expected to be functional by March 2026 Proposal 2: Establishment of KMC corners with 1-2 KMC beds/chair for promoting Home Based KMC Mandate: KMC to be saturated at all FRU CHCs, to be established at all aspirational block CHCs (irrespective of FRU status) and all PHC & SC-AAM having >10 deliveries/month Progress: 17 KMC corners already functional at PHC-AAMs with > 10 deliveries per month managed under PPP mode in hard to reach areas. Proposal: It is now proposed to establish a KMC corner @Rs.1 Lakhs per unit (for 2 KMC chairs@Rs.20,000 + one LED TV@Rs.40,000 + Gowns, KMC bags & other consumables@Rs.20000) in all aspirational block CHCs (out of 40 Aspirational Block CHC, 3 have an existing KMC unit), saturate all FRU CHCs (currently 4 FRU CHC out of 30 do not have KMC units) and in 77 AAMs (4 SCs & 73 PHCs) having more than 10 deliveries per month. Accordingly, equipment cost of Rs.1 lakh x 77+37+4 KMC corners = Rs.118.00 Lakhs. Budget to be proposed under State budget.
24.2	Operating cost of New Born Care Units (SNCU/ NBSU/ NBCC/ KMC/ MNCU)					8.18	

Sl. No.	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2026-27		State Remarks
					Quantity/ Target	Budget (Rs. Lakhs)	
24.2.1	Operating expenses for SNCU						Ongoing Activity Background: Operating expenses for SNCU is proposed as per Gol norms. Progress: During 2024-26, the same was proposed as per Gol guidelines. Utilization has been between 60-80%. However, it is proposed to provision full amount for utilization in procurement of CPAP consumables using recurring expenses, as discussed in PIP sub-committee meeting. Proposal: Therefore, budget proposed as per Gol guideline.
24.2.1.1	12 bedded SNCU	Per Unit	600000	6.00	1	6.00	Ongoing Activity For existing 30 SNCU @ Rs. 6.00 Lakhs per annum (Angul, Bargarh, Boudh, Deogarh, Jajapur, Jagatsingpur, Jharsuguda, Kandhamal, Jeypore, Malkanagiri, Nabarangpur, Umerkot, Nayagarh, Nuapada, Puri, Sundrgrh,Sambalpur, Sonapur, Kendrapada, Dhankanal, Khurda, Athagarh, Karanjia, Rairngpr, Baliguda, Bhanjnagar, Udala, Anandpur, Patnagarh & City Hospital BHP) No new Proposal for setting up of 12 bedded SNCU in 2026-27
24.2.1.2	For 24 bedded SNCU	Per Unit	1000000	10.00	0	-	Ongoing Activity Proposal-1: For Existing 11 SNCU @ Rs. 10.00 Lakhs per annum (Bolangir, Bhadrak, Rayagada, SCB, Kalahandi, Koraput, Gajapati, Keonjhar, RGH RKL) Proposal-2: For 4 SNCU Expansions (from 12 to 24 bedded)@ Rs. 10.00 Lakhs per annum To be proposed in supplementary PIP after equipping of infrastructure of same institutes (DHH, Nabarangpur, Malkanagiri, Koraput & Kandhamal)
24.2.1.3	For 36 bedded SNCU	Per Unit	1500000	15.00	0	-	Ongoing Activity Proposal-1: For Existing 4 SNCUs @ Rs. 15.00 Lakhs per annum (VSS MCH, Capital Hospital BBSR, Balasore & Mayurbhanj) Proposal-2: For 3 SNCU Expansions (from 24 to 36 bedded)@ Rs. 15.00 Lakhs per annum To be proposed in supplementary PIP after equipping of infrastructure of same institutes (DHH, Bolangir, Kalahandi & RGH Rourkela)
24.2.1.4	For 72 bedded SNCU	Per Unit	3000000	30.00	0	-	Ongoing Activity with revised unit cost Recurring cost for 2 SNCUs @ Rs.30.00 Lakhs (SVPPGIP, Cuttack & MKCG MCH Berhampur)
24.2.2	Operating expenses for NBSU	Per Annum	175000	1.75	1	0.88	Ongoing Activity Background: Operating expenses for NBSU is proposed as per Gol norms. Progress: During 2024-26, the same was proposed as per Gol guidelines. However, utilization has been 40%. Proposal: Therefore, budget proposed as per expenditure trend. Total functional in 2024-25: 71 & 1 under progress; Unit Cost as per Gol guideline : Rs.1,75,000/- per annum; Recurring Cost proposed (50% based on expenditure analysis) @ Rs.63000/- per annum/ unit for 72 units

Sl. No.	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2026-27		State Remarks
					Quantity/ Target	Budget (Rs. Lakhs)	
24.2.3	Operating expenses for NBCC	Per Unit	20000	0.20	5	0.50	Ongoing Activity Background: Operating expenses for NBCC is proposed as per Gol norms. Progress: During 2024-25, 407 functional DP have been reported & OPEX was earlier provisioned for functional DP only. However, it was proposed to provision OPEX for MLCUs also. However, utilization has been 50%. Proposal: Therefore, budget proposed for functional DPs - 407 + 13 MLCUs @ Rs.20,000/- per annum (Proposed 50% @Rs10000 based on expenditure analysis)
24.2.4	Operating expenses for KMC Units			-			Ongoing Activity Background: Kangaroo Mother Care unit are to be established adjoining each SNCU/ FRU NBSUs as per Gol mandate for provision of KMC to all stable low birth weight SNCU & NBSU admissions. Recurring Cost as per Gol Guideline: Rs.1,00,000/- per annum for DHH & Rs.50,000/- per annum for Other facility level KMC units. Progress: 105 KMC units have been established in the State adjoining all SNCUs, NBSU FRUs and certain high case load non FRU NBSUs. Recurring cost was proposed for all 105 facilities. It is now proposed to established KMC units in all aspirational block CHCs. (40) of which 3 already have existing KMC unit. However, expenditure has been between 40%-60% Proposal: Based on expenditure analysis A. For existing KMC units at 32 DHHs & 5 MCHs (SCB MCH Cuttack, VIMSAR Burla, SVPPGIP Cuttack, MKCG MCH Behrampur and SLN MCH Koraput: @Rs.60000/- per unit per annum i.e. 60% of total cost B. For existing KMC units at 68 Other facilities/ FRUs CHCs: @Rs.20000/- per unit per annum i.e. 40% of total cost
24.2.4.1	Operating expenses for KMC Units at DHHs & MCHs	Per unit per annum	100000	1.00	1	0.60	
24.2.4.2	Operating expenses for KMC Units at other facilities/ FRUs	Per unit per annum	50000	0.50	1	0.20	
24.2.5	Operating expenses for Mother New-Born Care Unit (MNCU)	Per unit per annum	260000	2.60	0	-	New Activity Background: The establishment of Mother & Newborn Care Units (MNCUs) in every medical college is crucial to achieving zero separation of mothers and sick newborns, especially, in view of bridging the gap between routine care in ward and intensive care at NICUs, as SNCU is not provisioned in these medical colleges. This initiative directly addresses the critical need to improve neonatal outcomes and foster maternal involvement in care. By situating these units in all medical we can provide immediate, specialized care for at-risk newborns. This proximity ensures that mothers can remain with their infants, promoting breastfeeding, bonding, and active participation in the care process, which is vital for the infant's recovery and long-term health. Progress: 3 MNCUs provisioned in 2024-26 are under process which is expected to be functional by March 2026. Proposal: Therefore, recurring cost proposed for 3 Existing MNCUs @60%
24.3	Training & Capacity Building Facility Based New Born Care					-	Budget Approved under HSS-16_Capacity building incl. training_ SI.No.201
24.4	IT Interventions and Systems					-	

Sl. No.	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2026-27		State Remarks
					Quantity/ Target	Budget (Rs. Lakhs)	
24.4.1	SNCU Data Management (Excluding HR)						Approved under HSS-18_IT Interventions and Systems_SI.No. 203
24.4.2	NBSU Data Management (excluding HR)						Approved under HSS-18_IT Interventions and Systems_SI.No. 203
24.5	Printing (SNCU/ NBSU Data Management)			-		-	Budget Approved under HSS-19_IEC & Printing_SI.No.204
24.6	MusQan certifications and re-certification (National & State Certification)					-	Ongoing Activity: Background: MusQan is a newer initiative for quality certification of all child health units in public facilities. The State is in process of getting the facilities ready for certification. Progress: Target institutions = 40, National assessment completed for 2 institution & State assessment completed 3 institutions. 10 institutions are under mentoring for expidating for readiness.
24.6.1	State Assessment for MusQan certification	Per Unit	40,000	0.40	0	-	As per the communication from Gol vide Letter no DO No.Z.15015/32/2025- NHM-I Dated 28th January 2026,Govt has introduced comprehensive approach for Quality Certification of all Public Health facilities. Thus, MusQan and LaQshya certification will not be done in isolation, now these two components are mandatory while implementing NQAS at DHH or any FRU level. Hence, no PIP allocation under this head.
24.6.2	National Assessment for MusQan certification	Per Unit	1,10,000	1.10	0	-	
24.6.3	Incentives for Certified Institutions	Per Unit	12,00,000	12.00	0	-	New Activity Till date 2 institutions (DHH Rayagada & Capital Hospital Bhubaneswar) are MusQan certified. Accordingly incentive @Rs.3.00 lakhs per unit X 4 units is proposed for both the certified institutions.
24.7	Special Incentive for SNCU Service Providers						Special Newborn Care Units (SNCUs) catering to the needs of sick, very low birth weight and pre-term newborns is a flagship programme under NHM. A special performance incentive has thus been provisioned under NHM PIP 2024-26 under sl. no. 186.1.12 of HSS-9 to the service providers of SNCU to enhance the quality of care in the SNCUs and encourage the SNCU teams for providing quality service delivery, which was approved in supplementary PIP. The outcomes of SNCUs have significantly improved over the years and the incentive works as a motivation for the SNCU team. (SNCU discharge rate improved from 77% to 85% in 4 years, with referral rate as low as 8% and death rate as low as 5%). The proposed criteria for the incentive: • Bed occupancy ≥ 80% (for DHH & MCH) • Death Rate ≤ 10% for DHH & ≤ 15% for MCH • Referral Rate ≤ 10% for DHH & ≤ 5% for MCH • SNCU Discharge Rate ≥ 80% (Key Deliverable for both DHH & MCH). Incentives to be provisioned for 40% SNCUs and the funds are to be kept at State level. On qualifying the criteria, the concerned SNCUs will book the expenditure on the same line item upon confirmation from State level. Performance incentive is proposed for 40% of existing 12, 24 & 36 bedded institutions and all 72 bedded institutions for 12 months @Rs.82.80 Lakhs Budgeted under HSS_9, SI no. 186.1.12
25	Child Death Review					0.71	
25.1	Incentive / Honorarium Child Death Review			-		0.71	
25.1.1	ASHA incentive for Child Death Review (Notification of under 5 Deaths)						Budget Proposed under HSS-17_ASHA Incentives_SI.No.202

Sl. No.	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2026-27		State Remarks
					Quantity/ Target	Budget (Rs. Lakhs)	
25.1.2	Brief investigation by ANM (all deaths)	Per case	100	0.00	173	0.17	Ongoing Activity Background: Honorarium @Rs.100/- is provisioned for ANMs for reporting community level child deaths (deaths occurring at home, in transit, at private facilities or at sub-block level public facilities). Progress: Deaths reported in 2024-25: 11750, Community level deaths: 5295, which is about 45%. As per SRS, about 21977 U5 deaths are expected in the State, of which 80% has been set as target as key deliverables for 2026-27 i.e. 17582. Estimating that about 45% of the same will be at community level & will be reported by ASHAs & ANMs, honorarium of ANMs is proposed for 45% of estimated cases = 7925 Budget revised as per the recommendation of NPCC
25.1.3	Investigation by investigator teams (No of verbal autopsy of community level deaths to be done @ 6 cases per month)	Per case	500	0.01	104	0.52	Ongoing Activity Background: Incentives are provisioned for verbal autopsy of sample cases @60% of reported community level cases (deaths occurring at home, in transit, at private facilities or at sub-block level public facilities) for a team of trained investigators at block level. Progress: As per NPCC recommendations, about 60% of community level deaths reported by ANM are to be reviewed, which accounts to about 4755 cases. Proposal: Proposed for 60% of 7925 cases i.e. 4755 as honorarium for verbal autopsy Rs.300/- per team per case and Travel expenses Rs.200/- per team per case. Budget revised as per the recommendation of NPCC
25.1.4	Support cost for family members to attend review meeting conducted by Collector	Per visit	100	0.00	16	0.02	Ongoing Activity: Background: As per GoI guidelines, the district collector should review 2 sample cases each quarter in presence of the family members, for which a support cost of Rs 200/- is provisioned for 2 family members of the 2 cases. Progress: During 2024-26, budget was proposed for 2 cases per qtr per district, and the same is to be proposed during 2026-27. Proposal: Cases to be reviewed @2 cases per qtr per dist i.e. 2 samples X 4 Qtr X 2 family members= 16 cases per year Budget revised as per the recommendation of NPCC
25.2	Printing of Child Death Review formats						Budget Approved under HSS-19_IEC & Printing_Sl.No.204
25.3	Stillbirth Surveillance & Response					-	New Activity The State has a high stillbirth rate, which is of prime concern. The Ministry has already released the stillbirth review guidelines and ToTs (National & Regional) have been completed. The State & Regional level trainings will be rolled out by end of 2025-26. Refresher trainings on the same will be organized along with MPCDSR refresher training. in the first year it is proposed to roll out the program in MCHs & DHHs and subsequently in the FRU CHCs. Accordingly, format printings have been proposed based on the load at MCH & DHHs.
25.3.1	Refresher Training on SBSR Module						Budget Approved under HSS-16_Capacity building incl. training_ Sl.No.201
25.3.2	Printing of Formats						Budget Approved under HSS-19_IEC & Printing_ Sl.No.204
26	SAANS					-	
26.1	State level ToT on SAANS for Paediatrics Specialist, MCH faculty & Nursing Officers						Activity Completed in 2022-24
26.2	Regional level training on Childhood Pneumonia Management						Activity Completed in 2022-24

Sl. No.	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2026-27		State Remarks
					Quantity/ Target	Budget (Rs. Lakhs)	
26.3	Printing for Gentamycin treatment cards						Budget Approved under HSS-19_IEC & Printing_ SI.No.204
27	Paediatric Care					3.00	
27.1	Establishment cost of Pediatric Care Units (PICU/Hybrid ICU)						Status: 1. PICUs have been established at MCH Level 2. Pead. Hybrid ICU established in 27 districts at 29 DHHs (Including RGH & Capital Hospital)
27.2	Operating cost of Pediatric Care Units (PICU/Hybrid ICU)					3.00	
27.2.1	Recurring cost for PICU			-		-	To be met out of State Health Budget
27.2.2	Recurring cost for Pediatric Hybrid ICU	Per unit	600000	6.00	1	3.00	Ongoing Activity Background: Paed. hybrid ICUs have been established in the State at DHH level under ECRP-2 for providing intensive & high dependency care to severely sick children. Progress: 29 Paed. Hybrid ICUs are functioning in the State at DHH level and recurring cost @Rs.6L per annum. However, all the units are not fully functional interms of admissions. Therefore recurring cost proposed for 50% of budget. During 2024-26 Recurring Cost of PICU approved under PMABHIM. Now Proposed under NHM PIP. Proposal: Therefore, recurring cost @Rs.6.00 Lakhs per Paed. Hybrid ICUs proposed Budgeted at 50% based on functionalization
27.3	Centre of Excellence for Paediatrics- Operational Cost	Lumpsum	50,000	0.50	0	-	Ongoing Activity: Background: A centre of excellence on newborn & child health has been established at SVPPGIP, Cuttack under ECRP-2 for conducting training and mentoring activities. Proposal: Therefore, mentoring and coordination cost for CoE is proposed as follows: Operational cost @ Rs. 50,000/- per annum as per utilisation trend. Justification: CoE operational cost is proposed at 50% based on expenditure analysis. Also, since there is no HR the operational cost is not being utilized. If a manager and a FLC is posted, the CoE can be managed properly, looking at the number of trainings and mentoring being done at the institution. Activity is shifted from RCH-3, SI No. 30 as recommended by NPCC
27.4	Training & Capacity Building under Paediatric Care						Budget Proposed under HSS-16_Capacity building incl. training_ SI.No.201
28	Janani Shishu Suraksha Karyakram (JSSK) (excluding transport)					-	
28.1	Free Diagnostics for Sick infants under JSSK	Per Case	100	0.00		-	Ongoing Activity To be met out of state specific scheme NIDAN - Free Diagnostics Services
28.2	Drugs & Supplies					-	Programme Drugs for all under 5 children including 0 to 1 year: Inj. Vitamin K, Inj. Gentamicin, Inj. Dexamethasone, Syp./ Tab. Amoxicillin, ORS, and Zinc are part of EDL and are to be met out of state budget. Therefore, not budgeted under NHM PIP.
29	Janani Shishu Suraksha Karyakram (JSSK) - transport					-	

Sl. No.	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2026-27		State Remarks
					Quantity/ Target	Budget (Rs. Lakhs)	
29.1	Free Referral Transport - JSSK for Sick Infants	Per case	500	0.01	0	-	Ongoing Activity Background: Transportation cost for sick infants is proposed for expected sick infants. Progress: During 2024-26, it was proposed for 10% of estimated live births and the expenditure has been 100% in 2024-26. The same has been repurposed for 2026-27. Proposal: Therefore, funds proposed for estimated sick infants i.e. 62791 (10% of estimated live birth-627916) including transportation to facility & drop back
30	Other Child Health Components					0.04	
30.1	IEC/BCC activities under CH						Budget Approved under HSS-19_IEC & Printing_SI.No.204
30.2	Transportation Cost for HIV testing of Exposed Babies (Below 18 months)	Per Case	1,000	0.01	4	0.04	Ongoing Activity Transportation cost for HIV testing of Exposed Babies (Below 18 months) Justification Activity is proposed for testing HIV exposed children for HIV for at least 4 times during 2 years of age at ICTC at defined intervals. Expected exposed babies is estimated as 90% of identified HIV PW during 2024-25. A total of 387 PW were identified as HIV positive, so the estimated HIV exposed babies is estimated at 90% of 387 = 348 babies. It is thus proposed to provide transportation cost of Rs.1000/- per baby for HIV testing at ICTC at the age of 45 days , 6 month, 1 year and 18 month. As 108 ambulances are used only for transportation of critical cases and also it doesn't have a drop back service, it is proposed to give additional transportation cost to these babies for ensuring HIV testing. Budget: @Rs.1000/- per exposed babies
30.3	Centre of Excellence for Paediatrics- Operational Cost	Lumpsum	50,000	0.50		-	Activity is shifted to RCH-3, SI No. 27 as recommended by NPCC
30.4	Review/orientation meetings for child health programmes						Activities: 1. Review Meetings: 1.1. State Level Review Meeting- Integrated with RMNCHAN Quarterly Review Meeting 1.2.District Level Review meetings -Integrated District Level Monthly Meeting 2. Monitoring & Supportive Supervision: Budget to be met out of Pooled fund placed at HSS-11_Technical Assistance_SI.No.194
31	State Specific Initiatives and Innovations						
	Total Child Health					93.51	

RCH-4_Immunisation_Odisha

Sl. No.	Scheme/ Activity	Approval 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
	Total Immunisation					25.61	
32	Immunization Including Mission Indradhanush					25.61	
32.1	INFRASTRUCTURE (Civil Work)					0.00	
32.1.1	Safety Pits (Bio Medical Waste Transport)						A State specific Scheme for BMWM has been instituted with an annual budget of 515 Crs per year (Budget 2026-27) with funding from State Budget. Under which, Five (5) Common Biomedical Waste Treatment & Disposal Facilities (CBMWTF) have been empanelled. These CBMWTF are generally collect Biomedical wastes from each facilities on daily basis. Hence there're is no need of establishing safety pits. Thus no budget proposed under this head
32.2	EQUIPMENTS					0.00	
32.2.1	Hub Cutter & Blue Puncture Proof Container	Per SC	2000	0.02		0.00	Background/Justification: - Under the Bio-Medical Waste Management framework, the use of Hub Cutters & Blue Puncture Proof container under the Routine Immunization Programme is essential to ensure injection safety of healthcare workers and promote safe waste disposal. Based on the recent facility assessment, it has been observed that Hub Cutters need to be procured for 6398 Sub-Centres to enable them to comply with the guidelines on safe injection practices. Although the procurement of hub cutters was not proposed in the NHM PIP 2024–26, the requirement has emerged as a critical gap identified during recent field assessments and supervision visits. To ensure compliance with national guidelines and maintain the safety standards of the immunization programme, it is proposed to procure hub cutters Proposal: Required 4463 (for 1338 newly established SC and 3125) as an replacement as Hub cutters are not in functional conditions Budget to be met out of NIDAAN (State Specific Diagnostic Services)/ Balance fund under XV FC
32.2.2	Racks and shelves fro dry storage						Already available in all SVS, RVS, DVS & all Cold Chain points. No fund proposed
32.3	DIAGNOSTIC (Consumables, PPP, Sample transport)					0.00	
32.3.1	Red/Black/Yellow/Zipper bags etc.	Per Set		0.00		0.00	Ongoing Activity with revised unit Cost Background/Justification:- As per BMW Guideline, for each Routine Immunization Session, there is requirement of 1 Red, Black & Yellow Bag as well as per Open Vial Policy, 3 Zipper Bags to be used for Empty, Open vials & Unopened Vials. Proposal:- Total immunization sessions covered in 2024-25: 384000 Planned for immunization sessions for 2026-27 with 10% buffer for HPV Vaccination Campaign: 422400 To be met out of State Budget
32.3.2	Bleach/Hypochlorite solution/ Twin bucket	Per CCP	1500	0.02		0.00	To be Met out State Specific Scheme on Bio Medical Waste Management
32.4	OTHER OPERATIONAL COSTS					15.96	
32.4.1	Alternative vaccinator for slums/ un served areas (only where regular ANM under NUHM not engaged)						ANMs have been engaged from regular cadre from urban areas and where regular ANM positions are vacant, proposal has been submitted under NUHM PIP. Currently 259 ANMs are sanctioned/ proposed under NUHM for filling the vacancies in the urban areas.

Sl. No.	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2026-27		State Remarks
					Quantity/ Target	Budget (Rs. Lakhs)	
32.4.2	Micro Planning						Ongoing activity Preparation of RI micro plan starts from Sub Centre level. Then, it gets Validated & compiled at Block level. Further, it is compiled at district level for finalization of District Micro Plan document.
32.4.2.1	Developing micro plan at sub-centre level	Per SC	100	0.00	242	0.24	Total SCs (Rural & Urban): 6688 existing SC + 1338 New SC+580 virtual SC under NUHM.= 8606 SCs
32.4.2.2	Consolidation of micro plans at block level	Per Block	1000	0.01	8	0.08	Total Block: 314
32.4.2.3	Consolidation of micro plans at District level	Per District	2000	0.02	1	0.02	Total districts: 30 Municipal Corporation Cities: 5
32.4.3	Mobility support for mobile health team/ TA/DA to vaccinators for coverage in vacant sub-centers	Per session	300	0.00	0		Ongoing Activity with Revised Unit Cost of session cost from Rs. 100/- to Rs. 300 as per GoI norms. Name of the activity: RI sessions at SC where ANM position is vacant Background - The fund is being proposed to carry out Routine Immunization Vaccination Sessions at vacant SCs. The said fund will be utilized towards TA/DA for Vaccinator who will be assigned to conduct the RI Session at the said Vacant SC & Data entry in U-WIN, eVIN portal/ Application. Total RI Sessions per annum : 3,45,600 Expected sessions requires support under this head: 3575 Sessions (estimates made as per last years report)
32.4.4	Alternative Vaccine Delivery					11.64	Old activity with revised unit cost with hike in AVD Cost, due to demand from field. (Rs.90 revised to Rs.125, Rs. 200 revised to Rs.250, Rs.450 revised to Rs.600) Justification : The financial norms for various activities under the Universal Immunization Programme (UIP) were last revised in April 2018 (as per MOHFW Letter). Since then, there has been no subsequent upward revision, but there is significant escalation in operational costs. Diesel Fuel prices — a critical component for mobility support, Alternate Vaccine Delivery (AVD), and cold chain logistics — have increased from ₹74/liter in 2018 to ₹103/liter in 2025 (national average), marking an increase of approximately 39%. Over the same period, cumulative Consumer Price Index (CPI) inflation has been about 45%, impacting the costs of consumables, printing, cold chain maintenance, biomedical waste management, and honorarium for field staff. Looking into the above about 40% increase proposed over approved unit cost
32.4.4.1	Alternative vaccine delivery in hard to reach areas	Per session	200	0.00	400	0.80	Unit cost revised as per recommendation of NPCC
32.4.4.2	Alternative vaccine delivery in very hard to reach areas	Per session	450	0.00	200	0.90	Unit cost revised as per recommendation of NPCC
32.4.4.3	Alternative Vaccine Delivery in other areas	Per session	125	0.00	7951	9.94	
32.4.5	POL for vaccine delivery from State to district and from district to PHC/CHCs /Cold chain Points	Per district/ MCC	250000	2.50	1	2.50	Ongoing Activity Transportation cost for Vaccine: Unit cost approved : Rs.2.5 Lakhs per district per year . Unit cost revised as per recommendation of NPCC
32.4.6	Cold Chain Maintenance			-		1.48	Head of expenses : Cost of spare parts for repair maintenance of ILR, Deep freezer etc & transportation of equipment /instruments in certain cases. Cold Chain Infrastructure : Total SVS-1 , RVS -9 , DVS -32 & Cold Chain Point 1263
32.4.6.1	Spare parts SVS RVS @ 1.5 lakh per state	Per SVS/RVS	150000	1.50	0	-	Proposed as per GoI Norms

Sl. No.	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2026-27		State Remarks
					Quantity/ Target	Budget (Rs. Lakhs)	
32.4.6.2	Spare parts District	Per DVS	93750	0.94	1	0.94	Proposed as per Gol Norms Budget Approved for 30 DVS, however total DVS in the State is 32. Hence budget divided against 32 DVS.
32.4.6.3	Cold Chain Maintenance Cost for CCP	Per CCP	1000	0.01	37	0.37	Proposed as per Gol Norms as per Recommendation of NPCC
32.4.6.4	Cold Chain Maintenance Cost for DVS	Per DVS	17594	0.18	1	0.18	Proposed as per Gol Norms as per Recommendation of NPCC Budget Approved for 30 DVS, however total DVS in the State is 32. Hence budget divided against 32 DVS.
32.4.6.5	Cold Chain Maintenance Cost for RVS & SVS	Per unit	50000	0.50	0	-	Proposed for 9 RVS & 1 SVS.as per Gol Norms as per Recommendation of NPCC
32.4.6.6	Cold Chain Maintenance Cost Excess Amount Approved kept at State Level	Lumpsum	30000	0.30	0	-	
32.5	SURVEILLANCE , RESEARCH, REVIEW, EVALUATION (SSRE)					9.65	
32.5.1	State Level AEFI Committee meeting	Per participant	500	0.01	0	-	Expected Participants : 15-members Frequency of Meeting : Bi-monthly Budget Not Approved Expenditure for PM activities to be booked under SI.No.194
32.5.2	District Level AEFI Committee meeting	Per participant	150	0.00	0	-	Expected Participants : 10-members Frequency of Meeting :Quarterly Budget Not Approved Expenditure for PM activities to be booked under SI.No.194
32.5.3	STFI/DTFI/CTFI meeting	Per Meeting	3000	0.03	0	-	Expected Participants : 10-members Frequency of Meeting :Monthly Level : District & 5 Municipal Corporation Cities Budget Not Approved Expenditure for PM activities to be booked under SI.No.194
32.5.4	ISO 9001:2015 Certification of Vaccine Stores	Lumpsum				0.28	
32.5.4.1	For SVS	Per Unit	10000	0.10	0	-	Ongoing Activity ,Budget proposed for renewal of ISO certification
32.5.4.2	For RVS	Per Unit	10000	0.10	0	-	Ongoing Activity ,Budget proposed for renewal of ISO certification
32.5.4.3	For DVS	Per Unit	10000	0.10	1	0.10	Ongoing Activity ,Budget proposed for renewal of ISO certification
32.5.4.4	For BVS	Per Unit	6000	0.06	3	0.18	New Activity - Initially, ISO Certification of 100 Block Vaccine Stores has been Proposed out of total 314 Block Vaccine Stores.
32.6	Any other Actives					9.37	
32.6.1	Td 10 & 16 Vaccination in Tribal Schools	Lumpsum	2904000	29.04	0	0.00	New Activity Details at Immunisation Write-up Annexure Budget revised as per recommendation of NPCC
32.6.2	Establishment of Evening immunization Vaccination Centres	Lumpsum	2200000	22.00	0	-	New Activity Details at Immunisation Write-up Annexure
32.6.3	HPV Vaccination Campaign	Lumpsum	9,36,890	9.37	1	9.37	New Activity proposed as per the recommendation during NPCC Meeting Detailed budget at HPV Vaccination Annexure (State Level Launching Ceremony Not Approved & Miscellaneous Cost Reduced). Respective division to comply & get approval from appropriate authority.

Sl. No.	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2026-27		State Remarks
					Quantity/ Target	Budget (Rs. Lakhs)	
33	Pulse Polio Campaign					0.00	
33.1	Pulse Polio Operating Costs	Lumpsum	31193000	311.93	0	-	Ongoing Activity Budget proposed as per last year's approval
34	eVIN Operational Cost					0.00	Total ILR Point-1263 in the State
34.1	Non Recurring Cost of eVIN					-	
34.1.1	Replacement of Temperature loggers	Per logger					Not Proposed, As State is in Process of receiving 500 Nos. of Temperature Loggers from UNDP out of budget approved during Supplementary PIP 2025-26
34.2	Recurring Cost of eVIN						Proposed under HSS-18_IT Interventions and Systems_Sl.No. 203
194	PLANNING & M&E					0.00	Budget Proposed under HSS-11_Sl.No.194
	Review Meetings						1. Quarterly Review meeting of Immunisation; Budget Proposed under HSS-11_Sl.No.194 2. Immunisation review at District: Integrated with District Level Monthly Meeting: Budget Proposed under HSS-11_Sl.No.194 (Details at Write-up Annexure)
	Supportive Supervision						Budget for District/ Block/ Sector Level Supportive Supervision visit to be met out of pooled budget available at respective level : Budget Proposed under HSS-11_Sl.No.194 (Details at Write-up Annexure)
201	Training & Capacity Building						Budget Proposed under HSS-16_Capacity building incl. training_Sl.No.201
202	ASHA Incentive under Immunization						Budget Proposed under HSS-17_ASHA incentives_Sl.No.202
203	IT interventions (Incl. RCH, NDCP, NCD, HSS-Urban, HSS-Rural - IT software, Laptops etc. for service delivery)*						1. Requirement of computer & peripherals- already saturated 2. Inter net connection- No Exclusive fund for Immunisation has not been proposed how ever the same shall be met out of PMU internet charges
204	IEC/BCC & Printing						Budget Proposed under HSS-19_IEC & Printing_Sl.No.204
	Total Immunisation					25.61	

RCH-5_Adolescent Health

Sl. No.	Scheme/ Activity	Approval 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
	Total Adolescent Health					7.31	
35	Adolescent Friendly Health Centers (AFHCs)					1.56	
35.1	Establishment of AFHSC at MCH/ DHH/ CHC/ PHC level		0	0.00		0.00	Ongoing Activity: Background: As per mandate, a total of 562 AFHCs are to be established at 32 DHHs, 32 SDHs & 375 CHCs along with 116 UPHCs & 7 UCHCs of the State. Progress : 498 AFHCs are established and rest 64 to be established by March-25. Proposal : No new proposal for AFHC establishment as it will be saturated up to CHC level and in urban area up to UPHC level.
35.2	Operating Expenses for AFHC Clinics						Ongoing Activity Proposal 2026-27: Operational expenses for 562 AFHCs.
35.2.1	AFHC Clinics at DHH	Per unit/ Per Month	1000	0.01	1	0.12	DHH: @Rs.1000/- Per month per AFHC Clinics at DHH Level
35.2.2	AFHC Clinics at SDH/ CHC/ UCHC	Per unit/ Per Month	1000	0.01	11	1.32	SDH/ CHC/ UCHC: @Rs. 1000/- Per month per AFHC Clinics at SDH & CHC Level
35.2.3	AFHC Clinics at UPHC	Per unit/ Per Month	500	0.01	2	0.12	UPHC: @Rs.500/- Per month per AFHC Clinics at UPHC Level
35.3	Capacity Building/ Training (AFHCs)						
35.3.1	Training of Medical Officers	Per batch		0.00		0.00	Not Proposed
35.3.2	Training of Counselors						Budget Approved as part of Carder Based Training of Counselors which has been projected under HSS-16_Capacity Building Training_SI.No.201
35.4	Planning and M&E						Activities: 1. Review Meetings: 1.1. State Level Review Meeting- Integrated with RMNCHAN Quarterly Review Meeting 1.2.District Level Review meetings -Integrated District Level Monthly Meeting 2. Monitoring & Supportive Supervision: Budget to be met out of Pooled fund placed at HSS-11 Technical Assistance SI.No.194
36	Weekly Iron Folic Acid Supplementation (WIFS)					0.00	

Sl. No.	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2026-27		State Remarks
					Quantity/ Target	Budget (Rs. Lakhs)	
36.1	IFA tablets under WIFS (10-19 yrs.)	Per tab	0.12	0.00		0.00	Ongoing activity with revised unit nos Drugs Specifications : 60 mg elemental Iron & 500 mcg,Folic acid, sugar coated tab (IFA blue) Level at which the item would be used : Schools and AWCs Beneficiaries Detail: In school adolescent studying in Govt. & Govt. Aided schools: 2747881(Boys: 1374206 & Girls:1373675) Out of school adolescent girls administered IFA Blue tablet at AWC: 894808 Total Beneficiaries 10-19 years: 3642689 IFA Blue Tablet Requirement (Prophylactic & Therapeutic Dose) A. Prophylactic Dose: (One IFA Blue tablet weekly) Estimated beneficiaries for therapeutic dose = 3642689 IFA Blue required= 3642689 X 52 weeks = 189419828 tablets (80% looking into consumption trend i.e. 189419828 X 80% = 151535862) B. Therapeutic Dose: (Two IFA Blue tablet daily for 90 days) Estimated beneficiaries for therapeutic dose = 30% adolescent boys and 50% adolescent girls: 1546503 (412262 boys+ 1134241 girls) IFA Blue required= 1546503 X2X 90 days = 278370540 tablets (70% looking into consumption trend i.e. 278370540 X 70% = 194859378) Requirement for IFA. (Large Blue) tablets for both prophylactic & therapeutic treatment Approved - 346395240 Source of funding : State Health Budget
36.2	Albendazole Tablets under WIFS (10-19 yrs.)	Per tab	1.50	0.00		0.00	Ongoing activity- NDD: Drugs Specification :Albendazole 400 mg chewable tab. Level at which the item would be used: School & AWC Estimated no of beneficiaries (10-19 years) = 10143787 Target beneficiaries Estimated target beneficiaries 10-19 years: 10143787 As per micro plan, approximately 85% of the estimated target is reported. So, 85% of 10143787 = 8622219 beneficiaries Albendazole Tablet Requirement (for 2 rounds) One albendazole tablet (400 mg) is administered per beneficiary per round at schools/AWCs. Requirement per round: (8622219 X 1+ 10% buffer) =9484441 albendazole tablet Total Requirement for two rounds: 9484441 X 2= 18968882 albendazole tablet Source of funding : State Health Budget
36.3	Printing under WIFS -WIFS cards, WIFS registers, reporting format etc						Budget Approved Under HSS-19_IEC & Printing_SI.No.204
37	Menstrual Hygiene Scheme (MHS)					-	

Sl. No.	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2026-27		State Remarks
					Quantity/ Target	Budget (Rs. Lakhs)	
37.1	Procurements of Sanitary Napkins	Per Napkin	12.18	0.00	0	0.00	Ongoing activity Background: The Community level social marketing of sanitary napkins for out of school adolescent girls (10 to 19 years) by ASHAs under Rastriya Kishor Swasthya Karyakram (RKSK) will be continued as before in rural & urban areas . For in school adolescent girls, provision of sanitary napkins are provisioned under State Budget in free of cost. Proposal under NHM: Total out of school adolescent girls - 894808 Adolescent girls in menarche stage - 626365 (70% of total adolescent girls) Expected no. of Adolescent Girls to purchase napkins from ASHA (80% of AGs in menarche stage as per past coverage)=501092 Total requirement 501092 girls X 2 pkts X 12 months =12026208 pkts Basis of finalisation of Unit Cost: Recent Tender done at State level- Rs. 2.03/- per pc x 6 pieces/per PKT= Rs. 12.18/-
37.2	Capacity Building/ Training			0.00		0.00	Refresher Training will be given to AHAs as part of cadre based training , hence no additional budget proposed under this head.
37.3	Printing of Registers & Reports	Per ASHA		0.00		0.00	Ongoing Activity ASHA Level : Format will be integrated in ASHA Dairy & hence, no additional budget proposed School Level : Integrated with WIFs Register, hence no additional budget proposed
38	Peer Education Programme					5.75	Peer Educator Programme is implemented in 6 districts out of total 30 districts. Of which 3 are aspirational districts.
38.1	Organisation of Adolescent Health Days	Per AHD session	1900	0.02	378	5.75	Ongoing activity Background Status : PE districts of the State/ Estimated AHD Sessions in Nos: i.e. 45878 in 11470 villages of 6 Districts (Bolangir-7192, Dhenkanal-4516, Bhadrak-5508, Koraput-12988, Mayurbhanj-13466, Boudh-2208) AHD Sessions planned in PE Districts: 4 Sessions Per Village Per Annum AHD Sessions planned in Non-PE Districts: 2 sessions per SC AAM (Total SHC AAM: 6688 - 1535 SHC AAMs in PE Districts= 5153) Proposal/ Budget : 1. Budget for AHD Sessions planned for PE Districts: @Rs.1900/- per session 2. AHD at SHC AAMs in Non PE Districts: (SHC AAMs of 24 Non-PE Districts) X 2 times in a year X Rs.1900/- per session Budgeted 80% based on expenditure trend

Sl. No.	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2026-27		State Remarks
					Quantity/ Target	Budget (Rs. Lakhs)	
38.2	Organising Adolescent Friendly Club meetings at sub centre level	Per meeting	500	0.01	0	-	Ongoing activity Background: AFC conducted at SC level in 6 PE implemented districts on monthly basis. In Odisha , AFC conducted in 1535 SCs on monthly basis by ANM at SC HWC level. Proposal : Total SC- 1535 (In 6 RSK districts namely Dhenkanal-167, Bolangir-226, Bhadrak-178, Koraput-308,Mayurbhanj-589,Boudh-67) Budget Proposed: @ Rs. 500/- per meeting x 12 months = Rs.6000/- Per SC Budgeted 80% as per expenditure trend.
38.3	ASHA Incentive for Incentive for mobilizing adolescents and community for AHD	Per AHD	150	0.00		-	Budget Approved under HSS-17_ASHA Incentive_Sl.No.202
38.4	Training & Capacity Building for Peer Education Programme						Budget Approved under HSS-16_Capacity Building Including Training_Sl.No.201
38.5	PE Kit and PE Diary	Per Kit	200	0.00		0.00	To be proposed in next year and to be distributed during the training of PEs
38.6	Merchandise T-shirt & cap for Peer Educator	Per Peer Educator	250	0.00		0.00	To be proposed in next year and to be distributed during the training of PEs
38.7	Incentives for Peer Educators	Per PE per Annum	600	0.01	0	-	Ongoing Activity: Proposal : Provision of Non financial incentive proposed Background : In Odisha 6 PE districts have 45424 trained PEs (Total PE in Dhenkanal- 4532 & Balangir - 8932, Bhadrak- 5508 & Koraput - 10416, Myurbhanj-13420, Boudh-2616= 45424) Budget Proposed: @ Rs. 50/- per month for all PEs X 12 months (45424 X 12 months) proposed @ Rs. 50/- per month for all PE Budgeted 80% looking expenditure trend
39	School Health And Wellness Program under Ayushman Bharat					0.00	Background: School health programme under Ayushman Bharat has been implemented in 30 districts by 2023-24. Training details : 2020-21 : 10 districts 2021-22 : 10 districts 2022-23 : 10 districts Justification for Training : The 5 days training to HWAs given 3 years back to last phase of implementation districts i.e. 2022-23 .
39.1	Capacity Building & Training						Budget Approved under HSS-16_Capacity Building Including Training_Sl.No.201
39.2	Printing of Odia Training and Resource material on School Health and wellness						Budget Approved under HSS-19_IEC & Printing_Sl.No.204
39.3	Mrchandise T Shirt and Cap for all HWAs and Health and wellness Messengers (HWMs)						Mrchandise T Shirt and Caps will be provided to wellness ambassador messenger once all the field trainings are completed. To be proposed in F.Y. 2027-28.
40	Other Adolescent Health Components					-	
40.1	IEC/ BCC Activities						Budget Approved under HSS-19_IEC & Printing_Sl.No.204
41	State specific Initiatives and Innovations					0.00	Not Proposed
	Total Adolescent Health					7.31	

RCH-6_Family Planning

Sl. No.	Scheme/ Activity	Approval 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
	Total Family Planning					44.90	Mandate: Provision of quality sterilization services up to block level (DHH/ SDH/ CHCs) by increasing availability of trained service providers & increasing regularity of FDS for minilap, laparoscopic & NSV sterilization.
42	Sterilization - Female					34.67	Total Sterilisation as per ELA calculation is 118800 of which male sterilisation is 2400 & Female Sterilisation is 116400 (Refer details of ELA calculation at write up annexure. The budget has been prepared for 80,000 cases keeping in view the female sterilization achievement of 2024-25) Budget Shifted from DBT to OOC as pre recommendation of NPCC
42.1	Female sterilization fixed day services			0.00		0.00	Background: All facility up to CHC level are mandate to provide FDS (either through engaging trained Surgeons from the same facility or mobilizing from other facilities) Progress: 371 facilities are providing FDS Budget: As budget for FDS is already covered under Compensation package hence, no additional cost proposed. Expenditure Heads under compensation package: FDS organization cost Drugs dressing = 100, Avasthis=50, Nurse/ANM=30, OT helper=30, Documentation=20, Refreshment=10, Misc-10 = Total FDS organization cost= Rs.250/-
42.2	Compensation for female sterilization					32.01	Ongoing Activity Budgeted proposed for 80000 cases as per projected ELA calculation attached at ELA Write-up Annexure
42.2.1	At Public Sector	Per beneficiary	2000	0.02	1018	16.29	1. At Public Sector (Interval Female Sterilization): @Rs.2000/- Per beneficiaries 2. At Private Sector: @Rs.3000/- Per beneficiaries 3. For PPS at public sector: Rs.3000/- Per beneficiaries Budget Revised as per the discussion in the NPCC Meeting
42.2.2	At Private Sector	Per beneficiary	3000	0.03	81	1.94	
42.2.3	For PPS at public sector	Per beneficiary	3000	0.03	574	13.78	
42.3	Minilap kits	Per Kit	5000	0.05		0.00	Not Proposed for FY 2026-27
42.4	Laparoscopes	Per Machine	1500000	15.00		0.00	Budget Approved for purchase of 24 laparoscopes during 2024-26 is under process. So, proposal has not been given for new purchases in FY 2026-27
42.5	Drop Back Services for sterilization clients	Per case	250	0.00	1063	2.66	Ongoing Activity Cases targeted for female sterilization at public health inst- 80000 Budgeted for: 64000 (80%) of the targeted cases as others may expected to use their own conveyance Budget Revised as per the discussion in the NPCC Meeting
42.6	Capacity Building & Training under Sterilization - Female						Budget Approved under HSS-16_Capacity building incl. training_SI.No.201
42.7	Printing under Female Sterilization- Manuals & Guidelines/Register/ Documents						Budget Approved under HSS-19_IEC & Printing_SI.No.204

Sl. No.	Scheme/ Activity	Approval 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
43	Sterilization - Male					1.16	Expected Beneficiaries for 2026-27- 2400
43.1	Male Sterilization fixed day services						Ongoing Activity Total No. of expected cases in 2026-27: 2400 (achievement April to March 2025 Male Sterilisation = 2443 - Budget: As budget for FDS is already covered under Compensation package hence, no additional cost proposed. Expenditure Heads: FDS organisation cost Drugs dressing =50, Nurse/ANM=30, OT helper=30, Documentation=20, Refreshment=10, Misc-10 = Total FDS organization cost= Rs.150/-
43.2	Compensation for Male Sterilization/NSV	Per beneficiary	2700	0.03	43	1.16	Ongoing Activity Budget: @Rs.2700/- per Male Sterilization
43.3	NSV kits						Not Proposed for FY 2026-27
43.4	NSV Training- ToT & Other trainings						Budget Approved under HSS-16_Capacity building incl. training_SI.No.201
43.5	Incentives for Mobilizing clients for Vasectomy	Per Worker	0	-			Ongoing Activity Background: In order to strengthen community mobilization activity for increasing acceptance of male sterilization, it is proposed to involve MPHWM to increase the level of acceptance to the desire level as well as to support ASHA in mobilization. - Progress: Achievement: 2024-25 (2443 cases) Proposal: An incentive of Rs.750/- to be provided to each Male health Worker for motivating at least 3 clients for vasectomy. Proposed budget for 200 no of claims = Rs.750/-*200 = 1.5 Lakhs Activity Not Approved, hence dropped
43.6	Printing under Male Sterilization						Not Proposed this year
44	IUCD Insertion (PPIUCD and PAIUCD)					2.72	
44.1	IUCD fixed day services					-	Not Proposed for FY 2026-27
44.2	Compensation for IUCD insertion at health facilities (including fixed day services at SHC and PHC)	Per case	75	0.00		-	Not budgeted , met out of IMEP fund under State budget
44.3	PPIUCD Services: Compensation to beneficiary for PPIUCD insertion	Per case	300	0.00	783	2.35	Ongoing Activity Budget for PPIUCD: @Rs.300/- Per Case Details of calculation attached at ELA Write-up Annexure
44.4	PAIUCD Services: Compensation to beneficiary per PAIUCD insertion	Per case	300	0.00	125	0.38	Ongoing Activity Budget for PAIUCD: @Rs.300/- Per Case Details of calculation attached at ELA Write-up Annexure
44.5	ASHA incentive for accompanying the client for PPIUCD and PAIUCD insertion						Budget Approved under HSS-17_ASHA Incentives_ SI.No.202
44.6	IUCD kits					0.00	Detail Calculation: To Be supply by Gol in Kind
44.7	PPIUCD forceps	Per unit	2000	0.02		0.00	Not Proposed for FY 2026-27
44.8	TOT (IUCD insertion training)						ToT for IUCD Insertion training have been already saturated. No new proposal proposed this year.

Sl. No.	Scheme/ Activity	Approval 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
44.9	Training of Medical officers (IUCD insertion training)						Budget Approved under HSS-16_Capacity building incl. training_SI.No.201
44.10	Printing Under IUCD Services: Manuals & Guidelines/ Register/ Documents						Budget Approved under HSS-19_IEC & Printing_SI.No.204
45	ANTARA					0.77	Details of calculation attached at ELA Write-up Annexure
45.1	Injectable contraceptive incentive for beneficiaries	Per Beneficiary	100	0.00	773	0.77	Budget: @Rs.100/- Per case (i.e. 40% of the total targeted doses, because of issues related to disbursement and low incentive claims for MPA in previous years)
45.2	ASHA Incentive under ANTARA						Budget Approved under HSS-17_ASHA Incentives_ SI.No.202
45.3	Capacity building & training						Budget Approved under HSS-16_Capacity building incl. training_SI.No.201
45.4	Printing under ANTARA						Budget Approved under HSS-19_IEC & Printing_SI.No.204
46	MPV (Mission Parivar Vikas)					0.00	
46.1	Procurement & supply of Nayi Pehl Kit						NA
46.2	ASHA Incentives for distribution of Nayi Pehl Kit						NA
46.3	ASHA incentive for updation of EC survey before each MPV campaign			-		-	NA
46.4	Other activities under Mission Parivar Vikas : Demand Generation (Saarthi, Saas Bahu Sammellan, Creating enabling environment)						NA
47	Family Planning Indemnity Scheme (FPIS)					0.00	
47.1	Family Planning Indemnity Scheme	Per Case	50	0.00	0	-	Ongoing Activity 2024-25 FPIS Failure =400 , Death = 8 , Complication =2, Expected cases = 410 failure * 60000=246.00 Lakhs, death = 5*4.00 Lac=20.00 Lacs, Complication = 50000*5 = 2.5 Lacs Total Excepted Sterilization: 80000 Total Budget Requirement: Rs.268.50 Laks (Out of which Rs. 40.00 Lakhs will be born by NHM & rest amount will be paid by State budget) Budget Proposed for 2026-27: @Rs.50/- per case Budget Revised as per the discussion in the NPCC Meeting
47.2	Printing under FPIS			-		-	Proposal: Printing of FPIS manual Already available, hence, not Proposed
48	FPLMIS					0.00	
48.1	Capacity Building / Training under FP-LMIS						Budget Approved under HSS-16_Capacity building incl. training_SI.No.201
48.2	Printing of FPLMIS Manual						Printed & supplied in 2022-24. Not Proposed this year
49	World Population Day and Vasectomy Fortnight					0.00	Budget Approved under HSS-19_IEC & Printing_SI.No. 204

Sl. No.	Scheme/ Activity	Approval 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
50	Other Family Planning Components					5.58	
50.1	Provisioning of Self Help Kit					-	Background: Client privacy is a major concern while providing reproductive health services. In this regard GoI has suggested installation of self help kit boxes in health facilities. These boxes will contain ECP, Chhaya and Condoms. Interested clients can collect the commodities as required from the boxes installed at the health facility themselves and at the same time maintaining anonymity. No proposal for FY 2026-27 as Self Help Kit provided during FY 2024-25
50.2	Mobilisation of Surgeons (Public/ Private) for providing FDS	Per District	50000	0.50	1	0.50	Ongoing Activity Mobilization of Surgeons (Public/Private) for providing FDS (Reimbursement will be done as per society norms) @Rs.50000/- per district x 30 district = Rs.15.00 lakhs Expenditure incurred in 2022-23 - Rs.10.38 lakhs
50.3	POL provision for transporting contraceptive commodities from State to district	Lumpsum	400000	4.00	0	-	Ongoing Activity POL, Loading Unloading , Toll Tax & Fast Tag provision for transporting contraceptive commodities from State to district- Supply chain management from state warehouse to district level and will be ensured through this funding - Rs.4.00 lakhs (As per last years approval) Expenditure incurred in 2024-25- Rs.2.27 lakhs
50.4	POL provision for transporting contraceptive commodities from District to Blocks	Per block	8000	0.08	8	0.64	Ongoing Activity POL, Loading Unloading , Toll Tax & Fast Tag provision for transporting contraceptive commodities from District to Blocks & Block to Sub Centre - Supply chain management from state warehouse to district level will be ensured through this funding. Approx. cost for transpiration from district to block = Rs.8000/-, Expected number of trips from district to block per year = 8 times. Total Requirement : Rs.8000 per annum per block x 314 Blocks = Rs.25.12 lakhs Approx. Expenditure incurred in 2024-25 - Rs.5.00 lakhs
50.5	Delivery of FP contraceptives to districts by India Post	Lumpsum	400000	4.00	0	-	Ongoing Activity Delivery of FP contraceptives to districts by India Post - Rs.4.00 lakhs for transportation of small quantities of commodities by parcel/courier services & for emergency purposes Expenditure incurred in 2024-25 - Rs.4.00 lakhs
50.6	ASHA Incentive for FP Services						Budget Proposed under HSS-17_ASHA Incentive_SI.No. 202
50.7	IEC/BCC activities						Detail Activities are Approved under Family Planning Write-up Annexure Folder Budget Approved under HSS-19_IEC & Printing_SI.No. 204
50.8	Other Printing activities under FP						Budget Approved under HSS-19_IEC & Printing_SI.No. 204
50.9	FP QAC meetings			-			Minimum frequency of QAC meetings as per Supreme court mandate: Biannual State level meeting; Integrated with annual SQAC meeting (QA/QI) District level Meeting - Integrated with annual DQAC meeting (QA/QI) Hence, No additional Budget Proposed

Sl. No.	Scheme/ Activity	Approval 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
50.10	Planning and M&E						Activities: 1. Review Meetings: 1.1. State Level Review Meeting- Integrated with RMNCHAN Quarterly Review Meeting 1.2.District Level Review meetings -Integrated District Level Monthly Meeting 2. Monitoring & Supportive Supervision: Budget to be met out of Pooled fund placed at HSS-11_Technical Assistance_ SI.No.194
50.11	Establishment of Training Centre for Laparoscopic Sterilization	Per Center	2000000	20.00		0.00	Not Proposed this year. Currently functional at City Hospital Cuttack, Capital Hospital Bhubaneswar & DHH Koraput
50.12	Establishment of Training Centre for NSV	Lumpsum	966000	9.66		0.00	Establishment of Training Centre for NSV at CHC Gunupur of Rayagada District is already been completed during 2024-26. No proposal for FY 2026-27
50.13	Procurement & supply of Nayi Pehl Kit	Per kit	200	0.00		0.00	Ongoing Activity: This gift kit is proposed to provide the newlyweds The kit consists of birth control pills, condoms, a mirror, two towels, handkerchiefs for both husband and wife, bindi, comb, nail cutter, and a glossy dossier educating the newlyweds about the need of it and ways for family planning & Tracking of Eligible Couples and Family Planning Card. About 420000 New Eligible Couples regd. During 2024-25, Budgeted for newly wed couple : 200000 Unit cost revised from Rs.250/- to Rs.200/- as per tender rate. Activity is dropped as per the discussion in the NPCC meeting
50.14	ASHA Incentives for distribution of Nayi Pehl Kit						Budget Approved under HSS-17_ASHA Incentive_ SI.No. 202
50.15	ASHA incentive for updation of EC survey before each MPV campaign			-		-	ASHA Incentive for updation of Village Register has been provisioned under ASHA CPRC head . Hence , not proposed
50.16	Other activities under Mission Parivar Vikas : Demand Generation (Saarthi, Saas Bahu Sammellan, Creating enabling environment)	Per Meeting	1500	0.02	296	4.44	Proposal for 2026-27: Saas Bahu Sammellan (Ongoing activity) The activity will be taken up on half yearly basis at functional SC AAMs (5435) in 2024-26 Budget: @Rs. 1500/- per Sammellan (Rs.500/- for organising Sammellan + Rs. 1000/- as token gift + Rs. 200 for ASHA incentive) x 5435 functional AAMs x 2 times ASHA incentive of Rs. 200/- has been Approved under HSS-17_ASHA Incentive_ SI.No. 202
50.17	Engaging Adolescents and Youth in Family Planning Information and Services	Per Session	300	0.003	0	-	Activity Not Approved

Sl. No.	Scheme/ Activity	Approval 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
50.18	Provision of Family Planning Services to Differently-Abled Couples	Per Couple	300	0.003			New Activity: Background: Differently-abled couples often face barriers in accessing FP services due to lack of inclusion and provider sensitization. Targeted interventions are needed to ensure equitable access and informed contraceptive choices Proposal: - 1. A line-list of differently-abled eligible couples should be prepared by ASHA and ANM. 2. The differently-abled eligible couples will be provided regular counseling and contraceptive supply. Proposed Budget: Number of Eligible couples who claimed marriage incentives for the Differently-abled for the year 24-25= 2172 Rs.300* target couple = 300*2200= 6.6 Lakhs Activity is dropped as per discussion in the NPCC Meeting
51	State specific Initiatives and Innovations						
	Total Family Planning					44.90	

RCH-7_Nutrition

Sl. No.	Scheme/ Activity	Approval 2026-27					State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
	Total Nutrition					16.05	
52	Anaemia Mukht Bharat					0.00	There are 6 different age groups who are covered under AMB but funded under different programmes heads are as follows: 6-59 months - Covered under Nutrition component 5-9 years - Covered under Nutrition component 10-19 years - Covered under Adolescent Health 20-24 years WRA (NPML)- Covered under Nutrition component PW & Lactating Mother - Covered under Maternal Health
52.1	Procurement of Drugs			-		-	
52.1.1	IFA syrups (with auto dispenser) for children (6-59 months)					0.00	Ongoing Activity Drugs Specification: 20 mg elemental Iron & 100 mcg Folic acid with Auto dispensable dropper- 50 ml bottle Level at which the item would be used : SC (AWC) Expected No. of Children (6-60 months) - 3477388 A. Procurement of 5563821 prophylactic iron syrup bottles (80% no. of bottles required as per consumption) for 3477388 children between 6-59 months @Rs 7 per bottle B. Procurement of 121100 therapeutic iron syrup bottles (70% bottles required as per consumption) for 173000 children 6-12 months and 2191971 therapeutic iron syrup bottles (70% bottles required as per coverage) for 1534380 children 13-59 months @Rs 7 per bottle (Total: 121100+ 1534378= 1655478) Requirement for Iron Folic Acid Syrup bottles @ 50 ml per bottle (A+B): 5563821 + 1655478= 7219299 Source of Fund: State Health Budget
52.1.2	IFA tablets (IFA WIFS Junior tablets- pink sugar coated) for children (5-9 yrs.)					0.00	Ongoing Activity Drugs Specification : 45 mg elemental Iron & 400 mcg Folic acid sugar coated tablet (IFA pink) Level at which the item would be used : School Expected No. of Children from Class-1 to 5 - 2317542 A. Procurement of 96409747 prophylactic pink iron tablets (80% no. of tablets required as per consumption) for 2317542 children between 5-9 years months @Rs 0.12 per tablet B. Procurement of 48668382 therapeutic pink iron tablets (70% no. of tablets required as per consumption) for 1158771 children between 5-9 years (covering 50% of children) @Rs 0.12 per tablet Requirement for IFA (Small, Pink) tablets (Prophylactic + Therapeutic) - 145078129 Source of Fund: State Health Budget

Sl. No.	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2026-27		State's Remarks
					Quantity/ Target	Budget (Rs. Lakhs)	
52.1.3	IFA tablets for non-pregnant & non-lactating women in Reproductive Age (20-49 years)					0.00	Ongoing Activity No. of females aged of 20-24 years = 20,41,585 (i.e. 49.46% of the total population aged 20-24 years) Since the Pregnant women (PW) and Lactating women (LW)in the WRA group (20-24 years) constitute 3.8% and shall be covered under IFA for PW & LW, the WRA group will be include 1964004 may be targeted. Drugs Specification : 60mg elemental Iron & 500 mcg Folic acid , sugar coated, (IFA Red) The drug (IFA red) would be used: SC Requirement for IFA. (Large Red) tablets: A. Prophylactic Dose: 1964004 X 52 weeks = 102128231 tablets (61276938 tablets proposed looking at the consumption) B. Therapeutic Dose: 982002 (60% of 1964005 WRA based on expected consumption) x 90 days X 2tablets per day= 176760399 tablets, 106056240 tablets proposed looking on the consumption) As prevalence of anemia in WRA as per NFHS-5 is 64.4%, 50% of the total WRA 20-24 yrs targeted. Total tablets: 167333178 Budget 2026-27: @Rs. 0.12/- per tab X 167333178 =Rs 200.80 Lakhs Source of Fund: State Health Budget
52.1.4	IFA tablets for Pregnant & Lactating Mothers					0.00	Ongoing Activity Background: All pregnant woman will be given 1 tab IFA for 180 days from 2nd trimester and all PNC cases will be given 1 tab of IFA for 180 days after delivery as prophylactic dose. Incase of anemic pregnant woman or lactating mother double dose of IFA is provided. Current Status: 95% of PW and 81% of PNC mothers are provided 180 IFA tabs during pregnancy and PNC period. Proposal: Drugs Specification (Revised in the current year) : 60 mg elemental Iron + 500 mcg Folic Acid Level at which the item would be used : SC/ PHC/ CHC/ SDH/ DH Total pregnant women - 624277 Total PNC - 565975 1. Procurement of 214245360 red IFA red tablets for prophylactic treatment of 1190252 pregnant (624277) and lactating women (565975) 2. Procurement of 27043029 IFA red tablets for therapeutic management of 15% of ANC cases (93642 nos) & 10% PNC cases (56598)= 150239 anemic pregnant and lactating women Total Budget Requirement: 241288389 IFA Red tablets (prophylactic+therapeutic) @Rs 0.12 per tablet= Rs. 289.55 Lakhs Budget proposed under RCH-7 Nutrition, Source of Fund: State Health Budget

Sl. No.	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2026-27		State's Remarks
					Quantity/ Target	Budget (Rs. Lakhs)	
52.1.5	Albendazole Tablets for non-pregnant & non-lactating women in Reproductive Age (20-24 years)					0.00	Budgeted under RCH-7, SI No. 53_at NDD Total Estimated No. of WRA 20-24 yrs: 1964004 Drugs Specification: Albendazole 400 mg chewable tab Requirement: 1374802 nos (i.e. 70% of total WRA 1964004) X 2 rounds= 2749605 No. of tablets required Justification: According to recommendation of AMB programme, WRA are to be deworm biannually to reduce anemia. Anemia prevalence of WRA is 64.4% as per NFHS-5 report,
52.1.6	Albendazole tablets for Pregnant Women					0.00	Ongoing Activity Background: De-worming during pregnancy is implemented in all 30 districts. Training at all levels has been completed. All pregnant woman will be given one albendazole during 2nd trimester. Proposal: Drugs Specification : 400 mg , chewable Level at which the item would be used : SC Total pregnant women - 624277 Provisioned of 1 tablet per PW for all PW (624277) Source of Fund: State Health Budget
52.1.7	Multivitamin for Pregnant women					0.00	Background: As per WHO, Micronutrient supplementation is a recommended part of routine antenatal care to overcome complications associated with micronutrient deficiencies during pregnancy, and to support maternal health and fetal development. Hence it is proposed to supplement Multi-Vitamin an Multi-mineral tablets for 3 months (during 2nd trimester- 90 Days) to pregnant women with normal Hb level and for 6 Months (during 2nd and 3rd trimester- 180 Days) to pregnant woman with anemia. Total estimated pregnant Woman:-624277 A. 90 tabs for non-anemic PW i.e. 50% of 624277=312138*90=28092420 Tablets B. 180 tabs for anemic cases i.e. 50% of 624277=312138*180=56184840 Tablets Total Requirement of tablets: 84277260 Unit cost per multivitamin tablets:-Rs.0.50 Source of Fund: State Health Budget
52.2	Equipment/ instruments & consumables for Anemia Mukat Bharat					0.00	For Test for Hemoglobin, budget proposed under 15th FC Treatment under procurement head under NHM PIP
52.3	Training & Capacity Building						Budget Proposed under HSS-16_Capacity Building Training_SI.No.201
52.4	Printing of compliance cards and reporting formats for National Iron Plus Initiative			-		0.00	To be met out of State Budget
52.5	Incentive to ASHA for Mobilising children and ensuring compliance of IFA for 6-59 months children						Budget Proposed under HSS-17_ASHA Incentive_SI.No.202

Sl. No.	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2026-27		State's Remarks
					Quantity/ Target	Budget (Rs. Lakhs)	
52.6	Rollout of Model Schools/ SC AAMs Initiative	Per District	50000	0.50			New Activity Proposal: District level award giving ceremony with the chairmanship of Zilla Parishad Chairman, Collector & PRI Members. Activity: Rollout of model school initiative in 100 Schools & 100 SC AAM in each district in convergence with S&ME & ST/SC deptt. (Target in FY 2026-27) Modalities: Award to Schools/ Sub-centres achieving following Parameters. • >90% coverage of Prophylactic Iron Folic Acid Supplementation • >90% periodic Deworming • >90% Hemoglobin Testing by using digital methods • >90% Consumption of Therapeutic doses • Periodic Social Behavior Change Communication campaign (Means of Verifications - Records/photographs) • Annual Iron deficiency anemia recovery is more than 60% for Schools and more than 50% for Sub-centres. Budget: @Rs.50000/- per district Activity is dropped as per the recommendation of NPCC
52.7	Inj. Ferric Carboxy Maltose	Per inj	184	0.00	0		Ongoing Activity Proposal: Inj. FCM (1000mg.) will be provided to moderate & severe anemic cases of PNC/ ANC. Background: The primary cause of anemia during pregnancy and lactation is iron deficiency. Prophylactic/Therapeutic oral iron is recommended during pregnancy and lactation to meet the increased requirement, but the main issue with oral iron therapy is compliance due to the associated frequent gastrointestinal side effects. - Intravenous (IV) iron is an effective alternative to oral iron as it circumvents the natural gastrointestinal regulatory mechanisms to deliver non-protein bound iron to the red blood cell. Intravenous iron helps in achieving rapid collection of hemoglobin, replenishing iron stores and is better tolerated than oral iron in treating Iron deficiency anemia. Thus FCM, is rapidly cleared from plasma and largely distributed in bone marrow. Infusion of FCM can correct iron deficiency anemia in the 2nd and 3rd trimester of pregnancy & Lactation period. Details of Calculation is at Nutrition Write-up Annexure Budget Shifted from RCH-1_Maternal Health_Sl.No.17
53	National Deworming Day					0.00	There are 3 different age groups who are covered under NDD but funded from under different programme heads are as follows: 1-5 years - Covered under Nutrition component 6-9 years - Covered under Nutrition component 10-19 years - Covered under Adolescent Health
53.1	Procurement of Drugs			-		-	

Sl. No.	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2026-27		State's Remarks
					Quantity/ Target	Budget (Rs. Lakhs)	
53.1.1	Albendazole Suspension for children (1-5 years)					0.00	Ongoing Activity Drugs Specification: Albendazole Suspension 10 ml bottle; Each 5ml contains 200 mg Level at which the item would be used : AWC & play schools Estimated no of beneficiaries (1-5 years): 3294630 Estimated no of beneficiaries (1-2 years): 850575 (Half bottle per child 5ml) Estimated no of beneficiaries (2-5 years): 2444055 (One bottle per child) Total Requirement:{ 425288 (i.e. 50% of 850575) + 2444055}+10% buffer X 2 rounds = 6312554 per normative calculation 85% as per coverage- 5365671 Source of Fund: State Health Budget
53.1.2	Albendazole Tablets for children (5-9 yrs.)					0.00	Ongoing Activity Drugs Specification: Albendazole 400 mg chewable tab. Level at which the item would be used :School & AWC Estimated No. of beneficiaries (5-9 years) including pvt. schools = 2745284 , For 2 rounds Total No. of tablets required = 5490568 +10% buffer=6039624 as per normative calculation 85% is suggested 5133680 Source of Fund: State Health Budget
53.1.3	Albendazole Tablets for Adolescent (10-19 yrs.)					0.00	Ongoing activity- NDD: Drugs Specification : Albendazole 400 mg chewable tab. Level at which the item would be used: School & AWC Estimated no of beneficiaries (10-19 years) = 10143787 For 2 rounds total No. of tablets required +10 % buffer=22316332 as per normative calculation. 85% is suggested = 18968882 tablets Source of Fund: State Health Budget
53.1.4	Albendazole Tablets for non-pregnant & non-lactating women in Reproductive Age (20-24 years)					0.00	Ongoing Activity Total Estimated No. of WRA 20-24 yrs: 1964004 Drugs Specification: Albendazole 400 mg chewable tab Requirement: 1836343nos (i.e. 85% of total WRA 1964004 +10% buffer) X 2 rounds= 3672686 No. of tablets required Justification: According to recommendation of AMB programme, WRA are to be deworm biannually to reduce anemia. Anemia prevalence of WRA is 64.4% as per NFHS-5 report Source of Fund: State Health Budget
53.2	Orientation on National Deworming Day						Budget Proposed under HSS-16_Capacity Building Training_Sl.No.201
53.3	IEC/BCC activities during National Deworming Day						Budget Proposed under HSS-19_IEC & Printing_Sl.No.204
53.5	Incentive For mobilising and ensuring every eligible child (1-19 years out-of-school and non-enrolled) is administered Albendazole						Budget Proposed under HSS-17_ASHA Incentive_Sl.No.202
54	Nutritional Rehabilitation Centers (NRC)					15.00	There are 67 functional NRCs with bed occupancy rate of 88% & discharge rate of 95%

Sl. No.	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2026-27		State's Remarks
					Quantity/ Target	Budget (Rs. Lakhs)	
54.1	Operating expenses for NRCs						Background/Approval : 69 NRCs are approved (10 bedded -63 & 15 bedded - 6) Functional Status : 67 NRCs are functional (Out of which 61 are 10 bedded NRCs & 6 are 15 bedded NRCs) Proposal 2026-27 : 68 NRCs proposed (10 bedded-62 & 6 are 15 bedded & 1 dropped as BOR < 80% & 2 more NRCs are functional in that district) Approved Budget: 1. Continuation of 62nos of 10 bedded NRC: @Rs.15.00 Lakhs per NRC 2. Continuation of 6nos of 15 bedded NRCs: @Rs.22.30 Lakhs per NRC The detailed Operational Expenses attached at NRC Recurring Cost Annexure Budget Revised as per the recommendation in the NPCC Meeting
	Operating expenses for 10 bedded NRCs	Per NRC	1500000	15.00	1	15.00	
	Operating expenses for 15 bedded NRCs	Per NRC	2230000	22.30	0	-	
54.2	Non-recurring & Maintenance cost for NRCs						Not Proposed this year
54.3	Training & Capacity Building- NRCs						Budget Proposed under HSS-16_Capacity Building Including Training_SI.No.201
54.4	IEC/ BCC & Printing						Budget Proposed under HSS-19_IEC & Printing_SI.No.204
54.5	Incentive for referral of SAM cases to NRC and for follow up of discharge SAM children from NRCs						Budget Proposed under HSS-17_ASHA Incentive_SI.No.202
55	Vitamin A Supplementation					0.00	
55.1	Procurement of Vitamin A syrup					0.00	Ongoing activity with revised unit cost (Unit cost revised as per latest tender rate) Drug Specification :100000IU/ml Vitamin A pediatric oral solution, Level at which it will be used: SC & Session Site, To be utilized in Vit-A supplementation campaign & RI session. Expected children below 5 years: 3210650 Expected child 9 month to 1 year: 234822 (1 bottle consume 50 child) Expected child 1 to 9 years: 2975828 (1 bottle consume 25 child) Total Requirement: 234822/50 + 2975828/25 + 10% buffer= 136102 Estimated Vitamin A solution bottle required for 2 rounds= 136102 *2= 272204 as per normative calculation Source of Fund: State Health Budget
55.2	Orientation activities on vitamin A supplementation and Anaemia Mukta Bharat Programme					0.00	To be taken up in Virtual Mode
55.3	Printing for Micronutrient Supplementation Programme including IEC materials, reporting formats, guidelines / training materials etc. (For AMB and Vitamin A supplementation programmes)						Budget Proposed under HSS-19_IEC & Printing_SI.No.204
56	Mother's Absolute Affection (MAA)					-	
56.1	ASHA incentive under MAA programme @ Rs 100 per ASHA for quarterly mother's meeting			-		-	No additional Incentive proposed . Mothers are sensitized at VHND Sessions
56.2	Training & Capacity Building on BHFI						Budget Proposed under HSS-16_Capacity Building Including Training_SI.No.201

Sl. No.	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2026-27		State's Remarks
					Quantity/ Target	Budget (Rs. Lakhs)	
56.3	Baby friendly Hospital Initiative	Per institution		-		-	Ongoing Activity Background: Baby-friendly Hospital Initiative serves as the standard for measuring adherence to each of the Ten Steps for Successful Breastfeeding and prohibits Marketing of Infant milk Substitutes. Promotion of optimal infant and young child feeding (IYCF) practices is an important intervention for preventing under nutrition in children and also improving child survival as well as development. Breastfeeding within an hour of birth could prevent 20 per cent of newborn Deaths and 13% of under five Deaths. Babies, who are exclusively breastfed in the first six months of age, are 11 times less likely to die from diarrhoea and 15 times less likely to die from pneumonia, which are the two leading causes of death in children under-five years of age. Proposed Target: 20 FRU will be awarded for BFHI in 2026-27 Budget Proposed: Award money @ Rs.10000/- per institution, which may be utilised to promote, protect and support breastfeeding. Budget Proposed in 2026-27: Rs. 200000/- Not recommended for BFHI Certifications/Awards, as certification are to be done under NQAS programme. Hence activity Dropped
56.4	TA & DA for assessors for BFHI assessment	Lumpsum	544000	5.44		-	BFHI Assessment will be supported by UNICEF
56.5	IEC/ BCC activities during Breast Feeding Week					-	Budget Proposed under HSS-19_IEC & Printing_Sl.No.204
57	Lactation Management Centers					1.05	
57.1	Comprehensive Lactation Management Centers (CLMCs)						Background: Two nos of CLMCs are functional in the State one is at PGIMER, Capital Hospital and another is at SCBMCH, Cuttack. As per GoI norm CLMC should be established at the Health facility having 24 bedded SNCUs. Hence, it is suggested to establish 6 new CLMC in health facility having 36 and more bedded SNCUs. Proposed 6 CLMCs at DHH Balasore (Scale up), SVPGIP Cuttack (Scale up), MKCG MCH (Scale up), SLN MCH- Kpt (new), Mayurbhanj MCH (Scale up) and VSSMC-Burla (Scale up). Manpower cost for establishment of CLMC Proposed at SD HR (HSS-9) Repair Renovation for CLMC proposed at HSS-4 Civil Infrastructure
57.1.1	Non Recurring Cost	Lumpsum	0	-	1	-	1.New CLMC proposed at SLN MCH Koraput: @Rs.50.37 lakhs (for Equipment/ Instrument & Furniture, Fixtures) 2. For upgradation of 5 CLMCs from LMU: Rs. 36.35X 5nos = Rs.181.75 lakhs Grand Total: Rs. 232.12 Lakhs Budget Revised as per the recommendation of NPCC Meeting
57.1.2	Recurring Cost	Per unit	262000	2.62	0	-	Recurring cost : @Rs.2.62 lakhs per unit as per GoI norm. X 2 units (Capital Hospital & SCB MCH)
57.1.3	Training on establishment & management of CLMC						Budget Proposed under HSS-16_Capacity Building Including Training_Sl.No.201

Sl. No.	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2026-27		State's Remarks
					Quantity/ Target	Budget (Rs. Lakhs)	
57.2	Lactation Management Unit (LMUs)						Ongoing Activity Justification: LMUs are established in the health facility for the purpose of providing lactation support to all mothers within the health facility for collection, storage & dispensing of mothers own breast milk for consumption by the baby. It will be established adjacent to 12 bedded SNCUs where sick newborns are admitted for medical management. 44nos of SNCUs are functional in the State. Till date 25nos of LMUs are functional in the State and 6 more LMUs are in the process of functional by March 2026. Total LMUs are 31nos by march 2026. Of which 5 LMUs are proposed for scale-up to CLMC. Hence, total LMUs existing comes to 26nos & New LMU to be proposed at 6nos (i.e. SDH Bhanja nagar, City hospital-Berhampur, DHH Khurdha, SDH Udala, SDH Rairangpur, CHC Umerkote) : 32nos Non Recurring Cost (Equipment/ Instrument & Furniture, Fixtures) for New LMUs: @Rs.11.89 lakhs per unit Recurring Cost for LMUs: @Rs.1.05 lakhs per unit (Scale-up for LMU to CLMC takes time, hence 5nos of scaled-up CLMCs are continued as LMUs till fictionalization of CLMC)
57.2.1	Non Recurring Cost	Per LMU	1189000	11.89	0	-	
57.2.2	Recurring Cost	Lumpsum	105000	1.05	1	1.05	Ongoing activity- 1. Operational cost @ Rs 1.05 lakhs /LMU for 12 months to existing LMUs 2. Operational cost @ Rs 0.50 lakhs /LMU for 6 months to LMUs which are proposed for upgrading to CLMC. Budget Revised as per the recommendation of NPCC Meeting
57.3	State level Training on functionalisation of Lactation Management Units						Budget Proposed under HSS-16_Capacity Building Including Training_SI.No.201
58	Intensified Diarrhoea Control Fortnight					0.00	
58.1	Procurement of Drugs (ORS & Zinc)						State supply. Hence no additional budget proposed
58.2	ASHA Incentive for prophylactic distribution of ORS to family with under-five children. (IDCF Programme)			-		-	Budget Proposed under HSS-17_ASHA Incentive_SI.No.202
58.3	Printing of IEC Materials and monitoring formats						Budget Proposed under HSS-19_IEC & Printing_SI.No.204
59	Eat Right Campaign						EAT Right tool kit & training already given as per Gol norm in previous years. Refresher training of CHOs will be done in integrated manner. Hence no additional budget proposed.

Sl. No.	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2026-27		State's Remarks
					Quantity/ Target	Budget (Rs. Lakhs)	
60	Other Nutrition Components					-	
60.1	Drugs for CMAM programme						Ongoing Activity Background: To manage SAM without medical complication in community, W & CD Dept. Started CMAM programme in our State. Administration of antibiotic syrup and multivitamin syrup is necessary for management of these children. As other drugs like antibiotic, zinc and folic acid are included in EDL, hence, procurement of Multivitamin is proposed for 81950 SAM children (annual case load shared by W&CD Dept.). The SAM child without complication are supplemented with multivitamin for 16 weeks i.e.112days. One 60ml. Bottle of multivitamin supplemented for 12 days/per child so, 9 bottles are required for one child. Proposal for 2026-27: Total estimated SAM children without complication – 154142 Basing on coverage 75% of SAM children may be provided with Multivitamin supplements=115606nos of SAM children Cost of one bottle =Rs.12/- No. Of bottle required = 115606 * 9 = 1040454 Budget for -2026-27: 1040454*12=Rs.12485445/- To be Met out of State Budget
60.2	COE Nutrition	Per Month		-		-	Ongoing Activity Background: CoE Nutrition at Capital Hospital Bhubaneswar The Centre of Excellence-Nutrition is established since 10th January 2018 at Shishubhawan, Capital Hospital, Bhubaneswar to serve as a one-stop resource center for child health and nutrition interventions in the state. This is supported by UNICEF. The CoE serves as a one-stop centre for supporting planning, monitoring and knowledge management for all child health and nutrition programmes in the state, including F-SAM, CMAM, RBSK and micronutrient supplementation programmes. Proposal for 2026-27: 1.Operational cost for COE Nutrition: @Rs.5000/- Per month for 12 months proposed 2.Mentoring & Handholding support for SAM management and Anemia Control Programme: 3.Assessment of Anemia Control Programme on cluster/Districts: Budget to be Supported by UNICEF. Hence activity dropped
60.3	Planning and M&E						Activities: 1. Review Meetings: 1.1. State Level Review Meeting- Integrated with RMNCHAN Quarterly Review Meeting 1.2.District Level Review meetings -Integrated District Level Monthly Meeting 2. Monitoring & Supportive Supervision: Budget to be met out of Pooled fund placed at HSS-11_Technical Assistance_ SI.No.194
61	State specific Initiatives and Innovations					0.00	
GRAND TOTAL						16.05	

RCH-8_National Iodine Deficiency Disorders Control Programme (NIDDCP)

Sl. No.	Scheme/ Activity	Approval 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
	Total NIDDCP					-	
62	Implementation of NIDDCP					-	
62.1	ASHA incentive salt sample test (For testing of 50 samples)						Budget Proposed under HSS-17_ASHA Incentive_SI.No.202
62.2	Supply of Salt Testing Kit	Lumpsum	30	0.00		0.00	To be met out of 16th FC fund
62.3	Management of IDD Monitoring Laboratory - Non Recurring	Lumpsum	200000	2.00	0	0.00	Replacement of equipments that can not be repaired. Buying additional equipment like Oven and refrigerator for preserving urine samples in vials. Budget shifted to Diagnostic Head as per recommendation of NPCC
62.4	Management of IDD Monitoring Laboratory - Recurring	Per IDD Lab	100000	1.00	0	0.00	Ongoing Activity Recurring cost for State IDD laboratory which has been integrated with State Public Health Lab (SPHL) Budget shifted to Diagnostic Head as per recommendation of NPCC
62.5	IDD Surveys/Re-surveys	Per District	50000	0.50	0	-	Ongoing Activity with revised unit cost Proposal 2026-27: Implementing Agency: Medical Colleges Proposed districts: Bolangir, Kalahandi, Keonjhar, Koraput, Mayurbhanj and Puri Details Budget Breakup is attached at NIDDCP Write-up Annexure Budget revised as per recommendation of NPCC
62.6	One Day training of ASHA on STK based testing and counseling of beneficiaries						To be taken up during the Sector Meeting of ASHA.
62.7	IEC/BCC activities under NIDDCP						Budget Proposed under HSS-19_IEC & Printing_SI.No.204
62.8	Planning and M&E						Activities: 1. Review Meetings: 1.1. State Level Review Meeting- Integrated with RMNCHAN Quarterly Review Meeting 1.2.District Level Review meetings -Integrated District Level Monthly Meeting 2. Monitoring & Supportive Supervision: Budget to be met out of Pooled fund placed at HSS-11_Technical Assistance_ SI.No.194
	Total NIDDCP					-	

NDCP-1_Integrated Disease Surveillance Programme (IDSP)

Sl. No.	Scheme/ Activity	Approval 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
	Total IDSP					0.00	
63	Implementation of IDSP					0.00	Detailed Writeup is at Writeup Annexure for DCPs
63.1	Trainings & Capacity Building					0.00	Budget Proposed under HSS_16_Capacity Building Including Training_Sl.No. 201
63.2	Operational cost						The operational cost is factored under PM-ABHIM Budget. But PM-ABHIM will continue only till - FY 2025-26. Hence, the cost has been shifted from PM-ABIM & proposed under NHM PIP for continuance of the IPHLs/ BPHUs.
63.2.1	Operational cost of IPHL/ DPHL						
63.2.1.1	Non-recurring costs	Per Unit		0.00		0.00	IPHLs have already been established with the funding from PM-ABHIM
63.2.1.2	Recurring Cost	Per IPHL		-		0.00	Under PM-ABHIM, an amount of Rs. 34 Laths has been approved as recurring cost to manage a IPHL. Out of which, 24.40 Lakhs is earmarked for additional HR and rest 9.60 Laths meant for kits, consumables, monitoring / supervision & contingency cost. As per the decision in the NPCC meeting, PM-ABHIM scheme will be continue even in FY 2026-27. Hence the recurring cost for maintenance of IPHL shall be met out of PM ABHIM Budget. Thus, proposed Budget Dropped
63.2.2	Operational cost of BPHU						
63.2.2.1	Non-recurring costs	Per Unit		0.00		0.00	Currently, 120 BPHUs have been established with the funding from PM-ABHIM and rest 194 will be established by Sep 2026. In case of any additional requirement shall be met out of Nidaan (a State Budget Scheme)
63.2.2.2	Recurring Cost	Per BPHU		-		0.00	Under PM-ABHIM, an amount of Rs. 7.34 Lakhs has been approved as recurring cost to manage a BPHU. Out of which, 6.50 Lakhs earmarked for additional HR and rest 0.84 Lakhs meant for kits, consumables, monitoring / supervision & contingency cost. As per the decision in the NPCC meeting, PM-ABHIM scheme will be continue even in FY 2026-27. Hence the recurring cost for maintenance of BPHU shall be met out of PM ABHIM Budget. Thus, proposed Budget Dropped
63.2.3	Public Health Lab at Major Hospitals						Public Health Lab has already been established at Capital Hospital, RGH-Rourkela. These two are Referral hospital and considered as DHHs and catering to about 10 Lakhs population each.
63.2.3.1	Non-recurring costs	Per Unit		0.00		0.00	Requirement has already been saturated. In case of any additional requirement shall be met out of Nidaan (a State Budget Scheme)
63.2.3.2	Recurring Cost	Per Lab	6,00,000	6.00	0	0.00	Budget proposed as per approval in the last year PIP.

Sl. No.	Scheme/ Activity	Approval 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
63.2.4	Operational cost for Reference Laboratory at MCHs	Per Unit	1,50,000	1.50	0	0.00	Ongoing Activity: Budget Proposed as approved last year Background: MoU has been signed with 3 govt. MCHs i.e. SCB MCH, MKCG MCH & VSS MCH for functionalisation as State Reference laboratory for outbreak response. Head of Expenses: Expenditure made on account of Laboratory Media, Reagents, Glass wares, consumables, operating expenses, procurement of Desktop, office expenses, broadband cost, mobility, miscellaneous etc.
63.3	Vaccine Preventable Disease Surveillance (VPD)	Lumsum	13611250	136.11	0	0.00	As per the NCDC, GoI guidelines (D.O.T-18015/044/2025-IDSP dated 30.10.2025), the Budget has been prepared and detailed in VPD Surveillance Annexure for transition of VPD surveillance from WHO National Public Health support network to IDSP. Accordingly, the VPD surveillance Budget is now shifted from Immunization to IDSP.
63.4	ASHA Incentive for Regular Reporting of Disease and outbreak Situation						Budget Proposed under HSS-17_ASHA Incentives_ SI.No.202
63.5	Planning and M&E						Activities: 1. Review Meetings: 1.1. State Level Review Meeting- Integrated with Half yearly DCP Programme Review Meeting 1.2.District Level Review meetings -Integrated District Level Monthly Meeting 2. Monitoring & Supportive Supervision- Utilise the pooled fund available at State/ District/ Block/ Sector Level 3. Administrative Contingencies for PMUs- Utilise the pooled fund available at State/ District/ Block Level Budget to be met out of Pooled fund placed at HSS-11_Technical Assistance_ SI.No.194 (Details at Write-up Annexure)
	Total IDSP					0.00	

NDCP-2_National Vector Borne Disease Control Programme (NVBDP)

Sl. No.	Scheme/ Activity	Approval 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
	Total NVBDCP					27.31	
64	Malaria					0.41	
64.1	Surveillance & Vector Control						
64.1.1	Special anti-malarial interventions for high risk groups, for tribal population, for hard to reach areas to control and prevent resurgence of Malaria cases	Per Camp	1500	0.015	0	0.00	New Activity: Malaria camp at Weekly Market (New): These tribal areas are often plagued by high malaria incidence due to factors like hard to reach areas, conducive environment for malaria and cultural barriers. Weekly markets in these areas serve as crucial gathering points for local communities, providing an opportunity to reach a large number of people. Objectives: • Early Detection and Treatment: Provide on-site malaria testing and treatment to reduce the burden of malaria in tribal communities. • Awareness and Education: Educate the community about malaria prevention, symptoms, and treatment through interactive sessions and distribution of educational materials. Camps will be conducted at the weekly market 4 camps during May-June & 4 camps during Sept-Oct. Total 8 camps will be conducted per weekly market in a year. Budget : @Rs.1500/- per camp for organizing cost Activity Shifted to SRAE Head as per recommendation of NPCC
64.1.2	Integration of Mobile Health Units (MHUs) in Malaria control Programme	Lumpsum		0		0.00	New Activity: There are 177 Mobile health units engaged in 18 TRIBAL districts of the state. These mobile health units reach remote and underserved areas, improving access to the health care services. These villages are vulnerable for malaria. Every fortnightly, the MHU covers selected 22 remote villages. These mobile health units can be utilized for • Active case detection during their visits • Seasonal screening for malaria. • Create awareness among community This will help in reducing the morbidity and mortality in these remote and hard to villages. Key Activities through MHUs: Active Case Detection (ACD) & treatment at regular treatment camps. • Door-to-door fever surveillance, especially during transmission season. • RDT-based malaria testing and immediate treatment (ACT, Chloroquine, Primaquine) Seasonal mass screening in the targeted villages :Annually two camps will be conducted i.e. in 1st Round: May/June , 2nd Round: Sept/ October • Pre Camp awareness involving the ASHA / Community Health volunteers • Screening of entire village population • Post camp follow up (treatment compliance, LLIN Use) involving the ASHA / Community Health volunteers Budget: • Orientation to the MHU team Rs.2000/- Team- Shifted to HSS-16, sl no-201 as per recommendation of NPCC • Screening register & reporting formats: 2 Registers @ Rs. 250/register per village x 22 Villages/ MHU Team = Rs.11,000/ Team- Dropped as per recommendation of NPCC • IEC materials (Banners & Standee) @ Rs. 2000/Team- Shifted to HSS-19, sl no-204 as per
64.1.3	ASHA Incentive for fever testing						Budget Proposed under HSS-17_ASHA Incentive_Sl.No.202

Sl. No.	Scheme/ Activity	Approval 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
64.1.4	ASHA Incentive for treatment completion of positive malaria cases.						Budget Proposed under HSS-17_ASHA Incentive_SI.No.202
64.1.5	Engagement of CHVs (Community Health Volunteers) Under NGO-SR (GFATM) & NHM-PIP	Lumpsum	2160000	21.6	0	0.00	New Activity: Eight districts of the state are highly malaria burden (Boudh, Gajapati, Kalahandi, Kandhamal ,Koraput, Malkangiri, Raygada&Mayurbhanj) . In order to establish and improve the routine surveillance in the identified villages/ hamlets where there is poor surveillance, CHVs will be engaged for bridging the gaps in surveillance and treatment compliance. Also they will support in implementing the vector control measure and community awareness activities. As per the MOU with GoI , 7 districts will be supported under NGO-SR (GFATM). For the Mayurbhanj district budget proposed under NHM PIP. Essential Eligibility for engagement of CHVs •CHV shall be primarily a resident of the village - • CHV should have effective communication skills, leadership qualities and be able to reach out to the community. Key activities of CHVs: •EDCT services at village level- Active & passive surveillance, RDT based test & treatment, Referral. •Support in vector control interventions: IPC for promoting LLIN use, support in IRS activities •Awareness activities: support in Miking, local school awareness programme No financial implication for the districts supported by NGO-SR under GFATM. Budget for Mayurbhanj district only proposed under NHM PIP: Total CHV to be engaged in Mayurbhanj: 90 Budget: •CHVs Training: 3 batches (30/batch) x Rs.127000 = Rs. 3.81 Lakhs (5 days training)-Shifted to HSS-16, sl no-201 as per recommendation of NPCC •Honorarium to CHVs: Rs.2000/Month per CHV x 12 Months = Rs. 21.60 Lakhs- Activity Shifted to SRAE Head as per recommendation of NPCC •M register for CHV: Rs. 200 per register x 90 CHVs = Rs. 0.18 Lakhs-Shifted to HSS-19, sl no-204 as per recommendation of NPCC •Megaphone for CHVs: Rs.1500 per megaphone x 90 megaphone = Rs.1.35 Lakhs- Dropped as per Recommendation of NPCC
64.1.6	Indoor residual spray (IRS)						Indoor residual spray (IRS) in one of the vector control intervention for Malaria. Annual two rounds of IRS conducted in selected high malaria burden areas of the state in routine mode.
64.1.6.1	Operational cost for Spray Wages						Apart from routine IRS, focal IRS needs to be conducted to control the upsurge/ outbreak in non IRS areas. During 2025-26, Indoor residual spray with Alpha-cypermethrine has been conducted in the state. IRS plan for 2026-27FY
64.1.6.2	Procurement of Synthetic Pyrethroid	Per KG	200	0.002		0.00	•Target population: 40 Lakhs (20 lakhs/ Round –Two rounds) •Insecticide to be used: Synthetic Pyrethroid (Alpha-Cypermethrin) 5% WP Budget Components of IRS: Proposed under NHM PIP: • Procurement of Synthetic Pyrethroid: 75 MT (Total budget requirement: Rs.200/Kg x 75000 Kgs= Rs.150.00 Lakhs (Source of fund: State Budget)

Sl. No.	Scheme/ Activity	Approval 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
64.1.6.3	Procurement of PPE kits for Spray squad	Per Kit	500	0.005	0	0.00	• Procurement of PPE kits for Spray squad (Total requirement of Kits: 640 Kits x Rs.500/Kit = Rs.3.2 lakhs (4 PPE kits per squad x 160 squads= 640 Kits)- Activity Shifted to OOC Head as per recommendation of NPCC •Stirrup Pump for IRS Spray: 100 pumps x Rs.6500= Rs.6.5 lakhs-Activity Shifted to OOC Head as per recommendation of NPCC
64.1.6.4	Stirup Pump for IRS Spray	Per Machine	6500	0.065	0	0.00	Proposed under state non-plan: •Operational cost for spray wages:Rs.4Cr •Transportation related cost:Rs.3 lakh •Contingency:Rs.25 lakh • Procurement of Synthetic Pyrethroid
64.1.7	Operational cost for Impregnation of Bed nets- for NE states			0		0.00	Not proposed
64.1.8	Biological and Environmental Management through VHSC			0		0.00	To be met out of existing VHSNC (GKS) fund
64.1.9	Larvivorous Fish support	Per Unit	25000	0.25	1	0.25	Ongoing Activity: Background: Biological control of mosquitoes through larvivorous fish is an important intervention for prevention & control of VBDs like Filariasis & Malaria. As per the status there are 47 hatcheries in the state at different DHQs. For maintenance of fish species in the said hatcheries the following budget is proposed. Current Status: 47 existing Hatcheries Budget Proposed for FY 2026-27: Budget Proposed to meet the recurring cost of the existing hatcheries : @Rs. 25000/- hatchery
64.1.10	Construction and Maintenance of Hatcheries						Ongoing Activity: Background: Biological control of mosquitoes through larvivorous fish is an important intervention for prevention & control of VBDs like Filariasis & Malaria. As per the status there are 47 hatcheries in the state at different DHQs. For maintenance of hatcheries the following budget is proposed: Current Status: 47 existing Hatcheries Budget Proposed for FY 2026-27:
64.1.10.1	Maintenance of Hatcheries	Per Hatchery	10000	0.10		0.00	Proposal 1: Budget is proposed for Maintenance of hatcheries in districts @Rs. 10000/Hatchery- Activity Shifted to HSS-4, Infrastructure & Civil Works sl no-169 as per recommendation of NPCC
64.1.10.2	Construction of Hatcheries	Per Hatchery	50000	0.50		0.00	Proposal 2: Budget Proposed for construction of hatcheries in high endemic blocks- Budget to be Proposed under State Budget

Sl. No.	Scheme/ Activity	Approval 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
64.1.11	Entomological Unit : Lab Consumables & contingencies	Per unit	50000	0.50	0	0.00	Ongoing Activity: Background: Entomological surveillance required for planning the Integrated Vector Management(IVM). Current Status: 8 Zonal entomological units & state MVCR cell. Ou of the 8 zonal entomological units, sambalpur zone is non functional due to vacant position of asst. entomologist (under state govt. support). Budget for this zone will be proposed after functionalization. Budget Proposed for FY 2026-27: 1. Lab. Reagent/other minor Equipments/Consumable For existing 7 zonal units and State - @Rs 50000/- per unit Budget Revised as per recommendation of NPCC
64.1.12	Entomological Unit : Infrastructure Strengthening	Per Zone	110000	1.1	0	0.00	Ongoing Activity: Currently there are 8 Zonal entomological units& one State entomology unit in the state. Strengthening infrastructure for vector-borne diseases lies in the critical need for enhanced vector surveillance, monitoring, and control. There in need for well ventilated, furnished rooms for functioning of entomology laboratory. Existing rooms will be renovated & furnished for the functioning of entomology laboratory.(Proposed Budget @ Rs.2.7 lakhs/entomology zones). As there is vacancy of HR in sambalpur zone, budget for this zone will be proposed after recruitment. Budget: Total Budget: @Rs.1.10 Lakhs (i.e. Rs.1.00 lakh for Infrastructure Strengthening & Rs. 0.10 Lakhs for Equipment / Laboratory) Budget Revised as per recommendation of NPCC and activity shifted to SRAE Head & Equipment head
64.1.13	Health Products- Equipment (HPE) - GFATM						Requirement is saturated out of HSS fund. Hence the budget is not proposed.
64.1.14	Non-Health Equipment (NHP) - GFATM						GFATM Support- (As per directive of NVBDGP, Gol, 19 Districts(API>2 as per 2017 EPI Data) will be supported from EAC funding under GFATM. These 19 districts have placement of 150 VBDS/MTS Current Status: 150 Existing Motor Bikes Budget to be met out of Pooled fund placed at HSS-11_Technical Assistance_ SI.No.194 (Details at Write-up Annexure- Monitoring & Supportive Supervision)
64.1.15	Procurement of Drugs & Kits						
64.1.15.1	Chloroquine Phosphate Tablets	Per Unit	1	0.00001		0.00	Ongoing Activity: Background: Around 26% of the state total cases are Pv malaria, however the antimalarial like CQ has to be kept available at village level with ASHA to meet the requirement if any. Hence, at least 1 strip with each ASHA will prevent stock out condition. As such CQ has two years of shelf life, hence periodical monitoring will be done by the districts and CHCs to reshuffle the stock. Commodity Type: Decentralised Calculated annual requirement for CQ: 1468420 (To be Met out of State Specific Budget)

Sl. No.	Scheme/ Activity	Approval 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
64.1.15.2	Primaquine Tablets 2.5 mg	Per Unit	0.9	0.000009		0.00	Ongoing Activity: Background: Around 74% of the state total cases are Pf malaria and the rest 26% of the cases are Pv malaria. Both the cases require primaquine for complete treatment. Further malaria cases of different age group require different strength of PQ(7.5 mg & 2.5 mg) as per national drug policy. To ensure that there is no stock out of PQ at village, the calculation is made for all 49990 ASHAs (both rural & urban) to ensure that each ASHA is having at least one strip of PQ with her at any point of time. As such PQ has two years of self life period before its expiry. Hence periodical monitoring will be done by the districts and CHCs to reshuffle the stock by taking back the unutilized PQ to make it available with ASHA/Village where it is required and will be utilized. Commodity Type: Decentralised Calculated annual requirement for PQ 2.5: 3691980 (To be Met out of State Specific Budget)
64.1.15.3	Primaquine Tablets 7.5 mg	Per Unit	1	0.00001		0.00	Ongoing Activity: Background: Around 74% of the state total cases are Pf malaria and the rest 26% of the cases are Pv malaria. Both the cases require primaquine for complete treatment. Further malaria cases of different age group require different strength of PQ(7.5 mg & 2.5 mg) as per national drug policy. To ensure that there is no stock out of PQ at village, the calculation is made for all 49990 ASHAs (both rural & urban) to ensure that each ASHA is having at least one strip of PQ with her at any point of time. As such PQ has two years of self life period before its expiry. Hence periodical monitoring will be done by the districts and CHCs to reshuffle the stock by taking back the unutilized PQ to make it available with ASHA/Village where it is required and will be utilized. Commodity Type: Decentralised Calculated annual requirement for PQ 7.5: 9039090 (To be Met out of State Specific Budget)
64.1.15.4	Quinine Sulphate Tablets	Per Unit	0.75	0.0000075		0.00	Ongoing Activity: Emergency stock for state to be stored at OSMCL. Commodity Type: Decentralised Calculated annual requirement: 8000 (To be Met out of State Specific Budget)
64.1.15.5	Quinine Injections	Per Unit	15	0.00015		0.00	Ongoing Activity: Emergency stock for state to be stored at OSMCL. Commodity Type: Decentralised Calculated annual requirement: 5000 (To be Met out of State Specific Budget)

Sl. No.	Scheme/ Activity	Approval 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
64.1.15.6	ACT & Inj.Artesunate	Lumpsum	33489527	334.89527		0.00	Ongoing Activity: • ACT & Inj. Artesunate : (Decentrised vide DO Letter No.10-3/2022-23/NCVBDC (P&S) Decentralised 8172929, dtd. 24.11.2025 of AD, NCVBDC Gol) 1. ACT Combipacks (Age wise): Detail calculation is as follows: o Total ACT: 744173 Combipack o 0-1 ACT: 70081 Combipack o 1-4 ACT: 126012 Combipack o 5-8 ACT: 141491 Combipack o 9-14 ACT: 153956 Combipack o Adult ACT: 252633 Combipack Budget Proposed: Rs.35/-Combipack x 744173 combipacks = Rs.260.46 lakhs 2. Inj. Artesunate: Total requirement : 4,65,217 vials X Rs.16/- per vial = Rs.74.43 Lakhs Total Budget: Rs. 334.90 Lakhs (To be Met out of State Specific Budget)
64.1.15.7	RDT Malaria – bi-valent (For Non Project states)	Per RDT	9	0.00009		0.00	Ongoing Activity: Kind Grant. Total requirement - 16046710 test kits out of which 75% kits will be supplied by Gol , budget for rest 25% kit is proposed (i.e. 4011678 kits) Budget Proposed: Procurement of RDT by State (25% contingency quantity of cash Grant) Total requirement - 4011678 No. of test kit Budget required: Rs.9/Test Kit x 4011678 kits= Rs. 361.05 Lakhs (To be Met out of State Specific Budget)
64.1.16	LLIN for Malaria Endemic Area						Background : Long-Lasting Insecticidal Nets (LLINs) have proven to be among the most successful vector control strategies. It is planned to saturate high endemic Districts/ Blocks of the state along with all tribal residential schools with LLINs following Universal coverage policy of the State to replenish previous provisions. In 2020, the NCVBDC (GOI) supplied 1.57 crore (15,727,741) LLINs to the state as a grant-in-kind. As these nets have a functional lifespan of three years, replenishment was due during the 2023-24 period. As there replenishment delayed , State procured 58 Lakhs LLINs during 2024 (Mfg- May-June 2024) and supplied to High burden districts, These LLINs will complete 3 years life span in May- June 2027.

Sl. No.	Scheme/ Activity	Approval 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
64.1.16.1	Procurement of LLINs	Per LLIN	192	0.00192	0	0.00	To ensure the strategic distribution of Long-Lasting Insecticidal Nets (LLINs), the following areas have been prioritized for saturation, based on their Annual Parasite Incidence (API): • All 1734 Subcenters of 8 Districts with a District API > 1. • All 321 Subcentres of 17 Blocks with an API > 1 (located within districts where the overall District API is < 1). • All 181 Sub-Centers (SC) with an API > 1 (located within blocks where the overall Block API is < 1). The total requirement for these high-risk areas is calculated at 73,63,428 LLINs. Out of state procurement 56,49,572 no of LLINs distributed in these areas in 2024. Consequently, for the 2026-27 fiscal year, the procurement of the remaining 17,13,856 LLINs is proposed. Detailed write up is at write up/ Justification Annexure Activity Shifted to OOC Head as per recommendation of NPCC
64.1.16.2	LLIN Distribution & Related Cost	Per LLIN	4.66	5E-05	0	0.00	A budget provision is required to cover the logistical costs of LLIN storage, transportation from District/Block storage points to the beneficiary level; household surveys and community sensitization conducted by ASHAs; and all associated handling and processing charges. Budget Approved: for Storage, Transportation, Handling & of LLIN @ Rs. 4.66/- per LLIN Budget Revised & Activity Shifted to OOC Head as per recommendation of NPCC • ASHA Incentive/ Honorarium for LLIN distribution @Rs. 10/- LLIN - Budget Proposed under HSS-17_ASHA Incentive_Sl.No. 202
64.2	Training / Capacity Building (Malaria)						Budget Proposed under HSS-16_Capacity Building Including Training_Sl.No.201
64.2.1	LQAS Related cost	Per Block	2000	0.02	8	0.16	Ongoing activity : Background: State has a sanction of 180 VBDTS for 314 Blocks. Hence one VBDTS is assigned with >1 Block. Low endemic coastal districts have only one VBDTSs to work for multiple Blocks (even more than 5) of the districts. Sanction of funds for LQAS per VBDTS will be inadequate to conduct LQAS in multiple Blocks. Hence sanction may be given per Block instead of per VBDTS. Funds for LQAS (for printing of formats etc) for 30 MTS/VBDTS of 314 Blocks @ Rs. 1000/- per block x twice a year Budget Proposed: @Rs. 2000/- per block Budget Shifted from HSS-11, Sl.No.196, as approved in RoP
64.2.2	Sub-national Disease Free Certification: Malaria	Per District	200000	2		0.00	Not Proposed
64.3	IEC/BCC for Malaria						Budget Proposed under HSS-19_IEC & Printing_Sl.No.204
64.3.1	IEC/ BCC Activities under Malaria						Budget Proposed under HSS-19_IEC & Printing_Sl.No.204
64.4	Printing of recording and reporting forms/registers for Malaria						Budget Proposed under HSS-19_IEC & Printing_Sl.No.204
64.5	Supply Chain Management cost under GFATM						Not Proposed
64.6	PPP / NGO and Intersectoral Convergence						Not Proposed

Sl. No.	Scheme/ Activity	Approval 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
64.7	Planning and M&E						
64.7.1	State Task Force, State Technical Advisory Committee meeting, District coordination meeting, Cross border meetings Sub National Malaria Elimination Certification process (Malaria)						Ongoing activity: 1. State Level Convergence Meeting Frequency : Half yearly 2. District Level Convergence Meeting Frequency : Quarterly Budget to be met out of pooled fund proposed under HSS-11_Technical Assistance_ SI.No.194 (Details at Write-up Annexure- Joint Review/ Convergence Meeting)
64.7.2	Review Meeting- GFATM						Ongoing Activity: GFATM Activity 1. Regional Review Meeting(RRM): 1.1 Travel & accommodation related claims for attending RRM for 8 existing positions @Rs. 26000/- per participant X 8 participants X 4 RRM= Rs.8.32 lakhs proposed per Year 2. State Review Meeting: Under GFATM SRM will be conducted every quarter. In one year 4 SRMs will be conducted at state level involving participation of the District VBD units along with the VBDTSs. Budget Proposed for: Quarterly State Review Meeting (SRM) : @2,50,000/- per quarterly SRM x 4 meetings= Rs. 10.00 Lakhs per Year Budget to be met out of fund proposed under HSS-11_Technical Assistance_ SI.No.194 (Details at Write-up Annexure- Joint Review/ Convergence Meeting)
64.7.3	Review Meeting- Non GFATM						Activities: Monitoring & Supportive Supervision- Utilise the pooled fund available at District/ Block Level Budget to be met out of Pooled fund placed at HSS-11_Technical Assistance_ SI.No.194
64.7.4	Monitoring & Supervision- GFATM						Mobility Support (Proposed as per GFATM Norm) 1.1 Block Level mobility support (POL) for 150 MTS/VBDTS of 19 GFATM districts : @Rs.2800/- per month
64.7.4.1	Block Level mobility support (POL) GFATM	Per MTS Per Month	2800	0.03	0	-	1.2 DA: to be met out of general pool budget: Monitoring & Supportive Supervision 2. Mobility support for strengthening Entomological surveillance - GFATM Budget: @Rs.50000/- Per unit Per Month
64.7.4.2	Mobility support for strengthening Entomological surveillance	Per Unit	50000	0.50	0	-	2. Annual Maintenance of Vehicles (Proposed as per GFATM Norm) 1. Annual Maintenance of Vehicles used by VBDTS of 19 GFATM Districts- GFATM Budget: @ Rs. 3000/- Per Annum for MTS
64.7.4.3	Annual Maintenance of Vehicles used by VBDTS of 19 GFATM Districts	Per Vehicle	3000	0.03	0	-	2. Annual Maintenance of Vehicles supplied under GFATM for entomological Zones for entomological zones Budget: @ Rs. 60000/- Per Unit Per Annum
64.7.4.4	Annual Maintenance of Vehicles supplied under GFATM for entomological Zones for entomological zones	Per Vehicle	60000	0.60	0	-	Monitoring & Supportive Supervision for Non-GFATM districts integrated with HSS-Rural/ Urban Budget Budget Shifted from HSS-11, SI.No.196, as approved in RoP

Sl. No.	Scheme/ Activity	Approval 2026-27					State Remarks
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					Quantity/ Target	Budget (Rs. Lakhs)	
64.7.5	Monitoring & Supervision- Non GFATM						Ongoing Activity: Mobility Support & Annual Maintenance of vehicles for 11 non GFATM districts are being supported under this component Budget to be met out of Pooled fund placed at HSS-11_Technical Assistance_ SI.No.194 (Details at Write-up Annexure)
64.7.6	Administrative Contingency Support						Ongoing Activity: Budget to be met out of Pooled fund placed at HSS-11_Technical Assistance_ SI.No.194 (Details at Write-up Annexure- Administrative Contingencies)
64.7.7	Support for Entomological Unit						1. Zonal Entomological Unit- (Approved 8, functional -7) Mobility support for strengthening Entomological surveillance - GFATM Budget: @Rs.50000/- Per unit Per Month (budgeted under Monitoring & Supervision- GFATM) 2. State Entomological Unit- Budget: @Rs.50000/- Per unit Per Month (budgeted under Monitoring & Supervision- GFATM)
64.8	Provision of IT equipments for VBDTS						New Activity: The NVBDP is gradually shifting from paper based reporting to real time online reporting. Under IHIP- different modules developed for reporting of VBD data. Apart from IHIP several Google sheets, ODK tools developed for reporting as per the need. There are 180 VBDTS posts in the state. During 2009 Laptops has been provided to the VBDTS which are need to be replaced for improved data management, reporting & analysis. Budget Proposed under HSS-18_IT Interventions and Systems_SI.No.203
65	Kala-azar					0.00	Case not reported in the state. Hence, no budget is proposed
65.1	Patient wage loss for VL and PKDL			0		0.00	
65.2	Kala-azar Case search/ Camp Approach: Mobility/POL/supervision			0		0.00	
65.3	ASHA incentive for VL, PKDL cases and ASHA incentive for IRS round during IRS			0		0.00	
65.4	Kala-azar: Operational cost for spray including spray wages			0		0.00	
65.5	Kala-azar: Training for spraying			0		0.00	
65.6	Spray Pumps & accessories			0		0.00	
65.7	Sub-national Disease Free Certification: Kala Azar			0		0.00	
65.8	IEC/BCC/Advocacy for Kala-azar			0		0.00	
65.9	Planning and M&E						
65.10	Monitoring & Evaluation (Kala Azar)			0		-	
66	AES/JE					0.45	
66.1	Acute Encephalitis Syndrome (AES)/ Japanese Encephalitis (JE): Rehabilitation Setup for selected endemic districts					0.00	Cases are managed at tertiary care hospitals that have all the required facilities and trained manpower. Hence not proposed.
66.2	ASHA Incentivization for sensitizing community for AES/JE					0.00	There is no such provision for ASHA in ASHA Incentivization for sensitizing community for AES/JE

Sl. No.	Scheme/ Activity	Approval 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
66.3	ASHA incentive for referral of AES/JE cases to the nearest CHC/DH/Medical College						Budget Proposed under HSS-17_ASHA Incentive_SI.No. 202
66.4	Acute Encephalitis Syndrome (AES)/ Japanese Encephalitis (JE): Operational costs for malathion fogging	Per District	45000	0.45	1	0.45	Ongoing Activity: Background: During Outbreak of JE or where there is more number of clinical cases of JE reported, outdoor thermal fogging needs to be conducted in that area at an interval of 7 days to knock down infective vector & to reduce the transmission. In Odisha, as JE cases are sporadic, to conduct thermal fogging in reported areas 30 days has been proposed to cover the focal outbreak and/or to cover the JE transmission season Proposal-1: Operational cost for malathion fogging (Cost for diluents and petrol): Rs. 30,000/- per District Proposal-2:Wages for spray men: Rs. 15,000/- per District
66.5	Establishment of pediatric ICU in endemic districts					0.00	Not Proposed
66.6	Fogging Machine					0.00	Not Proposed
66.7	Procurement of Insecticides (Technical Malathion)	Per Liter	1000	0.01	0	0.00	Ongoing Activity: (Reflected under the Budget for Procurement done by States) Malathion technical is used for thermal fogging in outdoors during the JE outbreak.
66.8	Payment to NIV towards JE kits at Head Quarter	Per kit	11150	0.1115	0	0.00	Background: Kind Grant to be supplied by Gol The sentinel site for JE has been increased from 10 to 15.One apex referral lab at RMRC, BBSR.For surveillance there is need of IgM ELISA Kits. Kits having expiry of 6 months. The kits are manufactured & supplied by NIV Pune based on the indent placed. Total kits required: 35 Kits • 2 kits / SSH & ARL = 32Kits • Buffer stock-3 Kits • Rs. 11,150/Kit x 35 Kits= Rs.3.9 Lakhs No budget proposed. Payment to be made by NCVBDC-Gol to NIV Pune. Budget Revised as per recommendation of NPCC
66.9	Capacity Building (AES/ JE)						Budget Proposed under HSS-16_Capacity building incl. training_SI.No.201
66.10	Operational Research - AES/ JE	Lumpsum		0		0.00	Implementing Agency: Operational Research cum intervention project on Epidemiological & Entomological factors of JE Outbreak by any ICMR Institute having expertise- ICMR to take up the activity out of its own fund.
66.11	Strengthening of Sentinel sites which will include Diagnostics and Case Management, supply of kits by Gol			0		0.00	Not proposed
66.12	IEC/BCC specific to J.E. in endemic areas						
66.12.1	IEC/ BCC Activities under AES/ JE						Budget Proposed under HSS-19_IEC & Printing_SI.No.204
66.12.2	Planning and M&E						
66.12.2.1	Monitoring and supervision (JE/ AE)			0		-	If required, cost towards monitoring & supervision will be met out of regular monitoring cost. (Budget Head HSS-11_Technical Assistance_ SI.No.194)
66.12.3	Printing						
66.12.3.1	Any other (Printing of AES case register)						Budget Proposed under HSS-19_IEC & Printing_SI.No.204

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		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
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67	Dengue & Chikungunya					8.09	
67.1	Dengue & Chikungunya: Case Management	Per Block	1000	0.01	8	0.08	Ongoing Activity: Background: Efficient case management requires proper and timely diagnosis. For dengue and Chikungunya, ELISA based diagnosis is the confirmatory method of diagnosis. This facility is available at 38 sentinel sites confined to DHHs, MCHs and RMRC. It is therefore necessary to send blood serum samples of suspected dengue/chk cases to the sentinel site laboratory. Proposal for FY 2026-27: 1. Serum transportation: Dengue has become perennial public health problem in Odisha. Dengue upsurges and outbreaks are reported from various parts of the state frequently last 5 years. It is an unpredictable disease in the state and having reported from various eco geographical settings and previously considered low risk areas. Prevention and control of dengue / chikungunya is possible only through timely diagnosis followed by control measures. Under such circumstances to ensure the timely diagnosis of suspected dengue/ chikungunya cases to the nearest SSL serum transportation cost is proposed. cost is proposed which is to be kept at district level, to be given to the serum transporter for ta/da etc. @ Rs. 1000/- per block 2. Case Management: Training on Clinical Management of dengue and chikungunya has been proposed under Management of DF/DHF/DSS for Dengue, Chikungunya(Medicine & Pediatric Specialist)
67.2	ASHA Incentive for Dengue & chikunguniya campaign (For five month during 5 Peak transmission season)						Budget Proposed under HSS-17_ASHA Incentive_Sl.No.202
67.3	Dengue & Chikungunya: Vector Control, environmental management	Per Volunteer	34650	0.3465	20	6.93	Ongoing Activity: Background: Intervention of Domestic Breeding Checkers(Dengue volunteers in Odisha) has been found beneficial in containing dengue in affected areas in minimum possible time. It is proposed to have dengue volunteer engaged for Source reduction and community sensitization activities. In 24-26PIP dengue volunteers engaged for 3 months @ 15 days a month @ Rs.280/Day. There is need to extend the activity for five months and the dengue volunteers to work for the 15 days a month. The wages to the volunteers will be paid as per the minimum daily wage for unskilled labor notified by labor department (Current wage:Rs.462). The dengue volunteers will be engaged in dengue vulnerable/ upsurge areas. They will visit door to door for management of breeding places of Aedes and IEC/IPC activities. They will be engaged for 5 months (during transmission season) & will work for 15 days in a month. The wages to the volunteers will be paid as per the minimum daily wage for unskilled labor notified by labor department. Total 1500 Dengue volunteers to be engaged. Proposal for FY 2026-27: @Rs 462/- per day per Dengue volunteer x 15 days a month x 5 month= Rs.34650/- per volunteer

Sl. No.	Scheme/ Activity	Approval 2026-27					State Remarks
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67.4	Dengue Ns1 antigen & IgM kit	Per Kit	3000	0.03	0	0.00	Ongoing Activity: Background: Dengue is reported in the state almost through out the year with higher case reporting in transmission months. With increased awareness in the community the no of tests increase each year. It is therefore required to keep the sentinel site laboratories in readiness to serve the emergency need of dengue diagnosis. Last Year Consumption:2690 Kits Proposal 1: Cash Grant Dengue NS1 kits are proposed basing on the following calculation: SCBMCH = 200 Kits; Capital Hospital = 300 Kits & Tertiary care Hospital @50 kits x 5 facilities= 250; other 34 Sentinel site laboratories @65 kits each= 2210 + Buffer-140 Total requirement for FY 2026-24: Rs. 3000 Per Kit x 3100 kits= Rs. 93.00 Lakhs- Activity Shifted to Diagnostic Head as per recommendation of NPCC Proposal 2: Kind Grant: To be supplied by GoI (Hence budget not included) Dengue IgM Kit to be supplied by Govt. of India through NIV Pune for ELISA based IGM Dengue & Chikungunya Test Kit in Kind Grant Requirement: Dengue IgM 150 kits, Chikungunya IgM: 20 kits (Total: 170 Kits) @ Rs. 11,150/- per kit = Rs. 18.96 Lakhs
67.5	Larvicides for vector control						
67.5.1	Bacillusthuringinensis-varisraelensis 5% AS (Strain ABIL-96)-as Bio-larvicide	Per ltr	1200	0.012	0	0.00	Ongoing Activity: Background: Larval source management can be done by application of larvicide. Bti, Temephos&Diflubezurion are recommended by NCVBDC. Activity- 1 Bacillus thuringinensis-varisraelensis 5% AS (Strain ABIL-96)(Accession No: NAMIMCC-B-01318)-as Bio-larvicide recommended by NCVBDC-Gol for larval control. This is Bio-larvicide useful in controlling mosquito larvae of Anopheles,Culex&Aedes. Bti is biodegradable and non-toxic to humans, animals, and plants, making it a safe choice for aquatic environments. This can be used both the polluted and clean water for larval control. Activity- 2 : Temephos 50% EC is used as larvicide for Aedes borne diseases. Activity- 3: Diflubenzuron is insect growth regulator (IGR) recommended by NCVBDC. Proposal for FY 2026-27: 1.Bacillusthuringinensis-varisraelensis 5% AS: Budget Requirement : Rs.1200/Ltr x 5000Ltr = 60 Lakhs 2.Temephos 50% EC: 100 Liter per district for 20 NFCP Unit Districts, 20 Liter per district for other 10 District ,1200 Ltrs per MCs for 2 MCs (Cuttack & BBSR) and 500 Ltrs for 3 other MCs Budget requirement : Rs. 700 per liter x 6100 Ltrs = Rs. 42.70 lakhs 3.Diflubenzuron: 1000 Kg for 5 Municipality Corporation (350 Kg for BMC, 350 Kg for CMC, 100 Kg each for Other municipalities) Budget Requirement : Rs. 1100 per Kg x 1000 Kgs = Rs. 11.00 lakhs Total Budget: Rs. 113.70 Lakhs
67.5.2	Temephos 50% EC	Per ltr	700	0.007	0	0.00	
67.5.3	Diflubenzuron	Per Kg	1100	0.011	0	0.00	

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					Quantity/ Target	Budget (Rs. Lakhs)	
67.6	Pyrethrum extract 2% for space spray	Per liter	1100	0.011	0	0.00	Ongoing Activity: Background For immediate reduction of vector density indoor space spray is recommended. Pyrethrum extract 2% approved by NCVBDC for this purpose. Proposal for FY 2026-27: Pyrethrum extract 2% for space spray will be used for fogging operations in 5 Municipality Corporations on regular basis and for the districts to prevent , control and manage VBD outbreaks.
67.7	Vector Control –Equipments- for application of Larvicides	Per unit	4200	0.042	2	0.08	New Activity: Background Around 1/3rd of mosquito (vector) life-cycle passes through aquatic stage in form of larvae and pupae in both clean and /or polluted water bodies. In response to control of such mosquito (vector) in terms of larvicide application, it is of paramount important to have appropriate vector tool- like Knap Sack sprayer for judicious application of larvicide during routine vector control and during outbreak period. Hence, for application of various kinds of larvicides (Bti-AS, Temephos, MLO etc) as per IVM, it is indeed essential to have such Knap Sack Sprayers. The old Knap sack sprayers that were supplied to districts needs to be replaced. So budget for 100 new Knap sack sprayers proposed. Proposal For FY 2026-27: Budget proposed for 100 Knap Sack sprayer @ Rs.4200/sprayer Activity Shifted to OOC head as per recommendation of NPCC
67.8	Training / Workshop (Dengue and Chikungunya)						Budget Proposed under HSS-16_Capacity Building Including Training_SI.No.201
67.9	Apex Referral Labs recurrent	Lumpsum	300000	3	0	0.00	Ongoing Activity: Funds proposed for RMRC, Bhubaneswar & AIIMS Bhubaneswar Budget Revised & Shifted to SRAE Head as per recommendation of NPCC
67.10	Sentinel surveillance Hospital recurrent	Per unit	100000	1	1	1.00	Ongoing Activity: State has 39 identified SSHs , accordingly budget @ Rs. 1.00 lakhs/ per unit is proposed for annual contingency grant. Budget Requirement: Rs. 1,00,000 per SSH x 39 SSHs = Rs. 39.00 Lakhs Budget Revised & Shifted to SRAE Head as per recommendation of NPCC
67.11	ELISA facility to Sentinel Surveillance Hospital/ Laboratories			0		0.00	Already provisioned under State Budget
67.12	IEC/BCC for Social mobilization (Dengue and Chikungunya)						
67.12.1	IEC/BCC Activities under Dengue and Chikungunya						Budget Proposed under HSS-19_IEC & Printing_SI.No.204
67.13	Planning and M&E						
67.13.1	Monitoring/supervision and Rapid response (Dengue and Chikungunya)					0.00	If required, cost towards monitoring & supervision will be met out of regular monitoring cost. (Budget Head HSS-11_Technical Assistance_ SI.No.194)
67.13.2	Epidemic preparedness (Dengue & Chikungunya)					0.00	If required, cost towards Epidemic preparedness (Dengue & Chikungunya) will be met out of regular monitoring cost.
68	Lymphatic Filariasis					18.36	Details in NVBDGP Write-up Annexure folder

Sl. No.	Scheme/ Activity	Approval 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
68.1	Morbidity Management Services						
68.1.1	Morbidity Management & Disability Prevention Kit	Per Case	500	0.005	2329	11.645	Ongoing Activity: Background: LF induced morbidity is irreversible causes of economic deprivation, disability and social stigma. Under such circumstances, it is paramount to alleviate the suffering of the patient through morbidity management. Hence, it is proposed for MMDP kit for all the reported morbidity cases of all 30 districts. MMDP kit worth Rs. 500/- will be procured for filaria Morbidity case for individual patient care. Each patient will be sensitized by HW/CHO before handing over the MMDP kit to the patient. Proposal for FY 2026-27: Budget Proposed: @ Rs. 500/- per case x 82136 cases
68.1.2	MMDP clinic singe with kit for demonstration	Per IU	2000	0.02	10	0.2	New Activity: As per the recommendation of EFL programme guideline of NCVBDC-Gol, one Morbidity management disability prevention clinic to be function at each IU level. A dedicated morbidity management clinic for lymphedema can: 1. Improve patient outcomes: Provide specialized care, reducing swelling, pain, and disability. 2. Enhance quality of life: Empower patients to manage their condition, promoting independence and well-being. 3. Reduce complications: Prevent infections, ulcers, and other secondary conditions. Budget: Rs. 2000 per IU x 498 IUs=Rs . 9.96 lakhs Details in NVBDGP Write-up Annexure folder
68.1.3	Hydrocelectomy	Per Case	750	0.0075	143	1.07	Ongoing Activity: Background: Morbidity management is one of the criteria for elimination of Lymphatic filariasis. Hydrocelectomy is one of the component of morbidity management services. Proposal for FY 2026-27: Budget Proposed @ 750/- per case x 6000 cases
68.2	Mass Drug Administration for ELF						Details in NVBDGP Write-up Annexure folder
68.2.1	Honorarium to Drug Administrator for Administration of Drugs						Budget Proposed under HSS-17_ASHA Incentive_SI.No.202
68.2.2	Honorarium to Supervisor	Per Supervisor	300	0.003	87	0.26	Ongoing Activity: Background: To monitor and supervise effective and desired drug administration, drug side reaction, management per 10 DA one super visor is proposed for MDA districts. Budget Proposed for FY 2026-27: Hon.to super visor @Rs.300/-per supervisor
68.2.3	Additional HR for Monitoring & Social Mobilization	Per District	1395000	13.95	0	0.00	New Activity: Background: The MSG has recommend to keep additional HR at district, Block, Panchayat and Village level. Additional HR for Monitoring & Social Mobilization: 10 District units(Calculated as 10IU =1 District and proposed @ Rs. 13.95/District as per Gol norm) N.B. The budget will be reallocated to the districts as per requirement basing upon the result of pre TAS/ NBS.

Sl. No.	Scheme/ Activity	Approval 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
68.2.4	Training on MDA/ELF						Budget Proposed under HSS-16_Capacity Building Including Training_Sl.No.201
68.2.5	Microfilaria Survey - Lymphatic Filariasis	Per Unit	15000	0.15	0	0.00	Ongoing Activity: Background: Night Blood Survey is a mandatory activity to check the transmission in the community. It is an important indicator to access the quality of previous round of MDA and the necessity of further round of MDA. This activity must be carried out prior to MDA in all the 134implementation units
68.2.6	Post MDA Coverage Evaluation Survey by medical colleges (Govt. & private)/ICMR institutions)	Per IU	35000	0.35	1	0.35	Ongoing Activity: Background: 98 IUs of 27 districts are proposed for MDA in continuation to this for Post MDA assessment by external agency such as medical college/ICMR Institutions are paramount important to identify and understand the actual coverage and compliance of MDA and to identify the gaps in the programme. Proposal for FY 2026-27: Rs. 35,000/- per district x 27 MDA districts
68.2.7	Printing of forms/registers for Lymphatic Filariasis/ MDA						Budget Proposed under HSS-19_IEC & Printing_Sl.No.204
68.2.8	Contingency support						
68.2.8.1	Contingency support						Ongoing Activity:
68.2.8.1.1	Contingency support for use of marker pen, chalk and formats	Per DA	75	0.00075	866	0.65	For ensuring maximum anti filaria drug compliance and supervision Odisha had done a pilot-based Endeavour of house marking and finger marking in MDA districts. This witnessed a great success in enhancing the drug compliance in the community. Since it was not a budgeted item, the same could not be implemented uniformly across all the MDA districts. Under such circumstances in the current PIP prevision for marker, chalk and printing of formats is proposed under contingency Rs. 75 per DA for use of marker pen, chalk and formats Proposal for 2026-27 Total 45018 DAs for of 98 IUs
68.2.8.1.2	Height based, collapsible colored dose pole (Ivermetin + DEC + Albendazole)(IDA)	Per DA	125	0.00125	866	1.08	(Ivermetin + DEC + Albendazole)(IDA) Studies in India and elsewhere have shown a great impact in reducing the mF load drastically in the endemic areas with few rounds of IDA and moved hastily to elimination phase. As the administration of IDA is based on height based, collapsible colored dose pole to be provisioned for IDA IUs (@ 1 Dosepole/DA) are proposed at the rate of 125 rupees per pole. Proposal for 2026-27 Budget required: Rs. 125 x 45018 DAs
68.2.9	ASHA incentive for one time line listing of Lymphoedema and Hydrocele cases in non-endemic dist.			0		0.00	Not proposed as the activity is already done in non-endemic districts in 2016.
68.2.10	MDA Drugs						
68.2.10.1	DEC 100 mg tablets			0		0.00	GoI to provide in kind. For Fy 2026-27: DEC requirement of the State: 25578383

Sl. No.	Scheme/ Activity	Approval 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
68.2.10.2	Albendazole 400 mg tablets			0		0.00	Gol to provide in kind. For Fy 2026-27: Albendazole requirement of the State: 10231353
68.2.10.3	Ivermectin 3mg			0		0.00	Gol to provide in kind. For Fy 2026-27: Ivermectin requirement of the State: 25578383
68.3	Training & Capacity Building (Lymphatic Filariasis)						Budget Proposed under HSS-16_Capacity Building Including Training_Sl.No.201
68.3.1	Sensitization of IMA/IAP						
68.4	Additional MF Survey	Per IU	15000	0.15	0	0.00	Ongoing Activity: Background: Pre TAS night blood survey is one of the criteria for elimination certification. Proposed for 125 Implementation Units (IUs)
68.5	FTS Survey						Ongoing Activity: Background:
68.5.1	For DA Evaluation unit	Per unit	150000	1.5	0	0.00	Under block strategy, TAS/IIS at community level is the crucial method for assessing the quality of the MDA & elimination certification. One Evaluation Unit (EU) per 5 lakh population .
68.5.2	For IDA Evaluation unit	Per unit	263000	2.63	0	0.00	
68.6	Post-MDA surveillance	Per District	70000	0.7	1	0.70	Ongoing Activity: Background: It is an important activity to access the MDA coverage by academic institutions such as medical colleges & RMRC. 9 districts under post MDA surveillance (Koraput, Kendrapada, Bodh, Puri, Malkangiri, Nabarangpur, Gajapati, Deogarh, Nuapada & Jagatsingpur) Proposal for FY 2026-27: Rs. 70,000/- Per District
68.7	Follow up of Mf positive cases	Per case	5000	0.05	18	0.90	New Activity: As per the guidelines, screening of 30-40households including the family members around each positive case to be conducted using NBS for identification of Mf positive patients. All positive patients identified during the activity must to be put on treatment and followed. This will be done as per the NBS guideline of the ELF principle. It is expected that around 250-300 slides will be collected through this activity, which is equal to the collection of slides from one site as per NBS strategy. Budget: • There is expected to be 800 mf/ FTS/QFAT positive cases • For One site, the budget proposed is Rs. 5000/- For 1000 cases (assumed that one case in one site), so the total budget will be 800 x Rs. 5000/- = Rs. 40.00 Lakhs Activity Shifted to SRAE Head as per recommendation of NPCC Details in NVBDP Write-up Annexure folder

Sl. No.	Scheme/ Activity	Approval 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
68.8	One time mapping of Post MDA surveillance	Per IU	15000	0.15	10	1.50	New Activity: Nine districts i.e. Boudh, Gajapati, Malkangiri, Deogarh, Jagatsinghpur, Koraput, Nawrangapur, Kendrapada and Puri have cleared TAS III and under post MDA surveillance. They have conducted the TAS as per old strategy i.e. district as whole as one Evaluation unit(EU), not as per block strategy. As per block strategy, one EU will be having maximum population of 5 lakh. In this regard, Gol is pressing hard to conduct one time mapping of post MDA surveillance i.e. all the IUs should have mf survey as per block strategy i.e. NBS to be collected from two sites from each IU. This will validate the clearance of mf load in those districts. This is a mandatory activity need to be conducted. Budget • Total IU – 97 • Per IU budget Rs. 15,000/- • Total budget 97x Rs. 15,000 = Rs. 14.55 lakh Details in NVBDCP Write-up Annexure folder
68.9	Procurement of point of care Test Kits (Rapid Test Kit) for Filaria	Per Kit	300	0.003		0.00	New Activity: There is point of care test kits recommended by NVBDC for use in detecting the filarial antigen positive cases. These kits are suitable for point-of-care testing due to their ease of use, rapid results (within 10-20 minutes), and minimal equipment requirements The Kit will be used for different transmission assessment surveys. Around 1, 60,000 Kits required for the year 2026-27 Fy. Budget Rs300 per kit x 1,60,000 Kits=Rs. 480.00 Lakhs (To be met out of WHO supply & remaining fund to be met out of State Budget)
68.10	Sub-national Disease Free Certification: Lymphatic Filariasis	Lumpsum	500000	5	0	0.00	Ongoing activity: Proposal for FY 2026-27: 1. Award 1: Rs. 5 lakh to the district for getting less than 1 MF rate in TAS 1 and stopping MDA - Nuapada District 2. Award 2: Rs. 5 lakh to the district for maintaining <1 MF rate for 3 and more consecutive years and clearing TAS2 (Not proposed) 3. Award 3: Rs. 50 Lakhs to the state for getting to <1% mf rate in TAS-3 and clearing of all hydrocele cases- Dropped Budget Revised as per recommendation of NPCC
68.11	Specific IEC/BCC for Lymphatic Filariasis at State, District, PHC, Sub-centre and village level including VHSC/GKs for community mobilization efforts to realize the desired drug compliance of 85% during MDA						Budget Proposed under HSS-19_IEC & Printing_Sl.No.204
68.12	Planning and M&E						

Sl. No.	Scheme/ Activity	Approval 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
68.12.1	State Task Force/ Convergence Meeting (Lymphatic Filariasis)						Ongoing activity: Activities to be taken up 1. State Level Convergence Meeting 2. District Level Convergence Meeting 3. Block Level Convergence Meeting Budget to be met out of pooled fund proposed under HSS-11_Technical Assistance_ SI.No.194 (Details at Write-up Annexure- Joint Review/ Convergence Meeting)
68.12.2	Monitoring & Supervision (Lymphatic Filariasis)						Activities: Monitoring & Supportive Supervision- Utilise the pooled fund available at District/ Block Level Budget to be met out of Pooled fund placed at HSS-11_Technical Assistance_ SI.No.194 (Details at Write-up Annexure)
	Grand Total NVBDGP					27.31	

NDCP-3_National Leprosy Eradication Programme (NLEP)

Sl. No.	Scheme/ Activity	Approval 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
	Total NLEP					4.22	Please refer to NLEP Write-up Annexure for performance status & Justification major/ new activities
69	Case detection and Management					2.83	
69.1.1	Specific -plan for High Endemic Districts (Block level) LCDC (Leprosy Case Detection Campaign- Rural					2.66	Ongoing Activity: Background: Plan-1: As per the Government of India National Strategic Plan (2023-27) guideline. LCDC will be conducted in High Priority Blocks having PR > 1. LCDC will be conducted once a year in 156 Blocks & 25 urban localities having PR > 1 from 25 districts by 24250 ASHA/FLW (As per report March 2025) Plan-2: Further it is proposed to conduct LCDC in the additional Blocks where G2D Cases have been detected in the year 2024-25 but PR < 1. Hence, LCDC will be conducted once a year in 11 Blocks of 7 districts having G2D Cases (As per report March 2025). Total Targeted District/ Block/ Population (Plan-A + Plan-B) No. of Districts: 25 No. of Blocks: 156 +11 (Total-167) Population to be covered: 2,15,74,573 + 16,92,168 (Total- 23266741) No. of ASHAs will be involved: 24250 + 1743 (Total-25993) Health Workers: 4850 + 350 (Total-5200) Budget proposed for 2nd round LCDC as per the recommendation in the NPCC Meeting Monitoring & supervision cost to be met out of pooled fund under HSS-11_Technical Assisatnt_Sl.No.194 Details of Justification is at NLEP Write-up Annexure
69.1.1.1	For 1st Round LCDC					1.42	
69.1.1.1.1	Training of DLO/DLC & MO IC	Per person	4000	0.04	0	0.00	
69.1.1.1.2	Incentive to FLW	Per FLW	1000	0.01	120	1.20	
69.1.1.1.3	Training to FLW & HW	Per person	100	0.001	144	0.14	
69.1.1.1.4	Advocacy / IEC activities during LCDC	Per block	4000	0.04	1	0.04	
69.1.1.1.5	Printing of Reporting Forms	Per FLW	30	0.0003	120	0.04	
69.1.1.2	For 2nd Round LCDC					1.24	
69.1.1.2.1	Incentive to FLW	Per FLW	1000	0.01	120	1.20	
69.1.1.2.2	Advocacy / IEC activities during LCDC	Per block	4000	0.04	0	0.00	
69.1.1.2.3	Printing of Reporting Forms	Per FLW	30	0.0003	120	0.04	
69.1.1.2.4	Monitoring & supervision cost						
69.1.2	Regular Surveillance by ASHA (ABSULS) for the entire population	Lumpsum				0.00	

Sl. No.	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		State Remarks
					Quantity/ Target	Budget (Rs. Lakhs)	
69.1.2.1	Printing of Survey Register	Per register	150	0.0015	0	0.00	For Monitoring, documentation & to ensure 100% suspect referral and confirmation by the MO, It is proposed to print the Survey Register, SC level ASHA – wise MPR pad& Referral slip. Budget proposed for 2026-27: Printing of Registers (used for 3 years) & Reporting Formats 1. Register @ Rs 150/- for 50,825 total Rs 75.00 Lakhs 2. SC level ASHA-wise MPR Reporting pad@ Rs 30/- per ASHA for 50,825, Total Rs 15.00 Lakhs 3. Referral Slip for ASHA @ Rs 30/- per ASHA for 50,825, total Rs 15.00 Lakhs. 4. Training of ASHA : Proposed under Carder Based Training 5. Award of Rs. 1000/- along with Certificate will be provided to the ASHA in a block during Anti-Leprosy Day, having the highest number of cases detected. It will boost the confidence and enthusiasm of ASHA on NLEP. (Non Budgeted Activity)
69.1.2.2	Referral Slip for ASHA	Per ASHA	30	0.0003	0	0.00	
69.1.2.3	Training of ASHA	Per ASHA	100	0.001		0.00	
69.1.2.4	SC level ASHA-wise MPR Reporting pad	Per ANM	75	0.00075	0	0.00	
69.1.2.5	Award to ASHA for highest case detection in her Block	Per Block	1000	0.01			
69.1.3	Focused Leprosy Mop up campaign in villages where new Grade 2 Disability (G2D) cases or Child cases detected	Lumpsum	1500	0.015	0	0.00	Ongoing Activity Background: As per NLEP mandate, the G2D % should be less than 2% among new cases. One of the ways to decrease G2D is early diagnosis of cases and complete treatment so that deformity can be prevented. A focused mop up for cases can be done in areas where G2D cases or child case are reported to find out any missing cases and break the transmission. To achieve the target, Mop up screening round will be conducted in the village population and slum/ peri urban areas where G2D cases are detected and any child case detected. Proposal: There are 106 G2D cases and 395 (5.4% of total new cases) child detected in our state in the year 2024-25. Approximately 501 (106+395) villages will be covered in the mop up round Budget proposed for FY 2026-27 i. Incentive to ASHA/FLW @ Rs.700/- per case ii. Camp cost, Mobility cost to 2nd member (HW/ BNLW/ block staffs) @ Rs 800/- per village
69.1.4	Suspects examination by MO after Campaign	lumpsum		0		0.00	Ongoing Activity: Budget not proposed
69.2	ASHA Incentives						Budget Proposed under HSS-17_ASHA Incentives_Sl.No.202
69.3	Equipment						Ongoing Activity: The requirement of RCS equipment is saturated Not proposed
69.4	Supportive drugs, lab. Reagents						No proposal for FY 26-27. To be met out of State Budget

Sl. No.	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		State Remarks
					Quantity/ Target	Budget (Rs. Lakhs)	
69.5	Any other drugs & supplies (Procurement of Rifampicin, Prednisolone and other NLEP drugs)	Lump Sum	17000	0.17	1	0.17	Ongoing Activity Background: Post Exposure Prophylaxis (PEP) with single dose of Rifampicin (SDR) is given to all contacts of all new cases to prevent spread of infection by M. Leprae. Approximately 20-30% of new cases may develop lepra reactions for management of these cases Prednisolone, Clofazimine & other NLEP drugs required. To improve coverage of post-exposure prophylaxis, as per WHO guidelines, it is proposed that 40 contacts per index case. Budget: 1. Proposed to implement Post Exposure Prophylaxis (PEP) @ Rs 10/- per contact for 3,00,000 contacts of 7000 index cases for procurement of Rifampicine (450 mg / 300 mg/ 100 mg/ Syrup) 2. Rs. 3000/- per districts for Clofazimine, Prednisolone & other NLEP drugs
69.6	Door step Suspect Validation by MOs in High Endemic Blocks	Per Block	10000	0.1	0	0.00	New Activity Some suspects have to be validated at the doorstep. During the campaign, as per the LCDC guidelines, we have provided Rs. 3000/- towards mobility support to the Blocks. It is not sufficient. There are 156 high endemic Blocks & 25 high endemic Urban areas (as per date 2024-25). The high endemecity has been calculated as PR > 1. Budget: Rs. 10,000/- per Block per Year for suspect validation (per visit @ Rs.200/- X expected 50 visits per block)
69.7	Support for implementation of NLEP						DPMR Clinic at UCHCs Recurring Cost @Rs.40,000/- per DPMR Clinic for Dressing Material, Medicine,Creams,Globes,Socks etc. Funded through State Budget
70	DPMR Services: Reconstructive surgeries					1.39	
70.1	Support to govt. institutions for RCS	Per Case	5000	0.05	0	0.00	Ongoing Activity Background: Reconstructive surgery (RCS) of eligible and fit cases are conducted free of cost in all District Head Quarter Hospitals. Provision made for procurement of drugs & consumables which are not available in NIRAMAYA during RCS. Progress: 99 Reconstructive surgeries have been conducted in the year 2024-25. There are no backlog of RCS till date in Odisha. Proposal: RCS will be conducted of 75 fit & willing cases for the year 2026-27. Budget proposed for FY 2026-27: @ Rs 5,000/- per case

Sl. No.	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		State Remarks
					Quantity/ Target	Budget (Rs. Lakhs)	
70.2	Welfare allowance to patients for RCS	Per Case	12000	0.12	1	0.12	Ongoing Activity Background: Reconstructive surgery (RCS) of eligible and fit cases are conducted free of cost in all District Head Quarter Hospitals. Rs 12,000/- will be paid as welfare allowance to the patients undergoing RCS in three phases. Rs 1500/- per case will be provided towards Travel cost (To and fro journey) to the person going for Reconstructive Surgery. Budget proposed for FY 2026-27 Proposed cost norm per case: Rs.12000/- (Rs. 8000/- at the time of discharge & Rs. 4000/- at the time of follow up) Travel cost to RCS patients: @1500/- per case- Dropped as per recommendation of NPCC Targeted RCS cases at Govt. institutions: 75 Nos.
70.3	DPMR: At camps			-		-	Not Proposed
70.4	MCR	Per Pair	500	0.005	100	0.50	Ongoing Activity with revised unit cost Background: MCR Footwear (Grade I & Grade II) will be provided two times in a year to the patients who have ulcers in foot and who need it in weekly DPMR clinic Budget proposed for FY 2026-27 The unit cost of the MCR footwear was Rs 400/- per pair which is very difficult to procure. So Rs 500/- per pair (as per market rate) is proposed for procurement of MCR footwear's
70.5	Aids/Appliance(Ulcer Kit)	Lumpsum	32000	0.32	1	0.32	Ongoing Activity Background: Gol approved Rs 500/- per kit for DPMR like Lymphoedema case under Morbidity Management & Disability Prevention (MMDP) Similar kit (Self Care ulcer kit) instead of ulcer kit is proposed to provide to the leprosy ulcer patients for regular dressing and ulcer care. Proposal: A) One time Cost per Year 1. Plastic Tub (Minimum 30 ltr volume and one ft height) 2. Plastic Mug (Minimum one ltr capacity) 3. Cotton towel (Minimum 1.5 ft x 1.5 ft) (two nos) Total Non Recurring Cost (approx) Rs.350/- B) Two times cost per year 1. Moisturizing cream / oil (Vaseline) 50gm, Foot Scraper (6 cm x 4 cm scrapping surface) and other drugs if required and not available in NIRAMAYA. Total Recurring Cost: (appx): Rs.150/- Total Ulcer Cases line listed: Approx 3810 as on March 2025 Budget for 4000 Ulcer cases. Budget proposed for FY 2026-27 A. One time Cost per year: Rs. 350/- Per Cases = Rs.14.00 lakhs B. Two times cost per year: Rs. 150/- Per Cases X 2 times
70.6	ASHA Incentive for referral of Reconstructive Surgery (RCS)						Budget Proposed under HSS-17_ASHA Incentives_SI.No.202

Sl. No.	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		State Remarks
					Quantity/ Target	Budget (Rs. Lakhs)	
70.7	RCS Camp Cost	Per Camp	5000	0.05	0	0.00	Ongoing Activity: Background: NLEP mandate is there should be zero backlog of RCS cases. The RCS conducted in camp mode around 4 to 5 cases operated in a camp. TA/DA, accommodation will be provided to the operating surgeon for RCS, the physiotherapist / Asst. accompanying him for assistance. Progress: The State has completed 99 RCS cases (2024-25) in different districts of eligible and willing cases. RCS Surgery will be conducted in Camp mode. Budget proposed for FY 2026-27 TA/DA and accommodation cost of RCS Surgeon, assisting person & Miscellaneous expenses and refreshment cost@ Rs 5,000/- per camp.
70.8	Operational cost of existing DPMR clinics at DHH, SDH, CHC level.	Lumpsum	5000	0.05	9	0.45	Ongoing Activity: Background: Services like dressing of Ulcer, physiotherapy, medicines, MCR footwear etc. are provided in the DPMR clinics. Rs 5,000/- per year as operational cost of DPMR Clinics in CHC, SDH & DHH like logistics, repair of furniture and display of self care IEC materials etc. Budget proposed for FY 2026-27: @ Rs. 5000/- per unit is proposed for public health institutions (Block CHC + SDH + DHH+ UCHC)
70.9	Impact assessment for RCS Beneficiaries	Per case		0		0.00	New Activity: Reconstructive surgery (RCS) of eligible and fit cases are conducted free of cost in all District Head Quarter Hospitals to bring the leprosy affected persons in main stream and improve socioeconomic condition. To know the impact of RCS, at least assessment of 100 RCS Beneficiaries per year. Team constituted with RCS Surgeon & PT will assess the operated cases to know the impact of RCS. Non-budgetary (WHO to take up)
71	District Awards						Not Proposed
72	Other NLEP Components					0.00	
72.1	Capacity building under NLEP						Budget Proposed under HSS-16_Capacity building incl. training_Sl.No.201
72.2	IEC Activities under NLEP						Budget Proposed under HSS-19_ IEC & Printing_Sl.No.204
72.3	Printing works						Budget Proposed under HSS-19_ IEC & Printing_Sl.No.204
72.4	NGO - Scheme						Ongoing activity Budget dropped
72.5	Planning and M&E						Activities: 1. Review Meetings: 1.1. State Level Half yearly Review Meeting: Proposed 1.2.District Level Review meetings -Integrated District Level Monthly Meeting 2. Monitoring & Supportive Supervision- Utilise the pooled fund available at State/ District/ Block/ Sector Level 3. Administrative Contingencies for PMUs- Utilise the pooled fund available at State/ District/ Block Level Budget to be met out of Pooled fund placed at HSS-11_Technical Assistance_ Sl.No.194 (Details at Write-up Annexure)
	Total NLEP					4.22	

NDCP-4_National Tuberculosis Elimination Programme (NTEP)

Sl. No.	Scheme/ Activity	Approval 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
	Total NTEP					127.63	
73	Drug Sensitive TB (DSTB)					17.01	
73.1	Treatment Supporter Honorarium for DS-TB Patients & Patients with INH resistance	Per patient	1000	0.01	51	0.51	Total target for TB Notification in 2026-27 is 62000 (61350 for DSTB + 650 for DRTB) Incentive proposed as per the CTD guideline following D. O. No. z-28015/24/2017-TB dated 09-07-2019 Total estimated DSTB & INH Reg. Cases- 61350 As per the reported data 90% treatment supporter are ASHAs & rest, 10% are belongs to TB Champions, Family Members & Community Volunteers. Hence, Budget for 90% cases are placed under HSS-17 ASHA Incentives SI.No.202.
73.2	Tribal Incentives	No. of patients	750	0.01	0	0.00	Ongoing Activity Approval for 123 notified Tribal Blocks @Rs. 750/- to cover travel cost of patients and attendant across 13 districts (Baleswar, Gajapati, Kalahandi, Kandhamal, Keonjhar, Koraput, Malkangiri, Mayurbhanj, Nabarangpur, Rayagada, Sambalpur, Sundargarh and Debagarh).
73.3	Infrastructure-Civil Works (Refurbishment/ Up gradation)	Lumpsum	0	0		0.00	No proposed 2026-27
73.4	Procurement of Equipment/ Instruments & Furnitures						
73.4.1	Procurement for DTCs	Per Kit	250	0.00	266	0.67	Ongoing Activity Proposal: Procurement of Airborne Infection Control (AIC) kits Budget proposed 2026-27: @Rs.200/- per kit per case for Pulmonary cases & DRTB Cases (70% of Target Notification)
73.5	Equipment Maintenance & Management (Equipment/ Instruments)	Per Unit		0.00		0.00	All equipment instruments installed across the state at public health facilities shall be managed under BMEMP. Hence, no additional budget proposed.
73.6	Equipment Maintenance & Management (Office)						
73.6.1	Maintenance of Office Equipment at STC	Per unit/ Per Annum	75000	0.75	0	0.00	Ongoing Activity: Head of expenses: Maintenance of Office Equipment includes: (Repair and maintenance, AMC/CMC, Cartridges for printers, Internet expenses etc)
73.6.2	Maintenance of Office Equipment STDC,IRL	Per unit/ Per Annum	150000	1.5	0	0.00	1. State Level: 1.1. Maintenance of Office Equipment at STC: Rs. 0.75 Lakhs per annum (proposed as approved last year)
73.6.3	Maintenance of Office Equipment at State Drug Store	Per unit/ Per Annum	25000	0.25	0	0.00	1.2 Maintenance of Office Equipment STDC,IRL: Rs.1.50 lakhs per annum (Amount approved last year Rs. 50,000/-, proposed as per actual expenditure in previous year) 1.3 Maintenance of Office Equipment at State Drug Store: Rs.0.25 lakhs per annum (proposed as approved last year)
73.6.4	Maintenance of Office Equipment of C&DST Lab, VIMSAR Burla	Per unit/ Per Annum	75000	0.75	0	0.00	1.4 Maintenance of Office Equipment at C&DST Lab, VIMSAR Burla: Rs. 0.75 lakhs per annum (New activity)
73.6.5	Maintenance of Office Equipment of DTC	Per unit/ Per Annum	40000	0.4	1	0.40	2. District Level: Maintenance of Office Equipment of DTC, @ Rs. 40,000/- per DTC per annum (Proposed as approved last year).

Sl. No.	Scheme/ Activity	Approval 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
73.7	Procurement of Drugs & Other Essentials						
73.7.1	Procurement of Energy Dense Nutritional Supplement for under-weight TB patients at time of diagnosis	Per Sachet	20	0.00	0	0.00	New Activity: Justification: As per D.O letter from GOI D.O No. T-18011/09/23-TB dated 07.10.2024, Energy Dense Nutritional Supplement (EDNS) will be provided to underweight TB patients (BMI less than 18.5 kg/m2) at the time of diagnosis for first two months of treatment. These 2 sachets of EDNS will be provided daily for 60 days. This will enable TB patients to gain weight rapidly and subsequently improved treatment outcome. Around 60% of the TB patients in Odisha have BMI less than 18.5 kg/m2 at the time of diagnosis. It is assumed that around 36000 (60% of 60000 TB patients) patients will require EDNS. Total number of EDNS sachets required per year = 36000 x 2 x 60 = 4320000 Cost per sachet = Rs. 20/- Per Sachet Budget proposed: 80% as it is a new activity
73.7.2	Procurement of First Line Drugs	Lumpsum	12000000	120.00	0	0.00	Ongoing Activity Emergency procurement of drugs in case short supply from Gol Justification: There is interrupted supply of the drugs from the Central TB Division (CTD) since last few years. This is hampering patient care. To ensure uninterrupted supply of drugs to all the patients throughout the year and as suggested by CTD, 10% of the annual requirement of the drugs shall be procured by the State. 1st line Drugs for DSTB, lumsum amount: for 2026-27 =Rs.120 Lakhs Implementing Agency : OSMCL, Bhubaneswar Details is at NTEP Write-up_ Annexure-1 Last year drugs budget approved under this head is Rs. 299.48 Lakhs per year.
73.7.3	Drug Transportation Cost (State/ District)	Lumpsum	93840	0.94	1	0.94	Ongoing Activity 1. State to District : Budget proposed for transportation of drugs from State Drug Store (Cost of packaging & transportation etc. included) to District Warehouse and DTA (Rs. 200000/-) to other States as per instructions from Gol. Budget: Rs.23.76 lakhs + Rs. 2.00 lakhs= Rs.25.76 lakhs 2. Transportation charges from District Drug Store to periphery level (TUs & PHIs) @ 6000 /- per Annum per TUs.
73.8	DMC- Lab Materials and Consumables						Ongoing Activity As proposed by State, 90% of total test to be conducted by upfront NAAT & rest 10% by microscopy Lab Consumables requirement for DMCs for Smear Microscopy and Fluorescent Microscopy: Fund to be met out of NIDAN/ XVI-FC
73.9	Supply Chain Management: Diagnostic Consumables & Sample Transportation						
73.9.1	Sputum collection and transportation : (Within the District)	Per SC/ Per Week	175	0.00175	189	13.8	Ongoing Activity Modalities: From this year onwards, State shall engage an agency which will manage supply chain management system including sputum and other non-sputum collection & transportation. Budget: No. of SCs X sample collection for 1day per week X 52 weeks X Rs.175/- (@Rs.150/- for less than 10 KM & @Rs.200/-more than 10 KM) Budget Proposed: 80% as procurement may take time as it is a new activity

Sl. No.	Scheme/ Activity	Approval 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
73.9.2	Sputum collection and transportation: (Outside the District)	Per Visit	1000	0.01	52	0.52	Ongoing Activity Modalities will be same as mentioned above. Samples to be send to reference lab (IRL/ NRL/ CDST Burla) on real time basis. Budget : Per Districts X 52 Weeks X once per week X Rs.1,000/- Max per visit
73.1	Incentive fro community volunteers undertaking ACF						Not Proposed
73.11	Sub-National Disease Free Certification: Tuberculosis	Per district	200000	2.00	0	0.00	Ongoing Activity: To claim the sub national disease free certification the districts are nominated based on indicators of 1. Nos. needed to Test (NNT) - Min-20% increase in comparison to 2015 Baseline Data. 2. TB Score - Min. 80% 3. Drug Consumption & Drugs Sale in Public & Pvt. sector - Decrease by 20% in comparison to 2015 Baseline Data. State is proposing 04 Nos. of districts to claim Bronze certification in the Year 2026-27. Proposed in 2026-27 : 04 districts (to be decided based on prerequisites during Claim submission)
73.12	Medical Colleges Operational Research & Engagement						
73.12.1	Operational Research Workshop for Medical Colleges	Per workshop	123000	1.23	0	0.00	Ongoing Activity: Operational research is one of the key component in NTEP towards development of strategic plans towards TB elimination. So, it has been decided by the STF chair and STO to conduct one operational research workshop with involvement of at least one medical college staff from each medical colleges to review and discuss research activities conducted at the medical colleges. One day Operational Research workshop shall be conducted in one of the Medical College once in a year. Venue for the workshop will be provided by the medical college. Budget proposed for 2026-27: 1 batch @ Rs. 60000/-per batch 1.Travel cost for 20 participants & 10 Experts @ Rs. 2000/- per participant (Total Rs. 60000/- (The travel cost will be reimbursed on production of tickets by public transport) 2. DA for participant: @Rs.600/- per person X 30 participant =Rs. 18000/- 3. Refreshment, Lunch for 30 participants @ Rs 350/- per person (Total Rs. 10500/-) 4. Workshop Kit: @Rs.250/- per kit X 30 = Rs.7500/- 5. Accommodation: @1200/- per participant X 20 participant = Rs.24000/- 6. Overhead Expenses: Rs.3000/-
73.12.2	Operational Research	No of Research	200000	2.00	0	0.00	Ongoing Activity: Research activities by MCHs/ Research institutes will play pivotal role for planning of different strategies towards TB elimination activities by 2025.
73.12.3	Thesis / Studies	No. of thesis	30000	0.30	0	0.00	Ongoing Activity Financial support to PG Student in in Govt. & Pvt. MCHs for preparation of Thesis on subject on TB Budget for 2026-27: @ Rs. 30000/- per thesis per MCH x 9 MC&H= Rs. 2.70 Lakhs Coverage (9 Medical colleges having PG seats i.e. SCB, MKCG, VIMSAR, AIIMS, PGIMER, PRM MCH Baripada, IMS & SUM, KIIMS, Hi-Tech BBS)

Sl. No.	Scheme/ Activity	Approval 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
73.12.4	Core Committee Meeting at MCH Level	Per meeting	3000	0.03	0	0.00	Ongoing Activity Approved Medical College both Govt & private: 1. SCB MCH, 2. MKCG MCH, 3. VSS MCH, 4. SLN MCH Koraput, 5. PRM Mayurbhanj, 6. BB MCH, Bolangir, 7. FM MCH Balasore, 8. AIIMS, Bhubaneswar, 9. SUM Bhubaneswar, 10.KIIMS BBSR, 11. Hi-Tech MCH, BBSR, 12. SJMCH, Puri, 13. DDMCH Keonjhar, 14. GMC sundargarh, 15. PGIMER BBSR, 16. SRM MCH Kalahandi, 17. Hi-Tech MCH Rourkela 18. MJK MCH Jajapur, 19. PMP MCH Angul & 20. Kandhamal Medical College Budget Proposed for 2026-27: Rs. 3000/- per meeting per Quarter x 20 Medical colleges = Rs.2.40 Lakhs per year
73.12.5	Organisation / Participation at NTF, ZTF, STF meetings	Lumpsum	280000	2.80	0	0.00	Proposal-1: Participation Cost Ongoing Activity : 5 members x 2 nos (ZTF & NTF) of task force to attend ZTF and NTF meeting. Budget to be kept at STC. Proposed Budget for 2026-27: @Rs. 0.20 Lakhs x 5 members from MCHs x 2 meetings (NTF & ZTF) = Rs. 2.00 lakhs Proposal-2: Organisation Cost for STF Proposed as per last year approval. STF meeting done in quarterly basis as per Gol Norm. Proposed Budget: Rs.0.20 lakh x 4 Nos = Rs.0.80 lakh
73.12.6	Technical Support to MCHs by STF Chair and Vice-Chair	Per vist	20000	0.2	0	0.00	Ongoing Activity STF chair and Vice chair will visit to Medical colleges for monitoring to increase contribution of Medical colleges in various NTEP activities. STF chair and vice-chair shall visit one medical college in each quarter to assess and improve the performance in NTEP activities. Budget Proposed for 2026-2027: 8 x Rs 20000/- per visit (2 days) for travel (hired vehicle) and accommodation.
73.12.7	CME for Faculty Members	30 Per Batch	15000	0.15	0	0.00	Ongoing Activity Sensitization of Faculty Members of Medical colleges: Duration of the training 1 day Batch size: 30 per batch Total batch Proposed : 20 (one per MCH) @ Rs.0.32 lakh per batch 1. SCB MCH, 2. MKCG MCH, 3. VSS MCH, 4. SLN MCH Koraput, 5. PRM Mayurbhanj, 6. BB MCH, Bolangir, 7. FM MCH Balasore, 8. AIIMS, Bhubaneswar, 9. SUM Bhubaneswar, 10.KIIMS BBSR, 11. Hi-Tech MCH, BBSR, 12. SJMCH, Puri, 13. DDMCH Keonjhar, 14. GMC sundargarh, 15. PGIMER BBSR, 16. SRM MCH Kalahandi, 17. Hi-Tech MCH Rourkela 18. MJK MCH Jajapur, 19. PMP MCH Angul & 20. Kandhamal Medical College

Sl. No.	Scheme/ Activity	Approval 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
73.12.8	CME for Residents & Interns	50 Per Batch	30000	0.30	0	0.00	Ongoing Activity Sensitization of Residents & Interns on RNTCP: Duration of the training 1 day Batch size: 50 per batch (43 batches to be trained =2150 participants to be trained - 450 participants from SCB, MKCG & VSS and rest 1700 from rest all 17 MCH including PGIMER BBSR) Total batch proposed : 43 (3 per annum for SCB, MKCG & VSS and 2 per annum for rest 17 MCH including PGIMER BBSR) per MCH) @ Rs.0.20 lakh per batch 1. SCB MCH, 2. MKCG MCH, 3. VSS MCH, 4. SLN MCH Koraput, 5. PRM Mayurbhanj, 6. BB MCH, Bolangir, 7. FM MCH Balasore, 8. AIIMS, Bhubaneswar, 9. SUM Bhubaneswar, 10.KIIMS BBSR, 11. Hi-Tech MCH, BBSR, 12. SJMCH, Puri, 13. DDMCH Keonjhar, 14. GMC sundargarh, 15. PGIMER BBSR, 16. SRM MCH Kalahandi, 17. Hi-Tech MCH Rourkela, 18. MJK MCH Jajapur, 19. PMP MCH Angul & 20. Kandhamal Medical College
73.12.9	CME of Private Practitioners	30 Per Batch	15000	0.15	0	0.00	Ongoing Activity Sensitization of Private Practitioners on NTEP: Duration of the training 1 day Batch size: 30 per batch Total batch Proposed : 20 (one per MCH) @ Rs.0.30 lakh per batch 1. SCB MCH, 2. MKCG MCH, 3. VSS MCH, 4. SLN MCH Koraput, 5. PRM Mayurbhanj, 6. BB MCH, Bolangir, 7. FM MCH Balasore, 8. AIIMS, Bhubaneswar, 9. SUM Bhubaneswar, 10.KIIMS BBSR, 11. Hi-Tech MCH, BBSR, 12. SJMCH, Puri, 13. DDMCH Keonjhar, 14. GMC sundargarh, 15. PGIMER BBSR, 16. SRM MCH Kalahandi, 17. Hi-Tech MCH Rourkela 18. MJK MCH Jajapur, 19. PMP MCH Angul & 20. Kandhamal Medical College
73.12.10	Support for Conferences, Symposiums, Panel discussions and Workshops organized at National and state levels and at level of Medical college	Per Activity		0		0.00	Ongoing Activity To be met out of HSS head.
73.13	Death Audit of TB Patient	Lumpsum	22000	0.22	1	0.22	Proposal: TB Death Audit Mortality reduction is one of the major indicators of TB elimination goals. In Odisha, 4% of the TB patients diagnosed in the year 2024 died which was higher than national average. TB mortality in Odisha in 2024 was 19 per lakh population and the elimination target is to achieve 3 per lakh population. TB death audit aimed to ascertain the cause of death and determinants of deaths and take necessary actions to prevent such deaths in future. Estimated 2500 TB deaths is occurring every year. Budget Proposal: 1. Community based TB death review @ Rs. 500/- per case (towards refreshment and printing) 2. Quarterly TB death review at TU: No. of TUs x 4 Qtr x @Rs. 250/- 3. TB death review by District Magistrate (at least 2 TB deaths to be reviewed in every six month) = @Rs. 2000/- per review 4. TB death review by state (at least once in every six month) = Budget not proposed 5. Capacity building = To be done along with Differentiated TB Care training

Sl. No.	Scheme/ Activity	Approval 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
73.14	Capacity Building Including Training						Budget Proposed under HSS-16_Capacity Building Training_SI.No.201
73.15	ASHA Incentive for referral of TB Cases (for Negative Cases)						Budget Proposed under HSS-17_ASHA Incentives_SI.No.202
73.16	Printing						Budget Proposed under HSS-19_IEC & Printing_SI.No.204
74	Nikshay Poshan Yojana					28.34	Status: Total Estimated TB Notification is 62000. Of which 61350 are DSTB & 650 are DRTB
74.1	NPY for DSTB Patients	No. of TB patients notified	6000	0.06	507	27.38	Ongoing Activity with revised unit cost Status of payment FY 2025-26: 94% Status of payment FY 2026-27 (up to Jan 2026): 86% Hence proposed 90% of total estimated budget
74.2	NPY for Drug Resistant TB Patients	No. of DR-TB patients notified	12000	0.12	8	0.96	Ongoing Activity with revised unit cost
74.3	Incentive to ASHAs or Community Volunteers for Seeding of bank account details of TB patients in Ni-kshay portal for enabling DBT Payments						Budget Proposed under HSS-17_ASHA Incentives_SI.No.202
75	PPP					73.13	
75.1	Private Provider Incentive	Per patient	1000	0.01	70	0.70	Ongoing Activity Provider's Incentives for notification of TB patients and reporting treatment outcome to private practioners (PP), pharmacies, patients & any other informers Justification: Unit cost proposed as per the last years approval Provider's Incentives for notification of TB patients and reporting treatment outcome to private practioners (PP), pharmacies, patients & any other informers@ Rs. 1000/- per patient (100% of annual target from pvt. sector)
75.2	Incentive for Notification of TB patients by any Informant (Positive cases)	Per Case	500	0.005	62	0.31	Nature of Activity: Ongoing Target 2026-27 : Targeted notified patients as per NIKSHAY is 62000 cases. of which 53000 from public sector & rest in private Sector (PPSA-8000 + Other 1000). For all diagnosed patients from public sector, informant incentive of Rs 500/- will be generated in Ni-kshay. Eligible Cases for Informant Incentive: 53000 (20% of them are expected to be informed by Volunteer/ Self i.e. 10600) Unit Cost: Incentive proposed @ Rs. 500/- per case as per CTD norms and basis of costing Incentive proposed vide D. O. No. z-28015/36/2017-TB (Pt-IV) dated 11-01-2019.
75.3	PP/NGO Support						As per the new NTEP strategy, State is now focusing on X-ray as screening tool for all asymptomatic vulnerable populations to add on diagnosis of missing TB cases in the community. To enhance the activity Districts are empanelling private agencies/facilities for conducting X-ray of vulnerable population for TB screening at the cost per unit not exceeding Rs 250/- per X-ray using any models/modalities. CTD will provide 90 HH X-rays in 3 tranches. Total Vulnerable population mapped = 72 Lakhs

Sl. No.	Scheme/ Activity	Approval 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
75.3.1	Service Contract with Private Agency/ Organisation for Operationalization of Hand-Held X-Rays	Per X-Ray	50	0.0005	83200	41.60	Detailed Modalities is at Write-up annexure Budget Calculation: The total budget is proposed as an output-based budgeting model. The handheld X-ray machines shall be used in outsourced models. The out-sourcing agency will operate the HH X-rays available in the districts at a cost of Rs. 50/- per X-ray. Around 208 screening camps (52 weeks x 4 camps in a week) days per machine in a year is expected considering Sundays and holidays. Total Number of HH X-ray machines = 179 Around 100 X-rays will be conducted by each machine per day. Total number of X-rays to be conducted = 208 x 179 x 100 = 37,23,200 Total Budget requirement = Rs.50/- x 37,23,200 = Rs 1861.60 lakhs Budget Revised as per the discussion in the NPCC Meeting
75.3.2	Hiring of Private X-Ray Services	Per case	250	0.0025	12207	30.52	Hiring Private X-Ray Services for 4 months Justification: As per Newer NTEP Strategy 72 lakhs vulnerable population need to be screened by X-Ray to detect missing cases in the community. Considering the capacity of X-ray services in the public sector &utilization of handheld X-ray machines supplied by CTD, in order to provide screening services to the vulnerable population an estimated about 8% may be covered by X-ray facilities from private sector. Budget: Hiring of Private X-Ray Services: The operationalization of the Handheld X-ray machine is a cumbersome process. As of now state has received 31 machines and 3 more machines are available from CSR fund. State may receive remaining machines from Gol and ONGC by the end of May. Considering the substantial time required for installation, QA and operational licensing, this may take around 4 months to operationalize the machines. For a interim measure and to continue X-ray services, the budget for hiring of private X-ray is proposed for the initial 4 months till the machines are operational. Budget is proposed for 5 lakhs X-rays from private X-ray. Fund Requirement = Rs. 250/- per case Budget Revised as per the discussion in the NPCC Meeting
75.4	Public Private Support Agency (PPSA)	Per case	3000	0.03	0	0.00	Ongoing Activity 08 NTEP Districts are : Ganjam, Khurda, Bhubaneswar MC, Cuttack, Mayurbhanj, Balasore, Sambalpur, Sundargarh. Modality of implementation: PPP mode Target - 8000 patients Present Status: Agencies has given PPSA contract 1. WHP- (Ganjam, Khordha, Bhubaneswar MC, Cuttack) 2. DFY- (Mayurbhanj ,Balasore, Sambalpur & Sundargarh).
75.5	Convergence Meetings						Ongoing Activity The NTEP activities at the intersectoral level shall be reviewed by the Chairmanship of the District Magistrate in annually per district. 1 Convergence meetings with line department & industries Budget to be met out of pooled funds HSS-11_Technical Assistance_ SI.No.194 (Details at Write-up Annexure- Joint Reviews/ Convergence Meeting)

Sl. No.	Scheme/ Activity	Approval 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
76	Latent TB Infection (LTBI)					0.17	
76.1	Diagnosis and Management under TB Infection Management (PMTPT)						Background: As per PMTPT guideline, in children HHC >5 years and adults, chest X ray and TBI testing would be offered wherever available. All efforts need to be made to ensure that CXR and TBI testing is made available. However, TPT must not be deferred in their absence. As of now, TPT services are expanded to HHC >5 years and adults & other risk group individuals.
76.1.1	Incentive to ASHA/ Community Health Volunteer for supporting treatment adherence and completion of TB Preventive Treatment among eligible individuals	Per ASHA/ Community volunteer	250	0.00	112	0.17	Ongoing Activity Provision of financial incentive to ASHA/ Community Health Volunteer of Rs.250/-per individual for successful completion of TB Preventive Treatment Proposed as per Gol Letter No.D.ONo. V.11011/1/2022-NHM-II, Dtd. 26th October 2022 Total target population per annum: 100000 (Considering family contacts @2 for 40000 pulmonary TB cases and few other vulnerable group individuals) Approximately in 90% cases treatment supporter is ASHA & rest 10% cases are community volunteers/ TB Champion etc. Budget Proposed for 2026-27: Per Cases x @Rs.250/- per case (Proposed 60% of total requirement). Budget Proposed under HSS-17_ASHA Incentive_Sl.No.202
77	Drug Resistant TB (DRTB)					0.16	
77.1	Treatment Supporter Honorarium for MDR/RR-TB Patients	No. of MDR/RR-TB patients on treatment	5000	0.05	1	0.05	Total estimated DRTB Notification in 2026-27 is 650 Incentive proposed as per the CTD guideline following D. O. No. z-28015/24/2017-TB dated 09-07-2019 As per the reported data 90% treatment supporter are ASHAs & rest, 10% are belongs to TB Champions, Family Members & Community Volunteers. Hence, Budget for 90% cases are placed under HSS-17_ASHA Incentives_Sl.No.202 .
77.2	Tribal Incentives	No. of patients	750	0.01	0	0.00	Ongoing Activity Approval for 123 notified Tribal Blocks @Rs. 750/- to cover travel cost of patients and attendant across 14 districts (Baleswar, Gajapati, Kalahandi, Kandhamal, Keonjhar, Koraput, Malkangiri, Mayurbhanj, Nabarangpur, Rayagada, Sambalpur, Sundargarh and Nuapada & Debagarh).
77.3	Infrastructure-Civil Works (Refurbishment/ Up gradation)						Not Proposed
77.4	Procurement of Equipment/ Instruments & Furnitures						
77.4.1	Procurement for IRL/ C&DST Lab	Per Unit	1000000	10	0	0.00	1. Computer & Accessories C&DST lab, VIMSAR Burla has received accreditation for testing FL-LPA and SL-LPA. Desktop, photocopier cum printer & other accessories is required for entry of test results in Ni-kshay and LIMS. Procurement will be done through GEM at Institution level. Budget Proposed: under HSS-18_IT Intervention_Sl.No.203 2. Walk in Cooler for C&DST lab, VIMSAR for storage of samples Budget Proposed: Rs.10.00 Lakhs

Sl. No.	Scheme/ Activity	Approval 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
77.4.2	Procurement for DTCs						
77.4.2.1	Procurement of Pathodetect Machine	Per unit	3009000	30.09		0.00	New Activity: Proposal-1: Procurement of Pathodetect machine for MTB Rif and INH Resistance detection Justification: Patho detect will identify both R and H resistance simultaneously. This will improve DRTB case detection early. One machine for each 31 NTEP districts is proposed. Source of fund: State Budget, hence not proposed in NHM PIP 2026-27 Details is at NTEP Write-up Annexure
77.4.2.2	Procurement of sleeves and drug boxes	Per Box	550	0.01	0	0.00	New Activity: Proposal: Patient-wise Box for BPaLM Patients Justification: BPaLM is the new novel DRTB regimen approved by the program with proven evidence of high treatment success rate. As per programmatic recommendation full course of drugs for 6 months to be provided for the patients initiated on BPaLM regimen. The BPaLM regimen consists of 5 separate drugs (Bedaquiline, Pretomanid, Linezolid, Moxifloxacin and pridoxin). To improve proper drug intake and adherence by DRTB patients initiated on BPaLM regimen, State innovation committee has approved patient-wise bag for the BPaLM patients. This will enable uninterrupted treatment of the patient. The bag will enable safe storage of the drugs with the treatment supporter. Target: 600 DRTB patients in a year Budget: @ Rs. 550/- per bag X 600 patients = Rs. 3.30 Lakhs Budget to be placed at State level
77.5	Equipment Maintenance & Management (Equipment/ Instruments)	Per Unit	250000	2.50	0	0.00	Justification: All equipment/ instruments except BSL3 lab at IRL Cuttack is managed & maintained under Comprehensive Biomedical Equipment Mainanence Programme-Supported under NHM. Proposal: Hence, budgeted for BSL3 lab only i.e. IRL, Cuttack & C&DST Lab VIMSAR, Burla. Budget Proposed: @Rs.2.50 lakhs per unit X 2nos (i.e. IRL Cuttack & C&DST Lab VIMSAR)= Rs.5.00 Lakhs
77.6	Equipment Maintenance & Management (Office)	Per unit/ Per Annum	36000	0.36	0	0.00	Ongoing Activity Proposal: Maintenance of Office Equipment of Nodal DRTB centers Justification: Maintenance of Office equipments and internet facility @ 3000/- per month per NDRTB Centre. Budget: Rs.3000/- per month X 12 months X 3 NDRTBC = Rs.1.08 Lakhs

Sl. No.	Scheme/ Activity	Approval 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
77.7	Procurement of DRTB Drugs	Lumpsum	1000000	10.00	0	0.00	Ongoing Activity Emergency procurement of drugs in case of short supply from CTD Justification: Fund proposed as per last year's approval All anti TB drugs supplied by CTD, but at times local procurement of drugs is done when there is interruption of central supply Budget approved for procurement at State & district level for meting procurement gaps. Annual Requirement of drugs: Rs. 50.48 Lakhs 20% of the requirement is budgeted for FY 2026-27 MDR/XDR Drugs, lumsum mount: Rs.10.00 Lakhs Details is at NTEP Write-up_ Annexure-3
77.8	Laboratory Materials and Consumables for IRLs, CDST & Molecular Diagnostics						Lab consumables for the State IRL (21 districts tagged) & NRL (10 districts tagged)
77.8.1	LC and LC-DST tests	Lumpsum	12772072	127.72	0	0.00	Ongoing Activity Background: Indicative cost of Lab consumables required for 1000 number of LC and LC-DST tests (excluding GST) is Rs 6,41,974. LC is done for all MDR/RR, H-mono/poly cases, and microbiologically confirmed microscopy negative cases. Total LC tests required for DRTB Cases = 2400 (400 BPaLM cases)+750 (75 Longer Oral Cases)+300 (75 Shorter Oral Cases)+200 (100 H-mono/poly cases) Total LC tests required for conducting LPA for microbiologically confirmed microscope negative cases (DSTB/DRTB) = 36000 x 30%= 10800 (assuming 60% microbiologically confirmed and 30% of them will require liquid culture) LC-DST is required for around 20% of the total LC cases. i.e. 20% of 14450 (=3650 +10800) = 2890 Total requirement of LC and LC-DST = 14450 (LC) + 2890 (LC-DST)= 17340 Expected cost of Lab consumables required for 17340 number of LC and LC-DST tests is 17.3 x Rs.6,41,974= 1,11,06,150 (Rs. 111.06 Lakhs) Considering 5% GST and 10% inflation rate, total amount is 11106150 + 5% of 11106150 + 10% of 11106150 = Rs 1,27,72,072 (Rs. 127.72 Lakhs) Budget Proposed for 2026-27 : Rs.127.72 lakhs per year Budgeted 60% If additional fund is required, budget will be proposed in Supplementary PIP

Sl. No.	Scheme/ Activity	Approval 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
77.8.2	LPA tests	Lumpsum	12759356	127.59	0	0.00	Ongoing Activity Background: Indicative cost of Lab consumables required for 1000 number of LPA tests (excluding GST) = Rs 3,08,197 LPA ideally to be done for Microbiologically confirmed TB cases. Assuming 60% microbiological confirmation total 36,000 cases will require LPA. Expected indicative cost of Lab consumables required for 36,000 number of LPA tests excluding GST = 36 x Rs. 3,08,197/- = Rs. 1,10,95,092/- (GST @5% of Rs. 1,10,95,092/-= Rs 554755 + Inflation@ 10% = Rs 1,10,9509) Total Budget requirement = Rs. 1,27,59,356/- (Rs. 127.59 Lakhs) Budget Proposed 60% of total requirement: Rs. 76.55 Lakhs Funds to be kept at State Level If additional fund is required, budget will be proposed in Supplementary PIP Budget Proposed for 2026-27 : Rs. 76.55 Lakhs
77.8.3	Cartridges/ Chips for CBNAAT / TrueNat machines						Ongoing Activity: Activity: 1 - Procurement of Cartridges CBNAAT: Proposed for 2026-27 Justification for Costing: As CTD is providing CBNAAT Cartridges in trenches, it is decided to proposed for 10% of Annual requirement in PIP. Annual CBNAAT Cartridge requirement = 100000 Nos. Nos. to be proposed in PIP = 10 % of 100000 = 10000 Nos. Budget : 10000 nos X Rs.1100/- per unit = Rs.110.00 Lakhs
77.8.3.1	Procurement of Cartridges CBNAAT	Per unit	1100	0.01	0	0.00	Activity:2 -Procurement of TrueNAAT Chips: Proposed for 2026-27 Justification for Costing: Based on national strategic plan, presumptive testing load is 3000 per lakh population. So presumptive testing requirement= 450 x 3000 = 13,50,000 Assuming 90% test to be conducted upfront NAAT, No. of testing requirement by NAAT= 13,50,000 x 0.9=12,15,000 Thus requirement for TruNAT testing = 12,15,000 - 1,00,000 = 11,15,000 i. Requirement of TruNAT MTB chips= 11,15,000 Budget Proposed for purchase of 1.12 Lakhs TruNAT MTB chips (i.e. 10% of total requirement) & rest shall be supplied by GoI= 1.12 lakhs xRs. 720/- per unit= Rs. 802.80 Lakhs ii. Total Requirement of MTB Rif chips = 22,300 (20% of MTB chips) Budget Proposed for 22,300 MTB Rif Chips X Rs.599.50/- per unit)= Rs.133.69 Lakhs Total Budget proposed for Fy 2026-27: Rs.110.00 Lakhs + Rs.802.80Lakhs + Rs. 133.69 Lakhs = Rs.1046.49 Lakhs per year
77.8.3.2	Procurement of TrueNAAT Chips	Per unit	720	0.01	0	0.00	
77.8.3.3	Procurement of MTB Rif Chips	Per unit	600	0.01	0	0.00	

Sl. No.	Scheme/ Activity	Approval 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
77.8.3.4	Procurement of Consumables for Pathodetect Machine	Per unit	893	0.01		0.00	New Activity: Proposal: Procurement of consumables for Pathodetect Machine Total microbiologically confirmed TB cases is 60% of the total TB Cases. i.e. 62000 x 60% = 37200 Consumables are required for 37200 cases. Consumables are budgeted for 1 year. Procurement of consumables for Pathodetect machine: Calculated for 37,200 testing (for all microbiologically confirmed cases which will be approximately 60% of total cases of 62,000) Cost of one Pathodetect test kit = Rs 893 (including 12% GST) For 2026-27: Rs. 332.20 Lakhs for consumables Source of fund: State Budget, Hence not proposed in NHM PIP 2026-27 Details is at NTEP Write-up Annexure
77.8.4	Travel cost to DRTB patient to District DR TB Centre or Nodal DR TB Centre or to district for treatment initiation/ follow up/ADR management during treatment along with one accompanying person/attendant.	No. of patients	1400	0.01	8	0.11	Ongoing Activity: The Travel cost to the DRTB patients along with the attendant shall be reimbursed to attend the distinct and Nodal DRTB Center for initiation of Treatment, follow up and managing adverse drug reaction as per CTD norm. Budget: Nos. of DRTB Patients X Rs.1400/- per DRTB Patients per annum
77.8.5	NABL Certification/ Renewal	Lumpsum	250000	2.5	0	0.00	Ongoing Activity Justification: Since IRL, Cuttack is the tertiary level laboratory for NTEP and supervising all NTEP labs at district and sub-district level, so annual NABL certification is necessary for of IRL, Cuttack. Budget Proposed for 2026-27: Rs 2.50 Lakhs
77.9	Capacity Building Including Training						Budget Proposed under HSS-16_Capacity Building Including Training_SI.No.201
78	TB Harega Desh Jeetega Campaign					8.82	
78.1	ACSM Activities						
78.1.1	IEC/ BCC Campaign						Budget Proposed under HSS-19_IEC & Printing_SI.No.204
78.2	Community Engagement Activities						

Sl. No.	Scheme/ Activity	Approval 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
78.2.1	Honorarium for TB Champions	Per month	3500	0.035	35	8.82	Ongoing Activity Proposal for 2026-27: Patients support initiatives by TB Champions for improving treatment compliance of TB patients at 1288 PHC AAMs (i.e. 100% of total 1288 PHC AAMs to be focused in 2026-27) Progress: 300 TB Champions out of 565 selected AAMs are already engaged. 1. Organizing support group meeting on fortnight basis: @Rs.500/- X 2 nos= Rs.1000/- 2. Home visit by TB champions for post treatment follow up: all patients who have completed TB treatment will be followed up for next 2 years to ensure there is no relapse of TB by following up TB screening among them.: weekly once: @Rs.500/- X 4 no= Rs.2000/- 3. Attending monthly meeting of TB Champions at district level: @Rs. 500/- Total: Rs. 3500/- Per month Budget Revised as per the discussion in the NPCC Meeting
78.2.2	Support Provision for TB Champions	Per TB Champion	2000	0.02	0	0.00	Ongoing Activity Background: Total TB Champions engaged - 926 Proposal: Apron & I Card to be provided to newly engaged TB Champions for FY 2026-27 (1288-926=362)
79	State specific Initiatives and Innovations						Not Proposed
	Total NTEP					127.63	

NDCP-5_National Viral Hepatitis Control Programme (NVHCP)

Sl. No.	Scheme/ Activity	Approval 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
	Total NVHCP					2.60	
80	Prevention					0.00	
80.1	Kits & Consumables						
80.1.1	Consumables for Hepatitis B Vaccine for HRG	Per case	30	0.0003	0	0.00	Approx. Rs 10 per vaccine dose (Rs 30 per person) budgeted as per the costing template matrix shared by GoI
80.1.2	Consumables for Hepatitis B Vaccine for HCWs	Per case	30	0.0003	0	0.00	Approx. Rs 10 per vaccine dose (Rs 30 per person) budgeted as per the costing template matrix shared by GoI Vaccine for the all the HCWs has been given in the FY 2025-26 supplied by the GoI
80.1.3	HBIG for newborns delivered to HBsAg positive mother	Per dose	2500	0.025	0	0.00	Unit cost @Rs 2500 per dose budgeted as per the costing templete matrix shared by GoI NB: For the FY 2025-26 target for HBIG administration was 850, which has been increased to 1540 New borns in FY 2026-27 Budget revised as per the recommendation in the NPCC meeting
80.2	ASHA incentives						Budget Proposed under HSS-17_ASHA Incentives_SI.No.202
80.2.1	ASHA incentives - Hepatitis B						Budget Proposed under HSS-17_ASHA Incentives_SI.No.202
80.2.2	ASHA incentives - Hepatitis C						Budget Proposed under HSS-17_ASHA Incentives_SI.No.202
80.3	Others including operating costs (OOC)						Review, Convergence, Coordination, Administrative Contingency, Field Visits, Surveillance & Monitoring Budget to be met out of HSS-11_Technical Assistance_ SI.No.194
80.3.1	Outreach Activity - Organization of Camps	Per Camp	5000	0.05		0.00	Budget Shifted to SL No 82 as per recommendation of NPCC
80.3.2	Meeting Costs/Office expenses/Contingency- State, Districts & TCs/MTCs					0.00	Funds under this head shall be utilised by State/ District level for the following activities: i. SVHMU Meeting/Office expenses/Contingency @ Rs 0.40Lakhs /districts for 30 districts= Rs. 12.00 Lakhs (Budget to be met out of pooled funds HSS-11_Technical Assistance_ SI.No.194, No separate budget proposed) ii. Review meeting @ Rs 6700/participant x 66 TC/MTC x 2 participants from each TC/MTC = Rs. 8.84 Lakhs- Separately proposed under HSS-11_Technical Assistance_ SI.No.194
80.4	IEC & Printing						Budget Proposed under HSS-19_IEC & Printing_SI.No.204
80.5	Training						Budget Proposed under HSS-16_Capacity building incl. training_SI.No.201
80.5.1	Training of MHU Team						Budget Proposed under HSS-16_Capacity building incl. training_SI.No.201
80.6	Incentives(Allowance, Incentives, staff welfare fund)						
80.6.1	Incentives under NVHCP for MO, Pharmacist, LT and Data Entry Operator						Incentives(Allowance, Incentives, staff welfare fund) Not proposed, as no other programme having similar provisions.
80.6.2	Incentives for Peer Support under NVHCP						Budget of Rs. 61.20 Lakhs (Rs. 1.8 Lakhs x 34) has been proposed under Head HSS-9, SI. No. 186

Sl. No.	Scheme/ Activity	Approval 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
80.7	Manpower under NVHCP						
80.7.1	State level HR under DCP						The HR under HSS-9 (HRH) will manage the task.
80.7.2	District level under DCP						Not proposed. The same assignment will be managed through the system
81	Screening and Testing through Facilities					0.40	
81.1	Screening and Testing through facilities						
81.1.1	Diagnostics (Consumables, PPP, Sample Transport)						
81.1.1.1	Screening kits						Budget (as per costing template) - Gol Norms
81.1.1.1.1	HBsAg kits (HRG & General Population)	Per kit	12	0.00	0	0.00	Budget (as per costing template) - Gol Norms
81.1.1.1.2	HBsAg kits (ANC Screening)	Per kit	12	0.00	0	0.00	Budget (as per costing template) - Gol Norms Budget Revised as per NPCC recommendation
81.1.1.1.3	Anti HCV kits	Per kit	20	0.00	0	0.00	Budget (as per costing template) - Gol Norms
81.1.1.2	Viral Load						
81.1.1.2.1	Viral Load for HCV	Per case	1100	0.01	0	0.00	Budget Requirement: as per costing template 1. Viral Load for HCV: No. of Cases x @Rs. 1100/- per cases 2. Viral Load for HBV: No. of Cases x @Rs. 1100/- per cases 3. SVR test for Hepatitis C: No. of Cases x @Rs. 1100/- per cases Cash Grand: Rs.29.08 Lakhs Kind Grand: Rs. 84.42 Lakhs: To be Supplied by Gol as per RoP (Hence budget not included)
81.1.1.2.2	Viral Load for HBV	Per case	1100	0.01	0	0.00	
81.1.1.2.3	SVR test for Hepatitis C	Per case	1100	0.011	0	0.00	
81.1.2	Consumables						
81.1.2.1	Consumables for Hepatitis B (diagnostics)	Lumsum	9417130	94.17	0	0.00	Budget (as per costing template) - Gol Norms
81.1.2.2	Consumables for Hepatitis C (diagnostics)	Lumsum	6907440	69.07	0	0.00	Budget (as per costing template) - Gol Norms
81.1.3	Capacity building including training						
81.1.3.1	Training of Lab technicians						At State Lab / District Lab/ MTC/ TC, Batch Size = 25 participants Activity already done in the FY 2024-25, , hence not proposed
81.1.3.2	Any other (please specify)			0.00		0.00	
81.1.4	Others including operating costs (OOC)						
81.1.4.1	Sample transportation	Per District	40000	0.40	1	0.40	Budget Proposed FY 2026-27= @Rs.40000/- per district has been proposed as per the Govt of India suggestion. The amount can also be utilised for collection of drugs/ kits in emergencies.
81.1.5	DCP Programme Review: NVHCP	Per Participant	6700	0.07	0	-	Review meeting @ Rs 6700/participant x Per TC/MTC x 2 participants from each TC/MTC Budget Shifted from HSS-11, Sl. No.194

Sl. No.	Scheme/ Activity	Approval 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
82	Screening and Testing through Outreach Activities					1.20	
82.1	Outreach Activity - Organization of Camps	Per Camp	5000	0.05	24	1.20	Background Outreach activity under NVHCP is conducted through the health system @ Rs. 5000 per camp (maximum capping limit 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. Camp Breakup: For Long Distance Truckers (Deliverable- minimum 50 cases will be screened in each camp) 1. One camps each in 5 Municipal Corporations area in every month x 12 months = 60 Camps 2. One camps each district (30 districts) per month for Truckers/other vulnerable groups x 12 months = 360 Camps For Jail inmates 1. One camp bi-monthly at 65 Jails X 6 camps per annum =390 Camps Any other camp on need basis at the preferable host spot Budget Shifted from SI No. 80. to SI No 82 as per recommendation of NPCC
83	Treatment					1.00	
83.1	Central supplies of Drugs (Kind grant)	Lumsum	2687725	26.88	0	-	Drugs (other than Daclatasvir 30 mg and Ribavirin 200mg)- Drugs will be provided as kind grant/ cash grant (as per state need). The budget proposed as per costing template.
83.2	Budget for Drugs Procurement at State Level			0.00		0.00	Drugs (Daclatasvir 30mg + Ribavirin 200mg)- are not being prescribed at MTC level . If required will be procured and supplied out of state budget.
83.3	Management of Hepatitis A & E	Per District	100000	1.00	1	1.00	Background and Rationale: @Rs 1 lakh per district Flexible E.g.Rs 5000/- for Diagnostics and Rs. 95000/- management as per the GOI Suggestion
83.4	Trainings/ Capacity Building						Budget Proposed under HSS-16_Capacity building incl. training_SI.No.201
83.5	Any other (please specify)			-		-	
83.5.1	Proposal for establishment of Additional TC	Per TC	30000	0.30	0	-	New Proposal Budget approved for establishment of Additional TC @Rs.30,000/per TC at SDH level Budget Revised as per NVHCP norms & NPCC recommendation
	Total NVHCP					2.60	

NDCP-6_National Rabies Control Programme (NRCP)

Sl. No.	Scheme/ Activity	Approval 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
	Total NRCP					0.00	Detailed Justification is at NRCP Write-up Annexure
84	Implementation of NRCP					0.00	
84.1	Functionalisation of Anti Rabies Clinic						
84.1.1	Provision of Anti-Rabies Vaccine/Anti-Rabies Serum for animal bite victims	Lumpsum	342791000	3427.91			Background: As per GOI mandate, provision of Anti-Rabies Vaccine/Anti rabies serum is mandatory for targeted health facilities. For 2026-27: Budget calculation has been made based on the tender rate finalized at Odisha State Medicine level in the year 2025-2026 A. Anti-Rabies Vaccine/Anti-Rabies Serum 1. Anti-Rabies Vaccine (ARV) Approved rate - Rs.199/- (Rs.189/- + 5% tax, decided through competitive bidding process) Required quantity - 416112 as per the indent submitted by the district say 420000 1.a. Adding 10% of ARV wastage Provision (availability of 1014 PHC (Including UPHCs) = 420000 + 42000 = 462000 Budget - Rs.199/- x 462000 = Rs.919.38 lakhs 2.Inject. Equine Rabies Immunoglobulin Required quantity - 77202 as per the indent submitted by the district say 77200 Budget - Rs.330 (Rs. 314/- + 5% tax)/- (as per tender rate including Tax) x 77200 = Rs.254.76 lakhs 3.Human Rabies Immunoglobulin Required quantity - 47814 as per the indent submitted by the district say 47800 Budget - Rs. 4715 (Rs.4490/- + 5% Tax)(as per tender rate including Tax) x 47800 = Rs.2253.77 lakhs B. Consumables, IV fluids & emergency drugs for adverse reaction management - Total Budget (A+B) - Rs.3427.91 lakhs. (To be Met out of State Specific Budget)
84.1.2	Establishment of Model Anti Rabies Clinic at DHH	Per Unit	70000	0.70		0.00	Not Proposed as requirement saturated during 2024-26. Computer & Accessories has been supplied during 2024-26. In all Model Anti Rabies Clinics, wound washing areas has already been established & functioning and in other public health facilities the said areas have been established using other Budget heads. Hence, Budget not proposed.
84.2	Training & Capacity Building					0.00	As per Gol overall Budget Limit is Rs. 11.30 Lakhs (5.45 + 0.195x30). The Budget proposed is within the Budget Limit. Budget Proposed under HSS-16_Capacity building incl. training_SI.No.201
84.3	IEC/BCC						Budget Proposed under HSS-19_IEC & Printing_SI.No.204
84.4	Printing of formats for Monitoring and Surveillance under NRCP					0.00	Budget Proposed under HSS-19_IEC & Printing_SI.No.204

Sl. No.	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		State Remarks
					Quantity/ Target	Budget (Rs. Lakhs)	
84.5	Monitoring and Surveillance						Activities: 1. Review Meetings: 1.1. State Level Review Meeting- Integrated with Half yearly DCP Programme Review Meeting 1.2. District Level Review meetings -Integrated District Level Monthly Meeting 2. Monitoring & Supportive Supervision- Utilise the pooled fund available at State/ District/ Block/ Sector Level Budget to be met out of Pooled fund placed at HSS-11_Technical Assistance_ SI.No.194 (Details at Write-up Annexure)
	Total NRCP					0.00	

NDCP-7_ Programme for Prevention and Control of Leptospirosis (PPCL)

Sl. No.	Scheme/ Activity	Approval 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
	Total PPCL					0.00	
85	Implementation of PPCL					0.00	Status: • In the year 2024-24, 6083 samples were tested and 218 got positive for Leptospirosis across the State. • 95 % confirmed cases received prompt treatment as per the guideline • 87 % suspected fever cases were screened for Leptospirosis in the sentinel site • 100% outbreak is reported in IHIP, Investigated and laboratory confirmed
85.1	Materials and supplies					0.00	Budget for procurement of Drugs will be met out of State funds
85.1.1	Procurement of drugs, diagnostic kits & supplies etc	Per State	1000000	10.00		0.00	1) Drugs & Supplies: To be met out of State Budget. 2) Diagnostic Kit & Consumables: To be met out of IPHL/ BPHU cost. In case of additional requirement fund to be met out of Nidaan (a State Budget scheme).
85.2	Training & Capacity Building						GoI overall normative Budget Limit is Rs. 6.50 Lakhs (0.50 lakhs for State + 0.20x 30). The Budget proposed is within the Budget Limit. Budget Proposed under HSS-16_Capacity Building Including Training_SI.No.201
85.3	IEC / BCC						GoI overall normative Budget Limit is Rs. 30 Lakhs (1 Lakh per district). The Budget proposed is within the Budget Limit. Budget Proposed under HSS-19_IEC & Printing_SI.No.204
85.4	Monitoring & Surveillance					0.00	Activities: 1. Review Meetings: 1.1. State Level Review Meeting- Integrated with Half yearly DCP Programme Review Meeting 1.2.District Level Review meetings -Integrated District Level Monthly Meeting 2. Monitoring & Supportive Supervision- Utilise the pooled fund available at State/ District/ Block/ Sector Level Budget to be met out of Pooled fund placed at HSS-11_Technical Assistance_ SI.No.194 (Details at Write-up Annexure- Monitoring Supervision & Joint Reviews & Convergence Meeting)
85.5	Contingency						Activity: Administrative Contingencies for PMUs- Utilise the pooled fund available at State/ District/ Block Level Budget to be met out of Pooled fund placed at HSS-11_Technical Assistance_ SI.No.194 (Details at Write-up Annexure-Administrative Contingencies)
	Total PPCL					-	

NCD-1_National Programme for Control of Blindness and Vision Impairment (NPCB+VI)

Sl. No.	Scheme/ Activity	Approval 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
	Total NPCB&VI					36.77	
87	Cataract Surgeries through facilities					7.31	Inferences: As per the data- Target (FY 2024-26): 865400 (i.e. FY 2024-25: 465400 & FY 2025-26: 400000) Achievement (by Aug 2025): 477956 (55%) Details of achievement Govt./ Pvt is attached at NPCB+VI Write-up Annexure
87.1	Drugs and consumables for Cataract Operation (at Govt. Sector)	Per Case	1000	0.01	1219	7.31	Ongoing Activity (KPI) 2024-25: Target- 465400; Achievement- 354652 (76%) [by Govt.- 18312 (5%), by NGO under NPCBVI- 113479 (32%), under PMJAY- 222861 (63%)] 2025-26: Target- 400000 (revised); Ach (up to Aug 2025) - 123304 (31%) [by Govt.- 5699 (5%), by NGOs under NPCBVI- 31779 (26%), under PMJAY- 85826 (69%)] Likely achievement up to March 2026: 100% Proposal for 2026-27: Total Target (Govt. & NGO/Pvt.): 450000 Cataract Surgery at Govt sector: 45000 (i.e. 10% of 450000) Estimated Budget: 45000 x @Rs. 1000/- = Rs. 4,50,00000/- Proposed Budget: Rs. 2,70,00000/- (Budgeted 60% of the estimated budget, looking into less expenses incurred due to bulk purchase of drugs, IOL etc. and some drugs are being met out of State funded Niramaya (free drugs scheme). Financial assistance to Govt. hospital for phaco surgery from the Surendra Sai Dibya Drusti Yojana- state funded scheme).
87.2	Any other drugs & supplies			0.00		0.00	Eye Drops at PHC/UPHC/SC HWC (as per CPHC Guidelines): 1. Eye drops Methylcellulose- 2. Eye drops Sodium cromoglycate 2% 3. Eye drops Lignocaine 4% 4. Eye drops Ciprofloxacin 0.3% 5. Eye drops Tropicamide 1% Above drugs are proposed to be included in EDL under State Budget.

Sl. No.	Scheme/ Activity	Approval 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
88	Cataract Surgeries through NGOs					23.41	Inferences: As per the data- Target (FY 2024-26): 865400 (i.e. FY2024-25: 465400 & FY 2025-26: 400000) Achievement (by Aug 2025): 477956 (55%) Details of achievement Govt./ Pvt is attached at NPCB+VI Write-up Annexure
88.1	Reimbursement to NGOs & Pvt. Practitioners	Per Case	2000	0.02	3901	23.41	Ongoing Activity (KPI) 2024-25: Target- 465400; Achievement- 354652 (76%) [by Govt.- 18312 (5%), by NGO under NPCBVI- 113479 (32%), under PMJAY- 222861 (63%)] 2025-26: Target- 400000 (revised); Ach (up to Aug 2025) - 123304 (31%) [by Govt.- 5699 (5%), by NGOs under NPCBVI- 31779 (26%), under PMJAY- 85826 (69%)] Likely achievement up to March 2026: 100% Proposal for 2026-27: Total Target (Govt. & NGO/Pvt.): 450000 Cataract Surgery at NGO/Pvt. hospitals: 144000 (i.e. 32% of total target i.e. 450000 cases) Estimated Budget: 144000 x @Rs. 2000/- = Rs. 28,80,00000/- Proposed Budget: Rs. 86400000/- budgeted 30% of the estimated budget as several agencies are getting funding from other sources & thereby not claiming for the cataract operation Cataract Surgery at empanelled private hospitals / PM-GJAY: Budget not proposed as per the same is funded under PM-GJAY
89	Other Ophthalmic Interventions through facilities					0.00	
89.1	IEC/ BCC Activities under NPCB+VI					0.00	Budget Proposed under HSS-19_IEC & Printing_Sl.No.204
89.2	Fixed Tele-ophthalmic Network Unit in Govt. set up (internet based ophthalmic consultation unit) @ Rs.25.00 lakh	Per Unit	2500000	25.00		-	E- Sanjeevani (tele consultation services) is implemented across HWCs (PHC/ SCs) in the State. The same platform is used for teleconsultation with ophthalmic surgeons at districts level on fixed day basis.

Sl. No.	Scheme/ Activity	Approval 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
89.3	Expansion of Retinopathy of Prematurity Screening for high risk New Borns						New Activity Background : Retinopathy of Prematurity related blindness is preventable through timely screening and intervention. To identify RoP among new born and to take appropriate timely intervention, annually around 20000 high risk babies (Less than 2 KG birth Weight and 34 weeks gestational age) need to be screened after completion of 4 weeks at SNCU level at MC&H & District level. As the RoP screening is not available at District level, to address RoP related blindness, expansion of RoP screening to all District is a mandate for the State. Implementation Plan: • In 2026-27, RoP Screening shall be initiated in all DHHs • Trained Optometrist of DEIC, SN of SNCU will be trained on image capturing of retina and upload it in the dedicated virtual Platform for confirmation by the designated experts. • The State Virtual Resource center will comprise of designated RoP expert from Govt. and private hospitals who will confirm the case for Referral and extend counseling through telemedicine platform. Accordingly, DEIC will refer the child and do follow up. • Comprehensive Capacity building of Ophthalmologist, DEIC Optometrist & SNCU Staff Nurses. Proposed budget • Cost of Pediatric Fundus camera, Virtual Resource Centre Cost • Training Budget Proposed under HSS-21_State-specific Initiatives and Innovations_SI.No.206
90	Other Ophthalmic Interventions through NGOs/ Pvt. Sectors					0.00	Budget Revised as per recommendation in the NPCC Meeting
90.1	Diabetic Retinopathy	Per Case treated / managed	2000	0.02	0	0.00	Ongoing Activity: Target 2024-26 at NGO/ Pvt Hospital level: 2000 cases. Total Achievement 2024-26: 21721 up to Aug, 2025 (NGO/ Pvt. Sector 16291 cases) Proposal for 2026-27: 2000 Cases for NGO/ Pvt Hospital
90.2	Childhood Blindness	Per Case treated / managed	2000	0.02	0	0.00	Ongoing Vision screening of Pediatric age group is covered by RBSK MHTs and under School Eye Health Programme. Though comprehensive vision screening for Pediatric age group is in place, provision for treatment under RBSK and NPCB & VI is limited to few conditions. Under RBSK, only Congenital cataract, Strabismus and RoP is covered. The provision for childhood blindness treatment under NPCB & VI is Rs.2000/ per case. Annually around 600 such cases require surgery at Tertiary level for which fund provisioning is required under NPCB & VI. Out of the identified cases around 60% cases are covered under PMJAY. The budget is proposed for the rest pending cases.

Sl. No.	Scheme/ Activity	Approval 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
90.3	Glaucoma	Per Case treated / managed	2000	0.02	0	0.00	Ongoing Activity: Target 2024-26 at NGO/ Pvt Hospital level: 700 cases. Total Achievement 2024-26: 10344 up to Aug, 2025 (NGO/ Pvt. Sector 7758cases) Proposal for 2026-27: for NGO/ Pvt Hospital: 300 cases each year as per expenditure trend
90.4	Keratoplasty	Per Case treated / managed	7500	0.075	0	0.00	Ongoing Activity: Target 2024-26 at NGO/ Pvt Hospital level: 1000 cases. Total Achievement 2024-26: 2862 up to Aug, 2025 (NGO/ Pvt. Sector 2421cases) Proposal for 2026-27: for NGO/ Pvt Hospital: 500 cases in each year as per expenditure trend
90.5	Vitreoretinal Surgery	Per Case treated / managed	10000	0.10	0	0.00	Ongoing Activity: Target 2024-26 at NGO/ Pvt Hospital level: 800 cases. Total Achievement 2024-26: 2605 up to Aug, 2025 (NGO/ Pvt. Sector 1954cases) Proposal for 2026-27: for NGO/ Pvt Hospital: 400 cases in each year as per expenditure trend
91	Mobile Ophthalmic Units					6.05	
91.1	Operational Expenses for Mobile Ophthalmic Units (Govt. vehicle)	Per unit/ per annum	250000	2.50	0	-	Ongoing Activity Background & Progress: A total of 51 Mobile Ophthalmic Units approved for 30 Districts and 5 Municipal corporation (2 units are running with existing vehicles procured by Govt & other 49 units proposed are running in hiring vehicle) Proposal for 2026-27:
91.2	Operational Expenses for Mobile Ophthalmic Units (hired vehicle)	Per unit/ per Month	50000	0.50	1	6.00	Proposal-1: Maintenance Expenses for Mobile Ophthalmic Units (Govt. vehicle) • 2 vans functioning in Govt. (NPCBVI) vehicle. • Budget: Maintenance of 2 functional units running in Govt. vehicles (DHH Sundergarh & MKCG MCH Berhampur) @ Rs.2.5 Lakhs per year per. Vehicle X 2 vehicles = Rs.5.00 Lakhs (Proposed as approved last year in supplementary PIP)
91.3	Branding of Mobile Ophthalmic Units	Per Unit	20000	0.20		0.00	Proposal-2: Operational Expenses for Mobile Ophthalmic Units (hired vehicle) • Total Mobile Ophthalmic Units operational: 49 Mobile Ophthalmic Vans (33 from NHM + 16 from SSDDY i.e. State Budget). Proposal for 33 units i.e. 28 Districts & 5 MCs. • Budget : For 33 units run in vehicle hiring mode @Rs.50,000/- per unit per month X 33 units X 12 months = Rs.198.00 lakhs (Proposed as approved last year)
91.4	GPS Tracker for Mobile Ophthalmic Vehicles	Per Unit	5000	0.05	1	0.05	Proposal-3: Branding of Mobile Ophthalmic Units (New Proposal) • Informative branding of all the 35 Mobile Ophthalmic Units with logos of Govt., NHM and NPCBVI (Budget proposed under IEC/ BCC of NPCB+VI) Proposal-4: GPS Tracker for MOU vehicles (New Proposal) • Budget: @Rs.5000/- per unit X 51 units = Rs.2.55 lakhs NPCC recommnded the Proposal
92	Collection of eye balls by Eye Banks and Eye					0.00	

Sl. No.	Scheme/ Activity	Approval 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
92.1	Recurring GIA to Eye Bank	Pair of corneas	1000	0.01	0	0.00	Ongoing Activity Quantitative Achievement: • Target 2024-26: 5200 pairs • Achievement 2024-26: 3895 pairs (up to Aug'2025 i.e. 75%) likely to achieve more than 100% by March 2026 Proposal for 2026-27: 3800 pair (as per Gol's new target for 2025-26) Budget Revised as per recommndation in the NPCC Meeting
93	Free spectacles to school children (6-18 years age group)	Pair of spectacles	350	0.0035	0	0.00	Quantitative Achievement: • PIP Target 2024-26: 1,50,000 (75,000 Per Annum) • Achievement (2024-25 & till Aug 2025): 66,802 (45%) pair of spectacles distributed to students as against 1,27,000 pairs supplied (as per district report). Procurement of spectacles: Centralized procurement process is in place in the State from July 2019. Procurement is done through Odisha State Medical Corporation Limited. Proposal for 2026-27: • Target increased from 75000 to 120000 (actual normative requirement of 148500; i.e. 2.7% of 55 Lakhs student population) • Budget Proposed for 2026-27: Rs.4,20,00000 (120000 pair @ Rs. 350/- per pair). Proposal for School Level Screening: The detailed modalities are attached at NPCB+VI Write-up Annexure
94	Free spectacles to others (including presbyopic glasses)	Pair of spectacles	350	0.0035	0	0.00	Ongoing Activity Progress: • Target 2024-26: 200000 pair of spectacles • Achievement 2024-26 (till Aug 2025): 158901 pairs (79%) & Likely to achieve the target by March 2026 Proposal for 2026-27: Target increased from 100000 to 165000 (looking into the demand from the field). Budget Proposed for 2026-27: Rs.5,77,50000 (165000 pairs @ Rs. 350/- per pair) Modalities of Screening: Modalities adopted for improving coverage: Fixed day screening of elderly people is planned on various pension days including distribution of presbyopia glasses same day. Stock of presbyopia glasses being maintained at District level. Modalities for procurement of spectacles: Centralized procurement process finalized from July 2019, procurement done through Odisha State Medical Corporation Limited.
95	Grant in Aid for the Health Institutions, Eye Bank, NGO, Private Practioners					0.00	
95.1	GIA for strengthening DHHs (Procurement of equipment, instrument etc.)			0.00		0.00	To be met out of State Budget
95.2	GIA for strengthening SDHs (Procurement of equipment, instrument etc.)			0.00		0.00	To be met out of State Budget

Sl. No.	Scheme/ Activity	Approval 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
95.3	GIA for Vision Centre at Govt. Sector (Procurement of equipment, instrument etc.)	Per Unit	100000	1.00	0	0.00	Status: Total Vision Centers operational: 1. CHC level:183 (out of 377 CHCs) 2. PHC Level: 0 (out of 1288 PHC) 3. UPHC Level: 4 (out of 90 UPHC) Proposal for 2026-27: NIL, as these are being strengthened under Surendra Sai Dibya Drusti Yojana (SSDDY).
95.4	GIA for Eye Bank at Govt sector (Procurement of equipment, instrument etc.)	Lumpsum	0	0.00	1	0.00	Ongoing Activity Background: Present Status: Govt – 4 (SCB MCH – non functional, MKCG MCH, VIMSAR & RGH-Rourkela), NGO – 2 (Drustidaan-BBSR & Ispat Drustidaan-Rourkela). New Proposal: • Eye Banks at SCB MCH: @ Rs. 25.00 lakhs proposed (As per Facility assessment) • FM MCH, Balasore (New) @ Rs.40 Lkhs Total Budget for 2 institutions: Rs.65 Lakhs
95.5	GIA for Eye Donation Centres at Govt. Sector (Procurement of equipment, instrument etc.)	Per Unit	100000	1.00		0.00	Ongoing activity Progress: 1. Functional : 4 (DHH Sambalpur, Baragarh, Khordha, Sundergarh) Proposal for 2026-27: Not Proposed
95.6	GIA at Community Level (Procurement of equipment, instrument etc. For ASHAs & School Teachers as per HWC guideline)	Per ASHA	300	0.003		0.00	Ongoing activity Status : Target 2022-24/Progress : 49037 ASHA kits supplied to all of them Proposal (2026-27) : ASHA kit for 835 (50825-49990) nos. newly engaged ASHAs proposed. • Vision screening card for 6/18 vision @ Rs.200/- per unit x 835 nos. = RSs 1.67 Lakhs • Measuring tape @ Rs.100/- per unit x 835 nos. = Rs. 83,500/- • Register- supplied under printing (NHM) • Referral Card- supplied under printing (NHM) • Proposal for School Teacher Kit- Not Proposed. The said items are with RBSK team Budget Proposed: @Rs.300/- per new ASHA X 835 ASHAs =Rs. 2. 51 Lakhs - Activity Dropped as per recommendation of NPCC
96	Other NPCB&VI components					0.00	
96.1	5 Days Refresher Training to Ophthalmic Officers						Budget Proposed under HSS-16_Capacity building incl. training_SI.No.201
96.2	Printing activities under NPCBVI						Budget Proposed under HSS-19_IEC & Printing_SI.No.204

Sl. No.	Scheme/ Activity	Approval 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
96.3	Planning and M&E						Activities: 1. Review Meetings: 1.1. State Level Review Meeting- Integrated with NCD Quarterly Review Meeting 1.2.District Level Review meetings -Integrated District Level Monthly Meeting 2. Monitoring & Supportive Supervision- Utilise the pooled fund available at State/ District/ Block/ Sector Level Budget to be met out of Pooled fund placed at HSS-11_Technical Assistance_ SI.No.194 (Details at Writeup Annexure)
	Total NPCB&VI					36.77	

NCD-2_National Mental Health Programme (NMHP)

Sl. No.	Scheme/ Activity	Approval 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
	Total NMHP					8.19	
97	Implementation of District Mental Health Plan					7.99	Details Writeup is placed at writeup Annexure- NMHP PIP 2026-27
97.1	DMHP Wing (HR)					-	
97.2	Operationalization of District Mental Health Unit at District Headquarter Hospital						Position sanctioned: Programme Officer (MO, MBBS)-3 sanctioned post, Clinical Psychologist-32, Psychiatric Social Worker-32, Psychiatric Nurse-32, Community Nurse-32, Case Registry Assistant-32 Position In-positioned: Programme Officer (MO, MBBS)-2 sanctioned post, Clinical Psychologist-25, Psychiatric Social Worker-23, Psychiatric Nurse-08, Community Nurse-29, Case Registry Assistant-27 2.Cost for operationalization under Miscellaneous/Travel (SI No. 97.7.1)
97.3	Outreach activities (Targeted Intervention)						
97.3.1	Screening Camp	Per camp	15000	0.15	45	6.75	Ongoing Activity: Rationale and justification Screening camps are proposed for early identification, case detection and cover marginalized groups. More camps are proposed in the PIP 2026-27 than last year (1512 camps as against 278 camps planned during 2025-26) for improving cases registration. Proposal: 3 Screening camps are proposed per CHC & UCHC level & 12 Special Camps per districts shall be planned for marginalized groups. The marginalised groups include Jail inmates, Migrants, Minority Communities, LGBTQ+ individuals, refugees etc. • @ 3 camps per CHC & UCHC per year X 384 CHC/UCHC = 1152 Camps • @ 12 camps for marginalized groups per district X 30 districts = 360 Camps • Total camps = 1512 camps DMHP unit shall coordinate with all concerned & prepare a micro plan for organization of the camp in predefined schedule. Expenditure heads: IEC materials, Refreshment cost of Service Providers, PwMI & their caregivers, per diem to MOs/skilled mental health professionals/ pharmacists/ mobilizers of PwMI (ASHAs/AWWs) to the screening camp, awareness activity for screening camp. District wise Target of camps is attached in the Write-up Annexure
97.3.2	Life Skill Education for School teachers						Activity dropped
97.3.3	Stress Management Sessions	Per Session	3000	0.03	8	0.24	Ongoing Activity: Background: To reduce examination stress before exam, depression, violence, harassment & develop abilities to cope with normal challenges & stresses in life. The sessions are planned at Schools , Colleges & Work Places by DMHP units . Session are targeted at major schools , & offices in the district in consultation with District Officials & Block MOs Head of expenses : IEC materials , refreshment cost, RP fees for invited professionals District wise Target of Stress Management Sessions is attached in the Write-up Annexure

Sl. No.	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		State Remarks
					Quantity/ Target	Budget (Rs. Lakhs)	
97.4	Training & capacity building					0.00	Budget Approved under HSS-16_Capacity building incl. training_SI.No.201
97.5	IEC/BCC & Printing						Budget Approved under HSS-19_IEC & Printing_SI.No.204
97.6	Printing activities			-			Budget Approved under HSS-19_IEC & Printing_SI.No.204
97.7	Drugs and supplies						
97.7.1	Procurement of Psychotropic Drugs	Lumpsum	100000	1.00	1	1.00	Rationale and justification: A lumpsum funds has been proposes to address the shortage of drugs supply through the Govt system. In case of short supply of drugs, drugs shall be purchased at District level following local purchase guidelines . Last year approved budget = Rs. 202.00 Lakhs Proposed Budget2026-27: (25% of last year's approval)
97.7.2	Equipment (PICO projector & pendrive/CD)	Per unit		0.00		0.00	Provisioned in FY 2024-26
97.8	Planning and M&E			0.00		0.00	Activities: 1. Review Meetings: 1.1. State Level Review Meeting- Integrated with NCD Quarterly Review Meeting 1.2.District Level Review meetings -Integrated District Level Monthly Meeting 2. Monitoring & Supportive Supervision- Utilise the pooled fund available at State/ District/ Block/ Sector Level Budget to be met out of Pooled fund placed at HSS-11_Technical Assistance_ SI.No.194 (Details at Write-up Annexure)
97.9	Any other activities			0.00			
97.9.1	ASHA incentives for Identification of Persons with Mental Illness (New cases)						Budget Approved under HSS-17_ASHA Incentives_SI.No.202
98	Implementation of TeleMANAS					0.20	
98.1	State Tele-Manas Cell						There are 2 Tele-Manas cell operational in the State. Refer NMHP Write-up Annexure for details
98.1.1	Equipment (Including IVRS AMC)	Per Unit		0.00		0.00	One Time Cost - Hence, Not proposed
98.1.2	Human Resource	Per Unit	12440568	124.41	0	0.00	TeleMANAS HR Annexure
98.1.3	Internet/ telecom vendor	Per Unit	240000	2.40	0	0.00	Proposed as per GoI recommended norms @ Rs Rs.20000/- PM per Cell
98.1.4	Contingency & Miscellaneous	Per Unit	600000	6.00	0	0.00	Proposed as per GoI recommended norms @ Rs Rs.50000/- PM per Cell

Sl. No.	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		State Remarks
					Quantity/ Target	Budget (Rs. Lakhs)	
98.1.5	IEC /BCC						The Tele-MANAS programme launched to provide free mental health support to people in need. There is a further need of publicise the Toll free Nos , so that people can access it.In order to publicise the same, Mass, Mid media Interventions are proposed periodically (Quarterly) to reinforce its use. Mass Media : • Advertisement in News Daily (2 leading odia paper colour-quarter page as per I&PR Rate) : Rs.2,00,000/- X 4 times (Quarterly)= Rs.8.00 Lakhs - o Broadcast in FM (9FMCs) & Community Radio Stations (24CRS) : @ Rs.35000/- per minute X 5 minutes in the week X 4 times (Quarterly)= Rs.7.00 Lakhs - o AIR 1 time @ Rs65000/- X 4 times (Quarterly)= Rs.2.60 Lakhs - o TV Spots (21 Channels):@ Rs.1.80/- X 4 times (Quarterly)= Rs.7.20 /- Total Budget : Rs.24.80 Lakhs Mid Media Interventions : • Panel Discussion in DD: Panel discussion is proposed on the occasion of mental health day along with mass media publicity initiatives. (Budget – Rs.2.20 Lakhs) • Printing of Toll Free No & Scope of Services in the ASHA Dairy: It is proposed to print it in the ASHA Dairy so that awareness can reach to last miles (No additional fund required, Budget proposed under ASHA Programme. Grand Total : Rs.27.00 Lakhs (Budgetd Under head 204 (IEC/BCC & Printing)
98.2	DMHP Unit						
98.2.1	Internet Charges	Per Unit	20000	0.20	1	0.20	Proposal for 30 DMHP units @ Rs. 20,000/- per unit per annum. Proposed as approved last year
	Total NMHP					8.19	

NCD-3_National Programme for Health Care for the Elderly (NPHCE)

Sl. No.	Scheme/ Activity	Approval 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
	Total NPHCE					31.68	
99	Geriatric Care at DHH					10.00	
99.1	Establishment & Functionalisation of 10 Bedded Geriatric Ward						Ten Bedded Geriatric Ward at DHH: 32 Ten bedded Geriatric wards are functional in all 32 DHHs *Number of Elderly people attended in OPD : 14.50 Lakh *Number Elderly admitted in wards 1.30 Lakh
99.1.1	Non-Recurring Cost						All 32 DHHs are equipped during F.Y. 2017-18. Hence, no new proposal proposed.
99.1.2	Recurring GIA for Functional Geriatric Wards at DHH	Per DHH	300000	3.00	1	3.00	Ongoing Activity Cost Norm: Rs.300000/- Per DHH (GoI norm - Rs.3.00 lakhs per annum) Recurring Budget shall be spent on following: a) Intermittent Cervical traction b) Walking Gait training equipment c) Walking Sticks d) Walking Sticks e) Shoulder wheels f) Pulley g) Walker (Ordinary) h) Cervical Traction (Manual) etc.
99.1.3	Drugs and Supplies						To be met out of State Health Budget
99.2	Establishment & Functionalisation of Physiotherapy Wing						Integrated Physiotherapy Unit (IPU): Integrated Physiotherapy units are functional in all 32 DHHs

Sl. No.	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		State Remarks
					Quantity/ Target	Budget (Rs. Lakhs)	
99.2.1	Non-Recurring Cost	Lumpsum	700000	7.00	1	7.00	Status: All 32 DHHs are equipped during F.Y. 2019-20. Justification: For Integrated physiotherapy unit at DHH level following Equipments to be provided as replacement of old equipments which are purchased during 2019-20 and few new advanced equipments also added Replacement of supplied items: 1. Lumbar and Cervical Auto traction: 1 unit per DHH 2. IFT, TENS and MST Combo therapy: 1 unit per DHH 3. Ultrasound (therapeutic): 1unit per DHH New Items for management of Pain & Neurological disorders: 4. Shock Wave Therapy: The shock wave-therapy used for pain management of musculoskeletal origin , Fasciitis, tendinitis , Muscle spasm etc . 5. Un-weighing System with treadmill: The un-weighing system with treadmill and walking farem with wheel for gait training of neurological patients like stroke rehabilitation, spinal cord injury rehabilitation and old age issues like Parkinson, Fall tendency issues (@1 unit per DHH) 6. Standing frame with wheel (for Gait training) 7. large size Hot pack unit: Hot Pack unit helps in Chronic pain management (@1 unit per DHH) 8. Cryotherapy unit: Cryotherapy unit helps for Acute pain management (@1 unit per DHH) Budget revised as per recommendation of NPCC @ Rs. 7.00 Lakhs per DHH
99.2.2	Recurring Cost	Lumpsum/ Per Annum	0	0.00		0.00	Ongoing Activity Operational Cost for Integrated Physiotherapy Unit (IPU) of DHHs Cost Norms i. @ Rs.1.50 Lakh per DHH consists of >= 10 Blocks -16 DHHs - ii @ Rs.1.00 lakhs for DHHs <= 10 Blocks- 16 DHHs (Capital Hospital & RGH included) The budget is proposed for supporting physiotherapy wing at DHH level. This is not meant for 10 bedded geriatric ward for which fund has been proposed under SI no. 99.1.2 The Proposed Budget not approved, as there are no norms under NPHCE for Operational Cost for Integrated Physiotherapy Unit (IPU) of DHHs.
99.2.3	Drugs and Supplies						To be met out of State Health Budget
99.2.4	Training on Physiotherapist on ICU/ CCU & Stroke Management					0.00	Budget Proposed under HSS-16_Capacity building incl. training_SI.No.201
99.3	IEC/ BCC Activities under NPHCE						Budget Proposed under HSS-19_IEC & Printing_SI.No.204
100	Geriatric Care at CHC/SDH					2.70	
100.1	Establishment & Functionalisation of Physiotherapy Wing						Status: 115 CHC/ SDH IPU are Operational & expected that rest 299 IPU will be functional by June 2026 (recruitment of physiotherapist in process)
100.1.1	Non-Recurring Cost			0.00		0.00	Approved last year, hence no new proposal in 2026-27.
100.1.2	Recurring Cost						

Sl. No.	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		State Remarks
					Quantity/ Target	Budget (Rs. Lakhs)	
100.1.2.1	Old IPUs	Per IPU	30000	0.30	3	0.90	@Rs. 2500/- Per Month X already operational IPUs X 12 months
100.1.2.2	New IPUs	Per IPU	22500	0.23	8	1.80	@Rs. 2500/- Per Month X New IPUs X 9 months
100.1.3	Drugs and Supplies						To be met out of State Health Budget
100.1.4	Training of newly joined Physiotherapists	30/ Per Batch	135000	1.35		0.00	Proposal: Training of newly joined Physiotherapists Integrated with Cadre based Training of Physiotherapists , hence no additional budget proposed
101	Geriatric Care at PHC/ SHC AAM					18.88	
101.1	Non-Recurring Cost						1. Status at PHC/UPHC Level: Physiotherapy[Kits (Tens, MST, Portable Ultrasound , Thera band, hand Gripper, Portable Pully, Finger extensor band and carry bag to keep all the sets of equipment/instruments) have already been provisioned for PHC/UPHC AAMs . This kits are being used for home based physiotherapy care & services by Physiotherapists . 2. Apart from these , part time Physiotherapists are also engaged at UPHC level & funds for the same have been given under NUHM component. Hence, No New Proposal this year.
101.2	Recurring Cost						
101.2.1	Aids and Appliances for Sub-Centre-AAM	Per SC-AAM	9988	0.10	189	18.88	Ongoing Activity: Proposal: Essential supportive equipment/instruments for needy patients (for SC AAM level - For FY 2026-27 : 6688 SC AAM) As per NPHCE OG, the home bound/ bed ridden cases may require calipers (knee brace), walker, walking-stick, tripod stick, clutches (elbow & auxiliary), foldable wheel chair, weight cuff (various weights), bed pan, portable commode, air-bed and other supportive devices for making them ambulatory. A set of such equipments / instruments shall be kept at SC-AAM level. The devices are to be provided to home bound / bed ridden needy persons. Mode of Utilisation of EIF 1. A set of such equipments / instruments shall require and kept at SC-AAM level. 2. The devices are to be provided to needy persons as per advice of team (team consist of MO/ MO AYUSH Physiotherapist / CHO /HW-M) after due home visit to concerned person by respective service provider. 3. Proper stock, store and distribution register has to be maintained for record. Existing procedure and responsible person for the SC AAM will maintain the register and MO will verify the register accordingly. The recipient signature and detail clearly may be maintained. Budget: @Rs.10,000/- per SC AAM (GoI norms-Rs.10,000/- SC-AAM(recurring))
101.2.2	Capacity Building/ Training						No New Proposal this year
102	Community Based Intervention					0.10	

Sl. No.	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		State Remarks
					Quantity/ Target	Budget (Rs. Lakhs)	
102.1	Physiotherapy Services for Home Bound/ Geriatric Cases						Proposal: Expected to cover 1500 cases (average 50 cases per district) in year. Total No. of visits proposed: 1500 X 12 =18000 Honorarium Proposed @ Rs. 750/- Per visit Budget Proposed under HSS-9_ Incentives_SI.No.186
102.2	Elderly Support Group Meetings	4 times/ Per Year		-		0.00	New Activity Proposal: Form & nurture elderly support groups namely “Sanjeevani” at SC-AAMs across the State Objectives: To provide a community-based support system for elderly individuals at the grassroots level, enhancing their physical, mental, emotional, and social well-being. The Group shall be formed at SC-AAM level with min. group of 15-20 members. Eligibility for Members: Senior citizens (60 years and above) residing in the SC/PHC catchment area. Voluntary enrollment. Inclusion of both male and female members. Frequency of Sitzings : 4 times in a year (@300/- per meeting) This activity will be coordinated by HW-M of concerned SC AAMs. Details at NPHCE Write up Annexure Folder (Annexure-C) Proposed budget to be met out of head wellness session- CPHC head, hence budget dropped
102.3	Comprehensive Geriatric Services			0.00		0.00	Proposal: CGA for Strengthening Geriatric Services Background: Odisha accounts for 9% of the country's total elderly population, with 86.3% residing in rural areas. Odisha is ranked among the top six states with the highest proportion of elderly persons, with the share projected to rise from 9.5% in 2011 to 15.8% by 2031. Budget Shifted to HSS-1 CPHC, as per recommendation in the NPCC meeting
102.4	Camp for Screening & Services at Old Age Homes	Per Old Age Home	5000	0.05	2	0.10	Ongoing Activity proposed as approved last year Details write up at NPHCE write up annexure
103	State specific Initiatives and Innovations						Not Proposed
Total						31.68	

NCD-4_National Tobacco Control Proramme (NTCP)

Sl. No.	Scheme/ Activity	Approval 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
	Total NTCP					9.08	
104	Implementation of COTPA - 2003					2.48	Refer NTCP Write-up Annexure for details of achivement and justifications for major plan 2026-27
104.1	Implementation of COTPA- Periodic Enforcement Drives	Per Visit	3000	0.03	36	1.08	Name of the Activity: Provision of Mobility Support to enforcement squads for conducting drives and take action on violations of Tobacco Control Laws Background: The enforcement squad constitutes of officers from Deptt. Like Police, Drugs Controller, Food Safety & Standard Authority, Health & FW and local representatives. The squad is supposed to visits 3 times in a month including visits to Tobacco Free Villages. Hence, estimated nos. of visits: 36 visits per annum X 30 districts = 1080 visits
	Tobacco Free Village initiatives	Per Village	7000	0.07	20	1.40	Name of the Activity: Tobacco Free Village initiatives Nature of Activity: New Background: As per the NFHS V, the prevalence of tobacco Consumption in rural area in Odisha is 42.7 % (44.9% in India). The high prevalence of Tobacco consumption in rural areas underscores the need for targeted interventions at village level. Discouraging tobacco use and encouraging users to quit is an initiative to increase public Health and enhance the overall quality life and well being of rural population. Target 2026-27: As it is an intensive initiative, State has decided to focus 20 villages from 20 respective Panchayats in each district of the State. Thus, a total of 600 villages in the State will be targeted during 2026-27. Activities Planned under the Initiatives: The activities proposed are as per the guidelines shared by Govt of India following “SOP for villages to be Tobacco Free”. Budget Proposed: Village Level Activities: @Rs.7000/- Per Village X 600 villages = Rs.42.00 Lakhs Details of Budget & Write-up is at NTCP Write-up Annexure
104.2	Any Other Activities						
104.2.1	Training/ Capacity Building of enforcement squads						Budget Proposed under HSS-16_Capacity building incl. training_SI.No.201
104.2.2	Printing of Challan Book for leivy fine						Budget Proposed under HSS-19_IEC & Printing_SI.No.204
104.2.3	IEC activities under NTCP						Budget Proposed under HSS-19_IEC & Printing_SI.No.204

Sl. No.	Scheme/ Activity	Approval 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
104.2.4	Planning & Management						Activities: 1. Coordination Committee Meetings (State/ District Level): 2. Review Meetings: 1.1. State Level Review Meeting- Integrated with NCD Quarterly Review Meeting - 1.2.District Level Review meetings -Integrated District Level Monthly Meeting 3. Monitoring & Supportive Supervision: Utilise the pooled fund available at State/ District/ Block/ Sector Level Budget to be met out of Pooled fund placed at HSS-11_Technical Assistance_ SI.No.194 (Details at Write-up Annexure)
105	Implementation of ToEFI Guideline					2.60	
105.1	Tobacco Free Educational Institutions (ToFEI)- Targeting New Schools/ Colleges	Per School	7000	0.07	34	2.38	Ongoing Activity Background : ToFEI are Schools & Colleges that have implemented policies & activities to eliminate tobacco use in their premises including 100-yard radius around the campus. Till date 6345 Schools & 302 Colleges certified under ToFEI. Target 2026-27: • The proposal is to upgrade 1000 identified Schools as ToFEI under PIP 2026-27. •State has also taken initiatives to declare 600 villages as Tobacco Free Villages in F.Y. 2026-27. Hence, due care shall taken to upgrade all Schools/colleges located under the same 600 targeted villages selected for implementing Tobacco Free Village Initiatives as it one of the criteria for becoming eligible for certification. After saturation of requirements under said 600 villages, schools of other areas will be taken up. Budget Proposed: School Level Activity: @Rs.7000/- Per School X 1000 Schools/ Colleges= Rs.70.00 Lakhs Details of Budget & Write-up is at NTCP Write-up Annexure
105.2	Tobacco Free Educational Institutions (ToFEI)- Support for maintaining status for already certified Schools/ Colleges under ToFEI	Per District	22000	0.22	1	0.22	Ongoing Activity Background: There are 6345 Schools & 302 Colleges certified under ToFEI in last 5 years. There is indeed necessary to support various tobacco control awareness activities in these schools to sustain the ToFEI mandate. In addition, replacement of few IEC materials may be required in same schools & Colleges. Further, orientation of School Health ambassadors are essential to sustain the mandate. Budget Proposed: 1. Convergence Meeting under the Chairmanship of Collector with participation of DEO, BEO & other School Authorities: @ Rs.10000/- per district X 30 districts = Rs.3.00 Lakhs X 2 Times = Rs.6.00 Lakhs 2. Sensitization of School Health ambassadors in VCs of selected certified schools: Refreshment & RP Cost from Both the Deptt @ Rs. 2000/- per district X 30 districts = Rs.0.60 Lakhs
105.3	Any Other Activities						
105.3.1	Tobacco Free Village initiatives						Budget Shifted to SI No.104, Implementation of COTPA - 2003 as per recommendation of NPCC

Sl. No.	Scheme/ Activity	Approval 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
105.3.2	Training/ Capacity Building- For certification of Schools/ Colleges.						Budget Proposed under HSS-16_Capacity building incl. training_SI.No.201
105.3.3	Training/ Capacity Building- For Tobacco Free Village initiatives						Budget Proposed under HSS-16_Capacity building incl. training_SI.No.201
106	Tobacco Cessation					4.00	
106.1	Capex cost for Establishment & Functionalisation of Tobacco Cessation Centres	@2 Per District	100000	1.00	2	2.00	Proposal: Establishment of Tobacco Cessation Centres at Dental Wings of selected CHCs (Nature of Activity: New) Background: The proposal is to establish & make functional model Tobacco Cessation Centres integrated with Dental wings of selected CHCs . The therapy for quitting tobacco use at these centres shall involve individual & group counseling and also include the dispensing the of pharmacological aids. Tobacco Cessation Centres are already been functional at all DHHs Level. Target for 2026-27: It is planned to make functional 60 such centers (average 2 per district) as model centres across the State. The selection of CHCs shall be based on the foot fall at Dental OPD in last FY as per HMIS report. Modalities of Implementation: • The Dentists have already been declared as In-charge of Tobacco Cessation Centres in the State with GoO. • The proposed TCC at CHC level shall be made functional by equipping selected Dental wing (CHC Level)with necessary EIF & other materials, drugs, trained Dentists and counselors through the funding from NHM & State Budget (as detailed below). • In order to feed cases to CHCs, CHOs shall be trained as part of cadre based training on Fagerstrom Nicotine dependence Scale, Behavioral Counseling and referral system. The training cost for the same has been projected under CPHC head. Budget: Equipping Dental wing with necessary EIF & Materials (Ref : Guidelines shared by GoI) • Non Recurring Items (@ Rs. 1,000,00/- as one time cost) x 60 Units= Rs. 60.00 Lakhs - o Clinical Diagnostic Instruments (Mouth Mirror, Tongue Depressor , Cheek retractor - o Carbon monoxide monitor - o Branding of Centre , Flip Book & standees
106.2	Opex Cost for Tobacco Cessation Centres						
106.2.1	Training of Dentists at SCB, Dental College on operational modalities of TCC & Pharmacotherapy						Budget Proposed under HSS-16_Capacity building incl. training_SI.No.201
106.2.1	Training of Counsellor						Budget Proposed under HSS-16_Capacity building incl. training_SI.No.201
106.2.2	Procurement of Drugs & Consumables	Per District	200000	2.00	1	2.00	Status: Number of Pharmacotherapy (NRT) sessions have been provided for Quitting the Tobacco use: 16,611 Proposed as approved Last year
106.2.3	Printing of Records, Reports & other consumables						Budget Proposed under HSS-19_IEC & Printing_SI.No.204
	Total NTCP					9.08	

NCD-5_National Programme for Prevention and Control of Non Communicable Diseases (NP-NCD)

Sl. No.	Scheme/ Activity	Approval 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
	Total NPCDCS					30.30	
107	NCD Clinics at DH					0.84	
107.1	Establishment of NCD Clinic at DHH						Status: NCD Clinics have already been established at all DHHs accorss the State. Hence, no additional budget required for establishment of NCD Clinics at DHHs.
107.2	Management of NCD Clinic at DHH						
107.2.1	Human Resources						
107.2.2	Drugs & Consumables						Manage through the State Health System
107.2.2	Drugs & Consumables						Manage through the State Health System
107.2.3	Diagnostic Services						Manage through NIDAN: Free Diagnostics Services (State Budget Scheme)
107.2.4	Operational Contingencies & Consumables	Per DHH/ Per Month	7000	0.07	1	0.84	Head of Expenses: Internet Charges for Management of Portal, Cartridges for Printing of records & reports, patient treatment cards, AMC/ CMC of computers, branding etc. Approved Amount Last Year in RoP: Rs.25.60 lakhs
107.3	Capacity Building/ Training						
108	NCD Clinics at CHC/SDH					1.32	
108.1	Establishment of NCD Clinic at CHCs/ SDHs						Not Proposed
108.2	Management of NCD Clinic at CHCs/ SDHs						
108.2.1	Human Resources						Manage through the State Health System
108.2.2	Drugs & Consumables						Manage through the State Health System
108.2.3	Diagnostic Services						Manage through NIDAN: Free Diagnostics Services (State Budget Scheme)
108.2.4	Refresher Training proposed for Medical Officers & Nursing Officers on clinical management of NCD Cases & reporting.						Budget Proposed under HSS-16_Capacity building incl. training_SI.No.201
108.2.5	Operational Contingencies & Consumables	Per CHC & SDH/ Per Month	1000	0.01	11	1.32	Head of Expenses: Internet Charges for Management of Portal, Cartridges for Printing of records & reports, patient treatment cards, AMC/ CMC of computers, branding etc.
108.3	Any Other Services						
108.3.1	Expanded Package of Services at CHC/ SDH Level						EPS Domains: (1) Oral, Eye and ENT care, (2) Elderly and Palliative care; (3) Emergency and Trauma management; (4) Mental, Neurological, and substance use disorders.
109	Cardiac Care Unit (CCU/ICU) including STEMI					28.14	

Sl. No.	Scheme/ Activity	Approval 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
109.1	ICUs/ CCUs						Background: Currently, ICUs/ CCUs are functional in 20 districts as part of Critical Care Block Hospitals (CCBH), being established under PM-ABHIM. Rest ICUs/ CCUs are maintained at 10 DHHs as separate wings. However, the PM-ABHIM Sheme ends in F.Y. 2025-26. Hence, proposal has been submitted to continue the recurring cost provisioned under CCBH in NP-NCD PIP. Earlier Provision under PM-ABHIM (50 bedded CCBH) Non-Recurring Cost: Rs.2375.00 lakhs (Civil & EIF) Recurring Cost: Rs.459.00 lakhs (Rs.24.00 lakhs for Non HR recurring i.e. Equipment Maintenance, Oxygen Refilling, Teleconsultation, Drugs, Consumables like reagents, diagnostic kits, infection prevention masks, gloves etc. & rest Rs.435.00 lakhs for HR cost)
109.1.1	Capex - ICU/ CCU			0		0.00	Already been established with the funding from PM-ABHIM & NHM
109.1.2	Opex- ICU/ CCU						
109.1.2.1	Human Resources			0		0.00	HR Proposed under HSS-9_HRH_Service Delivery for 20 CCBH. For 10 rest ICU/ CCUs are being managed through existing HR under State Budget.
109.1.2.2	Drugs & Consumables			0		0.00	Manage through the State Health System
109.1.2.3	Diagnostic Services			0		0.00	Manage through NIDAN: Free Diagnostics Services (State Budget Scheme)
109.1.2.4	Three months ICU case management training of Medical officers & Nurshing Officers						Budget Proposed under HSS-16_Capacity building incl. training_SI.No.201
109.1.2.5	Operational Contingencies & Consumables	Per Unit	2400000	24	0	0.00	1. ICU/ CCUs operational as part of CCBH: @24.00 lakhs X 20 units= Rs.480.00 lakhs- Recommended for Approval 2. ICU/ CCUs operational as a wing in DHH: @Rs. 5.00 lakhs X 10 units = Rs.50.00 Lakhs- Activity dropped as per recommendation of NPCC
109.2	STEMI Programme						Status : This programme has been implemented across all 30 districts of the State since 2024-25. There are 4 functional hubs (SCB, Cuttack, Capital Hospital, MKCG, VIMSAR). There are 32 DHHs, 32 SDHs , 58 CHCs & 7 UCHC spokes available & functional. This has been implemented in PPP mode. The agency is providing online ECG interpretation and reporting along with development of STEMI registry. The training has been given to Medical Officers for Thrombolysis. Performance (2021 to 31st March 2025): ECG performed: 200599 STEMI Cases Identified: 4769 Other Critical Cases Found: 11051 Thrombolysis done: Plan : Additional 65 CHC spokes shall be added to the existing ones in F.Y 2026-27.

Sl. No.	Scheme/ Activity	Approval 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
109.2.1	ECG Interpretation & Tele reporting by Agency	Per ECG	147	0.00	16425	24.14	Ongoing Activity Unit Cost Rs.147/- (Rupees One hundred & forty Seven only) per each ECG and it's Interpretation & Tele-reporting Provisions by the Agency : ECG machine, Communication Devices, Analytic Software (Dashboard) , Application Software ,internet cost, recurring consumables related to ECG (Thermal Paper rolls, Gel etc.) but excludes any manpower deployment and consumables required for treatment at the hub / spoke hospitals. Proposal: 2026-27 Approximately ECG Calculation: (Budgeted) • Per MCH Hub: Average-30 ECG per day per MCH Hub i.e. (4*30*365=43800) • Per DHH: 20 ECG Per day per DHH Hub i.e. (32*20*365=233600) • Per SDH/ CHC: 3 ECG per day per spoke (SDH & CHCs/ UCHCs) (32*5*365=58,400) & (130*5*365=2,37,250) FY 2026-27= (43,800+2,33,600+58,400+237250)=5,73,050* Rs.147= Rs. 842.38 Lakhs
109.2.2	STEMI Kit	Per Unit	100000	1.00	4	4.00	1. Proposal for new Spokes : STEMI Kit for New Spokes Plan is to include additional 65 CHCs as spokes in the current year (Progressive CHC Spoke 58+65+7= 130 CHC Spokes) Budget: @Rs.1.00 lakhs per unit X 65 units = Rs.65.00 lakhs -Recommended for Approval 2. Proposal for Trop-T Test at Existing & New Spokes: Activity Shifted to HSS-7_Other Initiatives , SI No-181 As per recommendation of NPCC Justification: Total 200599 ECGs have been performed out of which 4769 STEMI patients have been identified and referred for better care to hub From the inception of the program in 2021 to till 31st March 2025. Also 11,051 other critical cases have been found. Total cases required for Trop-T test (4769 + 11051= 15820) Budget: @500/- per kit X 15000 cases = Rs.75.00 Lakhs Budget Revised As per recommendation of NPCC
109.2.3	PCI/ Thrombolysis	Per unit	18000	0.18	0	0.00	MCH Hub @100 per MCH Hub X 4 Hub= 400 cases DHH Spoke @50 per DHH Spoke X 31 = 1550 cases SDH Spoke @ 3 per case - 32 SDHs x 3 = 96 cases CHC Spoke @ 2 per case - 130 CHCs x 2 = 260 cases Total Cases: 2306 cases
109.2.4	State level Training on STEMI for Medicine Specialists / MOs						Budget Proposed under HSS-16_Capacity building incl. training_SI.No.201
109.3	Strengthening of Cath Lab						

Sl. No.	Scheme/ Activity	Approval 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
109.3.1	Non Recurring: Single Plane Cath lab (Turnkey Basis) & Coronary Care Unit Equipment	Lumpsum	46000000	460	0	0.00	Status: At present, four Hubs with functional Cath Labs are operational in Odisha: 1. SCB Medical College & Hospital, Cuttack 2. MKCG Medical College & Hospital, Berhampur 3. VIMSAR, Burla 4. PGIMER & Capital Hospital All existing Cath Labs are managed and operated in-house. Proposal: It is proposed to establish four new Cath Labs on a turnkey basis (2 from State Budget & 2 under NHM PIP), including manpower, in the following Medical College BB Medical College & Hospital, Bolangir Government Medical College & Hospital, Sundergarh Funding: Koraput & Bolangir Cath Labs: Proposed under NHM in FY 2026–27 Keonjhar & Sundergarh Cath Labs: Proposed under DMF Budget: Cost per Cath Lab: Infrastructure & Equipment: Rs. 350 Lakhs (Cath Lab)+ Rs. 110 Lakhs (Coronary Care Equipment). i.eTotal per Cath Lab: Rs. 460 Lakhs Total Budget for FY 2026–27 (2 Cath Labs): Rs. 460 × 2 = Rs.920 Lakhs Activity Recommended in the Discussion of NPCC Meeting
109.3.2	Cath Lab Recurring cost (for inhouse cath labs)	Lumsum	42000000	420.00	0	0.00	Status: 4 Cath labs are operational at SCB MCH, Cuttack, MKCG MCH Berhampur, VIMSAR Burla & PGIMER & Capital Hospital through in-house system. Activity Recommended in the Discussion of NPCC Meeting
109.4	ECG at PHC Level	Per Machine	100000	1.00		0.00	Status: ECG machine is supplied up to 414 SDH & CHC under NPNC D Programme. Further this service may be expand to PHC/UPHC-AAM level for early identification of CVD Cases and in time referral. Proposal: ECG machine will be supplied with ECG interpretation solution as spoke where at least MBBS, Medical Officer posted. The total no of PHC /UPHC where MO (MBBS) present is 956. Total Budget: FY-26-27: 956*Rs.1.00= Rs.956.00 Lakhs (To be met out of State Budget Scheme)
110	Other NP-NCD Components					0.00	
110.1	Population Based Screening of Common NCDs						Background: Monday & Thursday has been declared as NCD day wherein suspected cases are generally mobilised for initial screening by health service providers across SHC & PHC AAMs.

Sl. No.	Scheme/ Activity	Approval 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
110.1.1	Capex			0		0.00	Essential equipment/ instruments has been provisioned at SHC & PHC AAMs in previous years for population based screening of common NCDs. Hence, no additional fund proposed.
110.1.2	Opex (Printing cost of CBAC forms, registers & reporting formats)						Budget Proposed under HSS-19_IEC & Printing_SI.No.204
110.2	Oral Cancer Screening & Services						
110.2.1	Capex					0.00	Requirements of Equipment/ Instruments have been saturated upto SHC AAMs as per the guidelines in previous years. Hence, no new proposals proposed.
110.2.2	OpEx					0.00	Opex Cost : Drugs, Consumables, Other essentials & training are being managed through State Health Budget.
110.3	Brest Cancer Screening & Services						
110.3.1	Capex						Status:
110.3.1.1	Capex -Procurement of Mamography Machine						Proposal: 10 districts have mamography machines (either procured and functional or in-process of procurement. Hence, proposed for rest 20 machine for DHH/ MCHs. Budget: Rs. 150.00 Lakhs Per unit x 20 Units= Rs. 3000.00 Lakhs To be Met out of State Budget
110.3.2	OpEx						To be met out of State Budget
110.3.2.1	Augmenting Clinical Breast Examination with Digital					0.00	Nature of Proposal: New
110.4	Cervical Cancer Screening & Services						
110.4.1	Capex						1. DHH Level :
110.4.2	OpEx			0		0.00	
110.4.2.1	Opportunistic Screening for Cervical Cancer						Proposal: Improving access, coverage and treatment of Cervical Cancer Cases through opportunistic screening at DHH Level. Details of Justification is at NP-NCD Write-up Annexure Budget Proposed under HSS-21_State Specific Initiatives & Innovations_SI.No.206
110.4.2.2	Refresher/ Hands-on Training on VIA						Budget Proposed under HSS-16_Capacity building incl. training_SI.No.201
110.5	Day Care Chemo Therapy Centers						Status: Day Care Chemo Therapy Centers have been established in all 32 DHHs.
110.5.1	Capex						Already with the support of State Health Budget.
110.5.2	OpEx						OPEX Cost : Drugs, Consumables & Other essentials are being managed through State Health Budget. However, budget has been proposed for newly inducted Medical Officers & Nursing Officers. (due to re-positioning/ retirement)
110.5.2.1	Training of Newly inducted Medical Officers & Nursing Officers						Budget Proposed under HSS-16_Capacity building incl. training_SI.No.201
110.6	Chronic Obstructive Pulmonary Disease (COPD)						
110.6.1	Capex (Hub) - Spirometry Lab		0	0.00		0.00	Status: Available at all DHH, SDH and CHC level Hubs. Proposal: Requirement already saturated, hence no new proposal.

Sl. No.	Scheme/ Activity	Approval 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
110.6.2	Capex (Spoke) - Peak Expiratory Flow Rate Meter		0	0.00		0.00	Status: Peak flow meters have already been procured and supplied to all public health facilities upto PHC/ UPHC level as per COPD guidelines. Proposal: Requirement already saturated, hence no new proposal.
110.6.3	Opex - Hub & Spoke		0	0.00		0.00	Durgs & Consumables: Managed through the State Health Budget
110.7	Nonalcoholic Fatty Liver Disease (NAFLD)						
110.7.1	Capex (Hub)						Hub is at 8 DHH where Radiologists are available.
110.7.1.1	Hub -Diagnostic Equipments and Instruments	Per Mechine	8000000	80.00	0	0.00	Procurement of Fibroscan: Not Approved 1. Name of the proposal: Procurement of Fibroscans in District Hqr. Hospitals for strengthening diagnosis /confirmation of Nonalcoholic Fatty Liver Disease. Further high end 3D/4D USG Machine already supplied to 29 Districts. Nature of Proposal: Re-Proposed (Approved during F.Y. 2024-26) Status of Procurement: RFP prepared, tender floated and thus procurement process shall be finalised by March-2026. Recurring cost shall be met out of NIDAAN (State specific Scheme for Diagnostic Services). Hence no additional Budget Proposed 2. Initial screening shall be done at in-house labs / Empanelled Lab for high-end tests - No additional budget required
110.7.1.2	Capex (Spoke) - BMI Kiosk with digital printer at Facilities	Per Machine	50000			0.00	Not proposed as the State has been continuing this activity with available weighing machine and stadiometer.
110.7.2	Opex - Hub & Spoke						All Recurring cost shall be met out of State Health Budget including Kits & Consumables for Diagnostic services.
110.8	Stroke						Hub is functional at 3 MCHs and Capital Hospital
110.8.1	Capex (Hub) (CT Scan Machine (64-Slice)	Lumsum				0.00	Available and functional at SCB MCH, VIMSAR MCH, MKCG MCH and Capital Hospital, hence, no new proposal in the current year.
110.8.2	Capex (Spoke) (Intracranial Bleed Detector/ Symptomatic Diagnosis)	Lumsum	2500	0.03		0.00	Intracranial Bleed Detector/ Symptomatic Diagnosis will be supplied up to Hub MCHs, DHHs, SDHs and CHC/UCHCs Total Facilities: 4 Hub MCH, 31 DHH, 32 SDH and 384 CHCs/UCHCs. i.e. 451 Budget: FY 26-27: Rs.2500*451=Rs.11.28 Lakhs Activity Dropped as per the Discussion in the NPCC Meeting
110.8.3	Opex (For Hub and Spokes)		0	0.00		0.00	To be met out of State budget
110.8.3.1	Capacity Building/ Training	Lumsum	0	0.00		0.00	Proposed under Sl. No. 201
110.9	Any Other Services						
110.9.1	IEC/ BCC Activities under NP-NCD						Budget Proposed under HSS-19 IEC & Printing_Sl.No.204

Sl. No.	Scheme/ Activity	Approval 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
110.9.2	Assessment & Recognition of public Health facilities for providing comprehensive NCD Services at DHHs	Lumpsum	1030000	10.30		0.00	Background/ Rationale: A lot of investments has been made over the years to equip Public Health Facilities for delivering quality services, especially for treatment/ management of NCDs. However, different DHHs are in different status in terms of providing comprehensive and quality NCD services. Hence, State has proposed to make an extensive assessment of all DHHs with pre-define checklists. This will be an annual event for strengthening of facility based NCD services at DHH Level. Further the 3 best performing DHHs will be awarded/ recognised. Assessment Modalities: -District team will initially do the internal assessment at their level (by any wing officer from CDM & PHO office & one Prog. Manager). The DHH scores more than 70% will be qualified for State level external assessment. Proposals: 1. Award/ Recognition: 1st prize- Rs.5.00 lakhs, 2nd Prize- Rs.2.00 lakhs & 3rd Prize-Rs.1.00 lakhs, Commendation- Rs.0.10 lakhs (3nos of DHHs) Total Budget: Rs.8.30 lakhs 2. Gap Closer: To be met out of State Budget. 3. Other Incidental Expenditure & assessment cost: Rs.2.00 lakhs Activity Dropped as per the Discussion in the NPCC Meeting Details is at NP-NCD Write-up Justification Annexure
110.9.3	Kidney Care on Wheels	Per Block	1554000	15.54	0	0.00	
110.9.4	Management of Type-1 Diabetics Mellitus (T1D)	Lumpsum	20761470	207.61		0.00	Nature of Proposal: New Proposal: Type 1 Diabetes Mellitus (T1DM) is an emerging public health concern with profound implications for children and adolescents. Globally, around 8.75 million people live with T1DM, and India contributes nearly one-fifth of this global burden. Alarming, about 17.4% of Indian T1DM cases occur among children and young people under 18 years, highlighting the urgent need for early detection and sustained management. Budget Proposed under HSS-21, State-specific Initiatives and Innovations, SI No-206. Details is at Innovation Write-up Justification Annexure
110.9.5	Planning and M&E						Activities: 1. Review Meetings: 1.1. State Level Review Meeting- Integrated with NCD Quarterly Review Meeting 1.2.District Level Review meetings -Integrated District Level Monthly Meeting 2. Monitoring & Supportive Supervision- Utilise the pooled fund available at State/ District/ Block/ Sector Level Budget to be met out of Pooled fund placed at HSS-11_Technical Assistance_ SI.No.194 (Details at Writeup Annexure)
111	State specific Initiatives and Innovations						
	Total NPCDCS					30.30	

NCD-6_Pradhan Mantri National Dialysis Programme (PMNDP)

Sl. No.	Scheme/ Activity	Approval 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
	Total PMNDP					60.98	
112	Haemodialysis Services					60.98	Status: All districts saturated- At least one Haemodialysis Center available per district (Total Centers Operational-65, Total District-30) Total Machines Available: 471 Management: Management of Haemodialysis Centers are through PPP mode. Details at PMNDP Write-up Justification Annexure
112.1	Non-Recurring Cost	Per Machine	800000	8.00	0	0.00	Proposal: Provisioned for Additional Dialysis Machines for High Case load existing Facilities Justification: - Increasing patient load at different health facilities - Reduce overload on existing machines and keep the average load per machine below 3 sessions per day and thereby ensuring quality. - High session rates increase workload for doctors, technicians and nurses, potentially leading to fatigue. Additional machines can spreads out sessions, easing staff pressure and improving quality service delivery. - Minimizing Patient Waitlists & Reduces backlog, ensuring timely treatment and improving patient satisfaction. Proposal for New Machines: Rate per Machine - @Rs. 8 Lakhs Per Machine Details Justification & Budget is at PMNDP Write-up Annexure
112.2	Recurring Cost						
112.2.1	Session Cost for Existing Machines	Per Session	1100	0.011	7920	60.98	Proposal for the 33 Centres (1st Phase): Service Provider: M/s Rahi Care Private Limited, Chandigarh Average Sessions per machine per month = 60 Rate per Session: Rs.1,100/- per session (3% increment of session cost @Rs.1,068/- in the previous year) Total Machine: 338 Total Sessions for 12 months = 2,43,360 (60 sessions per month per machine x 338 machines x 12 months) Budget proposed for 12 months in 2026-27 = Rs.26,76,96,000/-(@Rs.1,100/-per session x 2,43,360 sessions) Budgeted 70% looking in to Expenditure trend of previous years

Sl. No.	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		State Remarks
					Quantity/ Target	Budget (Rs. Lakhs)	
112.2.2	Session Cost for Existing/ New Machines	Per Session	841	0.01	0	0.00	Proposal for the 32 Centres (2nd Phase): Service provider: M/s ESKAG Sanjeevani Pvt. Ltd, Kolkata Average Sessions per machine per month= 70 Rate per Session: @Rs.841/- (3% increment of haemodialysis session cost @Rs.816/- in the previous year) Total Machine: 133 Total Sessions for 12 months = 1,11,720 (70 sessions per month per machine x 133 machines x 12 months) Budget proposed for 12 months in 2026-27 = Rs.9,39,56,520/- (@Rs.841/- per session x 1,11,720 sessions) Session Cost for New Machines: Average Sessions per machine per month= 70 Rate per Session: @Rs.841/- (3% increment of haemodialysis session cost @Rs.816/- in the previous year) Total Machine: 35 Total Sessions for 3 months = 7350 (70 sessions per month per machine x 35 machines x 3 months) Budget proposed for 3 months in 2026-27 = Rs.61,81,350/- (@Rs.841/- per session x 7350 sessions) Budgeted 70% looking in to Expenditure trend of previous years
112.2.3	Drugs & Consumables for Haemodialysis (Erythropoietin, iron, vitamin, etc) & Peritoneal dialysis (refer page 17 of guideline)						Budget to be met out of State Health Budget. No new proposal proposed in 2026-27.
112.3	IEC Activities under PMNDP						Budget Proposed under HSS-19 _IEC & Printing_ Sl.No.204
113	Peritoneal Dialysis Services					0.00	
113.1	Peritoneal Dialysis Services under PMNDP	Per Patient	22000	0.22	0		Background: Pradhan Mantri National Dialysis Programme (PMNDP) is being implemented in all 30 districts under PPP Mode. Peritoneal Dialysis is being implemented in SCB MCH, Cuttack. Budgeted as following Estimated cost for Peritoneal Dialysis per patient (As per PMNDP Guidelines): a) Catheter Initial kit including transfer set and adaptor: Rs. 11,000.00 b) One time Patient Support for Monitoring tools (BP apparatus, IV stand, weighing scale): 3000/- c) Quarterly replacement of transfer set: 2000/- (Three per year) d) PD bag (including training support): Between Rs.200.00-Rs. 220.00 e) Monthly requirement: 90-120 bags per patient Monthly per patient cost (range) INR 18,000-INR 26,400 say Rs. 22,000/- Current Status: Total 75 cases peritoneal dialysis done at SCB MCH Cuttack. Proposal for 2026-27: 100 Cases Proposed as approved last year approval.
113.2	RO water testing (Bacteriological, endotoxin, Chemical) and tank/pipes disinfection (peracetic acid) for Dialysis			-		-	
Total PMNDP						60.98	

NCD-7_National Programme for Climate Change and Human Health (NPCCHH)

Sl. No.	Scheme/ Activity	Approval 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
	Total NPCCHH					8.00	
114	Implementation of NPCCHH					8.00	To be implemented in all 30 districts with focus on selected districts for Green & Climate Resilient Health Care measures
114.1	Planning and M&E					0.00	
114.1.1	State Governing Body meeting (1 in6 months)					0.00	Gol mandate : Governing Body meeting are to be organized twice in a year integrated with existing OSH&FWS GB platform. Hence no additional Budget required.
114.1.2	Quarterly State Task Force Meetings					0.00	Integrated with Public Health Task force meeting . Hence no additional Budget required.
114.1.3	Quarterly District Task Force Meetings					0.00	Integrated with District Level Task force meeting . Hence no additional Budget required.
114.1.4	Submission of District Action Plan on Climate Change and Human Health (DAPCCHH)					0.00	Activity already taken up in the FY 2024-26 if additional budget required will be met out of HSS-11_Technical Assistance_ SI.No.194
114.1.5	Monitoring, supervision & office contingency					0.00	Activities: 1. Review Meetings: 1.1. State Level Review Meeting- Integrated with NCD Quarterly Review Meeting 1.2.District Level Review meetings -Integrated District Level Monthly Meeting 2. Monitoring & Supportive Supervision- Utilise the pooled fund available at State/ District/ Block/ Sector Level Budget to be met out of Pooled fund placed at HSS-11_Technical Assistance_ SI.No.194 (Details at Write-up Annexure)
114.2	Best practice of community-based intervention on climate change and health	Per Report	20000	0.20		0.00	Not Approved Best practice of community-based intervention on on climate change and health: Two reports @ Rs 20000/- per report Total Rs 40000/- is proposed as per the PIP Guidance 2026-28 NPCHH Gol Two Reports from the State in FY 2026-27
114.3	IEC & Printing					0.00	Budget Proposed under HSS-19_IEC & Printing_SI.No.204
114.4	Capacity Building under NPCCHH					0.00	Budget Proposed under HSS-16_Capacity building incl. training_SI.No.201
114.5	Model Climate Health Service Learning Hub						Not Proposed
114.6	Health System Strengthening (HSS)					8.00	
114.6.1	Climate Resilient Healthcare Infrastructure	Per facility				0.00	To be met out of State Budget
114.6.2	Green (Environmentally Sustainable) and Climate Resilient Measures in Healthcare Facilities						Civil works will be done through HSS and State budget
114.6.2.1	Adoption of Energy efficiency measures in the existing HCFs						

Sl. No.	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		State Remarks
					Quantity/ Target	Budget (Rs. Lakhs)	
114.6.2.1.1	Energy auditing in Healthcare Facilities	Per district	300000	3.00	1	3.00	Background: Energy auditing is a major component to find out exact energy requirement for proper functioning of an institution. As per Gol guidance it can be done per institution in every 3 years interval. Budget proposal for FY 2026-27 @ 3lakhs per district X30 = 90 lakhs Unit Cost @ Rs 10000/-per PHC/UPHC @ Rs 30000/- per CHC/UCHC @ Rs 100000/- per DHH/ Speciality Hospitals as per the proposed unit cost under PIP guidance note of Gol Plan to conduct Energy Audit at NQAS targeted Facilities in the 1st phase.
114.6.2.1.2	Replace existing lighting (Non-LED) with LED	Per district	500000	5.00	1	5.00	Proposal : 40% of the district in which 10% of the Health Care Facilities have to be undergone for LED replacement, installing BLDC fans , other energy efficient equipments like BEE 5 star rated ACs, refrigerators etc. Budget proposal for FY 2026-27 @ 5lakhs per district X 30 = 150 lakhs Unit cost @ Rs 25000/-per PHC/UPHC @ Rs 75000/- per CHC/UCHC @ Rs 200000/- per DHH/ Specialty Hospitals as per the proposed unit cost under PIP guidance note of Gol
114.6.2.2	Adoption of Solarisation (renewable energy) in the exiting HCFs (Cost mentioned below are for off-grid systems)						
114.6.2.2.1	Connectivity of services of prime importance —emergency, essential care, childbirth, freezer for cold chain maintenance (vaccines), new-born care corners with solar power back-up	Per district	2000000	20.00	0	0.00	Background: The Solarisation of the Health Care facilities will be taken by the OREDA and other development partners. Budget proposal for FY 2026-27: For off-grid (decentralised) renewable energy setup with battery back-up and inverter) Budget proposal for FY 2026-27 @ 20 lakhs per districts X4 Districts =80 lakhs Unit Cost @ Rs 15 lakhs/-per PHC/UPHC @ Rs 40 lakhs /- per CHC/UCHC @ Rs 70 lakhs /- per DHHs/ Speciality Hospitals Operational cost upto 2-3% of the estimated cost of the solarpanels Battery cost of Lithium Ion batteries (6-7 Years of battery life) @ Rs 15000/- per kWh of existing solar panel system proposed unit cost under PIP guidance note of Gol 2026-27 Budget proposed for 4 districts (Koraput, Rayagada, Nawarangpur & Malkangiri)
114.6.2.2.2	Operation & Maintenance Cost for Solar System	Lumpsum	4000000	40.00	0	0.00	Proposal on Solarisation of Public Health Facilities: Operation and Maintenance Cost As of today 379, facilities have been provided with Solar Systems across the State. 379 public health facilities consisting of 89 PHCs, 31 CHCs, 5 UPHCs, 251 SCs & 3 SDHs. That total capital cost invested on solar projects across 379 facilities 13.33 Crs. As suggested in the PIP Guidance note from the GOI NPCCHH Division, 3% of project cost i.e Rs 40 lakh to be kept for operation and maintenance cost for the solar projects.
114.6.2.3	Adoption of Water conservation measures						

Sl. No.	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		State Remarks
					Quantity/ Target	Budget (Rs. Lakhs)	
114.6.2.3.1	Install Rainwater Harvesting (RWH) System	Per district	2000000	20.00		0.00	Budget not proposed will be taken up in the HSS Unit cost Proposal for 2026-27: 30% of the district in which 5% of the Health Care Facilities have to be undergone for RWH System . Budget proposal for FY 2026-27 @ Rs 5 lakhs/-per PHC/UPHC @ Rs 8 lakhs /- per CHC/UHC @ Rs 10 lakhs /- per DHHS/ Speciality Hospitals as per the proposed unit cost under PIP guidance note of GoI
114.6.2.4	Installation of Air Quality Index Monitor	Per unit	150000	1.50	0	0.00	New Activity: Installation of Indoor Air Quality Index (AQI) Monitoring Systems Background and Rationale Air pollution is a major environmental risk factor contributing to the burden of acute respiratory infections, asthma, chronic obstructive pulmonary disease (COPD), cardiovascular diseases, and adverse pregnancy outcomes. Health Care Facilities (HCFs), especially focus this year at SDH level critical care units Budget: 1. Standard real-time AQI monitoring unit (PM2.5, PM10, basic gas sensors) with public display-Rs.80000/- 2. Installation, calibration & commissioning : Rs.10,000/- 3. Cloud-based data platform & secure hosting-Rs.20,000/- 4. AI-enabled analytics, alerts & decision-support modules (health advisory linkage, trend analysis)-RS.20,000/- 5. Comprehensive AMC, calibration & consumables (5 years)- Rs. 20000/- Total Cost Per Unit: Rs. 1.50 Lakhs Grand Total Rs 1.50 Lakhs X 32 SDHs =Rs.48.00 lakhs
114.6.2.5	Waste Management						
114.6.2.5.1	Effluent treatment plan (ETP) for toxic effluents from the healthcare facilities to the environments	Pre Health care facility		0.00		0.00	Budget proposed under State funds (BMW).
Grand Total						8.00	

NCD-8_National Oral Health Programme (NOHP)

Sl. No.	Scheme/ Activity	Approval 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
	Total NOHP					3.30	
115	Implementation at DH					1.50	Status: No. of DHHs: 32 in the State HR available (Dentist): All 32 DHHs having Dentist in position.
115.1	Equipment/ Instruments for Dental Wing					0.00	As per facility assessment all DHHs have Dental Chair but 10 DHHs have X-ray but in Non-functional condition. Similarly, RVG machine are to be replaced at 5 DHHs. Budget: a. Dental X-Ray: @Rs.1.00 lakhs Per units b. RVG Machine: @Rs.4.00 lakhs Per units
115.1.1	Dental X-Ray	Per Unit	100000	1.00	0	0.00	
115.1.2	RVG Machine	Per Unit	400000	4.00	0	0.00	
115.2	Operational Expenses for Dental Wing	Lumpsum	150000	1.50	1	1.50	Ongoing Activity Unit Cost Proposed: i. Rs 2.50 Lakh per DHH consists of >= 10 Blocks =16 DHHs ii. Rs.1.50 lakhs per DHH consists of < 10 Blocks= 16 DHH (Capital Hospital & RGH included) GOI Norms :Rs 5.00 lakh per DHH
115.3	Capacity Building/ Training						Activity: Two days training of Dental MO on Oral Pre Malignant Disease Budget Proposed under HSS-16_Capacity building incl. training_ SI.No.201
115.4	IEC/BCC under NOHP					-	Budget Proposed under HSS-19_IEC & Printing_SI.No.204
115.5	Planning and M&E						Activities: 1. Review Meetings: 1.1. State Level Review Meeting- Integrated with NCD Quarterly Review Meeting 1.2.District Level Review meetings -Integrated District Level Monthly Meeting 2. Monitoring & Supportive Supervision- Utilise the pooled fund available at State/ District/ Block/ Sector Level Budget to be met out of Pooled fund placed at HSS-11_Technical Assistance_ SI.No.194 (Details at Writeup Annexure)
116	Implementation at CHC/SDH					1.80	Status: Total No. of CHC/ UCHC/ SDH: 414 CHC/ UCHC/ SDH with Dentist: 363

Sl. No.	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		State Remarks
					Quantity/ Target	Budget (Rs. Lakhs)	
116.1	Equipment/ Instruments for Dental Wing					0.00	As per facility assessment CHC / UCHC/ SDH with dentist (363) have Dental Chair but 15 CHC/ UCHC/ SDH have no X-ray. Similarly, RVG machine are not available at 81 CHC / UCHC/ SDH. Budget: a. Dental X-Ray: @Rs.1.00 lakhs Per units b. RVG Machine: @Rs.4.00 lakhs Per units
116.1.1	Dental X-Ray	Per Unit	100000	1.00	0	0.00	
116.1.2	RVG Machine	Per Unit	400000	4.00	0	0.00	
116.2	Operational Expenses for Dental Wing	Per unit/ Annum	20000	0.20	9	1.80	Ongoing Activity Proposal for FY 2026-27: @ Rs. 20,000/- per institution where dentist are available. Budget Revised as per recommendation of NPCC
117	Mobile Dental Units/Van						Not Proposed
118	State specific Initiatives and Innovations					-	Not Proposed
Total NOHP						3.30	

NCD-9_National Programme on Palliative Care (NPPC)

Sl. No.	Scheme/ Activity	Approval 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
119	Implementation of NPPC					5.00	
119.1	Facility based Services			0.00		0.00	
119.1.1	Palliative Care Unit at facility level						Progress overview Facility Based interventions- 10 bedded palliative care wards at all DHHs are functional- Funded under State Budget. No additional budget proposed.
119.2	Home Based Palliative Care Unit					5.00	
119.2.1	Capacity Building/ Training					0.00	Proposal: 1. Training of SHC AAM Team- It is proposed as part of carder base training of SC AAM Team. Hence, no additional budget proposed under this section. 2. Training of Medical Officers of PHC/ UPHC AAM- It is proposed as part of carder base training of MO at PHC AAM. Hence, no additional budget proposed under this section. 3. Training of MHU Team on Home Based Palliative Care There are 177 MHUs functional across the State, which has three clinical service providers i.e. MO AYUSH, ANM & Pharmacist. The plan is to train MO AYUSH & ANM on home based palliative care. Duration of Training: 2 days (non residential) Level of Training: District Batch Size: 40 No. of Batches: 9 Budget Proposed under HSS-16_Capacity building incl. training_Sl.No.201
119.2.2	Other Miscellaneous cost for Home Based Palliative Care	Per district	500000	5.00	1	5.00	Ongoing Activity Cost Norm: (Maximum Budget allowed as per guidelines is Rs. 8.00 lakhs per district 30 districts= Rs. 240.00 lakhs) Total Budget proposed is Rs. 150.00 lakhs only Head of Expenses a) Mobility Support/ Travel for Home visits, b) Health Education Sessions for Care givers , c) referral cards, d) Consumables etc. Detailed concept note attached at write-up Annexure
	Total NPPC					5.00	

NCD-10_National Programme for Prevention and Control of Fluorosis (NPPCF)

Sl. No.	Scheme/ Activity	Approval 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
	Total NPPCF					0.00	
120	Implementation of NPPCF						Background: Targeted districts under NPPCF: Angul, Nayagarh & Nuapada Total Mobile Health Teams functional under RBSK: 42 Total Mobile Health Unit functional under State Budget funding: 6 Total Schools in three districts: 3831
120.1	Comprehensive Screening and Management of Flurosis Afflicted individuals in Schools						Proposal-1: 2days Training of MHT & MHUs at State Level. (Batch Size-30, Duration- 2 days, Batches-3, Level of Training- State Level, Type of Training- Offline) Budget: @98000/- per Batch X 3 batches = Rs.2.94 Lakhs Budget proposed under HSS-16_Capacity Building and Training_Sl.No.201 Proposal-2: Screening/ detection (Initial screening by MHU & MHT, Urine/ water sample transportation through NIDAN (diagnostic head under State Budget), radiological examination & lab. Tests at public health labs)- No additional budget required. Budget for diagnostics to be met out of State Budget . Proposal-3: IEC/ BCC 1. IEC Materials to Schools provisioned in 2025-26. Hence, no additional budget proposed. 2. Educational Sessions/ Group Counseling for Diet to be done by MHU/ MHT Teams. Hence, no additional Budget Proposed.
	Total NPPCF					0.00	

NCD-11_National Programme for Prevention Control of Deafness (NPPCD)

S.No.	Scheme/ Activity	Proposal 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
	Total NPPCD					5.60	Status: NPPCD programme is being implemented in all 30 districts in the State. In the year 2022-23, 20631 person screened for hearing impairment at DHH level. Hearing aids are distributed to both RBSK and Adult cases.
121	Screening of Deafness					0.00	
121.1	Strengthening Public Health Facilities for Screening	Per DHH	1500000	15	0	0.00	Background: The prevalence of hearing impairment among general population is 5% and among adult population, the prevalence is even higher. For children below 18 year, hearing impairment related services are available at DEIC. But for the age group population i.e. 19 to 80 and above, there is no such facility available at most of the DHHs. Status: Screened for deafness 39592 (MPR 2024-25) Major Issues/ Challenges: There are no Audiologist positions approved under regular cadre. Available only at DEICs Proposal & Budget: A. Sound Proof Rooms are not established as part of ENT Wing in 25 DHHs and only 7 DHHs have sound proof rooms. So in the FY 2026-27, 10 high case load DHHs (avg. 50 per day) have been targeted for up gradation. (Budget: @10.00 lakhs per DHH X 10 DHHs) B. Equipment/Instruments like portable audiometer and tympinometer for same 10 DHHs proposed. BERA test shall be done at DEIC wherever required. (Budget: @Rs.5.00 Lakhs per unit X 10 DHHs) C. Fixed day hearing assessment and management : Honorarium to Audiologists for Part time Services on fixed Day: Per session @ Rs.1500/- (for 6 hours) X 10 DHHs X 52 Times i.e. 1 time per week = Rs.7.80 Lakhs- Activity shifted to HSS-9, HRH as per recommendation in the NPCC Meeting Detail Proposal is placed at NPPCD Writeup Annexure Folder
121.2	Orientation of Medical Officers on ENT Services						Budget Proposed under HSS-16_Capacity building incl. training_ SI.No.201
121.3	IEC activities						Budget Proposed under HSS-19_IEC & Printing_SI.No.204
122	Management of Deafness					5.6	

S.No.	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2026-27		State Remarks
					Quantity/ Target	Budget (Rs. Lakhs)	
122.1	Strengthening Public Health Facilities for Cochlear Implant						Background: In state, AIIMS is conducting CI Surgery and near about 110 children are operated till date. Funding for it is mobilised through different schemes like ADIP, GJAY, PM-Cares & RBSK. Status of Pending Cases: Total 80 cases ≤ 5 years are pending for Cochlear Implant Surgery. During FY:26-27, a total of 40 cases are planned to be operated . Out of planned 40 cases, which may be treated under PM-Cares funds/ State Budget Scheme. Plan : Under NPPCD, Non recurring cost towards establishment of One State Institute for CI Surgery is proposed in FY 26-27. The recurring cost including cost of chohlea and other contingency expenditures shall be met out of PM-Cares fund/ State Budget Scheme.
122.1.1	Non-Recurring	Lumpsum	4500000	45.00	0	0.00	Proposal : Equipping PGIMER & Capital Hospital for Cochlear Implant Surgery unit. Budget : 1. Refurbishing of Infrastructure: For set up CI surgey Unit: Rs. 10.00 Lakhs (Budgeted under HSS-4_IPHS) 2. Equipment and Technology: • Surgical Equipment: (Rs. 45.00 Lakhs) - o Operating Microscope (ENT-grade)- Rs. 20 Lakhs - o High-speed otologic drill system- Rs. 10 Lakhs - o Cochlear implant surgical instruments set- Rs. 5 Lakhs - o Sterilization and monitoring equipment: Rs. 5 Lakhs - o Micro-suction system: Rs.0.50 Lakhs - o Cautery units: Rs. 4.5 Lakhs • Audiological Equipment: (Managed Form Inhouse System, DEIC) - o Pure Tone Audiometer (Diagnostic type)- - o Impedance Audiometer / Tympanometer- - o BERA (Brainstem Evoked Response Audiometry) System - o OAE (Otoacoustic Emission) Analyzer - o ASSR (Auditory Steady-State Response) Testing system - o Speech Audiometry and Sound Field Systems • Rehabilitation and Programming Tools: (At DEIC) - o Speech Processors and Mapping Software - o Computerized Speech Therapy Modules - o Audiovisual Aids for language training Budget: Rs. 10.00 Lakhs (Budgeted under Infra head)+ Rs. 45.00 Lakhs Activity approved after discussion in the NPCC Meeting

S.No.	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2026-27		State Remarks
					Quantity/ Target	Budget (Rs. Lakhs)	
122.1.2	Recurring		0	0.00		0.00	Target : For the FY 26-27: 40 cases Under RBSK: 27 cases below 2 years Under PM-Cares Fund: 13 cases below 5 years Budget: As per the RBSK Model costing @Rs. 5.20 Lakhs per case which is proposed under RBSK.
122.2	Strengthening Public Health Facilities for Genral ENT Surgery						Background: 5 facilities (DHH) are to be strengthened for condcuting ENT related Surgeries like Myringoplasty, Tympanoplasty, Myringotomy, Grommet Insertion , Stapedectomy, Mastoidectomy/Mastoid Surgery for paediatric and Adult cases. Already infrastrcutre for the same have been identified and the ENT specialists have undergone one month training on FESS and Micro ear Surgery at AIIMS, Bhubaneswar.
122.2.1	Non Recurring	Lumpsum	200000	2.00	0	0.00	Proposal: Equipping 5 DHHs for genera ENT Surgery Based on the facility assessment following equipments are propsoed for the strenthening general ENT surgery at selected 5 District Hospitals during FY 2026-27. Per Unit Cost: Rs. 2.00 Lakhs Budget: @Rs.2.00 Lakhs X 5=Rs. 10.00 Lakhs List of Equipment/Instruments to be procured : 1. Micromotor and Dril with handpiece-2 2. Dril Bits of Different Sizes (Cutting): 10 3. Dril Bits of Different Sizes (Diamond): 06 4. Side Knife: 4 nos 5. Circular Knife: 4 nos 6. Iris Scissior:2 nos 7. Cup Forcep: 2 8. Crocodile Forcep: 4 nos 9. Pick Staright and Curved : 4 Nos 10. Malleus Nipper: 2 nos 11. Micro Ear Scissor: 2 Nos. 12. Suction Adaptor: 2 pcs 13. Suction Tips: 20 pcs
122.2.2	Recurring			0.00		0.00	To be met out of State Health Budget

S.No.	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2026-27		State Remarks
					Quantity/ Target	Budget (Rs. Lakhs)	
122.3	Hearing Aids	Per Case	8000	0.08	70	5.60	Ongoing activity Justification: Under ADIP & UDID scheme, issue of disability certificate is required for availing aids & appliances like hearing aids. The proposal is for adult & children who are confirmed with hearing impairment require hearing aid may not have issued with disability certificate. Many parents & adults are not willing to apply for disability certificate. To meet this gap, such adult & children will be provided hearing aids as per the recommendation of audiologist & speech therapist working at district level. The procurement will be made through GeM/ the existing rate contract of AYJNISHD, Mumbai to be followed & budgeted. Status: 3030nos of Hearing Aids fitted in the F.Y. 2024-25. Proposal for 3000 hearing aids of which 2000 proposed under NHM & rest 1000 may be supplied by SSEPD. Budget: A) Children: @Rs.8000/- per case x 1000 cases = Rs.80.00 Lakhs B) Adult: @Rs.8000/- per case x 1000 cases = Rs.80.00 Lakhs Total Budget: Rs 160.00 Lakh Activity approved after discussion in the NPCC Meeting
123	State Specific Initiatives						Not Proposed
Total NPPCD						5.60	

HSS(U) Annexure - 1: Details of Proposal for FY 2026-27

Amount in Rs. (Lakhs)

Pool	FMR Code	Programme / Them	S.No.	Scheme/ Activity	Approval FY 2026-27 (Rs. In Lakhs)					State Remarks
					Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
								Quantity/ Target	Budget (Rs. Lakhs)	
	HSS(U).1	Comprehensive Primary Healthcare(CPHC)	127	Operationalisation of Ayushman Arogya Mandirs - Urban					0	Background: Proposal: Operanalization of UPHCs & USHCs 1. UPHCs : Currently, 116 UPHCs are operational. However as part of the revised NUHM framework, 09 UAAMs shall be upgraded to UPHCs in 2026-27. 2. USHCs : Further, 140 UAAMs are operational currently. How ever as per the mandate 09 UAAMs will be upgraded as UPHC and 07 new UAAM/USHCs will be created as per norms [(140-9)+7 = 138] Performance Status of functional AAMs - FY 2026-27 a. Target - AAM UPHC - 125 - Operational. - 116 b. Target AAM USHC - 138 - Operational. - 138 (All operational)
	127.1		Infrastructure Strengthening						1. UPHCs : Construction of 9 UPHC building will be proposed, once government land is identified & acquired for the purpose, hence no proposal in the current year. 2. USHCs: Proposed to continue in rented accomodations	
	127.2		Capacity Building including Training						Budget Proposed under HSS-16_Capacity Building Incl. Training_SI.No.201	
	127.2.1		Training of MOs at UPHCs/USHCs						Budget Proposed under HSS-16_Capacity Building Incl. Training_SI.No.201	
	127.2.2		Training of Nuring Officers/ ANMs at UPHCs/USHCs						Budget Proposed under HSS-16_Capacity Building Incl. Training_SI.No.201	
	128		Wellness Activities at AAMs-Urban					0.77		
	128.1		Observation of Wellness Day at UPHC HWCs	Per HWC	50000	0.50		0.00	Budget Proposed under HSS-19_IEC & Printing_SI.No.204	
	128.2		Observation of Wellness Day at USHC HWCs	Per HWC	25000	0.25		0.00	Budget Proposed under HSS-19_IEC & Printing_SI.No.204	
			128.3	Organisation of Yoga session	Per session	500	0.01	192	0.77	Ongoing Activity: Background: This is an ongoing activity as per CPHC mandate. Budget is proposed based on increase in number of operational AAMs. Unit cost remains same. Considering the constraints of availability of trained Yoga teacher, 50% of the total budget is proposed. However, in case of non availability of Yoga Teacher, guided Yoga sessions using Videos (on Common Yoga Protocols-CYP) will be conducted by CHO/ AYUSH Doctor (PHC AAM), for which they will not be paid honorarium. Norms : As per Govt of Odisha decision 20 Yoga sessions in a month will be conducted by a trained Yoga Teacher. Incentive/ honorarium for Yoga instructor: @Rs.500/- per yoga session However, budget for for 8 days have been proposed under NUHM PIP & rest shall be met from state budget. Total session proposed under NUHM = 125 AAM X 8 Session x 12m = 12000 Session p.a Proposed Budget (for 20 days): Total AAMs - 125 AAM UPHC Estimated Budget FY 2026-27: Rs.500/- x 8 per month x 125x 12 months (Budget Proposed under NUHM-80% as per last years exp trend) Budget Revised in view of shifting of activities under PM-ABHIM from NHM Budget

HSS(U) Annexure - 1: Details of Proposal for FY 2026-27

Amount in Rs. (Lakhs)

Pool	FMR Code	Programme / Them	S.No.	Scheme/ Activity	Approval FY 2026-27 (Rs. In Lakhs)					State Remarks
					Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
								Quantity/ Target	Budget (Rs. Lakhs)	
			129	Tele-Consultation Facility at AAMs (Urban)-eSanjeevani						Current Status: At present, under the e-Sanjeevani ecosystem, the state has 18 active HUBs, 32 District Headquarters Hospital (DHH), 28 SDH Sub-HUBs, 366 CHC Sub-HUBs (including two urban CHCs), which provides teleconsultation services to beneficiaries across the State. Proposal for 2026-27: NewSub Hubs UCHCs are proposed at 5 UCHCs Bhubaneswar - 04 Rourkela - 01
			129.1	Sub Hub Non Recurring Cost: Computer, Other Accessories including Printer	Per Unit	60000	0.60		0.00	IT Equipment: Supply of IT Equipment (Computer, Web Camera, Microphone) is proposed for 07 UCHC. The State has planned to have 2 IT sets each at Sub-Hubs. Budget: FY 2026-27: For New Proposed Sub Hubs: 14 (@ 2 per sub hub (UCHC) X 7 UCHCs Total Requirement for FY 2026-27: 14 Proposed as part of IT Equipment/Instruments for Service Delivery Staff Projected at HSS-Rural
			129.2	Sub Hub: Recurring Cost- Human Resource Support for Teleconsultation			0.00		-	Not Applicable
			129.3	Sub Hub : Session Cost for Specialist Consultation	Per Session	2500				Budgeted under HSS-Rural_ 18_IT Interventions_SI.No.203, Tele-Consultation Facility at AAMs (Rural)- eSanjeevani
			129.4	Sub Hub : Session Cost for General consultation Sessions	Per Session	1000				Budgeted under HSS-Rural_ 18_IT Interventions_SI.No.203, Tele-Consultation Facility at AAMs (Rural)- eSanjeevani
			129.5	Sub Hub : Internet Charges	Per Unit	1000	0.01			Sub-Hub: UCHC-07 Budget Proposed under HSS-18_IT Interventions_SI.No.203
			129.6	Sub Hub : Miscellaneous Cost	Per Unit	1000	0.01			The budget under this head shall be utilized for printing of prescription, maintaining register etc for UCHC -07- Activity shifted to HSS-19, SI No 204.12 (IEC & Printing)
			129.7	Spokes : Non Recurring Cost- Computer, Other Accessories including Printer						For UPHC & USHC : Computer and Accessories available at the spokes, hence not proposed
			129.8	Spokes Recurring Cost	Lumpsum	1524000	15.24			Proposal-1: Session Cost for Spokes- Not Applicable Proposal-2: Internet Charges for Spokes- @Rs.500/- Per Month X 254 (i.e. 116 UPHCs and 138 USHCs) X 12 months = Rs.15.24 lakhs Proposal-3: Miscellaneous Charges/ Cost- @Rs.400/- Per Month -Activity not approved by GoI Budget Proposed under HSS-18_IT Interventions_SI.No.203
			HSS(U).2	Engagement	130	ASHA (including ASHA Certification and ASHA benefit package)				
130.1	ASHA incentive for regular MAS meeting	Per Month	100		0.001		0	Nature of Activity: Ongoing Budget Proposed under HSS.17 SI.No-202		

HSS(U) Annexure - 1: Details of Proposal for FY 2026-27

Amount in Rs. (Lakhs)

Pool	FMR Code	Programme / Them	S.No.	Scheme/ Activity	Approval FY 2026-27 (Rs. In Lakhs)					State Remarks
					Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
								Quantity/ Target	Budget (Rs. Lakhs)	
		Community	130.2	ASHA incentive for supporting for Ward Kalyan Samiti Meeting.	Per Month	150	0.002		0	Nature of Activity: Ongoing Unit Cost: Proposed with revised incentive provisions i.e. Rs.150/- to Rs.250/- Per Month (As per the approval of Mission Steering Group, NHM) Background & Deliverables: GKS/ WKS meeting is planned on monthly basis . ASHA shall have to mobilise members of GKS/WKS to the meeting , facilitate discussions and keep record of the same. Activity Dropped as the same activity is approved under ASHA routine activities
			131	MAS					3.21	
			131.1	MAS Convention (City Level)	Per City	140000	1	0	0.00	Ongoing Activity: Background: Annual event for sharing of ideas, experiences and best practices and to felicitate the best performing MAS MAS Convention (City Level) MAS convention: Rs. 1.40 lakhs per city Budget Proposed 2026-27 = Rs1,40,000/- x 5 MCs
			131.2	MAS Convention (District Level)	Per City	11500	0.12	2	0.23	Ongoing Activity: MAS Convention (District Level) MAS convention: Rs. 11,500/- per non-corporation cities x 45 cities/ towns Budget Proposed 2026-27 = Rs11,500/- x 45 Cities
			131.3	Award to better performing MAS	Per MAS	3000	0.03	54	1.62	Background: The best Performing MAS shall be chosen on the basis of their performance on an 14 point scale as per the annual grading in the calendar year. This system encourages MAS to work effectively. Ongoing activity: Awards given to MAS as per grading. Proposed 2026-27 - Rs. 3,000/- x 1745 MAS (50% of 3489 MAS)
			131.4	Monitoring, Supportive Supervision & Quarterly Review Meeting of MAS	Per MAS/Per Qtr	400	0.00	106	1.36	Ongoing activity: Background: The Supportive supervision and monitoring system shall improve functioning of MAS at the ground level.It will also improve utilization of untied fund as per the mandate. Budgeted for Monitoring, supportive supervision & quarterly review meeting of MAS Cost per MAS per Qtr in PIP 2024-26 = Rs.400/- Budget Proposed 2026-27 = 3489 MAS x 4 qtr x Rs.400/- Budgeted 80%
			132	JAS					0	
			132.1	Training/ Orientation of JAS	Per RKS	3000	0.03	0	0	Ongoing Activity: Refresher training has been proposed for all 116 UPHCs Refresher Training is to be carried out of the JAS united Fund
			133	RKS					0	
			133.1	Training/ Orientation of RKS	Per RKS	5000	0.05	0	0	Ongoing Activity: Refresher Training is to be carried out of the RKS united Fund
			134	Outreach Activities					2.42	

HSS(U) Annexure - 1: Details of Proposal for FY 2026-27

Amount in Rs. (Lakhs)

Pool	FMR Code	Programme / Them	S.No.	Scheme/ Activity	Approval FY 2026-27 (Rs. In Lakhs)					State Remarks
					Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
								Quantity/ Target	Budget (Rs. Lakhs)	
			134.1	UHND Sessions in the NUHM Cities/Towns	Per session	100	0.00	88	1.06	Ongoing Activity: for 50 NUHM Cities/ towns Session Planned: 8 Session Per Month per ANM Unit cost approved in 2025-26 - Rs. 250/- per session Unit cost proposed in 2026-27 (at par with VHND cost) =Rs.100/- per session. No of UHND Session pm = 4640 UHNDs (580 ANMs x 8 Session P.M) Budget Proposed 2026-27 = 4640 Session x Rs100/- x 12m = Rs.55,68,000/-
			134.2	UHND Sessions in other ULB Towns	Per session	100	0.00	0	0.00	Ongoing Activity: Session Organizing cost Targeted on ULB not covered under NUHM Cties / Towns 65 other ULBs. (Session cost proposed as per rural VHND session Unit cost) Total other ULB towns : 65 Session Cost of 49 other ULB towns covered under Rural VHND cost Total ANM available in remaining 49 other ULB towns : 80 Nos. Total expected Session: 80 x 8 Nos. = 640 Nos. Budget Proposed 2026-27 : Rs.100/- per session x 640 sessions x 12 (Budgeted 90%)
			134.3	Mobility Support for ANM/LHV	Per ANM Per Annum	6000	0.06	11	0.53	Ongoing Activity: Budgeted Rs.500/- per ANMX 12 months = Rs. 6000 per ANM. Budget Proposed 2026-27 = 580 ANM X Rs.6000/- = Rs.34,80,000/- Budgeted: 80% as beacuse of existing vacancy. Deliverables: Conducting all fixed day sessions and assure at least 4 Days home visit in a month.
			134.4	Observance of Ayushman Arogya Shivr						Ongoing Activity AAS is proposed to extend doorstep primary care in remote areas and provide fixed-day specialist services at AAM USHC & UPHC in the 1-3rd week and UCHC at teh 4th week of each month. This model strengthens continuity of care, improves access to essential and specialist services, and reduces patient travel and expenses. Budget:
			134.4.1	Observance of Ayushman Arogya Shivr at UPHCs	Per Unit per Month	5000	0.05	2	0.72	a. AAM USHC - 138 × 5000 × 12 = Rs.82.80L (Activity Dropped in view of continuation of PM-ABHIM) b. AAM UPHC - 116× 5000 × 12- 60% budgeted c. UCHC - 07 × 10000 × 12 - 80% budgeted
			134.4.2	Observance of Ayushman Arogya Shivr at UCHCs	Per Unit per Month	10000	0.1	0	0.00	Note: As there is crunch of Human Resources, including doctors & Specialists at different levels, we expect to use about 50% of the budget at the SHC level, 60% at the PHC level, and 80% for organizing the camps. If needed, additional funds will be provided through the Supplementary PIP. Details Justification is at rural CPHC Writeup Budget Revised in view of shifting of activities under PM-ABHIM from NHM Budget

HSS(U) Annexure - 1: Details of Proposal for FY 2026-27

Amount in Rs. (Lakhs)

Pool	FMR Code	Programme / Them	S.No.	Scheme/ Activity	Approval FY 2026-27 (Rs. In Lakhs)					State Remarks
					Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
								Quantity/ Target	Budget (Rs. Lakhs)	
			134.5	Mobile Medical Units (MMU) / Mobile Health Units (MHU)	Per MHU P.a		-	-	0.00	Background: Mobile Health Units (MHUs) are fully equipped, mobile healthcare facilities operated by trained medical and paramedical staff. Their primary purpose is to deliver preventive, promotive, and curative healthcare services to vulnerable and mobile populations, especially those residing in slums and hard-to-reach areas where access to regular health services is limited. Total UMHU -9 Proposed Under HSS-7 182-Mobile Medical Unit
			134.6	Strengthening Helath Service Delivery during Rathayarta.	Per ASHA	1000	0.010	0	0	Ongoing Activity as proposed last year: ASHAs are deployed especially during Car Festival(Ratha Yatra) for promoting preventive actions in Puri Town. They are involved for 5 days (3days before the festival and 1 day on the day of festival and 1 day after the festival in two phases during Rathayatra and Bahudayatra). There are 73 functional ASHA in Puri Township . Budget: Rs.1000/- per ASHA are provisioned towards meeting the refreshment cost.
			134.7	Health check up of sanitary workers (City With UPHC)	Per UPHC	6000	0.06	2	0.12	Ongoing Activity: Background: Sanitary worker are exposed to various occupational hazards. Routine healths check- up, vaccination and remedial measures shall improve their functionality. Hence, health camps are being organised twice in a year as a preventive and curative measure aiming at better health and wellness of sanitary workers. Budgeted Rs.3000/- per Camp per UPHC for 125 UPHCs Annual 2 camps shall be organised for the sanitary workers in the month of July & Feb. Proposed Budget 2026-27 = 125 UPHC X Rs3000/- x 2 Camp
			134.8	Health check up of sanitary workers (City Without UPHC)	Per City	6000	0.06	0	0.00	Ongoing Activity: 5 NUHM towns are not having UPHCs. However sanitary workers are working in the ULBs. Hence helath Checkup Camp for sanitary workers are working in the ULBs are proposed and attached to any of the existing health facility. Budgeted Rs.3000/- per camp per Towns without UPHC for 5 Towns Annual 2 camps shall be organised for the sanitary workers in the month of July & Feb. Proposed Budget 2026-27 = 5 City X Rs3000/- x 2 Camp
			135	Mapping of Slums and Vulnerable Population						To be done inhouse - Hence no additional budget required.
			136	Other Community Engagement Components					-	
			136.1	City Coordination Committee	Per Meeting/ per qr.	3000	0.03	0	0.00	Ongoing Activity: Background: City Coordination Committee is an convergence committee at City level for institutional convergence of various measures implemented by different allied departments like H&FW, (W&CD , H&UD, Education, ULB and Civil Society organizations. It improves coordination in implementation of programmes at City level Quarterly Meeting Proposed in 14 Cities / Towns (5 Corporation cities + 9 other cities with more than 2 Nos. UPHC) Unit Cost = Rs3000/- per Meeting. Budget Proposed 2026-27 = Rs.3000/- x 4 qrs. X 14
			136.2	IEC/ BCC activities under NUHM						
			136.2.1	Digital IEC Corner at OPDs	Per Unit				Budgeted under- HSS.19 Sl.No- 204	

HSS(U) Annexure - 1: Details of Proposal for FY 2026-27

Amount in Rs. (Lakhs)

Pool	FMR Code	Programme / Them	S.No.	Scheme/ Activity	Approval FY 2026-27 (Rs. In Lakhs)					State Remarks
					Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
								Quantity/ Target	Budget (Rs. Lakhs)	
			136.2.2	Dynamic Hoardings at Public Health Facilities	Per Unit					Budgeted under- HSS.19 SI.No- 204
			136.2.3	Displays at Bus Queue Shelters in Municipal Corporation Cities	Per Unit					Budgeted under- HSS.19 SI.No- 204
			136.2.4	Equipping MHUs for Campaigns	Per MHU					Budgeted under- HSS.19 SI.No- 204
			136.2.5	Slum Specific IEC /BCC Interventions	Lumpsum					Budgeted under- HSS.19 SI.No- 204
			136.2.6	Branding of UHSND & FID Sites	Lumpsum					Budgeted under- HSS.19 SI.No- 204
			136.2.7	Day Observations at City Level	Per day					Budgeted under- HSS.19 SI.No- 204
			136.2.8	Sensitisation Programmes with citizen groups during major campaigns	Per MC					Budgeted under- HSS.19 SI.No- 204
			136.2.9	Mass Media Interventions	Lumpsum					Budgeted under- HSS.19 SI.No- 204
			136.2.10	Wellness Sessions at AAM	Lumpsum					Budgeted under- HSS.19 SI.No- 204
			136.3	Printing						
			136.3.1	Printing of MAAS Hand Book	Per Hand Book					Budgeted under HSS.19-SI.No-204
			136.3.2	Printing of MAAS Register	Per Register					Budgeted under HSS.19-SI.No-204
			136.3.3	Printing of MAAS Grading Format	Per Format					Budgeted under HSS.19-SI.No-204
			136.3.4	Printing of Community Feed Back Format	Per format					As per the mandate, MAAS members are generally take the Patient feed back from beneficiaries at UPHCs/UCHCs & UHSND and submit to concerned facilities for necessary action.
			136.3.5	Printing of JAS Hand Book	Per Hand Book					Budgeted under HSS.19-SI.No-204
	HSS(U).3	Public Health	137	Urban PHCs.					2.88	
			137.1	Civil Works (New/ Upgradation) for UPHC/ USHC						Proposal For UPHCs: Not proposed in the current Financial year. Proposal for new 9 UPHCs will be submitted, once land acquisition process for the same is completed . Proposal for USHCs : Operational at rented/ Community Building , hence budget not proposed herein this head
			137.2	UPHC Building - On Rent						Total UPHC- 125 Currently 4 nos of UPHC are running in rented building which will continue for entire period of 2026-27 (Construction of building is in foundation stage)
			137.2.1	For Old rented UPHC Building	Per Month	20000	0.2	1	2.4	9 New UPHC Proposed in 2026-27 to be functional in rented building Total UPHC to be operational in rented building = 4 +9 = 13 (4 for 12 month & 9 for 6 month)
			137.2.2	For New rented UPHC Building	Per Month	20000	0.2	0	0	Budget proposed: (Rs.20,000 x 4 UPHC X 12 M) + (Rs.20,000 x 9 UPHC X 6m) N.B: ALL proposed UPHCs in rented building are not in Corporation City.

HSS(U) Annexure - 1: Details of Proposal for FY 2026-27

Amount in Rs. (Lakhs)

Pool	FMR Code	Programme / Them	S.No.	Scheme/ Activity	Approval FY 2026-27 (Rs. In Lakhs)					State Remarks
					Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
								Quantity/ Target	Budget (Rs. Lakhs)	
			137.3	UAAM/USHC- On Rent	Lumsum		0.00		0.00	Total UAAM -138 Currently 74 Nos of UAAM are running in rented building which will continue for entire period of 2026-27 UAAM in corporation City: 40 UAAM in Non-Corporation City -34 Rent proposed for Corporation City - Rs.25,000/- Rent proposed for Non-Corporation City - Rs.20,000/- Total Budget Required: Rs.25,000 x 40 UAAM X 12 M)+(Rs.20,000 x 34UAAM X 12M) Activity Dropped in view of shifting of activities under PM-ABHIM from NHM Budget
			137.4	Drugs & Consumables for UPHCs/ USHCs						Met out of State Fund / Supplies
			137.5	Diagnostic Services for UPHCs/ USHCs						Met out of State Fund / Supplies
			137.6	Capacity Building including Training : One day orientation of WKS at district/city level	Per WKS	1450	0		0.00	Proposal 1 Cadre based Training propped as per GoI norm for MO , SN/ANM Proposal :2 Half yearly Orientation of WKS members Batch Size : 20 members Duration - 1 day No of WKS : 1147 NO of batches : 1147 X 2 = 2294 Budgetd under HSS-16-201 Capacity Building including Training
			137.7	UPHC /Sector Level Monthly meeting	Per Meeting	2000	0	24	0.48	Background: Meeting to be taken up under the chairpersonship of UPHC MO with presence field staff & representatives from all key Deptts on monthly basis Expected Participants -40 Budget: (@ Rs. 2,000/- per meeting for refreshments & Contingency X 125 UPHCs X 12 meetings Budget Shifted from SI No.146 (Programme Management Cost) as per Approval in RoP
			138	Urban CHCs and Maternity Homes					0.00	
			138.1	Civil Works (New/ Upgradation)						There are 7 functional UCHCs in the State and no proposal for establishment of new UCHCs as per the NUHM revised framework
			138.2	Drugs & Consumables						Met out of State Fund / Supplies
			138.3	Diagnostic Services						Met out of State Fund / Supplies
			138.4	Capacity Building including Training						Not Proposed in the Current Year
			139	Quality Assurance Implementation & Mera Aspataal					1.03	

HSS(U) Annexure - 1: Details of Proposal for FY 2026-27

Amount in Rs. (Lakhs)

Pool	FMR Code	Programme / Them	S.No.	Scheme/ Activity	Approval FY 2026-27 (Rs. In Lakhs)					State Remarks
					Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
								Quantity/ Target	Budget (Rs. Lakhs)	
Health System Strengthening (HSS)-Urban	HS	Quality Assu	139.1	Training on Quality Assurance	Per participant	4000	0	0	0.00	Ongoing Activity: Proposal for 2026-27 Total UPHC = 116 UPHCs received NQAS Certification by Mar-26 = 53 (Crrently certified -48) Traget 2026-27 : 34 Justification : Training on QA will be provided to the service providers of the targeted facilites as well as Programme Managers to provide hand holding support. Training Plan : Total participants : 184 Participants per UPHC - 3 participants (Doctor/-1, Phar./ LT/ Nurse- 2) from 34 targeted facilites for NQAS certification for 2016-27 & CPM/APM- 39 Nos. Total no. of participants from UPHC= 34 UPHCs x 3 participants per UPHC + 43 PHM + 39 CPM/APM = 184 Total participants = 184 Nos. Duration - 2 days Budgeted under : HSS-16-201
			139.2	QA Committees at City level :	Per Meeting	500	0.01	6	0.03	Ongoing Activity: Facility level QA committee meeting - 1 meeting per qtr @ Rs. 500/- per meeting - Proposed for 125 UPHCs & 7 UCHCs for 4 quarter (expected meeting 70%) = 132 x 4 meeting x 70% = 370 meetings Proposed Budgete 2026-27 = Rs.500/- x 370 Meeting = 1,85,000/-
			139.3	Quality Assurance Implementation : For Traversing Gaps	Per Facility	50000	1	2	1.00	Ongoing Activity: 1. For UPHCs: Facility based QA Interventions - Ongoing activity with revised unit nos. Proposed for 63 (116 -53) existing UPHCs (for NQAS certification) @ Rs. 50,000/- per facility = Rs. 34,50,000/- to maintain statutory requirements like Fire Safety and essential needs like Pest Control, and consumables required Conducting Patient satisfaction survey etc. 2. For UCHCs : The activities not proposed as the same is proposed during 2024-25

HSS(U) Annexure - 1: Details of Proposal for FY 2026-27

Amount in Rs. (Lakhs)

Poo I	FMR Code	Progr amme / Them	S.No.	Scheme/ Activity	Approval FY 2026-27 (Rs. In Lakhs)					State Remarks
					Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
								Quantity/ Target	Budget (Rs. Lakhs)	
			139.4	NQAS External Assessment : For State Certification of UPHCs	Per Facility	43000	0	0	0.00	Ongoing Activity: Total UPHC = 116 UPHC got NQAS Certification by Mar-26 = 53 Target for NQAS Certification 2026-27 = 87 (75% of 116 UPHC) Targeted facilities for training - 34 (87-53) +7 (20% of 34 targeted facilities added as because of all targeted facilities may not be qualified for state certification) = 41 Target for state certification = 41 Target for National Certification = 34 2026-27 Budget Approved Rs. 43,000/- per facility
			139.5	NQAS External Assessment : For National Certification of UPHCs	Per Facility	120000	1.20	0	0.00	Ongoing Activity: Revised as per NPCC Recommendation. Total UPHC = 116 UPHC got NQAS Certification by Mar-26 = 53 Target for NQAS Certification 2025-26 = 87 (75% of 116 UPHC) Targeted facilities for training - 34 (87-53) + 7 (20% of 34 targeted facilities added as because of all targeted facilities may not be qualified for state certification) = 41 Target for state certification =41 Target for National Certification = 34 2026-27 Budget approved Rs. 1,20,000/- per facility for 34 UPHCs
			139.6	NQAS External Assessment : For State Certification of UCHCs	Per Facility	63000	1	0	0.00	Ongoing Activity: 2026-27 Total UCHC = 7 Target for NQAS Certification2026-27 = 2 (30% of 7 UCHC) Target for state certification = 2 Target for National Certification = 1 2026-27 Budget approved Rs. 63,000/- per facility
			139.7	NQAS External Assessment : For National Certification of UCHCs	Per Facility	146000	1.46	0	0.00	Ongoing Activity: 2026-27 Total UCHC = 7 Target for NQAS Certification 2026-27 = 4 (60% of 7 UCHC) Target for state certification =4 Target for National Certification = 1 2026-27 Budget approved Rs. 1,46,000/- per facility
			139.8	Quality Assurance : Incentives for UPHCs	Per Facility	200000	2.00	0	0.00	Ongoing Activity: Total Certified UPHCs- 49 (by Jan'26) Total UCHCs certified- 0 Proposed for already certified facilities = 49
			140	Kayakalp					0.00	

HSS(U) Annexure - 1: Details of Proposal for FY 2026-27

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Pool	FMR Code	Programme / Them	S.No.	Scheme/ Activity	Approval FY 2026-27 (Rs. In Lakhs)				State Remarks	
					Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
								Quantity/ Target		Budget (Rs. Lakhs)
HSS(U).5			140.1	Kayakalp Assessments	Per Unit	10000	0.1	0	0.00	Not proposed as the same is proposed under NHM PIP HSS-6 Quality Assurance.
			140.2	Kayakalp Awards of UPHCs/UCHCs	Lumsum	0	0	1	0.00	Ongoing Activity: Kayakalp award 2026-27 Kayakalpa incentive would be released to the facility has applied for the state level NQAS Certification within three months of getting the kayakalpa result in the same financial year. Total facility: 123 (116 UPHC + 7 UCHC) NQAS Certification by Mar-26- 53 UPHC Targeted facility for Certification or state certification - 87 UPHC Budget Propsoed: 2026-27 Winner @ Rs. 2,00,000/- for 1 UPHC 1st runner up @ Rs.1,50,000/- for 1 UPHC 2nd runner up @ Rs. 1,00,000/- for 1 UPHC Commendation award @ Rs. 50,000/- per facility for 84 UPHCs Commendation award to UCHC @ Rs.100000/- per UCHC x 2 UCHC
			140.2	Kayakalpa assessment & Award of the UAAMs/USHCs	Per UAAM		0		0.00	Ongoing Activity: Kayakalp award 2025-26: Budgeted under XV-FC 2026-27 Total existing UAAM/USHC = 140 New UAAM proposed = 7 UAAM to be converted to UPHC = 9 Total UAAM 2026-27 = 138 Budget: Rs.30,000/- for Award & Rs.5000/- for Assessment Award cost proposed @ Rs.30,000/- per UAAM x 138 UAAM Activity Dropped in view of shifting of activities under PM-ABHIM from NHM Budget
			141	Swacch Swasth Sarvatra					0.00	
			141.1	Swachh Swasth Sarvatra (UPHC)	Per UPHC	50000	1	0	0.00	Already Saturated
			141.2	Swachh Swasth Sarvatra (UCHC)	Per UCHC	1000000	10	0	0.00	Already Saturated
			142	Remuneration for all NHM HR					66.23	Details at HSS-9 HRH writeup Annexure
			142.1	Service Delivery (SD)	Lumpsum	4857987	48.58	1	48.58	
			142.2	EPF Service Delivery (SD)	Lumpsum	151711	1.52	1	1.52	
	142.3	Programme Management (PM)	Lumpsum	830000	8.30	1	8.30			
	142.4	EPF Programme Management (PM/DEO)	Lumpsum	26451	0.26	1	0.26			
	142.5	Data Entry Operations (DEO)	Lumpsum	499200	4.99	1	4.99			
	142.6	Support Staff at Facility Level (SS-F)	Lumpsum	257600	2.58	1	2.58			
			143	Incentives (Allowance, Incentives, Staff Welfare Fund)				19.99		

HSS(U) Annexure - 1: Details of Proposal for FY 2026-27

Amount in Rs. (Lakhs)

Pool	FMR Code	Programme / Them	S.No.	Scheme/ Activity	Approval FY 2026-27 (Rs. In Lakhs)					State Remarks
					Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
								Quantity/ Target	Budget (Rs. Lakhs)	
			143.1	Specialist Services at UCHCs (AMA Clinic)	Lumpsum	0	0	1	0.00	Ongoing Activity: Proposal : Ama Clinic (Specialist) services at other UCHCs (7 UCHCs) AMA Clinic, a state initiative, was launched on 19th December 2017 to extend need based specialist services on weekly basis in the urban areas to reduce out of the pocket expenditure of urban population.This initiative reduces the burden of the district hospital and tertiary hospitals and also provides quality of the health care in UPHCs. The same types of services are also rendered here as per Poly Clinic Type of Specialist Services proposed in UCHC : Skin VD/ENT/Eye / Psychiatric/ Dental/ Pathologist/ Nutrition/Physiotherapy) Session Cost (for a session of 6 hrs. in an interval of 4 hrs. in morning & evening): • @ Rs.3,750/- per session for Skin VD/ ENT/ Ophthalmology/ Psychiatric/ Pathology) • @ Rs.3150/-per session for Dental Specialist. • @ Rs.1500/-per session for Nutritionist. Budget Proposed: 7 Nos. UPHC x 5 types services x @ Rs. 3,750/- x 12 month (48 days) = 50,40,000/- 7 Nos. UPHC x 1 type service x @ Rs. 3,150/- x 12 month (96 days) = 21,16,800/- 7 Nos. UPHC x 2 types services x @ Rs. 1,500/- x 12 month (192 days) = 40,32,000/- Total Budget:1,11,88,800/- Budget Revised & Reproposed (40% looking into expenditure trend as per availability of
			143.2	Specialist Services at UPHCs (AMA Clinic)	Lumpsum	1998720	20	1	19.99	Ama Clinic (Specialist) services atother UPHCs (111 UPHCs) AMA Clinic, a state initiative, was launched on 19th December 2017 to extend need based specialist services on weekly basis in the urban areas to reduce out of the pocket expenditure of urban population.This initiative reduces the burden of the district hospital and tertiary hospitals and also provides quality of the health care in UPHCs. The same types of services are also rendered here as per Poly Clinic Type of Specialist Services proposed in Poly Clinic:O&G/ Pediatric/ Medicine/ Skin VD/ENT/ Ophthalmology/ Psychiatric/ Dental/ Surgery/ Orthopedic/ Dental/ Pathologist/ Nutrition) Session Cost (for a session of 6 hrs. in an interval of 4 hrs. in morning & evening): • @ Rs.3,750/- per session for O&G/ Pediatric/ Medicine/ Skin VD/ ENT/ Ophthalmology/ Psychiatric/ Surgery/ Orthopedic) • @ Rs.3150/-per session for Dental Specialist. • @ Rs.1500/-per session for Nutritionist. Budget Proposed: 111 Nos. UPHC x 9 types services x @ Rs. 3,750/- x 12 month (48 days) = 17,98,20,000/- 111 Nos. UPHC x 1 type service x @ Rs. 3,150/- x 12 month (96 days) = 3,35,66,400/- 111 Nos. UPHC x 2 types services x @ Rs. 1,500/- x 12 month (192 days) = 6,39,36,000/- Total Budget: 27,73,22,400/- Budget Revised & Reproposed (40% looking into expenditure trend as per availability of Specialists):

HSS(U) Annexure - 1: Details of Proposal for FY 2026-27

Amount in Rs. (Lakhs)

Pool	FMR Code	Programme / Them	S.No.	Scheme/ Activity	Approval FY 2026-27 (Rs. In Lakhs)					State Remarks
					Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
								Quantity/ Target	Budget (Rs. Lakhs)	
			143.3	Specialist Services at UPHCs (Poly Clinic)	Lumpsum	0	0	1	0.00	Proposal : Specialist Services at Poly Clinics (14) The poly clinic provides specialist services and extended pathology services to the urban population residing in catchment area of UPHCs/USHCs. Each Polyclinic caters a total population of 2.5 to 3 Lakhs. Keeping on the population norms, a total of 14 nos. of Poly Clinics are established and functional in seven Cities/Towns. (Bhubaneswar MC- 4, Cuttack MC-3, Berhampur MC-2, Rourkela MC-2, Sambalpur MC-1, Balasore-1, Puri-1). 12 types of Specialist services are provisioned at Poly Clinics dependingupon the availability at Specialists in service mode. EIF required for operationalization of Poly Clinics have been saturated Type of Specialist Services proposed in Poly Clinic-12 types (O&G/ Pediatric/ Medicine/ Skin VD/ENT/ Ophthalmology/ Psychiatric/ Dental/ Surgery/ Orthopedic/ Pathologist/ Nutrition) Session Cost (for a session of 6 hrs in an interval of 4 hrs in morning & evening): • @ Rs.3,750/- per session for O&G/ Pediatric/ Medicine/ Skin VD/ ENT/ Ophthalmology/ Psychiatric/ Surgery/Orthopedic) • @ Rs.3150/-per session for Dental Specialist. • @ Rs.1500/-per session for Nutritionist. Budget Proposed: Specialist Services at Poly clinic 14 Nos. Poly clinics x 9 types services x @ Rs. 3,750/- per day x 12 month (48 days) 14 Nos. Poly clinics x 1 typeservice x @ Rs. 3,150/- x 12 month (96 days) 14 Nos. Poly clinics x 2 typesservices x @ Rs. 1,500/- x 12 month (192 days) Budget Revised & Reproposed (40% looking into expenditure trend as per availability of Specialists):
			143.4	Physiotherapy Services at UAAMs/USHCs	Lumpsum		0		0.00	Ongoing Activity as proposed last year under XV-FC budget : Part-Time Physiotherapy Services Frequency of services - 5 Day in a Month.(10 Session) Activity Dropped in view of shifting of activities under PM-ABHIM from NHM Budget
			144	Incentives under CPHC					2.40	
			144.1	Team based incentives for AAMs (UPHCs)	Per UPHC	200000	2	2	2.40	Ongoing Activity: GoI Norms : Rs.2.00 Lakhs Per UPHC Budget break-up 1. Paramedics -4 (Staff Nurse-2, LT-1,Pharmacist-1) @ Rs.1500/- PM X 4X 12 months + Rs.72000/- 2. MO - 1 @ Rs.3000/- PM X 12 = Rs.36000/- Total : 1,08,000 Virtual SCs attached to PHC-HWC- Rs.1500/- PM X 5 Virtual SCs X 12 months = 90,000/- Total =1,98,000/- Say Rs.2 lakhs (Budgeted Rs.200000/- for existing 125 UPHCs) Budgetd:60% as TBI is not to be paid to the outsourced staff.

HSS(U) Annexure - 1: Details of Proposal for FY 2026-27

Amount in Rs. (Lakhs)

Pool	FMR Code	Programme / Them	S.No.	Scheme/ Activity	Approval FY 2026-27 (Rs. In Lakhs)					State Remarks
					Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
								Quantity/ Target	Budget (Rs. Lakhs)	
			144.2	Team based incentives for UAAMs/USHCs.	Per USHC		0		0.00	New Activity: Only cost of Medical officer @ Rs3000/- per moth are propoed and other staffs of the UAAM are engaged through Outsourced Basis. Activity Dropped in view of shifting of activities under PM-ABHIM from NHM Budget
			145	Costs for HR Recruitment and Outsourcing						
	HSS(U).6	Technical Assistance	146	Planning and Program Management*					0	Budget Proposed under HSS (U)_SI.No.146 of Annexure - PM Activities
			146.1	Organising Joint Reviews/ Convergence Meetings at all Levels (Sector-UPHC / City Level)	Lumpsum		0		0.00	Background Information is mentioned in HSS R head . Same also can be referred from Write up Annexure , placed at Programme Management Folder Budget Proposed under HSS (U)_SI.No.146 Activity-1: UPHC /Sector Level Monthly meeting Background: Meeting to be taken up under the chairpersonship of UPHC MO with presence field staff & representatives from all key Deptts on monthly basis Expected Participants -40 Budget: Rs.30.00 Lakhs (@ Rs. 2,000/- per meeting for refreshments & Contingency X 125 UPHCs X 12 meetings- Budget Shifted to HSS(U)-3 SI No 137 as per approval in RoP Activity-2: City Level Monthly Meeting at Municipal Corporation Cities Background: Meeting to be taken up under the chairpersonship of Commissioner in presence of all key Deptts on monthly basis. Expected Participants -60 (UPHC MO, Programme Mangers & Officers at CPMU and other Representatives of key deptts) Budget: Rs.6.00/- Lakhs (@ Rs. 10,000/- per meeting for refreshments & Contingency X 5 Cities X 12 meetings) Activity-3: Qualrterly Urban Review Meeting at State level Background: Urban Review Meeting at State level to be taken up under the chairpersonship of MD NHM in presence of all Programme Officers & Consultants from 5 Municipal Corporation Cities & other Urban areas. The duration/ periodicity of the meeting shall be for 1 day on quarterly basis. Expected Participants – 60 per day Budget: Rs 110000/- X 4 Meetings

HSS(U) Annexure - 1: Details of Proposal for FY 2026-27

Amount in Rs. (Lakhs)

Pool	FMR Code	Programme / Them	S.No.	Scheme/ Activity	Approval FY 2026-27 (Rs. In Lakhs)					State Remarks
					Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
								Quantity/ Target	Budget (Rs. Lakhs)	
			146.2	Monitoring & Supportive Supervision	Lumpsum		0		0.00	Background Information is mentioned in HSS R head . Same also can be referred from Write up Annexure , placed at Programme Management Folder Budget Proposed under HSS (U)_6, Technical Assistance SI.No.146 1. Common Pool Vehicles with DOL (1) @ Rs 40000/- per month X 1 Vehicles X 12 Months: Rs.4.80 Lakhs . It will help in arranging vehicle without delay. 2. Pool Fund for hiring vehicle as per requirement (15 Trips per month) @ Rs.2000/- X 15 Trips per month X 12 months: Rs. 3.60 Lakhs 3. Additional requirement of vehicle if any shall be met out of this pool fund. Maintenance/ DOL for two-wheeler: Lumpsum for annum @ Rs.1.00 Lakhs 4. DA as applicable as per OSHFWS Norms: @ Rs.0.60 Lakh per Annum Total Budget: Rs.10.00 Lakhs Per MC X 5 MC 5. Maintenance/ DOL for two-wheeler (@ Rs.24000/- per UPHC per annum X 125 UPHCs- Budget Not Approved
			146.3	Administrative Contingencies for Programme Management Units at all Levels	Lumpsum		0		0	Background Information is mentioned in HSS R head . Same also can be referred from Write up Annexure , placed at Programme Management Folder Budget Proposed under HSS (U)_6, Technical Assistance SI.No.146 1. Urban – State Programme Management Unit Integrated with SPMU (HSS_R) cost, hence not additionally proposed 2. Administrative Contingencies for City Programme Management Units 2.1. Contingency & Consumables (Paper, Cartridges stationeries etc)@ Rs 20000/- PM X 12 months= Rs.2.40 Lakhs 2.2. Support Staff (House Keeping & Security) 2 Personnel @ Rs 600 per day X 26 days PM X 12 months= Rs. 3.74 Lakhs 2.3. Broad Band Internet Charges – Separately proposed as part of IT interventions Budget Proposed under HSS-18_IT Interventions_ SI. No. 203 2.4. Hospitality (Stay, travel etc.) for State /National Monitors (Lumpsum): Rs.1.00 Lakhs 2.5. Repair/Maintenance/replacement of office EIF: Rs.1.86 Lakhs Sub Total (2): Rs.9.00 Lakhs per MC 3. PMU at UPHCs (@1000/- per UPHC/ Per annum X 125
147			147	PPP					0.00	

HSS(U) Annexure - 1: Details of Proposal for FY 2026-27

Amount in Rs. (Lakhs)

Pool	FMR Code	Programme / Them	S.No.	Scheme/ Activity	Approval FY 2026-27 (Rs. In Lakhs)					State Remarks
					Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
								Quantity/ Target	Budget (Rs. Lakhs)	
	HSS(U)	Acc	147.1	Management cost for NGOs managing UPHCs in PPP Mode	Per UPHC	340930	3.4093	0	0.00	Ongoing Activity: Status : A total of 28 UPHCs are being managed by NGOs across 25 Cities/Towns. Budget Heads : HR - HSS (U).5- 142 House Rent: HSS(U).9-149 Drugs & Diagnostics are being managed from the State Budget. Programme Management (Administrative Contingency, Supportive Supervision & Meeting/ Review) : HSS(U)-146 Overall Management Cost to NGOs: Last year approved amount Rs.3.31 Lakhs Proposed budget: 3% increase over last year approval as per tender terms and conditions. Budget approved= (Rs3,40,093/-) X 28 UPHC
	HSS(U).8	Innovation	148	State specific Programme Innovations and Interventions						
	HSS(U).9	Untied Grant	149	Untied Fund					8.05	
			149.1	UPHCs run in Government Building	Per UPHC	175000	2	1	1.75	Ongoing Activity: Budgeted Rs.1,75,000/- per UPHC operated in Own Building Approval in 2025-26 = 106 UPHC Proposal for 2026-27 = 112 UPHC (6 UPHC functional in rented building in 2025-26 to be functional in Govt . Building) Budget approved 2026-27= Rs.1,75,000 x 112 UPHC
			149.2	UPHCs run in Rented Building	Per UPHC	100000	1	1	1.00	Ongoing Activity: Budgeted Rs.1,00,000/- for the UPHCs functioning in Rented Building. Approval in 2025-26 = 10 UPHC (6 UPHC functional in rented Building in 2025-26 to be functional in Govt . Building) Untied fund of 9 New UPHC proposed in 2026-27 to be functional in rented building. Proposal for 2026-27 = 4 UPHC +9 UPHC = 13 UPHC Total Budget approved = 13 UPHC X Rs.1,00,000/-
			149.2	UAAM/USHC United Fund	Lumpsum		0		0.00	New Activity: Budgeted Rs.50,000/- per UAAM. Approval in 2025-26 = 140 UAAM UAAM to be converted to UPHC in 2026-27- 9 & New UAAM proposed as per population norm - 7 Proposal for 2026-27 = 138 UAAM Activity Dropped in view of shifting of activities under PM-ABHIM from NHM Budget
			149.3	Untied grants to UCHCs	Per UCHC per annum	500000	5	0	0.00	Ongoing Activity: Budgeted Rs.5,00,000/- per UCHC
			149.4	Untied grants to MAS	per MAS	5000	0	106	5.30	Ongoing Activity: Budgeted Rs.5,000/- per MAS.
	Sub-Total								106.98	

Jagatsinghpur

NUHM HRH Budget Annexure for PIP 2026-27

S.No.	Category of NHM Manpower	Position Name	Current Sanctioned Position in FY 2024-26			Proposed NHM Manpower in 2026-27 (Dropped/ Continue/ New)				Base Remuneration Approved in 2025-26	Revised Base Remuneration Proposed in PIP 2026-27 (5% increment on base 25-26)	PI (25%) (For SHSRC PI 15%)	KBK Incentive	Total Remuneration p.m.	Total Remuneration per person per Annum (in Lakhs)	Total Budget per Annum (in Lakhs)	EPF	Remarks
			Govt.	NHM	Total	Drop	Cont	New	Total									
142.1	SD	ANM		4	4	0	4		4		24200			24200	2.9	9.28		N.B.: 1.Contractual employees appointed under OSH&FWS shall be entitled to an annual increment of 5% on the base remuneration of FY 2025–26 , along with Performance Incentive (PI) of up to 25% of the revised base remuneration , subject to performance appraisal and applicable guidelines. 2.Employees engaged through outsourcing under NHM shall be paid remuneration in accordance with the outsourcing norms prescribed by OSH&FWS . 3. Unit Cost Specified in the given column is only an indicative cost for calculation/ estimation purpose .
142.1	SD	MPW (M) - UAAM			0	0			0					0	0	0.00		MPW (M) (138) required for functionalization of UAAM. The Budget to be proposed under PM-ABHIM. @Rs. 26300/- PM x 138 x 12 = 370.20 Lakhs (i.e. 85% Budget to be projected looking into expenditure pattern)
142.1	SD	Staff Nurse – UPHC		4	4	0	4	0	4		26300			26300	3.16	10.11		N.B.: 1.Contractual employees appointed under OSH&FWS shall be entitled to an annual increment of 5% on the base remuneration of FY 2025–26 , along with Performance Incentive (PI) of up to 25% of the revised base remuneration , subject to performance appraisal and applicable guidelines. 2.Employees engaged through outsourcing under NHM shall be paid remuneration in accordance with the outsourcing norms prescribed by OSH&FWS . 3. Unit Cost Specified in the given column is only an indicative cost for calculation/ estimation purpose .
142.1	SD	Staff Nurse – UCHC		0	0	0	0		0		26300			26300	3.16	0.00		2.Employees engaged through outsourcing under NHM shall be paid remuneration in accordance with the outsourcing norms prescribed by OSH&FWS . 3. Unit Cost Specified in the given column is only an indicative cost for calculation/ estimation purpose .
142.1	SD	Staff Nurse – UAAM			0	0			0									SN (138) required for functionalization of UAAM. The Budget to be proposed under PM-ABHIM. @Rs. 26300/- PM x 138 x 12 = 370.20 Lakhs (i.e. 85% Budget to be projected looking into expenditure pattern)
142.1	SD	Lab technician – UPHC		2	2	0	2	0	2		26300			26300	3.16	5.06		N.B.: 1.Contractual employees appointed under OSH&FWS shall be entitled to an annual increment of 5% on the base remuneration of FY 2025–26 , along with Performance Incentive (PI) of up to 25% of the revised base remuneration , subject to performance appraisal

S.No.	Category of NHM Manpower	Position Name	Current Sanctioned Position in FY 2024-26			Proposed NHM Manpower in 2026-27 (Dropped/ Continue/ New)				Base Remuneration Approved in 2025-26	Revised Base Remuneration Proposed in PIP 2026-27 (5% increment on base 25-26)	PI (25%) (For SHSRC PI 15%)	KBK Incentive	Total Remuneration p.m.	Total Remuneration per person per Annum (in Lakhs)	Total Budget per Annum (in Lakhs)	EPF	Remarks
			Govt.	NHM	Total	Drop	Cont	New	Total									
142.1	SD	Lab technician - UCHC		0	0	0	0		0		26300			26300	3.16	0.00		and applicable guidelines. 2. Employees engaged through outsourcing under NHM shall be paid remuneration in accordance with the outsourcing norms prescribed by OSH&FWS . 3. Unit Cost Specified in the given column is only an indicative cost for calculation/ estimation purpose .
142.1	SD	Pharmacists		2	2	0	2		2		26300			26300	3.16	5.37		N.B.: 1. Contractual employees appointed under OSH&FWS shall be entitled to an annual increment of 5% on the base remuneration of FY 2025–26 , along with Performance Incentive (PI) of up to 25% of the revised base remuneration , subject to performance appraisal and applicable guidelines. 2. Employees engaged through outsourcing under NHM shall be paid remuneration in accordance with the outsourcing norms prescribed by OSH&FWS . 3. Unit Cost Specified in the given column is only an indicative cost for calculation/ estimation purpose .
142.1	SD	Pharmacists		0	0	0	0	0	0		26300			26300	3.16	0.00		
142.1	SD	Pharmacists			0	0			0		26300			26300	3.16	0.00		
142.1	SD	Pharmacists			0	0			0		26300			26300	3.16	0.00		
142.1	SD	Paediatrician		0	0	0	0		0	106379	111698	27925		139623	16.75	0.00		
142.1	SD	Specialist Medicine		0	0	0	0		0	106379	111698	27925		139623	16.75	0.00		
142.1	SD	Pathology Specialist - part time		0	0	0	0		0	72000	72000			72000	8.64	0.00		
142.1	SD	Medical Officer - Full Time (UPHC)		2	2	0	2	0	2	85101	89356	22339		111695	13.4	18.76		UPHC-9, 24/7 UPHC-7
142.1	SD	Medical Officer - Part Time (OG-1 + Paediatrician-1+ Med / Eye / Dental / ENT / Skin-VD - 1) (UPHC)		2	2	0	2	0	2	3750/ 3125/ 1500								UPHCs increased from 116 to 125
142.1	SD	Medical Officers MBBS - UAAM			0	0			0									MO for UAAM The Budget to be proposed under PM-ABHIM. @Rs. 111695/- PM x 138 x 12 = 924.83 Lakhs (i.e. 50% Budget to be projected looking into expenditure pattern)
142.1	SD	Medical Officers MBBS - UCHC		0	0	0	0		0	85101	89356	22339		111695	13.4	0.00		
142.1	SD	Medical Officer - Part Time (OG-1 + Paediatrician-1+ Med / Eye / Dental / ENT / Skin-VD - 1) (UCHC)		0	0	0	0	0	0	3750/ 3125/ 1500								UCHCs increased from 5 to 7
Total SD			0	16	16	0	16	0	16							48.58	1.52	

S.No.	Category of NHM Manpower	Position Name	Current Sanctioned Position in FY 2024-26			Proposed NHM Manpower in 2026-27 (Dropped/ Continue/ New)				Base Remuneration Approved in 2025-26	Revised Base Remuneration Proposed in PIP 2026-27 (5% increment on base 25-26)	PI (25%) (For SHSRC PI 15%)	KBK Incentive	Total Remuneration p.m.	Total Remuneration per person per Annum (in Lakhs)	Total Budget per Annum (in Lakhs)	EPF	Remarks
			Govt.	NHM	Total	Drop	Cont	New	Total									
142.3	PM	Public health manager - KBK		0	0	0	0		0	34725	36461	9115	1000	46576	5.59	0.00		
142.3	PM	Public health manager - Non KBK		0	0	0	0		0	34725	36461	9115		45576	5.47	0.00		
142.3	PM	Programmer Manager UH		0	0	0	0		0	93638	98320	24580		122900	14.75	0.00		
142.3	PM	Convergence & Community process		0	0	0	0		0	81912	86008	21502		107510	12.9	0.00		
142.3	PM	Accounts Manager		0	0	0	0		0	81912	86008	21502		107510	12.9	0.00		
142.3	PM	Data Manager		0	0	0	0		0	81912	86008	21502		107510	12.9	0.00		
142.3	PM	Programme Associate		0	0	0	0		0	52684	55318	13830		69148	8.3	0.00		
142.3	PM	Programme Assistant		0	0	0	0		0	42917	45063	11266		56329	6.76	0.00		
142.3	PM	Additional Mission Director		0	0	0	0		0	165755	174043	43511		217554	26.11	0.00		
142.3	PM	Asst. Programme Manager UH - KBK		0	0	0	0		0	52684	55318	13830	1800	70948	8.51	0.00		
142.3	PM	Asst. Programme Manager UH - Non KBK		1	1	0	1		1	52684	55318	13830		69148	8.3	8.30		
142.3	PM	City Program Manager		0	0	0	0		0	64411	67632	16908		84540	10.14	0.00		
142.3	PM	City Account Manager		0	0	0	0		0	52684	55318	13830		69148	8.3	0.00		
142.3	PM	City Data Manager		0	0	0	0		0	52684	55318	13830		69148	8.3	0.00		
142.3	PM	Asst. Programme Manager- Urban		0	0	0	0		0	52684	55318	13830		69148	8.3	0.00		
142.3	PM	Programme Assistants		0	0	0	0		0	36399	38219	9555		47774	5.73	0.00		
		Total PM	0	1	1	0	1	0	1							8.30		
142.5	DEO	DEOs		0	0	0	0		0	23555	24733	6183		30916	3.71	0.00		

S.No.	Category of NHM Manpower	Position Name	Current Sanctioned Position in FY 2024-26			Proposed NHM Manpower in 2026-27 (Dropped/ Continue/ New)				Base Remuneration Approved in 2025-26	Revised Base Remuneration Proposed in PIP 2026-27 (5% increment on base 25-26)	PI (25%) (For SHSRC PI 15%)	KBK Incentive	Total Remuneration p.m.	Total Remuneration per person per Annum (in Lakhs)	Total Budget per Annum (in Lakhs)	EPF	Remarks
			Govt.	NHM	Total	Drop	Cont	New	Total									
142.5	DEO	Data assistant cum accountant		2	2	0	2	0	2	19791	20781	5195		25976	3.12	4.99	0.26	Approval 2025-26: For UPHC- 116 & CHC - 7 Total no of Posts approved in 2025-26- 123 New proposal - 9 DAA for 9 New UPHC Prposeds in 2026-27 Salary for same post are propsoed for 6 month in the PIP 2026-27
		Total DEO	0	2	2	0	2	0	2							4.99		
142.6	SS-F	Support Staff		2	2	0	2		2	12762	13400			13400	1.61	2.58		N.B.: 1. Employees engaged through outsourcing under NHM shall be paid remuneration in accordance with the outsourcing norms prescribed by OSH&FWS . 2. Unit Cost Specified in the given column is only an indicative cost for calculation/ estimation purpose .
142.6	SS-F	Support Staff UAAM (multipurpose)			0	0			0									
		Total SSF	0	2	2	0	2	0	2							2.58	0.00	
		Grand Total	0	21	21	0	21	0	21	0	0	0	0	0	0	64.45	1.78	

Jagatsinghpur

HSS-1_Comprehensive Primary Healthcare (CPHC)

S.No.	Scheme/ Activity	Approval FY 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
	Total CPHC					187.08	
150	Operationalisation of Ayushman Arogya Mandirs (AAM) - Rural					133.32	Target 2026-27 - 7984 (1296 PHC, 6688 SHC)
150.1	IT equipment for AAMs (PHC and SHCs)						Budget Proposed under HSS-18_IT Interventions and Systems_SI.No.203
150.2	Drugs & Supplies for AMMs					0.00	
150.2.1	Procurement of Drugs & essentials						Drugs & essentials: Drugs and essentials are procured and supplied out of State Budget as per facility based EDL.
150.3	Lab Strengthening of AAMs					0.00	
150.3.1	Lab Strengthening for PHC AAMs					0.00	This activity is being supported under XV-FC. The final tranche for 2025–26 has been received in October 2025, and thus the same will be utilized in the upcoming financial year 2026-27. Additional Budget if any shall be met of NIDDAN (State Budget Scheme.)
150.3.1.1	Non Recurring Cost for PHC HWCs					0.00	
150.3.1.2	Recurring cost for PHC HWCs					0.00	
150.3.2	Lab Strengthening for SHC AAMs					0.00	This activity is being supported under XV-FC. The final tranche for 2025–26 has been received in October 2025, and thus the same will be utilized in the upcoming financial year 2026-27. Additional Budget if any shall be met of NIDDAN (State Budget Scheme.)
150.3.2.1	Non Recurring Cost for SC HWCs					0.00	
150.3.2.2	Recurring cost for SC HWCs					0.00	
150.4	Trainings for Ayushman Arogya Mandir (AAM)					0.00	Budget Proposed under HSS-16_Capacity building incl. training_SI.No.201
150.4.3.4	Printing activities for AAMs (PHC/ SHC)						Budget Proposed under HSS-19_IEC & Printing_SI.No.204
150.5	Incentives under CPHC Programme					0.00	
150.5.1	Performance incentive for Mid-level service providers						The CHOs' performance is tracked through 28 state customised indicators out of the 6688 SHCs - 5406 CHOs are already in position so they will be eligible to get their incentives for 12 months and the rest 1282 CHOs who are expected to join in FY 26-27 will be eligible for getting 8 months incentive. Budget proposed under HSS-9_HRH, SI.No.188
150.5.2	ASHA Incentives for Ayushman Bharat Health & Wellness Centers						Budget Proposed under HSS-17_ASHA Incentives_SI.No.202
150.6	Independent Monitoring Cost for performance assessment of AAMs	Lumpsum	3000000	30.00	0	0.00	Ongoing activity Proposed as approved last year and as per GoI norms. The proposed activity will be taken-up by 3rd party, to be decided through competitive bidding process. The Detailed proposal placed at Write-up Annexure
150.7	Any Other (Please Specify)					133.32	
150.7.1	House Rent for SC HWCs where Govt. building isn't available	Per SHC HWC p.m.	3000	0.03	21	7.56	Ongoing Activity with revised unit cost Proposal for 2026-27: 747 AAM SC are functioning in a rented property. It is proposed that they would be operating on a rented building @Rs.3000/per month (including electricity)

S.No.	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2026-27		State Remarks
					Quantity/ Target	Budget (Rs. Lakhs)	
150.7.2	Equipping the Sub-Centre/ PHCs -AAM with essential equipment, Instruments and furniture (EIF) for the delivery of Comprehensive Primary Health Care Services. (Without Civil Cost)	Lumpsum	200000	2.00	35	70.00	Ongoing Activity Justification: Provision of essential equipment, instruments, and furniture (EIF) at AAM SHCs is critical for delivering CPHC services. This support will ensure functionality of screening, diagnostic and basic treatment services, improve service quality and enhance client experience at AAMs. The proposal excludes civil works. The requirement has already been saturated in all PHCs & 5400 SC AAMs. Proposal: 1288 new SHCs (i.e. 6688 total approved SC AAMs -- 5400 functional SC AAMs) Budget Approved: @ Rs.2.00 lakhs new SHC
150.7.3	e-Decision Support System for Community Health Officers(DSS) - CHO Sathi App						Budget Proposed under HSS-18_IT Interventions and Systems_Sl.No.203
150.7.4	Award to best performing AAM at the state level	Lumpsum	1100000	11	0	0.00	Ongoing Activity Justification: The Annual Award initiative for AAM SHCs aims to recognize high-performing facilities, promote healthy competition, motivate frontline workers and encourage best practices to strengthen primary healthcare service delivery. Purpose: To recognize and encourage high-performing SHC AAMs under Ayushman Bharat. Selection Criteria (Total 100 marks): Proposal-1: District Level • Performance Linked Payment (PLP) to CHO – 15% • Team-Based Incentive (TBI) – 30% • Kayakalp Award – 15% • NQAS Certification – 40% Proposal-2: State level Criteria • The selected high performing SHC AAM team from the districts needs to give a write up on the innovations and quality initiatives undertaken at the SHC • A committee would be formed where they will short list the best performing AHC AAM team from the nominations received Budget: 1. Proposal-1 : Award to best performing AAMs at the district level @ Rs. 30000/- X 30 = Rs. 9.00 Lakhs 2. Proposal-2 : State Level Award Ceremony for Best Performing SC-AAMs (To be decided among winners from Districts)on the UHC day @ Rs. 2.00 Lakhs Total : RS. 11.00 Lakhs Recommended after discussion in the NPCC Meeting
102.3	Comprehensive Geriatric Services						Proposal: CGA for Strengthening Geriatric Services Background: Odisha accounts for 9% of the country's total elderly population, with 86.3% residing in rural areas. Odisha is ranked among the top six states with the highest proportion of elderly persons, with the share projected to rise from 9.5% in 2011 to 15.8% by 2031.

S.No.	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2026-27		State Remarks
					Quantity/ Target	Budget (Rs. Lakhs)	
102.3.1	Capacity Building/ Training :: Comprehensive Geriatric Care & Management	Per Batch	100000	1.00	2	2.00	Budget Heads : 1. Capacity Building/ Training :: Comprehensive Geriatric Care & Management • Proposal 2026-27: Refresher Training of MOs & Nursing Officers of PHC/ UPHC AAMs with special focus on CGA Batch Size - 40, Duration -2 Days , Nature of Training - Residential & at District Level, Total Batches: 70 • Budget: Rs.1.00 lakhs per batch (This is a specialised training . Hence, can not be a part of integrated training) 2. Customization of application for CGA developed by NIPI (Lump sum): Rs.10.00 Lakhs 3. Follow up Support : No additional budget proposed At Homes – MHUs & empanelled Physiotherapists At facility level : Connect with Specialists through e- Sanjeevani ASHA Incentive – already part of CPHC Team based incentive 4. Orientation for Family led care at SC AAM – This year out of JAS Fund (in case required shall be proposed in next FY 2027-28) 5. Patient Treatment/ Follow up Card @ 1.50 Lakhs population X 20 per card Budget Shifted from NCD-3 NPHCE, SI No.102.3 as per recommendation in the NPCC meeting Details Justification is at CPHC Write-up Annexure
102.3.2	Customization of application for CGA developed by NIPI	Lumpsum	1000000	10.00	0	0.00	
102.3.3	Patient Treatment/ Follow up Card	Per Card	20	0.00	0	0.00	
150.7.5	Review cum Sensitization Meeting						
150.7.5.1	Block Level	Quarterly	1200	0.012	189	2.27	Block Level Review meeting (4 times in a year) Approved budget is Rs.300/- HWC team (Rs.300 will be utilized towards refreshment cost for the team)
150.7.5.2	District Level	Quarterly	1200	0.012	189	2.27	Quarterly District Level Review meeting Approved budget is Rs.300/CHO (Rs.200/- for reimbursement of travel using public conveyance and Rs. 100/- for refreshment)
150.7.5.3	State Level	Per Annum	120000	1.2	0	-	
150.7.5.4	District bi-annual Convergence Meeting with NHM & NAM	Bi annual	10000	0.1	1	0.20	Ongoing Activity Justification: The bi-annual convergence meeting strengthens coordination between NHM and NAM for effective implementation of Ayushman Arogya Mandirs (AAMs). It provides a joint platform to review service delivery, address gaps in human resources, logistics and reporting, and monitor delivery of the 12 CPHC service packages, including AYUSH integration, wellness and preventive health activities. Held twice a year at the district level, the meeting involves District Health Officers, AYUSH MOS-cum-CHOs, selected CHOs from AYUSH AAM areas and district programme managers. Discussions are data-driven, focusing on performance review, challenges and corrective actions with emphasis on integrated planning and monitoring. Follow-up actions are documented and tracked for timely implementation. The meeting is facilitated by the District Health Administration with support from NHM and NAM teams, ensuring alignment of priorities and optimal resource use. Budget: Rs.10000/- per district × 2 times

S.No.	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2026-27		State Remarks
					Quantity/ Target	Budget (Rs. Lakhs)	
150.7.6	Observance of Ayushman Arogya Shivar	Lumpsum					Ongoing Activity AAS is proposed to extend doorstep primary care in remote areas and provide fixed-day specialist services at PHC and CHC levels between the 1st–3rd week of each month. This model strengthens continuity of care, improves access to essential and specialist services, and reduces patient travel and expenses.
150.7.6.1	At AAM SHC	Per AAM SHC	18000	0.18	189	34.02	Budget: AAM SHC - 6688 × 5000 × 12 - 30% Budgeted
150.7.6.2	At AAM PHC	Per AAM PHC	24000	0.24	35	8.40	AAM PHC - 1296 × 5000 × 12 - 40% budgeted
150.7.6.3	At CHC	Per CHC	60000	0.6	11	6.60	CHC - 375×10000 × 12- 50% budgeted Note: As there is crunch of Human Resources, including doctors & Specialists at different levels, we expect to use about 50% of the budget at the SHC level, 60% at the PHC level, and 80% for organizing the camps. If needed, additional funds will be provided through the Supplementary PIP.
151	Wellness Activities at AAMs- Rural					53.76	Details Justification is at CPHC Write-up
151.1	Incentive/ honorarium for Yoga Instructor	Per AAM/ Per Annum	48000	0.48	224	53.76	Ongoing Activity proposed as approved last year Proposal: State has proposed for 20 Yoga Sessions per month. Out of 20 sessions, 12 session will be funded under state budget & rest shall have been proposed under NHM PIP. Recommended after discussion in the NPCC Meeting Budget proposed: 50% looking in to expenditure trends of previous years Detailed Proposal is at CPHC Write-up Annexure
151.2	IEC activities under CPHC			0.00			Budget Proposed under HSS-19 _IEC & Printing _Sl.No.204
152	Teleconsultation Facilities at AAMs-Rural					0.00	Budget Proposed under HSS-18 _IT Interventions and Systems _Sl.No.203
153	CHO Mentoring					0.00	
153.1	State Mentorship for the CHOs	Per CHO p.m.	5400	0.054	0	-	Ongoing Activity Proposed as approved last year Gol's mentorship initiative is initiated through CMC Vellore. At present state has 10 trained mentors. The state is expected to have 35 State mentors by end of FY 24-25. Each mentor will be tagged 36 CHOs each. Recommended after discussion in the NPCC Meeting
	Total CPHC					187.08	

HSS-2_Blood Services & Disorders

S.No.	Scheme/ Activity	Approval FY 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
	Total Blood Services & Disorders					17.40	
154	Screening for Blood Disorders					-	
154.1	Universal Screening of Sickle Cell at Field and Facility Level						Target beneficiary for universal screening of Sickle Cell in 21 vulnerable Districts As per GoI mandate, all 0-40 yr population shall be screened. - This year in PIP 2026-27, a total of 67,66,069 population will be screened (proposed as targeted in 2026-27) Details of Justification & Budget is at Write-up Annexure
154.1.1	Universal Screening	Per POCT	100	0.001		0.00	Not Proposed this year as the activity taken-up through State Health Budget.
154.2	Follow-up of Sickle Cell Positive Cases for Treatment Compliance						Frequency of Visit & Budget Head : Proposed for 6 home visits per year & Funded under MOTA
154.3	Sickle Cell Status Cards	Per card	18	0.0002	0	0.00	1. For FY 2026-27: Targeted Beneficiary: 43,00,000 Nos (Cards will be delivered to each screened individuals under NSCAEM Programme by ASHAs) Budget approved @ Rs.18/- (Competitive bidding Price)X 22,63, 869=Rs.407.50 Lakhs(Approx.) Target Revised as approved by GoI
154.4	Cap. Hydroxyurea to SCD patients	Per Capsul	3	0.00		0.00	New Activity Out of the total Requirement of Cap. HU, 95% will be procured from State EDL and 5% will be procured from NHM fund for reduction of any stock out at the various Health Institutions including AAM SCs levels Total Budget requirement for purchase of Hydroxyurea: 1. Total Requirement HU -500mg (FY 2026-27): 7,75,77,100. 2. Total Requirement HU -300mg (FY 2026-27): 3,17,17,040. 3. Total Requirement HU -100mg (FY 2026-27): 2,27, 51,545. Total requirement for HU is 13,20,45,685. Total Budget requirement for 132045685 HUs is Rs. 3961.37 Lakhs (@ RS.3/- per Cap) Budget to be proposed under State Budget
154.5	Establishment of New Chorionic Villus Sampling (CVS) Center						New Activity Details of Justification & Budget is at Write-up Annexure
154.5.1	Non Recurring Cost	Per Unit	2880000	28.80	0	0.00	Budget Not Approved
154.5.2	Recurring Cost	Per Unit	200000	2.0	0	0.00	Budget Not Approved
154.6	Printing of Records/ Reports for strengthening follow up SCD Cases					0.00	Budget Proposed under HSS-19_ IEC & Printing_SI.No.204
154.7	Capacity Building/ Training						Budget Proposed under HSS-16_Capacity building incl. training_SI.No.201
154.7.4	Follow-up of Sickle Cell Positive Cases for Treatment Compliance (6 home visits per year)- Funded under MOTA	Per ASHA	20	0.000		0.00	Fund to be met out of MoTA

S.No.	Scheme/ Activity	Approval FY 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
155	Support for Blood Transfusion					12.36	
155.1	Free user charges for blood transfusion of all cases treated at Public Health Facilities	Per Unit	400	0.00	3089	12.36	Free Blood Issued in 2024-25: 4.56 lakhs Budget Proposed in 2026-27: 450000 units
155.2	Establishment of New Blood Component Separation Units	Per unit		-		-	Not Proposed
155.3	Lab Automation of Blood Grouping and Cross Matching Services	Per unit	350	0.00	0	-	Details of Justification & Budget is at Write-up Annexure
156	Blood Bank/ BCSU/ BSU/ Thalassemia Day Care Centre					5.04	
156.1	Establishment of Blood Storage Unit						Blood Storage Units: Proposed for selected 30 Community Health Centres (CHCs) to ensure availability of blood transfusion services. Justification: • These are high case load facilities • Surgeries, emergency and trauma cases are being managed along with management of severe anaemia cases etc. in these CHCs. • These CHCs are selected for NQAS Certification (Standard E12 NQAS Checklists)and availability of BSU services is one condition for NQAS certification. Details of Justification & Budget is at Write-up Annexure
156.1.1	Non-Recurring Cost	Per Unit	456000	4.56	1	4.56	Equipments/ instruments & Furniture • Blood bank Refrigerator: @ Rs. 3.00 lakhs X 1 Nos=Rs.3 lakhs • Deep Freezer:@ Rs. 1.00 lakhs X 1 Nos=Rs.1 lakhs • Cold Box: 2 Nos @ Rs 3,000X 2 Nos=Rs.0.06 lakhs • Binocular Microscope: 1 Nos (To be met from BPHL) • Centrifuge: 1 Nos (To be met from BPHL) • Lab Reagents and Consumables: To be met from BPHL • Furniture's: Rs 50,000/- Total Budget: Rs.4.56 lakhs per BSU Civil Cost proposed under HSS-4 Civil Infrastructure
156.1.2	Recurring Cost	Per Unit	24000	0.24	2	0.48	Recurring expenses for Blood storage unit (BSU) :- Total FRU in the State - 94; Blood Bank functional in : 51 FRUs; BSU functional in 42 FRUs. Recurring cost Approved for 42 Existing BSUs @24000/- per BSU per Annum
156.2	Training of Blood Bank/Blood Storage Unit (BSU)						Budget Proposed under HSS-16_Capacity building incl. training_ SI.No.201
156.3	Establishment of 10 bedded Integrated Centre for Hemoglobinopathies and Haemophilia (ICHHs)						New Activity Establishment of 10 bedded Integrated Centre for Hemoglobinopathies and Haemophilia (ICHHs) at 10 DHHs with high SCD cases load in the District in FY 2026-27. Districts proposed to be Covered in 2026-27: Sambalpur, Koraput, Kalahandi, Balangir, Bargarh, Kandhamal, Nuapada, Nabarangpur, Rayagada and Sundargarh) with high SCD cases load in the District in FY 2026-27. Details of Justification & Budget is at Write-up Annexure

S.No.	Scheme/ Activity	Approval FY 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
156.3.1	Non Recurring Cost	Per Unit	559000	5.59	0	-	1. Non recurring cost 1.1. Equipments/ instruments & Furniture • Beds with mattress-10 Nos@Rs.20,000 per unit- Rs 2.00 lakhs • IV stand-10 Nos@ Rs.3,000 per unit- Rs. 0.30 lakhs • Bed Side locker-10 Nos @ Rs 6000-Rs.0.60 lakhs • Examination table with steps stool with mattress – 1 No-Rs. 0.12 lakhs • Kidney trays- 2 nos @Rs 500 per unit-Rs.0.01 lakhs • Needle destroyer-2nos@Rs.2000/-per unit- Rs. 0.04 lakhs • BP instruments- 2 nos @ Rs 3000 per unit-Rs 0.06 lakhs • Ferritin Assay-1 Nos-Rs.2.00 lakhs • Stethoscope 2 nos @ Rs 1500 per unit-Rs.0.03 lakhs • Weighing Scales-2 Nos @ Rs.1500 per unit- Rs 0.03 lakhs • Almirah-2 Nos @ Rs 10,000 per unit-Rs.0.20 • Refrigerator 220L-1 No-Rs 0.20 lakhs Total budget-5.59 lakhs per unit 2. Civil Infrastructure is proposed under HSS-4_IPHS
156.3.2	Recurring Cost	Per Unit	60000	0.60	0	-	
156.4	E-rakt kosh	Lumpsum/ per annum	6608000				Current Status: e-blood bank is operational at 90 Blood Bank (Govt. Blood Center- 56, 2 Red cross Blood Center and 32 Pvt and Other PSU Blood Centers). 66 Manpower Service has been provided to the Govt. and Red Cross Blood Centers (56 Blood Centers) @Rs.30900/- per person (Including 18% GST) Justification: NHM has supported for positioning of Technical Resources at all Govt. and Red Cross Blood Banks to operationalise e-Blood Bank since 2015-16. The application has already integrated with e-Rakt Kosh of Gol. Proposal for 2026-27: 1. HR Cost: Budget proposed with resource cost at par with the Techno-Managerial Skilled Labor Cost prescribed by H & FW Department, Govt. of Odisha adhering to the Minimum Wages Act. (Buduget Proposed under HSS-9, HRH SI No-184) 2. Budget for Application Maintenance, Change Request, Code Upgradation and Cyber Security Audit Cost of the Application.(Buduget Proposed under HSS-18, IT Interventions, SI. No. 203)
157	Blood collection and Transport Vans					-	
157.1	Non Recurring Cost	Per MBCV	6000000	60.00		-	Not proposed

S.No.	Scheme/ Activity	Approval FY 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
157.2	Recurring Cost						Ongoing activity Status: 11 Blood Collection Van full functional & 7 newly approved in Supplementary PIP will be functional on Sept 2026. Hence, budget proposed for 11 Blood Collection Van for 12 months & 6 months for 7 newly approved vans. Proposal for Operational cost for Mobile blood collection vans (i.e. POL/ DOL, Contingency etc.): For Existing Blood Collection Van: @Rs.30000/- PM X 11 existing units X 12 months = Rs.39.60 Lakhs For New Blood Collection Van: @Rs.30000/- PM X 7 New units X 6 months = Rs.12.60 Lakhs HR proposed under HSS-9
157.2.1	For Existing Blood Collection Van	Per Van P.A	360000	3.60	0	-	
157.2.2	For New Blood Collection Van	Per Van for 6 months	180000	1.80	0	-	
158	Other Blood Services & Disorders Components					0.00	
158.1	Support to CoC			-		0.00	Establishment & Functionalisation of Centre of Competence at SCB,MCH & VIMSAR Burla. Budget to be met out of MoTA fund
	Total Screening of Blood Disorders					17.40	

HSS-3_Community Engagement

S.No.	Scheme/ Activity	Approval FY 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
	Total Community Engagement					104.27	
159	ASHA (Including ASHA Certification and ASHA Benefit Package)					101.47	ASHA Status: Existing number of ASHAs: 49990 (As per approval in PIP 2024-26) Proposal for 2026-27: 835 new ASHAs (640-Rural area & 195-Urban area) will be selected in villages/urban slum areas having 2000 or more population. Total ASHA for 2026-27: 50825= 49990 (existing as per PIP 2024-26) + 835 (640-Rural area & 195-Urban area) new ASHAs to be selected in villages/urban slum areas having 2000 or more population.
159.1	ASHA Incentives			-		-	Budget Proposed under HSS-17_ASHA Incentives_SI.No.202
159.2	Selection & Training of ASHA						
159.2.1	Selection of ASHAs	Per ASHA		-			Selection: ASHA shall be selected for engagement in following cases in 2026-27. a. Fill-up of existing vacancies i.e. 250 in nos b. Selection of new additional ASHAs in Rural & Urban areas with more than 2000 population i.e. 835 in nos. Budget To be met out of JAS fund
159.2.2	Training of ASHAs						Budget Proposed under HSS-16_Capacity building incl. training_SI.No.201
159.3	Certification of ASHA by NIOS						
159.3.1	Certification on RMNCAH+N						Ongoing Activity Total Target: 33180 (7th pass ASHAs) Completed: 17850 (by 2025-26) Proposed for 3066 ASHAs (20% of rest 15330)
159.3.1.1	Registration fee for enrolment	Per ASHA	762	0.008	120	0.91	Cost proposed as per the norms of NIOS
159.3.1.2	Evaluations	Per ASHA	1200	0.012	120	1.44	External evaluation of ASHA is a part of certification process ,conducted by NIOS. For which, Gol provides funding to NIOS. . However, ASHAs are to come to the training site 2 days to undergo evaluation processes,. the sundry expenses for such visit are be borne by the State. The budget includes cost towards fee to evaluator (internal), travel, food, participation allowance for ASHAs and contingency cost etc. NIOS only provides fee of the evaluator for external evaluation of ASHAs.
159.3.1.3	Incentivision for successfully completing certification course	Per ASHA	5000	0.050	120	6.00	Cost proposed as per Gol Guidelines
159.3.2	Certification on EPS						Ongoing activity Total number of ASHAs having 7th & above educational qualification - 33180 Planned for Certification 3310 ASHAs during 2026-27 (i.e. 10% of the Total Target)
159.3.2.1	Training on EPS for NIOS Certification						Budget Proposed under HSS-16_Capacity building incl. training_SI.No.201

S.No.	Scheme/ Activity	Approval FY 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
159.3.2.2	Registration fee for enrolment	Per ASHA		-		0.00	Dropped as per the discussion in the NPCC Meeting
159.3.2.3	Evaluations	Per ASHA	1200	0.012	120	1.44	External evaluation of ASHA is a part of certification process ,conducted by NIOS. For which, Gol provides funding to NIOS. . However, ASHAs are to come to the training site 2 days to undergo evaluation processes,. the sundry expenses for such visit are be borne by the State. The budget includes cost towards fee to evaluator (internal), travel, food, participation allowance for ASHAs and contingency cost etc. NIOS only provides fee of the evaluator for external evaluation of ASHAs.
159.3.2.4	Incentivision for successfully completing certification course	Per ASHA	5000	0.050	120	6.00	Cost proposed as per Gol Guidelines
159.4	Mobile Academy						Ongoing Activity The Mobile Academy is a mobile-based RMNCH training course for ASHAs, focusing on refreshing their knowledge of life-saving health behaviors and improving engagement with mothers and families. The self-paced course offers flexibility, allowing ASHAs to complete it at their convenience. In Odisha, 33,759 ASHAs (67% of 50,319 registered) have completed the course so far.
159.4.1	Printing of Certificates					0.00	Budget Proposed under HSS-19_IEC & Printing_Sl.No.204
159.4.2	Compensation to ASHAs for Mobile Academy course	Per ASHA		-		0.00	Justification: Mobile Academy is a 4 hour mobile-based course that all the ASHAs of the state needs to complete. As a wage loss compensation an incentive of Rs. 150/- will be given to ASHAs to motivate them to pursue the course. Dropped as per the discussion in the NPCC Meeting
159.5	Support provisions to ASHAs						
159.5.1	Uniforms	Per ASHA	1500	0.02	1135	17.03	Ongoing activity with revised unit cost Total number - 51015 (ASHA-50825 + ASHA Sathi-190) Budget proposed @ Rs. 1500/- per ASHA with revised unit cost. As the unit cost i.e. Rs.1200/- approved in PIP 2024-26 is not adequate to meet the expenses of uniform of ASHAs for a year due to hike in market price, it is proposed enhancing the cost from Rs. 1200/- to Rs.1500/-per ASHA. Recommended as per the Discussion in the NPCC Meeting
159.5.2	ID Cards	Per ASHA	100	0.00	6	0.01	Identity Card will be provided to the newly selected ASHAs Ongoing activity
159.5.3	ASHA Gruha at Facility Level	Per Gruha/ Per Annum	126000	1.26	4	5.04	Ongoing activity as approved last year ASHA Gruhas have been established at 209 public health facilities having monthly average delivery load 50 or more. Budget proposed @ Rs. 126000/- per ASHA Gruha per annum. (Rs. 9000/- towards performance incentive (Rs. 250/- as incentive per day & Rs.50/- as food cost to ASHA) & Rs.1500/- towards maintenance cost. As ASHA is performing duty in the ASHA Gruha for 24 hours, she will be provided an amount of Rs. 250/- per day towards performing duties in ASHA Gruha along with Rs. 50/- towards food cost. Approval in last year Rs.250/- per day for performing duties in ASHA Gruha which has been increase to Rs.300/- in 2026-27 in view of demand from ASHAs. Recommended after Discussion in the NPCC Meeting

S.No.	Scheme/ Activity	Approval FY 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
159.5.4	Felicitation of best performing ASHAs	Per Block	5000	0.05	9	0.45	Ongoing Activity Justification: Felicitate best performing ASHAs with award to encourage them to continue with the performance and to motivate others to perform better. Budget: @Rs.5000/- per unit for 349 units (Block-314. Municipal Corporation & other major cities 35) Budget Revised as per recommendation of NPCC
159.5.5	ASHA Convention	Per Block	15000	0.15	9	1.35	Ongoing Activity with revised unit cost Justification: A forum to provide opportunity to ASHAs for cross learning through peer facilitation. Budget: @ Rs. 15000/- per unit X 349 Recommended after Discussion in the NPCC Meeting
159.5.6	Kit Bag for ASHAs	Per ASHA	1655	0.02	1133	18.75	New Activity Kit bag for ASHAs have been recommended in the Guidelines (i.e. Operational Guidelines for strengthening Laboratory services under Free Diagnostic Services initiatives) issued by Gol. It will help ASHAs to carry the kit items while going for household visits. The kit bag shall have the facilities to keep Baby Feeding Spoon, Mucus Extractor, Thermometer, LED Torch, Baby Blanket, Digital Wrist Watch, Communication Kit, bag & Weighing Scale for Newborn etc . Unit Cost Proposed as per Gol Recommendation
159.5.7	ASHA Corpus Fund	Lumpsum	10000000	100.00	0	0.00	Ongoing activity: Proposed as approved last year ASHA corpus fund is utilized to provide financial compensation for ASHAs in case of death or permanent disability. An amount of Rs. 100 Lakhs @ Lumpsum has been proposed towards ASHA Corpus fund as all ASHAs are not covered under both social security schemes. The proposal is to make the payment for compensation for death (@Rs.3.00 lakhs) and permanent disability (@Rs.3.00 lakhs for more than 80% disable, @Rs.2.00 lakhs for more than 60 to 80% disability & Rs. 1.50 lakhs for 40 to 60% disability) of ASHAs and ASHA SATHIs. Death compensation has been given to 56 ASHAs @ Rs. 3 lakh per ASHAs during 2025-26. Recommended after Discussion in the NPCC Meeting
159.5.8	ASHA Exit Policy	Per ASHA	100000	1.00	0	0.00	Ongoing Activity ASHAs who attains the age of 62 will be felicitated with a cash benefit of Rs. 1,00,000/- as part of her exit from the position of ASHA from the village. A total of 110 ASHAs are expected to attain age of 62 during 2026-27. Recommended after Discussion in the NPCC Meeting
159.5.9	Premium payment for enrollment under PMJJBY	Per ASHA	436	0.00	745	2.60	Ongoing activity Total no. of ASHAs (below 50 years of age)-38692 and ASHA SATHI - 250 Premium amount of Rs.436/- per person for ASHAs and ASHA SATHIs= 38942 Budget Proposed 80% of the total requirement.
159.5.10	Premium payment for enrollment under PMSBY	Per ASHA	20.00	0.00	1135	0.18	Ongoing activity - Approved with revised cost Premium amount of Rs. 20/- per ASHA for all 50825 ASHAs and 190 ASHA SATHIs Budget Proposed 80% of the total requirement.

S.No.	Scheme/ Activity	Approval FY 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
159.5.11	Travel allowance to ASHAs	Per ASHA/ Per Annum	1800	0.02	1133	18.35	Ongoing Activity with revised unit cost ASHA will be paid Rs. 150/- per month as travel allowance to compensate the travel expenses as she visits to the health facility and other places for various purposes in every month. Further, the incentive provisions does not cover the travel cost of ASHA while performing different activities at field level. Budget Proposed 90% of the total requirement.
159.5.12	Refreshment Cost for attending ASHA Monthly Meeting	Per ASHA/ Per Annum	600	0.01	1133	6.80	Ongoing Activity Review meeting of ASHAs at PHC level is a half day activity. An amount of Rs.50/- per month is provided towards refreshment cost for ASHAs attending such meetings
159.5.13	Mobile Handset Allowances to ASHAs						Budget Proposed under HSS-18_IT Interventions and Systems_SI.No.203
159.5.14	Mobile - SIM Charges for Closed User Group Connections						Budget Proposed under HSS-18_IT Interventions and Systems_SI.No.203
159.5.15	Contingency Cost	Per ASHA/ Per Annum	1200	0.01	1133	13.60	Ongoing Activity ASHA will be paid Rs. 100/- per month towards contingency cost to meet the expenses she incurs stationeries for different purposes in performing her day to day activities.
159.6	ASHA Facilitators						
159.6.1	Supervision Costs for ASHA facilitators	Per ASHA SATHI	36000	0.36	2	0.72	Ongoing activity Total no. of ASHA SATHIs in the state after delinking the role of ASHA & ASHA SATHI is 190. There is no plan to increase the no. of ASHA Sathis as mid level supervisors are given same responsibility as ASHA Sathis.
159.7	Drugs & Supplies for ASHA						
159.7.1	New ASHA Drug Kits			0.00		0.00	Integrated with SHC drugs
159.7.2	Replenishment of ASHA drug kits			0.00		0.00	Integrated with SHC drugs
159.8	Printing activities under ASHA						Budget Proposed under HSS-19_IEC & Printing_SI.No.204
159.9	Monthly Review meeting of ASHAs at PHC/ Sector level	Per sector	2400	0.02	42	0.81	Ongoing activity Facilitation and travel cost for block level CP nodal persons towards attending monthly meeting of ASHAs at PHC level Budget @Rs.200/- per PHC p.m. for 12 months Total PHCs - 1288 + additional meeting to be conducted at 222 PHCs where no. of ASHAs are more than 50 Budget Proposed 80%
160	VHSNC					1.60	
160.1	VHSNC/GKS Formation	Per GKS	1200	0.01	0	0.00	Ongoing Activity Proposal: Facilitation support cost for formation of new GKS at revenue village level with opening of bank account. Total GKS 2024-26 : 46162 Due to inclusion of revenue villages in urban local bodies and sub merge under various projects, 18 no. of VHSNC (GKS) closed. Further, 20 no. of GKS shall be formed in newly notified revenue villages as per the proposal submitted by the District administration. As per norm, VHSNC is formed at revenue village level, so the formation of 20 new GKS is proposed and cost of formation proposed accordingly. Total GKS 2026-27 : 46164 Recommended after Discussion in the NPCC Meeting

S.No.	Scheme/ Activity	Approval FY 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
160.2	Training/ Orientation- VHSNC/ GKS						Already Completed. Hence no new proposal in the current year.
160.3	Gradation of VHSNC/ GKS	Per SC	2000	0.02	0	-	New Activity: To ascertain the level of performance of each GKS based on various indicators i.e. Nos of Meeting Conducted , Annual Plan prepared , Activity implemented as per Plan, Status of Expenditure, Maintenance of registers/ documents, PRI involvement, integration of GKS activity with SCAAM-JAS plan and others. The assessment will be done by SC AAM Team. After assessment , GKS members will be invited to SC AAM & the result of the same shall be disseminated & orient them for improvement. This year, activity will be taken up in 30% SCs (Total SCs 812 in 40 aspirational blocks) Head of Expenses: Meeting Cost Recommended after Discussion in the NPCC Meeting
160.4	Printing of GKS Register						Budget Proposed under HSS-19_IEC & Printing_Sl.No.204
160.5	VHSNC/ GKS Convention	Per Convention	10000	0.10	8	0.80	Ongoing activity This is the Forum for experience sharing & develop better inter-sectoral convergence with line Departments at block level Recommended after Discussion in the NPCC Meeting
160.6	Award to Sustha Gaon	Per block	10000	0.10	8	0.80	It is intended to acknowledge the efforts of GKS to achieve certain indicators related to health and determinants of health in their respective village and encourage and motivate other GKS to put similar efforts. Award to best performing GKS once in a year. Budget Approved in 2026-27: Rs10000/- per GKS Recommended after Discussion in the NPCC Meeting
161	JAS					1.20	
161.1	Printing of JAS Register						Budget Proposed under HSS-19_IEC & Printing_Sl.No.204
161.2	Award to best performing JAS	Per qualified SC AAM	15000	0.15	8	1.20	Ongoing activity: State has developed a score card having 30 performance indicators for assessing JAS performance . Those are qualified based on their performance/score card , district level committee shall randomly validated the status report & there on felicitated. Details of guidelines attached in the write up Annexure. Recommended after Discussion in the NPCC Meeting

S.No.	Scheme/ Activity	Approval FY 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
161.3	Swasthya Sampark	Lumpsum	990000	9.90	0	0.00	Ongoing Activity Current Status: The Swasthya Sampark programme covers 42 PHCs located in difficult areas managed by partners in PPP mode in 37 Blocks of 15 districts. The programme intended to accelerate community involvement in the health and wellness activities, maximize delivery of CPHC services through SC AAM and thereby improve the health related indicators and health status of the population. Plan 2026-27: During 2026-27, it is proposed to cover 25 PHCs having minimum 2 or more SC AAMs in its feeding area and manage through PPP mode. These 25 PHCs are in 12 districts, 24 Blocks. Under these PHCs there are 92 SHC AAM & 644 GKS. Details of Proposal is at Community Engagement Write-up Justification Annexure Recommended after Discussion in the NPCC Meeting
162	RKS					-	Untied Fund Proposed under HSS-14_Sl.No.199
163	Other Community Engagements Components			-		0.00	
163.1	Participatory Learning and Action (PLA)	Lumpsum	24169000				Ongoing Activity Model Followed: Ekjut Arogya Pathe programme has been acknowledged by CRM, 2025 as a good practice in Primary health care. Arogya Pathe programme implemented in 40 Aspirational Blocks of the State with an objective to accelerate community engagement using Participatory Learning and Appraisal method to improve health related Key Performance Indicators (KPIs) under ABP. The programme is being implemented with the technical support from Ekjut. The activity has shown tremendous potential of promoting community ownership and action in addressing issues related to KPIs of ABP by developing a ecosystem among village, SC AAM and PHC AAM. More than 20000 community level meetings has been conducted by ASHA leading to better community mobilization and action. During the year 2026-27, the programme would focus on capacity development of stakeholders, community level meeting using PLA, integrated planning and action on issues related to KPIs, community facility interface, sharing experiences, cross learning experience and developing innovative models for addressing health related KPIs in ABPs. Coverage of the Programme: District-16, Block-40, PHC-136, SCAAM-812, GKS-6000 & ASHA-6254 Recommended after Discussion in the NPCC Meeting Details of Proposal is at Community Engagement Write-up Justification Annexure
163.1.1	State level strategy & Module preparation workshop on identifying key areas of interventions	Lumpsum	60000	0.60	0	0.00	To develop content, prototype for printing of module for Capacity development programme of stakeholders on Arogya Pathe Programme.

S.No.	Scheme/ Activity	Approval FY 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
163.1.1.1	State level Training of Trainers on incorporating PLA process	Per Batch	313000	3.13	0	0.00	To develop capacity of the ASHAs, Block & Sub-Block level officials on Arogya Pathe programme for organizing community level meeting at revenue village (GKS) using PLA by ASHAs. PHC Team of 136 PHCs, SSP Co-ordinators of 25 PPP mode managed PHCs, Block level officials @2 from 40 Blocks, District level officials @2 from each 16 District, State level officials 20 = Total participants 293
163.1.1.2	Training of ASHAs on Arogya Pathe- PLA Process of 40 Aspirational Blocks	Per Batch	74800	0.75	0	0.00	Total 6254 ASHAs to be trained (Total 208 batches @ 30 per batch) Budget: @ Rs. 74800/- per batch Budget 75% proposed
163.1.1.3	Orientation of CHO, ANM & HW (M) on supportive supervision & monitoring	Per Person	650	0.01	0	0.00	CHO-812, HW (F)-812 & HW (M)-430 from 812 SCAAM Total 2054 participants Budget: Per head 650/- Budget 83% proposed
163.1.1.4	Annual sharing workshop on Arogya Pathe	Lumpsum	500000	5.00	0	0.00	
163.1.2	Printing of Materials on Arogya Pathe	Per Set	50	0.00	0	0.00	
163.1.3	Facilitation & Award						
163.1.3.1	Travel & facilitation cost to Strengthen Supportive Supervision	Per Meeting	100	0.00	0	0.00	Travel & facilitation cost @ Rs.100/- per meeting. One Arogya Pathe facilitator - must attend 3 meeting in a month. Total meeting to be attended by Arogya Pathe Facilitator during 6 month-14616. Total Budget: Rs.100/- per meeting X 3 meeting to be attended in a month X 6 month X 812 Arogya Pathe Facilitator Budget proposed 80%
163.1.3.2	Facilitation cost to ASHAs for organizing Community level meeting-Swasthya Arogya Sabha	Per Meeting	150	0.00	0	0.00	Facilitation cost to ASHAs for organizing community level meetings using PLA @ 150/- per meeting 6000 meetings per month for 9 month. Budget: Rs.150 X 6000 Meeting X 9 Month Budget 75% proposed
163.1.3.3	Award to best performing Blocks on Arogya Pathe- PLA implementation	Lumpsum	100000	1.00	0	0.00	Award to be given to the best performing Blocks in achieving KPIs in ABP under Arogya Pathe Programme.. 1st position secured-Award Rs.50,000/- 2nd position secured- Award Rs.30,000/- & 3rd position secured Award Rs.20,000/- Budget: Total= 1.00 lakh
	Total Community Engagement					104.27	

Public Health Institutions as per IPHS norms Budgeting format for FY 2026-27

FMR Code	Programme/ Theme	S.No.	Scheme/ Activity	Approval FY 2026-27					State Remarks
				Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
HSS-4 Sub Total							106.20		
HSS.4	Public Health Institutions as per IPHS norms	164	District Hospitals					-	
		164.1	New Construction						
		164.2	Upgradation works						
		164.3	Ongoing/Spillover Works					-	Details in Civil Budget Writeup Annexure
		165	Sub-District Hospitals					-	-
		165.1	New Construction					-	Details in Civil Budget Writeup Annexure
		165.2	Upgradation works						
		165.3	Ongoing/Spillover Works					-	Details in Civil Budget Writeup Annexure
		166	Community Health Centers					-	
		166.1	New Construction	Lumpsum	0	0	1	-	Details in Civil Budget Writeup Annexure
		166.2	Upgradation works						
		166.3	Ongoing/Spillover Works					-	Details in Civil Budget Writeup Annexure
		167	Primary Health Centers					86.00	-
		167.1	New Construction	Lumpsum	8600000	86	1	86.00	Details in Civil Budget Writeup Annexure
		167.2	Upgradation works						
		167.3	Ongoing/Spillover Works					-	Details Budget is placed at HSS-4 IPHS Civil Annexure
		168	Sub-Health Centers					-	-
		168.1	New Construction						
		168.2	Ongoing/Spillover Works					-	Details Budget is placed at HSS-4 IPHS Civil Annexure
		169	Other Infrastructure/Civil works/Expansion etc.					20.20	-
		169.1	New Construction						
		169.2	Upgradation works						
		169.2.1	MNCU at MCHs Level	Lumpsum	-	0	1	-	Details Budget is placed at HSS-4 IPHS Civil Annexure
		169.2.2	Expansion of SNCU	Lumpsum	-	0	1	-	Details Budget is placed at HSS-4 IPHS Civil Annexure
		169.2.3	New NBSU at CHC level	Lumpsum	-	0	1	-	Details Budget is placed at HSS-4 IPHS Civil Annexure
		169.2.2	CLMC at MCHs Level	Lumpsum	-	0	1	-	Details Budget is placed at HSS-4 IPHS Civil Annexure
		169.2.3	MLCU at MCH/ DHH level	Lumpsum	-	0	1	-	Details Budget is placed at HSS-4 IPHS Civil Annexure

FMR Code	Programme/ Theme	S.No.	Scheme/ Activity	Approval FY 2026-27					State Remarks
				Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
		169.2.4	Establishment of 10 beded Integrated Centre for Hemoglobinopathies & Haemophilia (ICHH)	Lumpsum	-	0	1	-	Details Budget is placed at HSS-4 IPHS Civil Annexure
		169.2.5	Establishment of Blood Storage Units (BSUs)	Lumpsum	20,00,000.00	20	1	20.00	Details Budget is placed at HSS-4 IPHS Civil Annexure
		169.2.6	Civil Work under DEIC/ RBSK	Lumpsum	-	0	1	-	Details Budget is placed at HSS-4 IPHS Civil Annexure
		169.2.7	Refurbishing of Infrastructure: For Cochlear Implant Surgery unit	Lumpsum	-	0	1	-	Details Budget is placed at HSS-4 IPHS Civil Annexure
		169.2.10	Manitanance of 47 Hatcheries	Lumpsum	20,000.00	0.2	1	0.20	Details in Abstract Budget Annex Budget Shifted from NDCP-2 NVBDCP, SI No-64 As per recommendation of NPCC
		169.3	Ongoing/Spillover Works						
		170	Renovation/Repair/Upgradation of Facilities for IPHS/NQAS/LaQshya/ MUSQAN/SUMAN Compliance	Lumpsum	0	0	1	-	Details Budget is placed at HSS-4 IPHS Civil Annexure
HSS-4 Sub Total								106.20	
			Revalidation Proposals (Civil works)	Lumpsum	79842060	798.4206	1	798.42	Details at Annexure:5 (Revalidation format)
			Grand Total					904.62	

Civil Works under NHM for PIP 2026-27 (New Proposals)

Type of Institutions		MCH						DHH									
Sl.No.	Name of the District	Other Upgradation Works						Other Upgradation Works									
		MNCU at MCH level		CLMC at MCH level		MLCU at MCH level		Const./ Extension of SNCU		Upgradation of DHH level (MLCU)		Upgradation of ICHH		Upgradation DEIC		Set up CI surgy Unit	
		No. of Works	Budget	No. of Works	Budget	No. of Works	Budget	No. of Works	Budget	No. of Works	Budget	No. of Works	Budget	No. of Works	Budget	No. of Works	Budget
1	Anugola	0	0.00	0	0.00	0	0.00	0	0.00	1	30.00	0	0.00	0	0.00		
2	Baleshwar	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	1	7.13		
3	Baragada	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	1	10.00	0	0.00		
4	Bhadrak	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00		
5	Balangir	0	0.00	0	0.00	0	0.00	1	65.00	0	0.00	1	10.00	0	0.00		
6	Boudh	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00		
7	Kataka	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00		
8	Debagada	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00		
9	Dhenkanal	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00		
10	Gajapati	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00		
11	Ganjam	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00		
12	Jagatsinghpur	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00		
13	Jajpur	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00		
14	Jharsuguda	0	0.00	0	0.00	0	0.00	0	0.00	1	30.00	0	0.00	0	0.00		
15	Kalahandi	0	0.00	0	0.00	0	0.00	1	65.00	0	0.00	1	10.00	0	0.00		
16	Kandhamal	0	0.00	0	0.00	0	0.00	1	65.00	0	0.00	1	10.00	0	0.00		
17	Kendrapada	0	0.00	0	0.00	0	0.00	0	0.00	1	30.00	0	0.00	0	0.00		
18	Kendujhar	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00		
19	Khordha	0	0.00	0	0.00	0	0.00	0	0.00	1	30.00	0	0.00	0	0.00		
20	Koraput	0	0.00	0	0.00	0	0.00	1	65.00	0	0.00	1	10.00	1	20.00		
21	Malkanagiri	0	0.00	0	0.00	0	0.00	1	65.00	0	0.00	0	0.00	0	0.00		
22	Mayurbhanj	0	0.00	0	0.00	0	0.00	0	0.00	1	30.00	0	0.00	0	0.00		
23	Nabarangpur	0	0.00	0	0.00	0	0.00	1	65.00	0	0.00	1	10.00	1	134.21		
24	Nayagada	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00		
25	Nuapada	0	0.00	0	0.00	0	0.00	0	0.00	1	30.00	1	10.00	0	0.00		
26	Puri	0	0.00	0	0.00	0	0.00	0	0.00	1	30.00	0	0.00	1	15.00		
27	Rayagada	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	1	10.00	0	0.00		
28	Sambalpur	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	1	10.00	0	0.00		
29	Sonpur	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00		
30	Sundaragada	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	1	10.00	0	0.00		

Type of Institutions		MCH						DHH									
Sl.No.	Name of the District	Other Upgradation Works						Other Upgradation Works									
		MNCU at MCH level		CLMC at MCH level		MLCU at MCH level		Const./ Extension of SNCU		Upgradation of DHH level (MLCU)		Upgradation of ICHH		Upgradation DEIC		Set up CI surgey Unit	
		No. of Works	Budget	No. of Works	Budget	No. of Works	Budget	No. of Works	Budget	No. of Works	Budget	No. of Works	Budget	No. of Works	Budget	No. of Works	Budget
31	Capital Hospital, BBSR	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	1.00	10.00
32	RGH, Rourkella	0	0.00	0	0.00	0	0.00	1	65.00	0	0.00	0	0.00	1	8.00		
33	SCB MCH, Kataka	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00		
34	MKCG, MCH Brahmapur	0	0.00	1	30.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00		
35	VIMSAR, MCH Burla	0	0.00	1	30.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00		
36	SVPPGIP, Kataka	1	30.00	1	30.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00		
37	Bhubaneswar CHS	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00		
38	Kataka CHS	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00		
39	Sambalpur CHS	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00		
40	Brahmapur CHS	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00		
41	Rourkella CHS	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00		
42	FM MCH, Baleshwar	0	0.00	1	30.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00		
43	BB MCH, Balangir	1	30.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00		
44	SLN MCH, Koraput	1	30.00	1	30.00	1	30.00	0	0.00	0	0.00	0	0.00	0	0.00		
45	PRM MCH, Mayurbhanj	0	0.00	1	30.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00		
46	SJ MCH, Puri	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00		
47	AHRCC, Kataka	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00		
48	MHI, Kataka	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00		
49	DD, MCH, Kendujhar	1	30.00	0	0.00	1	30.00	0	0.00	0	0.00	0	0.00	0	0.00		
50	GMCH, Sundaragada	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00		
51	SCB Dental, Kataka	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00		
52	MCH Kalahandi	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00		
53	MCH Talcher, Anugola	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00		
54	MCH Jajpur	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00		
55	MCH Kandhamal	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00		
56	PGIMER, Capital Hospital,	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00		
57	AIIMS, Bhubaneswar	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00		
58	State	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00		
	Total	4	120.00	6	180	2	60.00	7	455.00	7	210.00	10	100.00	5	184.34	1	10.00

Civil Works under NHM for PIP 2026-27 (New Proposals)

Type of Institutions		Community Health Centers						Primary Health Centers						Renovation/ Repair/ Upgradation of facilities for IPHS/ NQAS / MUSQAN/ SUMAN Compliant		Grand Total 2026-27
Sl.No.	Name of the District	New Construction		Other Upgradation Works				Upgradation works		New Const						
				Upgradation of NBSU		Upgradation of BSU		Manitanance of Hatcheries		24x7		Day Care				
		No. of Works	Budget	No. of Works	Budget	No. of Works	Budget	No. of Works	Budget	No. of Works	Budget	No. of Works	Budget	No. of Works	Budget	
1	Anugola	0	0.00	0	0.00	1	10.00	1	0.10	0	0.00	0	0.00			40.10
2	Baleshwar	1	411.00	0	0.00	1	10.00	1	0.10	0	0.00	0	0.00			428.23
3	Baragada	0	0.00	0	0.00	1	10.00	0	0.00	0	0.00	0	0.00			20.00
4	Bhadrak	0	0.00	0	0.00	1	10.00	1	0.10	0	0.00	2	72.00			82.10
5	Balangir	1	411.00	0	0.00	1	10.00	1	0.10	0	0.00	2	72.00			568.10
6	Boudh	0	0.00	0	0.00	1	10.00	2	0.20	0	0.00	0	0.00			10.20
7	Kataka	1	411.00	0	0.00	1	10.00	1	0.10	2	100.00	0	0.00			521.10
8	Debagada	0	0.00	0	0.00	1	10.00	1	0.10	0	0.00	0	0.00			10.10
9	Dhenkanal	0	0.00	0	0.00	1	10.00	2	0.20	0	0.00	0	0.00			10.20
10	Gajapati	0	0.00	1	8.00	1	10.00	0	0.00	0	0.00	0	0.00			18.00
11	Ganjam	0	0.00	0	0.00	0	0.00	2	0.20	1	50.00	1	36.00			86.20
12	Jagatsinghpur	0	0.00	0	0.00	2	20.00	2	0.20	1	50.00	1	36.00			106.20
13	Jajpur	0	0.00	0	0.00	1	10.00	2	0.20	0	0.00	0	0.00			10.20
14	Jharsuguda	0	0.00	0	0.00	1	10.00	1	0.10	2	100.00	0	0.00			140.10
15	Kalahandi	0	0.00	0	0.00	1	10.00	3	0.30	2	100.00	0	0.00			185.30
16	Kandhamal	1	411.00	0	0.00	1	10.00	3	0.30	2	100.00	0	0.00			596.30
17	Kendrapada	1	411.00	0	0.00	1	10.00	2	0.20	0	0.00	0	0.00			451.20
18	Kendujhar	1	411.00	1	8.00	1	10.00	2	0.20	2	100.00	0	0.00			529.20
19	Khordha	1	411.00	0	0.00	1	10.00	1	0.10	1	50.00	0	0.00			501.10
20	Koraput	0	0.00	0	0.00	1	10.00	2	0.20	0	0.00	0	0.00			105.20
21	Malkanagiri	0	0.00	0	0.00	1	10.00	3	0.30	2	100.00	0	0.00			175.30
22	Mayurbhanj	1	411.00	0	0.00	1	10.00	2	0.20	0	0.00	0	0.00			451.20
23	Nabarangpur	1	411.00	0	0.00	1	10.00	2	0.20	2	100.00	0	0.00			730.41
24	Nayagada	0	0.00	0	0.00	1	10.00	1	0.10	0	0.00	0	0.00			10.10
25	Nuapada	1	411.00	0	0.00	1	10.00	0	0.00	0	0.00	0	0.00			461.00
26	Puri	1	411.00	0	0.00	1	10.00	1	0.10	2	100.00	0	0.00			566.10
27	Rayagada	0	0.00	1	8.00	1	10.00	2	0.20	0	0.00	0	0.00			28.20
28	Sambalpur	0	0.00	0	0.00	1	10.00	3	0.30	2	100.00	0	0.00			120.30
29	Sonpur	0	0.00	0	0.00	1	10.00	0	0.00	2	100.00	0	0.00			110.00
30	Sundaragada	0	0.00	1	8.00	1	10.00	3	0.30	2	100.00	0	0.00			128.30

Type of Institutions		Community Health Centers						Primary Health Centers						Renovation/ Repair/ Upgradation of facilities for IPHS/ NQAS / MUSQAN/ SUMAN Compliant		Grand Total 2026-27
Sl.No.	Name of the District	New Construction		Other Upgradation Works				Upgradation works		New Const						
				Upgradation of NBSU		Upgradation of BSU		Manitanance of Hatcheries		24x7		Day Care				
		No. of Works	Budget	No. of Works	Budget	No. of Works	Budget	No. of Works	Budget	No. of Works	Budget	No. of Works	Budget	No. of Works	Budget	
31	Capital Hospital, BBSR	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00			10.00
32	RGH, Rourkella	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00			73.00
33	SCB MCH, Kataka	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00			0.00
34	MKCG, MCH Brahmapur	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00			30.00
35	VIMSAR, MCH Burla	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00			30.00
36	SVPPGIP, Kataka	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00			60.00
37	Bhubaneswar CHS	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00			0.00
38	Kataka CHS	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00			0.00
39	Sambalpur CHS	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00			0.00
40	Brahmapur CHS	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00			0.00
41	Rourkella CHS	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00			0.00
42	FM MCH, Baleshwar	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00			30.00
43	BB MCH, Balangir	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00			30.00
44	SLN MCH, Koraput	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00			90.00
45	PRM MCH, Mayurbhanj	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00			30.00
46	SJ MCH, Puri	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00			0.00
47	AHRCC, Kataka	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00			0.00
48	MHI, Kataka	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00			0.00
49	DD, MCH, Kendujhar			0	0.00	0	0.00	0	0.00							60.00
50	GMCH, Sundaragada			0	0.00	0	0.00	0	0.00							0.00
51	SCB Dental, Kataka			0	0.00	0	0.00	0	0.00							0.00
52	MCH Kalahandi			0	0.00	0	0.00	0	0.00							0.00
53	MCH Talcher, Anugola			0	0.00	0	0.00	0	0.00							0.00
54	MCH Jajpur			0	0.00	0	0.00	0	0.00							0.00
55	MCH Kandhamal			0	0.00	0	0.00	0	0.00							0.00
56	PGIMER, Capital Hospital,			0	0.00	0	0.00	0	0.00							0.00
57	AIIMS, Bhubaneswar			0	0.00	0	0.00	0	0.00							0.00
58	State	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	1	1000.00	1000.00
	Total	11	4521.00	4	32.00	30	300.00	47	4.70	25	1250.00	6	216.00	1	1000.00	8643.04

Abstract New Constructions for PIP 2026-27, Odisha

Sl. No.	District	New Works Proposal			
		CHC (New)	PHC 24x7 (New)	PHC Day Care (New)	Total
1	Anugola	0			0
2	Baleshwar	1			1
3	Baragada	0			0
4	Bhadrak	0	0	2	2
5	Balangir	1		2	3
6	Boudh				0
7	Kataka	1	2		3
8	Debagada				0
9	Dhenkanal	0			0
10	Gajapati	0	0	0	0
11	Ganjam	0	1	1	2
12	Jagatsinghpur	0	1	1	2
13	Jajpur				0
14	Jharsuguda	0	2	0	2
15	Kalahandi	0	2	0	2
16	Kandhamal	1	2	0	3
17	Kendrapada	1			1
18	Kendujhar	1	2	0	3
19	Khordha	1	1		2
20	Koraput	0			0
21	Malkanagiri	0	2		2
22	Mayurbhanj	1			1
23	Nabarangpur	1	2	0	3
24	Nayagada	0	0		0
25	Nuapada	1			1
26	Puri	1	2		3
27	Rayagada	0			0
28	Sambalpur		2		2
29	Sonpur		2		2
30	Sundaragada	0	2	0	2
Total		11	25	6	42

Construction of Complte New Building for Existing CHCs for NHM PIP 2026-27

Following institutions identified those need new construction during exercise for revamping public health institutions as per IPHS norms															
Sl. No	District	Name of the Block	Name of the C.H.C	Year of Proposal: New/ Old (In Case of Old , mention the year of approval)	Population Covered	Construction Proposed at (Existing/ New Premises)	No. of existing beds	Proposed Beds	Bed occupancy Rate	OPD/ month (average for current year) - Source should be HMIS	IPD/ month (average for current year) - Source should be HMIS	Normal Deliveries per month (average for current year) - Source should be HMIS	C-section per month (average for current year) - - Source should be HMIS	Total Project Cost (in Lakhs) - As Approved in PIP 2024-26	Budget Approved 2026-27 (25%)
	Newly Proposed CHC Buildings														
1	Baleshwar	Baliapal	Baliapal	New	142650	Existing	16	30	74%	7524	355	37	0	1644	₹411.00
2	Balangir	Turekela	Turekela	New		New Premises	16	30	76%	6547	365	15	0	1644	₹411.00
3	Kataka	Baramba	Baramba	New	182883	New Premises	30	30	71%	5661	639	17	0	1644	₹411.00
4	Kandhamal	Kotagarh	CHC Subarnagiri	New	121568	Existing	6	30	110%	2148	173	22	0	1644	₹411.00
5	Kendrapada	Garadpur	Patakura	New	91616	New Premises	16	30	79%	6709	380	23	6	1644	₹411.00
6	Kendujhar	Telkoi	Telkoi	New	170143	Existing	16	30	75%	6737	360	87	0	1644	₹411.00
7	Khordha	Bhubaneswar	BMC Hospital, BBSR	New	192161	New premises	50	50	73%	22293	1095	30	13	1644	₹411.00
8	Mayurbhanj	Bahalda	Bahalda	New	87992	Existing	16	30	92%	3059	355	43	0	1644	₹411.00
9	Nabarangpur	Tentulikhunti	Tentulikhunti	New	103106	New Premises	16	30	84%	3668	407	66	0	1644	₹411.00
10	Nuapada	Komana	Bhella	New	44204	New Premises	6	30	177%	2750	253	57	0	1644	₹411.00
11	Puri	Nimapada	Charichhak	New	147596	Esisting	30	30	88%	8820	802	29	14	1644	₹411.00
	Total													18084	₹4521.00

Civil Annexure (Other Upgradation Works) - 2026-27, Odisha

Sl. No.	Name of the District	Name of the Facility	Type of the Facility	Whether building exists (Y/N)	If Yes, reason for New Proposal (Dilapidated/ Need Major Repair/ not as per IPHS/ non Habitable/ any other)	Name of the New Work/ Proposal (SC/ PHC/ CHC/ UPHC/ UCHC/ SDH/ DHH/ MCH-wing/ IPHL/ BPHU/ any other)	Whether land is available- (Y/N)	Proposed area of construction (Sq Ft.)	Total Project Cost (in Rs. Lakhs)	Amount Approved for 2026-27 (Rs in Lakhs)
MNCU at MCH level									120.00	120.00
1	Kataka	SVPPGIP, Kataka	MCH	Y	Extension	Construction of MNCU at MCH level	Y	2000	30.00	30.00
2	Balangir	BB MCH, Balangir	MCH	Y	Extension	Construction of MNCU at MCH level	Y	2000	30.00	30.00
3	Koraput	SLN MCH, Koraput	MCH	Y	Extension	Construction of MNCU at MCH level	Y	2000	30.00	30.00
4	Kendujhar	DD, MCH, Kendujhar	MCH	Y	Extension	Construction of MNCU at MCH level	Y	2000	30.00	30.00
Expansion of SNCU									455.00	455.00
1	Nabarangpur	DHH Nabarangpur	DHH	Y	Expainson	Expainson of SNCU from 12- to 24 beded	Y	4300	65.00	65.00
2	Malkanagiri	DHH Malkangiri	DHH	Y	Expainson	Expainson of SNCU from 12- to 24 beded	Y	4300	65.00	65.00
3	Koraput	DHH Koraput	DHH	Y	Expainson	Expainson of SNCU from 12- to 24 beded	Y	4300	65.00	65.00
6	Kandhamal	DHH Kandhamal	DHH	Y	Expainson	Expainson of SNCU from 12- to 24 beded	Y	4300	65.00	65.00
4	Kalahandi	DHH Kalahandi	DHH	Y	Expainson	Expainson of SNCU from 24 to 36 beded	Y	4300	65.00	65.00
5	Balangir	DHH Balangir	DHH	Y	Expainson	Expainson of SNCU from 24 to 36 beded	Y	4300	65.00	65.00
7	RGH, Rourkella	RGH Rourkela	DHH	Y	Expainson	Expainson of SNCU from 24 to 36 beded	Y	4300	65.00	65.00
New NBSU at CHC level									32.00	32.00
1	Kendujhar	Bansapal, CHC	CHC	Y	Major Repair/ Renovation	Construction of NBSU at CHClevel	Y	530	8.00	8.00
2	Gajapati	Chandragiri	CHC	Y	Major Repair/ Renovation	Construction of NBSU at CHClevel	Y	530	8.00	8.00
3	Rayagada	Kasipur	CHC	Y	Major Repair/ Renovation	Construction of NBSU at CHClevel	Y	530	8.00	8.00
4	Sundaragada	lahunipada	CHC	Y	Major Repair/ Renovation	Construction of NBSU at CHClevel	Y	530	8.00	8.00
CLMC at MCH level									180.00	180.00
1	Baleshwar	FM MCH, Baleshwar	MCH	Y	Extension	Construction of CLMC at MCH level	Y	2000	30.00	30.00
2	Kataka	SVPPGIP, Kataka	MCH	Y	Extension	Construction of CLMC at MCH level	Y	2000	30.00	30.00
3	Ganjam	MKCG, MCH Brahmapur	MCH	Y	Extension	Construction of CLMC at MCH level	Y	2000	30.00	30.00
4	Koraput	SLN MCH, Koraput	MCH	Y	Extension	Construction of CLMC at MCH level	Y	2000	30.00	30.00
5	Mayurbhanj	PRM MCH, Mayurbhanj	MCH	Y	Extension	Construction of CLMC at MCH level	Y	2000	30.00	30.00

Civil Annexure (Other Upgradation Works) - 2026-27, Odisha

Sl. No.	Name of the District	Name of the Facility	Type of the Facility	Whether building exists (Y/N)	If Yes, reason for New Proposal (Dilapidated/ Need Major Repair/ not as per IPHS/ non Habitable/ any other)	Name of the New Work/ Proposal (SC/ PHC/ CHC/ UPHC/ UCHC/ SDH/ DHH/ MCH-wing/ IPHL/ BPHU/ any other)	Whether land is available- (Y/N)	Proposed area of construction (Sq Ft.)	Total Project Cost (in Rs. Lakhs)	Amount Approved for 2026-27 (Rs in Lakhs)
6	Sambalpur	VIMSAR, MCH Burla	MCH	Y	Extension	Construction of CLMC at MCH level	Y	2000	30.00	30.00
MLCU at MCH/ DHH level									270.00	270.00
1	Koraput	SLN MCH, Koraput	MCH	Y	Extension	Construction of MLCU at MCH level	Y	2000	30.00	30.00
2	Kendujhar	DD, MCH, Kendujhar	MCH	Y	Extension	Construction of MLCU at MCH level	Y	2000	30.00	30.00
3	Puri	DHH Puri	DHH	Y	Extension	Construction of MLCU at DHH level	Y	2000	30.00	30.00
4	Anugola	DHH Angul	DHH	Y	Extension	Construction of MLCU at DHH level	Y	2000	30.00	30.00
5	Jharsuguda	DHH Jharsuguda	DHH	Y	Extension	Construction of MLCU at DHH level	Y	2000	30.00	30.00
6	Khordha	DHH Khurda	DHH	Y	Extension	Construction of MLCU at DHH level	Y	2000	30.00	30.00
7	Kendrapada	DHH Kendrapada	DHH	Y	Extension	Construction of MLCU at DHH level	Y	2000	30.00	30.00
8	Nuapada	DHH Nuapada	DHH	Y	Extension	Construction of MLCU at DHH level	Y	2000	30.00	30.00
9	Mayurbhanj	DHH Mayurbhanj	DHH	Y	Extension	Construction of MLCU at DHH level	Y	2000	30.00	30.00
Establishment of 10 beded Integrated Centre for Hemoglobinopathies & Haemophilia (ICHH)									100.00	100.00
1	Sambalpur	DHH Sambalpur	DHH	Y	Repair/ Renovation	Construction of ICHH at DHH level	Y	500	10.00	10.00
2	Koraput	DHH, Jeypore	DHH	Y	Repair/ Renovation	Construction of ICHH at DHH level	Y	500	10.00	10.00
3	Kalahandi	DHH, Kalahandi	DHH	Y	Repair/ Renovation	Construction of ICHH at DHH level	Y	500	10.00	10.00
4	Balangir	DHH, Bolangir	DHH	Y	Repair/ Renovation	Construction of ICHH at DHH level	Y	500	10.00	10.00
5	Baragada	DHH, Baragarh	DHH	Y	Repair/ Renovation	Construction of ICHH at DHH level	Y	500	10.00	10.00
6	Kandhamal	DHH, Kandhamal	DHH	Y	Repair/ Renovation	Construction of ICHH at DHH level	Y	500	10.00	10.00
7	Nuapada	DHH, Nuapada	DHH	Y	Repair/ Renovation	Construction of ICHH at DHH level	Y	500	10.00	10.00
8	Nabarangpur	DHH, Nawrangpur	DHH	Y	Repair/ Renovation	Construction of ICHH at DHH level	Y	500	10.00	10.00
9	Rayagada	DHH, Rayagada	DHH	Y	Repair/ Renovation	Construction of ICHH at DHH level	Y	500	10.00	10.00
10	Sundaragada	DHH, Sundergarh	DHH	Y	Repair/ Renovation	Construction of ICHH at DHH level	Y	500	10.00	10.00
Establishment of Blood Storage Units (BSUs)									300.00	300.00

Civil Annexure (Other Upgradation Works) - 2026-27, Odisha

Sl. No.	Name of the District	Name of the Facility	Type of the Facility	Whether building exists (Y/N)	If Yes, reason for New Proposal (Dilapidated/ Need Major Repair/ not as per IPHS/ non Habitable/ any other)	Name of the New Work/ Proposal (SC/ PHC/ CHC/ UPHC/ UCHC/ SDH/ DHH/ MCH-wing/ IPHL/ BPHU/ any other)	Whether land is available- (Y/N)	Proposed area of construction (Sq Ft.)	Total Project Cost (in Rs. Lakhs)	Amount Approved for 2026-27 (Rs in Lakhs)
1	Anugola	CHC Bantala	CHC	Y	Repair/ Renovation	Establishment of Blood Storage Units (BSUs) at CHC level	Y	500	10.00	10.00
2	Baleshwar	CHC Khaira	CHC	Y	Repair/ Renovation	Establishment of Blood Storage Units (BSUs) at CHC level	Y	500	10.00	10.00
3	Baragada	CHC Barpali	CHC	Y	Repair/ Renovation	Establishment of Blood Storage Units (BSUs) at CHC level	Y	500	10.00	10.00
4	Bhadrak	CHC Chandabali	CHC	Y	Repair/ Renovation	Establishment of Blood Storage Units (BSUs) at CHC level	Y	500	10.00	10.00
5	Balangir	CHC Loisinga	CHC	Y	Repair/ Renovation	Establishment of Blood Storage Units (BSUs) at CHC level	Y	500	10.00	10.00
6	Boudh	CHC Dompada	CHC	Y	Repair/ Renovation	Establishment of Blood Storage Units (BSUs) at CHC level	Y	500	10.00	10.00
7	Kataka	CHC Parjanga	CHC	Y	Repair/ Renovation	Establishment of Blood Storage Units (BSUs) at CHC level	Y	500	10.00	10.00
8	Debagada	CHC Chandragiri	CHC	Y	Repair/ Renovation	Establishment of Blood Storage Units (BSUs) at CHC level	Y	500	10.00	10.00
9	Dhenkanal	CHC Adapada	CHC	Y	Repair/ Renovation	Establishment of Blood Storage Units (BSUs) at CHC level	Y	500	10.00	10.00
10	Gajapati	CHC Chikiti	CHC	Y	Repair/ Renovation	Establishment of Blood Storage Units (BSUs) at CHC level	Y	500	10.00	10.00
11	Jagatsinghpur	CHC Manijanga	CHC	Y	Repair/ Renovation	Establishment of Blood Storage Units (BSUs) at CHC level	Y	500	10.00	10.00
12	Jagatsinghpur	CHC Dharmasala	CHC	Y	Repair/ Renovation	Establishment of Blood Storage Units (BSUs) at CHC level	Y	500	10.00	10.00
13	Jajpur	CHC Mundrajore	CHC	Y	Repair/ Renovation	Establishment of Blood Storage Units (BSUs) at CHC level	Y	500	10.00	10.00
14	Jharsuguda	CHC Junagad	CHC	Y	Repair/ Renovation	Establishment of Blood Storage Units (BSUs) at CHC level	Y	500	10.00	10.00
15	Kalahandi	CHC G Udayagiri	CHC	Y	Repair/ Renovation	Establishment of Blood Storage Units (BSUs) at CHC level	Y	500	10.00	10.00
16	Kandhamal	CHC Rajnagar	CHC	Y	Repair/ Renovation	Establishment of Blood Storage Units (BSUs) at CHC level	Y	500	10.00	10.00
17	Kendrapada	CHC Padmapur	CHC	Y	Repair/ Renovation	Establishment of Blood Storage Units (BSUs) at CHC level	Y	500	10.00	10.00
18	Kendujhar	CHC Balipatna	CHC	Y	Repair/ Renovation	Establishment of Blood Storage Units (BSUs) at CHC level	Y	500	10.00	10.00
19	Khordha	CHC Kotpad	CHC	Y	Repair/ Renovation	Establishment of Blood Storage Units (BSUs) at CHC level	Y	500	10.00	10.00
20	Koraput	CHC Korukunda	CHC	Y	Repair/ Renovation	Establishment of Blood Storage Units (BSUs) at CHC level	Y	500	10.00	10.00
21	Malkanagiri	CHC Badasahi	CHC	Y	Repair/ Renovation	Establishment of Blood Storage Units (BSUs) at CHC level	Y	500	10.00	10.00
22	Mayurbhanj	CHC Kostha	CHC	Y	Repair/ Renovation	Establishment of Blood Storage Units (BSUs) at CHC level	Y	500	10.00	10.00

Civil Annexure (Other Upgradation Works) - 2026-27, Odisha

Sl. No.	Name of the District	Name of the Facility	Type of the Facility	Whether building exists (Y/N)	If Yes, reason for New Proposal (Dilapidated/ Need Major Repair/ not as per IPHS/ non Habitable/ any other)	Name of the New Work/ Proposal (SC/ PHC/ CHC/ UPHC/ UCHC/ SDH/ DHH/ MCH-wing/ IPHL/ BPHU/ any other)	Whether land is available- (Y/N)	Proposed area of construction (Sq Ft.)	Total Project Cost (in Rs. Lakhs)	Amount Approved for 2026-27 (Rs in Lakhs)
23	Nabarangpur	CHC Kosagumuda	CHC	Y	Repair/ Renovation	Establishment of Blood Storage Units (BSUs) at CHC level	Y	500	10.00	10.00
24	Nayagada	CHC Rajasunakhala	CHC	Y	Repair/ Renovation	Establishment of Blood Storage Units (BSUs) at CHC level	Y	500	10.00	10.00
25	Nuapada	CHC Boden	CHC	Y	Repair/ Renovation	Establishment of Blood Storage Units (BSUs) at CHC level	Y	500	10.00	10.00
26	Puri	CHC Mangalpur	CHC	Y	Repair/ Renovation	Establishment of Blood Storage Units (BSUs) at CHC level	Y	500	10.00	10.00
27	Rayagada	CHC Ramanaguda	CHC	Y	Repair/ Renovation	Establishment of Blood Storage Units (BSUs) at CHC level	Y	500	10.00	10.00
28	Sambalpur	CHC Govindapur	CHC	Y	Repair/ Renovation	Establishment of Blood Storage Units (BSUs) at CHC level	Y	500	10.00	10.00
29	Sonpur	CHC Naikenpalli	CHC	Y	Repair/ Renovation	Establishment of Blood Storage Units (BSUs) at CHC level	Y	500	10.00	10.00
30	Sundaragada	CHC Bisra	CHC	Y	Repair/ Renovation	Establishment of Blood Storage Units (BSUs) at CHC level	Y	500	10.00	10.00
Civil Work under DEIC/ RBSK									184.34	184.34
1	Nabarangpur	DHH, Nawrangpur	DHH	Y	Repair/ Renovation	Construction of New DEIC building	Y	6000	134.21	134.21
2	Baleshwar	DHH, Balasore	DHH	Y	Repair/ Renovation	Construction of Physiotherapy and SI unit at available space at DEIC	Y	400	7.13	7.13
3	RGH, Rourkella	RGH, Rourkela	DHH	Y	Repair/ Renovation	Acoustic Room at the Ground Floor, DEIC Building	Y	400	8.00	8.00
4	Koraput	DHH, Jeypore	DHH	Y	Repair/ Renovation	Construct Sensory Integration park for DEIC	Y	1000	20.00	20.00
5	Puri	DHH, Puri	DHH	Y	Repair/ Renovation	Construction of New DEIC building		700	15.00	15.00
Civil Work under NPPCD									10.00	10.00
1	Khordha	Capital Hospital, BBSR	DHH	Y	Repair/ Renovation	Refurbishing of Infrastructure: For set up CI surgey Unit:	Y	500	10.00	10.00
Civil Work under NVBDCP									4.70	4.70
1	Anugola	DHH-Angul	DHH	Y	Repair/ Renovation	Manitance of Hatcheries @ Rs. 10,000/- per hatchery			0.10	0.10
2	Baleshwar	DHH-Balasore	DHH	Y	Repair/ Renovation	Manitance of Hatcheries @ Rs. 10,000/- per hatchery			0.10	0.10
3	Bhadrak	DHH-Bhadrakh	DHH	Y	Repair/ Renovation	Manitance of Hatcheries @ Rs. 10,000/- per hatchery			0.10	0.10
4	Balangir	NVBDCP Office	DHH	Y	Repair/ Renovation	Manitance of Hatcheries @ Rs. 10,000/- per hatchery			0.10	0.10
5	Boudh	Baunsuni CHC	CHC	Y	Repair/ Renovation	Manitance of Hatcheries @ Rs. 10,000/- per hatchery			0.10	0.10

Civil Annexure (Other Upgradation Works) - 2026-27, Odisha

Sl. No.	Name of the District	Name of the Facility	Type of the Facility	Whether building exists (Y/N)	If Yes, reason for New Proposal (Dilapidated/ Need Major Repair/ not as per IPHS/ non Habitable/ any other)	Name of the New Work/ Proposal (SC/ PHC/ CHC/ UPHC/ UCHC/ SDH/ DHH/ MCH-wing/ IPHL/ BPHU/ any other)	Whether land is available- (Y/N)	Proposed area of construction (Sq Ft.)	Total Project Cost (in Rs. Lakhs)	Amount Approved for 2026-27 (Rs in Lakhs)
6	Boudh	Manmunda CHC	CHC	Y	Repair/ Renovation	Manitance of Hatcheries @ Rs. 10,000/- per hatchery			0.10	0.10
7	Kataka	Athagarh CHC	CHC	Y	Repair/ Renovation	Manitance of Hatcheries @ Rs. 10,000/- per hatchery			0.10	0.10
8	Debagada	Deogarh DHH	DHH	Y	Repair/ Renovation	Manitance of Hatcheries @ Rs. 10,000/- per hatchery			0.10	0.10
9	Dhenkanal	Dhenkanal DHH	DHH	Y	Repair/ Renovation	Manitance of Hatcheries @ Rs. 10,000/- per hatchery			0.10	0.10
10	Dhenkanal	Khajuriakata CHC	CHC	Y	Repair/ Renovation	Manitance of Hatcheries @ Rs. 10,000/- per hatchery			0.10	0.10
11	Ganjam	CDM&PHO office Campu	DHH	Y	Repair/ Renovation	Manitance of Hatcheries @ Rs. 10,000/- per hatchery			0.10	0.10
12	Ganjam	Hinjilicut CHC	CHC	Y	Repair/ Renovation	Manitance of Hatcheries @ Rs. 10,000/- per hatchery			0.10	0.10
13	Jagatsinghpur	Jagatsingpur DHH	DHH	Y	Repair/ Renovation	Manitance of Hatcheries @ Rs. 10,000/- per hatchery			0.10	0.10
14	Jagatsinghpur	Mandasahi CHC	CHC	Y	Repair/ Renovation	Manitance of Hatcheries @ Rs. 10,000/- per hatchery			0.10	0.10
15	Jajpur	Sukinda CHC	CHC	Y	Repair/ Renovation	Manitance of Hatcheries @ Rs. 10,000/- per hatchery			0.10	0.10
16	Jajpur	Dangadi CHC	CHC	Y	Repair/ Renovation	Manitance of Hatcheries @ Rs. 10,000/- per hatchery			0.10	0.10
17	Jharsuguda	Jharsuguda DHH	DHH	Y	Repair/ Renovation	Manitance of Hatcheries @ Rs. 10,000/- per hatchery			0.10	0.10
18	Kalahandi	DHH-Kalahandi	DHH	Y	Repair/ Renovation	Manitance of Hatcheries @ Rs. 10,000/- per hatchery			0.10	0.10
19	Kalahandi	Biswanathpur CHC	CHC	Y	Repair/ Renovation	Manitance of Hatcheries @ Rs. 10,000/- per hatchery			0.10	0.10
20	Kalahandi	Dharmagarh SDH	SDH	Y	Repair/ Renovation	Manitance of Hatcheries @ Rs. 10,000/- per hatchery			0.10	0.10
21	Kandhamal	Phulbani DHH	DHH	Y	Repair/ Renovation	Manitance of Hatcheries @ Rs. 10,000/- per hatchery			0.10	0.10
22	Kandhamal	Tumudibandh CHC	CHC	Y	Repair/ Renovation	Manitance of Hatcheries @ Rs. 10,000/- per hatchery			0.10	0.10
23	Kandhamal	Phiringia CHC	CHC	Y	Repair/ Renovation	Manitance of Hatcheries @ Rs. 10,000/- per hatchery			0.10	0.10
24	Kendrapada	Kendrapada DHH	DHH	Y	Repair/ Renovation	Manitance of Hatcheries @ Rs. 10,000/- per hatchery			0.10	0.10
25	Kendrapada	Pattamundai CHC	CHC	Y	Repair/ Renovation	Manitance of Hatcheries @ Rs. 10,000/- per hatchery			0.10	0.10
26	Kendujhar	Harichandanpur CHC	CHC	Y	Repair/ Renovation	Manitance of Hatcheries @ Rs. 10,000/- per hatchery			0.10	0.10
27	Kendujhar	Banspal CHC	CHC	Y	Repair/ Renovation	Manitance of Hatcheries @ Rs. 10,000/- per hatchery			0.10	0.10

Civil Annexure (Other Upgradation Works) - 2026-27, Odisha

Sl. No.	Name of the District	Name of the Facility	Type of the Facility	Whether building exists (Y/N)	If Yes, reason for New Proposal (Dilapidated/ Need Major Repair/ not as per IPHS/ non Habitable/ any other)	Name of the New Work/ Proposal (SC/ PHC/ CHC/ UPHC/ UCHC/ SDH/ DHH/ MCH-wing/ IPHL/ BPHU/ any other)	Whether land is available- (Y/N)	Proposed area of construction (Sq Ft.)	Total Project Cost (in Rs. Lakhs)	Amount Approved for 2026-27 (Rs in Lakhs)
28	Khordha	Khurdha DHH	DHH	Y	Repair/ Renovation	Manitance of Hatcheries @ Rs. 10,000/- per hatchery			0.10	0.10
29	Koraput	CDM&PHO office Campus	DHH	Y	Repair/ Renovation	Manitance of Hatcheries @ Rs. 10,000/- per hatchery			0.10	0.10
30	Koraput	Laxmipur CHC	CHC	Y	Repair/ Renovation	Manitance of Hatcheries @ Rs. 10,000/- per hatchery			0.10	0.10
31	Malkangiri	K. Gumma CHC	CHC	Y	Repair/ Renovation	Manitance of Hatcheries @ Rs. 10,000/- per hatchery			0.10	0.10
32	Malkangiri	Chitrakonda CHC	CHC	Y	Repair/ Renovation	Manitance of Hatcheries @ Rs. 10,000/- per hatchery			0.10	0.10
33	Malkangiri	Korkunda CHC	CHC	Y	Repair/ Renovation	Manitance of Hatcheries @ Rs. 10,000/- per hatchery			0.10	0.10
34	Mayurbhanj	Mayurbhanj DHH	DHH	Y	Repair/ Renovation	Manitance of Hatcheries @ Rs. 10,000/- per hatchery			0.10	0.10
35	Mayurbhanj	Bijatala CHC	CHC	Y	Repair/ Renovation	Manitance of Hatcheries @ Rs. 10,000/- per hatchery			0.10	0.10
36	Nabarangpur	Chandahandi CHC	CHC	Y	Repair/ Renovation	Manitance of Hatcheries @ Rs. 10,000/- per hatchery			0.10	0.10
37	Nabarangpur	Pujariguda CHC	CHC	Y	Repair/ Renovation	Manitance of Hatcheries @ Rs. 10,000/- per hatchery			0.10	0.10
38	Nayagada	Naygarh DHH	DHH	Y	Repair/ Renovation	Manitance of Hatcheries @ Rs. 10,000/- per hatchery			0.10	0.10
39	Puri	CDM&PHO office Campus	DHH	Y	Repair/ Renovation	Manitance of Hatcheries @ Rs. 10,000/- per hatchery			0.10	0.10
40	Rayagada	NVBDCP Office Campus	DHH	Y	Repair/ Renovation	Manitance of Hatcheries @ Rs. 10,000/- per hatchery			0.10	0.10
41	Rayagada	Kasipur CHC	CHC	Y	Repair/ Renovation	Manitance of Hatcheries @ Rs. 10,000/- per hatchery			0.10	0.10
42	Sambalpur	Sambalpur DHH	DHH	Y	Repair/ Renovation	Manitance of Hatcheries @ Rs. 10,000/- per hatchery			0.10	0.10
43	Sambalpur	Kuntra CHC	CHC	Y	Repair/ Renovation	Manitance of Hatcheries @ Rs. 10,000/- per hatchery			0.10	0.10
44	Sambalpur	Gobindpur CHC	CHC	Y	Repair/ Renovation	Manitance of Hatcheries @ Rs. 10,000/- per hatchery			0.10	0.10
45	Sundargarada	Mangaspur CHC	CHC	Y	Repair/ Renovation	Manitance of Hatcheries @ Rs. 10,000/- per hatchery			0.10	0.10
46	Sundargarada	Kuanramunda CHC	CHC	Y	Repair/ Renovation	Manitance of Hatcheries @ Rs. 10,000/- per hatchery			0.10	0.10
47	Sundargarada	Sundargarh UPHC	UPHC	Y	Repair/ Renovation	Manitance of Hatcheries @ Rs. 10,000/- per hatchery			0.10	0.10
	Grand Total								1656.04	1656.04

Sub Centre: IPHS Assessment & Cost Norms

Sl. No	Category	Description	Unit Cost (in Rs.)	Govt. building	
				No. of Institutions	Total Budget (In lakhs.)
1	Way-finding and Signage	Display signage within campus	NA	696	-
2		Display signage inside the building	NA	993	-
3		Display of layout of the hospital near the entrance	NA	1760	-
4		Display of Citizens' Charter near the entrance of the facility	NA	906	-
5	Parking	Reserved parking for ambulances	NA		-
6		Reserved parking for staff	30,000	908	272.40
7	Garden and Landscaping	Open space as per NBC norms (60% of total area) & Intact Boundary Wall	1,00,000	2234	2,234.00
8		Presence of Garden and landscaping	20,000	1183	236.60
9	Environment	Use of Rainwater harvesting	20,000	2795	559.00
10		Use of Solar Energy	50,000	3124	1,562.00
11		Use of low energy LED lightings/ energy efficient measures	5,000	641	32.05
12	Disabled Friendly** Access	Access of wheelchair, stretcher to hospital	20,000	1787	357.40
13		Presence of ramp/ lifts	20,000	2291	458.20
14		Availability of tactile/ rails signs**	NA		
15	Disaster, Emergency & Fire Preparedness	Written Disaster Management Plan in place	NA		
16		Record for the drill** held in last one year	NA		
17		Additional 10% buffer stock of drugs	NA		
18		Provision of Fire alarms	10,000	2947	294.70
19		Provision of Fire extinguishers	10,000	1347	134.70
20		Water connection at all floors	10,000	1491	149.10
21		Emergency Exit Doors remain unlocked	NA		
22	Electric Power Supply and illumination	Uninterrupted electrical supply (Genset or any other source)	20,000	979	195.80
23		Annual electric audit (Check for reports)	10,000	2137	213.70
24		Constant digital display for Neutral and Earthing**	10,000	1986	198.60
25	Water Supply	Provision of piped water round the clock	30,000	1441	432.30
26		Availability of overhead water storage tank	10,000	885	88.50
27		Water tank cleaned (Monthly/Quarterly as per records)	NA		
28		Disinfection of water sources and Coordination with Public Health Engineering department for safe water supply	NA		
29		Regular testing of water quality using H2S - Strip Test	NA		
30	Waste Management	Availability of colour coded BMW bins	NA/ State supply		
31		Separate bins for disposal of sharps	NA/ State supply		
32	Drainage, Sanitation system	Availability of well managed drainage and sanitation system (Properly covered drains/ manholes throughout the hospital premises)	20,000	1569	313.80
33	Toilets (tick mark after observing both IPD and OPD)	Separate Toilets for Male & Female	20,000	1579	315.80
34		Gender sensitive toilets**	10,000	2526	252.60
35		Disable friendly toilets	5,000	2634	131.70
36		Running water (Mentioned above too)	NA		
37		Flush	NA		
38		Free of dampness and seepage	20,000	2063	412.60
39	Cleanliness	Availability of checklist and overall cleanliness of the building	NA		
		Total Requirement	4,50,000		8,845.55
		Total Approved in PIP 2026-27			1,000.00

N.B.

As per the assessment, the total fund requirement amounts to **Rs.88.45 Crs for 3598 targeted SC AAMs selected for NQAS certification in 2026-27.**However, **about Rs. 10 crs has been proposed in the main PIP** for initiating the tasks & additional fund if any required shall be put in State Budget in the due course for funding.Further, the process for funding to SC AAMs will be initiated only **if the same SC AAM scored minimum 50% in internal assessment as per NQAS** checklists & recommended for funding by the committee formed for the purpose, after verifying related documents,.

Annexure 5: Revalidation Work PIP 2026-27, Odisha

S.No.	Name of the pool and Activity	Year of Approval in RoP	FMR / S.no of RoP (from previous year)	Details of approval	Total amount approved for the activity in the Concerned Year/ Years (Rs. in Lakhs)	Amount Proposed to be revalidated in FY 2026-27 RoP which will be part of RoP of FY 2026-27	Remarks Current Status / Progress
REVALIDATION WORKS							
1	Blood Bank at DHHs	2022-24	HSS.4, SI No.164	Total No of Projects: 4 Nos	704.00	96.96	Annex-1
Sub Total DHH					704.00	96.96	
2	Construction of new building at SDHs	2024-26	HSS.4, SI No.165	Total No of Projects: 2 Nos	6,288.00	2,358.00	Annex-2
Sub Total SDH					6288.00	2358.00	
3	Construction of new buildings at 27 CHCs	2022-24	HSS.4, SI No.166	Total No of Projects: 27 Nos	23,013.04	4,972.18	Annex-3
4	Construction of new buildings at 18 CHCs	2024-26	HSS.4, SI No.166	Total No of Projects: 18 Nos	17,748.00	5,529.26	Annex-4
Sub Total CHC					40761.04	10501.44	
5	Construction of 24x 7 PHC	2024-26	HSS.4, SI No.167	Total No of Projects: 45 Nos	7760.35	1917.51	Annex-5
6	Construction of Day Care PHC	2024-26	HSS.4, SI No.167	Total No of Projects: 98 Nos	6865.12	2707.50	
Sub Total PHC					14625.47	4625.01	
7	Constrcution of SCs	2022-24	HSS.4, SI No.168	Total No of Projects: 290 Nos	13349.42	1867.80	Annex-6
8	Constrcution of SCs	2024-26	HSS.4, SI No.168	Total No of Projects: 279 Nos	22495.00	2576.38	Annex-7
Sub Total SC					35844.42	4444.18	
Grand Total Revalidation Works					98222.93	22025.58	

District/ Institution Wise Revalidation Works under NHM for PIP 2026-27, Odisha

Type of Institutions		DHH		SDH		Community Health Centers				Primary Health Centers				Sub-Health Centers				Grand Total 2026- 27 (Rs. In Lakhs)
Sl.No.	Name of the District	2022-24		2024-26		2022-24		2024-26		2022-24				2022-24		2024-26		
		Construction of Blood Bank		Building for Existing SDHs		New Building for Existing CHC				24x7		Day Care		Construction of SHCs				
		No. of Works	Budget	No. of Works	Budget	No. of Works	Budget	No. of Works	Budget	No. of Works	Budget	No. of Works	Budget	No. of Works	Budget	No. of Works	Budget	
1	Anugola	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	1	19.40	6	54.00	7	70.00	143.40
2	Baleshwar	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	5	23.43	16	110.53	133.96
3	Baragada	0	0.00	0	0.00	3	476.53	1	244.18	4	173.80	5	291.62	13	117.00	0	0.00	1303.13
4	Bhadrak	0	0.00	0	0.00	0	0.00	1	245.40	0	0.00	0	0.00	1	4.60	0	0.00	250.00
5	Balangir	1	35.20	0	0.00	6	847.44	1	246.34	4	175.23	13	252.20	8	31.65	19	97.85	1685.91
6	Boudh	0	0.00	0	0.00	2	562.45	0	0.00	3	135.45	3	83.57	0	0.00	5	50.00	831.47
7	Kataka	0	0.00	0	0.00	1	487.15	1	411.00	3	192.15	8	103.20	6	53.92	6	60.00	1307.42
8	Debagada	0	0.00	0	0.00	0	0.00	0	0.00	1	99.92	2	42.24	0	0.00	9	90.00	232.16
9	Dhenkanal	0	0.00	0	0.00	2	249.79	0	0.00	2	86.20	8	421.93	29	257.34	0	0.00	1015.26
10	Gajapati	0	0.00	0	0.00	1	117.65	1	411.00	4	174.52	3	117.38	15	135.00	0	0.00	955.55
11	Ganjam	0	0.00	0	0.00	0	0.00	1	411.00	0	0.00	1	28.49	16	223.84	1	10.00	673.33
12	Jagatsinghpur	0	0.00	0	0.00	0	0.00	2	488.18	0	0.00	4	130.24	0	0.00	18	180.00	798.42
13	Jajpur	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0.00
14	Jharsuguda	0	0.00	0	0.00	2	830.24	0	0.00	0	0.00	1	9.89	0	0.00	1	10.00	850.13
15	Kalahandi	0	0.00	0	0.00	0	0.00	2	488.26	0	0.00	0	0.00	0	0.00	0	0.00	488.26
16	Kandhamal	1	35.35	0	0.00	0	0.00	0	0.00	0	0.00	8	200.82	0	0.00	0	0.00	236.17
17	Kendrapada	0	0.00	0	0.00	0	0.00	0	0.00	4	39.18	6	89.41	6	7.90	0	0.00	136.49
18	Kendujhar	0	0.00	0	0.00	0	0.00	1	243.29	0	0.00	0	0.00	1	4.00	20	200.00	447.29
19	Khordha	1	10.00	0	0.00	3	406.08	0	0.00	1	86.02	1	54.00	10	39.34	17	170.00	765.44
20	Koraput	0	0.00	0	0.00	0	0.00	1	411.00	0	0.00	0	0.00	34	306.00	5	50.00	767.00
21	Malkanagiri	0	0.00	0	0.00	1	153.01	1	244.20	3	115.03	4	154.00	0	0.00	19	190.00	856.24
22	Mayurbhanj	0	0.00	1	1048.00	3	205.15	1	206.37	3	79.41	3	27.00	91	369.98	8	80.00	2015.91
23	Nabarangpur	0	0.00	0	0.00	1	153.42	0	0.00	0	0.00	0	0.00	1	9.00	19	190.00	352.42
24	Nayagada	0	0.00	0	0.00	0	0.00	0	0.00	2	77.06	9	229.21	8	54.40	16	88.00	448.67
25	Nuapada	0	0.00	0	0.00	0	0.00	0	0.00	1	43.92	1	0.73	0	0.00	0	0.00	44.65
26	Puri	0	0.00	0	0.00	0	0.00	1	246.03	0	0.00	6	189.85	23	27.80	12	120.00	583.68
27	Rayagada	0	0.00	0	0.00	1	330.80	0	0.00	0	0.00	1	41.08	16	144.00	19	190.00	705.88
28	Sambalpur	0	0.00	1	1310.00	0	0.00	1	411.00	3	131.11	3	102.90	1	4.60	25	250.00	2209.61
29	Sonpur	0	0.00	0	0.00	1	152.47	1	411.00	7	308.51	7	118.34	0	0.00	18	180.00	1170.32
30	Sundaragada	1	16.41	0	0.00	0	0.00	1	411.00	0	0.00	0	0.00	0	0.00	19	190.00	617.41
	Total	4	96.96	2	2358.00	27	4972.18	18	5529.26	45	1917.509	98	2707.50	290	1867.80	279	2576.38	22025.58

Abstract Revalidation Works, Odisha

Sl. No.	District	2022-24						2024-26			
		DHH	CHC	PHC (24x7)	Day Care	SC	Total	SDH	CHC	SC	Total
1	Angul				1	6	7			7	7
2	Balasore					5	5			16	16
3	Baragada		3	4	5	13	25		1	0	1
4	Bhadrak					1	1		1	0	1
5	Balangir	1	6	4	13	8	32		1	19	20
6	Boudh		2	3	3	0	8			5	5
7	Kataka		1	3	8	6	18		1	6	7
8	Debagada			1	2	0	3			9	9
9	Dhenkanal		2	2	8	29	41		1	0	1
10	Gajapati		1	4	3	15	23		1	0	1
11	Ganjam				1	16	17			1	1
12	Jagatsinghpur				4	0	4		2	18	20
13	Jajpur					0	0			0	0
14	Jharsuguda		2		1	0	3			1	1
15	Kalahandi				0	0	0		2	0	2
16	Kandhamal	1			8	0	9		0	0	0
17	Kendrapada			4	6	6	16			0	0
18	Keonjhar					0	0		1	20	21
19	Khordha	1	3	1	1	10	16			17	17
20	Koraput					34	34		1	5	6
21	Malkangiri		1	3	4		8		1	19	20
22	Mayurbhanj		3	3	3	92	101	1	1	8	10
23	Nabarangpur		1			1	2			19	19
24	Nayagada			2	9	8	19			16	16
25	Nuapada			1	1	0	2			0	0
26	Puri				6	23	29		1	12	13
27	Rayagada		1		1	16	18			19	19
28	Sambalpur			3	3	1	7	1	1	25	27
29	Sonpur		1	7	7	0	15		1	18	19
30	Sundaragada	1				0	1		1	19	20
Total		4	27	45	98	290	464	2	18	279	299

Revalidation of Civil Construction under NHM PIP Works approved during 2022-24, Odisha (DHH)

Sl. No.	Name of the District	Name of the Facility	Type of Facility	Name of the work	Year of Sanction of works	Total Project Cost approved (in Rs. Lakhs)	Revised cost in 2024-26 (In lakh)	Amount Sanctioned till 2025-26 (Rs in Lakh)	Total Approval	Expenditure till August 2025 (Rs in Lakhs)	Fund Approved in 2026-27 (Rs. In Lakhs)
1	Completed										
1	Balangir	OBCDHH,Balangir	DHH	Construction of New Blood Bank	2022-24	176.00	176.00	140.80	140.80	176.00	35.20
2	Kandhamal	OBC DHH, Phulbani	DHH	Construction of New Blood Bank	2022-24	176.00	176.76	141.41	141.41	127.88	35.35
3	Khordha	OBC DHH, Khordha	DHH	Construction of New Blood Bank	2022-24	176.00	186.00	176.00	176.00	139.56	10.00
4	Sundaragada	OBC DHH, Sundergarh	DHH	Construction of New Blood Bank	2022-24	176.00	192.41	176.00	176.00	118.49	16.41
	Sub Total					704.00	731.17	634.21	634.21	561.93	96.96

Revalidation of Civil Construction under NHM PIP Works approved during 2024-26, Odisha (SDH)

Sl. No.	Name of the District	Name of the Block	Name of the Facility	Type of Facility	Name of the work	Year of Sanction of works	Total Project Cost approved in 2024-26 (in Rs. Lakhs)	Project Cost (In lakh)	Amount Sanctioned till 2025-26 (Rs in Lakh)	Fund Approved in 2026-27 (Rs. In Lakhs)	Remarks
1	Mayurbhanj	Rairangpur	Rairangpur	SDH	New Building for Existing SDHs	2024-26	5240	5240	3144	1048.00	Fund Proposed: 50% of the balance requirement
2	Sambalpur	Kuchinda	Kuchinda	SDH	New Building for Existing SDHs	2024-26	5240	5240	3144	1310.00	As the work not started hence repropose in 2026-27
	Sub Total						10480.00	10480.00	6288.00	2358.00	0.00

Revalidation of Civil Construction under NHM PIP Works approved during 2022-24, Odisha (CHC)

Sl. No.	Name of the District	Name of the Facility	Type of Facility	Name of the work	Year of Sanction of works	Total Project Cost approved (in Rs. Lakhs)	Revised cost in 2024-26 (In lakh)	Revised cost in 2026-27 (In lakh)	Amount Sanctioned till 2025-26 (Rs in Lakh)	Approved in Supplementary PIP	Total Approval	Expenditure till August 2025 (Rs in Lakhs)	Fund Approved in 2026-27 (Rs. in Lakhs)
1	Baragada	Agalpur CHC	CHC	New Building for Existing CHC	2022-24	994.00	1032.13	1072.73	825.70	0.00	825.70	584.17	172.92
2	Baragada	Bhukta CHC	CHC	New Building for Existing CHC	2022-24	994.00	1073.5	1076.19	858.80	0.00	858.80	590.42	152.17
3	Baragada	Gaisilet CHC	CHC	New Building for Existing CHC	2022-24	994.00	1068.37	1071.04	854.70	0.00	854.70	587.60	151.44
4	Balangir	Agalpur CHC.	CHC	New Building for Existing CHC	2022-24	994.00	1088.95		871.16	0.00	871.16	904.00	152.45
5	Balangir	Belpara	CHC	Construction of 30 bedded MCHWing	2022-24	975.00	1088.29		964.33	0.00	964.33	882.00	86.77
6	Balangir	Loisingha CHC	CHC	New Building for Existing CHC	2022-24	994.00	1083.66		866.93	0.00	866.93	903.00	151.71
7	Balangir	Muribahal CHC	CHC	New Building for Existing CHC	2022-24	994.00	1086.30		869.04	0.00	869.04	825.00	152.08
8	Balangir	Saintala CHC	CHC	New Building for Existing CHC	2022-24	994.00	1087.37		869.90	0.00	869.90	840.00	152.23
9	Balangir	Sindheikela CHC	CHC	New Building for Existing CHC	2022-24	994.00	1087.09		869.67	0.00	869.67	904.00	152.19
10	Boudh	Purunakatak	CHC	New Building for Existing CHC	2022-24	994.00	1081.75		865.40	0.00	865.40	713.89	151.45
11	Boudh	Adenigarh	CHC	New Building for Existing CHC	2022-24 (Sup)	994.00	1644.00		994.00		994.00		411.00
12	Kataka	Subarnapur CHC	CHC	New Building for Existing CHC	2022-24	994.00	1092.95	1192.93	497.00	0.00	497.00	600.00	487.15
13	Dhenkanal	Anlabarenl CHC	CHC	New Building for Existing CHC	2022-24	994.00	1040.79		832.63	0.00	832.63	300.00	104.08
14	Dhenkanal	OdapadaCHC	CHC	New Building for Existing CHC	2022-24	994.00	1040.79		832.63	0.00	832.63	107.00	145.71
15	Gajapati	Gumma CHC	CHC	New Building for Existing CHC	2022-24	994.00	1063.80	1086.33	851.04	0.00	851.04	512.00	117.65
16	Jharsuguda	Kolabira CHC	CHC	New Building for Existing CHC	2022-24	994.00	1087.07		497.00	0.00	497.00	366.19	413.05
17	Jharsuguda	Mundrajore CHC	CHC	New Building for Existing CHC	2022-24	994.00		1092.99	497.00	0.00	497.00	273.81	417.19
18	Khordha	Bankoi CHC	CHC	New Building for Existing CHC	2022-24	994.00	1055.00		844.00	0.00	844.00	388.20	147.70
19	Khordha	Gambharimunda CHC	CHC	New Building for Existing CHC	2022-24	994.00	1067.00		853.60	0.00	853.60	449.07	149.38
20	Khordha	Haladia CHC	CHC	New Building for Existing CHC	2022-24	994.00	1090.00		872.00	0.00	872.00	185.24	109.00
21	Malkanagiri	Kudumulugumma CHC	CHC	New Building for Existing CHC	2022-24	994.00	1092.96		874.37	0.00	874.37	556.43	153.01
22	Mayurbhanj	Badampahara CHC	CHC	New Building for Existing CHC	2022-24	994.00	1054.77	1187.98	874.40	180.37	1054.77	637.57	93.25
23	Mayurbhanj	K.C. Pur CHC	CHC	New Building for Existing CHC	2022-24	994.00	1093.40	1181.79	874.72	218.68	1093.40	660.00	61.87
24	Mayurbhanj	Thakurmunda CHC	CHC	New Building for Existing CHC	2022-24	994.00	1093.40	1164.87	874.72	218.68	1093.40	726.15	50.03
25	Nabarangpur	Pujariguda	CHC	New Building for Existing CHC	2022-24	994.00	1095.86		876.69	0.00	876.69	401.33	153.42
26	Rayagada	CHC Muniguda	CHC	New Building for Existing CHC	2022-24	994.00	1078.25	1335.17	862.60	0.00	862.60	680.00	330.80
27	Sonpur	Tarava CHC	CHC	New Building for Existing CHC	2022-24	994.00	1089.10		871.28	0.00	871.28	544.55	152.47
	Total					26819.00	28556.55	11462.02	22395.31	617.73	23013.04	15121.62	4972.18

Revalidation of Civil Construction under NHM PIP Works approved during 2024-26, Odisha (CHC)

Sl. No.	Name of the District	Name of the Block	Name of the Facility	Type of Facility	Year of Sanction of works	Total Project Cost approved in 2024-26 (in Rs. Lakhs)	Revised cost in 2026-27(In lakh) if, any	Amount Sanctioned till 2025-26 (Rs in Lakh)	Fund Approved in 2026-27 (Rs. In Lakhs)
1	Baragada	Paikamal	Paikmal	CHC	2024-26	1644	1799.94	986	244.18
2	Bhadrak	Tihidi	Tihidi	CHC	2024-26	1644	1804.00	986	245.40
3	Balangir	Balangir	Chudapali	CHC	2024-26	1644	1807.13	986	246.34
4	Kataka	Narsinghpur	Narsinghpur	CHC	2024-26	1644		986	411.00
5	Gajapati	Kashinagar	Kashinagar	CHC	2024-26	1644		986	411
6	Ganjam	Purushottampur	Bhatakumarada	CHC	2024-26	1644		986	411
7	Jagatsinghpur	Biridi	Biridi	CHC	2024-26	1644	1799.30	986	243.99
8	Jagatsinghpur	Erasama	Ersama	CHC	2024-26	1644	1799.98	986	244.19
9	Kalahandi	Kalampur	Kalampur	CHC	2024-26	1644	1799.56	986	244.07
10	Kalahandi	Madanpur Rampur	Madanpur Rampur	CHC	2024-26	1644	1799.98	986	244.19
11	Kendujhar	Jhumpura	Jhumpura	CHC	2024-26	1644	1796.95	986	243.29
12	Koraput	Similiguda	Sunabeda	CHC	2024-26	1644		986	411
13	Malkanagiri	Malkangiri	Pandripani	CHC	2024-26	1644	1800.00	986	244.20
14	Mayurbhanj	Kaptipada	Kaptipada	CHC	2024-26	1644	1673.90	986	206.37
15	Puri	Pipili	Managapur	CHC	2024-26	1644	1806.11	986	246.03
16	Sambalpur	Bamra	Garposh	CHC	2024-26	1644		986	411
17	Sonpur	Binka	Binka	CHC	2024-26	1644		986	411
18	Sundaragada	Bisra	Bisra	CHC	2024-26	1644		986	411
	Sub Total					31236.00	19686.85	17748.00	5529.26

Revalidation of Civil Construction under NHM PIP Works approved during 2022-24, Odisha (PHC)

Sl. No.	Name of the District	NameoftheFacility	Type of Facility	Name of the work	Year of Sanction of works	Total Project Cost approved (in Rs. Lakhs)	Revised cost in 2024-26 (In lakh)	Revised cost in 2026-27 (In lakh)	Amount Sanctioned till 2025-26 (Rs in Lakh)	Approved in Supplementar y PIP 25-26	Total Approval	Expenditure till August 2025 (Rs in Lakhs)	Fund Approved in 2026-27 (Rs. In Lakhs)
1	Baragada	Kharamunda	PHC	PHC 24x7 Building	2022-24	200.00	217.13		173.70	0.00	173.70	32.50	43.43
2	Baragada	Talpadar	PHC	PHC 24x7 Building	2022-24	200.00	217.23		173.78	0.00	173.78	32.50	43.45
3	Baragada	Jharabandha	PHC	PHC 24x7 Building	2022-24	200.00	217.89		174.31	0.00	174.31	32.50	43.58
4	Baragada	Jamsat	PHC	PHC 24x7 Building	2022-24	200.00	216.69		173.35	0.00	173.35	32.50	43.34
5	Balangir	Bangomunda	PHC	PHC 24x7 Building	2022-24	200.00	219.96		175.97	0.00	175.97	189.19	43.99
6	Balangir	Kusanga	PHC	PHC 24x7 Building	2022-24	200.00	217.62		174.10	0.00	174.10	213.49	43.52
7	Balangir	Mahimunda	PHC	PHC 24x7 Building	2022-24	200.00	219.89		175.91	0.00	175.91	217.94	43.98
8	Balangir	Tikrapada	PHC	PHC 24x7 Building	2022-24	200.00	218.68		174.94	0.00	174.94	215.86	43.74
9	Boudh	Baghiapada	PHC	PHC 24x7 Building	2022-24	200.00	212.57		171.71	0.00	171.71	142.79	40.86
10	Boudh	Sagada	PHC	PHC 24x7 Building	2022-24	200.00		214.64	170.05	0.00	170.05	139.62	44.59
11	Boudh	Talagaon	PHC	PHC 24x7 Building	2022-24	200.00			120.00	0.00	120.00		50.00
12	Kataka	Tulasipur	PHC	PHC 24x7 Building	2022-24	200.00	218.98		175.18	0.00	175.18	206.67	43.80
13	Kataka	Govindpur	PHC	PHC 24x7 Building	2022-24	200.00	218.35		120.00	0.00	120.00	100.97	98.35
14	Kataka	Bhiruda	PHC	PHC 24x7 Building	2022-24	200.00			120.00	0.00	120.00	100.97	50.00
15	Debagada	PalasamaOH	PHC	PHC 24x7 Building	2022-24	200.00	219.92		120.00	0.00	120.00	219.00	99.92
16	Dhenkanal	Marthapur	PHC	PHC 24x7 Building	2022-24	200.00	215.52		172.42	0.00	172.42	160.00	43.10
17	Dhenkanal	Baladiabandha	PHC	PHC 24x7 Building	2022-24	200.00	215.52		172.42	0.00	172.42	80.00	43.10
18	Gajapati	Jeerango	PHC	PHC 24x7 Building	2022-24	200.00	218.17		174.54	0.00	174.54	171.15	43.63
19	Gajapati	Koinpur	PHC	PHC 24x7 Building	2022-24	200.00	218.17		174.54	0.00	174.54	167.57	43.63
20	Gajapati	Nuagada	PHC	PHC 24x7 Building	2022-24	200.00	218.17		174.54	0.00	174.54	149.49	43.63
21	Gajapati	Ramagiri	PHC	PHC 24x7 Building	2022-24	200.00	218.17		174.54	0.00	174.54	195.50	43.63
22	Kendrapada	Mundala-Harianka	PHC	PHC 24x7 Building	2022-24	200.00	238.80		120.00	113.00	233.00	100.00	5.80
23	Kendrapada	Sanajaria	PHC	PHC 24x7 Building	2022-24	200.00	240.91		120.00	113.00	233.00	72.27	7.91
24	Kendrapada	Rankalaraghunathpur	PHC	PHC 24x7 Building	2022-24	200.00	245.08		120.00	113.00	233.00	73.74	12.08
25	Kendrapada	Gupti	PHC	PHC 24x7 Building	2022-24	200.00	246.39		120.00	113.00	233.00	73.92	13.39
26	Khordha	Malipada	PHC	PHC 24x7 Building	2022-24	200.00		206.02	120.00	0.00	120.00	61.80	86.02
27	Malkanagiri	Bhejangiwada	PHC	PHC 24x7 Building	2022-24	200.00	215.45		172.36	0.00	172.36	60.00	43.09
28	Malkanagiri	Pedakonda	PHC	PHC 24x7 Building	2022-24	200.00	215.90		172.72	0.00	172.72	60.00	43.18
29	Malkanagiri	Motu	PHC	PHC 24x7 Building	2022-24	200.00	215.86		120.00	0.00	120.00	0.00	28.76

Revalidation of Civil Construction under NHM PIP Works approved during 2022-24, Odisha (PHC)

Sl. No.	Name of the District	NameoftheFacility	Type of Facility	Name of the work	Year of Sanction of works	Total Project Cost approved (in Rs. Lakhs)	Revised cost in 2024-26 (In lakh)	Revised cost in 2026-27 (In lakh)	Amount Sanctioned till 2025-26 (Rs in Lakh)	Approved in Supplementar y PIP 25-26	Total Approval	Expenditure till August 2025 (Rs in Lakhs)	Fund Approved in 2026-27 (Rs. In Lakhs)
30	Mayurbhanj	KuamaraOH	PHC	PHC 24x7 Building	2022-24	200.00		220.00	120.00	80.82	200.82	69.60	19.18
31	Mayurbhanj	Manida	PHC	PHC 24x7 Building	2022-24	200.00		220.00	120.00	80.00	200.00	69.60	20.00
32	Mayurbhanj	Ghagarbeda	PHC	PHC 24x7 Building	2022-24	200.00		254.10	120	0	120.00		40.23
33	Nayagada	Kujamendhi	PHC	PHC 24x7 Building	2022-24	200.00			120		120.00		24.00
34	Nayagada	Kantilo	PHC	PHC 24x7 Building	2022-24	200.00		296.87	120		120.00		53.06
35	Nuapada	Sunabeda-Nuapada	PHC	PHC 24x7 Building	2022-24	200.00	219.58		175.66	0.00	175.66	190.00	43.92
36	Sambalpur	Padiabahal	PHC	PHC 24x7 Building	2022-24	200.00	218.46		174.77	0.00	174.77	196.67	43.69
37	Sambalpur	Kusumi-Kuntara	PHC	PHC 24x7 Building	2022-24	200.00		218.52	174.80	0.00	174.80	196.72	43.72
38	Sambalpur	Tureiniktimal	PHC	PHC 24x7 Building	2022-24	200.00	218.52		174.82	0.00	174.82	196.72	43.70
39	Sonpur	Mahadevpali	PHC	PHC 24x7 Building	2022-24	200.00		219.25	175.20	0.00	175.20	109.63	44.05
40	Sonpur	Sankara	PHC	PHC 24x7 Building	2022-24	200.00		219.38	175.20	0.00	175.20	153.57	44.18
41	Sonpur	Bhimtikira	PHC	PHC 24x7 Building	2022-24	200.00		219.13	175.20	0.00	175.20	109.57	43.93
42	Sonpur	Kamsara	PHC	PHC 24x7 Building	2022-24	200.00		219.39	175.20	0.00	175.20	153.58	44.19
43	Sonpur	Pua	PHC	PHC 24x7 Building	2022-24	200.00		219.28	175.20	0.00	175.20	153.50	44.08
44	Sonpur	Sindhol	PHC	PHC 24x7 Building	2022-24	200.00		219.48	175.20	0.00	175.20	153.63	44.28
45	Sonpur	Jaloi	PHC	PHC 24x7 Building	2022-24	200.00	219.00		175.20	0.00	175.20	109.34	43.80
Total 24x7 PHC						9200.00	6412.58	2946.06	7147.53	612.82	7760.35	5164.07	1917.51
1	Anugola	Purunakote	PHC	PHC Day Care Building	2022-24	97.00			77.60	0.00	77.60	29.10	19.40
2	Baragada	Ambabhana	PHC	PHC Day Care Building	2022-24	97.00	106.47		48.00	0.00	48.00	31.94	58.47
3	Baragada	Larambha	PHC	PHC Day Care Building	2022-24	97.00	106.66		48.00	0.00	48.00	32.00	58.66
4	Baragada	Birmal	PHC	PHC Day Care Building	2022-24	97.00	106.24		48.00	0.00	48.00	31.87	58.24
5	Baragada	Kumbhari	PHC	PHC Day Care Building	2022-24	97.00	106.69		48.00	0.00	48.00	32.00	58.69
6	Baragada	Dahita	PHC	PHC Day Care Building	2022-24	97.00	105.56		48.00	0.00	48.00	31.81	57.56
7	Balangir	Duduku	PHC	PHC Day Care Building	2022-24	97.00			77.60	0.00	77.60	97.00	19.40
8	Balangir	Roth	PHC	PHC Day Care Building	2022-24	97.00			77.60	0.00	77.60	97.00	19.40
9	Balangir	Chulifunka	PHC	PHC Day Care Building	2022-24	97.00			77.60	0.00	77.60	97.00	19.40
10	Balangir	Mandal	PHC	PHC Day Care Building	2022-24	97.00			77.60	0.00	77.60	97.00	19.40
11	Balangir	Bandhpara	PHC	PHC Day Care Building	2022-24	97.00			77.60	0.00	77.60	97.00	19.40
12	Balangir	Harisankar	PHC	PHC Day Care Building	2022-24	97.00			77.60	0.00	77.60	97.00	19.40

Revalidation of Civil Construction under NHM PIP Works approved during 2022-24, Odisha (PHC)

Sl. No.	Name of the District	NameoftheFacility	Type of Facility	Name of the work	Year of Sanction of works	Total Project Cost approved (in Rs. Lakhs)	Revised cost in 2024-26 (In lakh)	Revised cost in 2026-27 (In lakh)	Amount Sanctioned till 2025-26 (Rs in Lakh)	Approved in Supplementar y PIP 25-26	Total Approval	Expenditure till August 2025 (Rs in Lakhs)	Fund Approved in 2026-27 (Rs. In Lakhs)
13	Balangir	Dhandamunda	PHC	PHC Day Care Building	2022-24	97.00			77.60	0.00	77.60	97.00	19.40
14	Balangir	Badimunda	PHC	PHC Day Care Building	2022-24	97.00			77.60	0.00	77.60	97.00	19.40
15	Balangir	Patrapali	PHC	PHC Day Care Building	2022-24	97.00			77.60	0.00	77.60	97.00	19.40
16	Balangir	Bhainsa	PHC	PHC Day Care Building	2022-24	97.00			77.60	0.00	77.60	97.00	19.40
17	Balangir	Solabandha	PHC	PHC Day Care Building	2022-24	97.00			77.60	0.00	77.60	97.00	19.40
18	Balangir	Belgaon	PHC	PHC Day Care Building	2022-24	97.00			77.60	0.00	77.60	94.00	19.40
19	Balangir	Bhatipada	PHC	PHC Day Care Building	2022-24	97.00			77.60	0.00	77.60	97.00	19.40
20	Boudh	Charichak	PHC	PHC Day Care Building	2022-24	97.00		141.70	48		48.00		28.11
21	Boudh	Ghantapada	PHC	PHC Day Care Building	2022-24	97.00		139.45	48		48.00		27.44
22	Boudh	Palasaguda	PHC	PHC Day Care Building	2022-24	97.00		141.42	48		48.00		28.03
23	Kataka	Khuntuni	PHC	PHC Day Care Building	2022-24	97.00	125.00		48.00	62.00	110.00	33.00	15.00
24	Kataka	Mundali	PHC	PHC Day Care Building	2022-24	97.00	125.00		48.00	62.00	110.00	40.00	15.00
25	Kataka	Handibhanga	PHC	PHC Day Care Building	2022-24	120.00			48.00		48.00	40.00	30.00
26	Kataka	Kundipadia	PHC	PHC Day Care Building	2022-24	97.00	124.85		48.00	62.00	110.00	45.00	14.85
27	Kataka	Asureswar	PHC	PHC Day Care Building	2022-24	97.00	124.91		48.00	62.00	110.00	33.00	14.91
28	Kataka	Kishorenagar	PHC	PHC Day Care Building	2022-24	97.00	124.86		48.00	62.00	110.00	35.38	4.46
29	Kataka	Sagar	PHC	PHC Day Care Building	2022-24	97.00	124.94		48.00	62.00	110.00	0.00	4.48
30	Kataka	Brahmapura	PHC	PHC Day Care Building	2022-24	97.00	125.00		48.00	62.00	110.00	0.00	4.50
31	Debagada	Reamal	PHC	PHC Day Care Building	2022-24	97.00	106.00		84.80	0.00	84.80	90.00	21.20
32	Debagada	Kansar	PHC	PHC Day Care Building	2022-24	97.00	105.22		84.18	0.00	84.18	100.00	21.04
33	Dhenkanal	Barua	PHC	PHC Day Care Building	2022-24	97.00		116.92	48.00	0.00	48.00	35.07	68.92
34	Dhenkanal	Guneibili	PHC	PHC Day Care Building	2022-24	97.00		117.18	48.00	0.00	48.00	35.15	69.18
35	Dhenkanal	Muktapasi	PHC	PHC Day Care Building	2022-24	97.00		125.00	48.00	0.00	48.00	0.00	53.90
36	Dhenkanal	Dadaraghati	PHC	PHC Day Care Building	2022-24	97.00		102.47	48.00	0.00	48.00	25.68	54.47
37	Dhenkanal	Paikapurunakote	PHC	PHC Day Care Building	2022-24	97.00		101.86	48.00	0.00	48.00	26.85	53.86
38	Dhenkanal	Kantiokateni	PHC	PHC Day Care Building	2022-24	97.00		100.74	48.00	0.00	48.00	30.49	52.74
39	Dhenkanal	Pingua	PHC	PHC Day Care Building	2022-24	97.00		100.65	48.00	0.00	48.00	25.72	52.65
40	Dhenkanal	Bedapada	PHC	PHC Day Care Building	2022-24	97.00		102.03	48		48.00		16.21
41	Gajapati	Loba	PHC	PHC Day Care Building	2022-24	97.00	106.69		48.00	0.00	48.00	59.94	41.08

Revalidation of Civil Construction under NHM PIP Works approved during 2022-24, Odisha (PHC)

Sl. No.	Name of the District	NameoftheFacility	Type of Facility	Name of the work	Year of Sanction of works	Total Project Cost approved (in Rs. Lakhs)	Revised cost in 2024-26 (In lakh)	Revised cost in 2026-27 (In lakh)	Amount Sanctioned till 2025-26 (Rs in Lakh)	Approved in Supplementar y PIP 25-26	Total Approval	Expenditure till August 2025 (Rs in Lakhs)	Fund Approved in 2026-27 (Rs. In Lakhs)
42	Gajapati	Khandava	PHC	PHC Day Care Building	2022-24	97.00	106.69		48.00	0.00	48.00	77.07	58.69
43	Gajapati	Namanguda	PHC	PHC Day Care Building	2022-24	97.00	106.69		48.00	0.00	48.00	0.00	17.61
44	Ganjam	Dayanidhipur	PHC	PHC Day Care Building	2022-24	97.00		142.97	48		48.00		28.49
45	Jagatsinghpur	DASABATIA	PHC	PHC Day Care Building	2022-24	97.00		155.12	48.00	0.00	48.00		32.14
46	Jagatsinghpur	TARASAH	PHC	PHC Day Care Building	2022-24	97.00		157.00	48.00	0.00	48.00		32.70
47	Jagatsinghpur	Bagalpur	PHC	PHC Day Care Building	2022-24	97.00		157.00	48.00	0.00	48.00		32.70
48	Jagatsinghpur	Kolar	PHC	PHC Day Care Building	2022-24	97.00		157.00	48.00	0.00	48.00		32.70
49	Jharsuguda	Bhadimal	PHC	PHC Day Care Building	2022-24	97.00	142.97		48.00	62	110.00		9.89
50	Kandhamal	Possara	PHC	PHC Day Care Building	2022-24	97.00			77.60	0.00	77.60	96.25	19.40
51	Kandhamal	Naringijhola	PHC	PHC Day Care Building	2022-24	97.00			77.60	0.00	77.60	96.24	19.40
52	Kandhamal	Sunagaon	PHC	PHC Day Care Building	2022-24	97.00			77.60	0.00	77.60	96.78	19.40
53	Kandhamal	Sikarmaha	PHC	PHC Day Care Building	2022-24	97.00			77.60	0.00	77.60	29.00	19.40
54	Kandhamal	Khamankhole	PHC	PHC Day Care Building	2022-24	97.00			77.60	0.00	77.60	13.00	19.40
55	Kandhamal	Srirampur	PHC	PHC Day Care Building	2022-24	97.00			48.00	0.00	48.00	13.00	49.00
56	Kandhamal	Lankagada	PHC	PHC Day Care Building	2022-24	97.00			48.00	0.00	48.00	13.00	49.00
57	Kandhamal	Sugudabadi	PHC	PHC Day Care Building	2022-24	97.00			77.60	0.00	77.60		5.82
58	Kendrapada	Korua	PHC	PHC Day Care Building	2022-24	97.00	142.61		48.00	62.00	110.00	31.53	32.61
59	Kendrapada	Tendakuda	PHC	PHC Day Care Building	2022-24	97.00	142.61		48.00	62.00	110.00	21.00	9.78
60	Kendrapada	Ayaba	PHC	PHC Day Care Building	2022-24	97.00	142.96		48.00	62.00	110.00	0.00	9.89
61	Kendrapada	Pailo	PHC	PHC Day Care Building	2022-24	97.00	106.35		48.00	0.00	48.00	0.00	17.51
62	Kendrapada	Balia	PHC	PHC Day Care Building	2022-24	97.00	142.71		48	62	110.00		9.81
63	Kendrapada	Katana	PHC	PHC Day Care Building	2022-24	97.00	142.71		48	62	110.00		9.81
64	Khordha	Chandaka	PHC	PHC Day Care Building	2022-24	97.00	102.00		48.00	0.00	48.00	20.92	54.00
65	Malkanagiri	Koikunda	PHC	PHC Day Care Building	2022-24	97.00		125.00	48.00	0.00	48.00	36.50	53.90
66	Malkanagiri	Padmagiri	PHC	PHC Day Care Building	2022-24	97.00		125.00	48.00	0.00	48.00	50.00	53.90
67	Malkanagiri	Govindapalli	PHC	PHC Day Care Building	2022-24	97.00		125.00	48		48.00		23.10
68	Malkanagiri	Mudulipada	PHC	PHC Day Care Building	2022-24	97.00		125.00	48		48.00		23.10
69	Mayurbhanj	Suliapada	PHC	PHC Day Care Building	2022-24	97.00		128.00	48.00	62.00	110.00	30.00	18.00
70	Mayurbhanj	Tangabila	PHC	PHC Day Care Building	2022-24	97.00	125.00		48	62	110.00		4.50

Revalidation of Civil Construction under NHM PIP Works approved during 2022-24, Odisha (PHC)

Sl. No.	Name of the District	NameoftheFacility	Type of Facility	Name of the work	Year of Sanction of works	Total Project Cost approved (in Rs. Lakhs)	Revised cost in 2024-26 (In lakh)	Revised cost in 2026-27 (In lakh)	Amount Sanctioned till 2025-26 (Rs in Lakh)	Approved in Supplementary PIP 25-26	Total Approval	Expenditure till August 2025 (Rs in Lakhs)	Fund Approved in 2026-27 (Rs. In Lakhs)
71	Mayurbhanj	Guhaldangiri	PHC	PHC Day Care Building	2022-24	97.00	125.00		48	62	110.00		4.50
72	Nayagada	Balugaon	PHC	PHC Day Care Building	2022-24	97.00			77.60	0.00	77.60	29.00	19.40
73	Nayagada	Itamati	PHC	PHC Day Care Building	2022-24	97.00			77.60	0.00	77.60	29.00	19.40
74	Nayagada	Kaliakaprasad	PHC	PHC Day Care Building	2022-24	97.00			77.60	0.00	77.60	29.00	19.40
75	Nayagada	Kajalaipalli	PHC	PHC Day Care Building	2022-24	97.00			77.60	0.00	77.60	87.30	19.40
76	Nayagada	Komanda	PHC	PHC Day Care Building	2022-24	97.00			77.60	0.00	77.60	87.30	19.40
77	Nayagada	Darpanarayanpur	PHC	PHC Day Care Building	2022-24	97.00			48.00	0.00	48.00	18.23	49.00
78	Nayagada	Majhikhanda	PHC	PHC Day Care Building	2022-24	97.00			77.60	0.00	77.60	28.45	19.40
79	Nayagada	Mayurjhalia	PHC	PHC Day Care Building	2022-24	97.00			48.00	0.00	48.00	52.48	49.00
80	Nayagada	Nimani	PHC	PHC Day Care Building	2022-24	97.00	124.81		48.00	62.00	110.00	37.44	14.81
81	Nuapada	Bainsadhini	PHC	PHC Day Care Building	2022-24	97.00	106.07		47.27	58.07	105.34	47.27	0.73
82	Puri	Satasankha	PHC	PHC Day Care Building	2022-24	97.00		103.84	48.00	0.00	48.00	104.00	39.09
83	Puri	Bantilo	PHC	PHC Day Care Building	2022-24	97.00		105.84	48.00	0.00	48.00	85.00	40.49
84	Puri	Harirajapur	PHC	PHC Day Care Building	2022-24	97.00		102.77	48.00	0.00	48.00	66.00	38.34
85	Puri	Badatara	PHC	PHC Day Care Building	2022-24	97.00		102.50	48.00	0.00	48.00	27.50	38.15
86	Puri	Titipa	PHC	PHC Day Care Building	2022-24	97.00		105.30	48.00	0.00	48.00		17.19
87	Puri	Kamakantia	PHC	PHC Day Care Building	2022-24	97.00		103.30	48		48.00		16.59
88	Rayagada	Durgi	PHC	PHC Day Care Building	2022-24	97.00		106.69	48.00	0.00	48.00	30.00	41.08
89	Sambalpur	Paramanpur	PHC	PHC Day Care Building	2022-24	97.00			48.00	0.00	48.00	47.59	34.30
90	Sambalpur	Girishchandrapur	PHC	PHC Day Care Building	2022-24	97.00	100.00		48.00	0.00	48.00	30.00	34.30
91	Sambalpur	Kadaligarh	PHC	PHC Day Care Building	2022-24	97.00			48.00	0.00	48.00	22.00	34.30
92	Sonpur	Murusundi	PHC	PHC Day Care Building	2022-24	97.00			77.60	0.00	77.60	34.37	19.40
93	Sonpur	Beheramal	PHC	PHC Day Care Building	2022-24	97.00			77.60	0.00	77.60	35.85	19.40
94	Sonpur	Digasara	PHC	PHC Day Care Building	2022-24	97.00			77.60	0.00	77.60	34.56	19.40
95	Sonpur	Sukha	PHC	PHC Day Care Building	2022-24	97.00			77.60	0.00	77.60	66.34	19.40
96	Sonpur	Bankighirdi	PHC	PHC Day Care Building	2022-24	97.00			77.60	0.00	77.60	7.65	13.58
97	Sonpur	Haradakhole	PHC	PHC Day Care Building	2022-24	97.00			77.60	0.00	77.60	22.72	13.58
98	Sonpur	Menda	PHC	PHC Day Care Building	2022-24	97.00			77.60	0.00	77.60	36.44	13.58
Total Day Care PHC						10111.00	3583.27	3416.75	6041.05	1343.77	6865.12	3949.50	2707.50
Grand Total PHC 2022-24						19311.00	9995.85	10378.00	13188.58	1956.59	14625.47	9113.57	4625.01

Revalidation of Civil Construction under NHM PIP Works approved during 2022-24, Odisha (SC)

Sl. No.	Name of the District	Name of the Facility	Type of Facility	Name of the work	Year of Sanction of works	Total Project Cost approved (in Rs. Lakhs)	Revised cost in 2024-26 (In lakh)	Revised cost in 2026-27 (In lakh)	Amount Sanctioned till 2025-26 (Rs in Lakh)	Approved in Supplement ary PIP 25-26	Total Approval	Expenditure till August 2025 (Rs in Lakhs)	Fund Approved in 2026-27 (Rs. In Lakhs)
1	Anugola	Golabandha.	SC	New Building for Existing SCs	2022-24	46.00		55.00	46.00		46.00	0.00	9.00
2	Anugola	Kulad	SC	New Building for Existing SCs	2022-24	46.00		55.00	46.00		46.00	0.00	9.00
3	Anugola	Kurudol	SC	New Building for Existing SCs	2022-24	46.00		55.00	46.00		46.00	12.18	9.00
4	Anugola	Mahidharpur	SC	New Building for Existing SCs	2022-24	46.00		55.00	46.00		46.00	0.00	9.00
5	Anugola	Santrapur	SC	New Building for Existing SCs	2022-24	46.00		55.00	46.00		46.00	0.00	9.00
6	Anugola	Tubey	SC	New Building for Existing SCs	2022-24	46.00		55.00	46.00		46.00	12.05	9.00
7	Baleshwar	Bishnupur	SC	New Building for Existing SCs	2022-24	46.00	49.96	54.99	46.00		46.00		8.99
8	Baleshwar	Jamudihi	SC	New Building for Existing SCs	2022-24	46.00	49.98		46.00		46.00		3.98
9	Baleshwar	Kasipada	SC	New Building for Existing SCs	2022-24	46.00	49.99		46.00		46.00		3.99
10	Baleshwar	Nabara	SC	New Building for Existing SCs	2022-24	46.00	49.99		46.00		46.00		3.99
11	Baleshwar	Tentulia	SC	New Building for Existing SCs	2022-24	46.00	48.46	48.48	46.00		46.00	0.00	2.48
12	Baragada	Bagbadi	SC	New Building for Existing SCs	2022-24	46.00	55.00		46.00		46.00	23.12	9.00
13	Baragada	BARGAON	SC	New Building for Existing SCs	2022-24	46.00	55.00		46.00		46.00	26.00	9.00
14	Baragada	Bhointara	SC	New Building for Existing SCs	2022-24	46.00	55.00		46.00		46.00		9.00
15	Baragada	Budapali	SC	New Building for Existing SCs	2022-24	46.00	55.00		46.00		46.00	26.61	9.00
16	Baragada	Kharmunda	SC	New Building for Existing SCs	2022-24	46.00	55.00		46.00		46.00	16.00	9.00
17	Baragada	Kumbho	SC	New Building for Existing SCs	2022-24	46.00	55.00		46.00		46.00		9.00
18	Baragada	Launsara	SC	New Building for Existing SCs	2022-24	46.00	55.00		46.00		46.00	25.00	9.00
19	Baragada	Lenda	SC	New Building for Existing SCs	2022-24	46.00	55.00		46.00		46.00	0.00	9.00
20	Baragada	Patkulunda	SC	New Building for Existing SCs	2022-24	46.00	55.00		46.00		46.00	18.38	9.00
21	Baragada	Rusuda	SC	New Building for Existing SCs	2022-24	46.00	55.00		46.00		46.00	21.00	9.00
22	Baragada	Talsirgida	SC	New Building for Existing SCs	2022-24	46.00	55.00		46.00		46.00	22.00	9.00
23	Baragada	Tejagola	SC	New Building for Existing SCs	2022-24	46.00	55.00		46.00		46.00	22.00	9.00
24	Baragada	Tope	SC	New Building for Existing SCs	2022-24	46.00	55.00		46.00		46.00		9.00
25	Bhadrak	Jitanga	SC	New Building for Existing SCs	2022-24	46.00		50.60	46.00		46.00	39.50	4.60
26	Balangir	Amurla	SC	New Building for Existing SCs	2022-24	46.00		49.96	46.00		46.00	49.96	3.96
27	Balangir	Badbandh	SC	New Building for Existing SCs	2022-24	46.00		49.95	46.00		46.00	49.95	3.95
28	Balangir	Desil	SC	New Building for Existing SCs	2022-24	46.00		49.96	46.00		46.00	49.96	3.96

Revalidation of Civil Construction under NHM PIP Works approved during 2022-24, Odisha (SC)

Sl. No.	Name of the District	Name of the Facility	Type of Facility	Name of the work	Year of Sanction of works	Total Project Cost approved (in Rs. Lakhs)	Revised cost in 2024-26 (In lakh)	Revised cost in 2026-27 (In lakh)	Amount Sanctioned till 2025-26 (Rs in Lakh)	Approved in Supplement ary PIP 25-26	Total Approval	Expenditure till August 2025 (Rs in Lakhs)	Fund Approved in 2026-27 (Rs. In Lakhs)
29	Balangir	Gourgoth	SC	New Building for Existing SCs	2022-24	46.00		49.95	46.00		46.00	49.95	3.95
30	Balangir	Ichhapada	SC	New Building for Existing SCs	2022-24	46.00		49.96	46.00		46.00	46.05	3.96
31	Balangir	Rugudipali	SC	New Building for Existing SCs	2022-24	46.00		49.95	46.00		46.00	49.95	3.95
32	Balangir	Sagadghat	SC	New Building for Existing SCs	2022-24	46.00		49.96	46.00		46.00	42.23	3.96
33	Balangir	Sihini	SC	New Building for Existing SCs	2022-24	46.00		49.96	46.00		46.00	49.96	3.96
34	Kataka	Banahara	SC	New Building for Existing SCs	2022-24	46.00		55.00	46.00		46.00	0.00	9.00
35	Kataka	Biswalpada	SC	New Building for Existing SCs	2022-24	46.00		54.95	46.00		46.00	16.50	8.95
36	Kataka	Gangeswar	SC	New Building for Existing SCs	2022-24	46.00		54.99	46.00		46.00	0.00	8.99
37	Kataka	Kurang Pradhan	SC	New Building for Existing SCs	2022-24	46.00		54.98	46.00		46.00		8.98
38	Kataka	Mundamunan	SC	New Building for Existing SCs	2022-24	46.00		55.00	46.00		46.00	32.00	9.00
39	Kataka	Usuma	SC	New Building for Existing SCs	2022-24	46.00		55.00	46.00		46.00	0.00	9.00
40	Dhenkanal	Arakhapal	SC	New Building for Existing SCs	2022-24	46.00	50.40	54.95	46.00		46.00	16.49	8.95
41	Dhenkanal	Badasuanlo	SC	New Building for Existing SCs	2022-24	46.00	50.48	54.38	46.00		46.00	1450.00	8.38
42	Dhenkanal	Balabhadrapur	SC	New Building for Existing SCs	2022-24	46.00	49.80	54.91	46.00		46.00	15.46	8.91
43	Dhenkanal	Bausapokhari	SC	New Building for Existing SCs	2022-24	46.00	50.29	54.76	46.00		46.00	16.43	8.76
44	Dhenkanal	Bega	SC	New Building for Existing SCs	2022-24	46.00	49.83	54.92	46.00		46.00	16.48	8.92
45	Dhenkanal	Bhaliabol Katoni	SC	New Building for Existing SCs	2022-24	46.00	49.82	55.07	46.00		46.00	16.52	9.07
46	Dhenkanal	Bidharpur	SC	New Building for Existing SCs	2022-24	46.00	49.77	58.47	46.00		46.00		12.47
47	Dhenkanal	Brahmanipal	SC	New Building for Existing SCs	2022-24	46.00	49.82	54.67	46.00		46.00	15.23	8.67
48	Dhenkanal	Dayanbil	SC	New Building for Existing SCs	2022-24	46.00	50.13	54.01	46.00		46.00	15.38	8.01
49	Dhenkanal	Goradia	SC	New Building for Existing SCs	2022-24	46.00	50.28	54.95	46.00		46.00	14.99	8.95
50	Dhenkanal	Gulehi	SC	New Building for Existing SCs	2022-24	46.00	49.88	54.42	46.00		46.00	15.04	8.42
51	Dhenkanal	Kaimati	SC	New Building for Existing SCs	2022-24	46.00	49.85	55.11	46.00		46.00	15.93	9.11
52	Dhenkanal	Kaluria	SC	New Building for Existing SCs	2022-24	46.00	50.26	55.16	46.00		46.00	16.10	9.16
53	Dhenkanal	Kangeilo	SC	New Building for Existing SCs	2022-24	46.00	50.37	55.00	46.00		46.00	16.50	9.00
54	Dhenkanal	Kankadapal	SC	New Building for Existing SCs	2022-24	46.00	49.75	54.96	46.00		46.00	7.74	8.96
55	Dhenkanal	Kantioputasahi	SC	New Building for Existing SCs	2022-24	46.00	49.77	54.71	46.00		46.00	16.41	8.71
56	Dhenkanal	Karanda	SC	New Building for Existing SCs	2022-24	46.00	49.49	54.51	46.00		46.00	16.35	8.51

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57	Dhenkanal	Kingol	SC	New Building for Existing SCs	2022-24	46.00	50.00	53.89	46.00		46.00	16.17	7.89
58	Dhenkanal	Koilipangi	SC	New Building for Existing SCs	2022-24	46.00	50.04	54.96	46.00		46.00	16.49	8.96
59	Dhenkanal	Kunua	SC	New Building for Existing SCs	2022-24	46.00	50.23	54.64	46.00		46.00	16.39	8.64
60	Dhenkanal	Madhapur	SC	New Building for Existing SCs	2022-24	46.00	50.46	55.44	46.00		46.00	16.63	9.44
61	Dhenkanal	Mahulpal	SC	New Building for Existing SCs	2022-24	46.00	50.12	54.38	46.00		46.00	16.32	8.38
62	Dhenkanal	Mandar	SC	New Building for Existing SCs	2022-24	46.00	49.54	55.34	46.00		46.00	13.65	9.34
63	Dhenkanal	Rai Narsingh Pur	SC	New Building for Existing SCs	2022-24	46.00	49.54	53.39	46.00		46.00	16.02	7.39
64	Dhenkanal	Raitala	SC	New Building for Existing SCs	2022-24	46.00	49.74	54.89	46.00		46.00	16.47	8.89
65	Dhenkanal	Ratanpur	SC	New Building for Existing SCs	2022-24	46.00	49.95	55.22	46.00		46.00	15.57	9.22
66	Dhenkanal	Santhapur	SC	New Building for Existing SCs	2022-24	46.00	49.89	54.97	46.00		46.00	13.93	8.97
67	Dhenkanal	Sibalaposi	SC	New Building for Existing SCs	2022-24	46.00	50.47	54.31	46.00		46.00	15.28	8.31
68	Dhenkanal	Sorisiapada	SC	New Building for Existing SCs	2022-24	46.00	50.12	54.93	46.00		46.00	10.31	8.93
69	Gajapati	Ajayagada	SC	New Building for Existing SCs	2022-24	46.00	55.00		46.00		46.00		9.00
70	Gajapati	Allada	SC	New Building for Existing SCs	2022-24	46.00	55.00		46.00		46.00	16.50	9.00
71	Gajapati	B Kalakote	SC	New Building for Existing SCs	2022-24	46.00	55.00		46.00		46.00		9.00
72	Gajapati	Badakoturu	SC	New Building for Existing SCs	2022-24	46.00	55.00		46.00		46.00	0.00	9.00
73	Gajapati	Bhuskudi	SC	New Building for Existing SCs	2022-24	46.00	55.00		46.00		46.00	16.50	9.00
74	Gajapati	Gaiba	SC	New Building for Existing SCs	2022-24	46.00	55.00		46.00		46.00	16.50	9.00
75	Gajapati	Gosani	SC	New Building for Existing SCs	2022-24	46.00	55.00		46.00		46.00	14.50	9.00
76	Gajapati	Haripur.	SC	New Building for Existing SCs	2022-24	46.00	55.00		46.00		46.00	0.00	9.00
77	Gajapati	Jeeba	SC	New Building for Existing SCs	2022-24	46.00	55.00		46.00		46.00	16.50	9.00
78	Gajapati	Jhami	SC	New Building for Existing SCs	2022-24	46.00	55.00		46.00		46.00		9.00
79	Gajapati	Khandava	SC	New Building for Existing SCs	2022-24	46.00	55.00		46.00		46.00		9.00
80	Gajapati	Kharasanda	SC	New Building for Existing SCs	2022-24	46.00	55.00		46.00		46.00	30.00	9.00
81	Gajapati	Koinpur	SC	New Building for Existing SCs	2022-24	46.00	55.00		46.00		46.00		9.00
82	Gajapati	Linga	SC	New Building for Existing SCs	2022-24	46.00	55.00		46.00		46.00	10.00	9.00
83	Gajapati	Narayanpur	SC	New Building for Existing SCs	2022-24	46.00	55.00		46.00		46.00	16.50	9.00
84	Ganjam	B D Pur	SC	New Building for Existing SCs	2022-24	46.00		60.10	46.00		46.00		14.10

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85	Ganjam	Barapalli	SC	New Building for Existing SCs	2022-24	46.00		60.47	46.00		46.00		14.47
86	Ganjam	Budurungu	SC	New Building for Existing SCs	2022-24	46.00		60.50	46.00		46.00		14.50
87	Ganjam	Dhumakumpa	SC	New Building for Existing SCs	2022-24	46.00		59.80	46.00		46.00		13.80
88	Ganjam	Inginathi	SC	New Building for Existing SCs	2022-24	46.00		60.36	46.00		46.00		14.36
89	Ganjam	Kadapada	SC	New Building for Existing SCs	2022-24	46.00		60.50	46.00		46.00		14.50
90	Ganjam	Khamarapalli	SC	New Building for Existing SCs	2022-24	46.00		60.41	46.00		46.00		14.41
91	Ganjam	Khetamundali	SC	New Building for Existing SCs	2022-24	46.00		60.50	46.00		46.00		14.50
92	Ganjam	Kumarpani	SC	New Building for Existing SCs	2022-24	46.00		59.94	46.00		46.00		13.94
93	Ganjam	Kurala	SC	New Building for Existing SCs	2022-24	46.00		58.66	46.00		46.00	0.00	12.66
94	Ganjam	Mantapada	SC	New Building for Existing SCs	2022-24	46.00		57.14	46.00		46.00	0.00	11.14
95	Ganjam	Merikote	SC	New Building for Existing SCs	2022-24	46.00		59.48	46.00		46.00		13.48
96	Ganjam	Nettanga	SC	New Building for Existing SCs	2022-24	46.00		60.50	46.00		46.00		14.50
97	Ganjam	Panchabhuti	SC	New Building for Existing SCs	2022-24	46.00		60.50	46.00		46.00		14.50
98	Ganjam	S Chhachina	SC	New Building for Existing SCs	2022-24	46.00		60.48	46.00		46.00	0.00	14.48
99	Ganjam	Talasara	SC	New Building for Existing SCs	2022-24	46.00		60.50	46.00		46.00	0.00	14.50
100	Kendrapada	Akhua	SC	New Building for Existing SCs	2022-24	46.00	47.84	48.53	46.00	1.84	47.84	12.00	0.69
101	Kendrapada	Kusiapal	SC	New Building for Existing SCs	2022-24	46.00	47.26	48.26	46.00	1.26	47.26	28.00	1.00
102	Kendrapada	Manikpur	SC	New Building for Existing SCs	2022-24	46.00	47.57	48.41	46.00	1.57	47.57		0.84
103	Kendrapada	Naganpur	SC	New Building for Existing SCs	2022-24	46.00	47.43	49.56	46.00	1.43	47.43	35.00	2.13
104	Kendrapada	Nikirei	SC	New Building for Existing SCs	2022-24	46.00	47.82	48.61	46.00	1.82	47.82	33.48	0.79
105	Kendrapada	Ranipokhari	SC	New Building for Existing SCs	2022-24	46.00	47.50	49.95	46.00	1.50	47.50	28.00	2.45
106	Khordha	Amanakuda	SC	New Building for Existing SCs	2022-24	46.00		49.99	46.00		46.00	30.85	3.99
107	Khordha	Bhatakudi	SC	New Building for Existing SCs	2022-24	46.00		49.57	46.00		46.00		3.57
108	Khordha	Jhinti Sasan	SC	New Building for Existing SCs	2022-24	46.00		49.99	46.00		46.00		3.99
109	Khordha	Kakarudrapur	SC	New Building for Existing SCs	2022-24	46.00		49.99	46.00		46.00		3.99
110	Khordha	Kalanga	SC	New Building for Existing SCs	2022-24	46.00		49.99	46.00		46.00	12.26	3.99
111	Khordha	Khalikote	SC	New Building for Existing SCs	2022-24	46.00		49.99	46.00		46.00	12.75	3.99
112	Khordha	Sanpadar	SC	New Building for Existing SCs	2022-24	46.00		49.99	46.00		46.00	12.85	3.99

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113	Khordha	Satyabhampur	SC	New Building for Existing SCs	2022-24	46.00		49.99	46.00		46.00	12.82	3.99
114	Khordha	Sishupalgarh	SC	New Building for Existing SCs	2022-24	46.00		49.85	46.00		46.00		3.85
115	Khordha	Sompur	SC	New Building for Existing SCs	2022-24	46.00		49.99	46.00		46.00	12.82	3.99
116	Koraput	Ankula	SC	New Building for Existing SCs	2022-24	46.00		55.00	46.00		46.00	0.00	9.00
117	Koraput	Aunali	SC	New Building for Existing SCs	2022-24	46.00		55.00	46.00		46.00	9.95	9.00
118	Koraput	Bada bankidi	SC	New Building for Existing SCs	2022-24	46.00		55.00	46.00		46.00	0.00	9.00
119	Koraput	Badanayakguda	SC	New Building for Existing SCs	2022-24	46.00		55.00	46.00		46.00	0.00	9.00
120	Koraput	Baragachha	SC	New Building for Existing SCs	2022-24	46.00		55.00	46.00		46.00	0.00	9.00
121	Koraput	Bhaluguda	SC	New Building for Existing SCs	2022-24	46.00		55.00	46.00		46.00	0.00	9.00
122	Koraput	Bhejaput	SC	New Building for Existing SCs	2022-24	46.00		55.00	46.00		46.00	0.00	9.00
123	Koraput	Bobia	SC	New Building for Existing SCs	2022-24	46.00		55.00	46.00		46.00	0.00	9.00
124	Koraput	Chandbeda	SC	New Building for Existing SCs	2022-24	46.00		55.00	46.00		46.00	18.40	9.00
125	Koraput	Dasmantpur	SC	New Building for Existing SCs	2022-24	46.00		55.00	46.00		46.00	17.70	9.00
126	Koraput	Deopattangi	SC	New Building for Existing SCs	2022-24	46.00		55.00	46.00		46.00		9.00
127	Koraput	Dunmbaguda	SC	New Building for Existing SCs	2022-24	46.00		55.00	46.00		46.00	0.00	9.00
128	Koraput	Gadapadar	SC	New Building for Existing SCs	2022-24	46.00		55.00	46.00		46.00	0.00	9.00
129	Koraput	Girila	SC	New Building for Existing SCs	2022-24	46.00		55.00	46.00		46.00	0.00	9.00
130	Koraput	Kaligaon	SC	New Building for Existing SCs	2022-24	46.00		55.00	46.00		46.00		9.00
131	Koraput	Kanagam	SC	New Building for Existing SCs	2022-24	46.00		55.00	46.00		46.00	0.00	9.00
132	Koraput	Kanti	SC	New Building for Existing SCs	2022-24	46.00		55.00	46.00		46.00	0.00	9.00
133	Koraput	Kathapada	SC	New Building for Existing SCs	2022-24	46.00		55.00	46.00		46.00	0.00	9.00
134	Koraput	Kebidi	SC	New Building for Existing SCs	2022-24	46.00		55.00	46.00		46.00	0.00	9.00
135	Koraput	Kendar	SC	New Building for Existing SCs	2022-24	46.00		55.00	46.00		46.00	0.00	9.00
136	Koraput	Konga	SC	New Building for Existing SCs	2022-24	46.00		55.00	46.00		46.00	0.00	9.00
137	Koraput	Kumbhariput	SC	New Building for Existing SCs	2022-24	46.00		55.00	46.00		46.00	0.00	9.00
138	Koraput	Kumuli	SC	New Building for Existing SCs	2022-24	46.00		55.00	46.00		46.00	0.00	9.00
139	Koraput	Limbaguda	SC	New Building for Existing SCs	2022-24	46.00		55.00	46.00		46.00	22.00	9.00
140	Koraput	Malingjodi	SC	New Building for Existing SCs	2022-24	46.00		55.00	46.00		46.00	11.34	9.00

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141	Koraput	Mujanga	SC	New Building for Existing SCs	2022-24	46.00		55.00	46.00		46.00	0.00	9.00
142	Koraput	Munja	SC	New Building for Existing SCs	2022-24	46.00		55.00	46.00		46.00	0.00	9.00
143	Koraput	Nuagaon	SC	New Building for Existing SCs	2022-24	46.00		55.00	46.00		46.00	0.00	9.00
144	Koraput	Parjakubadi	SC	New Building for Existing SCs	2022-24	46.00		55.00	46.00		46.00	0.00	9.00
145	Koraput	Rgirliguma	SC	New Building for Existing SCs	2022-24	46.00		55.00	46.00		46.00	0.00	9.00
146	Koraput	Sanaparia	SC	New Building for Existing SCs	2022-24	46.00		55.00	46.00		46.00	0.00	9.00
147	Koraput	Sekram	SC	New Building for Existing SCs	2022-24	46.00		55.00	46.00		46.00	0.00	9.00
148	Koraput	Semalaguda	SC	New Building for Existing SCs	2022-24	46.00		55.00	46.00		46.00	21.89	9.00
149	Koraput	Umuri	SC	New Building for Existing SCs	2022-24	46.00		55.00	46.00		46.00		9.00
150	Mayurbhanj	Agual	SC	New Building for Existing SCs	2022-24	46.00	50.00		46.00		46.00	40.00	4.00
151	Mayurbhanj	Ambadali	SC	New Building for Existing SCs	2022-24	46.00	50.00		46.00		46.00	25.00	4.00
152	Mayurbhanj	B Kata	SC	New Building for Existing SCs	2022-24	46.00	50.00		46.00		46.00	27.53	4.00
153	Mayurbhanj	Badbantha	SC	New Building for Existing SCs	2022-24	46.00	49.00		46.00		46.00	32.00	3.00
154	Mayurbhanj	Baddeuli	SC	New Building for Existing SCs	2022-24	46.00	49.00		46.00		46.00	40.53	3.00
155	Mayurbhanj	Badkasira	SC	New Building for Existing SCs	2022-24	46.00	49.00		46.00		46.00	48.44	3.00
156	Mayurbhanj	Baiganbadia	SC	New Building for Existing SCs	2022-24	46.00	50.00		46.00		46.00	21.10	4.00
157	Mayurbhanj	Bala	SC	New Building for Existing SCs	2022-24	46.00	49.00		46.00		46.00	42.26	3.00
158	Mayurbhanj	Bangra	SC	New Building for Existing SCs	2022-24	46.00	50.00		46.00		46.00	22.00	4.00
159	Mayurbhanj	Bankati	SC	New Building for Existing SCs	2022-24	46.00	49.00		46.00		46.00	30.37	3.00
160	Mayurbhanj	Barajiani	SC	New Building for Existing SCs	2022-24	46.00	49.00		46.00		46.00	27.05	3.00
161	Mayurbhanj	Basantapur	SC	New Building for Existing SCs	2022-24	46.00	50.00	60.49	46.00		46.00		14.49
162	Mayurbhanj	Batpalsa	SC	New Building for Existing SCs	2022-24	46.00	49.00		46.00		46.00	20.19	3.00
163	Mayurbhanj	Baunsnali	SC	New Building for Existing SCs	2022-24	46.00	49.00		46.00		46.00	38.44	3.00
164	Mayurbhanj	Bautibeda	SC	New Building for Existing SCs	2022-24	46.00	49.00		46.00		46.00	40.53	3.00
165	Mayurbhanj	Beldiha	SC	New Building for Existing SCs	2022-24	46.00	50.00		46.00		46.00	18.44	4.00
166	Mayurbhanj	Bhalkichua	SC	New Building for Existing SCs	2022-24	46.00	49.00		46.00		46.00	24.09	3.00
167	Mayurbhanj	Bhandan	SC	New Building for Existing SCs	2022-24	46.00	49.00		46.00		46.00	48.44	3.00
168	Mayurbhanj	Bhimda	SC	New Building for Existing SCs	2022-24	46.00	50.00		46.00		46.00	50.00	4.00

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169	Mayurbhanj	Bhuasuni	SC	New Building for Existing SCs	2022-24	46.00	49.00		46.00		46.00	27.68	3.00
170	Mayurbhanj	Budhikhamari	SC	New Building for Existing SCs	2022-24	46.00	49.00		46.00		46.00		3.00
171	Mayurbhanj	Chadheibhol	SC	New Building for Existing SCs	2022-24	46.00	49.00		46.00		46.00	40.53	3.00
172	Kendujhar	Chandabila	SC	New Building for Existing SCs	2022-24	46.00	50.00		46.00		46.00	23.00	4.00
173	Mayurbhanj	Chandanpur	SC	New Building for Existing SCs	2022-24	46.00	49.00		46.00		46.00	27.49	3.00
174	Mayurbhanj	Chelia B	SC	New Building for Existing SCs	2022-24	46.00	50.00		46.00		46.00	50.00	4.00
175	Mayurbhanj	Chheligoduli	SC	New Building for Existing SCs	2022-24	46.00	49.00		46.00		46.00	38.44	3.00
176	Mayurbhanj	Chuhat	SC	New Building for Existing SCs	2022-24	46.00	50.00		46.00		46.00	37.50	4.00
177	Mayurbhanj	Dahikuti	SC	New Building for Existing SCs	2022-24	46.00	50.00		46.00		46.00	25.00	4.00
178	Mayurbhanj	Demphauda	SC	New Building for Existing SCs	2022-24	46.00	50.00		46.00		46.00	50.00	4.00
179	Mayurbhanj	Deokundi	SC	New Building for Existing SCs	2022-24	46.00	49.00		46.00		46.00	16.00	3.00
180	Mayurbhanj	Dewanbahali	SC	New Building for Existing SCs	2022-24	46.00	50.00		46.00		46.00	12.25	4.00
181	Mayurbhanj	Dhalabani	SC	New Building for Existing SCs	2022-24	46.00	49.00		46.00		46.00	48.44	3.00
182	Mayurbhanj	Dhanputa	SC	New Building for Existing SCs	2022-24	46.00	50.00		46.00		46.00	31.48	4.00
183	Mayurbhanj	Dhobanisol	SC	New Building for Existing SCs	2022-24	46.00	49.00		46.00		46.00	36.10	3.00
184	Mayurbhanj	Digarastia	SC	New Building for Existing SCs	2022-24	46.00	50.00	60.49	46.00		46.00		14.49
185	Mayurbhanj	Dudhiani	SC	New Building for Existing SCs	2022-24	46.00	49.00		46.00		46.00	36.84	3.00
186	Mayurbhanj	Dudhiasole	SC	New Building for Existing SCs	2022-24	46.00	50.00		46.00		46.00	21.05	4.00
187	Mayurbhanj	Durgapur	SC	New Building for Existing SCs of Badaseki Block	2022-24	46.00	50.00		46.00		46.00	30.37	4.00
188	Mayurbhanj	Durgapur	SC	New Building for Existing SCs of Dataneti Block	2022-24	46.00	50.00		46.00		46.00	14.50	4.00
189	Mayurbhanj	Ektali	SC	New Building for Existing SCs	2022-24	46.00	49.00		46.00		46.00	29.05	3.00
190	Mayurbhanj	Gaddaulia	SC	New Building for Existing SCs	2022-24	46.00	50.00		46.00		46.00	30.00	4.00
191	Mayurbhanj	Gadsimilipal	SC	New Building for Existing SCs	2022-24	46.00	49.00		46.00		46.00	48.44	3.00
192	Mayurbhanj	Ghatkuanri	SC	New Building for Existing SCs	2022-24	46.00	49.00		46.00		46.00	25.00	3.00
193	Mayurbhanj	Golagadia	SC	New Building for Existing SCs	2022-24	46.00	50.00		46.00		46.00	20.15	4.00
194	Mayurbhanj	Gopinathpur	SC	New Building for Existing SCs	2022-24	46.00	49.00		46.00		46.00	22.51	3.00
195	Mayurbhanj	Gourachandrapur	SC	New Building for Existing SCs	2022-24	46.00	50.00		46.00		46.00	12.00	4.00
196	Mayurbhanj	Gudialbandh	SC	New Building for Existing SCs	2022-24	46.00	50.00		46.00		46.00	50.00	4.00

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Sl. No.	Name of the District	Name of the Facility	Type of Facility	Name of the work	Year of Sanction of works	Total Project Cost approved (in Rs. Lakhs)	Revised cost in 2024-26 (In lakh)	Revised cost in 2026-27 (In lakh)	Amount Sanctioned till 2025-26 (Rs in Lakh)	Approved in Supplement ary PIP 25-26	Total Approval	Expenditure till August 2025 (Rs in Lakhs)	Fund Approved in 2026-27 (Rs. In Lakhs)
197	Mayurbhanj	Haripur	SC	New Building for Existing SCs	2022-24	46.00	50.00		46.00		46.00	23.00	4.00
198	Mayurbhanj	Jadida	SC	New Building for Existing SCs	2022-24	46.00	50.00		46.00		46.00	27.00	4.00
199	Mayurbhanj	Jadunathpur	SC	New Building for Existing SCs	2022-24	46.00	50.00		46.00		46.00	44.00	4.00
200	Mayurbhanj	Jaypur	SC	New Building for Existing SCs	2022-24	46.00	49.00		46.00		46.00	38.80	3.00
201	Mayurbhanj	Kailashchandra	SC	New Building for Existing SCs	2022-24	46.00	50.00		46.00		46.00		4.00
202	Mayurbhanj	Kainfulia	SC	New Building for Existing SCs	2022-24	46.00	50.00		46.00		46.00	49.50	4.00
203	Mayurbhanj	Kalabadia	SC	New Building for Existing SCs	2022-24	46.00	49.00		46.00		46.00	36.68	3.00
204	Mayurbhanj	Kamarpal	SC	New Building for Existing SCs	2022-24	46.00	50.00		46.00		46.00	21.00	4.00
205	Mayurbhanj	Karanjia	SC	New Building for Existing SCs	2022-24	46.00	50.00		46.00		46.00	34.00	4.00
206	Mayurbhanj	Kasiabeda	SC	New Building for Existing SCs	2022-24	46.00	49.00		46.00		46.00	38.80	3.00
207	Mayurbhanj	Kathabaria	SC	New Building for Existing SCs	2022-24	46.00	49.00		46.00		46.00	48.44	3.00
208	Mayurbhanj	Kathsirshi	SC	New Building for Existing SCs	2022-24	46.00	50.00		46.00		46.00	21.00	4.00
209	Mayurbhanj	Khanta	SC	New Building for Existing SCs	2022-24	46.00	49.00		46.00		46.00	30.00	3.00
210	Mayurbhanj	Khanua	SC	New Building for Existing SCs	2022-24	46.00	50.00		46.00		46.00	50.00	4.00
211	Mayurbhanj	KM Kota	SC	New Building for Existing SCs	2022-24	46.00	49.00		46.00		46.00	20.36	3.00
212	Mayurbhanj	Kochilakhunta	SC	New Building for Existing SCs	2022-24	46.00	50.00		46.00		46.00	50.00	4.00
213	Mayurbhanj	Kuabuda	SC	New Building for Existing SCs	2022-24	46.00	50.00		46.00		46.00	21.12	4.00
214	Mayurbhanj	Kuliposi	SC	New Building for Existing SCs	2022-24	46.00	49.00		46.00		46.00	40.81	3.00
215	Mayurbhanj	Kurulia	SC	New Building for Existing SCs	2022-24	46.00	49.00		46.00		46.00	30.00	3.00
216	Mayurbhanj	Kusumi	SC	New Building for Existing SCs	2022-24	46.00	49.00		46.00		46.00	38.00	3.00
217	Mayurbhanj	Laxmiposi	SC	New Building for Existing SCs	2022-24	46.00	50.00		46.00		46.00	32.51	4.00
218	Mayurbhanj	Mahubhandar	SC	New Building for Existing SCs	2022-24	46.00	49.00		46.00		46.00	40.53	3.00
219	Mayurbhanj	Majhigaon	SC	New Building for Existing SCs	2022-24	46.00	49.00	65.00	46.00		46.00		19.00
220	Mayurbhanj	Manada	SC	New Building for Existing SCs	2022-24	46.00	49.00		46.00		46.00	48.44	3.00
221	Mayurbhanj	Matiagarh	SC	New Building for Existing SCs	2022-24	46.00	49.00		46.00		46.00	18.50	3.00
222	Mayurbhanj	Mundathakura	SC	New Building for Existing SCs	2022-24	46.00	49.00		46.00		46.00	22.95	3.00
223	Mayurbhanj	Nischinta	SC	New Building for Existing SCs	2022-24	46.00	49.00		46.00		46.00	13.20	3.00
224	Mayurbhanj	Nitei	SC	New Building for Existing SCs	2022-24	46.00	49.00		46.00		46.00	38.28	3.00

Revalidation of Civil Construction under NHM PIP Works approved during 2022-24, Odisha (SC)

Sl. No.	Name of the District	Name of the Facility	Type of Facility	Name of the work	Year of Sanction of works	Total Project Cost approved (in Rs. Lakhs)	Revised cost in 2024-26 (In lakh)	Revised cost in 2026-27 (In lakh)	Amount Sanctioned till 2025-26 (Rs in Lakh)	Approved in Supplement ary PIP 25-26	Total Approval	Expenditure till August 2025 (Rs in Lakhs)	Fund Approved in 2026-27 (Rs. In Lakhs)
225	Mayurbhanj	Parulia	SC	New Building for Existing SCs	2022-24	46.00	50.00		46.00		46.00	21.00	4.00
226	Mayurbhanj	Pathuri	SC	New Building for Existing SCs	2022-24	46.00	49.00		46.00		46.00	21.81	3.00
227	Mayurbhanj	Podagarh	SC	New Building for Existing SCs	2022-24	46.00	49.00		46.00		46.00	48.44	3.00
228	Mayurbhanj	Pratappur	SC	New Building for Existing SCs	2022-24	46.00	50.00		46.00		46.00	25.00	4.00
229	Mayurbhanj	Pundida	SC	New Building for Existing SCs	2022-24	46.00	49.00		46.00		46.00	40.53	3.00
230	Mayurbhanj	Raipal	SC	New Building for Existing SCs	2022-24	46.00	50.00		46.00		46.00	22.32	4.00
231	Mayurbhanj	Rodhang	SC	New Building for Existing SCs	2022-24	46.00	49.00		46.00		46.00	44.69	3.00
232	Mayurbhanj	Sandundu	SC	New Building for Existing SCs	2022-24	46.00	49.00		46.00		46.00	32.89	3.00
233	Mayurbhanj	Sangan	SC	New Building for Existing SCs	2022-24	46.00	49.00		46.00		46.00	39.11	3.00
234	Mayurbhanj	Sanpurunapani	SC	New Building for Existing SCs	2022-24	46.00	49.00	65.00	46.00		46.00		19.00
235	Mayurbhanj	Sialighaty	SC	New Building for Existing SCs	2022-24	46.00	50.00		46.00		46.00	50.00	4.00
236	Mayurbhanj	Singatia	SC	New Building for Existing SCs	2022-24	46.00	50.00		46.00		46.00	25.20	4.00
237	Mayurbhanj	Sukhilahar	SC	New Building for Existing SCs	2022-24	46.00	50.00		46.00		46.00	25.00	4.00
238	Mayurbhanj	Takatpur	SC	New Building for Existing SCs	2022-24	46.00	50.00		46.00		46.00	22.00	4.00
239	Mayurbhanj	Tentuligaon	SC	New Building for Existing SCs	2022-24	46.00	50.00		46.00		46.00	26.36	4.00
240	Mayurbhanj	Ufalgadia	SC	New Building for Existing SCs	2022-24	46.00	50.00		46.00		46.00	10.50	4.00
241	Mayurbhanj	Uthaninuaaon	SC	New Building for Existing SCs	2022-24	46.00	50.00		46.00		46.00	28.00	4.00
242	Nabarangpur	Bada Olma	SC	New Building for Existing SCs	2022-24	46.00		55.00	46.00		46.00		9.00
243	Nayagada	Barakoli	SC	New Building for Existing SCs	2022-24	46.00		55.00	46.00		46.00	15.66	9.00
244	Nayagada	Bodasa	SC	New Building for Existing SCs	2022-24	46.00		55.00	46.00		46.00	26.60	9.00
245	Nayagada	Haripur-	SC	New Building for Existing SCs	2022-24	46.00		50.60	46.00		46.00	13.80	4.60
246	Nayagada	Kishoreprasad	SC	New Building for Existing SCs	2022-24	46.00		55.00	46.00		46.00		9.00
247	Nayagada	Machhipada	SC	New Building for Existing SCs	2022-24	46.00		50.60	46.00		46.00	45.54	4.60
248	Nayagada	Natugaon	SC	New Building for Existing SCs	2022-24	46.00		50.60	46.00		46.00	13.80	4.60
249	Nayagada	Panusahipatna	SC	New Building for Existing SCs	2022-24	46.00		55.00	46.00		46.00	15.37	9.00
250	Nayagada	Surukabadi	SC	New Building for Existing SCs	2022-24	46.00		50.60	46.00		46.00	20.25	4.60
251	Puri	Alasahi	SC	New Building for Existing SCs	2022-24	46.00	46.50		46.00		46.00		0.50
252	Puri	Analjodi	SC	New Building for Existing SCs	2022-24	46.00	47.50		46.00		46.00	47.50	1.50

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Sl. No.	Name of the District	Name of the Facility	Type of Facility	Name of the work	Year of Sanction of works	Total Project Cost approved (in Rs. Lakhs)	Revised cost in 2024-26 (In lakh)	Revised cost in 2026-27 (In lakh)	Amount Sanctioned till 2025-26 (Rs in Lakh)	Approved in Supplement ary PIP 25-26	Total Approval	Expenditure till August 2025 (Rs in Lakhs)	Fund Approved in 2026-27 (Rs. In Lakhs)
253	Puri	Ansala	SC	New Building for Existing SCs	2022-24	46.00	47.50		46.00		46.00	25.60	1.50
254	Puri	Balabhadrapur	SC	New Building for Existing SCs	2022-24	46.00	47.00	47.50	46.00		46.00		1.50
255	Puri	Bangurigaon	SC	New Building for Existing SCs	2022-24	46.00	47.50		46.00		46.00	25.60	1.50
256	Puri	Barakera	SC	New Building for Existing SCs	2022-24	46.00	46.51		46.00		46.00	7.50	0.51
257	Puri	Bindhana	SC	New Building for Existing SCs	2022-24	46.00	47.50		46.00		46.00	30.00	1.50
258	Puri	Chitraswari	SC	New Building for Existing SCs	2022-24	46.00	47.50		46.00		46.00	23.50	1.50
259	Puri	Dhanakera	SC	New Building for Existing SCs	2022-24	46.00	47.50		46.00		46.00		1.50
260	Puri	Edvans	SC	New Building for Existing SCs	2022-24	46.00	46.50		46.00		46.00	10.00	0.50
261	Puri	Gadamurgasira	SC	New Building for Existing SCs	2022-24	46.00	46.82		46.00		46.00		0.82
262	Puri	Gambharipada	SC	New Building for Existing SCs	2022-24	46.00	47.50		46.00		46.00	38.16	1.50
263	Puri	Jaunli Pokhari	SC	New Building for Existing SCs	2022-24	46.00	47.50		46.00		46.00	32.69	1.50
264	Puri	Kanpur	SC	New Building for Existing SCs	2022-24	46.00	46.76		46.00		46.00	27.50	0.76
265	Puri	Malud	SC	New Building for Existing SCs	2022-24	46.00	47.50		46.00		46.00	29.78	1.50
266	Puri	Motari	SC	New Building for Existing SCs	2022-24	46.00	46.92		46.00		46.00	20.00	0.92
267	Puri	Nuagaon.	SC	New Building for Existing SCs	2022-24	46.00	46.51		46.00		46.00	46.51	0.51
268	Puri	Olardi	SC	New Building for Existing SCs	2022-24	46.00	47.50		46.00		46.00		1.50
269	Puri	Rua	SC	New Building for Existing SCs	2022-24	46.00	47.80		46.00		46.00	43.94	1.80
270	Puri	Satarash	SC	New Building for Existing SCs	2022-24	46.00	47.50		46.00		46.00	30.72	1.50
271	Puri	Sauria	SC	New Building for Existing SCs	2022-24	46.00	46.48		46.00		46.00	20.00	0.48
272	Puri	Siso	SC	New Building for Existing SCs	2022-24	46.00	47.50		46.00		46.00	47.50	1.50
273	Puri	Telengapada	SC	New Building for Existing SCs	2022-24	46.00	47.50		46.00		46.00	47.50	1.50
274	Rayagada	Agula	SC	New Building for Existing SCs	2022-24	46.00		55.00	46.00		46.00	4.00	9.00
275	Rayagada	Bairagi Halwa	SC	New Building for Existing SCs	2022-24	46.00		55.00	46.00		46.00	8.21	9.00
276	Rayagada	Bhairabagada	SC	New Building for Existing SCs	2022-24	46.00		55.00	46.00		46.00	6.00	9.00
277	Rayagada	Chalkamba	SC	New Building for Existing SCs	2022-24	46.00		55.00	46.00		46.00	9.00	9.00
278	Rayagada	D Korala	SC	New Building for Existing SCs	2022-24	46.00		55.00	46.00		46.00	8.00	9.00
279	Rayagada	Dunduli	SC	New Building for Existing SCs	2022-24	46.00		55.00	46.00		46.00	13.00	9.00
280	Rayagada	Hanumantpur	SC	New Building for Existing SCs	2022-24	46.00		55.00	46.00		46.00	24.00	9.00

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Sl. No.	Name of the District	Name of the Facility	Type of Facility	Name of the work	Year of Sanction of works	Total Project Cost approved (in Rs. Lakhs)	Revised cost in 2024-26 (In lakh)	Revised cost in 2026-27 (In lakh)	Amount Sanctioned till 2025-26 (Rs in Lakh)	Approved in Supplementary PIP 25-26	Total Approval	Expenditure till August 2025 (Rs in Lakhs)	Fund Approved in 2026-27 (Rs. In Lakhs)
281	Rayagada	Indupur	SC	New Building for Existing SCs	2022-24	46.00		55.00	46.00		46.00	9.00	9.00
282	Rayagada	Jarapa	SC	New Building for Existing SCs	2022-24	46.00		55.00	46.00		46.00	24.00	9.00
283	Rayagada	Jhigidi	SC	New Building for Existing SCs	2022-24	46.00		55.00	46.00		46.00	14.87	9.00
284	Rayagada	Jhorodi	SC	New Building for Existing SCs	2022-24	46.00		55.00	46.00		46.00	16.50	9.00
285	Rayagada	Kailashpur	SC	New Building for Existing SCs	2022-24	46.00		55.00	46.00		46.00	9.00	9.00
286	Rayagada	Karubai	SC	New Building for Existing SCs	2022-24	46.00		55.00	46.00		46.00	36.00	9.00
287	Rayagada	Korapa	SC	New Building for Existing SCs	2022-24	46.00		55.00	46.00		46.00	10.00	9.00
288	Rayagada	Omidingi	SC	New Building for Existing SCs	2022-24	46.00		55.00	46.00		46.00	4.00	9.00
289	Rayagada	Penta	SC	New Building for Existing SCs	2022-24	46.00		55.00	46.00		46.00	14.84	9.00
290	Sambalpur	Sindurpank	SC	New Building for Existing SCs	2022-24	46.00		50.60	46.00		46.00	0.00	4.60
			Grand Total			13340.00	7083.26	8133.96	13340.00	9.42	13349.42	6761.67	1867.80

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Sl. No.	Name of the District	Name of the Block	Name of the Facility	Type of the Facility	Total Project Cost (in Rs. Lakhs)	Total Approved Amount till 2024-26	Revised Project Cost (in Rs. Lakhs)	Fund Approved in 2026-27 (Rs. In Lakhs)
1	Anugola	R.K.Nagar	Badagovindapur	SC	55	55	65	10
2	Anugola	Kaniha	Badagunduri	SC	55	55	65	10
3	Anugola	Banarpal	Badakerjang	SC	55	55	65	10
4	Anugola	Talcher	Dharampur	SC	55	55	65	10
5	Anugola	Athamallik	Kaintragarh	SC	55	55	65	10
6	Anugola	Anugola	Shradhapur B	SC	55	55	65	10
7	Anugola	Athamallik	Thakurhgarh	SC	55	55	65	10
8	Balangir	Deogaon	Arjunpur	SC	55	55	60.30	5.3
9	Balangir	Turekela	Badbanki	SC	55	55	60.22	5.22
10	Balangir	Khaprakhhol	Bagmunda	SC	55	55	60.10	5.1
11	Balangir	Deogaon	Bandhpara	SC	55	55	60.39	5.39
12	Balangir	Titilagarh	Banjipadar	SC	55	55	60.01	5.01
13	Balangir	Loisingha	Budhipadar	SC	55	55	60.06	5.06
14	Balangir	Muribahal	Chalki	SC	55	55	60.05	5.05
15	Balangir	Bangomunda	Chandotora	SC	55	55	59.91	4.91
16	Balangir	Turekela	Chaulsukha	SC	55	55	60.22	5.22
17	Balangir	Patnagarh	Gangasagar	SC	55	55	60.10	5.1
18	Balangir	Patnagarh	Jhankarpali	SC	55	55	60.10	5.1
19	Balangir	Bangomunda	Jharial	SC	55	55	60.17	5.17
20	Balangir	Turekela	Jharni	SC	55	55	60.24	5.24
21	Balangir	Saintala	Kandhkelgaon	SC	55	55	60.10	5.1
22	Balangir	Belpada	Kanut	SC	55	55	60.10	5.1
23	Balangir	Saintala	Karamtala	SC	55	55	60.10	5.1
24	Balangir	Bangomunda	Khaira	SC	55	55	60.17	5.17
25	Balangir	Khaprakhhol	Sauntpur	SC	55	55	60.26	5.26
26	Balangir	Titilagarh	Kursud	SC	55	55	60.25	5.25
27	Baleshwar	Baliapal	Asti	SC	55	55	62.5	7.5
28	Baleshwar	Jaleswar	Baradiha	SC	55	55	62.5	7.5

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Sl. No.	Name of the District	Name of the Block	Name of the Facility	Type of the Facility	Total Project Cost (in Rs. Lakhs)	Total Approved Amount till 2024-26	Revised Project Cost (in Rs. Lakhs)	Fund Approved in 2026-27 (Rs. In Lakhs)
29	Baleshwar	Jaleswar	Bartana	SC	55	55	62.5	7.5
30	Baleshwar	Remuna	Bhuinpada	SC	55	55	60.42	5.42
31	Baleshwar	Baliapal	Chaumukh	SC	55	55	62.5	7.5
32	Baleshwar	Bhogarai	Dehurda	SC	55	55	62.5	7.5
33	Baleshwar	Remuna	Durgadevi	SC	55	55	59.46	4.46
34	Baleshwar	Bhogarai	Fulbani	SC	55	55	62.5	7.5
35	Baleshwar	Bhogarai	Kalehi	SC	55	55	62.5	7.5
36	Baleshwar	Bhogarai	Kusuda	SC	55	55	62.5	7.5
37	Baleshwar	Remuna	Makanda	SC	55	55	60.23	5.23
38	Baleshwar	Soro	Mangalpur	SC	55	55	60.42	5.42
39	Baleshwar	Bhogarai	Nahara	SC	55	55	62.5	7.5
40	Baleshwar	Bhogarai	Putina	SC	55	55	62.5	7.5
41	Baleshwar	Bhogarai	Rankotha	SC	55	55	62.5	7.5
42	Baleshwar	Baliapal	Ratai	SC	55	55	62.5	7.5
43	Boudh	Harbhanga	Charichak	SC	55	55	65	10
44	Boudh	Boudh	Gochhapada	SC	55	55	65	10
45	Boudh	Harbhanga	Harbhanga	SC	55	55	65	10
46	Boudh	Kantamal	Kantamal	SC	55	55	65	10
47	Boudh	Boudh	Tilpanga	SC	55	55	65	10
48	Kataka	Tigiria	Bindhanima	SC	55	55	65	10
49	Kataka	Narasinghpur	Ekdal	SC	55	55	65	10
50	Kataka	Baramba	Gopinathpur	SC	55	55	65	10
51	Kataka	Badamba	Jhajia	SC	55	55	65	10
52	Kataka	Badamba	Maniabandha	SC	55	55	65	10
53	Kataka	Narasinghpur	Narsinghpur	SC	55	55	65	10
54	Debagada	Tileibani	Badchhapal	SC	55	55	65	10
55	Debagada	Barkote	Barkote	SC	55	55	65	10
56	Debagada	Barkote	Basalai	SC	55	55	65	10

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57	Debagada	Reamal	Chadheimara	SC	55	55	65	10
58	Debagada	Reamal	Chhatabar	SC	55	55	65	10
59	Debagada	Tileibani	Dimrikuda	SC	55	55	65	10
60	Debagada	Barkote	Kaliaapal	SC	55	55	65	10
61	Debagada	Tileibani	Kendeijuri	SC	55	55	65	10
62	Debagada	Reamal	Rengalbeda	SC	55	55	65	10
63	Ganjam	Ganjam	Palanga	SC	55	55	65	10
64	Jagatsinghpur	Biridi	Arana	SC	55	55	65	10
65	Jagatsinghpur	Kujanga	Atharabanki	SC	55	55	65	10
66	Jagatsinghpur	Balikuda	Balikuda_Mc	SC	55	55	65	10
67	Jagatsinghpur	Balikuda	Barmundali	SC	55	55	65	10
68	Jagatsinghpur	Naugaon	Derik	SC	55	55	65	10
69	Jagatsinghpur	Erasama	Erasama MC	SC	55	55	65	10
70	Jagatsinghpur	Kujanga	Pandua	SC	55	55	65	10
71	Jagatsinghpur	Tirtol	Kanakpur	SC	55	55	65	10
72	Jagatsinghpur	Tirtol	Kanimul	SC	55	55	65	10
73	Jagatsinghpur	Tirtol	Kolara	SC	55	55	65	10
74	Jagatsinghpur	Tirtol	Krishnandapaur	SC	55	55	65	10
75	Jagatsinghpur	Kujanga	Kujanga MC	SC	55	55	65	10
76	Jagatsinghpur	Balikuda	Borikina	SC	55	55	65	10
77	Jagatsinghpur	Jagatsinghpur	Mandasahi_Mc	SC	55	55	65	10
78	Jagatsinghpur	Tirtol	Manijanga MC	SC	55	55	65	10
79	Jagatsinghpur	Jagatsinghpur	mundio	SC	55	55	65	10
80	Jagatsinghpur	Kujanga	Nuagarh	SC	55	55	65	10
81	Jagatsinghpur	Erasama	Olara	SC	55	55	65	10
82	Jharsuguda	Lakhanpur	Sarandamal	SC	55	55	65	10
83	Kendujhar	Sadar	Jharbelda	SC	55	55	65	10
84	Kendujhar	Sadar	Bodapalasa	SC	55	55	65	10

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85	Kendujhar	Harichandanpur	Badapalaspal	SC	55	55	65	10
86	Kendujhar	Harichandanpur	Budhakhamana	SC	55	55	65	10
87	Kendujhar	Harichandanpur	Dhagotho	SC	55	55	65	10
88	Kendujhar	Harichandanpur	Raikala	SC	55	55	65	10
89	Kendujhar	Ghasipura	GB Goda	SC	55	55	65	10
90	Kendujhar	Jhumpura	Gumura	SC	55	55	65	10
91	Kendujhar	Joda	Jalahari	SC	55	55	65	10
92	Kendujhar	Jhumpura	Khuntapada	SC	55	55	65	10
93	Kendujhar	Banspal	Kumundi	SC	55	55	65	10
94	Kendujhar	Hatadihi	Orali	SC	55	55	65	10
95	Kendujhar	Harichandanpur	Pitapiti	SC	55	55	65	10
96	Kendujhar	Telkoi	Raisuan	SC	55	55	65	10
97	Kendujhar	Joda	Rugudi	SC	55	55	65	10
98	Kendujhar	Ghasipura	Saladei	SC	55	55	65	10
99	Kendujhar	Telkoi	Sibanarayanpurguda	SC	55	55	65	10
100	Kendujhar	Harichandanpur	Tambahara	SC	55	55	65	10
101	Kendujhar	Champua	Parjanpur	SC	55	55	65	10
102	Kendujhar	Sadar	Bauripada	SC	55	55	65	10
103	Khordha	Tangi	Achyutpur	SC	55	55	65	10
104	Khordha	Bolagarh	Arakhapali	SC	55	55	65	10
105	Khordha	Chilika	Badakul	SC	55	55	65	10
106	Khordha	Balianta	Balakati_Mc	SC	55	55	65	10
107	Khordha	Balipatna	Balipatna_Mc	SC	55	55	65	10
108	Khordha	Chilika	Balugaon MC	SC	55	55	65	10
109	Khordha	Bolagarh	Bankoi_Mc	SC	55	55	65	10
110	Khordha	Banapur	Bhimpur	SC	55	55	65	10
111	Khordha	Balianta	Bhingarpur	SC	55	55	65	10
112	Khordha	Bolagarh	Bolagarh	SC	55	55	65	10

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113	Khordha	Chilika	Chasangara	SC	55	55	65	10
114	Khordha	Chilika	Haripur	SC	55	55	65	10
115	Khordha	Khordha	Kaipadar	SC	55	55	65	10
116	Khordha	Bhubaneswar	Kalyanpur	SC	55	55	65	10
117	Khordha	Bhubaneswar	Mendhasal_Mc	SC	55	55	65	10
118	Khordha	Banapur	Nandapur	SC	55	55	65	10
119	Khordha	Khordha	Narangarh	SC	55	55	65	10
120	Koraput	Semiliguda	Aligaon	sc	55	55	65	10
121	Koraput	Borigumma	Bsingpur	sc	55	55	65	10
122	Koraput	Bandhugaon	Kaberibadi	SC	55	55	65	10
123	Koraput	Laxmipur	Laxmipur	sc	55	55	65	10
124	Koraput	Bandhugaon	Nilabadi	SC	55	55	65	10
125	Malkanagiri	Malkangiri	B.L Pur	SC	55	55	65	10
126	Malkanagiri	Mathili	Bhejaguda	SC	55	55	65	10
127	Malkanagiri	Korukonda	Challanguda	SC	55	55	65	10
128	Malkanagiri	Mathili	Chaulmendi	SC	55	55	65	10
129	Malkanagiri	Mathili	Dalpatiguda	SC	55	55	65	10
130	Malkanagiri	Mathili	Dhungiaput	SC	55	55	65	10
131	Malkanagiri	Malkangiri	Goudaguda	SC	55	55	65	10
132	Malkanagiri	Khairput	Kadamguda	SC	55	55	65	10
133	Malkanagiri	Mathili	Kaliaguda	SC	55	55	65	10
134	Malkanagiri	Mathili	Korapalli	SC	55	55	65	10
135	Malkanagiri	Khairput	Kunmarput	SC	55	55	65	10
136	Malkanagiri	Korukonda	M.V.-109	SC	55	55	65	10
137	Malkanagiri	Malkangiri	M.V-92	SC	55	55	65	10
138	Malkanagiri	Kalimela	Manyamkonda	SC	55	55	65	10
139	Malkanagiri	Podia	Materu	SC	55	55	65	10
140	Malkanagiri	Podia	Motu	SC	55	55	65	10

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141	Malkanagiri	Khairput	Muduliguda	SC	55	55	65	10
142	Malkanagiri	K.Gumma	Muduliguda	SC	55	55	65	10
143	Malkanagiri	K.Gumma	Naliguda	SC	55	55	65	10
144	Mayurbhanj	Khunta	Badapather	SC	55	55	65	10
145	Mayurbhanj	Khunta	Bahanada	SC	55	55	65	10
146	Mayurbhanj	Khunta	Dhanapana	SC	55	55	65	10
147	Mayurbhanj	Khunta	Dhanghera	SC	55	55	65	10
148	Mayurbhanj	Kaptipada	Katuria	SC	55	55	65	10
149	Mayurbhanj	Khunta	Mahuldihi	SC	55	55	65	10
150	Mayurbhanj	Khunta	Tikerpada	SC	55	55	65	10
151	Mayurbhanj	G.B Nager	Vandagaon	SC	55	55	65	10
152	Nabarangpur	tentulikhunti	Amlabhata	Sc	55	55	65	10
153	Nabarangpur	Chandahandi	Anabeda	SC	55	55	65	10
154	Nabarangpur	Tentulikhunti	Anchalaguma	SC	55	55	65	10
155	Nabarangpur	Kosagumuda	Asanga	SC	55	55	65	10
156	Nabarangpur	Kosagumuda	Bada-amada	SC	55	55	65	10
157	Nabarangpur	Umerkote	Bada-bharandi	SC	55	55	65	10
158	Nabarangpur	Umerkote	Bakada	SC	55	55	65	10
159	Nabarangpur	Sanomosigam	Basini	Sc	55	55	65	10
160	Nabarangpur	Chandahandi	Beheramunda	SC	55	55	65	10
161	Nabarangpur	Jharigam	Belgam	SC	55	55	65	10
162	Nabarangpur	Tentulikhunti	Pujariguda	SC	55	55	65	10
163	Nabarangpur	Umerkote	Chachanbeda	SC	55	55	65	10
164	Nabarangpur	Chandahandi	Chandahandi	SC	55	55	65	10
165	Nabarangpur	Sanomosigam	Chatahandi	Sc	55	55	65	10
166	Nabarangpur	Dabugam	Dabugam	SC	55	55	65	10
167	Nabarangpur	Chandahandi	Dalabeda	SC	55	55	65	10
168	Nabarangpur	Nandahandi	Dangarbheja	SC	55	55	65	10

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169	Nabarangpur	Jharigam	Deulakana	SC	55	55	65	10
170	Nabarangpur	Jharigam	Dhodra	SC	55	55	65	10
171	Nayagada	Odagaon	Badagorada	SC	55	55	60.50	5.5
172	Nayagada	Nuagaon	Balanda	SC	55	55	60.50	5.5
173	Nayagada	Nayagada	Baunsiapada	SC	55	55	60.50	5.5
174	Nayagada	Nuagaon	Beruanbari	SC	55	55	60.50	5.5
175	Nayagada	Ranpur	Brajarajpur	SC	55	55	60.50	5.5
176	Nayagada	Gania	Gania MC	SC	55	55	60.50	5.5
177	Nayagada	Daspalla	Ghugudipada	SC	55	55	60.50	5.5
178	Nayagada	Daspalla	Golahandi	SC	55	55	60.50	5.5
179	Nayagada	Odagaon	Goudaput	SC	55	55	60.50	5.5
180	Nayagada	Khandapada	J. Prasad	SC	55	55	60.50	5.5
181	Nayagada	Bhapur	Kainfulia	SC	55	55	60.50	5.5
182	Nayagada	Odagaon	Kesapania	SC	55	55	60.50	5.5
183	Nayagada	Khandapada	Koska	SC	55	55	60.50	5.5
184	Nayagada	Khandapada	Laxmiprasad	SC	55	55	60.50	5.5
185	Nayagada	Ranpur	Majhiakhanda	SC	55	55	60.50	5.5
186	Nayagada	Bhapur	Marada	SC	55	55	60.50	5.5
187	Puri	Pipili	Binayakpur	SC	55	55	65	10
188	Puri	Astaranga	Astaranga	SC	55	55	65	10
189	Puri	Kakatpur	Balidokan	SC	55	55	65	10
190	Puri	GOP	Bedapur	SC	55	55	65	10
191	Puri	GOP	Birtunga	SC	55	55	65	10
192	Puri	Nimapara	Brahamakundi	SC	55	55	65	10
193	Puri	Puri Sadar	Chalisibatia	SC	55	55	65	10
194	Puri	Krushnaprasad	Chilikanuapada	SC	55	55	65	10
195	Puri	sata]yabadi	Gabakunda	SC	55	55	65	10
196	Puri	GOP	Konark	SC	55	55	65	10

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197	Puri	Kakatpur	Kurujanga	SC	55	55	65	10
198	Puri	sata]yabadi	Mahura	SC	55	55	65	10
199	Rayagada	Ramanaguda	Parikhiti	sc	55	55	65	10
200	Rayagada	Kasipur	Adajar	SC	55	55	65	10
201	Rayagada	K. Singpur	Aljiniguda	SC	55	55	65	10
202	Rayagada	Rayagada	Amalabhata	SC	55	55	65	10
203	Rayagada	K. Singpur	Bada Bamuniguda	SC	55	55	65	10
204	Rayagada	K. Singpur	Badaduar	SC	55	55	65	10
205	Rayagada	Muniguda	Badamudra	SC	55	55	65	10
206	Rayagada	Kasipur	Badijharana	SC	55	55	65	10
207	Rayagada	Gunupur	Baghasoal	SC	55	55	65	10
208	Rayagada	Padmapur	Bahupadar	SC	55	55	65	10
209	Rayagada	Kasipur	Bankamba	SC	55	55	65	10
210	Rayagada	Kolnara	Bankili	SC	55	55	65	10
211	Rayagada	Kasipur	Bartibali	SC	55	55	65	10
212	Rayagada	Chandrapur	Belamguda	SC	55	55	65	10
213	Rayagada	Bisamakatak	Bethiapada	SC	55	55	65	10
214	Rayagada	Ramanaguda	Bhamini	SC	55	55	65	10
215	Rayagada	Bisamakatak	Bhatapur	SC	55	55	65	10
216	Rayagada	Gunupur	Bhimapur	SC	55	55	65	10
217	Rayagada	Chandrapur	Bijapur	SC	55	55	65	10
218	Sambalpur	Dhankauda	A.Katapali	SC	55	55	65	10
219	Sambalpur	Jujumura	Badasahir	SC	55	55	65	10
220	Sambalpur	Dhankauda	Berhampura	SC	55	55	65	10
221	Sambalpur	Jamankira	Bhojpur	SC	55	55	65	10
222	Sambalpur	Jujumura	Birsingharh	SC	55	55	65	10
223	Sambalpur	Dhankauda	Bisalkhinda - II	SC	55	55	65	10
224	Sambalpur	Kuchinda	Boxama	SC	55	55	65	10

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225	Sambalpur	Dhankauda	Chaurmpur	SC	55	55	65	10
226	Sambalpur	Jujumura	Dangarpada	SC	55	55	65	10
227	Sambalpur	Dhankauda	Dengimocha	SC	55	55	65	10
228	Sambalpur	Maneswar	Dhama	SC	55	55	65	10
229	Sambalpur	Naktideul	Doincha	SC	55	55	65	10
230	Sambalpur	Kuchinda	Gochhara	SC	55	55	65	10
231	Sambalpur	Jujumura	Jujumura	SC	55	55	65	10
232	Sambalpur	Dhankauda	Kainsir	SC	55	55	65	10
233	Sambalpur	Jamankira	Kenadhipa	SC	55	55	65	10
234	Sambalpur	Rengali	Khuntlamal	SC	55	55	65	10
235	Sambalpur	Dhankauda	Kilasama	SC	55	55	65	10
236	Sambalpur	Naktideul	Kisinda	SC	55	55	65	10
237	Sambalpur	Dhankauda	Kudgunderpur	SC	55	55	65	10
238	Sambalpur	Jujumura	Kukudapali	SC	55	55	65	10
239	Sambalpur	Kuchinda	Kuturachuan	SC	55	55	65	10
240	Sambalpur	Kuchinda	Laidaguna	SC	55	55	65	10
241	Sambalpur	Jujumura	Lipinda	SC	55	55	65	10
242	Sambalpur	Jamankira	Mahada	SC	55	55	65	10
243	Sonpur	Sonpur	Babupali	SC	55	55	65	10
244	Sonpur	Sonpur	Badynath	SC	55	55	65	10
245	Sonpur	B.M.Pur	Bahalpadar	SC	55	55	65	10
246	Sonpur	Binika	Bankighiridi	SC	55	55	65	10
247	Sonpur	Dunguripali	Beheramal	SC	55	55	65	10
248	Sonpur	Ullunda	Bidurupali	SC	55	55	65	10
249	Sonpur	Dunguripali	Dunguripali MC	SC	55	55	65	10
250	Sonpur	B.M.Pur	Jatesingha	SC	55	55	65	10
251	Sonpur	Ullunda	Jaunbhaunra	SC	55	55	65	10
252	Sonpur	Ullunda	KALAPATHAR	SC	55	55	65	10

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253	Sonpur	Binika	Mahulpali	SC	55	55	65	10
254	Sonpur	B.M.Pur	Masinapali	SC	55	55	65	10
255	Sonpur	Tarva	Naktikana	SC	55	55	65	10
256	Sonpur	Ullunda	Panchmahala	SC	55	55	65	10
257	Sonpur	Sonpur	Rengali	SC	55	55	65	10
258	Sonpur	Ullunda	Sindhol	SC	55	55	65	10
259	Sonpur	Binika	Sindurpur	SC	55	55	65	10
260	Sonpur	Dunguripali	Tamamura	SC	55	55	65	10
261	Sundaragada	Nuagaon	Badjojoda	SC	55	55	65	10
262	Sundaragada	Balisankara	Balisankara	SC	55	55	65	10
263	Sundaragada	Bonaigarh	Bandhabhuin	SC	55	55	65	10
264	Sundaragada	Gurundia	Banki	SC	55	55	65	10
265	Sundaragada	Lathikata	Beldihi	SC	55	55	65	10
266	Sundaragada	Gurundia	Bijadihi	SC	55	55	65	10
267	Sundaragada	Balisankara	Bondega	SC	55	55	65	10
268	Sundaragada	Gurundia	Boneikela	SC	55	55	65	10
269	Sundaragada	Koira	Chordhara	SC	55	55	65	10
270	Sundaragada	Lephipara	Darlipali	SC	55	55	65	10
271	Sundaragada	Hemgir	Duduka	SC	55	55	65	10
272	Sundaragada	Lephipara	Dumabahal	SC	55	55	65	10
273	Sundaragada	Lahunipara	Fuljhar	SC	55	55	65	10
274	Sundaragada	Kutra	Gairbahal	SC	55	55	65	10
275	Sundaragada	Bonaigarh	Ghosra	SC	55	55	65	10
276	Sundaragada	Lephipara	Gundiadihi	SC	55	55	65	10
277	Sundaragada	Hemgir	Hemgir	SC	55	55	65	10
278	Sundaragada	Gurundia	Jarada	SC	55	55	65	10
279	Sundaragada	Gurundia	Jhaliadihi	SC	55	55	65	10
	Total				22495	22495	17921.38	2576.38

HSS-5_Referral Transport

S.No.	Scheme/ Activity	Approval FY 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
	Total Referral Transport					0.00	
171	Advance Life Saving Ambulances					0.00	Progress: Currently, 866 EMAS ambulances (449 BLS + 411 ALS+6 Boat Ambulances) are operational across the State. • Average Response Time: EMAS - 19 Minutes & 44 Seconds (Target : 20 Minutes) & 108-Janani Express - 22 Minutes & 27 Seconds (Target : 25 Minutes). • Case load: Around 4.27 Cases per Day /Ambulance (EMAS) and around 3300 cases per day for 860 ambulances, 2.5 Cases per Day (Janani) and around 1100 cases per day for 500 ambulances & 6 Cases per month/Per Boat Ambulance. Proposal for 2026-27: Proposed fund support under NHM as per the D.O. No. V.11011/12022- NHM-II of Date 26-10-2022 at the rate of Revised Ambulance unit Cost per month per ALS Ambulance @ Rs.1,58,340/- and @ Rs.1,37,388/- per BLS Ambulance and per Boat Ambulance.
171.1	Emergency ambulance/Dial 108 -ALS	Per ALS ambulance p.a.	1900080	19.00	0	0.00	Ongoing Activity proposed as approved last year Even Though 411 ALS Ambulances are functional in the State, Proposal is given for 92 Ambulances as per Gol norms
172	Basic Life Saving Ambulances					0.00	
172.1	State basic ambulance/Dial 102/Dial 104			0.00		0.00	
172.2	Emergency ambulance/Dial 108 -BLS	Per BLS ambulance p.a.	1648656	16.49	0	0.00	Ongoing Activity proposed as approved last year Current Status/ Progress: Currently, 866 EMAS ambulances (449 BLS + 411 ALS+6 Boat Ambulances) are operational across the State. Out of 866 EMAS fleet , 449 BLS are operational across the State as per Gol norms. So total EMAS fleet size for 2025-26 will be 866 Ambulances (449 BLS + 411 ALS + 6 Boat Ambulances). Proposal 2026-27: As per the D.O No.V.11011/12022- NHM-II of date 26-10-2022, at the rate of revised ambulance unit cost per month is Rs. 1,37,388/- (As approved last year)
172.3	Training/orientation (Ambulance)			0.00		0.00	Outsourced Agency managing 108 Ambulance Services conduct training on periodic Interval to their staff.
173	Patient Transport Vehicle					0.00	
173.1	IEC/BCC activities under Referral transport					-	Budget Proposed under HSS-19 _IEC & Printing _Sl.No.204
173.2	Half yearly State level Review Meeting with Agency field & state Officials , DPMs & State Officials						Not Proposed
173.3	National Mobile Medical Vans (smaller vehicles) and specialised Mobile Medical Units: Recurring grants for POL and others			-		-	Not Proposed
174	Other Ambulances					0.00	

S.No.	Scheme/ Activity	Approval FY 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
174.1	Boat Ambulance	Per boat ambulance p.a.	1648656	16.49	0	0.00	Ongoing Activity Proposed as approved last year Current Status: Currently 6 Boat Ambulances are operational in the four reverine Districts of the State. Budget Proposed for 2026-27 : As per D.O No.V.11011/ 12022- NHM-II of date 26-10-2022, revised fund support under NHM per month of Rs.1,37,388/-, amounting to Rs.98.92 Lakhs Yearly fund support of NHM for both BLS Ambulance /Month & Boat Ambulance / Month is same.
174.2	Bike ambulance			0.00		0.00	Not Proposed
174.3	Call centre-OPEX	Per month	10878446	108.78	0	0.00	Ongoing activity Integrated Call centre : EMAS 1.1 Revised lease rent of space used by call center as per State Govt. rate @Rs.7,89,151/- per month for the space of 12036 sqft. X 12 months = Rs.94.70 lakhs 1.2 Municipal holding tax for the year is approximately Rs.14,08,634/- Budget proposed 2026-27: Rs. 108.78 lakhs (Lease Rent + Municipal holding Tax) Budget Justification : As per the lease agreement signed with IDCO,Bhubaneswar, Odisha, in October, 2024 monthly lease rent will be revised on completion of 3 years.
174.4	Support for replacement of Vehicle/ Equipment (for meeting obligations of existing contract- signed before FY 2020-21, till tenancy of the same)						The required fund shall be met out of State budget
	Total Referral Transport					0.00	

HSS-6_Quality Assurance

S.No.	Scheme/ Activity	Approval FY 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
	Total Quality Assurance					37.65	
175	Quality Assurance Implementation & Mera Aspataal					28.35	NQAS Target: Total DHH-32, SDH-32, CHC-375, UCHC-7, PHC-1296, UPHC-116, HWC-SC-5400 are functional. Till November 2025, DHH-6, CHC-5, PHC-55, UPHC-53, HWC SC-2584 (Total 2703) facilities are NQAS Certified (National & State) out of targeted 2931. FY 2026-27: 16 DHH (45%), 10 SDH(31%), 20 CHC (5%), 200 PHC (15%), 92 UPHC (80%), 4742 HWC-SC (88%) are targeted for NQAS Certification (Cumulative Target).
175.1	Quality Assurance Trainings					0.00	Budget Proposed under HSS-16_Capacity building incl. training_SI.No.201
175.2	IEC Activity under NQAS, LaQshya, Kayakalp & Mera-Aspataal (Signages- Approach road, Departmental, Directional and other facility level signage's etc.)					0.00	Budget Proposed under HSS-19_IEC & Printing_SI.No.204
175.3	Quality Assurance Implementation (for traversing gaps)					0.00	
175.3.1	Calibration			-		-	Calibration of all measuring equipments to be done by KTPL. The activity to be taken up through outsourced agencies centrally. Budget under Comprehensive Annual Maintenance Grant, funded through NHM. Hence, No additional fund proposed under this head.
175.4	EQAS for Labs					0.30	Ongoing Activity. External Quality Assessurance Scheme (EQAS) programmes are accepted around the world as valuable tools by Laboratories to assess the performance of their testing systems. Results are objectively compared to other Laboratories, using the same methodologies for every parameter. EQAS is also essential for getting NQAS, LaQshya and MusQan Certification.

S.No.	Scheme/ Activity	Approval FY 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
175.4.1	EQAS Programs for IPHL	Per IPHL	30282.5	0.30	1	0.30	To Include the tests currently being tested at IPHL in EQAS scope, the Suitable Panel Testing Programs run by various Panel Test Provider Labs are Listed as below with Program details and tests in specific programs: 1) Hematology (32 DHHs) • ISHTM AIIMS EQAP (CBC, PBS & Retic Count) – Rs. 2000 • Metropolis Mumbai: PT, INR, APTT, TT, Fibrinogen – Rs. 945/-. • Unit Cost: Rs.2945/- per DHH 2) Biochemistry (32 DHHs) • CMC Vellore (QCH1- Glucose, Urea, Creatinine, Total Bilirubin, Total Protein, Albumin, Calcium, Phosphorus, Uric Acid, Cholesterol, Triglyceride, HDL, Electrolytes, Bicarbonate, AST, ALT, ALP, Amylase, Iron, Magnesium, UIBC, Lithium • Unit Cost: @Rs. 8500/- per DHH 3) Clinical Pathology Program (32 DHHs) • Metropolis Mumbai (Urine Routine & Microscopy, Semen Analysis, Stool Analysis) • Unit Cost: @Rs. 1128.75/- • Cost Estimate: 32 DHH X Rs.1128.75/- = Rs.0.36 lakhs 4) Molecular Biology (32 DHHs) • Metropolis Mumbai – HIV Viral Load, HBV Viral Load, HCV Viral Load) – • Unit Cost: @Rs.8268.75/- per DHH 5) Microbiology (32 DHHs) • AIIMS Delhi - Gram Staining, Albert staining, ZN Staining, Leishman Staining, Culture Identification & AST, Serology- ASO, CRP, CMV, Dengue IgM & NS1, Hepatitis A, Hepatitis B, Hepatitis E, Salmonella Serology, RA, Syphilis, Rubella) – • Unit Cost: @Rs.9440/- per DHH
175.4.2	EQAS Programs for BPHU					0.00	Ongoing Activity: EQAS Programs for BPHU 1) Hematology: • ISHTM AIIMS EQAP (CBC, PBS & Retic Count) – Rs. 2000/- • Metropolis Mumbai: PT, INR, APTT, TT, Fibrinogen – Rs. 945/-. • Unit cost : Rs. 2945/- • Cost Estimates : Rs. 2945/- X 150 CHC/SDHs (selected CHCs & all SDHs) 2) Biochemistry: • CMC Vellore (QCH1- Glucose, Urea, Creatinine, Total Bilirubin, Total Protein, Albumin, Calcium, Phosphorus, Uric Acid, Cholesterol, Triglyceride, HDL, Electrolytes, Bicarbonate, AST, ALT, ALP, Amylase, Iron, Magnesium, UIBC, Lithium • Unit Cost : Rs 8500/- • Cost Estimates = Rs.8500/- X 150 BPHU 3) Microbiology & Infectious disease serology – RML Lucknow: CRP, HBsAg, Anti HCV, RPR, RF, ASO, Typhoid IgG/IgM, Dengue IgM/IgG/NS1, HIV Unit Cost - Rs 4900 Cost Estimates = Rs 4900 X 100 selected Facilities
175.4.2.1	EQAS for Hematology Lab at BPHU	Per BPHU	2945	0.03	0	0.00	
175.4.2.2	EQAS for Biochemistry Lab at BPHU	Per BPHU	8500	0.09	0	0.00	
175.4.2.3	Microbiology & Infectious disease serology	Per BPHU	4900	0.05	0	0.00	

S.No.	Scheme/ Activity	Approval FY 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
175.5	Refilling of fire Extinguishers at Public health facilities			-		4.85	Ongoing activity . Proposed under NHM PIP for Refilling & procurement of fire Extinguisher (Statutory Requirement) - Proposed as it is a recurring expenses and thus cannot be met out of Ama Hospital funds. Proposal 2026-27: Refilling of fire Extinguisher of all 32 DHH, 32 SDH, 375 CHC . Total Budget in 2026-27: Proposed for 439 institutions: 1. DHH: 32 X @Rs.1.00 lakh per institution 2. SDH: 32 X @Rs.1.00 lakh per institution 3. CHC: 375 X @Rs.0.35 lakh per institution
175.5.1	DHH	Per DHH	100000	1.00	1	1.00	Fire Extinguisher of all DHH, SDH & CHC will be refilled.
175.5.2	SDH	Per SDH	100000	1.00	0	-	
175.5.3	CHC	Per CHC	35000	0.35	11	3.85	
175.6	Paste Control Measures for Public Health Hospitals			-		6.50	Ongoing Activity Proposed under NHM PIP as it is a recurring expenses and thus cannot be met out of RKS fund . Proposal 2026-27: Paste Control Measures is required as per NQAS & Kayakalp mandate. So fund proposed for all DHH, SDH, CHC and PHCs. Fund will be provided @ Rs. 1.00 lakh each for 32 DHH, Rs. 75000 each for 32 SDH & Rs. 50000 each for 375 CHC So fund proposed for all DHH, SDH, CHC.
175.6.1	DHH	Per Institution	100000	1.00	1	1.00	
175.6.2	SDH	Per Institution	75000	0.75	0	-	
175.6.3	CHC	Per Institution	50000	0.50	11	5.50	
175.7	Electrical Audit of Public Health Facilities						Electrical Audit will be conducted out of NPCCHH PIP, NHM. So separate budget not proposed here.
175.8	Facility Level Quality Team Meeting			-		1.62	On going activity and fund proposed as per previous year approval. Proposal 2026-27: Meeting Expenses: Total targeted institution: 899 Total Budget proposed for 899 (32 DHH, 32 SDH, 187 CHC & 648 PHC) institutions: 1. DHH: 32 X @Rs.2000/-per month X 12 month 2. SDH: 32X @Rs.1000/- per month X 12 months 3. CHC/ PHC: (187+648) 835 X @Rs.500/- per month X 12 months
175.8.1	DHH	Per Month/ Per Unit	2000	0.02	1	0.24	Budget proposed for DHH
175.8.2	SDH	Per Month/ Per Unit	1000	0.01	0	-	Budget proposed for SDH
175.8.3	CHC/ PHC	Per Month/ Per Unit	500	0.01	23	1.38	Budget proposed for 187 CHC & 648 PHC in 2026-27

S.No.	Scheme/ Activity	Approval FY 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
175.9	Traversing Gaps for Quality Certification						1. Gaps at SHC Level for NQAS Certification: Details Justification is at Quality Assurance Write-up Annexure Details Budget Proposed under HSS-4_IPHS 2. NQAS Certification of IPHLs: Training proposed under NHM PIP in respective head (Details Budget Proposed under HSS-16_Capacity Building & Training_Sl.No.-201), however, other infrastructural gaps shall be met out of PM-ABHIM and additional amount if any out of Nidan-State budget scheme (No additional budget proposed under NHM PIP)
175.10	Mentoring/ Support			-		2.00	
175.10.1	State Mentoring Visit by SQAU	Per SQAU in a year	540000	5.40	0		Ongoing Activity State level team will visit to the hospitals targeted for NQAS certification for providing hand holding support. Mentoring cost proposed for SQAU for visiting to the hospitals targeted NQAS, LaQshya & MusQan certification. Budget Proposal: Rs. 5.40 Lakhs proposed for State mentoring cost.
175.10.2	District Mentoring Visits by DQAU	Per DQAU in a year	140000	1.40	1	1.40	Ongoing Activity The Qualified Internal Assessors and External Assessors of District level team will visit to the hospitals targeted for NQAS certification for providing hand holding support. Mentoring cost proposed for DQAU for visiting to the hospitals targeted NQAS, LaQshya & MusQan certification. Budget Proposal: @ Rs. 1.40 lakhs per district
175.10.3	Peer Mentorship Programme	Per Block	15000	0.15	8	0.60	Eligibility: CHO from the NQAS certified AAM SCs and Ayush MO from NQAS certified AAM PHCs/UPHCs will be nominated as Peer Mentor and will provide mentoring support to the targeted AAM SCs and AAM PHCs in 2026-27. Further, certified External or Internal Assessors are also be included in this group who will provide mentoring support to AAM SCs/ AAM PHCs targeted for NQAS Certification in 2026-27. Modalities: A details action plan will be prepared at district level assigning specific targeted facilities to the peer mentors. These mentors will visit at least Quarterly once to the targeted facilities to support, conduct assessment and facilitate for certification. Budget: Rs.15000/- Per Block Lump Sum per year for 314 Blocks. (Key deliverables for mentors will be developed for strengthen Peer mentorship programme.) (Budgeted 50%) Recommended as per discussion in the NPCC Meeting
175.11	State/ National Level Assessment					-	
175.11.1	State Level Assessment (DH and SDH)	Per DH/SDH	89500	0.90	0		- Proposal for DHH only who are targeted for State certification in 2026-27.
175.11.2	State Level Assessment (CHC)	Per CHC	63000	0.63	0		- Proposal for 10 SDH & 15 CHC which will be eligible for state assessment in 2026-27.
175.11.3	State Level Assessment (PHCs)	Per PHC	43000	0.43	0		- 145 targeted PHC expected to be state certified in 2026-27.
175.11.4	State Level Assessment (HWC SCs)	Per HWC SC	28000	0.28	0		- 2158 of the targeted HWC SC expected to be state certified in 2026-27 .
175.11.5	State Level Assessment (IPHL)	Per IPHL	20000	0.20	0		- 10 Targeted for State Level NQAS Assessment Budget Revised as pre recommendation of NPCC
175.11.6	National Level Assessment (DH and SDH)	Per DH/SDH	210000	2.10	0		- Proposal for 12 DHH only
175.11.7	National Level Assessment (CHC)	Per CHC	146000	1.46	0		- Proposal for 10 SDH & 15 CHC which will be eligible for state assessment in 2026-27.

S.No.	Scheme/ Activity	Approval FY 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
175.11.8	National Level Assessment (PHC)	Per PHC	120000	1.20	0	-	Proposal for 156 PHC which will be eligible for state assessment in 2026-27.
175.11.9	National Level Assessment (HWC SC)	Per HWC	96000	0.96	0	-	Total 5400 SC HWCs are functional. Out of which 88% (3598) are targeted for certification in 2026-27.
175.11.10	National Level Assessment (IPHL)	Per IPHL	91000	0.91	0	-	10 Targeted for National Level NQAS Assessment Budget Revised as pre recommendation of NPCC
175.11.11	Quality Assurance Surveillance & Re-certification	Per unit	36485500	364.86	0	-	Proposal: Cost of re-certification/ surveillance assessment (DH,SDH,CHC,PHC) as per GoI norm proposed. 4 DHH, 5 CHC, 44 PHC, 1144 HWC SC are National certified till November 2025. These hospitals are to be assessed.(DHH kalahandi, DHH Rayagada, Capital Hospital BBSR, DHH Malkangiri, CHC Ghatagaon, CHC Bhanda, CHC harichandanpur, Keonjhar, CHC Mandasahi, Jagatsinghpur, CHC Nischitakoli Cuttack, 44 PHC & 1144 HWC SC) If more hospitals required for Surveillance assessment/re-certification, fund will be spent accordingly and will be proposed in supplementary PIP. Budget Revised as pre recommendation of NPCC 1. 4 DHH@ Rs.94000/- per unit 2. 5 CHC @ Rs.67500/- per unit 3.44 PHC @ Rs.46000/- per unit 4. 1144 HWC SC @ Rs.29500/- per unit
175.12	Incentivisation on attainment of NQAS certification			-		13.08	NQAS incentive for Nationally Certified facilities subject to fulfillment of below mentioned conditionality: The incentive will be disburse as per defined norms. 1. If certified through physical/ virtual assessment, incentive amount to be distributed as per norms. 2. Submission of surveillance report to certification unit, NHSRC on yearly basis 3. Facility is re-certified, once expiry date of previous certification is over
175.12.1	Incentives for DHs/SDHs NQAS certified	Lumpsum	0	-	1	-	1. DHH Kalahandi (240 bed), certified for 12 departments. Budget: 240 beds X Rs.10,000 / 18 department X 12 department = Rs.16.00 Incentive for NQAS certification will be released as per requirement. 12 Deptt. Of DHH Kalahandi are certified under NQAS out of 18 Deptts. DHH Rayagada: 229 beds, Incentives- 1526666, Capital Hospital BBSR: 750 beds, Incentive-7500000, DHH Malkangiri: 350 beds, Incentive-3500000
175.12.2	Incentives for CHCs NQAS certified	Per CHC	300000	3.00	1	3.00	CHC Ghatagaon, Keonjhar - Rs.4.80 lakhs of 48 bedded for 12 dep. Rs.3.00lakh per CHC for 4 CHC=12.00lakh
175.12.3	Incentives for PHCs with beds NQAS certified	Per PHC	300000	3.00		-	Not eligible
175.12.4	Incentives for PHCs without beds NQAS certified	Per PHC	200000	2.00	0	-	Till date 44 PHC got NQAS Certification. Fund proposed @ Rs.2.00 lakhs per PHC for 44 PHC. Total Budget: Rs.88.00 lakh. If more PHCs will be qualified fund will be proposed in Supplementary PIP if required. Facility wise details is at Quality Assurance Write-up Annexure
175.12.5	Incentives for SC HWCs NQAS certified	Per SC	126000	1.26	8	10.08	Till date 1144 AAM SC got NQAS Certification. Incentive proposed for 1144 HWC SC. Additional Fund will be released to SC HWC if qualified and will be proposed in Supplementary PIP if required. Certification will be conducted for Seven Basic Packages (Rs.18000/- per package X 7 = Rs.1.26 lakhs per unit) Facility wise details is at Quality Assurance Write-up Annexure
175.13	IT Intervention					-	

S.No.	Scheme/ Activity	Approval FY 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
175.13.1	Application for KPI Reporting						Budget Proposed under HSS-18_IT Interventions_SI.No.203
176	Kayakalp					9.30	
176.1	Kayakalp Trainings					0.00	Budget Proposed under HSS-16_Capacity building incl. training_SI.No.201
176.2	Kayakalp Assessments			-		7.58	
176.2.1	Internal Assessments of DHs	Per DH	2000	0.02		0.00	Non Budgeted
176.2.2	Peer Assessments of DHs	Per DH	25000	0.25	1	0.25	Peer assessment all DHH to be conducted.
176.2.3	External Assessments of DHs	Per DH Selected	61000	0.61	1	0.61	All DHH expected to be qualified for External assessment. Qualified in 2024-25: 31
176.2.4	Internal Assessments of SDH and CHCs	Per SDH/CHC	1000	0.01		0.00	Non Budgeted
176.2.5	Peer Assessments of SDH, CHCs and UCHCs	Per SDH/CHC	13000	0.13	11	1.43	Peer assessment to be conducted for all 32 SDH, 375 CHC, 7 UCHC.
176.2.6	External Assessments of SDH, CHCs and UCHCs	Per SDH/CHC	35000	0.35	0	0.00	352 (85%) of SDH/ CHC/UCHC expected to be qualified for External assessment out of total 414 SDH/ CHCs/UCHC targeted for Peer Assessment in 2026-27 Qualified in 2024-25: 328 (80%)
176.2.7	Internal Assessment of PHCs/UPHCs	Per PHC/HWCs	500	0.01		0.00	Non Budgeted
176.2.8	Peer Assessment of PHCs/UPHCs	Per PHC/HWCs	5000	0.05	37	1.85	Total PHCs: 1296 & UPHC 116, Total: 1412 Peer Assessment of all 1296 PHC & 116 UPHC to be conducted
176.2.9	External Assessments of PHCs/UPHCs	Per PHC/HWCs	8000	0.08	2	0.16	Peer assessment of all 1296 PHC HWCs will be conducted and out of which external assessment of top three PHC of each district will be conducted to finalise the winner PHC. Hence total 30x3=90 PHC will be taken up for External Assessment. External Assessment of 3 UPHCs of 3 districts (Khurda, Cuttack, Sundargarh) to be conducted. Hence External Assessment of Total 93 PHC/UPHC to be conducted.
176.2.10	Internal Assessment of AAM SC	Per PHC/HWCs	500	0.01		0.00	Non Budgeted
176.2.11	Peer Assessment of AAM SHC	Per SC/HWCs	2000	0.02	154	3.08	Total functional AAM SC: 5400 Peer Assessment of all 5400 AAM SC to be conducted
176.2.12	External Assessments of SHC AAMs	Per SC/HWCs	2000	0.02	10	0.20	Peer assessment of all 5400 AAM SCs will be conducted and out of which external assessment of top 10 AAM SC of each district will be conducted to finalise the winner AAM SC. Hence total 30x10=300 AAM SC will be taken up for External Assessment.
176.3	Kayakalp Awards			-		0.00	As per D.O. No. 2.15015/32/2025-NHM-I Dated 7th July,2025 of NHSRC the Kayakalp incentive would be released to the facility only if the health facility has applied for the state level NQAS certification within three months of getting the Kayakalp result in the same financial year. Hence Award Money will be proposed for 20 DHH, 20 SDH, 50 CHC, 300 PHC 100 UPHC and 4000 AAM SC which are expected to be State Certified by March 2027. Proposed as per GoI Norm
176.3.1	Kayakalp Award Winner DH	One DH	5000000	50.00	0	0.00	
176.3.2	Kayakalp Award First Runner up DH (If Applicable)	One DH	2000000	20.00	0	0.00	
176.3.3	Kayakalp Award Second Runner up DH (If applicable)	One DH	1000000	10.00		0.00	Not Applicable
176.3.4	Commendation awards for DH	Per DH	300000	3.00	0	0.00	20 DHHs are expected to be qualified for Kayakalp Award
176.3.5	Kayakalp Award Winner CHCs/SDHs	One CHC/SDH	1500000	15.00	0	0.00	
176.3.6	Kayakalp Award First Runner up CHC/SDH (If Applicable)	One CHC/SDH	1000000	10.00	0	0.00	

S.No.	Scheme/ Activity	Approval FY 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
176.3.7	Commendation awards for CHCs/SDHs	Per CHC/SDH	100000	1.00	0	0.00	50 SDH/CHC expected to be qualified in external assessment in 2026-27 & eligible to receive the award.
176.3.8	Kayakalp Awards for PHC	One PHC/Per District	200000	2.00	0	0.00	
176.3.9	Commendation awards for PHCs	Per PHCs	50000	0.50	0	0.00	300 PHC expected to be qualified in 2026-27 and eligible to receive the award.
176.3.10	Kayakalp Awards for HWCs	One HWC/District	100000	1.00	0	0.00	Proposal for Sub Centers HWCs. Functional HWC SC till August 2023: 4813
176.3.11	Kayakalp Award First Runner up HWCs (If Applicable)	One HWC/District	50000	0.50	0	0.00	
176.3.12	Kayakalp Award Second Runner up HWCs (If applicable)	One HWC/District	35000	0.35	0	0.00	
176.3.13	Commendation awards for HWCs	Per HWC	25000	0.25	0	0.00	4000 AAM SC are expected to be qualified for award out of targeted 5400 SC HWCs in 2026-27. Out of which 30 get winner award, 30 gets Runners up and rest 3940 HWC SC will get Commendation award.
176.4	Support for Implementation of Kayakalp					0.52	The required fund to be met out of State specific BMW scheme. Hence no separate budget proposed under this head.
176.4.1	Contingencies						The funds will be utilized for - Trophy for Awardees Hospital - Certificate - Venue hiring cost
176.4.1.1	For State Level Function	Lumpsum	1000000	10.00	0	0.00	- Expenses for State level function for DHH, SDH, CHC and district level for PHC & HWC-SC - Incidental expenditure In the year 202526, total 5336 facilities are qualified for Kayakalp award. More number of facilities are qualifying for Kayakalp award. To maintain the momentum, the award winner facility team need to be felicitated in function at state and district level. For this purpose Rs. 10 lakhs is proposed for State Level function and @ Rs.6500/- to be proposed for 314 Blocks
176.4.1.2	For District Level Function	Per Block	6500	0.07	8	0.52	Budget Recommended as per discussion in the NPCC Meeting
176.5	Organisation of Swachhata Pakhwada	Per Institution/ Per Round	20000	0.20	6	1.20	Proposal 2026-27: Proposed to provide a budget to the tune of Rs.20000/- to all DHHs, SDHs & CHCs those have qualified for Kayakalpa Award in last year i.e. 2024-25. Total institutions bagged Kayakalpa Award as follows: DHH - 26, SDH -26, CHC - 231, UCHC-7, total - 290 facilities.
177	Swacch Swasth Sarvatra						All 314 Blocks declared as ODF in 2019-20 as per Swachhata website of Gol. Till date following no. of institutions received SSS grant in given FYs: 2019-20: 42 CHCs, 2020-21: 221 CHCs, Total Hospital : 263 CHCs
	Total Quality Assurance					37.65	

HSS-7_Other Initiatives

S.No.	Scheme/ Activity	Approval FY 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
	Total Other Initiatives					155.10	
178	Comprehensive Grievance Redressal Mechanism					17.96	
178.1	Integrated Call Centre (104 Health Helpline including ECD Call Centre)			-			Ongoing activity 1. Integrated Call centre (Health helpline including 8 seated ECD Call Centre) Seat & Man shift Arrangements (Total Seat: 33 & Shifts:49) a. Health Information (NHM/ Other Programs) (Seats:8 & Nos. of Shifts : 8X3) - b. RCH (Counselors) : (Seats:10 & Nos. of Shifts : 10X1) c. Feedback (Counselors) : (Seats:5 & Nos. of Shifts : 5X1) d. Consultations by MBBS Doctors : (Seats:2 & Nos. of Shifts : 2X1) e. ECD (Counselors) : (Seats:6 & Nos. of Shifts : 6X1) f. ECD (Doctors) : (Seats:2 & Nos. of Shifts: 2X1) Overall Seat- 33 & overall man shifts per day - 49 (Doctor-4 & Counselor-25)
178.1.1	Service Cost for 104 Health Help Line			-			
178.1.1.1	Counselors at 104 Health Help Line	Per seat/per shift/ per month	21242	0.21	0		Ongoing Activity : The new contract effective from October,2024. Tender rate counselor per seat/shift/month is Rs.19,737/-. As per the contract the price will be escalated in every 13 month. Escalation rate - estimated as 5%. 1st escalated in October,2025 will be Rs.20,724/- and 2nd escalated in October,2026 will be Rs.21,760/-, like this continue for 5 years. proposed budget for financial year 2026-27 @ Rs.21,242/- (average rate)per seat/per shift / per month for 45 Man shifts (29 Seats for Counselors : 8 Counselors X3 Shifts & 21 Counselors X 1 shift)
178.1.1.2	Doctors at 104 Health Help Line	Per seat/per shift/ per month	84755	0.85	0		Ongoing Activity : The new contract effective from October,2024. Tender rate counselor per seat/shift/month is Rs.78,750/-. As per the contract the price will be escalated in every 13 month. Escalation rate - estimated as 5%. 1st escalated in October,2025 will be Rs.82,688/- and 2nd escalated in October,2026 will be Rs.,86,822/-, like this continue for 5 years. proposed budget for financial year 2026-27 @ Rs.84,755/- (average rate)per seat/per shift / per month for 4 Man shifts . (4 Doctors for 1 shift)

S.No.	Scheme/ Activity	Approval FY 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
178.1.1.3	Telephone bill for incoming calls for at 104 Health Help Line	Lumpsum	1063200	10.63	0		Ongoing Activity : - Rs.1.20 per minute for 3 minutes per day for an average of 800 calls per day for 365 days + monthly rental of Rs.1000/- per month
178.1.2	Help Desk at Facility Level						Ongoing Activity Proposal: Help Desk at High case load Public Health Facilities (FRUs) Background : “Citizens Help desk” has been established at all major hospitals (64 SDHs & DHHs) in the State All services rendered by the Help Desk will be given free of Cost to the public. Tasks performed by Help Desk: a. Facilitate patients and their relatives in getting due services & entitlements. b. Provide escort/attendant support to orphan patients/patients c. Conduct patient satisfaction study and submit monthly reports. d. Support in management of local grievance redressal especially by periodic collection and recording of grievances and disseminating it to appropriate authority. e. Manage IEC/Demonstration corners under the supervision of Hospital Authorities. f. Coordinate with 102/108 services for smooth admission at appropriate wing. Working Schedule: The scheme run under Partnership model especially. It offers seamless, end-to-end facilitation services and 24X7 assistance round the year.
178.1.2.1	for DHH Help Desk	Per Unit/ P.A	17,95,920	17.96	1	17.96	Budget for DHH Help Desk: Help Desk Manager (1) @ Rs.560/- X 1 X 26days/ month X 12 months + Help Desk Volunteer @ Rs.510/- X 10 manpower X 26days/ month X 12 months + Contingencies @ Rs.30000/- per annum (Rs.1795920/- per unit X 32 DHHs)
178.1.2.2	for SDH Help Desk	Per Unit/ P.A	11,59,440	11.59	0	0.00	Budget for SDH Help Desk : Help Desk Manager (1) @ Rs.560/- X 1 X 26days/ month X 12 months + Help Desk Volunteer @ Rs.510/- X 6 manpower X 26days/ month X 12 months + Contingencies @ Rs.30000/- per annum (Rs.11,59,440/- per unit X 32 SDHs)
179	PPP					13.22	

S.No.	Scheme/ Activity	Approval FY 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
179.1	PHC-N Management			-			Nature of Activity: Ongoing Proposal for 2026-27: PHC - N management by NGOs (i) Continuation of all 42 sanctioned PHC(N) Management projects on basis of last year approval (at present, 30 PHC(N)s are operational in PPP mode in 13 districts out of 42 sanctioned number. As per norm, Projects completed 5 years of operation has been fresh advertised for selection of new Agencies. Section of new agencies for 12 projects are in progress). (ii) Expanded scope for outreach services as per CPHC mandate: On basis of last year approval the programme was operational in 40 PHC New management projects. These PHC(N)s are located mostly in hard to reach areas and local community people have poor health seeking behavior. The PHC(N) will ensure delivery of outreach services in the SC HWC areas under CPHC with increased community engagement and strengthening SC HWC-JAS During the F.Y. 2026-27 it is proposed for continuation of the activities in 25 PHC (N)s having larger service areas i.e. catering more than 2 AAM SHCs. Changes made in the unit cost as approved in last year i.e. @Rs.3.60 lakhs to Rs 3.72 lakhs per annum per projects due to the 5% annual increment to the HR under the project as per norm. Budget Proposed: (80%) 1. PHC (N) Management Project Recurring Cost: @ Rs. 34,64,745/- per annum per project X 42 projects = Rs. 14,55,19,290/- (Budget increase 3% in compare to last year annual project cost as per terms and conditions laid down in the Tender Document) 2. Expanded scope for outreach services as per CPHC mandate: @3.72 lakhs X 25 units = Rs. 93.00 lakhs (Budget increase 3% in compare to last year annual project cost as per terms and conditions laid down in the Tender Document) Detail proposal is at PHC(N) Management Write-up Annexure
179.1.1	Recurring Cost	Per unit	3464745	34.65	0	-	(Budgeted 80% looking into expenditure trend) Recommended after discussion in the NPCC Meeting
179.1.2	Outreach Services as per CPHC mandate	Per Project	372000	3.72	0	-	Budgeted 80% looking into expenditure trend Recommended after discussion in the NPCC Meeting
179.1.3	Training of Service Providers	Lumpsum		0.00		0.00	Proposal-1 : Refresher training of PHC Team - PHC-N Managed Projects Proposal-2 : State level orientation/ Review of NGO functionaries on PPP Projects Budget Proposed at HSS-16_ Capacity Building Including Training_ Sl.No. 201
179.1.4	Evaluation of Projects	Per Unit	100000	1.00			Activity Dropped: As per norm, projects completed 3 years of operation shall be considered for external evaluation by the empanelled external evaluating Agencies. Since, PHC(N) Management projects have completed maximum tenure limit of 5 years and fresh advertisement has been published for selection of new Agencies afresh, it is not proposed for evaluation of PHC(N) Management project in the NHM PIP for the year 2026-27.

S.No.	Scheme/ Activity	Approval FY 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
179.2	Maternity Waiting Home						Ongoing Activity Operationalisation of Maternity Waiting Home Background: Maa Gruha (Maternity Waiting Home) projects are temporary home for the pregnant women residing in the remote areas, where they can stay and wait for safe delivery during the third trimester of pregnancy. On onset of labour, they are being safely and timely shifted to nearby health facility having BeMOC facility for safe delivery. At present out of 98 NHM PIP sanctioned projects, all 92 projects are operational in 17 Districts in partnership with the NGOs selected in the process of open tender. Out of 92 operational projects, 24 projects are operational in 23 Aspirational Blocks of the State. Proposal for 2026-27: As per last year approval all 98 projects are to be continued in 19 districts including PVTG and aspirational districts, including 11 projects having new locations. Budget proposed for MWH: Non-Recurring Cost: @Rs.200000/- per project X 11 projects = Rs.22.00 Lakhs Recurring Cost: @ 18,75,643/- per annum per project X 98 projects = Rs. 1838.13 lakhs (Budget increase 3% in compare to last year annual project cost as per terms and conditions laid down in the Tender Document) Detail proposal is at PHC(N) Management Write-up Annexure Budgeted 90% looking into expenditure trend
179.2.1	Non Recurring Cost	Per MWH	200000	2.00	0	-	
179.2.2	Recurring Cost	Per MWH Per Annum	1875643	18.76	0	-	
179.2.3	Training of Service Providers	40/ batch	155700	1.56		-	Not Proposed this year
179.2.4	Evaluation of projects	Per MWH		-			Activity Dropped: As per norm, projects completed 3 years of operation shall be considered for external evaluation by the empanelled external evaluating Agencies. Since, all MWH projects have completed maximum tenure limit of 5 years and fresh advertisement has been published for selection of new Agencies afresh, it is not proposed for evaluation of MWH project in the NHM PIP for the year 2026-27.
179.3	Ancillary Services at Major Public Health Facilities through PPP mode						
179.3.1	House Keeping, Cleaning & Security Services						Budget shall be met out of State fund(Nirmal- State Specific Scheme)
179.3.2	Help Desks	Lumpsum	9,45,71,520	945.72		0.00	Budget Proposed in Sl.No.178

S.No.	Scheme/ Activity	Approval FY 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
179.3.3	Management of Attendant Rest Sheds						Ongoing Activity Proposal: Management of Rest Shed for Patient attendants Background: As a part of the special initiative, “Rest Sheds” have been established (Building) for the night stay of the attendant of indoor hospital in 64 nos of referral level hospitals (DHH, SDH). These “Rest Shed” have been provided with beds, toilet, kitchen, dining hall, drinking water. The “Rest Shed at DHH are equipped with 100-120 beds and the “Rest Shed” of SDH/CHC are of 30-50 bedded. This will not only improve the experience of Hospital stay of the common man but will also decrease OOPE (Out of Pocket Expenditure) occurring due to Hotel/Lodge stay of patient attendant. Management of the “Rest Sheds” have been given under PPP/Outsourced mode. Budget: DHH: Rest Shed Manager (1) @ Rs.560/- X 1 X 26 days/ month X 12 months + Care Taker (6) @ Rs.510/- X 6 manpower X 26days/ month X 12 months + Contingency, Consumables for Managing Rest Sheds @ Rs.6000/- PM X 12 months + Management cost @ 10% of total project cost per annum (Rs.13,21,584/- per unit X 32 DHHs) SDH: Rest Shed Manager (1) @ Rs.560/- X 1 X 26 days/ month X 12 months + Care Taker (3) @ Rs. 510/- X 3 manpower X 26 days/ Month X 12 month + Contingency, Consumables for Managing Rest Sheds @ Rs.2000/- PM X 12 months + Management cost @ 10% of total project cost per annum (Rs.7,43,688/- per unit X 32 SDHs) Recommended after discussion in the NPCC Meeting
179.3.3.1	Management of Rest Shed at DHHs	Per DHH	13,21,584	13.22	1	13.22	
179.3.3.2	Management of Rest Shed at SDHs	Per SDH	7,43,688	7.44	0	0.00	
179.4	PM JANMAN-Functionalisation of Multi Purpose Centers (MPC)						New Activity Under PM-JANMAN, there is a provision for deployment of one ANM in each Multi-Purpose Centers (MPCs) newly constructed by Ministry of Tribal Affairs (MoTA). The aim is to provide multiple services to small PVTG habitations under one roof with the objective to improve the overall health and nutrition status of the PVTG community by providing accessible services through ANM, AWW, ASHA interventions. Odisha State has been allocated 74 MPCs in 14 Districts by GoI. As per Communication of AS&MD, NHM, MoH&FW, GoI, Vide D.O.No. Z.15015/23/2023-NHM-1, dt. 04.07.2025 state have been asked to propose cost towards HR (ANM), Drugs & Diagnostics per MPC in the 2026-27 PIP. Budget Provision for MPC: HR Cost (ANM): One ANM Per MPC X 74 MPC (Budgeted under HSS-9_Sl.No.185) Drugs for 74 MPCs: To be met out of State Health Budget Diagnostics 74 MPCs: Budget to be met out of XV_FC/ NIDAN (State Budget Scheme) Training : Skill Based Training of ANMs engaged in the Multi-Purpose Centers (MPCs) -Details Budget Proposed at HSS-16 Capacity Building Including Training Sl.No. 201

S.No.	Scheme/ Activity	Approval FY 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
179.5	PM JANMAN- Operationalisation of MHUs						Mobile Health Unit (MHU): • 51 MHUs are operational in 45 PVTG Blocks (Total PVTG Blocks -55). • The PVTG Blocks where no MHU is exists (rest 10 blocks), such Blocks are covered by the respective Block Health Team. • All the MHUs are operational in the State are funded under State Budget. Tender has been published for engagement of additional MHUs in the Blocks where there is no MHU is exists at present including 10 PVTG Blocks without MHUs. • The MHU vehicle covering the PVTG villages twice in a month, where no health facility is available within 5 km distance. Rest of the PVTG villages covered at least once in every month as per the micro-plan by health team. • Intensive screening & saturation of benefits under Sickie Cell Elimination Mission, National TB Elimination Programme, Pradhan Mantri Surakshit Matriya Abhiyan, PM National Dialysis Programme, NCD Screening and other RCH activities are being facilitated by the MHU Team. • All MHUs operational in the PVTG Blocks have been registered in the MMU Portal of Govt. of India. • MHU event planning and regular online reporting ensured in the MMU Portal as per Gol norm. Fund to be met out of State Budget
180	Free Drugs Services Initiative					12.71	
180.1	Free Drugs Services - Strengthening Supply Chain Management System			-			Ongoing Activity
180.1.1	Transportation from Central Drug Store to District Drug Ware Houses	Lumpsum	14400000	144.00	0	-	Budget: Rs.144.00 lakh (Proposal based as per last year's expenditure reported). Vehicles are engaged on contract based on tender rate.
180.1.2	Transportation from District Drug Ware Houses to Block Drug Ware Houses /Sub Store at PHC Level			-		-	Transportation made using fleet of vehicles engaged through tender process at OSMCL
180.1.2.1	Transportation Cost	Per Vehicle/ Annum	1045200	10.45	1	7.32	Vehicle Hiring Charges: @Rs. 87,100 per month per vehicle (as per recent tender rate) X 53 vehicles x 12 months = Rs. 553.96 lakhs (Vehicles allotted to districts i.e. Angul-2, Balasore-3, Bargarh-2, Bhadrak-1, Bolangir-3, Boudh-1, Central Drug Store-1, Cuttack-2, Deogarh-1, Dhenkanal-1, Gajapati-1, Ganjam-3, Jagatsinghpur-1, Jajpur-2, Jharsuguda-1, Kalahandi-2, Kandhmal-2, Kendrapada-1, Keonjhar-2, Khurda-2, Koraput-2, Malkangiri-1, Mayurbhanj-3, Nabrangpur-1, Nayagarh-1, Nuapada-1, Puri-2, Rayagada-2, Sambalpur-2, Sonepur-1 & Sundargarh-3) Budgeted 70% looking into expenditure made in last year
180.1.2.2	Cost for Material Handling	Per unit	127015	1.27	2	1.78	Cost of Material Handler: @Rs. 1.27 lakhs (Rs. 345.00 per day as per daily wage rate x 26 days x12 months +GST@ 18%) X 144 = Rs.182.90 lakhs Budgeted 70% looking into expenditure made in last year

S.No.	Scheme/ Activity	Approval FY 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
180.1.3	Transportation from Block Drug Ware Houses to SC Level						Ongoing Activity Proposal: Strengthening Supply Chain Management at SHC AAM Background: Its proposed to strengthen supply chain management at SHC AAM - Drugs and consumables will be supplied monthly from CHC to SC-AAMs. The CHO/ANM shall utilize Rs.200/- for transport. The process will be approved by the JAS Committee and monitored through regular reporting and review.
180.1.3.1	Transportation Cost from CHC to SC AAM	Per SC AAM P.A	2400	0.02	189	3.18	Proposal 1: Transportation Cost from CHC to SC AAM Budget: @Rs. 200/- per month X 6688 SC AAMs X 12 Months X 70% (70% budgeted as drugs & consumables may not be required to be replenished at all SC AAMs in 12 months) Proposal-2: Handling & packing of drugs for SC AAMs at Block Drug Ware House Justification: Handling, packing and unloading the drugs on the designated day of supply – Rs. 460/- (An amount of Rs. 460/- is proposed on a monthly basis towards the hiring of a labour on daily wages. The hired person will be responsible for packing of drugs & consumables for distribution to CHO/ANM of SC AAMs)
180.1.3.2	Handling & packing of drugs for SC AAMs at Block Drug Ware House	Per Block DWH P.A	5520	0.06	8	0.44	Budget : Block Ware House: 314 nos Labour days required: 314 Ware House X1 Labour per month X 12 months = 3768 man days Total Budget: 3768 man days X @ Rs. 460 /- per day i.e. labour charges
181	Free Diagnostics Services Initiative					111.21	Health & FW Department, Govt. of Odisha is committed to provide quality, accessible, affordable health care services to its entire population. It is an established fact that out of Pocket expenditure is still higher because of the huge expenditure on drugs and diagnostics services. To address the same, proposal has been developed for ensuring free diagnostic & dialysis in the state.
181.1	Laboratory Services						
181.1.1	Laboratory Services (In-house)						State has initiated a state specific scheme namely NIDAN for strengthening diagnostic services across public health facilities. Further, there is balance fund under XV-FC which will be utilised for strengthening diagnostic services at primary health care facility level. Hence no additional budget proposed under NHM PIP.
181.1.2	Laboratory services through PPP Mode	Lumpsum	5278103	52.78	1	36.95	Ongoing Activity Proposal for 2026-27: High End Pathology Services running through PPP mode Budgeted 70% (Looking in to Expenditure trend on this head) Details of Calculation & Justification is at Free Diagnostics Services Write-up Annexure
181.2	Radiological Services						
181.2.1	Procurement & Supplies of X-Rays						1. Static/ Portable X-Rays: Requirement shall be met out of funding from State Budget. 2. Mobile X-Rays: Being supplied by Gol in kind/ CSR fund. So no additional budget proposed.

S.No.	Scheme/ Activity	Approval FY 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
181.3	CT Scan Services	Per CT Scan	842	0.01	12600	74.26	CT SCAN Services: The CT Scan Service is operational in PPP mode at 29 Centres (Details at Annexure - 1) by two Service Provider Agencies selected through competitive bidding process in two different phases. The details of the service provider agencies and the number of CT Scan Centres being operated by them are as mentioned below: 1. M/s Spandan Diagnostics, West Bengal : 25 Centers 2. M/s Add Annex, Cuttack : 4 Centers Rate per CT Scan (for all type of CT scan with contrast): Rs.842/- (3% price escalation of previous year price @Rs.817/-). Budget proposed for 2026-27: Avg. Case Load = 35 CT Scans per day per Centre Total estimated beneficiaries: 3,65,400 (35 scan per day x 30 days x 12 months x 29 Centres) Rate per Scan: Rs.842/- Budgeted 70% (Looking in to Expenditure trend on this head)
181.4	MRI Services	Per Beneficiary	2251	0.02	0	0.00	MRI SCAN Services The MRI Scan Service is operational in PPP mode through NHM funding at 4 Centres (Details at Annexure - 1) by two Service Provider Agencies selected through competitive bidding process in two different phases. The details of the service provider agencies and the number of MRI Scan Centres being operated by them are as mentioned below: 1. M/s Spandan Diagnostics, West Bengal : 2 Centers 2. M/s Add Annex, Cuttack : 2 Centers Rate per MRI Scan (for all type of MRI scan with contrast) : Rs.2,251/- (3% price escalation @Rs.2,185/- in the previous year). Budget proposed for 2026-27: Avg. Case Load = 45 MRI Scans per day Total estimated beneficiaries: 64,800 (45 scan per day x 30 days x 12 months x 4 Centres) Rate per Scan: Rs.2,251/- Budgeted 70% (Looking in to Expenditure trend on this head)

S.No.	Scheme/ Activity	Approval FY 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
181.5	New born screening- Inborn error of metabolism	Per kit	450	0.00	0	0.00	Inborn Error of Metabolism Screening for New Born at MC&H & DHH Level Justification: The early identification and intervention under IEM can enhance proper care, quality of life and the burden of Developmental delay among the identified children. State has been piloting IEM screening among New Borns at SCB Medical College & Hospital from June 2022 focusing on treatable metabolic disorders like CH, CAH, PKU & G6PD. Out of nearly 3000 New Borns screened on the above 4 cited parameters, 3.27 % of children are identified with metabolic disorders that means in every 30 new born screened one child is identified with metabolic disorder. Implementation strategy: • This initiative is viable as it is based on two important criterions , i. e the investment yields more result in terms of its outcome in the affected child’s life and it is focused on selected health conditions which can be treatable in the existing system. • Keeping in view of the institutional readiness, i.e establishment of DPHL and availability of Elisa reader at MC&H & DHH, the IEM screening for New borns is feasible at MC&Hs and DHHs. • Standard Operating Procedure for implementation of IEM screening and development of Standardized training modules is under process in consultation with MC&H. For Training and Post training hand holding support, District will be tagged with Medical Colleges including AIIMS. BBSR for a initial period of One Year. • During 2026-27, 40% of total live Birth occurred at DHHs & MCHs (2024-25 total delivery govt facilities - 409211 and targeted new born to be screened- 1,50,000) will be targeted under IEM screening. Budget Proposed under HSS-21, Innovations SI No.206 • DEIC will be the Hub of documenting the Line listing and Follow up of the identified children.
181.6	Proposal for Trop-T Test at Existing & New Spokes:	Per kit	500	0.01	0	0.00	Budget Not Approved
182	Mobile Medical Units					0.00	
182.1	National Mobile Medical Units (MMU)						
182.1.1	Capex			-		-	
182.1.2	Opex			-		-	
182.2	National Mobile Medical Vans (smaller vehicles) and specialised Mobile Medical Units						
182.2.1	Capex						

S.No.	Scheme/ Activity	Approval FY 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
182.2.2	Opex	Per Unit	16,78,569	16.79	0	-	Proposal-1: 177 MHUs are operational in the State covering Tribal Blocks across the State with the funding from NHM. Further, State Govt. has approved additional 150 vehicle to cover difficult villages in non-tribal blocks. The process for engagement of additional 150 vehicle is in process. Proposal-2: Functionalisation of Urban Mobile Health Unit in Urban settings Mobile Health Units (MHUs) are fully equipped, mobile healthcare facilities operated by trained medical and paramedical staff. Their primary purpose is to deliver preventive, promotive, and curative healthcare services to vulnerable and mobile populations, especially those residing in slums and hard-to-reach areas where access to regular health services is limited. Management of MHU: The operation of the MHU is being managed through PPP mode. Coverage: It covers a minimum52 sites identified sites in a month & twice during the period. It also provide services in emergencies (outbreak, epidemic). Services to be provided by MHU: General services/RMNCH + A Services/Non-Communicable Diseases (NCD) /Disease Control Program/Diagnostic (Kit-Based)/IEC/BCC and Counseling Performance of urban-MHU (2025-26 up to Nov) • No. Mobile Health Unit operational - 9 Nos. (in 7 towns) • No. of sessions conducted (April – November 2025) - 3686 • Total Beneficiaries covered – 170014 • Average caseload per session – 46 Approved Budget 2025-26 - Rs.16,29,679/- Proposal: Proposed for enhancement of the Budget @ 3% against the approved budget (Rs.48,890/-)) as pert the terms & conditions of Tender Total Budget for 9 MHU-Rs 16 78 569 (revised unit cost) x 9 MHUs
183	State specific Programme Interventions and Innovations						Not Proposed
	Total Other Initiatives					155.10	-

HSS-8_Inventory Management							
S.No.	Scheme/ Activity	Proposal FY 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
	Total Inventory Management					-	
184	Biomedical Equipment Management System and AERB					0.00	
184.1	Biomedical Equipment Management and Maintenance Program	Lumpsum	368064432	3680.64	0	0.00	Details of Writ up Justification & Budget is placed at Inventory Management Write-up Annexure folder
184.2	AERB Registration	Lumpsum	12140000	121.40	0	0.00	Background: Obtaining an AERB Registration/License for an X-Ray Machine is mandatory for operation. It ensures public and staff safety through proper infrastructure, shielding, engagement of qualified personnel (RSO), periodic QA tests, and provisioning of protective gear. Current Status: Currently, 238 functional X-Ray Machines are available, out of which 79 X-Ray Machines have AERB Registration and 159 Machines have either AERB registration expired or not available. Out of the 159 X-Ray machines, 112 are static machines. Currently, 59 functional Dental X-Ray Machines are available, out of which 12 Dental X-Ray Machines have AERB Registration and 47 machines have either AERB registration expired or not available. AERB Certification/ Licensing Requirements for Static X-Ray Machine: 1. Infrastructure: Civil work (lead lining of Door & Window, Changing Area and any other structural modification): @ Rs.65000/- per unit 2. Accessories: Rs. 30000 for (i) Chest Stand, ii) Lead Apron, iii) Gonad Shield, iv) Thyroid Shield, v) Lead Barrier 3. TLD Badge: Rs.5000/- Note: The QA test is under scope of the out sourcing agency holding the BEMP contract. AERB Certification/ Licensing Requirement for Dental X-Ray Machine: Accessories: Rs.20000/- (Lead Apron & TLD Badges) Budget: Rs.121.40 Lakhs (Rs 1.00 Lakh proposed for 112 static X-Ray machine @ Rs.1.00 Lakhs = 112 Lakh & Rs. 0.2 Lakh proposed for each Dental X-Ray machine @ Rs.20000/- X 47 =Rs.9.40 Lakh)

HSS-9_HRH

S.No.	Scheme/ Activity	Approval FY 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
	Total HRH					1,590.61	
185	Remuneration for all NHM HR					1303.63	Details at HR Budget Annexure
185.1	Service Delivery (SD)	Lumpsum	89145902	891.459	1	891.46	
185.2	EPF Service Delivery (SD & SS-F)	Lumpsum	1347504	13.475	1	13.48	
185.3	Programme Management (PM)	Lumpsum	33270068	332.701	1	332.70	
185.4	EPF Programme Management (PM,DEO&SS-O)	Lumpsum	879675	8.797	1	8.80	
185.5	Data Entry Operations (DEO)	Lumpsum	4897763	48.978	1	48.98	
185.6	Support Staff at Facility Level (SS-F)	Lumpsum	510365	5.104	1	5.10	
185.7	Support Staff in Offices (SS-O)	Lumpsum	311995	3.120	1	3.12	
186	Incentives (Allowance, Incentives, Staff Welfare Fund)					4.15	
	RCH Flexible Pool						
186.1	Incentivisation of LSAS Doctors	Lumpsum	3000	0.03	1	0.32	Ongoing Activity Status: Total LSAS Trained Doctors till date: 191 Total LSAS doctors posted at FRUs: 75 Total LSAS doctors posted at Non-FRUs: 29 LSAS Trained Doctors (Retired/ PG/ Left outs): 87 Eligibility for Incentivisation: Conducted at-least 2 CS per month Proposal : Expected 90% of in position LSAS doctors shall perform as per norms in 12 months : 75 X 90% X 12 X Rs.3000/-
186.2	Incentivisation of EMoC Doctors	Lumpsum	3000	0.03	0	0.00	Ongoing Activity Status: Total EMoC Trained Doctors till date: 38 Total EMoC doctors posted at FRUs: 5 Total EMoC doctors posted at Non-FRUs: 12 EMoC Trained Doctors (Retired/ PG/ Left outs): 21 Eligibility for Incentivisation: Conducted at-least 2 CS per month Proposal : Expected 50% of in position EMoC doctors shall perform as per norms in 12 months : 5 X 50% X 12 X Rs.3000/-
186.3	C-sections at DHH/ SDH/ CHC FRUs	Per case	3000	0.03	0	0.00	Ongoing Activity Proposal: Incentivisation of team conducting C-session at FRUs of Aspirational Districts. Status: During 2024-25 a total of 18027 C-Sessions have been conducted at FRUs. Which is 26% of total institutional delivery. Norms for Incentivisation: Monthly maximum limit for incentivisation i.e. 15% of normal delivery. Expected load for payment 9000 C-session in 2026-27.

S.No.	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		State Remarks
					Quantity/ Target	Budget (Rs. Lakhs)	
186.4	Special Incentive for Service Providers at SNCUs	Per unit					Ongoing Activity Background: SNCU service providers are provided an incentive based on the performance for providing quality service.
186.4.1	For 12 bedded SNCUs	Per Unit	25,000	0.25	0	0.00	Progress: Previously Rs.25000 (monthly incentive) was given to a 12 bedded unit with 10 NO, 4 MO, 1 DEO and 4 Support Staff on meeting the criteria (BOR>70%, Referral Rate <10% and Death Rate <15% only for DHH/ SDH SNCUs) However, with increase in bed strength, the number of staff increases and the incentive received per head decreases, therefore, it is proposed to increase the amount of incentive and keep it proportional to the bed strength, i.e.
186.4.2	For 24 bedded SNCUs	Per Unit	30,000	0.30	0	0.00	1. Rs.25000 for 12 bedded 2. Rs.30000 for 24 bedded 3. Rs.35000 for 36 bedded 4. Rs.40000 for 72 bedded
186.4.3	For 36 bedded SNCUs	Per Unit	35,000	0.35	0	0.00	Total SNCUs Operational in the State: 45 nos (12 bedded- 30, 24 bedded- 9, 36 Bedded-4 & 72 bedded-2)
186.4.4	For 72 bedded SNCUs	Per Unit	40,000	0.40	0	0.00	Expect at-least 40% of SNCUs shall eligible to get incentive in every month as per last years performance report. Approved during Supplementary PIP 2024-26.
186.5	Incentive to service provider for PPIUCD services	Per Service Provider	150	0.00	1116	1.67	Ongoing Activity: Division FP Performance Status 2024-25: 120823
186.6	Incentive to service provider for PAIUCD Services	Per Service Provider	150	0.00	232	0.35	Ongoing Activity: Division FP Performance Status 2024-25: 6289
186.7	Award to the Service Providers for FP Services	Lumpsum		-		0.00	Ongoing Activity: Division FP Award to the Service Providers Activity shifted to HSS-17 SI No 202, under WPD activities as per recommendation in the NPCC Meeting.
186.8	Incentive & Allowances for Strengthening , Functionalisation of State Midwifery Training Institute (SMTI)						
186.8.1	Incentive to Midwifery Educator from the system	Per month	15000	0.15	0	0.00	Incentives to 18 Midwifery Educators / Tutor for 3 SMTI @ Rs 15,000/- PM for 18 Midwifery Educators at SCB MCH Cuttack, MKCG MCH & VIMSAR Burla Recommended after discussion in the NPCC Meeting
186.8.2	Incentive for Programme Coordinator	Per month	5000	0.05	0	0.00	Program coordinator (Principal Nursing College) @ Rs 5000/- PM Proposed target in 2026-27: 3 Recommended after discussion in the NPCC Meeting
NDCP Flexible Pool							
186.9	Incentives for Peer Support under NVHCP						Background: Existing Model Treatment Centers- 2 Nos (MKCG & SCB MCH) Existing Treatment Centers- 32 Nos Proposed: Treatment Centers (as per the decision in the NPCC meeting): 32 (all SDHs) Total Model/Treatment Centers: (Existing + New)= 66 Nos
186.9.1	For Existing Model/ Treatment Centers	Per Month	15000	0.15	1	1.80	Proposal: Total Peer support to be engaged: 66 Nos (34 for 12 months & 32 for 6 months)

S.No.	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		State Remarks
					Quantity/ Target	Budget (Rs. Lakhs)	
186.9.2	For New Treatment Centers	Per Month	15000	0.15	0	0.00	@Rs. 15000/- per month x 12 months x 34 @Rs. 15000/- per month x 6 months x 32 Budget proposed as per the NPCC recommendations
	NCD Flexible Pool						
186.10	Physiotherapy Services for Home Bound/ Geriatric Cases	Per visit	750	0.01	-	-	Budget Not Approved
186.10	Fixed day hearing assessment and management- NPPCD	Per Session	1500	0.02	-	-	Budget Not Approved
	HSS _U						
							Details Proposed under HSS_U-5_ HRH SI No-143
	HSS _R						
186.10	NHM Staff Welfare Fund	Lumpsum	20000000	200.00	0	0.00	Ongoing Activity The NHM Employees' Welfare Fund was introduced in the financial year 2017-18 in order to extend social security benefits to the contractual employees under NHM and their families & being funded under NHM. Details at HSS Write-up justification Annexure
187	Remuneration for CHOs					211.68	
187.1	Remuneration of CHOs						As CHOs are from regular carder, no remuneration proposed under NHM PIP 2026-27.
187.2	Performance incentive for Mid-level service providers						The CHOs' performance is tracked through 28 state customized indicators out of the 6688 SHCs - 5406 CHOs are already in position so they will be eligible to get their incentives for 12 months and the rest 1282 CHOs who are expected to join in FY 2026-27 will be eligible for getting 8 months incentive. Activity Shifted from SI No. 188 to SI No. 187 as per recommendation of NPCC
188.2.1	For Existing CHOs	Per month	15000	0.15	147	185.22	As it is a performance linked incentive, budget has been proposed 70% of the total entitlement (i.e. 5406 CHOs × Rs.15000/- × 12 months x 70%) Activity Shifted from SI No. 188 to SI No. 187 as per recommendation of NPCC
189.2.2	For New CHOs	Per month/ Per CHO	15000	0.15	42	26.46	As it is a performance linked incentive, budget has been proposed 70% of the total entitlement (i.e. 1282 CHOs × Rs.15000/- × 6 months x 70%) Activity Shifted from SI No. 188 to SI No. 187 as per recommendation of NPCC
188	Incentives under CPHC					71.15	
188.1	Performance incentive for Mid-level service providers						Activity Shifted to SI No. 187 from SI No. 188 as per recommendation of NPCC
187.1.1	For Existing CHOs					0.00	
187.1.2	For New CHOs					0.00	
188.2	Team Based Incentives for PHC/ SHC AAMs						

S.No.	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		State Remarks
					Quantity/ Target	Budget (Rs. Lakhs)	
188.2.1	Team based incentives for SHC AAMs	Per Annum/ Per SHC AAM	36000	0.36	189	47.63	Proposal for 2026-27: Team based incentive is proposed for MPW (M & F) at 6688 SC AAMs which is tracked through state customized 27 indicators. Amount of Incentive @ 3,000/- per month per SC AAM Budget: 6688 SC AAMs x 12 x Rs.3000/- X 70% (budgeted 70% of the total requirement as it is a performance based incentive) Details at CPHC Write-up Annexure-1
188.2.2	Team based incentives for Health & Wellness Centers (PHC-H&WCs)	Per Inst. Per annum	96000	0.96	35	23.52	Proposal for 2026-27: Team based incentive is proposed for MO, MBBS,Ayush MOs & Paramedics of Concerned facility at 1296 PHC AAMs Proposed incentive: i. MBBS MO @ Rs. 3000/- Per Month x 12 months = Rs. 36000/- ii. AYUSH MO @ Rs. 2000/- Per Month x 12 months = Rs. 24000/- iii. Paramedics @Rs. 3000/- Per month x 12 months = Rs. 36000/- Unit Cost Total: Rs.36000/- + Rs.24000/- + Rs.36000/- = Rs. 96000/- Budget: 1296 PHC AAMs x 12 month x @Rs.96000/-x 70% (budgeted 70% of the total requirement as it is a performance based incentive)
189	Costs for HR Recruitment and Outsourcing						
190	Human Resource Information Systems (HRIS)						Proposed under HSS-18, IT intervention
	Total HRH					1,590.61	

NHM HRH Budget Annexure for PIP 2026-27

SL No	Division	Position Name	Approved NHM Manpower in 2026-27	Base Remunerati on Approved in 2025-26	Revised Base Remuneration Proposed in PIP 2026-27 (5% increment on base 25-26)	PI (25%) (For SHSRC PI 15%))	KBK Incentive	Total Remunerat ion p.m.	Total Remuneratio n per person per Annum (in Lakhs)	Total Budget per Annum (in Lakhs)	EPF	Remarks
		Human Resource (Service Delivery)-HRH										
1		ANM- All Facilities	0		24200			24200	2.90	0.00		N.B.: 1.Contractual employees appointed under OSH&FWS shall be entitled to an annual increment of 5% on the base remuneration of FY 2025–26 , along with Performance Incentive (PI) of up to 25% of the revised base remuneration , subject to performance appraisal and applicable guidelines. Revised Base Remuneration 26-27 including 5% increment: (SN-Rs. 24251/-, Pharmacist/ LT- Rs. 20798/-, ANM- Rs. 20147/-) 2.Employees engaged through outsourcing under NHM shall be paid remuneration in accordance with the outsourcing norms prescribed by OSH&FWS . 3. Unit Cost Specified in the given column is only an indicative cost for calculation/ estimation purpose .
2		ANM - MPC (PM-JANMAN)	0		24200			24200	2.90	0.00		
3		Staff Nurse - All Facilities	15		26300			26300	3.16	38.09		
4		Lab technicians - All Facilities	35		26300			26300	3.16	88.37		
5		Lab technicians (MCHs/ ATDTC/ C&DST)	0		26300			26300	3.16	0.00		
6		Lab technicians (Central Lab) - NVBDCP	0		26300			26300	3.16	0.00		
7		Lab technicians (Blood Collection Van)	0		26300			26300	3.16	0.00		
8		Lab technicians CoE VSS	0		26300			26300	3.16	0.00		
9		Lab technicians (CLMC technician)	0		26300			26300	3.16	0.00		
10		Sr. Lab Technicians (CDST & IRL)	0	37395	39265	9816		49081	5.89	0.00		
11		PSA Technician	6	18592	19522	4881		24403	2.93	14.06		
12		Cath lab technician	0	19808	20798	5200		25998	3.12	0.00		
13		Pharmacist -cum-Store Keeper (Sickle Cell)	0		26300			26300	3.16	0.00		N.B.: 1.Contractual employees appointed under OSH&FWS shall be entitled to an annual increment of 5% on the base remuneration of FY 2025–26 , along with Performance Incentive (PI) of up to 25% of the revised base remuneration , subject to performance appraisal and applicable guidelines. Revised Base Remuneration 26-27 including 5% increment: (SN-Rs. 24251/-, Pharmacist/ LT- Rs. 20798/-, ANM- Rs. 20147/-) 2.Employees engaged through outsourcing under NHM shall be paid remuneration in accordance with the outsourcing norms prescribed by OSH&FWS . 3. Unit Cost Specified in the given column is only an indicative cost for calculation/ estimation purpose .
14		Pharmacist (SDS/ NTEP)	0	37395	39265	9816		49081	5.89	0.00		
15		Physiotherapist/ Occupational Therapist	13	42917	45063	11266		56329	6.76	70.30		
16		Physiotherapist/ Occupational Therapist (Tech.)	0	30258	31771	7943		39714	4.77	0.00		
17		Consultant Medicine (KBK)	0	106379	111698	27925	10000	149623	17.95	0.00		
18		Microbiologist (MD)	0	115763	121551	30388		151939	18.23	0.00		
19		Cardiologist	0	160000	168000			168000	20.16	0.00		

SL No	Division	Position Name	Approved NHM Manpower in 2026-27	Base Remuneration Approved in 2025-26	Revised Base Remuneration Proposed in PIP 2026-27 (5% increment on base 25-26)	PI (25%) (For SHSRC PI 15%)	KBK Incentive	Total Remuneration p.m.	Total Remuneration per person per Annum (in Lakhs)	Total Budget per Annum (in Lakhs)	EPF	Remarks
20		Consultant - O&G (tech) - SIHFW	0	94568	99296	24824		124120	14.89	0.00		
21		Consultant - Paediatrician (tech) -SIHFW	0	94568	99296	24824		124120	14.89	0.00		
22		Medical Officer (KBK)	0	85103	89358	22340	10000	121698	14.60	0.00		
23		Medical Officer	1	85103	89358	22340		111698	13.40	10.48		
24		Medical Officers - KBK NMHP	0	85103	89358	22340	10000	121698	14.60	0.00		
25		Medical Officers -(Non KBK) NMHP	0	85103	89358	22340		111698	13.40	0.00		
26		Medical Officers - Hep C	0	85103	89358	22340		111698	13.40	0.00		
27		Medical Officers - SNCU (KBK)	0	85103	89358	22340	10000	121698	14.60	0.00		
28		Medical Officers – SNCU	1	85103	89358	22340		111698	13.40	10.48		
29		Medical Officer- STC	0	81912	86008	21502		107510	12.90	0.00		
30		Medical Officer (Sickle-2)	0	81912	86008	21502		107510	12.90	0.00		
31		Medical Officers DTC	0	81912	86008	21502	3000	110510	13.26	0.00		
32		Sr. MO DRTB	0	81912	86008	21502		107510	12.90	0.00		
33		Medical Officers DTC (MCH)	0	81912	86008	21502		107510	12.90	0.00		
34	Co-Location	Medical Officers AYUSH (KBK)	0	36471	38295	9574	4000	51869	6.22	0.00		
35		Medical Officers AYUSH	45	36471	38295	9574		47869	5.74	206.79		
36	RBSK	Medical Officers - AYUSH (KBK)	0	36471	38295	9574	4000	51869	6.22	0.00		
37		Medical Officers - AYUSH	32	36471	38295	9574		47869	5.74	147.05		
38		ANM/SN (RBSK)	16		24200			24200	2.90	37.17		N.B.: 1.Contractual employees appointed under OSH&FWS shall be entitled to an annual increment of 5% on the base remuneration of FY 2025–26 , along with Performance Incentive (PI) of up to 25% of the revised base remuneration , subject to performance appraisal and applicable guidelines.
39		Pharmacist	16		26300			26300	3.16	40.40		Revised Base Remuneration 26-27 including 5% increment: (SN-Rs. 24251/-, Pharmacist/ LT- Rs. 20798/-, ANM- Rs. 20147/-) 2.Employees engaged through outsourcing under NHM shall be paid remuneration in accordance with the outsourcing norms prescribed by OSH&FWS . 3. Unit Cost Specified in the given column is only an indicative cost for calculation/ estimation purpose .
40		Paediatricians	1	106379	111698	27925		139623	16.75	16.75		
41		Paediatricians (KBK)	0	106379	111698	27925	10000	149623	17.95	0.00		
42		Medical Officers, MBBS	1	85103	89358	22340		111698	13.40	10.48		
43		Medical Officers, MBBS (KBK)	0	85103	89358	22340	10000	121698	14.60	0.00		
44		Medical Officers, Dental (DEIC)	1	57338	60205	15051		75256	9.03	9.03		

SL No	Division	Position Name	Approved NHM Manpower in 2026-27	Base Remunerati on Approved in 2025-26	Revised Base Remuneration Proposed in PIP 2026- 27 (5% increment on base 25-26)	PI (25%) (For SHSRC PI 15%))	KBK Incentive	Total Remunerat ion p.m.	Total Remuneratio n per person per Annum (in Lakhs)	Total Budget per Annum (in Lakhs)	EPF	Remarks
45		Staff Nurse (DEIC)	1		26300			26300	3.16	3.16		N.B.: 1.Contractual employees appointed under OSH&FWS shall be entitled to an annual increment of 5% on the base remuneration of FY 2025–26 , along with Performance Incentive (PI) of up to 25% of the revised base remuneration , subject to performance appraisal and applicable guidelines. Revised Base Remuneration 26-27 including 5% increment: (SN-Rs. 24251/-, Pharmacist/ LT- Rs. 20798/-, ANM- Rs. 20147/-) 2.Employees engaged through outsourcing under NHM shall be paid remuneration in accordance with the outsourcing norms prescribed by OSH&FWS . 3. Unit Cost Specified in the given column is only an indicative cost for calculation/ estimation purpose .
46	RBSK	Physiotherapist/ Occupational Therapist	1	42917	45063	11266		56329	6.76	6.76		
47		Physiotherapist/ Occupational Therapist (KBK)	0	42917	45063	11266		56329	6.76	0.00		
48		Audiologist & speech therapist	1	42917	45063	11266		56329	6.76	6.76		
49		Audiologist & speech therapist (KBK)	0	42917	45063	11266	1000	57329	6.88	0.00		
50		Audiologist & speech therapist - RBSK (New)	0	42917	45063	11266		56329	6.76	0.00		
51		Psychologist	1	28194	29604	7401		37005	4.44	4.44		
52		Psychologist (KBK)	0	28194	29604	7401	1000	38005	4.56	0.00		
53		Psychologist - RBSK (new)	0	28194	29604	7401		37005	4.44	0.00		
54		Early interventionist cum special educator	1	28194	29604	7401		37005	4.44	4.44		
55		Early interventionist cum special educator (KBK)	0	28194	29604	7401	1000	38005	4.56	0.00		
56		Early interventionist cum special educator - RBSK- New	0	28194	29604	7401		37005	4.44	0.00		
57		Optometrist	1	22808	23948	5987		29935	3.59	3.59		
58		Optometrist (KBK)	0	22808	23948	5987	1000	30935	3.71	0.00		

SL No	Division	Position Name	Approved NHM Manpower in 2026-27	Base Remunerati on Approved in 2025-26	Revised Base Remuneration Proposed in PIP 2026- 27 (5% increment on base 25-26)	PI (25%) (For SHSRC PI 15%))	KBK Incentive	Total Remunerat ion p.m.	Total Remuneratio n per person per Annum (in Lakhs)	Total Budget per Annum (in Lakhs)	EPF	Remarks
59		Lab technician (DEIC)	1		26300			26300	3.16	3.16		N.B.: 1.Contractual employees appointed under OSH&FWS shall be entitled to an annual increment of 5% on the base remuneration of FY 2025–26 , along with Performance Incentive (PI) of up to 25% of the revised base remuneration , subject to performance appraisal and applicable guidelines. Revised Base Remuneration 26-27 including 5% increment: (SN-Rs. 24251/-, Pharmacist/ LT- Rs. 20798/-, ANM- Rs. 20147/-) 2.Employees engaged through outsourcing under NHM shall be paid remuneration in accordance with the outsourcing norms prescribed by OSH&FWS . 3. Unit Cost Specified in the given column is only an indicative cost for calculation/ estimation purpose .
60		Dental technician	1	19808	20798	5200		25998	3.12	3.12		
61		NRC Counsellors	1	26907	28252	7063		35315	4.24	4.24		
62		NRC Counsellors (KBK)	0	26907	28252	7063	1000	36315	4.36	0.00		
63		Counsellors	12	26907	28252	7063		35315	4.24	40.68		
64		Counsellors (KBK)	0	26907	28252	7063	1000	36315	4.36	0.00		
65	NMHP	Clinical Psychologist	1	42917	45063	11266		56329	6.76	6.76		
66		Clinical Psychologist - KBK	0	42917	45063	11266	1000	57329	6.88	0.00		
67		Psychiatric Social worker	1	42917	45063	11266		56329	6.76	6.76		
68		Psychiatric Social worker - KBK	0	42917	45063	11266	1000	57329	6.88	0.00		
69		Case Registry Assistant	1	16109	16914	4229		21143	2.54	2.54		
70		Case Registry Assistant - KBK	0	16109	16914	4229	800	21943	2.63	0.00		
71		Psychiatric Nurse	1	26907	28252	7063		35315	4.24	4.24		
72		Community Nurse/ Supervisor	1	26907	28252	7063		35315	4.24	4.24		
73	IDSP	Microbiologist - 2 New Proposed	2	65601	68881	17220		86101	10.33	17.47		
74	NCD	Rehabilitation worker	0	26907	28252	7063		35315	4.24	0.00		
75		Social worker (KBK)	0	28193	29603	7401	1000	38004	4.56	0.00		
76		Social worker (Non-KBK)	1	28193	29603	7401		37004	4.44	4.44		
77	NTEP	TBHV- Govt. Medical college	0	22808	23948	5987	800	30735	3.69	0.00		
78		TBHV	1	22808	23948	5987		29935	3.59	3.09		
79	IDSP	District Epidemiologists KBK	0	94941	99688	24922	3000	127610	15.31	0.00		N.B:- Norm for new entrants to be followed as mentioned in PIP 2022-23
80		District Epidemiologists (Non-KBK)	1	89358	93826	23457		117283	14.07	14.07		N.B:- Norm for new entrants to be followed as mentioned in PIP 2022-23
81		Lab Assistant	0	16109	16914	4229		21143	2.54	0.00		
82	NDCR	Ophthalmic Assistant (KBK)	0	22808	23948	5987	800	30735	3.69	0.00		

SL No	Division	Position Name	Approved NHM Manpower in 2026-27	Base Remuneration Approved in 2025-26	Revised Base Remuneration Proposed in PIP 2026-27 (5% increment on base 25-26)	PI (25%) (For SHSRC PI 15%)	KBK Incentive	Total Remuneration p.m.	Total Remuneration per person per Annum (in Lakhs)	Total Budget per Annum (in Lakhs)	EPF	Remarks
83	NTEP	Ophthalmic Assistant (Non-KBK)	3	22808	23948	5987		29935	3.59	9.99		
84		Doctor - Mobile blood van	0	85103	89358	22340		111698	13.40	0.00		
85	Blood Cell	Lab technicians (Blood Bank)	0		26300			26300	3.16	0.00		N.B.: 1.Contractual employees appointed under OSH&FWS shall be entitled to an annual increment of 5% on the base remuneration of FY 2025–26 , along with Performance Incentive (PI) of up to 25% of the revised base remuneration , subject to performance appraisal and applicable guidelines. Revised Base Remuneration 26-27 including 5% increment: (SN-Rs. 24251/-, Pharmacist/ LT- Rs. 20798/-, ANM- Rs. 20147/-) 2.Employees engaged through outsourcing under NHM shall be paid remuneration in accordance with the outsourcing norms prescribed by OSH&FWS . 3. Unit Cost Specified in the given column is only an indicative cost for calculation/ estimation purpose .
86		Counsellor cum PRO - Mobile blood van	0	26907	28252	7063		35315	4.24	0.00		
87	IDSP	State Epidemiologist	0	89358	93826	23457		117283	14.07	0.00		
88		State Microbiologist	0	89358	93826	23457		117283	14.07	0.00		
89		Entomologists	0	81912	86008	21502		107510	12.90	0.00		
90		Entomologists (Jr.)	0	41701	43786	10947		54733	6.57	0.00		
91	NVBDCP	Consultant (Entomologist) Tech	0	94568	99296	24824		124120	14.89	0.00		
92		Insect Collector	0	30816	32357	8089		40446	4.85	0.00		
93	NTEP	Asst. Programme Officer/ Epidemiologist - Re-designated as Consultant NTEP (Tech.)	0	94568	99296	24824		124120	14.89	0.00		
94		Senior Treatment Supervisor (KBK)	0	30630	32162	8041	1000	41203	4.94	0.00		
95		Senior Treatment Supervisor (Non-KBK)	8	30630	32162	8041		40203	4.82	30.93		
96		Store assistant (SDS)	0	22808	23948	5987		29935	3.59	0.00		
97	Immunisation	Cold Chain Technician - KBK	0	26907	28252	7063	800	36115	4.33	0.00		
98		Cold Chain Technician - Non KBK - 1 New	1	26907	28252	7063		35315	4.24	4.20		
99		WIC Operator at RVS/ SVS – KBK	0	23555	24733	6183	800	31716	3.81	0.00		
100		WIC Operator at RVS/ SVS - Non KBK	0	23555	24733	6183		30916	3.71	0.00		
101		Store Assistant at FW Store	0	23555	24733	6183		30916	3.71	0.00		
102	Nursing	Nurse Trainer (Comprehensive Skill lab) + 1 New	0	52684	55318	13830		69148	8.30	0.00		
103		Doctor (Comprehensive Skill lab)	0	106379	111698	27925	10000	149623	17.95	0.00		
104		Midwifery Educators/ Tutor	0	56360	59178	14795		73973	8.88	0.00		
105		Incentive to Midwifery Educators (Regular staff)	0		0	0		0	0.00	0.00		Proposed under HSS-9 HRH SI No.186
106		Incentive to Programme Coordinator for Midwifery education (Regular staff)	0		0	0		0	0.00	0.00		Proposed under HSS-9 HRH SI No.186

SL No	Division	Position Name	Approved NHM Manpower in 2026-27	Base Remuneration Approved in 2025-26	Revised Base Remuneration Proposed in PIP 2026-27 (5% increment on base 25-26)	PI (25%) (For SHSRC PI 15%)	KBK Incentive	Total Remuneration p.m.	Total Remuneration per person per Annum (in Lakhs)	Total Budget per Annum (in Lakhs)	EPF	Remarks
107	SDMU/ SEMU	Bio-Medical Engineer - SEMU	0	81912	86008	21502		107510	12.90	0.00		
108		Pharmacist (Logistic Assistant)	1	18622	19553	4888		24441	2.93	2.93		
109		Balance Fund (Lumpsum)	0						7.14	0.00		N.B. Excess Balance Amount of Rs. 7.14 Lakhs has been kept at State level
		Total SD	227							891.46	13.26	
		Human Resource (Prog. Management)-HRH										
110	SIH&FW	Programme Assistants -SIHFW	0	42917	45063	11266		56329	6.76	0.00		
111		Training Coordinator -SIHFW (re-designated as Asst Manager)	0	52684	55318	13830		69148	8.30	0.00		
112		Bio-statistician -SIHFW	0	81912	86008	21502		107510	12.90	0.00		
113		Asst Manager - Procurement & Logistics -SIHFW	0	50309	52824	13206		66030	7.92	0.00		
114		Finance Manager -SIHFW	0	81912	86008	21502		107510	12.90	0.00		
115		Accountant cum DEO -SIHFW	0	42917	45063	11266		56329	6.76	0.00		
116	Dir. Of Nursing	Consultant (cat-1) - Nursing Cell (Directorate of Nursing)	0	93638	98320	24580		122900	14.75	0.00		
117		Consultant (cat-2) - Nursing Cell (Directorate of Nursing)	0	81912	86008	21502		107510	12.90	0.00		
118		Training Consultants - SNC at College of Nursing	0	81912	86008	21502		107510	12.90	0.00		
119		Programme Assistant - SNC at College of Nursing	0	42917	45063	11266		56329	6.76	0.00		
120		Office Assitant (SMTI)	0	23555	24733	6183		30916	3.71	0.00		
121	SDMU/ SEMU	Jr. Programme Coordinator (DMIS) - SDMU redesignated as Jr. Programme Coordinator, SDMU	0	46913	49259	12315		61574	7.39	0.00		
122		Jr. Programme Coordinator PROMIS - SDMU redesignated as Jr. Programme Coordinator, SDMU	0	46913	49259	12315		61574	7.39	0.00		
123		System In-charge – KBK	0	23555	24733	6183	800	31716	3.81	0.00		
124		System In-charge - Non KBK	1	23555	24733	6183		30916	3.71	3.71		
125		MIS Coordinator – SEMU	0	46913	49259	12315		61574	7.39	0.00		
126	SPMU	Mission Director	0	239350	251318	62830		314148	37.70	0.00		
127		Jt Director (Administration)	0	132970	139619	34905		174524	20.94	0.00		
128		HRD Manager	0	132970	139619	34905		174524	20.94	0.00		
129		Jt Director (Finance)	0	212754	223392	55848		279240	33.51	0.00		
130		Jt Director (Technical)	0	168432	176854	44214		221068	26.53	0.00		
131		Superintendnt Engineer	0	168432	176854	44214		221068	26.53	0.00		
132		Executive Engineer	0	132970	139619	34905		174524	20.94	0.00		
133		State Programme Manager	0	134035	140737	35184		175921	21.11	0.00		
134		Consultant Quality Improvement & Quality Assurance (Tech)	0	94568	99296	24824		124120	14.89	0.00		

SL No	Division	Position Name	Approved NHM Manpower in 2026-27	Base Remuneration Approved in 2025-26	Revised Base Remuneration Proposed in PIP 2026-27 (5% increment on base 25-26)	PI (25%) (For SHSRC PI 15%))	KBK Incentive	Total Remuneration p.m.	Total Remuneration per person per Annum (in Lakhs)	Total Budget per Annum (in Lakhs)	EPF	Remarks
135		Mgt Consultant (Cat I) - Re-designated as Consultant (Cat-I) (HP-1, MH-1, CH-1, Training-1, QA-2, IEC/BCC-1, RBSK-1, HSS-1, NGO/PPP-1, IT-2, M&E-1, RMNCHA-1, State Comu. Manger-1, PTC-1, Works-1, NCD-1)	0	93638	98320	24580		122900	14.75	0.00		
136		Technical Officer (State Lab)	0	89358	93826	23457		117283	14.07	0.00		
137		Consultant - Training/ Technical - Re-designated as Consultant NVHCP & Climate Change	0	93638	98320	24580		122900	14.75	0.00		
138		Mgt. Consultant (Cat-I) IT (e-VIN) - Re-designated as Consultant IT	0	93638	98320	24580		122900	14.75	0.00		
139	SPMU	State Child Health Manager - Redesignated as Consultant (RI)	0	93638	98320	24580		122900	14.75	0.00		
140		Mgt Consultant (Cat II) - Re-designated as Consultant (Cat-II) (HR-2, FP-1, Nutrition-1, RSK-2, Training-1, RBSK-1, BMW-1, Blood-1, AYUSH-1, NPHCE-1, NGO/PPP-1, PPP(tribal)-1, QA-1, PTC-1, CP-1, GKS-1, CPS/DNB-1, Consultant (Cat-II)-1, FPLMIS-1, Manager Logistic-1, PFMS-1, NMHP-1, NCD (NTCP)-1)	0	81912	86008	21502		107510	12.90	0.00		
141		State Facilitator, PNDD (Re-designated as Consultant PNDD & Gender Equity)	0	81912	86008	21502		107510	12.90	0.00		
142		Legal Advisor	0	81912	86008	21502		107510	12.90	0.00		
143		State Vaccine Logistic Manager	0	81912	86008	21502		107510	12.90	0.00		
144		State Finance Manager	0	121005	127055	31764		158819	19.06	0.00		
145		State Accounts Manager	0	93638	98320	24580		122900	14.75	0.00		
146		Financial Analyst	0	93638	98320	24580		122900	14.75	0.00		
147		Accounts Manager (NCD-1, SMCS-1, NTEP-1, NPCB&VI-1, HSS-1, SDMU-1)	0	81912	86008	21502		107510	12.90	0.00		
148		Accounts Manager (Audit)	0	70369	73887	18472		92359	11.08	0.00		
149		Audit Superintendent	0	93638	98320	24580		122900	14.75	0.00		
150		Accounts Executive	0	81912	86008	21502		107510	12.90	0.00		
151		Auditor	0	81912	86008	21502		107510	12.90	0.00		
152		Accounts Officer (Jr) (Re-designated as Accounts Manager (Jr)	0	69995	73495	18374		91869	11.02	0.00		
153		Fin. Cum Logistic Consultant (Re-designated as Accounts Manager-PTC (Jr)	0	69995	73495	18374		91869	11.02	0.00		
154		FMIO	0	52684	55318	13830		69148	8.30	0.00		
155		Accountants	0	42917	45063	11266		56329	6.76	0.00		
156		State Data Manager	0	81912	86008	21502		107510	12.90	0.00		
157		Consultant IT (Jr)	0	69995	73495	18374		91869	11.02	0.00		

SL No	Division	Position Name	Approved NHM Manpower in 2026-27	Base Remuneration Approved in 2025-26	Revised Base Remuneration Proposed in PIP 2026-27 (5% increment on base 25-26)	PI (25%) (For SHSRC PI 15%))	KBK Incentive	Total Remuneration p.m.	Total Remuneration per person per Annum (in Lakhs)	Total Budget per Annum (in Lakhs)	EPF	Remarks
158		Assistant Engineer	0	81912	86008	21502		107510	12.90	0.00		
159		Junior Engineer (Auto CAD)	0	46913	49259	12315		61574	7.39	0.00		
160		Junior Engineer	0	46913	49259	12315		61574	7.39	0.00		
161		Programme Associate (Re-deginated as Asst. Manager) (NLEP-1, NVHCP-1, NCD-1, Legal-1, PFMS-1, Planning-1, SPM-1, HWC-1, Blood-1, CPRC-5, PTC-1, HSS-1, Recuirment-2, Training-3)	0	52684	55318	13830		69148	8.30	0.00		
162	SPMU	Coordinator- Documentation, Training & Research - Re-designated as Asst. Manager, Documentation, Training & Research	0	52684	55318	13830		69148	8.30	0.00		
163		Message Developer - Re-designated as Asst. Manager, Design & Development	0	52684	55318	13830		69148	8.30	0.00		
164		Administrative Associate (PA to MD)	0	51682	54266	13567		67833	8.14	0.00		
165		State Programme Assistant (MH-,1 CH-1, RBSK-1, Nutrition-1, Admin-1, AMD-1, Legal-1, PHP-1, M&E-2, H&FW Deptt-3, CP-1, Civil-1, PTC-1, QA-1, HR& Recuirment-3, SIH(CoE)-2, PPP-1,)	0	42917	45063	11266		56329	6.76	0.00		
166		Programme Assistant (NTCP)	0	42917	45063	11266		56329	6.76	0.00		
167		Steno	0	30443	31965	7991		39956	4.79	0.00		
168		Stenographer	0	30443	31965	7991		39956	4.79	0.00		
169		Front Office Executive	0	23555	24733	6183		30916	3.71	0.00		
170		Diarist	0	23555	24733	6183		30916	3.71	0.00		
171		Sr Administrative Asst (Jr OA)	0	26907	28252	7063		35315	4.24	0.00		
172	Imm.	State Vaccine Storekeeper	0	42917	45063	11266		56329	6.76	0.00		
173		Foreman	0	36399	38219	9555		47774	5.73	0.00		
174	NVBDCP	State Coordinator-cum-M&E (as Cat-1+)	0	94568	99296	24824		124120	14.89	0.00		
175		Consultant (Training)	0	94568	99296	24824		124120	14.89	0.00		
176		Consultant (Procurement & Supply chain)	0	81912	86008	21502		107510	12.90	0.00		
177		Consultant (Social Mobilisation/ NGO/ PPP)	0	81912	86008	21502		107510	12.90	0.00		
178		Data Manager	0	52684	55318	13830		69148	8.30	0.00		
179		Accountant (NVBDCP)	0	36399	38219	9555		47774	5.73	0.00		
180		Secretary Assistant/DEO/OA	0	30816	32357	8089		40446	4.85	0.00		
181		Consultant (Financial Management)	0	81912	86008	21502		107510	12.90	0.00		
182	NLEP	Surveillance Medical Officer (State Leprosy Consultant) - Re-designated as Consultant NLEP	0	77443	81315	20329		101644	12.20	0.00		
183		BFO cum Admin Officer	0	69699	73184	18296		91480	10.98	0.00		
184		Admin Asst	0	30630	32162	8041		40203	4.82	0.00		
185	NPCDCS	State Data Manager (NPCDCS)	0	60568	63596	15899		79495	9.54	0.00		
186		Secretarial assistant (Jr. Prog. Asst.)	0	30630	32162	8041		40203	4.82	0.00		

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187	NTEP	State PPM Coordinator	0	81912	86008	21502		107510	12.90	0.00		
188		DRTB Co-ordinator	0	81912	86008	21502		107510	12.90	0.00		
189		TB/HIV Co-ordinator	0	81912	86008	21502		107510	12.90	0.00		
190	IDSP	State Data Manager	0	55722	58508	14627		73135	8.78	0.00		
191		Consultant - Finance/ Procurement	0	44032	46234	11559		57793	6.94	0.00		
192	NPCB	Admin. Asst. (Jr. Prog. Asst.)	0	30406	31926	7982		39908	4.79	0.00		
193	DPMU/ District	District Programme Manager - KBK	0	81912	86008	21502	3000	110510	13.26	0.00		
194		District Programme Manager - Non KBK	1	81912	86008	21502		107510	12.90	12.90		
195		District Accounts Manager - KBK	0	70369	73887	18472	2400	94759	11.37	0.00		
196		District Accounts Manager - Non KBK	1	70369	73887	18472		92359	11.08	11.08		
197		Deputy Manager RCH – KBK	0	64411	67632	16908	2400	86940	10.43	0.00		
198		Deputy Manager RCH - Non KBK	1	64411	67632	16908		84540	10.14	10.14		
199		District Data Manager – KBK	0	64411	67632	16908	2400	86940	10.43	0.00		
200		District Data Manager - Non KBK	1	64411	67632	16908		84540	10.14	10.14		
201		VBD Consultant (For KBK Districts)	0	64411	67632	16908	2600	87140	10.46	0.00		
202		VBD Consultant (For Non KBK Districts)	1	64411	67632	16908		84540	10.14	10.14		
203		Asst. Engineer – KBK	0	63108	66263	16566	2400	85229	10.23	0.00		
204		Asst. Engineer - Non KBK	1	63108	66263	16566		82829	9.94	9.94		
205		Fin. Cum Logistic Consultant (KBK)	0	53988	56687	14172	1800	72659	8.72	0.00		
206		Fin. Cum Logistic Consultant	1	53988	56687	14172		70859	8.50	8.50		
207		Asst. Manager (IEC/ BCC & Training) – KBK	0	52684	55318	13830	1800	70948	8.51	0.00		
208		Asst. Manager (IEC/ BCC & Training) - Non KBK	1	52684	55318	13830		69148	8.30	8.30		
209		Asst. Manager, Legal affairs & institutional strengthening - KBK	0	52684	55318	13830	1800	70948	8.51	0.00		
210		Asst. Manager, Legal affairs & institutional strengthening - non KBK	1	52684	55318	13830		69148	8.30	8.30		
211		Asst. Manager RBSK/RKSK - KBK	0	52684	55318	13830	1800	70948	8.51	0.00		
212		Asst. Manager RBSK/RKSK - Non KBK	1	52684	55318	13830		69148	8.30	8.30		
213		Hospital Manager at DHH - KBK	0	52684	55318	13830	1800	70948	8.51	0.00		
214		Hospital Manager at DHH - Non KBK	1	52684	55318	13830		69148	8.30	8.30		
215		Asst. Manager ASHA/Asst. Manager Community Process – KBK	0	52684	55318	13830	1800	70948	8.51	0.00		
216		Asst. Manager ASHA/Asst. Manager Community Process - Non-KBK	1	52684	55318	13830		69148	8.30	8.30		
217		Asst. Manager, GKS & Health System Strengthening/ Asst. Manager, Quality Assurance – KBK	0	52684	55318	13830	1800	70948	8.51	0.00		

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218		Asst. Manager, GKS & Health System Strengthening /Asst. Manager, Quality Assurance - Non-KBK	1	52684	55318	13830		69148	8.30	8.30		
219	DPMU/ District	District consultant/Asst. Manager NCD (For KBK Districts)	0	52684	55318	13830	1800	70948	8.51	0.00		
220		District consultant/Asst. Manager NCD (For Non KBK Districts)	1	52684	55318	13830		69148	8.30	8.30		
221		Regional Vaccine & Cold Chain Manager – KBK	0	52684	55318	13830	1800	70948	8.51	0.00		
222		Regional Vaccine & Cold Chain Manager - Non KBK	0	52684	55318	13830		69148	8.30	0.00		
223		District Leprosy Consultant	0	52273	54887	13722		68609	8.23	0.00		
224		Work Consultant – KBK	0	46913	49259	12315	1600	63174	7.58	0.00		
225		Work Consultant - Non KBK	3	46913	49259	12315		61574	7.39	19.93		
226		Logistic Manager (Logistic, PROMIS & Immunization) – KBK	0	42917	45063	11266	1600	57929	6.95	0.00		
227		Logistic Manager (Logistic, PROMIS & Immunization) - Non KBK	1	42917	45063	11266		56329	6.76	6.76		
228		District Program Coordinator (KBK)- NCD	0	41799	43889	10972	1600	56461	6.78	0.00		
229		District Data Manager-IDSP	1	38450	40373	10093		50466	6.06	6.06		
230		Finance & Logistics Asst (For KBK Districts)	0	30816	32357	8089	1200	41646	5.00	0.00		
231		Finance & Logistics Asst (For Non KBK Districts)	1	30816	32357	8089		40446	4.85	4.85		
232		Accountant cum DEO at DPMU - KBK	0	26907	28252	7063	1000	36315	4.36	0.00		
233		Accountant cum DEO at DPMU - Non KBK	5	26907	28252	7063		35315	4.24	17.87		
234		Accountant cum DEO at DHH - KBK	0	26907	28252	7063	1000	36315	4.36	0.00		
235		Accountant cum DEO at DHH - Non KBK	1	26907	28252	7063		35315	4.24	4.24		
236		Office Assistant at DPMU - KBK	0	23555	24733	6183	800	31716	3.81	0.00		
237		Office Assistant at DPMU - Non KBK	1	23555	24733	6183		30916	3.71	3.71		
238	SDH	Jr Hospital Manager at SDH - KBK	0	36399	38219	9555	1200	48974	5.88	0.00		
239		Jr Hospital Manager at SDH - Non KBK	0	36399	38219	9555		47774	5.73	0.00		
240		Accountant cum DEO at SDH - KBK	0	26907	28252	7063	1000	36315	4.36	0.00		
241		Accountant cum DEO at SDH - Non KBK	0	26907	28252	7063		35315	4.24	0.00		
242	Sickle Cell	Sr Health Manager (O&G Spl.) - Sickle Cell - Re-designated as Sr Health Manager (Tech.)	0	94568	99296	24824		124120	14.89	0.00		
243		Sr. Manager - Sickle Cell	0	69995	73495	18374		91869	11.02	0.00		
244		Scientific Officer - Sickle Cell	0	69995	73495	18374		91869	11.02	0.00		
245		Accounts Officer (Jr) - (Redesignated as Asst. Manager, Accounts) - Sickle Cell	0	52684	55318	13830		69148	8.30	0.00		
246		Research Assistant - Sickle Cell	0	42917	45063	11266		56329	6.76	0.00		
247		Programme Assistant - Sickle Cell	0	42917	45063	11266		56329	6.76	0.00		
248		Programme Assistant - Sickle Cell Dist.	0	42917	45063	11266		56329	6.76	0.00		

SL No	Division	Position Name	Approved NHM Manpower in 2026-27	Base Remunerati on Approved in 2025-26	Revised Base Remuneration Proposed in PIP 2026-27 (5% increment on base 25-26)	PI (25%) (For SHSRC PI 15%))	KBK Incentive	Total Remunerat ion p.m.	Total Remuneratio n per person per Annum (in Lakhs)	Total Budget per Annum (in Lakhs)	EPF	Remarks
274	DEO	DEO / Medical Records Asstt. - Re-designated as MRA, Public Health Facilities	3		24200			24200	2.90	7.41		N.B.: 1.Contractual employees appointed under OSH&FWS shall be entitled to an annual increment of 5% on the base remuneration of FY 2025–26 , along with Performance Incentive (PI) of up to 25% of the revised base remuneration , subject to performance appraisal and applicable guidelines. 2.Employees engaged through outsourcing under NHM shall be paid remuneration in accordance with the outsourcing norms prescribed by OSH&FWS . 3. Unit Cost Specified in the given column is only an indicative cost for calculation/ estimation purpose .
275		DEO (Comprehensive Skill lab)	0	23555	24733	6183		30916	3.71	0.00		
276		DEOs	0	23555	24733	6183		30916	3.71	0.00		
277	DEO	Computer operator (Immunisation Computer Assistant)/ DEO - Shifted 2 nos. to DEO (NVHCP)	0	35096	36851	9213		46064	5.53	0.00		
278		Computer operator (Immunisation Computer	0	23555	24733	6183		30916	3.71	0.00		
279		DEO (Jr. Prog. Asst., State TB Cell, IRL)	0	30630	32162	8041		40203	4.82	0.00		
280		DEO (NLEP, IDSP)	0	23555	24733	6183		30916	3.71	0.00		
281		DEO (NPCDCS, NPCB)	0	23555	24733	6183		30916	3.71	0.00		
282		DEO at DPMU – KBK	0	23555	24733	6183	800	31716	3.81	0.00		
283		DEO at DPMU - Non KBK	3	23555	24733	6183		30916	3.71	9.46		
284		DEO at DHH (Hosp Strg) - KBK - Re-designated as MRA, Public Health Facilities	0		24200			24200	2.90	0.00		N.B.: 1.Contractual employees appointed under OSH&FWS shall be entitled to an annual increment of 5% on the base remuneration of FY 2025–26 , along with Performance Incentive (PI) of up to 25% of the revised base remuneration , subject to performance appraisal and applicable guidelines. 2.Employees engaged through outsourcing under NHM shall be paid remuneration in accordance with the outsourcing norms prescribed by OSH&FWS . 3. Unit Cost Specified in the given column is only an indicative cost for calculation/ estimation purpose .
285		DEO at DHH (Hosp Strg) - Non KBK - Re-designated as MRA, Public Health Facilities	9		24200			24200	2.90	20.91		
286		DEO at IPHL	1		24200			24200	2.90	2.90		
287		Computer operator (DEO) - Sickle Cell	0	23555	24733	6183		30916	3.71	0.00		
288		Computer operator (Immunization Computer Assistant) (KBK)	0	26907	28252	7063	800	36115	4.33	0.00		
289		Computer operator (Immunization Computer	1	26907	28252	7063		35315	4.24	4.24		

SL No	Division	Position Name	Approved NHM Manpower in 2026-27	Base Remuneration Approved in 2025-26	Revised Base Remuneration Proposed in PIP 2026-27 (5% increment on base 25-26)	PI (25%) (For SHSRC PI 15%)	KBK Incentive	Total Remuneration p.m.	Total Remuneration per person per Annum (in Lakhs)	Total Budget per Annum (in Lakhs)	EPF	Remarks
290		DEO at SLNMCH, Koraput (IDSP)	0	20764	21802	5451	800	28053	3.37	0.00		
291		DEO at ATD&TC, Cuttack	0	20764	21802	5451		27253	3.27	0.00		
292		DEO (KBK)	0	23555	24733	6183	800	31716	3.81	0.00		
293		DEO at DHH (Hosp Strg) - Non KBK - Re-designated as MRA, Public Health Facilities(New)	1		24200			24200	2.90	2.03		N.B.: 1.Contractual employees appointed under OSH&FWS shall be entitled to an annual increment of 5% on the base remuneration of FY 2025–26 , along with Performance Incentive (PI) of up to 25% of the revised base remuneration , subject to performance appraisal and applicable guidelines. 2.Employees engaged through outsourcing under NHM shall be paid remuneration in accordance with the outsourcing norms prescribed by OSH&FWS . 3. Unit Cost Specified in the given column is only an indicative cost for calculation/ estimation purpose .
294		DEO / MRA at Blood Banks (e-Raktkosh) (New)	1		24200			24200	2.90	2.03		
		Total DEO	19		0	0		0	0	48.98	2.86	
		Human Resource (Support Staff at Facility Level)-HRH										
295	SS-F	Multipurpose worker (Masseur)	0	13468	14141	3535		17676	2.12	0.00		
296		NRC Cook cum caretaker	3	13502	14177	3544		17721	2.13	5.10		
297		Lab attendant+Lab attendant at ATD&TC, Cuttack+Lab attendant at CDST	0	12387	13006	3252		16258	1.95	0.00		
298		Attendant - Mobile blood van	0	13468	14141	3535		17676	2.12	0.00		
299		Hospital attendants	0	17226	18087	4522		22609	2.71	0.00		
300		Support Staff -SIHFW	0	18239	19151	4788		23939	2.87	0.00		
301		Driver for Mobile Blood Collection Van	0	19831	20823	5206		26029	3.12	0.00		
		Total SS-F	3							5.10	0.21	
		Human Resource (Support Staff in Offices)-HRH										
302	SS-O	Support staff (NPCB)	0	18239	19151	4788		23939	2.87	0.00		
303		Support Staff / Sweeper (RCH-8, NTEP-2, HSS-2)	0	18239	19151	4788		23939	2.87	0.00		
304		Driver	0	19831	20823	5206		26029	3.12	0.00		
305		Driver	1	19831	20823	5206		26029	3.12	3.12		
306		Balance Fund (Lumpsum)	0						25.80	0.00		N.B. Rs. 25.80 Lakhs has been kept at State level due to Less no. of Positions for Support Services approved in RoP 2026-27
		Total SS-O	1							3.12	0.18	
		Grand Total	311							1281.36	22.27	
		Grand Total (HSS-9) SI No. 185								1303.63		

HSS-10_Enhancing HR

S.No.	Scheme/ Activity	Approval FY 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
	Total Enhancing HR					-	
191	DNB Courses for Medical Doctors					0.00	
191.1	CPS course			-		-	Not Proposed this year
191.2	NBE Diploma Courses	Lumpsum	73560000	735.60	0	-	Detail proposal placed at NBE Write-up Annexure-HSS-10
191.3	NBE- DNB	Lumpsum	14871000	148.71	0	-	Detail proposal placed at NBE Write-up Annexure-HSS-10
192	Training Institutes and Skill Labs					0.00	
192.1	Strengthening of Nursing Institutes & Skill Lab					0.00	The Proposal is for Strengthening skill of pre service candidates
192.1.1	Setting up of Skill Lab (Non recurring)	Per Skill Lab	1000000	10.00	0	0.00	Ongoing Activity, proposed unit cost as approved last year (One time establishment cost (Non recurring) Background : Total skill labs sanctioned- 30 (Comprehensive - 3 & Mini - 27) 1. Comprehensive skill labs : 3 (SNC Berhampur at CON Berhampur, CSL Sundergarh at CON Sundergarh & CSL Capital Hospital BBSR 2. Mini Skill labs : 27 (ANMTC-21, CON -6) Current status: 3 Comprehensive skill labs are conducting trainings for in-service nursing officers , nursing faculties . All 27 mini skill labs are utilised for training of pre-service students. Proposal : Cost for shifting / re-establishment of functional Mini Skill Lab of ANM TC Puri at new ANM TC Building Justification: New ANM TC Buildings have been constructed at . Puri, Nayagarh. Budget Proposed: @ Rs. 10.00 Lakhs per Skill Lab X 2 Skill Labs
192.1.2	Recurring expenses for Skill lab			-			Ongoing Activity, proposed unit cost as approved last year
192.1.2.1	Recurring Expenses for Comprehensive Skill Lab	Per CSL	200000	2.00	0	-	3 Comprehensive skill lab (CSL) @Rs.2.00 lakhs per annum x 3= Rs.6.00 lakhs (CSL at Bhubaneswar, Sundergarh , SNC Berhampur)
192.1.2.2	Recurring Expenses for Mini Skill Lab	Per Skill Lab	25000	0.25	0	-	21 ANMTCs & 6 College of Nursing (Dhenkanal, Kalahandi, Kandhamal, Nawarangpur, Cuttack & Burla)

S.No.	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		State Remarks
					Quantity/ Target	Budget (Rs. Lakhs)	
192.1.2.3	Strengthening of Other Nursing labs (Non recurring)	Per unit	500000	5.00	0	-	Ongoing Activity, proposed unit cost as approved last year (One time Grant under Non-recurring component:) Background: Total 29 Nursing institutions (8 CoN, 21 ANMTCs) are functional. The labs of 08 CoN & 3 ANMTCs (Rayagada, Malkanagiri, Gajapati) were strengthened during PIP 2022-24. As per revised INC New Delhi, MOHFW GoI guidelines the Nursing labs of the institutions are to be updated with advanced skill training models, mannequins etc and which are to be arranged in the designated labs like fundamental lab, community lab, nutrition lab, pre-clinical Science lab etc. of the upgraded Nursing Colleges which are transformed from 3 years GNM course to 4 years B.Sc. Nursing course. Thus the labs of the 05 upgraded Nursing colleges (Kandhamal, Kalahandi, Sundergarh, Nabarangapur and Dhenkanal) are to be strengthened as per the requirement of 4 years degree course. Hence requested additional budget for the set of items as stated below. Proposal: 2026-27: Budget per unit: Proposed for the year 2026-27@ Rs. 5 lakhs per institution per year. (Rs. 4.00 lakhs for models, 3D structure, dummy, articles, instruments and PVC charts. Rs. 1.00 lakhs for furniture, fixture and storage.) Total Budget for 2026-27: Rs. 5.00 lakhs per unit x 5 units
192.1.2.4	Strengthening of Library	per unit per annum	500000			-	No Proposal for Fy 2026-27
192.1.2.5	Computer/ IT lab/ Smart Classroom	per unit per annum	200000	2.00	0	-	Ongoing Activity, proposed unit cost as approved last year (One time Non-Recurring cost) Background: Total 29 Nursing institutions (8 CoN, 21 ANMTCs) . 03 Nursing colleges at Berhampur, Burla and Cuttack are having various courses like B.Sc. Nursing, P.B.B.Sc. Nursing, M.Sc. Nursing & P.B.Diploma Nursing. Students and staffs have to conduct CNE, seminars, workshops, assignments which need interactive screens with audio visual aid in the seminar/multipurpose hall. Hence requested additional budget for the set of items as stated below. Proposal of 1 smart Board for each CoNs (Berhampur, Burla, and Cuttack). Budget Head: i. Digital classroom board with accessories @ Rs. 2.00 Lakhs per unit x 3 = Rs. 6.00 Lakhs Total Budget for 2026-27: Rs. 2.00 Lakhs per unit x 3 units
192.1.2.6	Furniture /fixture for classrooms	Per Classroom	200000			0.00	Proposed under State Budget
192.1.2.7	Outsourcing of teaching services for computer lab	per unit per annum	45000	0.45	0	-	Ongoing Activity, proposed unit cost as approved last year Hiring Computer Instructors for existing computer labs at ANMTCs-21, & College of Nursing-8. Hiring is being done through empanelment process from market.

S.No.	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		State Remarks
					Quantity/ Target	Budget (Rs. Lakhs)	
192.1.2.8	Pre-service development cost						Ongoing Activity, proposed unit cost as approved last year Proposal: 1. For 8 Nursing Colleges @ Rs. 5.00 Lakhs/institution (Dhenkanal, Kandhamal, Kalahandi, Nabarangpur, Sundergarh, CoN Burla, Berhampur & Cuttack) Total Budget for CoN: Rs. 5 lakhs X 8 CoN 2. For 21 ANMTC @Rs. 3.00 Lakhs X 21 ANMTC Head of expenses: Recurring cost like Includes stationery cost, office supplies, internet and telephone expenses, AMC, recurring costs for labs, subscription of journals and other miscellaneous expenses AND POL or arranging transportation for clinical site , Meetings and community visits of nursing students
192.1.2.8.1	Pre-service development cost of CoN	Per unit	500000	5.00	0	-	Ongoing Activity, proposed unit cost as approved last year
192.1.2.8.2	Pre-service development cost for ANMTC	Per unit	300000	3.00	0	-	Ongoing Activity, proposed unit cost as approved last year
192.1.2.9	Technical Advisory Group meeting at state level	per meeting	10000	0.10	0	-	Ongoing Activity, proposed unit cost as approved last year
192.1.2.10	TAG meeting at SNC	per meeting	3000	0.03	0	-	Ongoing Activity, proposed unit cost as approved last year
192.1.2.11	Rewards & Recognition for best performing Nursing personnel (Clinical /Teaching) & meritorious students	Lumpsum	150000	1.50	0	-	Ongoing Activity, proposed unit cost as approved last year Background : To motivate and encourage the best performing staffs from Clinical /Teaching cadre and meritorious students from different courses, provision for felicitation at State level functions. Proposal: Clinical/teaching nursing personnel to be felicitated basing on their achievements and performances& the best performing nursing students from ANM/GNM/BSc/ PBBSc/ MSc / PB Diploma etc. are to be felicitated with for motivation and encouragement. 1) Felicitation to Toppers /Best performers of the Pre-service Nursing students in shape of reward as per the recommendation of the committee 2) Felicitation to best performing Nursing staffs (Education /Clinical) in shape of reward to encourage/motivate the in-service staffs (New initiative). 3) venue arrangement cost 4) Refreshment cost 5) Miscellaneous cost
192.1.2.12	Office contingency for Nursing Management Supportive Unit operational at Directorate of Nursing	Per month	10000	0.10	0	0.00	Ongoing Activity, proposed unit cost as approved last year Background: Provision of fund for Office contingency for NMSU operational at Directorate of Nursing (organizing meeting, procurement for office consumables, printing cost, repair and maintenance, procuring electrical and electronic items , refilling , banner cost, transportation cost if needed , etc) Proposed Budget: Rs.10000/- per month x12 months= Rs. 1.20 Lakhs
192.1.2.13	Faculty Development Program for Nursing Institutions						Budget Proposed under HSS-16_Capacity building incl. training_SI.No.201
192.1.2.14	PG Diploma in Public Health Management (PGDPHM) Courses						Activity Dropped - PGDPHM program under NHM is discontinued from academic year 2026-27 as per OM (F. No. Z- I 801 5/59/2025-NHM-II) dated 11th November 2025.
192.1.2.15	Programmatic Induction for newly joined BPHOs						Budget Proposed under HSS-16_Capacity building incl. training_SI.No.201

S.No.	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		State Remarks
					Quantity/ Target	Budget (Rs. Lakhs)	
192.1.2.16	Onsite mentoring at Delivery point /School & college of Nursing	per visit	8000	0.08	0	0.00	Ongoing Activity proposed unit cost as approved last year The institutions such as CSL at Capital Hospital, CSL at Sundergarh , SNC at College of Nursing Berhampur & Directorate of Nursing will conduct 12 visits each per annum per institution to Govt Nursing training institutions/Delivery points for onsite mentoring and quality assessment Proposed Budget for 2026-27: @ Rs.8000/- Per visit (for a team of two representatives form CLS, SNC & Directorate of Nursing) x 12 visits per annum x 4 institution= Rs. 3.84 Lakhs
192.1.2.17	Guest faculty /Honorarium for New BSc Nursing /Super specialty nursing course	Per session	900	0.01	0	0.00	Ongoing Activity, with revised session cost For strengthening the upgraded Nursing training institutions. Engagement of qualified guest faculty { MSc nursing (10 years teaching experience) /PHD Nursing faculty/ above MBBS or MD/MS Doctors} for taking classes of the graduate and post graduate or Super specialty nursing courses at the 8 upgraded Nursing Colleges and 3 SMTIs (SCB MCH Cuttack, MKCG MCH, Berhampur & VSSMCH, Burla). Each session will be of 90 minutes. Proposed Budget for 2026-27: Rs.900 per session x 30 sessions per institution x 11 institutions=Rs. 2.97 lakhs.
	Total Enhancing HR					-	

HSS-11: Technical Assistance

S.No.	Scheme/ Activity	Proposal 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
	Total Technical Assistance					94.79	
193	SHSRC/ ILC (innovation & Learning Centre)	Lumpsum	14142750	141.43	0	0.00	Details at SHSRC HR Annexure
194	Planning &Programme Management	Lumpsum	9479000	94.79	1	94.79	(As approved by the GoI, Activities Shifted from SL No. 194) 1. Monitoring & Supportive Supervision- GFATM_NVBDGP: Amount- Rs. 98.10 Lakhs (shifted to Sl. No. 64) 2. LQAS Related Cost: Amount- Rs. 6.28 Lakhs (shifted to Sl. No. 64) 3. Programme Review : NVHCP- Amount Rs. 8.84 lakhs , (shifted to to Sl. No. 81.) Details at Annexure - PM Activities
	Total Technical Assistance					94.79	

HSS-14_Untied Grants

S.No.	Scheme/ Activity	Approval FY 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
	Total Untied Fund					143.98	
199	Untied Fund					143.98	
199.1	District Hospitals	Per inst.	1000000	10.00	1	5.00	GoI Norm: Rs.10.00 lakhs per Institution Expenditure during F.Y. 2024-25: 90% Expenditure by November 2025-26: 45% Proposal: Budgeted 50% as final audit report for 2025-26 is yet to be received. Rest 50% fund will be proposed in supplementary PIP, once audit report will be settled.
199.2	SDH	Per inst.	500000	5.00	0	0.00	GoI Norm: Rs.5.00 lakhs per Institution Expenditure during F.Y. 2024-25: 100% Expenditure by November 2025-26: 63% Proposal: Budgeted 50% as final audit report for 2025-26 is yet to be received. Rest 50% fund will be proposed in supplementary PIP, once audit report will be settled.
199.3	CHCs	Per inst.	500000	5.00	11	27.50	GoI Norm: Rs.5.00 lakhs per Institution Expenditure during F.Y. 2024-25: 69% Expenditure by November 2025-26: 46% Proposal: Budgeted 50% as final audit report for 2025-26 is yet to be received. Rest 50% fund will be proposed in supplementary PIP, once audit report will be settled.
199.4	PHCs	Per inst.	150000	1.50	35	26.25	GoI Norm: Rs.1.50 lakhs per Institution Expenditure during F.Y. 2024-25: 77% Expenditure by November 2025-26: 25% Proposal: Budgeted 50% as final audit report for 2025-26 is yet to be received. Rest 50% fund will be proposed in supplementary PIP, once audit report will be settled.
199.5	Sub Centres	Per SC	25000	0.25	189	23.63	GoI Norm: Rs.0.25 lakhs per Institution Expenditure during F.Y. 2024-25: 141% Expenditure by November 2025-26: 56% Proposal: Budgeted 50% as final audit report for 2025-26 is yet to be received. Rest 50% fund will be proposed in supplementary PIP, once audit report will be settled.
199.6	VHSC	Per GKS	10000	0.10	1232	61.60	Background: The total number of GKS in the State is increase to 46164 in place of 46144 (during the year 2024-26). So the revised number of GKS for the year 2026-27 is 46164. GoI Norm: Rs.0.10 lakhs per institution Expenditure during F.Y. 2024-25: 82% Expenditure by November 2025-26: 37% Proposal: Budgeted 50% as final audit report for 2025-26 is yet to be received. Rest 50% fund will be proposed in supplementary PIP, once audit report will be settled.
199.7	Others (please specify)	Per inst.	75000	0.75		0.00	Other Hospital to be converted into PHC and the budget proposed in PHC untied fund.
	Total Untied Fund					143.98	

HSS-15_Snakebite Envenoming

S.No.	Scheme/ Activity	Approval FY 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
	Total SBPC					0.00	Detailed Write-up Justification is at PCMS Annexure
200	Snakebite Prevention and Control (SBPC)					0.00	State mandate: Anti Snake Venom (ASV) shall be made available at all DHHs, SDHs, CHCs, UCHCs, PHCs & UPHCs: : 100%
200.1	Procurement of Anti Snake Venom					0.00	Anti Snake Venom has been procured at State Level with the funding from State Budget. Hence, Budget not proposed.
200.2	Training & Capacity Building						Gol overall normative Budget Limit is Rs. 11.32 Lakhs (5.46 lakhs + 0.196x 30). The Budget proposed is within the Budget Limit. Budget Proposed under HSS-16_Capacity building incl. training_SI.No.201
200.3	IEC/BCC under NRCP						Budget Proposed under HSS-19_IEC & Printing_SI.No.204
200.4	Surveillance & Monitoring						Activity: Monitoring & Supportive Supervision- Utilise the pooled fund available at State/ District/ Block/ Sector Level Budget to be met out of Pooled fund placed at HSS-11_Technical Assistance_ SI.No.194 (Details at Write-up Annexure- Monitoring Supervision)
200.4.1	State Level Surveillance & Monitoring					0.00	
200.4.2	District Level Surveillance & Monitoring					0.00	
200.5	Meeting & Office Expenses						Activities: 1. Review Meetings: 1.1. State Level Review Meeting- Integrated with Half yearly DCP Programme Review Meeting 1.2.District Level Review meetings -Integrated District Level Monthly Meeting 2. Administrative Contingencies for PMUs- Utilise the pooled fund available at State/ District/ Block Level Budget to be met out of Pooled fund placed at HSS-11_Technical Assistance_ SI.No.194 (Details at Write-up Annexure- Joint Reviews & Convergence Meeting, Administrative Contingencies)
200.5.1	State Level Meeting Cost / Office Expenses / Contingency					0.00	
200.5.2	District Level Meeting Cost / Office Expenses / Contingency					0.00	
	Total PCMS					0.00	

Annexure - Capacity Building (Details of trainings proposed under Sl. No. 201)- NHM PIP

Amount in Rs. (Lakhs)

S. No.	Programme/ Theme	Proposed Training/Activity	Cadre(s) to be Trained	No. of Batches/ person	Unit cost (in Rs.)	Batch Size/ Unit of measure	Quarter in which training is planned	Duration (in Days)	Mode of Training (Offline /Online /Hybrid)	Level of Training (State/ District/ Block/ Facility)	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
201.1	A. Integrated Training of Core Cadres											
											21.91	The details write up & Justification for Cadre Based Training (Placed in the Training write-up Annexure Folder)
201.1.1	HSS(R)_CPH C										6.74	Background /Justification: Successful implementation of Comprehensive Primary health Care Services is a shared responsibility of entire SC AAM team. Primarily, the SC AAM team constitutes of CHO, HW-F. In order build the capacity of the SC AAM cadre based training is planned under NHM PIP 2026-27. Module: The given training shall be taken up as per the modules shared by Govt of India. Target 2026-27 : There are 5435 functional SC AAMs in the State but the target is to functionlise 6688 SC AAMs by the end of 2025-26. On priority, in FY 2026-27, about 20% facilities shall be targeted for cadre based training. These 20% facilities shall be identified based on remoteness of the location, facilities in aspirational blocks on priority basis and newly inducted CHOS if any. The nos of facilities targeted in 2026-27 are as follows: - Targeted SC AAM : 1400 (20% of 6688 is 1337)i.e. 45 batches - Total Cost estimates for cadre based training of SC AAM team (CHO+HW-F) The details write up & Justification for Cadre Based Training (Placed in the Training write-up Annexure Folder)
201.1.1.1	HSS(Rural)_CPHC	Cadre Based Training of Community Health Officers at SC-AAMs	CHO	1	336920	Per Batch	Q-2	10	Offline	District	3.37	Training Period : 10 days / year Content of Training Module : State shall follow GoI modules for imparting training . There will be no induction training (e.g. 6 days Induction Training of CHOs,6 days BPS & 8 days EPS training))as implemented in previous years for CHOs. Participants : 1st priority Newly inducted & if not targeted SC AAM identified based on remoteness of the location, facilities in aspirational blocks on priority basis Training will be given in 2 stages i.e. 5+5 in a gap of 2/3 months at district level & in residential in nature. Unit Cost for a batch of 30 participants for 10 days training in residential mode: Rs. @ Rs.336920/- (Unit cost arrived based on calculation as per Odisha Health & Family Welfare Society- OSFWS Norms & detailed unit cost calculation is at Annexure- 5.1, attached at write up document) Cost Estimates (per batch)= @ Rs.336920/- Detailed Cost calculation is under cadre based training write-up Annexure

Annexure - Capacity Building (Details of trainings proposed under Sl. No. 201)- NHM PIP

Amount in Rs. (Lakhs)

S. No.	Programme/ Theme	Proposed Training/Activity	Cadre(s) to be Trained	No. of Batches/ person	Unit cost (in Rs.)	Batch Size/ Unit of measure	Quarter in which training is planned	Duration (in Days)	Mode of Training (Offline /Online /Hybrid)	Level of Training (State/ District/ Block/ Facility)	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
201.1.1.2	HSS(Rural)_ CPHC	Cadre Based Training of HW-Females at SC AAM	HW-F	1	336920	Per Batch	Q-2	10	Offline	District	3.37	Training Period : 10 days / year Content of Training Module : State shall follow GoI modules for imparting training . Participants : HW-f from same SC AAMs shall be covered, where CHOs are targeted for training Training will be given in 2 stages i.e. 5+5 in a gap of 2/3 months at district level & in residential in nature. Unit Cost for a batch of 30 participants for 10 days training in residential mode: Rs. @ Rs.336920/- (Unit cost arrived based on calculation as per Odisha Health & Family Welfare Society- OSFWS Norms & detailed unit cost calculation is at Annexure- 5.1, attached at write up document) Cost Estimates (per batch) : @ Rs.336920/- Detailed Cost calculation is under cadre based training write-up Annexure
201.1.2	HSS(Rural)_ CPHC	Cadre Based Training for Service Providers at PHC Ayushman Arogya Mandirs									0.00	The cadre-based training is also planned especially for MO and Nursing Officer / HW-F posted at PHCs AAMs. Module: The given training shall be taken up as per the modules shared by Govt. of India. Target 2026-27: There are 1264 functional PHC AAMs the State, but the target is to functionalise all 1288 PHC AAMs by the end of this year. On priority, in FY 2026-27, about 20% facilities from each category of facilities shall be targeted for cadre based training. These 20% facilities shall be identified based on remoteness of the location, facilities in inspirational blocks etc on priority basis. The nos of facilities targeted in 2026-27 are as follows: •PHC AAM : 260 (20% of 1288 is 257, hence round up to 260) i.e. 9 batches •Total Cost estimates for cadre-based training of PHC AAM team (MO+ Nursing Officer) The details write up & Justification for Cadre Based Training (Placed in the Training write-up Annexure Folder)
201.1.2.1	HSS(Rural)_ CPHC	Cadre Based Training of Medical Officers at PHC AAMs	MO	0	302000	Per Batch	Q-2	6	Offline	State	0.00	Training Period : 6 days/Year Frequency of Training : Planned for Physical training and in a single phase Unit Cost per Participant for 6 days training for a batch of 30 participants at State level & residential in nature : Rs. 3,02,000 /- (Unit cost arrived based on calculation as per OSFWS Norms & detailed unit cost calculation is at Annexure- 5.2, attached at write up document)

Annexure - Capacity Building (Details of trainings proposed under Sl. No. 201)- NHM PIP

Amount in Rs. (Lakhs)

S. No.	Programme/Theme	Proposed Training/Activity	Cadre(s) to be Trained	No. of Batches/ person	Unit cost (in Rs.)	Batch Size/ Unit of measure	Quarter in which training is planned	Duration (in Days)	Mode of Training (Offline /Online /Hybrid)	Level of Training (State/ District/ Block/ Facility)	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
201.1.2.2	HSS(Rural)-CPHC	Cadre Based Training of HW- Female at PHC-AAMs	HW-F	0	336920	Per Batch	Q-2	10	Offline	District	0.00	Training Period : 10 days /Year Training Frequency : Training will be given in 2 stages i.e. 5+5 in a gap of 2/3 months at district level & in residential in nature. Unit Cost for a batch of 30 participants for 10 days training at district level & residential in nature: @ Rs.336920/- (Unit cost arrived based on calculation as per OSFWS Norms & detailed unit cost calculation is at Annexure- 5.1, attached at write up document)
201.1.3	HSS (Urban)-CPHC	Cadre Based Training of Service Providers at USHC AAMs									0.00	There are 140 UAAM/SHC AAMs in the State, Plan is to convert /upgrade 9 UAAM AAMs to UPHC & create 7 new USHCs as per new frame work. If done so, there will be 138 USHCs in the State in 2026-27 (140-9+7). However, as functionalisation shall take time, shall consider same 140 UAAM/SHC AAMs as functional in 2026-27 for proposing training. As per the mandate, following Service Providers shall undergo cadre based training following modules shared by GoI. Target is to train Service providers from 40% Facilities in 2026-27 i.e 140 X 40% = 56 say 60 UAAM/USHCs. The details write up & Justification for Cadre Based Training (Placed in the Training write-up Annexure Folder)
201.1.3.1	HSS (Urban)-CPHC	Cadre Based Training of Medical Officers at UAAM/SHC AAM	MO	0	302000	Per Batch	Q-2	6	Offline	State	0.00	Unit Cost/Cost Estimates for MO Training (6 days Residential Training at State Level for 30 participants) : Rs. 302000/- (Unit cost arrived based on calculation as per OSFWS Norms)
201.1.3.2	HSS (Urban)-CPHC	Cadre Based Training of Nursing Officer at UAAM/SHC AAM	Nursing Officers	0	336920	Per Batch	Q-2	10	Offline	District/City	0.00	Unit cost / Cost Estimates for Nursing Officers Training (10 days Residential Training at district Level for 30 participants): Rs. 3,36,920/- (Unit cost arrived based on calculation as per OSFWS Norms & detailed unit cost calculation is at Annexure- 5.1, attached at write up document)

Annexure - Capacity Building (Details of trainings proposed under Sl. No. 201)- NHM PIP

Amount in Rs. (Lakhs)

S. No.	Programme/ Theme	Proposed Training/Activity	Cadre(s) to be Trained	No. of Batches/ person	Unit cost (in Rs.)	Batch Size/ Unit of measure	Quarter in which training is planned	Duration (in Days)	Mode of Training (Offline /Online /Hybrid)	Level of Training (State/ District/ Block/ Facility)	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
201.1.4	HSS (Urban)- CPHC	Cadre Based Training for Service Providers at U PHC Ayushman Arogya Mandirs									0.00	There are 116 functional UPHCs in the State. In 2026-27, the plan is to increase no of UPHCs from 116 to 125 by converting UAAM/USHC as per new framework. But, as functionalisation shall take time, hence shall consider Service providers at 116 UPHCs for training during 2026-27. Likewise PHC-AAMs, Service Providers at UPHC AAMs are also be included under cadre based training. Under this initiatives, Medical Officers & Nursing Officers shall be trained for 6days & 10 days respectively. Targeted UPHC AAMs to be covered during 2026-27 i.e. 50% of Total functional 116 UPHC AAMs.i.e, 58 UPHCs say 60 UPHCs i.e. 2 batches MOs targeted for training (6 days residential at State Level) : 2 batches Nursing Officers Targeted for Training (10 days residential at district level): 4 batches (2 per UPHC) Module for Training : Follow as shared by GoI The details write up & Justification for Cadre Based Training (Placed in the Training write-up Annexure Folder)
201.1.4.1	HSS (Urban)- CPHC	Cadre Based Training of Medical Officers at UPHC AAMs	MO	0	302000	Per Batch	Q-2	6	Offline	State	0.00	Unit Cost/Cost Estimates for MO Training : @ Rs. 3,02,000.- per batch (Unit cost arrived based on calculation as per OSFWS Norms, detailed unit cost calculation is at Annexure- 5.2, attached at write up document)
201.1.4.2	HSS (Urban)- CPHC	Cadre Based Training of Nursing Officer at UPHC-AAMs	Nursing Officers	0	336920	Per Batch	Q-2	10	Offline	District /City	0.00	Unit cost / Cost Estimates for Nursing Officers Training : Rs. 3,36,920/- (detailed unit cost calculation is at Annexure- 5.1, attached at write up document)
201.1.5	HSS(Rural)	Other Cadre Based Training for Service Providers across Public Health Facilities									0.00	Background / Justification: State has taken few priorities for focus in this year PIP i.e. 2026-27. Among others, Strengthening Diagnostic Services at all levels is one of them. Further, ensuring functionalisation of Diagnostic services as per standard is a major mandate under NQAS certification. Apart from these, State has planned cadre based training for Physiotherapists at Integrated Physiotherapy wings & Counsellors at Integrated Counselling Centres. The details write up & Justification for Cadre Based Training (Placed in the Training write-up Annexure Folder)

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201.1.5.1	HSS(Rural)	Cadre Based Training of Laboratory Technicians at Public Health Facilities	LTs	0	8754000	Lumpsum	Q-3	7	Offline	District	0.00	In order to strengthen Free Diagnostic Service Initiatives & assure tests as per essential diagnostic list shared by GOI, cadre based training of LTs is planned. Here in the PIP 2026-27, LTs at PHC/UPHCs (Total Nos-1394) are targeted to be covered on priority basis under cadre based Training. Batch Size : 10 Training Period : 7 days/ Year Module: Training module shall be developed at State level for proposed LT training. Estimated Training Budget including Module Development & ToT: RS.87.54 Lakhs Training Plan & Budget Details : Attached at Annexure- 1 of the write up document
201.1.5.2	HSS(Rural/Urban)	Cadre Based Training of Pharmacists at Public Health Facilities	Pharmacists	0	3966000	Lumpsum	Q-2	3	Offline	District	0.00	Background / Justification: State has launched Free Drugs scheme- Niramay & taken several steps to strengthen it. Again, Functionalisation of Pharmacies as per standard is one of the important component of NQAS. Thus, to augment the capacities of Pharmacies & strengthen use of DVDMS at all levels, cadre based training is planned for Pharmacists. In 2026-27, Pharmacists of all PHCs/UHCs are targeted i.e. 1394 in nos. for training. Training Period : 3 days/ Year Batch Size- 40 Participants per Batch & will be taken up at district level No of batches : 35 Module: Training module shall be developed at State level for proposed LT training. Budget Estimates including module Development & ToT : RS.39.66 Lakhs Training Plan & Budget details: Attached at Annexure- 2 of this document

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201.1.5.3	HSS(Rural/Urban)	Cadre Based Training of Physiotherapists at Public Health Facilities	Physiotherapists	0	3510000	Lumpsum	Q-2	5	Offline	State	0.00	In Odisha, there are 568 Physiotherapists in position at CHC, UCHCs, SDHs & DHHS across the State at Integrated Physiotherapy centres. They planned to be trained for 5 days in each year for up gradation of their skill & knowledge to work efficiently in the field. This year , as module shall have to be developed, targeted training for about 50% Physiotherapists i.e. 320 in 16 batches (20 per batch) Training Period : 5 days/ Year Module: Training module shall be developed at State level with the support of professional agencies like NIRTAR & NALD, Kolkata etc Unit Cost :Rs. 2,10,000/- per batch of 20 participants for 5 days Budget Estimates: This year, as module shall have to be developed, targeted training for only about 50% Physiotherapists i.e. 320 in 16 batches @Rs 210000/- per batch X 16 batches =Rs. 33.60 Lakhs + Module development Rs.1.50 Lakhs = Rs.35.10 Lakhs Training Plan & Budget details: Attached at Annexure- 3 of this document
201.1.5.4	HSS(Rural/Urban)	Cadre Based Training of Counselors at Integrated Counseling Centres across Public Health Facilities	Counselors	0	1986000	Lumpsum	Q-2	3	Offline	State	0.00	In Odisha, Integrated Counselling Centres are there in all facilities upto CHC/UCHC level. These centres are manned by 537 Counsellors. In the State, there is no compartmental approach for counseling. It means there are no FP Counsellors , NCD Counsellor as such in the State. In order to train these Counsellors of Integrated Counseling Centres, a 3 days training plan has been framed This year , as module shall have to be developed, targeted training for only 50% Counsellors i.e. 280 in 8 batches (35 participants per batch) Training Period : 3 days/ Year Module: Training module shall be developed at State level Unit Cost : This year , as module shall have to be developed, targeted training for only about 50% Counsellors i.e. 280 in 8 batches @ Rs. 162000/-- per batch X 8 batches = RS.12.96 Lakhs + Rs.1.50 Lakhs for module development + STOT Rs.5.40 Lakhs = Rs.19. 86 Lakhs Training Plan & Budget details: Attached at Annexure- of this document

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Annexure - Capacity Building (Details of trainings proposed under Sl. No. 201)- NHM PIP

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201.2.1.1	Maternal Health	Training of SUMAN Volunteers	SUMAN volunteers	4	28000	40/ Per batch	Q-2 to Q-3	1	Offline	Block	1.12	Proposal for orienting SHGs Federation members in place of SUMAN Volunteers. Background and Problem Statement As per the SUMAN guidelines, one community member with leadership qualities is selected from each revenue village to serve as a SUMAN Volunteer. These individuals are typically PRI representatives, opinion leaders, school teachers, civil society representatives, SHG members etc. However, challenges have been observed in systematically monitoring and coordinating the activities of these volunteers. In line with the decision taken during the NPCC Meeting, it is proposed that the SUMAN volunteer system be replaced in convergence with existing structure of Mission Shakti Dept through orientation of Federation of Women Self-Help Group (SHG)members under Mission Shakti Department. Scope of Coverage& Budget: • In a bid to train members of SHG Federation at District & Block level, training plan has been submitted. Once trained, they will orient to GP Federation members in their regular meetings. • Total Members to be trained:5926 (District Level Federation/PMU – 180 + 338 blocks X 17 members/each Block level Federation = 5746) • SUMAN module will be used to train members of SHG federation. • Batch Size – 40 • No of batches: 148 batches • Budget: Rs. 28000/- per batch Task: • Sensitisation of pregnant & lactating members on services & entitlements • Sample visit to VHNDs& UHNDs • Support ASHAs in delivering MCH services in case of need.
201.2.1.2	Maternal Health	CAC Certification Training	MO & Nursing Officers	0	49000	3/ per Batch	Q-1 to Q-4	12	Offline	Regional	0.00	Background :CAC certification training of MBBS doctors As per key deliverable the State has prospective target for funtionalising 361 facilities. The target of up to 2024-26 was 300 and by Aug 25, 187 have been trained. And by end of March 26, 100% target will be achieved. Current Status: 418 facilities are in readiness (with drugs, equipments & trained manpower) Proposal: Training for 50 MBBS doctors (12 days) from same facility. Proposed for the year 2026-27 :50 Person @ 3 per batch Budget Revised as per recommendation of NPCC

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201.2.1.7.1	Maternal Health	TOT for SBA	O & G Specialist, Paediatric Specialist & Nursing Officers	0	84000	20/Batch	Q-1	3	Offline	State	0.00	To increase resource pool of SAB trainers at 64 SAB Training Venues , 1 batch of ToT for SBA Proposed in 2026-27.
201.2.1.7.2	Maternal Health	SBA Training	Nursing Officers	2	96000	3/ Batch	Q-2& Q-3	21	Offline	District	1.54	SAB Training is proposed on regular basis to ensure Trained manpower at Delivery Points across the State. There are 427 Delivery points functional in the State. Requirement of SAB training is also essential as because of transfer , promotion & retirement of trained staff Training proposed for Nursing Officers at CHCs in the PIP 2026-27. Load for 2026-27: 100 batches @3 per batch Budgeted: 80% as all schedule Training may not happen due to unavoidable circumstances (Availability of Resource Persons, training Site, etc)
201.2.1.8	Maternal Health	BEmOC Training									0.00	
201.2.1.8.1	Maternal Health	TOT for BEmOC Training									0.00	BEmOC training centre is functional at 3 old MCHs & having adequate nos of Resource Persons . Hence, no new proposal in 2026-27
201.2.1.8.2	Maternal Health	BEmOC Training	MO	0	220000	10/batch	Q-1& Q-2	10	Offline	Facility	0.00	BEmOC Training is proposed on regular basis to ensure Trained manpower at Delivery Points across the State. There are 427 Delivery points functional in the State. Requirement of BEmOC training is also essential as because of transfer , promotion & retirement of trained staff Training load for 2026-27: 10 batches @ 10/ batch Status: Till date 1991 trained on BEmOC
201.2.1.9	Maternal Health	Dakshta Training									0.00	
201.2.1.9.1	Maternal Health	TOT for Dakshta	MO & Nursing Officers		204000	15/batch	Q-2	5	Offline	State	0.00	Budget Not Approved
201.2.1.9.2	Maternal Health	DAKSHTA training	MO & Nursing Officers		204000	15/batch	Q-2 & Q-3	3	Offline	District	0.00	Budget Not Approved
201.2.1.10	Maternal Health	RTI/STI Training									0.00	
201.2.1.10.1	Maternal Health	TOT for RTI/STI Training									0.00	90 Master trainers pool is already created at district level. No new proposal in 2026-27

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201.2.2.1	PC & PNDDT Act	Training of District PNDDT Nodal Officers	District PNDDT Nodal Officers	0	79000	35/Per Batch	Q-1	1 day	Offline	State	0.00	Ongoing Activity Name of the Training: State Level training of District PNDDT Nodal Officers Background Justification: About 40% of district Nodal Officers are changing every year. Training will help in Strengthening Registration & renewal process, Inspection & Monitoring, maintenance of records, follow up the cases and Court Compliance, etc. All 30 districts dealing persons also will be part of the training. Progress: One batches training of district PNDDT Nodal Officers is completed. Level of training- State Duration - 1 day Batch Size: 35 Load for 2026-27: 2 batches
201.2.2.2	PC & PNDDT Act	Training/ Capacity building of Judicial Officers/ Prosecuting Officers on PC & PNDDT Act, 1994	Judicial Officers/ Prosecuting Officers	0	55000	30/Per batch		1 day		State	0.00	Ongoing Activity: Name of the Training: State Level Training/ Capacity building of Judicial Officers/ Prosecuting Officers on PC & PNDDT Act, 1994 Justification: The Hon'ble Supreme Court of India in the Judgment dated 15.9.2015 in the WP (Civil) No. 349/2006 have directed that the appropriate authorities / judicial officers shall be periodically imparted training. As per suggestion of MoHFW, in National Programme held on 6.10.2025, joint training may be conducted for Judicial Officers/ Prosecuting Officers/AAs. The said capacity building programme shall be conducted in Odisha Judicial Academy, so that they can be sensitive and develop the requisite sensitivity as projected in the objects and reasons of the Act and its various provisions and in view of the need of the society. The Programme will also act as a convergence between Appropriate Authorities, Judicial Officers and Prosecuting Officers, to file prosecution report appropriately and review Court cases from time to time. Load for 2026-27: 1 batch Duration: 1 day Level of training: State Total Participants: 30
201.2.2.3	PC & PNDDT Act	Orientation/ sensitization for promoting cross-sectoral coordination	Police Intelligence Officials, Executive Magistrates, DLSA Secretary, BDOs, DSWO, DEO, DWO & other officers of	1	17000	20/batch	Q-1	1	Offline	District	0.17	Name of the Training: District level orientation/ sensitization for Police Intelligence Officials, Executive Magistrates, DLSA Secretary, BDOs, DSWO, DEO, DWO & other officers of key Departments on strengthening implementation of PC&PNDDT Act Duration of Training - 1 day Total Batches: 30 batches (one per district) Batch Size: 20 Level of Training: District

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201.2.2.4	PC & PNMT Act	District Level Orientation/ Sensitization Meeting for Strengthening Community Participation	Sarpanchs & Counsellors of 19 selected districts	0	35000	40/ batch	Q-1	1	Offline	District	0.00	Budget Not Approved
201.2.2.5	GVB	Training/ Capacity Building of Doctors & Nursing Officers	Doctors & Nursing Officers	0	100000	40/ batch	Q-1	1	Offline/ Online	State	0.00	Ongoing Activity: Proposal :1 ToT - Training is planned at State level for Doctors & Nursing Officers on Medico Legal examination of Survivors Victims of Sexual Violence, through RPs from 4 key departments of Law, Home, Health & W&CD as per the MoHFW guidelines. Level of training -State Duration - 1 day Batch Size: 40 (4 person per districts) Total Batches: 3 Proposal: 2 District level CME: To be taken-up existing platform
201.2.3	RCH-3										1.32	
Specialised Training												
201.2.3.1	Child Health	NSSK Training for Medical Officers	MO	0	140000	24/ batch	Q-1 & Q-2	2	Offline	State Level	0.00	Ongoing Activity Background: NSSK trainings are to be provided to all medical officers and nursing officers based on the revised NSSK training package. Progress: 8 batches were proposed for medical officers in 2024-26 which. Of which 6 batches completed till Oct. 25 and 126 Doctors (Paed. Specialists, O&G Specialists & MOs) from different institutions have been trained. In the rest two batches another 40 participants are expected to be trained. Level of Training: State Proposal: In order to train at least two O&G Specialists and two Paediatricians in each MCH & DHH and the one Medical Officer each from FRU SDH & CHCs, it is proposed to organize NSSK training in 2026-27. Total target: 32 +14 DHH & MCH x 4 + 28 FRU SDH x 1 + 34 FRU CHC x 1 =184+28+34 = 246 participants Proposal for 2026-27 : 120 participants, i.e. 5 batches

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201.2.3.2	Child Health	NSSK Training for NOs	Nursing Officers	0	133000	24/ batch	Q-1 & Q- 2	2	Offline	State	0.00	Ongoing Activity Background: NSSK trainings are to be provided to all medical officers and nursing officers based on the revised NSSK training package. Level of Training: State Progress: 9 batches were proposed for medical officers in 2024-26 which has been completed. In 9 batches, 209 nursing officers have been trained. Proposal: 2 days NSSK Training for at least 4 nursing officers of all MCHs & all FRUs on revised NSSK module. Target: 94 FRU x 4 NO = 376 participants Proposal for 2026-27 : 120 participants, i.e. 5 batches
201.2.3.3	Child Health	NBSU Training of MOs & Nursing Officers	MO & Nursing Officers	0	114000	25/ Per Batch	Q-2	3	Offline	Regional	0.00	Ongoing Activity: Background: New born mortality is high in Odisha. MOs & SNs working in high case load institutions / FRUs earlier are either retired / transferred. So, the new entrants requires training on new guidelines of NBSU to impart regional level training to MOs & SNs. Level of Training: Regional Progress: Target for 3 days training: 72 NBSUs x 2 MOs = 144 + 72 x 4 NOs = 288, Total load = 438, Trained till 2025-26: 413; Remaining load =25. Proposal for 2026-27: 2 batches Target: 4 new NBSUs x 1 MOs and 4 NOs = 20 +25 remaining = 45, Batch size 25
201.2.3.4	Child Health	FBNC Training for SNCU Service Providers	MO & Nursing Officers	0	220000	30/ Batch	Q-3	4	Offline	State	0.00	Background: 4 days FBNC training is to be provided to MOs & Nursing Officers of all SNCUs as per GoI guidelines and as per MusQan mandate.. Progress: FBNC trainings were proposed for 146 persons during 2022-24. Of which 98 persons were trained in 2022-24. Rest were trained in 2024-25 and then the FBNC module was revised. Therefore training on revised module needs to be imparted all the MOs & NOs in position. During 2025-26, 24 MOs & 88 NOs were trained. Since there is rotation of Nursing Officers from time to time, FBNC training is to be conducted as an ongoing process in order to train the un-trained. Level of Training: State Proposal: To provide FBNC training to untrained MOs & NOs of 45 SNCUs. Participants: 2 NOs & 1 MO from each SNCU per batch Proposal for 2026-27: (45 MOs, 90 NOs) with 30 participants per batch, Total batches proposed = 4 Unit cost for training includes photocopy of modules

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201.2.3.5	Child Health	FBNC Observership for SNCU Service Providers	MO & Nursing Officers	0	222000	6/ batch	Q-3	14	Offline	State	0.00	Background: 2 weeks FBNC observership is to be provided to MOs & Nursing Officers of all SNCUs as per GoI guidelines and as per MusQan mandate. Progress: FBNC observership trainings were proposed for 12 batches during 2022-24. Of which all 12 completed in 2022-24. Achievement till 2025-26: 398. Since there is rotation of Nursing Officers from time to time, observership training is to be conducted as an ongoing process in order to train the un-trained. Level of Training: State Proposal: 2 weeks observership of SNCU MOs & NOs will be conducted at AIIMS BBSR/ SVPPGIP Cuttack, facilitated by 2 in-house RPs and 2 outhouse RPs from state level. Target for 2026-27: 3 with 6 participants per batch, i.e. for 18 participants @Rs.2.97 lakhs per batch
201.2.3.6	Child Health	NNIV Training for SNCU Service Providers	Nursing Officers	0	86000	30/batch	Q-3	1	Offline	State	0.00	New Activity Background: The State has the 4th highest NMR in the country with neonatal mortality contributing to 60% of all under five deaths. SNCUs serve as an important intervention towards management of sick newborns. CPAP machines are being provided to all SNCUs for neonatal non-invasive ventilation (NNIV). Level of Training: State Progress: With support from NNF & Unicef, 10 batches were conducted during 2024-26 for training nursing officers from the SNCUs. Proposal: One day State level Training on neonatal non-invasive ventilation. It is proposed to train the untrained nursing officers from all the 45 SNCUs @4 NOs from each SNCU = 180 participants with batch size 30, so total 6 batches required. In 2026-27, 4 batches proposed to be conducted at SUM Hospital BBSR. Unit cost includes printing of module for all participants.
201.2.3.7	Child Health	FPC-KMC Training	Nursing Officers	0	163000	30/Per Batch	Q-1	2	Offline	State	0.00	Ongoing Activity Background: 2days State Level FPC-KMC training is provided to all nursing officers working in KMC units. Progress: Cumulative load: 105 KMC x 4 = 420. Trained till 2023-24 (Q1) = 258, Remaining Load = 162. Approval in 2024-26= 13 MCH x 10 NOs=130 + 24 DHH x 8 NOs = 192 + 32 SDHs x 5 NOS = 160, i.e. 482 (including remaining load of 162). Cumulative achievement till 2024-26 - 477. Remaining 5 + 2 NOs from 41 new KMC units =87 participants. Batch size 30 Proposal: 3 batches proposed for training 2 NOs each from the new KMC units proposed.

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201.2.3.8	Child Health	SNCU Data Management Training/ Refresher	MO I/c., DEOs & Nursing Officers	0		35/ batch	Q-3	1	Online	State	0.00	Ongoing Activity Background: Since SNCU is a critical care unit and the data is entered in a software by a dedicated DEO, who are mostly outsourced, it is important to train them from time to time on the software along with the SNCU team, i.e. MO i/c & NO i/c. Progress: Proposed during 2024-26, all batches completed. Proposal: One day Review cum refresher training of all SNCU MO I/c., DEOs & Nursing Officers in charge on data entry process and data management Level of Training: State Proposed for 2024-26: 4 batches @35/ batch per year
201.2.3.9	Child Health	NBSU Data Management Training/ Refresher	MO I/c., DEOs & Nursing Officers	0		35/ batch	Q-3	1	Online	State	0.00	Ongoing Activity Background: Since NBSUs cater to newborns who are vulnerable and the data is entered in a software by a dedicated DEO, it is important to train them from time to time on the software along with the NBSU team, i.e. MO i/c & NO i/c. Level of Training: State Progress: Proposed during 2024-26, all batches completed. Proposal: One day Review cum refresher training of all NBSU MO I/c., DEOs & Nursing Officers in charge on data entry process and data management Level of Training: State Proposed for 2024-25: 216 Persons (6 batches @35/ batch)
201.2.3.10	Child Health	Training on Hybrid ICU for Pediatrics Specialists/ MO working at Paed. Hybrid ICUs	Pediatrics Specialists/ MO	0	181000	9/ Batch	Q-2	7	Offline	State	0.00	New Activity: Background: A 7 days training is imparted to Hybrid ICUs for Pediatrics Specialists/ MO working at Paed. Hybrid ICUs Level of Training: State Progress: Target: 29 Paed. hybrid ICUs x 2 MOs & 4 NOs = 174 persons; Batches completed in 2022-26, i.e. 106 persons trained. Continuous training of staffs is proposed keeping rotation of manpower in view. Proposal: 3 batches (including printing of training module @ Rs. 450/- per module for 9 modules per batch)

Annexure - Capacity Building (Details of trainings proposed under Sl. No. 201)- NHM PIP

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S. No.	Programme/ Theme	Proposed Training/Activity	Cadre(s) to be Trained	No. of Batches/ person	Unit cost (in Rs.)	Batch Size/ Unit of measure	Quarter in which training is planned	Duration (in Days)	Mode of Training (Offline /Online /Hybrid)	Level of Training (State/ District/ Block/ Facility)	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
201.2.3.11	Child Health	Observership training on Management of Paediatric Hybrid ICU	Pediatrics Specialists/ MO & Nursing Officers	0	256000	6/ batch	Q-2	14	Offline	State	0.00	New Activity Background: The paediatric specialist/MO and Nursing Officers working in paediatric Hybrid ICU are trained on a 7 days module at State level. However as per their feedback more hands on experience is required on management of paediatric Hybrid ICU. Level of Training: State Progress: 1 doctor and 2 nursing officers from each of the 29 hybrid ICUs are being trained on 7 days Paediatric hybrid ICU management. Till 2025-26 October, 106 trained on 7 days and 42 have been trained on 14 days observership. at AIIMS BBSR. Continuous training of staffs is proposed keeping rotation of manpower in view. Proposal: Therefore 2 weeks observership module is proposed for the already trained participants. 6 persons/batch (2 MOS & 4 Nursing Officers) = 7 batches required. Proposal for 2026-27: 3 batches.
201.2.3.12	Child Health	F-IMNCI Training for Medical Officers	MO	0	303000	30/ batch	Q-1	5	Offline	State	0.00	New Activity: Background: Since module of FIMNCI has been revised from 11 days to 5 days. Trainings for Paed. Specialists/ MOs and NOs are proposed in 2024-26. Level of Training: State Progress: Total load-42 batches, 5 completed and 5 planned in 2024-26. Expected to train 145 participants. Proposal: It is proposed to conduct another 5 batches in 2026-27.
201.2.3.13	Child Health	F-IMNCI Training for Nursing Officers	Pediatrics Specialists/ MO & Nursing Officers	0	263000	30/ batch	Q-1	5	Offline	State	0.00	New Activity: Background: Since module of FIMNCI has been revised from 11 days to 5 days. Trainings for Paed. Specialists/ MOs and NOs are proposed in 2024-26. Level of Training: State Progress: Total load-16 batches, 6 completed in 2024-26. 10 remaining. Proposal: It is proposed to conduct another 3 batches in 2026-27.
201.2.3.14	Child Health	State level ToT on IMNCI		0							0.00	Ongoing Activity: Background: IMNCI training was being implemented in the State previously. However, the module has been revised and ToT & trainings have been conducted during 2024-26. Progress: To conduct district level training of medical officers (@3 MO from non-FRU CHC & 1 MO from PHC) and nursing officers (@9 NO from non-FRU CHC & 1 NO from PHC) from all PHCs and all non-FRU CHCs and all CHOs in position. Total load = 2253 MOs (non-FRU CHC MO-1020, PHC MO-1233) + 4293 NOs (non-FRU CHC NO-3060, PHC NO-1233) + 3634 CHOs. Total batches = 94 batches for MO, 330 batches NO&CHO planned during 2024-26.
201.2.3.15	Child Health	Training of MOs on IMNCI	MO		243000	30/ batch	Q-2	5	Offline	Regional	0.00	Achievement: 70 batches of MO training and 250 batches of NO/CHO training expected to be completed by March 2026..

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201.2.3.16	Child Health	Training of Nursing officers & CHOs on IMNCI	CHO, Nursing Officers		134000	30/ batch	Q-2	5	Offline	District	0.00	Proposal: 5days IMNCI training at Regional & District Level. Remaining 24 batches of MO training and 90 batches of NO training proposed in 2026-27. Activity Dropped as per recommendation of NPCC as it is a part of integrated Training Package of Primary Care
Knowledge Based Training												
201.2.3.17	Child Health	Induction training to MHT Service Providers	MHT Staff	0	304000	40/ Per Batch	Q-1	5	Offline	Regional	0.00	Proposal: 5 days Induction training to MHT staff (Residential regional level training) Total MHT staff strength- 2560 (640 MHTX4) Total no. of MHT staff in-position: 2165 Recruitment for vacant positions (395) is under process and it is expected that 50% of vacant positions (197) will be filled during 2026-27 and these newly joined MHT staff have to undergo Five Days basic training. For the newly joined MHT staff, 5 batches of 5 days basic training (197 MHT staff @ 40 Staff per batch) is proposed during 2026-27. The training will be conducted at regional level and National and State Resource Persons will take the Sessions. Batch Size: 40/ per batch Total 5 batches
201.2.3.18	Child Health	Refresher Training of MHT Service Providers	MHT Staff	1	82000	40/ Per Batch	Q-1	2	Offline	District	0.82	Proposal: 2days Refresher training for RBSK MHT Staff (District level training) Plan: Low performing MHTs will be identified and trained in F.Y. 2026-27. Hence One batch of training has been proposed for each districts. Batch Size: 40 Duration of Training: 2 days Level of Training: District
201.2.3.19	Child Health	HBNC/HBYC Training for strengthening Supportive Supervision	Supervisors	2	25000	30/ Per batch	Q-2	1	Offline	District	0.50	Ongoing Activity Proposal: District level Supportive Supervision training of Supervisors Background: Supervision of HBNC & HBYC program by district & block level supervisors to monitor the quality of visits through ODK application. State ToT & district level trainings on the same were completed in 2024-26. Progress: The trainings were completed in Q1 2025-26 and since then 425 HBNC visits & 133 HBYC visits have been captured across all districts. However, there is a need of further refresher trainings to strengthen its implementation. Proposal: Therefore, one day district level refresher trainings are proposed @2 batches per district

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201.2.3.20	Child Health	Training on HBNC-HBYC web portal	DMRCH, DDM, AM CP, APM, CPM)		74000	30/ Batch	Q-3	1	Offline	State	0.00	Ongoing Activity Background: A web portal has been developed by GoI for capturing HBNC & HBYC reports and shift from manual data transmission to direct portal entry. The portal is being piloted in Odisha and Karnataka prior to roll out. Progress: State level ToT and training on the subject was completed in 2024-25 and field level feedback has been submitted to GoI for modifications. On incorporation of all feedback, it is proposed to conduct a refresher training of all data handlers for implementation. Proposal 1: One day State level refresher training of district level participants (DMRCH, DDM, AM CP, APM, CPM), with total participants = 30 x 3 + 5 CPM = 95 Batch size: 30 is proposed; Proposed batches = 3 Activity Dropped as per recommendation of NPCC due to following reasons: 1. HBNC-HBYC web portal will not be rolled out in isolation, how ever the data elements of HBNCC (Combined HBNC & HBYC) will be included in RCH-2.0 portal
201.2.3.21	Child Health	Training on HBNC-HBYC web portal	(MO I/c, BPM, BDM, APM, DAA),		38000	30/ Batch	Q-3	1	Online	District	0.00	Proposal 2: One day district level training of block/city level participants (MO I/c, BPM, BDM, APM, DAA), Total participants = 314 x 3 = 942 + 30 urban participants = 972. Batch size: 30 Proposed batches: 32 Activity Dropped as per recommendation of NPCC due to following reasons: 1. HBNC-HBYC web portal will not be rolled out in isolation, how ever the data elements of HBNCC (Combined HBNC & HBYC) will be included in RCH-2.0 portal

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201.2.3.22	Child Health	State level training of newborn ambassadors on tracking of high risk newborns	newborn amassadors (Nursing Officers)	0	73000	30/ Batch	Q-1	1	Offline	State	0.00	Ongoing Activity: Background: Odisha has the 4th highest NMR in the country, with 75% of newborns dying within 7 days of birth. Therefore, it is imperative to identify the high risk newborns early (through HBNC) and follow up the high risk cases at least till 1 month, to ensure their survival. Intensive tracking & follow up would help in reducing the neonatal mortality in the State. Progress: The State has identified 29 newborn ambassadors (one each in all aspirational blocks) who follow up LBW, preterm and other high risk babies till 6 weeks and enter their details in an ODK form. An SOP has also been developed for the same. These identified ambassadors were trained and reviewed frequently which helped in tracking of high risk newborns. Till date 3972 newborns have been tracked across 29 aspirational blocks. Proposal: As the aspirational blocks have now increased from 29 to 40 and refresher trainings on the subject are required to strengthen the intervention, it is proposed to organize two batches of one day State level refresher trainings to train the identified newborn ambassadors on the SOP and the modalities & implications of tracking. Accordingly, one day State level training of newborn ambassadors is proposed for 40 participants + 10 State level consultants = 50 persons in 2 batches @ 30 persons/ batch
201.2.3.23	Child Health	Refresher Training on SBSR Module	ADPHOFW, DMRCH, DDM	0	84000	35/ batch	Q-1	1	Offline	State	0.00	New Activity Background: In 2025-26, the SBSR module was incorporated in the MPCDSR module. ToT & Trainings of all data handlers on the module is expected to be completed by March 2026. However, to streamline the reporting in the new portal a refresher training will be required. Level of Training: State Progress: Trainings will be completed by end of March 2026 Proposal: One day refresher of ADPHOFW, DMRCH, DDM of all districts and SUptd. & HMs of all MCH on SBSR module of MPCDSR. Batch size-35, total participants-118. Proposed batches-3
201.2.4	RCH-4	Immunisation									2.59	
Specialised Training												
201.2.4.1	Immunisation	Training of Cold Chain Handlers	Cold Chain handlers	1	57000	24/ batch	Q-1	2	Offline	District	0.57	Proposal : Two days Training of Cold Chain handlers on Hand Book 2024 Participants : I/c of Cold Chain Points (Total Target- 2526) Justification : all Cold Chain handlers shall be trained but in phases Venue :District Level State level ToT shall be completed in 2025-26 load for 2026-27 : 55 batches
201.2.4.2	Immunisation	Orientation of U-Mentor App-State	Programme Officers & Consultants	0	135000	60/Per Batch	Q-1	1	Offline	State	0.00	New Activity Participants : Programme Officers & Consultants at District Level Activity Shifted to specialised Training as recommended by NPCC

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201.2.4.3	Immunisation	Orientation of U-Mentor App-District	Block level Officers	0		60/Batch	Q-2	1	Online	District	0.00	To be taken up online mode for block level Programme Officers & Consultants like Block Programme Manager Activity Shifted to specialised Training as recommended by NPCC
Knowledge Based Training												
201.2.4.4	Immunisation	eVIN Trainings									0.00	
201.2.4.4.1	Immunisation	Training on eVIN & NCCMIS	RVCCM, DVLM & CCTs,	0	89000	40/batch	Q-1	1	Offline	State	0.00	Ongoing Activity Total Participant: 80 (9 RVCCMs, 32 DVLMs , 35 CCTs & State level Participant)
201.2.4.4.2	Immunisation	Training on eVIN	Cold Chain Handlers	1	31000	40/batch	Q-1	1	Offline	District	0.31	Ongoing Activity Total Participant: 1265 Cold Chain Handlers
201.2.4.4.3	Immunisation	Orientation of Programme Officers on New RI Handbooks	District Programme Officers & Consultants	0	184000	40/Per Batch	Q-1	2	Offline	State	0.00	The GoI has released new Routine Immunisation hand Books for MOS , Health Workers & Cold Chain Handlers . Hence to orient them for strengthening Supportive supervision, 2 days training is proposed . Participants : District Level Programme Officers & Consultants (80)
201.2.4.4.4	Immunisation	Training of Medical Officers	MO	0	99000	20/ batch	Q-2	3	Offline	Regional	0.00	Ongoing Activity Proposal : Three days Training of Medical Officers on MO Hand Book 2024 Participants : Newly joined MOs Venue :Regional Training Venue i.e. MKCG MCH, SLN MCH, BB MCH Note : State level ToT shall be completed in 2025-26 Load for 2026-27: @20 per batch Target: 20 batches
201.2.4.4.5	Immunisation	Training of Health Workers	MPHS- M& F HW-F, HW-M	3	57000	24/ batch	Q-2	2	Offline	District	1.71	Proposal : Two days Training of HWs on HW Hand Book 2024 Participants : MPHS- M& F HW-F, HW-M (Total participants-) Justification : all HWs shall be trained but in phases Venue :District Level Note : State level ToT shall be completed in 2025-26 Load for 2026-27: @24 per batch Target: 120 batches
201.2.4.4.6	Immunisation	Training of Programme Officers on UWIN - State Level	ADPHO-FW, DMRCH,DDM, DVLM & ICA		92000	40 / Per Batch	Q-2	1	Offline	State	0.00	Ongoing Activity Proposal : One Day State level Training on U-WIN for District Officials (Participants -ADPHO-FW, DMRCH,DDM, DVLM & ICA) Background/Justification - As the U-WIN Software is being in the process of continuous up gradation, training proposed this year too. Proposal for 2026-27: 2 batches Activity Dropped as per recommendation of NPCC as a part of MO Training Module

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201.2.4.4.7	Immunisation	Training of programme Officers on UWIN- District & Sub district level	Block level Vaccinators,BDM & Private Facilities		31000	40/ Per Batch	Q-2	1	Offline	District	0.00	Ongoing Activity Proposal : One Day District level training on U-WIN for Block level Vaccinators,BDM & Private Facilities Background/Justification -Continuous capacity building efforts are required for desired result - UWIN entry & Updations Proposal for 2026-27: 120 batches (@40 per batch) Activity Dropped as per recommendation of NPCC as a part of MO Training Module
201.2.5	RCH-5										4.45	
Knowledge Based Training												
201.2.5.1	Adolescent Health	Capacity Building/Training of Medical Officers										Not Proposed
201.2.5.2	Adolescent Health	Capacity Building/Training of Counsellors	Counsellor									Proposal: Training of Counselors Justification: Counselors have been in the process of engaged at integrated counseling centers at CHCs/ UCHCs Level. They will be in-place by June 2026. Hence, Training Proposed for all 537 Counselors.(Excluding Mobile Blood Collection van Counsellors) As per the State's decision, an integrated module will be developed to train all counselors of integrated counseling centers where in content on Adolescent Health will also be included. Budget Proposed as part of Carder Based Training of Counselors
201.2.5.3	Adolescent Health	Capacity Building/ Training of ASHAs										Refresher Training will be given to ASHAs as part of cadre based training , hence no additional budget proposed under this head . Budget Proposed as part of Carder Based Training of ASHAs
201.2.5.4	Adolescent Health	Capacity Building/ Training for Peer Education Programme										Re- ToT is planned for training of PEs as PE training has already been given in following years 2017-18 : 2 districts namely Bolangir & Dhenkanal (100% peers i.e. 13464) 2019-20: 2 districts namely Bhadrak & Koraput (100% peers i.e. 15924) 2022-24: 2 districts namely Boudh & Mayurbhanj (100% peers i.e. 16032)
201.2.5.4.1	Adolescent Health	State ToT for training of District Level Master Trainers for PE Programme	AYUSH MO, AM, RBSK/RKSK & DPHCO	0	344000	30/ Per batch	Q-2	5	Offline	State	0.00	Proposal : PEs are there in 6 districts. There are 45424 PEs. But as PEERS generally leave on attainment of 19 years, p proposal is for training of new PEs after selection & hence, ToTs at various levels have planned to be completed this year. New Activity 5 trainers from each district & total 30 participants from 6 districts to be trained at state level by the Trainers trained at National level. Duration of Training : 5 days Batch Size- 30 / per batch Nature of Training - Residential

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201.2.5.4.2	Adolescent Health	District level ToT of Block Level Master Trainers for PE Programme	AYUSH MO, PHEO	0	230000	40/Per batch	Q-3	5	Offline	District	0.00	New Activity 3 trainers from each Block & a total of 219 participants from 73 Blocks to be trained at District level by the District Trainers in 5 batches Duration of Training : 5 days Batch Size- 40 / per batch Nature of Training - Residential
201.2.5.4.3	Adolescent Health	Block ToT for Sub Block Level trainer for PE Programme	HW-F,HW-M	0	114000	40/Per batch	Q-3 & Q-4	5	Offline	District	0.00	New Activity Block level ToT to be proposed for 2 participants (1 ANM & 1 HW-M) from each Sub Centre of 6 PE districts in 2 intervals (3 days + 2 days) Total : 1535 SCs @2 participants =3070 Total Batches: 3070 @40/ participants =77 Batches Nature of training : Non Residential
201.2.5.4.4	Adolescent Health	PE training at Sub Block Level				Per batch					0.00	New Activity Proposal : PEs are there in 6 districts. There are 45424 PEs. But as PEERs generally leave on attainment of 19 years, p proposal is for training of new PEs after selection & hence, ToTs at various levels have planned to be completed this year. The PE training will be conducted in next financial year (2027-28) because selection of Pes and Training of MTs will require time.
201.2.5.5	Adolescent Health	ToT for District Master Trainers for School Health Programme	MO, AM, RBSK/RKSK, Teachers-2	0	200000	40/ Per Batch	Q-1	5	Offline	State	0.00	New Activity State Level ToT : Training for District level MTs on School Health Modules at State Level Master Trainers: 4 participants per district (Education -2 + Health-2 Participants) X 30 districts = 120 Master Trainers Duration of Training : 5 days Proposal: 3 batches with batch size 40 (total 3 @ 4 RPs=120 participants) Budget revised as recommended by NPCC
201.2.5.6	Adolescent Health	ToT for Block Master Trainers for School Health Programme	AYUSH MO-2 , Teacher-2	1	100000	40/ Per Batch	Q-2	5	Offline	District	1.00	New Activity State Level ToT : Training for Block level MTs on School Health Modules at district Level Master Trainers : 4 participants per Block (Education -2 + Health-2 Participants)X 314 Blocks = 1256 Master Trainers Duration of Training : 5 days Proposal: 35 batches (one batch extra for 3 large districts) with batch size 40 (total 35 @ 4 RPs=1256 participants) Budget revised as recommended by NPCC

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201.2.5.7	Adolescent Health	Field Level Training of School Health Ambassadors under School Health Programme	School Health Ambassadors	5	69000	40/ Per Batch	Q-3 & Q-4	3	Offline	Block	3.45	Background: 3 days refresher training of HWAs are proposed for 20% schools in the F.Y. 2026-27 & rest will be taken-up in next F.Y. Total HWAs (25518 X 2 HWAs=51036) HWAs to be trained : 51036 X 20%=10207 Total requirement of Batches : 10207/ 40 per batch =255 batches Budget proposed for : 204 batches (80% of Total Batches) Proposed: 80% as all schedule Training may not happen due to unavoidable circumstances (Availability of Resource Persons, training Site, etc)
201.2.6	RCH-6										0.73	
Specialised Training												
201.2.6.1	Family Planning	TOT on Laparoscopic Sterilization	MO	0	44000	4/ batch	Q-1	5	Offline	State	0.00	Ongoing Activity Proposal: 3 days TOT on laparoscopic sterilization Justification: For acceradation of new laparoscopic sterilization training center at Capital Hospital Bhubaneswar. Total Batch Proposed for 2026-27 1 (4 per batch)
201.2.6.2	Family Planning	Laparoscopic Sterilization training for Team (teams of doctor, SN and OT assistant)	MO, Nursing Officers and OT Assistant	0	112000	3/ batch	Q-1	12	Offline	State	0.00	Ongoing Activity Total trg. Load : 72 (24 Surgeons + 24 Staff Nurses + 24 OT asst) Duration - 12 days training. Progress: Cumm. Trained till March 25 team 420 persons Remaining load 477 - 420 = 57 (14 batches) Target 2026-27: 4 batches (3 per teams)
201.2.6.3	Family Planning	Minilap Training -ToT									0.00	Not Proposed for FY 2026-27,as adequate Nos of Minilap Surgeon are there in Districts /Cities
201.2.6.4	Family Planning	Minilap training for Medical Officers									0.00	Not Proposed for FY 2026-27,as adequate Nos of Minilap Surgeon are there in Districts /Cities
201.2.6.5	Family Planning	NSV Training- ToT										Ongoing Activity ToT : Not proposed
201.2.6.6	Family Planning	NSV Training	MO	0	62000	4/Per Batch	Q-2	5	Offline	District	0.00	Ongoing Activity ToT : Not proposed Proposal for 2026-27: 5 days NSV training of MOs at Selected Dist. Level As per the case load one batch of NSV training proposed in 26-27 (@4 person per batch) at Ghatagaon CHC
201.2.6.7	Family Planning	IUCD insertion Training-ToT									0.00	ToT for IUCD Insertion training have been already saturated. No new proposal proposed this year.

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201.2.8.1	NIDDCP	One Day training of ASHA on STK based testing and counseling of beneficiaries										To be taken up during the Sector Meeting of ASHA.
201.3	Total NDCP										5.69	
201.3.1	NDCP-1	IDSP									0.65	
Knowledge Based Training												
201.3.1.1	IDSP	Training of Rapid Response Teams(RRTs) - ToT	RRT members	0	155000	40/ Per Batch	Q-2	2	Offline	State	0.00	Rapid Response Team (RRT) have been constituted at District & Block Level and attached to IPHL & BPHU respectively as per guidelines. Currently, all 30 IPHLs have been established and made functional & 120 BPMUs are made functional and expected to cover all 314 BPHUs by December 2026. The details of constitution & modalities of operation and Budget has been detailed out in Write-up Annexure. The RRT at District level constituting of 10 members & RRT at Block level is having 7 members . ToT:
201.3.1.2	IDSP	Field Training of Rapid Response Teams (RRT) - District & Block Level Teams	RRT members	1	65000	40/ Per Batch	Q-2 & Q-3	2	Offline	District	0.65	District level Participants: DPHO-30, Epidemiologist-30, Microbiologist-30, Representatives from food security, veterinary department & agriculture department-90, representatives from MCHs (Community Med., General Med. & Micro Biologist- 39) & State Level Participants = 220 nos Total Batches proposed:6 (@40 per batch) Field Training: Total members of Block RRT= 314 X 6= 1884 / 40 =47 batches Module Development & ToT- supported under State Budget & technical support by Jhpiego team Budget Revised as per recommendation of NPCC
201.3.2	NDCP-2										3.29	
Specialised Training												
201.3.2.1	Malaria											
201.3.2.1.1	NVBDCP	Induction Training of LTs on Malaria Microscopy	LT	0	370000	20/Batch	Q-1 & Q-3	10	Offline	State	0.00	Ongoing Activity Justification for separately proposed not as part of cadre based training of LTs : The Malaria Microscopy training is being imparted by ROHFW, GoI, Bhubaneswar. The ROHFW is a specialised training centre for Malaria & Filariasis Microscopy with empanelled WHO certified LTs as resource persons. Induction Training : Training Period for Induction Training : 10 days Batch Size : 20 LTs targeted : 80 new LTs from PHC/CHC Microscopy Centres

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201.3.2.1.2	NVBDCP	Refresher Training of LTs on Malaria Microscopy	LT	0	194000	20/Batch	Q-1 & Q-3	5	Offline	State	0.00	Ongoing Activity Justification for separately proposed not as part of cadre based training of LTs : The Malaria Microscopy training is being imparted by ROHFW, GoI, Bhubaneswar. The ROHFW is a specialised training centre for Malaria & Filaria Microscopy with empanelled WHO certified LTs as resource persons. Refresher Training : Training Period : 5 days Batch Size : 20/Batch LTs targeted : 40 from PHC/CHC Microscopy Centres
201.3.2.1.3	NVBDCP	Induction/Refresher Training of ASHAs on VBDs	ASHA								0.00	Ongoing Activity: Background: In the community level, ASHAs plays a vital role in EDCT & report return of malaria. Along with malaria they also play an active role in prevention & control of other VBDs as per the requirement of the state. In this context, they need to be sensitized every year based on their performance. Budget Proposed: Integrated as part of 10 days Cadre based training of ASHAs . Hence separately not budgeted here.
201.3.2.1.4	NVBDCP	Induction/ Refresher Training of Supervisors on VBDs	MPHS(M/F)	1	38000	40/ Per Batch	Q-1	1	Offline	District	0.38	Ongoing Activity: Background: For supervision of Malaria & other vector borne diseases from sector level, the MPHS(M/F) needs induction as well as time to time refresher training . They will be oriented on the strategic approach for Malaria elimination and implementation of the anti malaria interventions along with report return following the national guidelines. Proposed Load: 30 batches @40/ batch Target 2026-27: 1200 Supervisors
201.3.2.1.5	NVBDCP	Induction/ Refresher Training of MPWs on VBDs	MPW	1	42000	40/ Per Batch	Q-1	1	Offline	District	0.42	Ongoing Activity: Background: In context of malaria elimination, the refresher training of MPWs is highly essential. They need to be sensitized on the strategies of malaria elimination and also the different programme components along with report return as per the need of the programme. Budget Proposed: Proposed Load : 30 batches @40/ batch
201.3.2.1.6	NVBDCP	Induction Training / Refresher of Pharmacists on VBDs	Pharmacists						Pharmacists		0.00	Ongoing Activity: Background: In the context of malaria elimination & other VBDs, the pharmacists need to be sensitized on National Drug Policy & Monitoring & Supervision of supply chain management of NVBDCP. This will minimize the drug expiry at sub-district level. Along with National Drug Policy, they will also be sensitized on the logistic & supply chain management of other VBDs also. Proposed as part of 3 days cadre based training of Pharmacists . Hence, additional budget not projected here.

Annexure - Capacity Building (Details of trainings proposed under Sl. No. 201)- NHM PIP

Amount in Rs. (Lakhs)

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201.3.2.1.7	NVBDCP	Induction Training/ Refresher of CHOs on VBDs	CHOs					CHOs			0.00	Ongoing Activity: Background: CHOs are the new inclusions in programme. In context of malaria elimination CHOs is important as year wise the epidemiological situation of the districts changes with intensification of interventions. Accordingly, they need to be sensitized on the strategies of malaria elimination and also the different programme components along with report return as per the need of the programme. Proposed as part of 7 days cadre based training of CHOs . Hence, additional budget not projected here.
201.3.2.1.8	NVBDCP	Induction Training /Refresher of MOs on VBDs	MO								0.00	Ongoing Activity: Background: MOs have to play a pivotal role in prevention and control of VBDs. Although. They were provided with induction training by SIH&FW and VBD one of the topic, but that is not sufficient in the context malaria and filaria elimination and prevention and control of other VBDs. There is high need of orientation of newly joined MOS on VBDs. It is to be organized at the district level. Proposed as part of 3 days cadre based training of MOs . Hence, additional budget not projected here.
Knowledge Based Training												
	Malaria								Offline		0.00	
201.3.2.1.9	NVBDCP	Refresher Training of District Level Programme Officers	ADPHO(VBD) , ADUPHO & VBDC	0	194000	40 / Per Batch	Q-1	2	Offline	State	0.00	Ongoing Activity: Background: The programme officers needs refresher training on various aspects of programme implementation, strategic approaches, national guidelines & monitoring of anti malaria interventions i.e. disease surveillance, EDCT Service, vector control interventions etc.This will help in proper planning, implementation & effective monitoring at district level. Budget Proposed: Proposed Load: 2 batches

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201.3.2.1.10	NVBDCP	Refresher Training of Block Level Programme Officers	VBDTS	0	166000	40/Per Batch	Q-2	2	Offline	State	0.00	Ongoing Activity: Budget proposed as per OSH&FW, Odisha norm Background: VBDTS are key HR for vector borne disease at Block level for planning, implementation, monitoring & report return. They needs refresher training on programmatic interventions i.e. disease surveillance, vector control interventions, preparation of dossier for disease elimination certification, ODK based monitoring tools, state specific interventions & web based-IHIP Module. Justification: As refresher training is a continuous process, this training should continue in order to enhance the capacity of the of VBDTS to make their performance better. Budget Proposed: Proposed Load: 4 batches
201.3.2.1.11	NVBDCP	Review cum orientation of SSMTCs on VBDs	SSMTC	0	166000	40/ Per Batch	Q-2	2	Offline	State	0.00	Ongoing Activity: Background: The refresher training of SSMTCs is an essential activity as there are rapid changes in the epidemiological scenario of the districts. Apart from laboratory training, they need to be sensitized on the strategies of malaria elimination, the different programme components, microscopic data analysis, report return as per the need of the programme. They will also be reviewed and sensitized on how to use sentinel site data in identifying outbreak signals, preventing outbreaks & to analyze the efficacy of current anti malarial drugs. Budget Proposed: Proposed Load: 2 batches @40/ batch
201.3.2.1.12	NVBDCP	Review cum Orientation of FLAs	FLAs	0	127000	30/ Per Batch	Q-1	2	Offline	State	0.00	Ongoing Activity: Background: The refresher training of FLAs is an ongoing activity in which they are sensitized on PIP, different financial and logistic components of the programme. This year they will be reviewed and sensitized on procurement (GEM portal), PFMS (through online system) and SNA concept. Budget Proposed: Proposed Load: 2 batches @30/ batch
201.3.2.1.13	NVBDCP	Training on Entomological aspects- Vector Control Interventions	VBDC, VBDTS, Entomologists	0	177000	30/ Per Batch	Q-1	3	Offline	State	0.00	Ongoing Activity: Background: Vector control intervention is one of the main pillar for elimination of malaria & prevention /control of arboviral vector borne diseases. For effective vector control intervention the VBDTS , Entomologist & insect collectors will be trained on planning the vector control intervention & hands on training on use of vector control equipment along with monitoring/ evaluation . Budget Proposed: Proposed Load: 2 batches , duration 3 days

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Annexure - Capacity Building (Details of trainings proposed under Sl. No. 201)- NHM PIP

Amount in Rs. (Lakhs)

S. No.	Programme/ Theme	Proposed Training/Activity	Cadre(s) to be Trained	No. of Batches/ person	Unit cost (in Rs.)	Batch Size/ Unit of measure	Quarter in which training is planned	Duration (in Days)	Mode of Training (Offline /Online /Hybrid)	Level of Training (State/ District/ Block/ Facility)	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
201.3.2.3.1	NVBDCP	Management of DF/DHF/DSS for Dengue & Chikungunya	Medicine & Pediatric Specialist	0	62000	25/ Per batch	Q-1	1	Offline	State	0.00	Ongoing Activity: Background: As the dengue transmission has become perennial and cases reported from all the districts of the state. Training on management of DF/DHF/DSS will help the physicians for proper treatment thereby reducing the mortality. This training is planned to be conducted in MCHs. Proposal for FY 2026-27: 1 day training of Medical Officers for 2 batches
201.3.2.3.2	NVBDCP	Training on Vector Control measures for Dengue	Insect collectors ,NFCP Workers , Health Workers and NVBDCP staff	0	76000	40/ Per batch	Q-1	1	Offline	State	0.00	Ongoing Activity: Background: As the dengue transmission has become perennial and significant proportion of cases are reported from the urban areas. It is necessary to train insect collectors ,NFCP Workers & Health Workers of urban area, NVBDCP staff on Dengue Prevention By conducting Larval surveillance and vector control interventions. Proposal for FY 2026-27: 1 day Sensitization of Insect Collector, NFCP workers , HWs & NVBDCP Staff on dengue prevention & control- for 2 batches
201.3.2.3.3	NVBDCP	Training of LTs on Laboratory Diagnosis of Dengue	LT	0	55000	25/ Per batch	Q-2	1	Offline	State	0.00	Ongoing Activity: Background: Sentinel site laboratories are functioning in the state with Laboratory technicians and micro-biologists. Apart from the sentinel sites two ARLs (RMRC & RMRC-BBSR) functioning in the state. The LTs need to be trained on ELISA based test for dengue along with protocol for sending samples to ARLs for sero typing. This will enable accurate laboratory based diagnosis of cases and minimal rejection/invalid samples for sero typing. Proposal for FY 2026-27: One batch of refresher training is proposed on current trends and practices of lab diagnosis of dengue
201.3.2.4	Training on MDA/ELF											
201.3.2.4.1	NVBDCP	State TOT on MDA	District Level Programme Officers & Consultants	0	128000	60 /Per Batch	Q-3	1	Offline	State	0.00	Ongoing Activity Background: It is one of the important activities of ELF/ MDA programme as training for is like cascade manner. So state level ToT is a must for the ELF/ MDA programme . It Provides training/orientation to district level officials on ELF/ MDA . As MDA is implemented in two phases, so two batches proposed. MMDP training will also be integrated with this. Proposal for FY 2026-27: 2 Batches

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201.3.2.4.2	NVBDCP	Training / Orientation of Programme Officers from IUs at District Level	MO, AYUSH MO, PHEO, BPM, VBDS	1	28000	30/ Per Batch	Q-3	1	Offline	District	0.28	Ongoing Activity: Background: 98 IUs are planned for MDA during 2026-27 in unified approach (in August) instead of bi-phage . The implementation level officers planned to be trained at district level on Guidelines/SoP on MDA, planning , monitoring & reporting of the activities. They will be resource person for Block level training.
201.3.2.4.3	NVBDCP	Training of Supervisors at Block /IU Level	MPHS-M&F,MPHW-M&F & CHO	1	31000	40/ Per Batch	Q-3	1	Offline	Block	0.31	Ongoing Activity Supervisors are engaged to support & supervise the Drug Administrators . The supervisors will be trained on micro planning of MDA, drug dose, exclusion criteria, converting refusals, MMDP Services & reporting in prescribed formats and ODK tools. Target 2026-27: 98 batches, @ 40 per batch
201.3.2.4.4	NVBDCP	Training of Drug Administrators	Drug Administraors	948	200	Per DA	Q-3	1	Offline	District	1.90	Ongoing Activity Plan is to train DAs & Supervisors (49250) before MDA (@Rs.200/Person for each training).
201.3.3	NDCP-3										0.24	
Specialised Training												
201.3.3.1	NLEP	Modular training of MOs	MOs	0	146000	30/Per Batch	Q-1	2	Offline	State	0.00	Proposal: Modular Training on Diagnosis, Treatment , Complication management, implementation of different activities including interruption of transmission to achieve the national elimination goal of Leprosy Target : MOs from 186 high endemic Blocks Duration - 2 days Batch size- 30 Venue- Training at state level For 2026-27: 6 batches (MOs from high endemic blocks)
201.3.3.2	NLEP	Training / Refresher of Community Health Officers	CHO								0.00	Ongoing Activity: Background: Community Health Officers (CHOs) are very important in Primary Health Care. Starting from screening of leprosy cases to follow up of treatment, motivation of G2D cases for RCS, referring lepra reaction cases to higher centers etc. are the responsibilities of the CHOs. So a reorientation training on NLEP (National Leprosy Eradication Programme) to all CHOs in phased manner is very important for successful implementation of programme and achieving the target by 2027 as fixed by Govt. of India. Proposal: Integrated with cadre based training of CHOs , hence no additional budget proposed.

Annexure - Capacity Building (Details of trainings proposed under Sl. No. 201)- NHM PIP

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Amount in Rs. (Lakhs)

S. No.	Programme/ Theme	Proposed Training/Activity	Cadre(s) to be Trained	No. of Batches/ person	Unit cost (in Rs.)	Batch Size/ Unit of measure	Quarter in which training is planned	Duration (in Days)	Mode of Training (Offline /Online /Hybrid)	Level of Training (State/ District/ Block/ Facility)	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
201.3.4.1.1	NTEP	Comprehensive Training of District Microbiologists on ZN microscopy, TruNAT, CBNAAT, IGRA/CyTB and EQA	Microbiologists	0	108000	15/batch	Q-1	5	Offline	State	0.00	Ongoing Activity Justification: This is required for ensuring quality of testing in the laboratory and will enhance capacity building of lab technicians. Microbiologists posted at DHH to be engaged in this activity. They will travel to laboratory and will supervise and monitor lab persons. In addition these microbiologists will train identified LTs from blocks on EQA (district will identify LTs from blocks who will be utilized as STLS for NTEP EQA activities at block and sub-block level laboratories) at district level. State Load: 75 microbiologists at district level Required load for 2026-27: 5 batches (15/ per batch) Duration of the training :5 days Implementing agency: ATD & TC , Cuttack Provide 60% Accommodation. No RP fees for ATD&TC faculties.
201.3.4.1.2	NTEP	Refresher Training of STLS on EQA at ATD & TC , Cuttack	STLS	0	70000	15/batch	Q-1	3	Offline	State	0.00	Ongoing Activity Justification: STLS need refresher training on EQA for ensuring quality component of laboratory STLS in place = 77 Required load for 2026-27 : 3 batches (15/batch) Implementing agency: ATD & TC , Cuttack Provide 60% Accommodation. No RP fees for ATD&TC faculties. Duration of the training :3 days
201.3.4.2	NTEP	District Level Training										
201.3.4.2.1	NTEP	Training of TB Champions	TB Champions						Offline	District level	0.00	Re-orientation of TB Champions shall have been planned in monthly meeting platforms.
201.3.4.2.2	NTEP	Training of LTs on EQA, Trunat & Microscopy	LT					1	Offline	District Level	0.00	Budgeted under HSS as part of Cadre based training for LTs
201.3.4.2.3	NTEP	Training of Staff from Mobile Health Units on case detection.	MHU Staff	0		40/Batch	Q-1 & Q-2	2	Offline	District Level	0.00	Budgeted under State Fund
201.3.4.2.4	NTEP	Training on differentiated TB Care	MOs, STS ,STLS & TBHV	2	28000	30 Per Batch	Q-2	1	Offline	District	0.56	Ongoing activity Training of staff (MOs @4 per DHHs, @2 per SDHs, @2 per CHCs & @1 per PHCs/ UPHCs, 319 -STS, 109- STLS, 72-TBHV Staffs at District level) Total Load: 2436 Target for 2026-27: 81 batches Justification: Training will improve success treatment outcome & will reduce TB mortality. Implementing agency: DTC Duration of the training :1 day NB: SC AAM team including CHOs will be covered as part of cadre based training.

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Annexure - Capacity Building (Details of trainings proposed under Sl. No. 201)- NHM PIP

Amount in Rs. (Lakhs)

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201.3.4.3.2	NTEP	Training of MOTC on NTEP at ATD & TC.	MO	0	846000	Lumpsum	Q-3	5	Offline	State	0.00	Ongoing Activity Justification: As guideline has been revised so it is suggested to orient DTOs on Revised guideline. State load: MOTC-318 at CHC level Target for 2026-27: 60 person (3 batches) Batch Size: 5 days training @20 per batch Unit cost@ Rs. 136000/- per batch(Expenditure may be booked as per society norms) Implementing agency: ATD & TC , Cuttack . Provide 60% Accommodation. No RP fees for ATD&TC faculties.
201.3.4.3.3	NTEP	ToT for training to Community Health Officers	CHOs								0.00	Integrated with CHO Cadre based training , hence no additional budget proposed.
201.3.4.3.4	NTEP	Training on EQA for DTOs	DTOs								0.00	Activity taken-up during 2025-26
201.3.4.3.5	NTEP	Capacity building workshop on Data Management (NIKSHAY/ NIKSHAY AUSADHI)	DPC/HQ STS/any person handling Ni-kshay	0	363000	Lumpsum	Q-2	2	Offline	State	0.00	Ongoing Activity Justification: This is required for staff under NTEP to increase their technical and managerial expertise in NIKSHAY /Nikshay Ausadhi. Implementing agency: State TB Cell Duration of the training :2 days State load : 62 (2 NTEP staffs from each district - DPC/HQ STS/any person handling Ni-kshay). In 2 batches (@30-32/batch) Target for 2026-27:2 Batches (@ 30-32/batch) Unit cost@ Rs. 120000/- per batch(Expenditure may be booked as per society norms)
201.3.5.	NDCP-5										0.00	
Specialised Training												
201.3.5.1	NVHCP	Training of Medical Officer at Treatment Sites	MOs	0	50000	34/ Per Batch	Q-2	1	Offline	State	0.00	Background: Existing Model Treatment Centers- 2 Nos (MKCG & SCB MCH) Existing Treatment Centers- 32 Nos Proposed: Treatment Centers (as per the decision in the NPCC meeting): 32 (all SDHs) Total Model/Treatment Centers: (Existing + New)= 66 Nos Training Proposed: 1 day Training of Medical Officer at Treatment Centers at State level (2 batches) Unit Cost Revised As approved by GoI
201.3.5.2	NVHCP	Training of Peer support at Treatment sites	MTCs/ TCs	0	50000	34/ Per Batch	Q-2	1	Offline	State	0.00	Training Proposed: 1 day Training of Peer support at Treatment sites (MTCs/ TCs) (2 batches) Unit Cost Revised As approved by GoI

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201.3.5.3	NVHCP	Training of Pharmacist at Treatment sites	Pharmacist	0	50000	34/ Per Batch	Q-2	1	Offline	State	0.00	Training Proposed: 1 day Training of Pharmacist at New Treatment sites (MTCs/ TCs) Unit Cost Revised As approved by GoI
201.3.5.4	NVHCP	Training of DEOs at Treatment sites	DEO	0	50000	34/ Per Batch	Q-2	1	Offline	State	0.00	Training Proposed: 1 day Training of DEOs at Treatment sites (MTCs/ TCs) (1 batch) Unit Cost Revised As approved by GoI
201.3.5.5	NVHCP	Training of District Nodal Officers/ District Coordinators	Nodal Officers/ District Coordinators									1 day Training of District Nodal Officers/ District Coordinators Activity already done in the FY 2024-25, hence not proposed
201.3.5.6	NVHCP	Training of MHU Team	Service Providers of Mobile Health Units	0	46000	40/Batch	Q-1	1	Offline	State	0.00	Total Participant: 2 participants from each MHU x 177 MHUs=354 Total Batch: 9 @ 40/ per batch Budget approved after discussion in NPCC Meeting
201.3.6	NDCP-6										0.20	
Specialised Training												
201.3.6.1	NRCP	Training & Capacity Building										
201.3.6.1.1	NRCP	State ToT	MO	0	77000	32/Per batch	Q-1	1	Offline	State	0.00	Ongoing Activity Background/Current Status Name of the training: Training of Medical Officers Two Medical Officer from each district is to be trained as District ToT at the State level Batch Size: 32 x 2 = 64 participants Duration: 1 day

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201.4.3.1	NPHE	Training on Physiotherapist on ICU/ CCU & Stroke Management	Physiotherapist	0	528000	16/ Per Batch		4 days	Offline	National	0.00	Proposal: Training on Physiotherapist on ICU/ CCU & Stroke Management Place of Training: AIIMS New Delhi Period of Training: 4 days Nature of Training: Residential Batch Size: 16 No. of batches: 2 (All DHH to be covered & one from each DHH) Budget for a Batch of 16: Course Fees: @8000/- X 16 participants = Rs. 1.28 lakhs Boarding/ Lugging: @Rs.3000/- X 5 days= @Rs.15000/- X 16 participants = Rs. 2.40 lakhs Travel Cost: @Rs.10000/- X 16 participants = Rs. 1.60 lakhs Total Budget Per Batch: Rs.5.28 lakhs Not integrated with Cadre based training as this training is only meant for Physiotherapists posted at DHH level Budget Recommended in the NPCC Meeting
201.4.3.2	NPHE	Training of newly joined Physiotherapists	Physiotherapists									Proposal: Training of newly joined Physiotherapists Integrated with Cadre based Training of Physiotherapists , hence no additional budget proposed
201.4.4	NCD-4										0.74	
Specialised Training												
201.4.4.1	NTCP	Training/ Capacity Building of enforcement squads	Enforcement squads	1	24000	50/ Per Batch	Q-1	1/2 day	Offline	District	0.24	Nature of Activity: Ongoing The proposal is to re-orient existing members of enforcement squads and include new members so as to conduct village level enforcement as part of tobacco free village initiatives. Duration: 1/2 day Batch Size: 50 Level of training: District Level
201.4.4.2	NTCP	Training/ Capacity Building- For certification of Schools/ Colleges.	School Health Ambassadors	1	25000	30/ Per Batch	Q-2	1	Offline	District	0.25	District Level Activity/ Training: One day district level Training of School Health Ambassadors for rolling out of Tobacco Free Educational Institutions Initiatives in additional 1000 Schools/ Colleges across the State Budget : @ Rs. 25000/- per batch (30 participants per batch) X 34 batches = Rs.8.50 Lakhs Details of Budget & Write-up is at NTCP Write-up Annexure
201.4.4.3	NTCP	Training/ Capacity Building- For Tobacco Free Village initiatives	Sarpanchs , Tobacco Free Village Ambassadors and HW-M	1	25000	30/ Per Batch	Q-2	1	Offline	District	0.25	District Level Activity/ Training: Sensitization of Sarpanchs , Tobacco Free Village Ambassadors and HW-M from the System for rolling out of Tobacco Free Village initiatives in 600 selected villages across the State Batch Size: 30 Details of Budget & Write-up is at NTCP Write-up Annexure

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201.4.4.4	NTCP	Training of Dentists at SCB, Dental College on operational modalities of TCC & Pharmacotherapy	Dentists		147000	30/ Per Batch	Q-2	2	Offline	State	0.00	Details of Proposal: 1. Two days Training of Dentists at SCB, Dental College on operational modalities of TCC & Pharmacotherapy etc. Batch size- 30 Duration -2 days Total batches planned: 2 Details of Budget & Write-up is at NTCP Write-up Annexure Activity Dropped As per Recommendation of NPCC
201.4.4.5	NTCP	Training of Counselors	Counselors		29000	30/Batch	Q-1	1	Offline	State	0.00	Training of Counsellors of these 60 CHCs at State level As this counsellor training is exclusively designed for DHHs & SDHs with TCC, separately proposed. Batch size- 30 Duration -1 day Total batches planned -2 Activity Dropped As per Recommendation of NPCC
201.4.5	NCD-5										0.60	
Specialised Training												
201.4.5.1	NP-NCD	Three months ICU case management training of Medical officers & Nursing Officers	Medical officers & Nursing Officers	0	3397000	20/ Per Batch	Q-2	90	Offline	State	0.00	Proposal : Three months ICU case management training of Medical officers & Nursing Officers Status : Over the years, 131 numbers of Medical Officers and 172 Nursing Officers have undergone ICU training. However, due to high levels of attrition and establishment of new ICUs, three months of training on Critical care case management is proposed. Plan : 1 batch of training Batch Size : 20 (10 MOs + 10 NOs) Venue of Training : SCB, Cuttack (Level: State Level)
201.4.5.2	NP-NCD	State level Training on STEMI for Medicine Specialists / MOs	Medicine Specialists	0	147000	30/ Per Batch	Q-2	2	Offline	State	0.00	Proposal: Two (2) Days State level Training on STEMI for Medicine Specialists / MOs Batch size-30. Duration of Training- 2days. Target for 2026-27: 4 Batches This year plan is extend STEMI facilities to additional 65 CHCs & thus training is proposed in 2 batches and also for those Spokes are not functional inspite of earlier training (2 batch).
201.4.5.3	NP-NCD	State level Refresher Training on Stroke Management for Medicine Specialists/ Casualty MOs at DHHs	Medicine Specialists/ Casualty Mos	0	147000	30/ Per Batch	Q-3	2	Offline	State	0.00	Proposal: Two (2) Days State level Refresher Training on Stroke Management for Medicine Specialists/ Casualty MOs at DHHs Batch size-30. Duration of Training- 2days. Target for 2026-27: 1 Batches

S. No.	Programme/ Theme	Proposed Training/Activity	Cadre(s) to be Trained	No. of Batches/ person	Unit cost (in Rs.)	Batch Size/ Unit of measure	Quarter in which training is planned	Duration (in Days)	Mode of Training (Offline /Online /Hybrid) Facility	Level of Training (State/ District/ Block/ Facility)	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
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Annexure - Capacity Building (Details of trainings proposed under Sl. No. 201)- NHM PIP

Amount in Rs. (Lakhs)

S. No.	Programme/ Theme	Proposed Training/Activity	Cadre(s) to be Trained	No. of Batches/ person	Unit cost (in Rs.)	Batch Size/ Unit of measure	Quarter in which training is planned	Duration (in Days)	Mode of Training (Offline /Online /Hybrid)	Level of Training (State/ District/ Block/ Facility)	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
201.4.7	NCD-7										0.00	
Specialised Training												
201.4.7.1	NPCCHH	Training of Specialists on Heat Stroke Management	Medicine Specialists	0	94000	30/ Per Batch	Q-2	1	Offline	State	0.00	Type of trainings proposed: 1) Training of Specialists on Heat Stroke Management, Management of Chest clinic (2 Batches) 2) Training of Programme officers on ARI Surveillance, Kayakalpa green & eco-friendly theme (8 Batches)
201.4.7.2	NPCCHH	Training of Specialists on Management of Chest clinic	Pulmonologists	0	94000	30/ Per Batch	Q-2	1	Offline	State	0.00	
Edge Based Training												
201.4.7.3	NPCCHH	Training of Programme officers on ARI Surveillance, Kayakalpa green & eco-friendly theme	Programme Officer	0	94000	30/ Per Batch	Q-3	1	Offline	State	0.00	
201.4.8	NCD-8										0.00	
Specialised Training												
201.4.8.1	NOHP	Capacity Building/ Training of MO Dental	MO Dental	0	192000	40/batch	Q-2	2	Offline	State	0.00	New Activity Proposal: 2days Training of dental MO on Oral Pre Malignant Disease. Batch Size: 40 Priority facilities: DHHs/ SDHs/ Major CHCs Level of Training: State Venue - AHPGIC/ SCB dental College
201.4.9	NCD.9										0.00	
Specialised Training												
201.4.9.1	NPPC	Capacity Building/ Training	MO	0	91000	40/ Per batch	Q-1	2	Offline	State	0.00	Cost Norm: Maximum of Rs. 2.00 lakhs per district X 30 Districts = Rs.60.00 lakhs as per guidelines for District level Training). Proposal: 1. Training of SHC AAM Team- It is proposed as part of carder base training of SC AAM Team. Hence, no additional budget proposed under this section. 2. Training of Medical Officers of PHC/ UPHC AAM- It is proposed as part of carder base training of MO at PHC AAM. Hence, no additional budget proposed under this section. 3. Training of MHU Team on Home Based Palliative Care There are 177 MHUs functional across the State, which has three clinical service providers i.e. MO AYUSH, ANM & Pharmacist. The plan is to train MO AYUSH & ANM on home based palliative care. Duration of Training: 2 days (non residential) Level of Training: State Batch Size: 40 No. of Batches: 9 Budget approved after discussion in NPCC Meeting

S. No.	Programme/ Theme	Proposed Training/Activity	Cadre(s) to be Trained	No. of Batches/ person	Unit cost (in Rs.)	Batch Size/ Unit of measure	Quarter in which training is planned	Duration (in Days)	Mode of Training (Offline /Online /Hybrid)	Level of Training (State/ District/ Block/ Facility)	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
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Annexure - Capacity Building (Details of trainings proposed under Sl. No. 201)- NHM PIP

Amount in Rs. (Lakhs)

S. No.	Programme/ Theme	Proposed Training/Activity	Cadre(s) to be Trained	No. of Batches/ person	Unit cost (in Rs.)	Batch Size/ Unit of measure	Quarter in which training is planned	Duration (in Days)	Mode of Training (Offline /Online /Hybrid)	Level of Training (State/ District/ Block/ Facility)	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
201.5.1.4.1	HSS_U 4	Training on Quality Assurance	Propogamme Officers , Managers & Service Providers from targted Facilities	0	186000	40/ Batch	Q-1 & Q 2	2	Offline	State	0.00	Ongoing Activity: Proposal for 2026-27 Total UPHC = 116 UPHCs received NQAS Certification by Mar-26 = 53 (Currently certified -48) Targeted 2026-27 : 34 Justification : Training on QA will be provided to the service providers of the targeted facilities as well as Programme Managers to provide hand holding support. Training Plan : Total participants : 184 Participants per UPHC - 3 participants (Doctor/-1, Phar./ LT/ Nurse- 2) from 34 targeted facilities for NQAS certification for 2016-27 & CPM/APM- 39 Nos. Total no. of participants from UPHC= 34 UPHCs x 3 participants per UPHC + 43 PHM + 39 CPM/APM = 184 Total participants = 184 Nos. Duration - 2 days
201.6	Total HSS-Rural										3.92	
201.6.1	HSS-1										0.00	
Specialised Training												
201.6.1.1	CPHC	Trainings for Ayushman Arogya Mandir (AAM)									0.00	Proposed as part of Cadre Based Training of CPHC team
201.6.1.2	CPHC	Certificate course in Primary Health Care management (CPHM) for CHOs	CHOs	0	2500	1	Q-1 to Q-4	365	Online	State	0.00	Organised by PGI Chandigarh with knowledge partner NHSRC, AIIMS Delhi, NIIHW Sponsored by NHM for 1000 CHOs per year Methodology: 1 year online course with contact session, assignment, pre/post test and physical OSCE at CHC level. Status: 1252 CHOs attended CPHM Load 2026-27: 1000 CHOs Budget approved after discussion in NPCC Meeting
201.6.2	HSS-2										0.82	
Specialised Training												
201.6.2.1	Blood Services	Field level Training of MOs	Mos	2	41000	30/ Per Batch	Q-1	1	Offline	District	0.82	Proposal: One day district level refresher training of Medical Officers on Sickle Cell disease & Thalassemia Level of Training: District Level Batch Size: 30 Total Batches: 79

Annexure - Capacity Building (Details of trainings proposed under Sl. No. 201)- NHM PIP

Amount in Rs. (Lakhs)

S. No.	Programme/ Theme	Proposed Training/Activity	Cadre(s) to be Trained	No. of Batches/ person	Unit cost (in Rs.)	Batch Size/ Unit of measure	Quarter in which training is planned	Duration (in Days)	Mode of Training (Offline /Online /Hybrid)	Level of Training (State/ District/ Block/ Facility)	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
201.6.2.2	Blood Services	Training of Blood Bank/Blood Storage Unit (BSU)	MO & LTs	0	193000	30/batch	Q-2	3	Offline	State	0.00	Ongoing Activity Justification: 30 new BSUs proposed in 2026-27. Training requirement 30 x 2 (MO 1 + LT 1) = 60. Total trained = 229 , excess achievement due to transfer & retirement. In view of transfer & retirement every year. Level of Training: State Level Target for 2026-27: 2 batch Batch Size: 30/ batch
201.6.2.3	Blood Services	Field Level Training of CHOs	CHOs		36000	40/ Per Batch	Q-1	1	Offline	District	0.00	Proposal: One day District level refresher training of CHOs on Sickle Cell disease & Thalassemia Level of Training: Block Level Batch Size: 40 Total Batches: 134 Training will be integrate with Cadre Based Training of CHOs. Hence Activity is dropped
201.6.2.4	Blood Services	Field Level Training of ANM & ASHA	ASHAs								0.00	Training will be integrate with Sector Meeting/ ASHA Cadre Based Training
201.6.3	HSS-3										0.00	
Specialised Training												
201.6.3.1	CPRC	Training of ASHAs									0.00	Proposed as part of Cadre Based Training of CPHC team
201.6.3.2	CPRC	Training/ Orientation-VHSNC/ GKS									0.00	Already Completed. Hence no new proposal in the current year.
201.6.4	HSS-4	Public Health Institutions as per IPHS norms									0.00	
201.6.4.1											0.00	
201.6.5	HSS-5										0.00	
Specialised Training												
201.6.5.1	Referral Transport	Training/orientation (Ambulance)									0.00	Outsourced Agency managing 108 Ambulance Services conduct training on periodic Interval to their staff. Hence, no additional budget proposed here in this section.
201.6.6	HSS-6										0.99	
Specialised Training												
201.6.6.1	Quality Assurance	Training of Trainers for NQAS Certification	DMO-MS, AM-QA, Hospital Manager, Selected MO	0	186000	40/Per Batch	Q-1	2	Offline	State	0.00	Batch Size: 40 Period of Training: 2days Level of Training: State No. of Batches Proposed: 3

Annexure - Capacity Building (Details of trainings proposed under Sl. No. 201)- NHM PIP

Amount in Rs. (Lakhs)

S. No.	Programme/ Theme	Proposed Training/Activity	Cadre(s) to be Trained	No. of Batches/ person	Unit cost (in Rs.)	Batch Size/ Unit of measure	Quarter in which training is planned	Duration (in Days)	Mode of Training (Offline /Online /Hybrid)	Level of Training (State/ District/ Block/ Facility)	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
201.6.6.2	Quality Assurance	Field Level Training for NQAS Certifications	PHC/CHC/SDH - MO & Paramedics (1)/SC AAM-CHO & ANM	1	65000	40/Per Batch	Q-1	2	Offline	District	0.65	2 days Quality Assurance Training at District Level for PHC /CHC/SDH(MO, Pharmacist/LT/SN) & HWC SC (CHO/ ANM) from targeted PHC & AAM SC. Batch Size: 40 1 batch for 14 districts having less than 10 Block and 2 batches for 16 districts having 10 or more blocks for creating pool of master trainer & internal assessors. Total 46 batches of training will be conducted and 1840 persons will trained. Budget Revised as per recommendation of NPCC
201.6.6.3	Quality Assurance	State Level Training for NQAS Certification of IPHLs	Total (4) i.e. Pathologist/ DMO-MS, Micro-Biologist, LT-1 & Hosp. Manager	0	150000	40/ Per Batch	Q-2	2	Offline	State	0.00	New Activity Total IPHL : 30 in 30 districts Currently fully functional IPHLs : 10 Duration of Training: 2 Days Participants: Pathologist/ DMO-MS, Micro-Biologist, LT-1 & Hosp. Manager Batch Size: 40 Total Batch: 1 Budget Revised as per recommendation of NPCC
201.6.6.4	Quality Assurance	IMEP Training	Service Providers at Facility Level								0.00	Planned to take-up with the funding from State Budget. There is a specific scheme for strengthening BMW initiatives across the facilities.
201.6.6.5	Quality Assurance	Kayakalp Trainings									0.00	
201.6.6.5.1	Quality Assurance	Kayakalp: External assessor training at State level	Programme Officers & Consultants	0	22000	50/ Per Batch	Q-2	1	Offline	State	0.00	External assessor training at state level (1 batch), 50 participants - Rs.60,000/-
201.6.6.5.2	Quality Assurance	Kayakalp: Internal Assessor Training at District Level	DPHO, ADPHO (FW), Hospital Superintendent of DHH/SDH/CHC, MO PHC, HM/Jr. HM/BPM, PHEO, DPM, DMRCH, AM QA, Epidemiologist,	1	34000	40/Per batch	Q-2	1	Offline	District	0.34	Participants- DPHO, ADPHO (FW), Hospital Superintendent of DHH/SDH/CHC, MO PHC, HM/Jr. HM/BPM, PHEO, DPM, DMRCH, AM QA, Epidemiologist, Microbiologist, etc. working at District Level for creating a pool of Internal Assessor & selected CHO Training Unit Cost/ Cost Estimates :@Rs.34,000/- per batch for 46 batches = Rs.15,64,000/- Training Batches : 1 batch for 14 district having less than 10 Block and 2 batch for 16 districts having 10 or more blocks for creating pool of master trainer & internal assessors.
201.6.7	HSS-7										0.00	
Specialised Training												
201.6.7.1	Other Initiatives to improve access	Refresher training of PHC Team - PHC-N Managed Projects	MO & Nursing Officers									Projected as part of Cadre based training of PHC teams as per guidelines . Budget for the same shall have been projected under . Integrated Training of Core Cadres

Annexure - Capacity Building (Details of trainings proposed under Sl. No. 201)- NHM PIP

Amount in Rs. (Lakhs)

S. No.	Programme/ Theme	Proposed Training/Activity	Cadre(s) to be Trained	No. of Batches/ person	Unit cost (in Rs.)	Batch Size/ Unit of measure	Quarter in which training is planned	Duration (in Days)	Mode of Training (Offline /Online /Hybrid)	Level of Training (State/ District/ Block/ Facility)	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
201.6.7.2	Other Initiatives to improve access	Orientation/ Training of ANMs of Multi-Purpose Centers (MPCs)	HW-F	0	102000	35/Batch	Q-2	2	Offline	State	0.00	New Activity Programme: PM JANMAN Background: Multi Purpose Centres have been established at PVTG areas in the State & managed in convergence with other line Deptts ST& SC Development Deptt , W&CD Development Deptt and PR etc. Proposal: 2 days Skill Based Training of ANMs engaged at MPCs Level of Training: State Total Load: 74 Batch Size: 35 Total Batch: 2
201.6.7.3	Other Initiatives to improve access	State level orientation/ Review of NGO functionaries on PPP Projects	PPP Functionaries	0	102000	45/ Batch	Q-2 & Q-4	1	Offline	State	0.00	Ongoing Activity: Programme: NGO/PPP (PHC-N management through PPP Mode) Proposal : Half yearly orientation of NGO Functionaries on newer initiatives & Programme guidelines Total Load: 90 person (60 from NGO functionaries + PPP coordinators from 30 districts) Proposal for 2026-27: 90 person Batch Size: 45 per batch Total Batches: 2
201.6.8	HSS.8	Inventory Management									0	
											0	
201.6.9	HSS.9	HRH									0	
											0	
201.6.10	HSS-10	Enhancing HR									0.00	
Specialised Training												
201.6.10.1	Enhancing HR/Training Institutions , Skill Labs	Faculty Development Program for Nursing Institutions										Head: Strengthening Nursing Institutes Activity: Faculty Development Program for Nursing Institutions (New Activity) Background:
201.6.10.1.1	Enhancing HR/Training Institutions , Skill Labs	State Level TOT	Nursing Faculty	0	129000	15/batch	Q-2	4	Offline	State	0.00	This program is designed to bridge gaps in the quality of nursing education and is aligned with the WHO Global Strategic Directions for Nursing and Midwifery. And addresses gaps in innovative teaching methodologies identified by the Ministry of Health and Family Welfare (MoHFW) through a pilot assessment using the WHO assessment tool. The Faculty Development Programme (FDP) will focus on curriculum development and teaching pedagogy advocacy values.
201.6.10.1.2	Enhancing HR/Training Institutions , Skill Labs	Faculty Development Training (Offline Mode)	Nursing Faculty	0	99000	20/ batch	Q-3	3	Offline	State	0.00	Nursing Faculty members from public institutions will be nominated and trained at the state level as Master Trainers. Subsequently, a Continuous Faculty Development Programme will be implemented through the State Nodal Centre. The programme will adopt a six day blended learning approach, comprising three days of in-person training and three days of online sessions. Training will be conducted in six batches, with 20 participants in each batch. Budget:

Annexure - Capacity Building (Details of trainings proposed under Sl. No. 201)- NHM PIP

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201.6.10.1.3	Enhancing HR/Training Institutions , Skill Labs	Faculty Development Training (Online mode)	Nursing Faculty	0	18000	20/ batch	Q-3	3	Online	State	0.00	1.Four days State level TOT one batch: Rs.1,29,000/- 2. Three days Faculty development training at State Nodal centre (in- person): (Cost per batch X No.ofbatch)= Rs.99,000 X 6 =Rs. 5,94,000 3. Three Days Faculty development training at State Nodal centre (on-line): (Cost per batch X No.ofbatch)= Rs.18,000 X 6 =Rs. 1,08,000
201.6.10.1.4	Enhancing HR/Training Institutions , Skill Labs	Training for Strengthening operational management of Skills Labs at Nursing Institutions	Nurse Trainers		16000	Per Person	Q-1	6	Offline	State	0.00	Ongoing activity Background: Skilled Training proposed for 6 newly recruited Nurse trainers (CSL Capital hospital-1, Sundargarh- 3 & SNC berhampur -2 total= 6 Nurse trainers) at national level skill lab, New Delhi. Proposal 2026-27: 6 persons Duration of Training: 6 days Budget: Per person Rs. 16,000/- including food, accommodation, travel cost (one time to & fro including surface travel),DA to participants, RP fees, Training fees, etc as per the revised TA/ DA norms of the society. Activity Dropped
201.6.10.2	Enhancing HR/Training Institutions , Skill Labs	DAKSH training for Nursing Officers from Public Health facilities	Nursing Officerss	0	156000	16/Per batch	Q-2 & Q-3	6	Offline	Regional	0.00	Budget Not Approved
201.6.10.3	Enhancing HR/Training Institutions , Skill Labs	Continued Nursing Education (CNE)	Nursing Officerss	0	25000	16/Per batch	Q-2 to Q-3	1/2 day	Hybrid	District	0.00	Budget Not Approved
201.6.10.4	Enhancing HR/Training Institutions , Skill Labs	Administrative and Management training for Sr. Nursing personnel from Public Health facilities	Sr. Nursing Officerss	0	160000	30/batch	Q-1	2	Offline	State	0.00	Ongoing activity: Recurring activity Background: For strengthening the managerial and leadership capacity of Sr. clinical nursing personnel, training programmes for NS/DNS/ANS dealing with the supervisory and administrative assignments of 30 DHHs, Capital Hospital, RGH, MCHs are proposed in phases.
201.6.10.5	Enhancing HR/Training Institutions , Skill Labs	Financial Management training for SR Nursing Personnel in admistration	Principals/Principal Tutors	0	160000	30/Per Batch	Q-1	2	Offline	State	0.00	Ongoing Training of Principals/Principal Tutors/Faculties on accounts / budget for 2 days at State level proposed .

Annexure - Capacity Building (Details of trainings proposed under Sl. No. 201)- NHM PIP

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S. No.	Programme/ Theme	Proposed Training/Activity	Cadre(s) to be Trained	No. of Batches/ person	Unit cost (in Rs.)	Batch Size/ Unit of measure	Quarter in which training is planned	Duration (in Days)	Mode of Training (Offline /Online /Hybrid)	Level of Training (State/ District/ Block/ Facility)	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
201.6.10.6	Enhancing HR	PG Diploma in Public Health Management (PGDPHM) Courses	MBBS Doctors		365000	Per Person	Q-1 to Q-4	365	Offline	State	0.00	Head: Training at SIH&FW Ongoing activity: Background: As recommended, MBBS doctors with five years post qualification experience shall be trained in public health course for making them ready for the role of BPHOs to strengthen implementation of Public Health Programme in the State. Current Status: 180 candidates have received the PGDPM Courses till 2025-26 Proposal 2026-27: 1 year PGDPM Course proposed for 30 MBBS doctors planned at IIPH-BBSR Activity Dropped as per OM (F.No.Z-I 801 5/59/2025-NHM-II) dated 11th Nov, 2025
201.6.10.7	Enhancing HR	Programmatic Induction for newly joined BPHOs	BPHOs	0	1339000	30/Per Batch	Q-2	30	Offline	State	0.00	Head: Training at SIH&FW Ongoing activity: Background: The training is proposed exclusively for newly joined BPHOs for orientation on programme management to role out different schemes/ activities under NHM Batch size: 30 No of Batch:1
201.6.11	HSS.11										0	
201.6.11.1	Technical Assistant	Cadre Based Training for Programme Management Staff										The management training is proposed for Programme management staff at all levels i.e. State, District, Block & institution. The plan is to cover all of them, at least once in 2 years period. Initially, the State has selected few National level institutes of repute in their respective domains like Programme finance & Data (TISS Mumbai, CGG, Hyderabad, ISB, Mohali etc) for the proposed training. However new intuitions can also be included in the existing list if found suitable for the proposed training. The details write up & Justification for Cadre Based Training (Placed in the Training write-up Annexure Folder)
201.6.11.1.1	Technical Assistant	District Level PMU Staff	PM Staff	0	40000	Per Person	Q-2 & Q-3	3	Offline	National level	0.00	Proposal 2026-27: 165 DPMU Staff (50% of total key Management staff targeted) @ Rs. 40000/- for 3 days training for each category of managers (proposed cost is inclusive of travel, Boarding, Lodging & Session Costs etc.)
201.6.11.1.2	Technical Assistant	Block Level PMU Staff	PM Staff	0	30000	Per Person	Q-2 & Q-3	3	Offline	National level	0.00	Plan 2026-27: 718 Block Level key PMU staff (1436/2 =718) @ Rs. 30,000/- for 3 days (Includes travel, Boarding, Lodging & Session Costs etc.)
201.6.11.1.3	Technical Assistant	SPMU Staff (Mangers, Programme/Finance/ Data)	PM Staff	0	40000	Per Person	Q-2 & Q-3	3	Offline	National level	0.00	Budget 2026-27 : • Management Training for Mangers, Programme/Finance/ Data : 40 Key SPMU Staff @ Rs. 40, 000/- per participant for 3 days
201.6.11.1.4	Technical Assistant	SPMU Staff (Asst Managers /Programme Asst)	PM Staff	0	30000	Per Person	Q-2 & Q-3	3	Offline	National level	0.00	• Management Training for Asst Managers /Programme Asst : 30 Key SPMU Staff X Rs.30,000/- per participant for 3 days

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201.6.11.1.5	Technical Assistant	Hospital Managers (PGDHQM)	PM Staff	0	215250	Per Person	Q-2 & Q-3	365	Offline	National level	0.00	Budget in 2026-27 : PGDHQM:
201.6.11.1.6	Technical Assistant	Hospital Managers (Short Term Training)	PM Staff	0	40000	Per Person	Q-2 & Q-3	3	Offline	National level	0.00	• 10 Hospital Managers X @ Rs.2,15,250/- Lakhs /year/ Person (GoI Norm) - Short Term Training : • 35 Hospital Manager X Rs.40000/- per Participant
HSS.14	HSS.14										0.00	
											0.00	
HSS.15	HSS.15										0.20	
201.6.15.1	Snakebite envenoming	State Level ToT	MOs from ASV Centres	0	78000	30/Per batch	Q-1	1	Offline	State	0.00	Unit Cost Revised as per NPCC Recommendation Proposal: State ToT on treatment & management of Snake Bite cases - (One day Training of Medical Officers from districts) Level of Training : State Level Batch size: 30 each Duration: 1 day Target for 2026-27: 2 batches
201.6.15.2	Snakebite envenoming	District Level Training	MO	1	19560	20/Per batch	Q-1	1	Offline	District	0.20	Proposal: One day Training of 1 MO on treatment & management of Snake Bite cases Level of training: District Training load : 1 or 2 participants per facility Batch size: 20 Budget Approved @ Rs. 19560 per batch (as per GoI Norms) x 1 batch per district x 30 districts= Rs. 5.87 Lakhs Budget Revised as per recommendation of NPCC
201.6.18	HSS.18										1.91	
201.6.18.1	IT Interventions and System	Capacity Building/ Training of District Data Personnel at State Level	DDM, CDM, DM- IDSP	0	484204	65/Per batch	Q-2	3	Offline	State	0.00	Nature of Activity: Ongoing Participants: District Data Managers-30, City Data Manager-5 & Asst. Data Manager (IDSP Data Manager Redesignated)-30 at District Level. The total comes to 65. Duration of Training: 3 days (Per Year) Level of Training: State Batch Size: 65 Nature of Training: Residential
201.6.18.2	IT Interventions and System	Capacity Building/ Training of Block/ Facility Data Personnel at District Level	BDM, UDM, ICA, DEO, MRA	1	90264	40/Per Batch	Q-2 & Q-3	2	Offline	District	0.90	Nature of Activity: Ongoing Participants: Block Data Managers-314, Urban Data Manager-50, ICA-30, DEO to DPMU-106 & Medical Record Assistant-848. The total comes to 1337. Duration of Training: 2 days (Per Year) Level of Training: District Batch Size: 40 Nature of Training: Residential

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201.6.18.3	IT Intervention s and System	Capacity Building/ Training of private Hospitals & Hospitals managed by Other Public Sector Undertakings	Reporting Personnel from Private Hospitals & Hospitals managed by Other Public Sector Undertakings	1	30572	40/Per Batch	Q-2 & Q-3	1	Offline	District	0.31	Nature of Activity: Ongoing Background: 723 Pvt. Hospitals, 79 Other Public Sector Hospital, 1200 AYUSH Hospitals . The total comes to 2002. Participants: Reporting Personnel from Private Hospitals & Hospitals managed by Other Public Sector Undertakings Duration of Training: 1 day (Per Year) Level of Training: District Batch Size: 40 Total Batches: 56
201.6.18.4	IT Intervention s and System	Capacity Building/ Training of AAM Team Members										Training will be a part of Carder Based Training. Hence, no additional budget proposed in this section.
201.6.18.5	IT Intervention s and System	Refresher Training for Strengthening Data Quality	Nodal Officers, District Level Consultants, BDMs & UDMs	108	650	Per Person	Q-2 & Q-3	1	Offline	District	0.70	Nature of Activity: Ongoing Proposal: In order to ensure quality of data a monthly meeting is proposed for data personnel from district & block level to find out the gaps / data quality issues on different reporting systems & rectify errors if any Participants: Nodal Officers, District Level Consultants, BDMs & UDMs Level of Training: District Duration of Training: 1 day Budget: @650/- Per Block/ Urban Per Month
201.6.21	HSS.21										0.00	
201.6.21.1	Implementat ion of Assisted Reproductiv e Technology and Surrogacy	Training / Sensitization of members from the State Appropriate Authority, Key officials & stakeholders			125000	40/ Per batch	Q-2	1	Offline	State	0.00	Ongoing Activity: Proposal: One day Sensitization Work Shop for the members of the State Appropriate Authority, key officials & stakeholders on implementation of Assisted Reproductive Technology (Regulation) Act. 2021 & Surrogacy (Regulation) Act, 2021. Proposal for 2026-27: one batch Activity Dropped as per recommendation of NPCC

S. No.	Programme/ Theme	Proposed Training/Activity	Cadre(s) to be Trained	No. of Batches/ person	Unit cost (in Rs.)	Batch Size/ Unit of measure	Quarter in which training is planned	Duration (in Days)	Mode of Training (Offline /Online /Hybrid)	Level of Training (State/ District/ Block/ Facility)	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
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Annexure - ASHA Incentives (Details of proposal under Sl. No. 202)

Amount in Rs. (Lakhs)

S. No	Programme/ Theme	Activity Proposed	Unit of Measure	Unit Cost (in Rs.)	Unit Cost (in Lakh)	Quantity/ Target	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
202.1	RCH							ASHA Status: Existing number of ASHAs: 49990 (As per approval in PIP 2024-26) Proposal for 2026-27: 835 new ASHAs (640-Rural area & 195-Urban area) will be selected in villages/urban slum areas having 2000 or more population. Total ASHA for 2026-27: 50825= 49990 (existing as per PIP 2024-26) + 835 (640-Rural area & 195-Urban area) new ASHAs to be selected in villages/urban slum areas having 2000 or more population.
202.1.1	Maternal Health							
202.1.1.1	Maternal Health	Janani Surakhya Yojana (Rural area)	Per Case	600	0.006	3798	18.23	Nature of Activity: Ongoing Unit Cost: Rs.600/- per case Background & Deliverable : Under Janani Suraksha Yojana (JSY), ASHAs (Accredited Social Health Activists) get performance-based incentives for facilitating maternal and child health services, primarily for encouraging institutional deliveries, with total packages of Rs. 600/- in rural areas and Rs.400 /- in urban areas, split between antenatal care (ANC) and delivery facilitation. Price Break-up: Must mobilise to attend ANC Checkups a.1st ANC: Rs.150/- b. 2nd ANC: Rs.50/- c. 3rd ANC: Rs.50/- d. 4th ANC: Rs.50/- e. Facilitating Institutional Delivery: Rs.300/- Extent of Budget Proposed: Budgeted 80% looking into existing vacancies, non-performance of certain ASHAs, Time lag for selection of new ASHAs (may take 3 to 4 months) etc. Head of Approval: Earlier approved under RCH-1 Maternal Health SI.No.-3
202.1.1.2	Maternal Health	Janani Surakhya Yojana (Urban area)	Per Case	400	0.004	422	1.35	Nature of Activity: Ongoing Unit Cost: Rs.400/- per case Background & Deliverable : Under Janani Suraksha Yojana (JSY), ASHAs (Accredited Social Health Activists) get performance-based incentives for facilitating maternal and child health services, primarily for encouraging institutional deliveries, with total packages of Rs. 600/- in rural areas and Rs.400/- in urban areas, split between antenatal care (ANC) and delivery facilitation. Price Break-up: Must mobilise to attend ANC Checkups a. 1st ANC: Rs.50/- b. 2nd ANC: Rs.50/- c. 3rd ANC: Rs.50/- d. 4th ANC: Rs.50/- e. Facilitating Institutional Delivery: Rs.200/- Extent of Budget Proposed: Budgeted 80% looking into existing vacancies, non-performance of certain ASHAs, Time lag for selection of new ASHAs (may take 3 to 4 months) etc. Head of Approval: Earlier approved under RCH-1 Maternal Health SI.No.-3

Annexure - ASHA Incentives (Details of proposal under Sl. No. 202)

Amount in Rs. (Lakhs)

S. No	Programme/ Theme	Activity Proposed	Unit of Measure	Unit Cost (in Rs.)	Unit Cost (in Lakh)	Quantity/ Target	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
202.1.1.3	Maternal Health	Mobilising HRP's under PMSMA	Per Visit	100	0.001	2743	1.10	Nature of Activity: Ongoing Unit Cost: Rs.100/- Per visits for 3 visits Background & Deliverable : Total no. of pregnant woman- 624277 20% of expected ANC to be HRP's – 124855 Each HRP will be accompanied by ASHA for 3 visits : 124855 x 3 visits= Total 374566 visits. Extent of Budget proposed: @ Rs. 100/- per visit per ASHA for 149826 visits (40% of expected 374566 no of visits) as ASHA may not have accompanied all HRP's. Head of Approval: Earlier approved under RCH-1_Maternal Health_SI.No.-6
202.1.1.4	Maternal Health	Achieving healthy outcome for both mother and baby (upto 45 days after birth)	Per HRP	500	0.005	1600	8.00	Nature of Activity: Ongoing Unit Cost: Rs.500/- Per HRP Per ASHA Background & Deliverable: Incentive to ASHA @Rs.500/-per HRP (identified during ANC)on achieving a healthy outcome for both mother and baby at 45th day after delivery. Extent of Budget proposed: 70% of expected HRP (124855) cases= 99884 HRP's X Rs. 500/- per HRP may expected to claim/eligible for incentive Head of Approval: Earlier approved under RCH-1_Maternal Health_SI.No.-6
202.1.1.5	Maternal Health	First responder for Maternal Death under SUMAN	Per Case	1000	0.010	6	0.06	Nature of Activity: Ongoing Unit Cost: Rs.1000/- Per Case Per ASHA Background & Deliverable: Incentive is allowed after confirmation of maternal death in case of community death and transit death case by first responder as per SUMAN 1st responder guideline. Considering the MMR of 153, Expected Maternal Death during 2026-27 is calculated as 961. Out of expected maternal Death, 30% are expected to be community and transit death. Thus 30% of 961 comes to 288 Maternal Deaths. It is not an exclusive incentive for ASHA. However, preference will be given to ASHA if they report within 24 hours. Extent of Budget proposed: Incentive for first responder for community and transit death @ Rs.1000/- per Maternal Deaths Head of Approval: Earlier approved under RCH-1_Maternal Health_SI.No.-7

Annexure - ASHA Incentives (Details of proposal under Sl. No. 202)

Amount in Rs. (Lakhs)

S. No	Programme/ Theme	Activity Proposed	Unit of Measure	Unit Cost (in Rs.)	Unit Cost (in Lakh)	Quantity/ Target	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
202.1.1.6	Maternal Health	Accompanying MTP cases for Surgical Method of Abortion public health facility	Per Case	200	0.002	160	0.32	Nature of Activity: Ongoing Unit Cost: Rs.200/- Per Case Per ASHA Background & Deliverable: ASHA is incentivized for accompanying the PW for MTP through surgical method. Status: During 2024-25, 8446 number of cases have been accompanied by ASHA for Surgical MTP Extent of Budget proposed: Total reported Pregnancy: 624277 Total expected abortion: 62428 (10% of total reported pregnancy) Induced Abortion: 24970 (40% of expected abortion) Surgical Abortion: 12485 (50% of expected induced abortion) Medical Method: 12485 (rest 50% of expected induced abortion) Deliverables - Accompanied by ASHA to CAC centers for MTP by trained doctor through MVA/EVA Estimating that 70% of the Surgical CAC cases i.e. 8740 will be accompanied by ASHA Including Urban facilities. Head of Approval: Earlier approved under RCH-1_Maternal Health_SI.No.-10
202.1.1.7	Maternal Health	Aaccompanying MTP cases through Medical Method of Abortion at public health facility	Per ASHA for 2 visits	400	0.004	69	0.28	Nature of Activity: Ongoing Unit Cost: Proposed with revised incentive provisions i.e. Rs.300/- to Rs.400/- Per Month for 2 visits (As per the approval of Mission Steering Group, NHM) Background & Deliverable: ASHA is incentivized for accompanying the PW for MTP through medical method for two times i.e. Day-1 & 3 for MTP by MMA Status: During 2024-25, 6310 number of cases have been accompanied by ASHA Extent of Budget proposed: Total reported Pregnancy: 624277 Total expected abortion: 62427 (10% of total reported pregnancy) Induced Abortion: 24970 (40% of expected abortion) Surgical Abortion: 12485 (50% of expected induced abortion) Medical Method: 12485 (rest 50% of expected as induced abortion) Estimating that 3746 cases i.e. 30% of total abortion through Medical Method (12485) will be accompanied by ASHA. Head of Approval: Earlier approved under RCH-1_Maternal Health_SI.No.-10
202.1.1.8	Maternal Health	Mobilise and accompany suspected high risk pregnant women to ICTC or FICTC and ensure HIV and RPR testing during ANC	Per Case	100	0.001	0	0.00	Budget Not Approved

Annexure - ASHA Incentives (Details of proposal under Sl. No. 202)

Amount in Rs. (Lakhs)

S. No	Programme/ Theme	Activity Proposed	Unit of Measure	Unit Cost (in Rs.)	Unit Cost (in Lakh)	Quantity/ Target	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
202.1.1.9	Maternal Health	Distribution of Misoprostol to Home delivery cases	Per Home Delivery	100	0.001			Activity : Dropped As per HMIS 2024-25, Out of reported deliveries 99.46% (5,62,943) is Institutional delivery and 0.54% (3032) is home delivery. This shows the home deliveries have decreased. State will focus more on ensuring institutional deliveries from all hard to reach pockets through state specific SAMMPurNA scheme and functionalising Maternity Waiting Homes. Hence the programme of distributing misoprostol form home deliveries may be discontinued from 2026-27 onwards.
202.1.1.10	Maternal Health	Addressing High Risk PNC	Per ASHA	250	0.003	482	1.21	Nature of Activity: Ongoing Unit Cost: @Rs.250/- Per High Risk PNC Case Background & Deliverable: There is chance that Post Natal Mother is normal throughout her ANC period but was later screened High Risk for any danger signs during HBNC visits by ASHAs. Such cases are to be attended /followed up by ASHAs. Conditionality for ASHA Incentive : ASHA has to provide all mandated HBNC visits to detected high risk PNC cases. Ensure, she visits to PMSMA/FRU for management of her high risk conditions. Incentive shall be paid for healthy outcome after 45 days of delivery. Extent of Budget proposed: • Total no. of deliveries- 565975 (Reported in 2024-25) • 20% of expected deliveries to be high risk- 113195 • Budget proposed for 30% of HR PNC cases to be supported by ASHA i.e 33958 cases @Rs.250/- per case Budget approved in previous year under RCH-1 Maternal Health Sl.No.-17
202.1.1.11	Maternal Health	Reporting all women death (15-49 years of age)	Per Case	200	0.002	21	0.04	Nature of Activity: New Unit Cost: @Rs.200/- Per Case for reporting of Maternal Death cases only. Background & Deliverable: The all women death will be reported by ASHA to the concerned MPHW Female and thereon to PHC medical officer over telephone. For the purpose of recording, Register will be maintained at the level of SC AAMand PHC/ UPHC. Considering the MMR of 153, Expected Maternal Death during 2026-27 is calculated at 961 Nos. Budget Revised as per the discussion in the NPCC Meeting

Annexure - ASHA Incentives (Details of proposal under Sl. No. 202)

Amount in Rs. (Lakhs)

S. No	Programme/ Theme	Activity Proposed	Unit of Measure	Unit Cost (in Rs.)	Unit Cost (in Lakh)	Quantity/ Target	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
202.1.1.12	Maternal Health	Reporting of Spontaneous Abortion Cases (State specific)	Per Case	50	0.001	474	0.24	Nature of Activity: New Background & Deliverable: During 2025-26,(up to Aug 25) 275940 no. of pregnancies has been reported against the expected of 302718 pregnancies, which is 91%. There are chances of missing reporting of few spontaneous abortion cases. These are caused due to unsafe self-medication practices through private chemists that remain unreported due to stigma and lack of awareness. This underreporting affects maternal health surveillance, delays timely post-abortion care, and increases the risk of complications. To address this gap, it is proposed to introduce a performance-based incentive @ Rs. 50/- per spontaneous abortion case for ASHAs to actively identify and report cases of spontaneous abortion and ensure registration of pregnancy in RCH portal by the Health Worker (Female). This initiative will Improve Registration and Reporting of pregnancies, Promote Safe Abortion Practices, Enhance Early Pregnancy Tracking and Reduce Maternal Morbidity and Mortality. Conditionality and Payment mechanism: - The incentive will be disbursed only upon confirmation of pregnancy registration by the Health Worker (Female) in RCH portal and adoption of post abortion contraceptive following abortion - Payment vouchers will be validated by the Health Worker (Female) and disbursement will be processed through the e-ASHA platform to ensure transparency, accountability, and timely payments. Extent of Budget proposed: Total expected pregnancies to be reported: 726522 Total expected abortion: 72652 (10% of total reported pregnancy) Induced Abortion: 29060 (40% of expected abortion) Spontaneous abortion cases: 43592 (60% of expected abortion) Budget proposed for 50% of Spontaneous abortion cases for ASHA incentive: 21796 @ Rs. 50/- Per ASHA/ per Case
Sub Total ASHA incentive (MH)							30.82	
202.1.2	Child Health							
202.1.2.1	Child Health	Mobilizing 0-3 years children to AWC for screening during MHT visit	Per Visit	50	0.00	1810	1.27	Nature of Activity: Ongoing Unit Cost: @Rs.50/- as mobilisation cost per each such event planned as per Micro plan (Organise Twice in each year as per RBSK mandate) Background & Deliverable: The children below 3 years of age are not attending the Pre School but their coverage is essential for early identification of defects & Delayed development conditions. In order to ensure the same, ASHA incentive is proposed. Proposal For FY 2026-27: Activity proposed as per last year's approval for 74000 existing AWCs in the State (No of AWCs increased from 72000 to 74000 during last year) Extent of Budget proposed : Budgeted 70% looking into existing vacancies, non-performance of certain ASHAs, Time lag for selection of new ASHAs (may take 3 to 4 months)etc. Budget approved in previous year under RCH-3 Child Health Health SI.No.-21

Annexure - ASHA Incentives (Details of proposal under Sl. No. 202)

Amount in Rs. (Lakhs)

S. No	Programme/ Theme	Activity Proposed	Unit of Measure	Unit Cost (in Rs.)	Unit Cost (in Lakh)	Quantity/ Target	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
202.1.2.2	Child Health	Household visit under Home Based Newborn Care (HBNC) Programme	Per Case	250	0.00	11602	23.20	Nature of Activity: Ongoing Unit Cost: Rs.250/- Per ASHA for 6/7 Home Visits Background & Deliverable: Home based newborn care is provided to all newborns through 6/7 visits by ASHAs for early identification of danger signs and referral. ASHAs are provided an incentive of Rs.250/- for the same. Progress: During 2024-25, 81% of reported live birth have received all 6 HBNC visits as per HBNC reports. Proposal: Therefore, during 2026-27, it is expected to cover at least 85% of estimated live births i.e. 533729. (Estimated Live Births - 627916) Incentive for community follow up of SNCU discharge cases as per HBNC schedule after discharge from SNCU is also included under this line item. As per the FMR 2024-25, 80% claims have been settled in a year & hence proposed accordingly. Budget approved in previous year under RCH-3_Child Health Health_Sl.No.-23
202.1.2.3	Child Health	Conducting household visit under Home Based Care for Young Child (HBYC) Programme	Per Case	250	0.00	11294	22.59	Nature of Activity: Ongoing Unit Cost: Rs.250/- Per Case Background & Deliverable: Home based care of young children is provided to all young children between 3-15 months through 5 quarterly home visits by ASHAs for growth monitoring, early identification of danger signs and referral, early childhood development and provision of IFA, ORS & Zinc. ASHAs are provided an incentive of Rs.250/- for the same. Progress: 83% of all targeted children received all 5 visits during 2024-25 as per HBYC report. Proposal: Therefore, during 2026-27, it is expected to cover 85% of all estimated infants i.e. 519562 (Estimated Infants - 611249). As per the FMR 2024-25, 80% claims have been settled in a year & hence proposed accordingly. Budget approved in previous year under RCH-3_Child Health Health_Sl.No.-23
202.1.2.4	Child Health	Child Death Review (Notification of under 5 deaths)	Per Case	50	0.00	172	0.09	Nature of Activity: Ongoing Background: ASHA Incentive @Rs.50 is provisioned for reporting each community level child death (deaths occurring at home, in transit, at private facilities or at sub-block level public facilities) within 24 hours. Progress: Deaths reported in 2024-25: 11750, Community level deaths: 5295, which is about 45%. As per SRS, about 21977 U5 deaths are expected in the State, of which 80% has been set as target as key deliverables for 2026-27 i.e. 17582. Estimating that about 45% of the same will be at community level & will be reported by ASHAs, incentive for ASHAs @Rs.50 per cases is proposed for 45% of estimated cases = 7925 Proposal: Proposed for 45% of 17582 cases i.e. 7925 Budget revised as per the recommendation of NPCC

Annexure - ASHA Incentives (Details of proposal under Sl. No. 202)

Amount in Rs. (Lakhs)

S. No	Programme/ Theme	Activity Proposed	Unit of Measure	Unit Cost (in Rs.)	Unit Cost (in Lakh)	Quantity/ Target	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
202.1.2.5	Child Health	Prophylactic distribution of ORS to family with under five children (IDCF programme)	Per ORS/ Packet	1	0.00	94308	0.94	Nature of Activity: Ongoing Unit Cost proposed /Deliverables: ASHA will be given incentive @ Rs.1/- for prepositioning of each ORS Packet with family of under five children during IDCF campaign Expected U5 population-3481602 Budget approved in previous year under RCH-7_Nutrition _ Sl.No.-58 Budget Shifted from RCH-7, Nutrition to RCH-3 Child health as per recommendation of NPCC
Sub Total ASHA incentive (CH)							48.09	
202.1.3	Immunization							
202.1.3.1	Immunization	Full Immunization Coverage (in First Year)	Per Beneficiary	100	0.00	11958	11.96	Nature of Activity: Ongoing Unit Cost: @Rs.100/- Per Beneficiary Background & Deliverable: ASHAs are incentivised only if a child is fully immunised (i.e. received BCG, 3 doses of OPV, 3 doses of pentavalent & MR-1 by 1 year of age) Total Expected infant in 2026-27: 6,11,249 Expected Coverage 90% of expected infants in the State Budget approved in previous year under RCH-4 Immunisation _ Sl.No.-32
202.1.3.2	Immunization	Complete immunization Coverage (2nd year of age)	Per Beneficiary	75	0.00	11958	8.97	Nature of Activity: Ongoing Unit Cost: @Rs.75/- Per Beneficiary Background & Deliverable: ASHAs are incentivised for complete immunisation coverage (i.e. all the vaccines given as per National Immunisation Schedule by 2 years of age.) Total Expected infant in 2026-27: 6,11,249 Expected Coverage : 90% of expected Full Immunization Coverage Budget approved in previous year under RCH-4 Immunisation _ Sl.No.-32
202.1.3.3	Immunization	DPT booster Coverage (5-6 years of age)	Per Beneficiary	50	0.00	12154	6.08	Nature of Activity: Ongoing Unit Cost: @Rs.50/- Per Beneficiary Background & Deliverable: Total Expected Children at 5-6 year age in 2026-27 : 6,66,672 Expected Coverage : 90% of total expected Children of 5-6 years of age (i.e. 666672) Budget approved in previous year under RCH-4 Immunisation _ Sl.No.-32
Sub Total ASHA incentive (Immunisation)							27.00	
202.1.4	Adolescent Health							
202.1.4.1	Adolescent Health	Mobilizing adolescents for Adoloscent Health Day (AHD)	Per AHD	200	0.00	378	0.60	Nature of Activity: Ongoing Unit Cost: Proposed with revised incentive provisions i.e. Rs.150/- to Rs.200/- Per Month (As per the approval of Mission Steering Group, NHM) Background & Deliverable: A total of 56186 AHD sessions are planned for both PE & Non-PE districts. The role of ASHA here in the event is to mobilise adolescents (Both School Going & Out of School) to the session site and facilitate for organising the event . Extent of Budget proposed: 80% as per expenditure trend. Budget approved in previous year under RCH-5 Adolescent Health _ Sl.No.-38
Sub Total ASHA incentive (RKSK)							0.60	

Annexure - ASHA Incentives (Details of proposal under Sl. No. 202)

Amount in Rs. (Lakhs)

S. No	Programme/ Theme	Activity Proposed	Unit of Measure	Unit Cost (in Rs.)	Unit Cost (in Lakh)	Quantity/ Target	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
202.1.5	Family Planning							
202.1.5.1	Family Planning	Accompanying the client for PPIUCD insertion	Per ASHA	150	0.00	783	0.70	Nature of Activity: Ongoing Unit Cost: Proposed with revised incentive provisions i.e Rs. 150/- PM to Rs.300/- PM (As per the approval of Mission Steering Group, NHM) Background & Deliverable: Total IUCD Projected ELA for 2026-27: 151000 Proposed Target for PPIUCD: 96640 (i.e. 64% of total IUCD) Extent of Budget proposed: Budgeted 60% looking into expenditure trend in previous years Budget approved in previous year under RCH-6_Family Planning _ SI.No.-44 Unit cost revised as per the discussion in the NPCC Meeting
202.1.5.2	Family Planning	Accompanying the client for PAIUCD insertion	Per ASHA	150	0.00	125	0.13	Nature of Activity: Ongoing Unit Cost: Proposed with revised incentive provisions i.e Rs. 150/- PM to Rs.300/- PM (As per the approval of Mission Steering Group, NHM) Background & Deliverable: Total IUCD Projected ELA for 2026-27: 151000 Proposed Target for PAIUCD: 4983 (i.e. 3.3% of total IUCD) Extent of Budget proposed: Budgeted 70% looking into expenditure trend in previous years Budget approved in previous year under RCH-6_Family Planning _ SI.No.-44 Unit cost revised as per the discussion in the NPCC Meeting
202.1.5.3	Family Planning	Accompanying the client for injectable MPA administration (For 1st, 2nd & 3rd doses)	Per dose	100	0.00	1160	1.16	Nature of Activity: Ongoing Unit Cost: @Rs.100/- Per Dose Background & Deliverable: Target for FY 2026-27: 58000 users (Doses- 232000) as per ELA Extent of Budget proposed: Budget proposed for 139200 doses i.e. 60% of the total targeted doses 232000 (Low coverage because of issues related to disbursement and low incentive claims for MPA in previous years) Budget approved in previous year under RCH-6_Family Planning _ SI.No.-45
202.1.5.4	Family Planning	Accompanying the client for injectable MPA administration (For 4th dose)	Per dose	100	0.00	193	0.19	Nature of Activity: New Unit Cost: @Rs.200/- Per Dose Background & Deliverable: Target for fy 2026-27: 58000 users (doses 232000) as per ELA Budget proposed for 23200 i.e. 10% of the total target 232000 (because of issues related to disbursement and low incentive claims for MPA in previous years) Extent of Budget proposed: Budget approved in previous year under RCH-6_Family Planning _ SI.No.-45 Budget Revised as per recommendation of NPCC

Annexure - ASHA Incentives (Details of proposal under Sl. No. 202)

Amount in Rs. (Lakhs)

S. No	Programme/ Theme	Activity Proposed	Unit of Measure	Unit Cost (in Rs.)	Unit Cost (in Lakh)	Quantity/ Target	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
202.1.5.5	Family Planning	Promoting spacing of births under ESB scheme (2 years after marriage and 3 years after birth of 1st child)	Per ASHA	500	0.01	1655	6.62	Nature of Activity: Ongoing Unit Cost: @Rs.500/- Per case Background & Deliverable: Proposal for 2026-27 1. ASHA incentive under ESB scheme for delaying of first pregnancy after marriage (2years). Status 2024-26 : 125536 no of claims processed Expected no of claims in 26-27 : 70000. 2. ASHA incentive under ESB scheme for promoting spacing of births between 2 children (3 years) Status 2024-26 : 87880 no of claims processed Expected no of claims in 2026-27: 50000. Total Claims (1 & 2): 120000 Target 2026-27: 60% of 120000 i.e. 78000 Extent of Budget proposed: 80% looking into expenditure trend in previous years Budget approved in previous year under RCH-6_Family Planning _ SI.No.-50
202.1.5.6	Family Planning	Promoting adoption of limiting method upto two children under ESB scheme	Per ASHA	1000	0.01	382	3.06	Nature of Activity: Ongoing Unit Cost: @Rs.1000/- Per ASHA Background & Deliverable: Target for 2026-27: 20% of Sterilization cases (90000) = 18000 Extent of Budget proposed: 80% looking into expenditure trend in previous years Budget approved in previous year under RCH-6 Family Planning _ SI.No.-50
202.1.5.7	Family Planning	Distribution of Nayi Paheli Kit to newly wed couples	Per Kit	0	0.00	3396	0.00	Nature of Activity: Ongoing Unit Cost: Proposed with revised incentive provisions i.e. Rs. 100/- PM to Rs.200/- PM (As per the approval of Mission Steering Group, NHM) Background & Deliverable: About 420000 New Eligible Couples regd. during 2024-25 & expected same nos in 2026-27 too , Of which , 198000 were newly wed couples in 2024-25 Proposal 2026-27 : Budgeted for newly wed couples : 150000 Budget approved in previous year under RCH-6_Family Planning _ SI.No.-51 Activity Dropped as per recommendation of NPCC
Sub Total ASHA incentive (FP)							11.86	
202.1.6	Nutrition							
202.1.6.1	Nutrition	For mobilising and ensuring every eligible child (1-19 years out-of-school and non-enrolled) is administered Albendazole	Per ASHA/ Per Round	100	0.00	1133	2.27	Nature of Activity: Ongoing Unit Cost: @Rs.100/- Per ASHA/ Per Round Background & Deliverable: Provision is proposed for ASHAs (50825), they will be paid incentive @ Rs.100/- per round Assignment: ASHA will mobilize all out of school (5-19 years) and non enrolled children at AWC (1-5 years) for observed dose at AWC Amount of incentive: Rs. 100/- per ASHA x 2 rounds Extent of Budget proposed: Budget approved in previous year under RCH-7 Nutrition _ SI.No.-53

Annexure - ASHA Incentives (Details of proposal under Sl. No. 202)

Amount in Rs. (Lakhs)

S. No	Programme/ Theme	Activity Proposed	Unit of Measure	Unit Cost (in Rs.)	Unit Cost (in Lakh)	Quantity/ Target	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
202.1.6.2	Nutrition	Referral of SAM cases to NRC and follow up of discharge SAM children from NRCs	Per Case	300	0.00	113	0.34	Nature of Activity: Ongoing Unit Cost: @Rs.300/- Per Case Proposal for 2026-27: Estimated admission at NRC in 2024-25: 13500 Total Discharge from NRC 2024-25: 12802 Of which 80% of estimated discharge from NRCs during 2024-25 to be follow-up by ASHA = 80% x12802 = 10242 Budget: @Rs.300/- per child for referral & follow-ups will be given to ASHA Budget approved in previous year under RCH-7 Nutrition _ SI.No.-54
202.1.6.3	Nutrition	Prophylactic distribution of ORS to family with under five children (IDCF programme)	Per ORS/ Packet	1	0.00		0.00	Nature of Activity: Ongoing Unit Cost proposed /Deliverables: ASHA will be given incentive @ Rs.1/- for prepositioning of each ORS Packet with family of under five children during IDCF campaign Expected U5 population-3481602 Budget Shifted to RCH-3 Child as per recommendation of NPCC
202.1.6.4	Nutrition	Mobilising children and ensuring compliance of IFA for 6-59 months children	Per month	100	0.00	1133	8.16	Nature of Activity: New Unit Cost: @Rs.100/- Per ASHA/ Per Month Provision of ASHA Incentive for mobilising & ensuring compliance of IFA in children 6 to 59 Months. Incentive to ASHA @Rs.100/- per month for mobilising & ensuring compliance of both prophylactic & therapeutic doses with the coverage of more than 85%. MOV: MCP Card, HMIS & DHIS2 report. Extent of Budget proposed: Budgeted 60% looking into existing vacancy, non-performance & selection of new ASHAs and also due to the strict performance Deliverables which will take minimum 3months of time etc.
Sub Total ASHA incentive (Nutrition)							10.76	
202.1.7	NIDDCP							
202.1.7.1	National Iodine Deficiency Disorders Control Programme (NIDDCP)	ASHA incentive salt sample test (For testing of 50 samples)	Per ASHA/ Per per month	25	0.00	1133	2.04	Nature of Activity: Ongoing Unit Cost: Proposed with revised incentive provisions@ Rs.25/- PM per ASHA (As per the approval of Mission Steering Group, NHM) Background & Deliverable: The plan is to implement the initiative across all 30 districts of the State by all ASHAs. The total ASHAs (Rural & Urban)in the State is 50825 . Deliverable : Each ASHA will be assigned to conduct tests of 25 samples in 1 month. The result of salt sample test will be shared with ADMO PH, if any negative result is found then ADMO PH will instruct the FSO to facilitate to draw the sample from the source & send the sample to SPHL for further testing. Budgeted 60%, as the programe is planned to be extended to all 30 districts for the 1st time in the next Financial Year. Budget approved in previous year under RCH-8 NIDDCP SI.No.-62
Sub Total ASHA incentive (NIDDCP)							2.04	

Annexure - ASHA Incentives (Details of proposal under Sl. No. 202)

Amount in Rs. (Lakhs)

S. No	Programme/ Theme	Activity Proposed	Unit of Measure	Unit Cost (in Rs.)	Unit Cost (in Lakh)	Quantity/ Target	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
Grand Total ASHA Incentive under (RCH)							131.18	
202.2	NDCP							
202.2.1	IDSP							
202.2.1.1	Integrated Disease Surveillance Programme (IDSP)	Regular reporting of disease and outbreak situation	Per ASHA Per month	100	0.00	13596	12.24	Nature of Activity: Ongoing Unit Cost: Proposed with revised incentive provisions i.e Rs. 75/- PM to Rs.100/- PM (As per the approval of Mission Steering Group, NHM) Background & Deliverables: Line listing of all disease & conditions & reporting to ANM. Plan : State has initiated mobile based reporting system by ASHA which is being piloted in two of the districts in State. Extent of Budget proposed: Budgeted 90% looking into existing vacancy, non-performance & selection of new ASHAs which will take minimum 3 to 4 months of time etc. Budget approved in previous year under HSS-3 Community Enga _ SI.No.-159
Sub Total ASHA incentive (NDCP-1)							12.24	
202.2.2	NVBDCP							
202.2.2.1	National Vector Borne Disease Control Programme (NVBDCP)	ASHA Incentive for fever testing	Per ASHA/ Per month	15	0.00	135960	16.32	Nature of Activity: Ongoing Unit Cost: @Rs.15/- per case and maximum of Rs.150/- per month (minimum 10 cases per month) Background & Deliverables: To Strengthen EDCT at village level, ASHAs are trained on EDCT & Functioning as FTD Current Status: . In 2024-25 a total of 10468801 no. of tests were done. Expected total test to be done in 2025-26 is 11515681 (with expected 10% increase). ASHAs are functioning as FTD in all 30 Districts & contribution of them in surveillance is about 70%. Expected total test to be done by ASHA in 2025-26 (as per previous trend): 8060977 (It means they shall conduct average 13 tests per month per ASHA). But as per guidelines they shall have to be paid maximum Rs.150/- PM for conducting minimum 10 tests . Target FY 2026-27 : 60,99,000 (50825 X 10 X12) tests for which they will claim incentive Extent of Budget proposed: 80% looking into expenditure trend in previous years Budget approved in previous year under NDCP.2_NVBDP_ SI.No.-64

Annexure - ASHA Incentives (Details of proposal under Sl. No. 202)

Amount in Rs. (Lakhs)

S. No	Programme/ Theme	Activity Proposed	Unit of Measure	Unit Cost (in Rs.)	Unit Cost (in Lakh)	Quantity/ Target	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
202.2.2.2	National Vector Borne Disease Control Programme (NVBDCP)	ASHA Incentive for treatment completion of positive malaria cases.	Per Case	200	0.00	40	0.06	Nature of Activity: Ongoing Unit Cost: @Rs.200/- Per Case Background & Deliverables: All the malaria positive cases detected in routine and proactive surveillances need to be followed up for complete treatment at village level. Patient card is the tool to monitor treatment compliances and verification for payment of ASHA incentive. Current Status: -State has recorded 68693 malaria positive cases in 2024 and expected to record 70000 cases in 2025 State is expected to record 63000 cases in 2026 (with 10% reduction in cases) Budget Proposed for FY 2026-27: Rs. 200 per case Extent of Budget proposed: 80% looking into expenditure trend in previous years Budget approved in previous year under NDGP.2 NVBDCP Sl.No.-64
202.2.2.3	National Vector Borne Disease Control Programme (NVBDCP)	ASHA Incentive/ Honorarium for LLIN distribution	Per LLIN	10	0.00	0	0.00	Nature of Activity: Ongoing Unit Cost: @Rs.10/- Per LLIN Distribution Background & Deliverables: Incentive Provisioned for Household-Level Surveys and Community Sensitization: Mobilization of ASHAs, AWWs, and Community Volunteers for door-to-door micro-planning and public awareness campaigns. • Incentive Structure: Frontline workers (ASHA/ AWW/ Community volunteers) will receive a total incentive of ₹10 per LLIN, categorized as follows: - o Pre-distribution (₹5): For conducting household surveys, identifying beneficiaries, and registration. - o Post-distribution (₹5): For conducting IEC activities, supervising the "hanging" of nets, and monitoring long-term usage.
202.2.2.4	National Vector Borne Disease Control Programme (NVBDCP)	Rreferral of AES/JE case to nearest CHC / DH / Medical Collage	Per case	300	0.00	16	0.05	Nature of Activity: Ongoing Unit Cost: Proposed with revised incentive provisions i.e. Rs. 100/- PM to Rs.300/- PM (As per the approval of Mission Steering Group, NHM) Background & Deliverables: Early case management is important for AES/JE cases. It is proposed to provide incentive to ASHA for early referral of cases to nearest facilities for treatment/management. There is decline in the JE cases in the state as well as AES cases. Proposal for FY 2026-27: For 628 predictive cases (2 cases/Block for 314 blocks) Budget approved in previous year under NDGP.2 NVBDCP Sl.No.-66

Annexure - ASHA Incentives (Details of proposal under Sl. No. 202)

Amount in Rs. (Lakhs)

S. No	Programme/ Theme	Activity Proposed	Unit of Measure	Unit Cost (in Rs.)	Unit Cost (in Lakh)	Quantity/ Target	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
202.2.2.5	National Vector Borne Disease Control Programme (NVBDCP)	Dengue & chikunguniya campaign (For five month during 5 Peak transmission season)	Per Month	200	0.00	1133	9.06	Nature of Activity: Ongoing Unit Cost: @Rs.200/- Per Month for 5 Months Background: ASHA at village level are engaged for awareness creation and source reduction activities. There is need of intensive source reduction drive during peak transmission season as a preventive measures. ASHA Incentive provision is proposed for 5 months @Rs. 200 per month (Rs.1/- per house for maximum 200 houses per month) total Rs. 1000/- per ASHA during peak transmission season for all districts of the State Proposal for FY 2026-27: Rs. 200 per month per ASHA x 5 months x 50825 ASHAs Budgeted 80% looking into existing vacancy, non-performance & selection of new ASHAs which will take minimum 3 to 4 months of time etc. Budget approved in previous year under NDCP.2_NVBDP _ Sl.No.-67
202.2.2.6	National Vector Borne Disease Control Programme (NVBDCP)	Honorarium to Drug Administrator for administration of drugs (MDA)	Per DA	750	0.01	866	6.50	Nature of Activity: Ongoing Unit Cost: Proposed with revised incentive provisions i.e. Rs. 650/- PM to Rs.750/- PM (As per the approval of Mission Steering Group, NHM) Budget Proposed for the DA for administration of drug @750/- per DA as Honorarium. (Ongoing activity with revised unit Cost as per the revised cost norm NCVBDC-Gol i.e. Rs. 3000/- per 1000 population per DA. State has proposed 1 DA per 250 population accordingly Honorarium of Rs. 750/- per DA is proposed) Budget approved in previous year under NDCP.2 NVBDP _ Sl.No.-68
Sub Total ASHA incentive (NDCP-2)							31.99	
202.2.3	NLEP							
202.2.3.1	National Leprosy Eradication Programme (NLEP)	Incentive for detection of new Leprosy case before onset of any visible deformity	Per Case	250	0.0025	38	0.10	Nature of Activity: Ongoing Background: ASHA/AWW/Volunteer/etc will get Incentive for detection of Leprosy cases (@ Rs 250 for detection of an early case before onset of any visible deformity and @ Rs 200 for detection of new case with visible deformity in hands, feet or eye) Progress: 7349 new cases detected in the year 2024-25 . As per the report of March 2025, cases detected without visible deformity is 98.6% & cases detected with visible deformity is 1.4%.) Budget proposed for FY 2026-27 : Expected 7000 cases 1. Incentive to ASHA for new case detection without visible deformity: Rs 250/- per cases 2. incentive to ASHA for new case detection with visible deformity: Rs 200/- per cases Budget approved in previous year under NDCP-3_NLEP _ Sl.No.-69
202.2.3.2	National Leprosy Eradication Programme (NLEP)	Incentive for detection of new Leprosy case with visible deformity in hands, feet or eye	Per Case	200	0.002	1	0.00	

Annexure - ASHA Incentives (Details of proposal under Sl. No. 202)

Amount in Rs. (Lakhs)

S. No	Programme/ Theme	Activity Proposed	Unit of Measure	Unit Cost (in Rs.)	Unit Cost (in Lakh)	Quantity/ Target	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
202.2.3.3	National Leprosy Eradication Programme (NLEP)	PB Cases (Leprosy treatment completion)	Per Case	400	0.00	14	0.06	Nature of Activity: Ongoing Unit Cost: @Rs. 400/- Per Case Background: ASHA has been paid incentive of Rs 400/- after Treatment completion of PB cases. Progress: 7349 new cases detected in the year 2024-25 from which 4670 were MB cases (63% of new cases) and 2679 (37% of new cases) PB cases. Budget proposed for 7000 new cases in FY 2026-27 Budget proposed for 2590 PB cases (as per previous year data-37%) for follow-up by ASHA for completion of treatment @ Rs. 400/- per case Budget approved in previous year under NDCP-3 NLEP SI.No.-69
202.2.3.4	National Leprosy Eradication Programme (NLEP)	MB Cases (Leprosy treatment completion)	Per Case	600	0.01	25	0.15	Nature of Activity: Ongoing Unit Cost: @Rs. 600/- Per Case Background: ASHA has been paid incentive of Rs 600/- after treatment completion of MB cases. Progress: 7349 new cases detected in the year 2024-25 from which 4670 was MB cases (63% of new cases) and 2679 (37% of new cases) PB cases. Budget proposed for FY 2026-27 Budget proposed for 4410 MB cases (as per previous year data-63%) for follow-up by ASHA to completion of treatment @ Rs. 600/- per case Budget approved in previous year under NDCP-3_NLEP_ SI.No.-69
202.2.3.5	National Leprosy Eradication Programme (NLEP)	Referral of Reconstructive Surgery Cases (RCS) of leprosy cases	Per Case	500	0.01	1	0.01	Nature of Activity: Ongoing Unit Cost: @Rs. 500/- Per Case Background: Role of ASHA : Counselling patients & their family having G2D and eligible for RCS and mobilise for surgery if any followed by follow up of the case. Progress: An amount of Rs. 0.38 Lakhs has been approved in FY 2024-25 for referral of 400 G2D fit cases for RCS. out of which 99 cases operated in the year 2024-25. Budget proposed for FY 2026-27 It is proposed to conduct 75 RCS in 2026-27 @ Rs. 500/- as Incentive to ASHA for motivation to fit & eligible G2D cases for Reconstructive Surgery (RCS) and follow-up after RCS. Budget approved in previous year under NDCP-3 NLEP SI.No.-70
Sub Total ASHA incentive (NDCP-							0.31	
202.2.4	NTEP							

Annexure - ASHA Incentives (Details of proposal under Sl. No. 202)

Amount in Rs. (Lakhs)

S. No	Programme/ Theme	Activity Proposed	Unit of Measure	Unit Cost (in Rs.)	Unit Cost (in Lakh)	Quantity/ Target	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
202.2.4.1	National Tuberculosis Elimination Programme (NTEP)	Referral of TB Cases (Negative cases)	Per Test	0	0.00		0.00	Nature of Activity: Ongoing Unit Cost: @Rs.100/- Per Test Background : The presumptive TB examination rate increased remarkably in 2020-21 (1264 per lakh presumptive TB examination rate in 2020, increased to 3054 per lakh presumptive TB examination rate in 2024). Conditionality for payment : Incentive will be provided only when ASHA provides 5 quality samples in a month. Extent of Budget Proposed: 80% looking into expenditure trend in previous years Details of modalities to improve quality of sputum sample is at Write-up Annexure Activity Dropped as per the discussion in the NPCC Meeting
202.2.4.2	National Tuberculosis Elimination Programme (NTEP)	Treatment Supporter Honorarium for DS-TB Patients & Patients with INH resistance	Per Patient	1000	0.01	335	2.68	Nature of Activity: Ongoing Total target for TB Notification in 2026-27 is 62000 (61350 for DSTB + 650 for DRTB) Incentive proposed as per the CTD guideline following D. O. No. z-28015/24/2017-TB dated 09-07-2019 Total estimated DSTB & INH Reg. Cases- 61350 As per the reported data 90% treatment supporter are ASHAs & rest, 10% are belongs to TB Champions, Family Members & Community Volunteers. Extent of Budget Proposed: 80% looking into expenditure trend in previous years Budget approved in previous year under NDCP-4_NTEP_Sl.No.-73
202.2.4.3	National Tuberculosis Elimination Programme (NTEP)	Seeding of bank account details of TB patiens in Ni-kshay portal for enabling DBT Payments	Per ASHA	50	0.00	380	0.19	Nature of Activity: Ongoing Unit Cost: @Rs.50/- Per Case Target for bank account seeding in 2026-27 is 54000 patients (Out of 62000 expected Diagnosed cases, 8000 cases shall be managed by the PPSA & thus not factored in budget) Conditionality for incentive payment : Provision of incentive at rate of Rs.50/- to ASHA or community volunteer for facilitating seeding of bank account information of notified TB patient in Ni-kshay portal within 15 days of treatment initiation for enabling DBT payments under the National Tuberculosis Elimination Programme. Proposed as per Gol Letter No.D.ONo. V.11011/1/2022-NHM-II, Dtd. 26th October 2022 Budget approved in previous year under NDCP-4_NTEP_Sl.No.-74
202.2.4.4	National Tuberculosis Elimination Programme (NTEP)	Notification of TB patients by any Informant (Positive cases)	Per Case	500	0.01	248	0.99	Nature of Activity: Ongoing Target 2026-27 : Targeted notified patients as per NIKSHAY is 62000 cases. of which 53000 from public sector & rest in private Sector (PPSA-8000 + Other 1000). For all diagnosed patients from public sector, informant incentive of Rs 500/- will be generated in Ni-kshay. Eligible Cases for Informant Incentive: 53000 (80% of them are expected to be informed by ASHA i.e. 42400) Unit Cost: Incentive proposed @ Rs. 500/- per case as per CTD norms and basis of costing Incentive proposed vide D. O. No. z-28015/36/2017-TB (Pt-IV) dated 11-01-2019. Extent of Budget Proposed: 80% looking into expenditure trend in previous years Budget approved in previous year under NDCP-4_NTEP_Sl.No.-75

Annexure - ASHA Incentives (Details of proposal under Sl. No. 202)

Amount in Rs. (Lakhs)

S. No	Programme/ Theme	Activity Proposed	Unit of Measure	Unit Cost (in Rs.)	Unit Cost (in Lakh)	Quantity/ Target	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
202.2.4.5	National Tuberculosis Elimination Programme (NTEP)	Support in treatment adherence and completion of TB Preventive Treatment among eligible individuals	Per ASHA/ Community volunteer	250	0.00	1008	1.51	Nature of Activity: Ongoing Provision of financial incentive to ASHA/ Community Health Volunteer of Rs.250/-per individual for successful completion of TB Preventive Treatment Proposed as per Gol Letter No.D.ONo. V.11011/1/2022-NHM-II, Dtd. 26th October 2022 Total target population per annum: 100000 (Considering family contacts @2 for 40000 pulmonary TB cases and few other vulnerable group individuals) Approximately in 90% cases treatment supporter is ASHA & rest 10% cases are community volunteers/ TB Champion etc. Extent of Budget Proposed: 60% looking into expenditure trend in previous years
202.2.4.6	National Tuberculosis Elimination Programme (NTEP)	Treatment Supporter Honorarium for MDR/RR-TB Patients	Per Patient	5000	0.05	7	0.35	Nature of Activity: Ongoing Total estimated DRTB Notification in 2026-27 is 650 Incentive proposed as per the CTD guideline following D. O. No. z-28015/24/2017-TB dated 09-07-2019 As per the reported data 90% treatment supporter are ASHAs & rest, 10% are belongs to TB Champions, Family Members & Community Volunteers. Hence, Budget for 90% cases are placed under this head.
202.2.4.7	National Tuberculosis	ASHA incentive for ensuring presumptive TB testing	Per ASHA	1000	0.01	792	7.92	Nature of Activity: New It is assumed that 80% of the total Gram Panchayats will qualify in the Presumptive TB Examination
202.2.4.8	National Tuberculosis Elimination Programme (NTEP)	ASHA incentive for mobilization of eligible beneficiaries to X-ray camps	Per Camp	200	0.00	832	1.66	Nature of Activity: Ongoing Under TB MBA, X-ray camps are conducted at all villages for vulnerable individuals. Additionally, X-rays shall be conducted in all high-risk villages. Mobilization of the individuals to the camp site is very essential for success of the screening programme. It is assumed that around 100 individuals will be screened in X-ray per camp per machine. Incentive will be provided only if total mobilization is minimum 70% of the target screening of the day.
Sub Total ASHA incentive (NDCP-4)							15.31	
202.2.5	NVHCP							
202.2.5.1	National Viral Hepatitis Control Programme (NVHCP)	Institutional Delivery of Hepatitis-B positive pregnant women at referral centers and administration of Hep-B and HBIG to newborns.	Per Case	100	0.00	42	0.04	Nature of Activity: New Unit Cost: @Rs.100/- Per Case Role of ASHA for Incentivisation : ASHA ensures Institutional delivery of Hepatitis B positive pregnant women at referral centres where hepatitis B vaccine and HBIG are available for newborns and ensuring that the newborn receives the Hep B vaccine and HBIG.
202.2.5.2	National Viral Hepatitis Control Programme (NVHCP)	Linkage of the pregnant mother to designated treatment centres after delivery and ensuring viral load testing	Per Case	50	0.00	42	0.02	Nature of Activity: New Unit Cost: @Rs.50/- Per Case Role of ASHA for Incentivisation : ASHA shall have to establish Linkage of the pregnant mother to designated treatment centres after delivery and ensuring viral load testing. Target Revised as Approved by Gol
202.2.5.3	National Viral Hepatitis Control	Ensuring treatment completion for Hepatitis C	Per Case	100	0.00	7	0.01	Nature of Activity: New Unit Cost: @Rs.100/- Per Case
202.2.5.4	National Viral Hepatitis Control	Ensuring the Hepatitis C patients are undergoing SVR 12 (i.e. 12	Per Case	100	0.00	7	0.01	Nature of Activity: New Unit Cost: @Rs.100/- Per Case

Annexure - ASHA Incentives (Details of proposal under Sl. No. 202)

Amount in Rs. (Lakhs)

S. No	Programme/ Theme	Activity Proposed	Unit of Measure	Unit Cost (in Rs.)	Unit Cost (in Lakh)	Quantity/ Target	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
Sub Total ASHA incentive (NDCP-5)							0.08	
Grand Total ASHA Incentive under (NDCP)							59.92	
202.3	NCD							
202.3.1	NMHP							
202.3.1.1	National Mental Health Program (NMHP)	Identification of Persons with Mental Illness (New cases)	Per Case	100	0.00	0	0.00	Budget Not Approved
Sub Total ASHA incentive (NCD-1)							0.00	
202.3.2	NP-NCD							
202.3.2.1	National Programme for Prevention and Control of Diabetes, Cardiovascular Disease and Stroke (NP-NCD)	ASHA Incentive for performing activities under NCD Programme						Nature of Activity: Ongoing 1. ASHA Incentive for CBAC Total Population of the State: 470.00 lakhs Requirement of CBAC Form: CBAC forms were previously being filled up by ASHAs for the population above 30 years of age, to screen for common NCDs, as per GoI guidelines. Revised CBAC include other diseases like TB, Leprosy visual defects and Mental Health. Many of these ailments effort persons of age groups below 30 years of age. Any suspected detected from the CBAC forms are referred to higher centers for early diagnosis and treatment. Keeping in view the above and GoI guidelines for enrolment of the total population of all age. Hence, 470 lakhs CBAC forms are required to be filled up. But looking migration, ASHA incentive proposed for 80% of total eligible population. i.e. 376 lakhs X @Rs.10/- per person for filling-up of CBAC form Budget Approved: ASHA Incentive @Rs.10/- per filling-up of CBAC form 2. ASHA Incentive for Facilitating NCD Portal Entry of NCD Cases Unit Cost: Proposed Rs.100/- per ASHA per Month Each ASHA has to extend support to fill-up CBAC form of about 1000 population in her area. As part of these initiatives, ASHA to fill-up the C-BAC form of each individual every year and update the same on a yearly basis. As per the mandate ASHA shall have to conduct home visit of at least 10% households in each month for entry/ updation of CBAC form. She also supports, facilitate and ensure her concerned ANM to enter the CBAC form and Patient data in the NCD portal throughout the year. Also update the portal as when required in coordination with ANM. ASHA has also to prepare the line-listing of persons with risk assessment score (more than 4) separately in the ASHA diary & make sure their screening at SHC-AAM level at priority basis and ensure to enter the diagnosis in the NCD Portal. Major Deliverable for Payment: 1. Entry/ updation of CBAC form for at least 10% of households every month. 2. Line listing of population with risk-assessment score more than 4 in the ASHA diary. 3. Time-to-time mobilization of persons who score more than 4 during C-BAC Assessment. Extent of Budget proposed: Budgeted 80% looking into existing vacancies, non-performance of certain ASHAs, Time lag for selection of new ASHAs (may take 3 to 4 months) etc.
202.3.2.2		ASHA Incentive for for filling-up of CBAC form	Per Form	10	0.0001	682677	68.27	

Annexure - ASHA Incentives (Details of proposal under Sl. No. 202)

Amount in Rs. (Lakhs)

S. No	Programme/ Theme	Activity Proposed	Unit of Measure	Unit Cost (in Rs.)	Unit Cost (in Lakh)	Quantity/ Target	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
202.3.2.3		ASHA Incentive for Facilitating NCD Portal Entry of NCD Cases	Per Month/ Per ASHA	100	0.001	1121	13.45	Budget Approved: @Rs.100/- Per ASHA Per Month 3. ASHA Incentive for Follow up visit and its adherence towards NCD Cases Unit Cost: @Rs.100/- per patient at least Four follow-up visits per year. Follow-up of NCD Cases (HTN, DM, 3 common Cancers, Elderly, Deafness,) /Incentive Amount: Deliverables: Mobilize minimum 80% NCD cases (as per prevalence estimation) for institutional follow-up to ensure that patients are under control. Budget Approved : @100/- per patient at least Four follow-up visits per year. Budget Revised as Approved by Gol
202.3.2.4		ASHA Incentive for Follow up visit and its adherence towards NCD Cases (per patient at least Four follow-up visits per year.)	Per patient	100	0.001	101047	101.05	
Sub Total ASHA incentive (NCD-5)							182.77	
Grand Total ASHA Incetive under (NCD)							182.77	
202.4	HSS-Urban							
202.4.1	HSS-U							
202.4.1.1	Routine and Recurrent Activities							Activities proposed under Rural Component. Hence, not proposed under this head.
202.4.1.2	Health System Strengthening (HSS) Urban	ASHA Incentive for conducting MAS meeting	Per Month	100	0.00	106	1.27	Nature of Activity: Ongoing Total MAS functional in the State: 3489 Unit Cost: @Rs.100/- Per Month Role of ASHA for incentivisation : ASHA is the member secretary of Mahila Arogya Samiti (MAS). She facilitates activities of MAS i.e. organisation of monthly meetings, conducting awareness and other programmes. She also helps in record keeping & SoE submission. Proposed Incentive : ASHA receives Rs.100/- per per month for conducting said activities. Budget approved in previous year under HSS(U) Urban Health
202.4.1.3	Health System Strengthening (HSS) Urban	ASHA incentive for supporting for Ward Kalyan Samiti Meeting.	Per Month		0.00		0.00	Activity Dropped as the same activity is approved under ASHA routine activities
Grand Total ASHA Incetive							1.27	
202.5	HSS-Rural							
202.5.1	HSS-R							
202.5.1.1	Routine and Recurrent Activities	Line listing of all households/ population done at beginning of the year and updated after six months	Per Month	300	0.003	1133	40.79	Nature of Activity: Ongoing Unit Cost: Rs.300/- Per Month Background & Deliverables : ASHA to develop the village health register with all relevant population data through primary data collection by household survey. MOV : Village Health Register Head of Approval: Earlier approved under HSS-3 Community Engagement SI.No.159

Annexure - ASHA Incentives (Details of proposal under Sl. No. 202)

Amount in Rs. (Lakhs)

S. No	Programme/ Theme	Activity Proposed	Unit of Measure	Unit Cost (in Rs.)	Unit Cost (in Lakh)	Quantity/ Target	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
202.5.1.2	Routine and Recurrent Activities	Line listing and monthly updation of Eligible Couples	Per Month	300	0.003	1133	40.79	Nature of Activity: Ongoing Unit Cost: Rs.300/- Per Month Background & Deliverables: In order to get this incentive, ASHA shall have to prepares the line-listing of eligible couples in her assigned area and update the same on monthly basis. This will help her to plan and implement RMNCHA+N activities MOV- Line Listing Record Head of Approval: Earlier approved under HSS-3 Community Engagement SI.No.159
202.5.1.3	Routine and Recurrent Activities	Preparation of due list of ANC beneficiaries	Per Month	300	0.003	1129	40.64	Nature of Activity: Ongoing Unit Cost: Rs.300/- Per Month Background & Deliverables: ASHAs to prepare the due list of ANCs & update the same on monthly basis for regular follow up of for attending VHSND, PMSMA and finally mobilise them for institutional Delivery. MOV- Line listing Record Head of Approval: Earlier approved under RCH-1 Maternal Health SI.No.-2
202.5.1.4	Routine and Recurrent Activities	Preparation of due list of children to be immunised and updated on monthly basis	Per Month	300	0.003	1133	40.79	Nature of Activity: Ongoing Unit Cost: Rs.300/- Per Month Background & Deliverables: In order to get this incentive, ASHA prepares the due list of children to be immunized in her assigned area on a monthly basis, inform and mobilize the identified families to bring their children for immunization as per schedule. She maintains updated record in her diary. ASHA will share this information with ANM for uploading the data in Ue-VIN portal, this list is required for her to monitor the immunization of children as per schedule. Hence may be recommended. MOV- Due list Head of Approval: Earlier approved under HSS-3 Community Engagement SI.No.159
202.5.1.5	Routine and Recurrent Activities	Line listing of Adolescent Population 10-19 years	Per Month		0.000		0.00	Nature of Activity: New Unit Cost: Proposed Rs.100/- per ASHA per Month Background & Deliverables: For successful implementation of Adolescent Health Programme like IFA supplementation under WIFS, Distribution of Sanitary Napkins under Menstrual Hygiene Scheme & Pear Education Programme, line listing of adolescent population (10 to 19 years) needs to be maintained and updated on a monthly basis at community level. ASHA will prepare, maintain and update the list of adolescent population with details like Name, Gender, Age, Name of Parents, School/ college going, not in school or collage etc in her assigned area and ensure utilisation of services by the targeted beneficiaries. MOV- Line Listing Record Extent of Budget proposed: Budgeted 80% looking into existing vacancies, non-performance of certain ASHAs, Time lag for selection of new ASHAs (may take 3 to 4 months) etc. Activity Dropped as per the decisions in NPCC Meeting

Annexure - ASHA Incentives (Details of proposal under Sl. No. 202)

Amount in Rs. (Lakhs)

S. No	Programme/ Theme	Activity Proposed	Unit of Measure	Unit Cost (in Rs.)	Unit Cost (in Lakh)	Quantity/ Target	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
202.5.1.6	Routine and Recurrent Activities	Line listing of Elderly population	Per Month		0.000		0.00	Nature of Activity: New Unit Cost: Proposed Rs.100/- per ASHA per Month Background & Deliverables: a. ASHA has to prepare the line-listing of elderly persons separately in the ASHA diary referring CBAC data. b. She also to mention the status of each elderly person especially on the need of palliative care support if any. c. ASHA also to mobilise the elderly persons with multiple co-morbidity conditions for comprehensive geriatric assessment (CGA) at PHC/ UPHC Level. Proposal: Line listing of elderly persons & there on service updation if any shall be maintained on monthly basis. Extent of Budget proposed: Budgeted 80% looking into existing vacancies, non-performance of certain ASHAs, Time lag for selection of new ASHAs (may take 3 to 4 months) etc. Activity Dropped as per the decisions in NPCC Meeting
202.5.1.7	Routine and Recurrent Activities	NCD Enumeration (entry of CBAC form) and updation on regular basis in NCD portal	Per Month		0.000		0.00	Nature of Activity: New Unit Cost: Proposed Rs.100/- per ASHA per Month Background & Deliverables: Each ASHA has to extend support to about 1000 population in her area. As part of this initiatives, ASHA to fill-up the C-BAC form of each individual every year and update the same on an yearly basis. As per the mandate ASHA shall have to conduct home visit of at least 10% house holds in each month for entry/ updation of CBAC form. She also support her concerned ANM while entering the data in the NCD portal. ASHA has also to prepare the line-listing of persons with risk assessment score (more than 4) separately in the ASHA diary & make sure their screening at SHC level at priority basis. Major Deliverable for Payment: 1. Entry/ updation of CBAC form for atleast 10% of house holds every month. 2. Line listing of population with risk-assessment score more than 4 in the ASHA diary. 3. Time-to-time mobilisation of persons who score more than 4 during C-BAC Assessment. Extent of Budget proposed: Budgeted 80% looking into existing vacancies, non-performance of certain ASHAs, Time lag for selection of new ASHAs (may take 3 to 4 months) etc. Activity Dropped as per the decisions in NPCC Meeting

Annexure - ASHA Incentives (Details of proposal under Sl. No. 202)

Amount in Rs. (Lakhs)

S. No	Programme/ Theme	Activity Proposed	Unit of Measure	Unit Cost (in Rs.)	Unit Cost (in Lakh)	Quantity/ Target	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
202.5.1.8	Routine and Recurrent Activities	Mobilization of beneficiaries to VHND	Per Session	200	0.002	19863	31.78	Nature of Activity: Ongoing Unit Cost: Proposed with revised incentive provisions i.e Rs.200/- to Rs 300/- PM (As per the approval of Mission Steering Group, NHM) Background: ASHAs are involved in the activity to mobilize the beneficiaries to the session site for which they are incentivized. Deliverable : 90% targeted beneficiaries (PW, PNC mother, Children 0-5 years) are to be mobilised to attend VHSND/ integrated VHSND and RI sessions . i. Total Sessions expected to be held at VHSND (693446 Nos) + Int VHSND & RI (9360 nos)= 702806 Sessions ii. Total Sessions expected to be held at UHSND: (580 Urban Virtual SC AAMs x 8 sessions per SC AAM per month x 12 months= 55680 sessions (budgeted for 90% of UHSND sessions)= 50112 sessions iii. Total Expected Session VHSND+UHSND: 702806+50112= 752918 sessions ASHA incentive proposed for 95% of expected VHSND & UHSND sessions :715272 sessions Extent of Budget proposed: Budgeted 80% looking into existing vacancies, non-performance of certain ASHAs, Time lag for selection of new ASHAs (may take 3 to 4 months)etc. Head of Approval: Earlier approved under RCH-1_Maternal Health_Sl.No.-1, currently proposed under Routine and Recurrent Activities & Unit cost revised as per last year's approval
202.5.1.9	Routine and Recurrent Activities	Mobilization of children to Routine Immunization (RI Session)	Per Per Session	150	0.002	9971	11.97	Nature of Activity: Ongoing Unit Cost: Proposed with revised incentive provisions i.e. Rs. 150/- per Session to Rs.200/- per session (As per the approval of Mission Steering Group, NHM) Background & Deliverables: As per HMIS, 3.84 Lakh RI Sessions are expected (Planned) in a Year. Incentive shall be paid to ASHA if min 90% beneficiaries as per due list attend for vaccination. Budgeted for 90% Sessions = 3.45 Lakh Sessions Extent of Budget proposed: Budgeted 80% looking into existing vacancies, non-performance of certain ASHAs, Time lag for selection of new ASHAs (may take 3 to 4 months)etc. Head of Approval: Earlier approved under RCH-4_ Immunisation_Sl.No.-32 Budget Revised as per recommendation of NPCC
202.5.1.10	Routine and Recurrent Activities	Organising GKS(VHSNC) / WKS meeting	Per ASHA/ Per Month	150	0.002	1133	16.32	Nature of Activity: Ongoing Unit Cost: Proposed with revised incentive provisions i.e. Rs.150/- to Rs.250/- Per Month (As per the approval of Mission Steering Group, NHM) Background & Deliverables: GKS/ WKS meeting is planned on monthly basis . ASHA shall have to mobilise members of GKS/WKS to the meeting , facilitate discussions and keep record of the same. Extent of Budget proposed: Budgeted 80% looking into existing vacancies, non-performance of certain ASHAs, Time lag for selection of new ASHAs (may take 3 to 4 months)etc. Head of Approval: Earlier approved under HSS-3_Community Engagement_Sl.No.-159, currently proposed under Routine and Recurrent Activities & Unit cost revised as per last year's approval

Annexure - ASHA Incentives (Details of proposal under Sl. No. 202)

Amount in Rs. (Lakhs)

S. No	Programme/ Theme	Activity Proposed	Unit of Measure	Unit Cost (in Rs.)	Unit Cost (in Lakh)	Quantity/ Target	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
202.5.1.11	Routine and Recurrent Activities	Mobilising Community for celebration of Annual Calender days / campaign/melas/ health promotion activities and regular meetings and Ayusham Arogya Shivar	Per ASHA/ Per Month	0	0.000	0	0.00	Nature of Activity: New Unit Cost: Rs.400/- per month (Rs.200/- per day X 2 events per month) Background & Deliverables: MIn 2 events (on Designated Days) are planned as part of wellness activities for ensuring preventive & promotive care / services under CPHC programme at village level. The major responsibility of ASHA here in the programme is to -Mobilise participants for the event -Organise the event in coordination with CHO/ANM. Extent of Budget proposed: Budgeted 80% looking into existing vacancies, non-performance of certain ASHAs, Time lag for selection of new ASHAs (may take 3 to 4 months) etc. Activity Dropped as per the decisions in NPCC Meeting
202.5.1.12	Routine and Recurrent Activities	Maintaining vital event register (birth and death) and supporting universal registration to be updated on monthly basis	Per ASHA/ Per Month	300	0.003	1133	32.63	Nature of Activity: Ongoing Unit Cost: Proposed with revised incentive provisions i.e. Rs.300/- to Rs.400/- Per Month (As per the approval of Mission Steering Group, NHM) Background & Deliverable : -For institutional delivery, follow up with public health facility for issuance of birth certificate. -For home delivery ensure registration of new born & help ANM filling up registration form. -For death at community level, inform to concerned ANM. Extent of Budget Proposed: Budgeted 80% looking into existing vacancies, non-performance of certain ASHAs, Time lag for selection of new ASHAs (may take 3 to 4 months) etc. Head of Approval: Earlier approved under HSS-3 Community Engagement_Sl.No.-159, currently proposed under Routine and Recurrent Activities & Unit cost revised as per last year's approval
202.5.1.13	Routine and Recurrent Activities	Attending monthly PHC review meeting	Per ASHA/ Per Month	150	0.002	1133	20.39	Nature of Activity: Ongoing Unit Cost: Rs.150/- Per Month Background & Deliverable : Monthly meetings of ASHAs are conducted during last week of every month to review performance of each ASHA & handholding support for their capacity building, ensuring compilation of reports etc. by designated CP nodal persons. Proposal is for all ASHAs in the State @Rs.200/- for attending monthly meeting in their respective PHCs with revised unit cost. Deliverable - Attend monthly meeting at PHCs at designated day Head of Approval: Earlier approved under HSS-3 Community Engagement_Sl.No.-159, currently proposed under Routine and Recurrent Activities
202.5.1.14	Comprehensive Primary Healthcare	Facilitate delivery of new service packages under CPHC components	Per Month	1000	0.01	1133	81.58	Nature of Activity: Ongoing Team Based Incentives to ASHAs
202.5.1.15	Blood Services & Disorders	Follow-up of Sickie Cell Positive Cases for Treatment Compliance (6 home visits per year)- Funded under MOTA	Per ASHA	100	0.001		0.00	Nature of Activity: New Unit Cost: @Rs.100/- Per ASHA As per the GOI guidelines, ASHAs are designated as mentor for Sickie Cell trait cases and a mentor-cum-treatment supporter for people with Sickie Cell Disease (SCD). An incentive of Rs. 100/- per case per ASHA is provisioned for six follow-up of home visits to each Disease & Trait cases. Budget proposed under MoTA. Hence not reflected in NHM PIP.
Grand Total ASHA Incentive							357.67	
Total Budget Approved (ASHA Incentive)							732.81	

Annexure - IT Interventions (Details of proposal under Sl. No. 203)

Amount in Rs. (Lakhs)

S. No	Programme/ Theme	Activity Proposed	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	Quantity/ Target	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
203.1	RCH							
203.1.1	PC & PNDT Act	Digitization of Data Base	Lumpsum	1000000	10.00	0	0	Ongoing Activity Proposal is for maintenance of existing PCPNDT website & development of digitised form of amended QPR, Form A, B, G. And digitisation of D,E, H, I, J forms. Further, as per GoI recommendation digitised reporting formats for manufacturers / dealers / suppliers to report sales of machines U/s 22 of PC PNDT Act, Rule 13 Compliance: Intimation of changes in facilities. Progress: Digitization of Records on www.pndt.odisha.gov.in • 1794 USG facilities providing Ultrasound Services with qualified doctor, equipment and diagnostic services • 1540 Units applied for registration through online portal • 1084 Online Registration Granted, 54 Applications have been rejected by Collector – cum Appropriate Authority • 1587 USG Facilities are using Online Form F Software • 961093 Pregnancy Scans recorded as on 15.10.2025 Budget: Rs.10.00 Lakhs Lumpsum Proposed
203.1.2	Child Health	SNCU Data Management (Excluding HR)						
203.1.2.1	Child Health	Follow-up & Tracking of SNCU Graduates- Non Recurring Cost	Per Unit	10000	0.10			New Activity Background: All SNCU discharged cases are to be telephonically tracked by DEOs for intimating community & facility follow up dates. However, currently all DEOs use their own cell phones. Therefore, it is proposed to provision one cell phone to the SNCU which can be used by the DEOs during office hours for telephonic tracking of all SNCU graduates. Progress: Currently no official mobile phone is available Proposal: Provision cell phone to each SNCU to be used by DEOs during office hours for tracking & follow up of all SNCU graduates. Budget Proposed: @Rs.10000 x 45 SNCUs = Rs.4.50 Lakhs Activity Dropped as it is not Recommended during NPCC Meeting
203.1.2.2	Child Health	SNCU Data Management -Follow-up & Tracking of SNCU Graduates (Recurring Cost)	Per Month	300	0.00	1	0.04	Ongoing Activity with revised unit cost Background: Since SNCUs and NBSUs enter their data in the online FBNC portal on a real time basis, and all SNCUs provides follow-up services through Tele-consultation, there is a need of uninterrupted internet services in all the units. Progress: In this regard, one-time cost for hotspot/ wifi device was already provisioned to all SNCUs and NBSUs in previous PIPs. Proposal: Data Charges for SNCU Therefore, only monthly recurring cost @ Rs.300/- for data charges is proposed for 45 SNCUs. (last year approval Rs.300/- per month) Unit cost revised as per recommendation of CH Division

Annexure - IT Interventions (Details of proposal under Sl. No. 203)

Amount in Rs. (Lakhs)

S. No	Programme/ Theme	Activity Proposed	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	Quantity/ Target	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
203.1.2.3	Child Health	NBSU Data Management -Follow-up & Tracking of NBSU Graduates (Recurring Cost)	Per Month	300	0.00	1	0.04	Ongoing Activity with revised unit cost Background: Since SNCUs and NBSUs enter their data in the online FBNC portal on a real time basis, and all SNCUs provides follow-up services through Tele-consultation, there is a need of uninterrupted internet services in all the units. Progress: In this regard, one-time cost for hotspot/ wifi device was already provisioned to all SNCUs and NBSUs in previous PIPs. Proposal: Therefore, only Rs.300/- monthly recurring cost for data charges is proposed for 72 NBSUs. Unit cost revised as per recommendation of CH Division
203.1.3	Immunisation	Data SIM/ Cost						
203.1.3.1	Immunisation	Data Sim Cards rental for Temperature Loggers	Per logger p.a.	3000	0.03	0		Ongoing Activity Temperature loggers have been installed at existing ILR, DF, WIC & WIF.
203.1.3.2	Immunisation	Data Cost for Cold Chain Handlers, RVCCM & DVLM for manging eVIN application	Per Cold Chain Handler/ Month	150	0.00	0		Ongoing Activity Proposed as approved in last year
203.2	NDCP							
								IT Cost (Non Recurring & Recurring) - To be met out of HSS-Rural/ Urban
203.3	NCD							
								IT Cost (Non Recurring & Recurring) - To be met out of HSS-Rural/ Urban
203.4	HSS-Urban							
203.4.1	HSS-Urban	IT Equipment/Instruments for PMU Staff						Details Justification & Budget is at IT Peripherals Write-up Annexure
203.4.1.1	HSS-Urban	Procurement of new Computers & Peripherals at all levels						Budget Integrated with HSS-Rural, Details at IT Peripherals Write-up Annexure
203.4.1.2	HSS-Urban	AMC of Existing Computers at all levels						Budget Integrated with HSS-Rural, Details at IT Peripherals Write-up Annexure
203.4.2	HSS-Urban	IT Equipment/Instruments for Service Delivery Staff						Details Justification & Budget is at IT Peripherals Write-up Annexure
203.4.2.1	HSS-Urban	Procurement of new Computer & Peripherals at all levels						- Budget Integrated with HSS-Rural, Details at IT Peripherals Write-up Annexure
203.4.2.2	HSS-Urban	AMC of Existing Computers at all levels						- Budget Integrated with HSS-Rural, Details at IT Peripherals Write-up Annexure
203.4.3	HSS-Urban	Internet Connections Programme Management & Service delivery Units						Budget Integrated with HSS-Rural, Details at IT Peripherals Write-up Annexure
203.4.3.1	HSS-Urban	CPMU	Per District	60000	0.60	0		- Proposal: Service Provider 1 Business Broadband Fiber 1Gbps Annual
203.4.3.2	HSS-Urban	Public Health Facilities						

Annexure - IT Interventions (Details of proposal under Sl. No. 203)

Amount in Rs. (Lakhs)

S. No	Programme/ Theme	Activity Proposed	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	Quantity/ Target	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
203.4.4	Comprehensive Primary Healthcare (CPHC-Urban)	IT equipment & recurring cost for UPHC AAMs						
203.4.4.1	Comprehensive Primary Healthcare (CPHC-Urban)	Non Recurring: Procurement of Desktop & accessories for PHC AAMs						Requirement of IT Equipment saturated in previous years. Hence, no additional proposal proposed.
203.4.4.2	Comprehensive Primary Healthcare (CPHC-Urban)	Recurring Cost for PHC AAMs	Per Unit/ Per Annum		0.000			- Budget proposed under eSanjeevani Recurring Cost for Spokes
203.4.5	Comprehensive Primary Healthcare (CPHC-Urban)	Tele-Consultation Facility at AAMs (Urban)-eSanjeevani						Current Status: At present, under the e-Sanjeevani ecosystem, the state has 18 active HUBs, 32 District Headquarters Hospital (DHH), 28 SDH Sub-HUBs, 366 CHC Sub-HUBs (including two urban CHCs), which provides teleconsultation services to beneficiaries across the State. Proposal for 2026-27: New Sub Hubs UCHCs are proposed at 5 UCHCs Bhubaneswar - 04 Rourkela - 01
203.4.5.1	Comprehensive Primary Healthcare (CPHC-Urban)	Sub Hub Non Recurring Cost: Computer, Other Accessories including Printer	Per Unit	60000	0.60		0.00	IT Equipment: Supply of IT Equipment (Computer, Web Camera, Microphone) is proposed for 07 UCHC. The State has planned to have 2 IT sets each at Sub-Hubs. Budget: FY 2026-27: For New Proposed Sub Hubs: 14 (@ 2 per sub hub (UCHC) X 7 UCHCs Total Requirement for FY 2026-27: 14 Proposed as part of IT Equipment/Instruments for Service Delivery Staff Projected at HSS-Rural
203.4.5.2	Comprehensive Primary Healthcare (CPHC-Urban)	Sub Hub: Recurring Cost- Human Resource Support for Teleconsultation			0.00	0		- Not Applicable
203.4.5.3	Comprehensive Primary Healthcare (CPHC-Urban)	Sub Hub : Session Cost for Specialist Consultation	Per Session	2500				Budgeted under HSS-Rural_Tele-Consultation Facility at AAMs (Rural)-eSanjeevani
203.4.5.4	Comprehensive Primary Healthcare (CPHC-Urban)	Sub Hub : Session Cost for General consultation Sessions	Per Session	1000				Budgeted under HSS-Rural_Tele-Consultation Facility at AAMs (Rural)-eSanjeevani
203.4.5.5	Comprehensive Primary Healthcare (CPHC-Urban)	Sub Hub : Internet Charges	Per Unit	1000	0.01	0		- Sub-Hub: UCHC-07
203.4.5.6	Comprehensive Primary Healthcare (CPHC-Urban)	Sub Hub : Miscellaneous Cost	Per Unit	1000	0.01	0		The budget under this head shall be utilized for printing of prescription, maintaining register etc for UCHC -07- Activity shifted to HSS-19, Sl No 204.12 (IEC & Printing)
203.4.5.7	Comprehensive Primary Healthcare (CPHC-Urban)	Spokes : Non Recurring Cost- Computer, Other Accessories including Printer						For UPHC & USHC : Computer and Accessories available at the spokes, hence not proposed

Annexure - IT Interventions (Details of proposal under Sl. No. 203)

Amount in Rs. (Lakhs)

S. No	Programme/ Theme	Activity Proposed	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	Quantity/ Target	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
203.4.5.8	Comprehensive Primary Healthcare (CPHC-Urban)	Spokes Recurring Cost						Proposal-1: Session Cost for Spokes- Not Applicable Proposal-2: Internet Charges for Spokes- @Rs.500/- Per Month X 254 (i.e. 116 UPHCs and 138 USHCs) X 12 months Proposal-3: Miscellaneous Charges/ Cost- @Rs.400/- Per Month X 254 (i.e. 116 UPHCs and 138 USHCs) X 12 months Activity not approved by GoI
203.4.5.8.1	Comprehensive Primary Healthcare (CPHC-Urban)	Internet Charges for Spokes	Per Unit/ Per Month	500	0.01	3	0.18	
203.4.5.8.2	Comprehensive Primary Healthcare (CPHC-Urban)	Miscellaneous Charges/ Cost	Per Unit/ Per Month	400	0.00	0	-	
203.5	HSS-Rural							
203.5.1	HSS-Rural	IT Equipment/Instruments for PMU Staff						Details Justification & Budget is at IT Peripherals Write-up Annexure
203.5.1.1	HSS-Rural	Procurement of new Computers & Peripherals at all levels	Per Unit	60000	0.60		-	Proposed under HSS-11_Pranning & Programme Management, Sl.No.-194
203.5.1.2	HSS-Rural	AMC of Existing Computers at all levels	Per Unit	2000	0.02	47	0.94	
203.5.2	HSS-Rural	IT Equipment/Instruments for Service Delivery Staff						Details Justification & Budget is at IT Peripherals Write-up Annexure
203.5.2.1	HSS-Rural	Procurement of new Computer & Peripherals at all levels	Per Unit	60000	0.60	2	1.20	Approval: 1. Procurement of IT equipment is proposed for 23 AAM-SHCs, as the earlier provided set to CHOs are either non-functional and beyond repair. 2. New Laptops were supplied to 578 operational MHTs (at that time) in 2023-24. For rest pending 62 MHTs, Laptops is proposed to ensure reporting and daily updation of reports under RBSK MIS. Total Sanctioned MHTs : 640 3. Establishment of new Tele-consultation Hub at 2 MCHS & Sub Hub at 3 SDHs (40 Computers) 4. Establishment of new Tele-consultation Sub Hub at 7 Urban CHCs (14 Computers) 5. Lap Top at SNCU for Tele- Consultation (10 Computers) 6. Computer for C&DST lab, VIMSAR Burla is required for entry of test results in Ni-kshay and LIMS. (2 Computers) Total: 151 Computers The proposal is considered for approval as per the discussion in the NPCC meeting
203.5.2.2	HSS-Rural	AMC of Existing Computers at all levels	Per Unit	2000	0.02	145	2.90	
203.5.3	HSS-Rural	Internet Connections Programme Management & Service delivery Units						
203.5.3.1	HSS-Rural	SPMU	Lumpsum	968000	9.68	0	-	SPMU is connected with 100 Mbps Internet Bandwidth and 8 Mbps NIC P2P Link The cost includes GST of 18%. Service provider : Railtel India
203.5.3.2	HSS-Rural	DPMU/ CPMU	Per District	60000	0.60	1	0.60	Proposal: Service Provider 1 Business Broadband Fiber 1Gbps Annual

Annexure - IT Interventions (Details of proposal under Sl. No. 203)

Amount in Rs. (Lakhs)

S. No	Programme/ Theme	Activity Proposed	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	Quantity/ Target	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
203.5.3.3	HSS-Rural	BPMU	Per Block	36000	0.36	8	2.88	Proposal: Service Provider 2 Business Broadband in Air Fiber 50-100 Mbps Annual
203.5.3.4	HSS-Rural	Public Health Facilities						1. PHC & SHC AAM Proposed under IT equipment & recurring cost for AAMs 2. DHH/ SDH & CHC Proposed under eSanjeevani head.
203.5.4	HSS-Rural	Cost for AMC/ CMC of IT Peripherals, Subscription fees (Firewall and Antivirus) at PMUs of different levels.	Lump sum	7209000	72.09	0	0	AMC/CMC of VC Infrastructure: Rs. 31.43 lakhs towards VC System is installed at SPMU & DPMU , NHM The Total Order value was @ Rs.2,66,33,991/- . The AMC Cost is calculated @ 10% of the Total procurement Cost of VC system + GST as per the scope of GeM Bid. AMC for CCTV installed at SPMU with NVR and POE Switches (06 nos and 38 POE Camera): Rs. 0.54 Lakhs. The cost includes GST of 18%. The cost calculated @ 10% of the Total procurement Cost of CCTV Installation. CMC for EPABX System: Intercom facility is used by different sections of SPMU, NHM for voice communication: Rs.92,040/- inclusive of GST. @ 15% of purchase price i.e Rs.5.20 Lakhs Subscription Renewal for SOPHOS Firewall: Rs.23.60 lakhs The Firewall is the gateway device installed at SPMU, NHM towards security protection from Internet. The cost includes GST of 18% and subscription fee for 03 years including Hardware Warranty and protection to online threats Renewal of Antivirus License for 03 Years: Rs. 11.32 Lakhs: The Antivirus Software is used by SPMU Staff to protect individual Desktop/Laptop against Viruses from different sources. There are 101 users at SPMU Level. The cost includes GST of 18%.) Fund at district & Block level for rest of above activities are met out of State Budget The procurement will be made as per OGFR Rules.
203.5.5	Comprehensive Primary Healthcare (CPHC)	IT equipment & recurring cost for AAMs (PHC and SHCs)						
203.5.5.1	Comprehensive Primary Healthcare (CPHC)	Non Recurring: Procurement of Desktop & accessories for PHC AAMs						Requirement of IT Equipment saturated in previous years. Hence, no additional proposal proposed.
203.5.5.2	Comprehensive Primary Healthcare (CPHC)	Recurring Cost for PHC AAMs	Per Unit/ Per Annum	5000	0.050	35	1.75	Gol Norm: @Rs.5000/- per annum However, as per the communication from Gol, Bharat Net Connection has been installed at each PHC AMMs (as per the letter no. BSNL/12(13)/1/2022-NOW-BBIN, Dtd. 21.06.2022). As per prevailing rate BSNL is charging @Rs. 525/- per month (Rs.450/- + 18% GST) Budget Revised @ Rs. 5000/- per annum for 1296 AAM PHC as per recommendation of NPCC

Annexure - IT Interventions (Details of proposal under Sl. No. 203)

Amount in Rs. (Lakhs)

S. No	Programme/ Theme	Activity Proposed	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	Quantity/ Target	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
203.5.5.3	Comprehensive Primary Healthcare (CPHC)	Non Recurring: Procurement of Computer & accessories for SHC AAMs						Proposal : 1 Approved for all 6688 SC AAMs during pervious years in phases . But not yet purchased CHO positions are vacant Hence, Proposed as part of Revalidation of Previous Years' Approvals in PIP 2026-27: Proposal -2 Procurement of IT equipment is proposed for 23 AAM-SHCs, as the earlier provided set to CHOs are either non-functional and beyond repair. Included under IT equipment/ Instruments for Service Delivery Staff
203.5.5.4	Comprehensive Primary Healthcare (CPHC)	Recurring Cost for SHC AAMs	Per Unit/ Per Annum	5000	0.050	189	9.45	Gol Norm: @Rs.5000/- per annum However, as per the communication from Gol, Bharat Net Connection has been installed at each SHC AMMs (as per the letter no. BSNL/12(13)/1/2022-NOW-BBIN, Dtd. 21.06.2022). As per prevailing rate BSNL is charging @Rs. 525/- per month (Rs.450/- + 18% GST) Budget Revised @ Rs. 5000/- per annum per SHC AAMs as per recommendation of NPCC
203.5.6	Comprehensive Primary Healthcare (CPHC)	e-Decision Support System for Community Health Officers(DSS) - CHO Sathi App	Lumpsum	700000	7	0	0	Ongoing Activity Justification: The CHO-Sathi DSS is a digital tool to support CHOs and AAMs with standardized clinical protocols, case management, referrals and monitoring dashboards. Currently functional in two service areas, the proposal seeks to scale it up across all ten service modules to enhance service delivery, data quality and health outcomes statewide. Budget for FY 2026-27: The CHO- Application is a digital decision support system designed to support the capacity of CHOs in ensuring management / treatment services at OPD. Fund proposed for Application management & Maintenance (bug fixing, updates, module enhancements). Server hosting, cloud storage and data security & Monitoring, reporting, and quarterly review workshops & Contingency & minor customizations). Lump Sum Annual Requirement for 2026-27: Rs. 7 lakhs
203.5.7	Comprehensive Primary Healthcare (CPHC)	Tele-Consultation Facility at AAMs (Rural)-eSanjeevani						Current status At present, under the e-Sanjeevani ecosystem, the state has 18 active HUBs, 32 District Headquarters Hospital (DHH), 28 SDH Sub-HUBs, 366 CHC Sub-HUBs, and 6,830 spokes, which are providing teleconsultation services to beneficiaries across the State. To further strengthen, specialist access, it is proposed to expand the telemedicine network by designating new Medical Colleges as HUBs in FY 2026-27.

Annexure - IT Interventions (Details of proposal under Sl. No. 203)

Amount in Rs. (Lakhs)

S. No	Programme/ Theme	Activity Proposed	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	Quantity/ Target	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
203.5.7.1	Comprehensive Primary Healthcare (CPHC)	HUBS/ Sub-Hubs for Tele-Consultation						Proposal for 2026-27: New HUBs/ Sub Hubs/ Spokes are proposed in the following manner: A. Hub: 2 (Saturation of all MCH expected to be operational) 1.Government Medical College & Hospital (MCH), Phulbani, Kandhamal. 2.PGI MER Capital Hospital Bhubaneswar B. Sub Hubs: All Sub Hubs are approved earlier in NHM PIP. But the procurement of IT equipments are not done by 14 facilities. Hence, activity re-proposed for functionalisation of Teleconsultation Units in F.Y.2026-27. 1. SDH: Proposed 3nos out of 32nos (29 SDHs are registered in e-Sanjeevani) 2. CHC: Proposed 11nos out of 375nos (364 CHCs are registered in e-Sanjeevani)
203.5.7.1.1	Comprehensive Primary Healthcare (CPHC)	Hub/ Sub Hub : Non Recurring Cost-Computer, Other Accessories including Printer	Per MCH		0.00			IT Equipment: Supply of IT Equipment (Computer, Web Camera, Microphone) is proposed for 2 New Hubs at MCHs & 14 Sub Hubs at SDH/CHCs. The State has planned to have 6 IT sets at each Hub , 2 IT sets each at Sub-Hubs. Budget: FY 2026-27: For New Proposed Hubs: 12 (@ 6 per new Hub X 2 Hubs) For Re-Proposed Sub Hubs (SDHs/CHCs): 28 (@2 per Sub Hub X 14 Sub Hubs) Total Requirement for FY 2026-27: 40 Proposed as part of IT Equipment/Instruments for Service Delivery Staff
203.5.7.1.2	Comprehensive Primary Healthcare (CPHC)	Hub/ Sub Hub : Human Resource Support for Teleconsultation	Per person p.m.	19700	0.20	1	2.36	Ongoing Activity Tele-Consultation Coordinator: (Proposed for 20 MCHs + 32 DHHs) Engaged through outsource agency (Skilled labour rate @Rs.480/- per day for 26 days in a month = Rs.12480/- + ESI & EPF = Rs.19700/-) The proposal is considered for approval as per the discussion in the NPCC meeting
203.5.7.1.3	Comprehensive Primary Healthcare (CPHC)	Session Cost for Hub & Sub Hub: Super Specialist Sessions at Hub	Per session	3000	0.03	0		Status 2024-25 (As per portal): Super Spl. Consultations at MCH Hub: 7836 Super Spl. Consultations at DHH Sub-Hub: 11304 Total Consultations: 19140 (1914 sessions) Proposal in increased form as State has stressed upon follow-up discharge cases in convergence with MCHs. 6 sessions (duration - 120minutes per session) per week x 52 weeks p.a. x 20 Hubs = 6240 sessions
203.5.7.1.4	Comprehensive Primary Healthcare (CPHC)	Session Cost for Hub & Sub Hub: Specialist sessions at Hub & Sub-hubs	Per session	2500	0.03	670	16.75	Status 2024-25 (As per portal): Super Spl. Consultations at Hub: 54875 Super Spl. Consultations at Sub-Hub: 332930 Total Consultations: 387805 (38780 sessions) Proposal 2026-27: Proposed 38000 sessions

Annexure - IT Interventions (Details of proposal under Sl. No. 203)

Amount in Rs. (Lakhs)

S. No	Programme/ Theme	Activity Proposed	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	Quantity/ Target	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
203.5.7.1.5	Comprehensive Primary Healthcare (CPHC)	Session Cost for Sub Hub: General consultation Sessions	Per session	1000	0.01	2860	20.02	Status 2024-25 (As per portal): General Consultations at Sub-Hub: 1041581 Total Consultations: 1041581 (104158 sessions) Proposal 2026-27: Proposed 100000 sessions
203.5.7.1.6	Comprehensive Primary Healthcare (CPHC)	Internet Charges for Hubs	Per Month	2000	0.02	0	-	Hub: 20 MCHs
203.5.7.1.7	Comprehensive Primary Healthcare (CPHC)	Internet Charges for Sub-Hubs	Per Month	1000	0.01	12	1.44	Sub-Hub: DHH-32, SDH-32 & CHC-375
203.5.7.1.8	Comprehensive Primary Healthcare (CPHC)	Miscellaneous Cost for HUBs/ Sub-Hubs	Per Month	1000	0.01	0	-	The budget under this head shall be utilised for printing of prescription, maintaining register etc for MCH HUBs-20, DHH & SDHs Sub Hubs-64. Budget not Approved by GoI
203.5.7.1.9	Comprehensive Primary Healthcare (CPHC)	Non Recurring Cost for Spokes: Computer, Other Accessories including Printer						Computer & Peripherals Proposed as part of IT Equipment/Instruments for Service Delivery Staff. Hence, not proposed in this head.
203.5.7.1.10	Comprehensive Primary Healthcare (CPHC)	Recurring Cost for Spokes						Proposal-1: Session Cost - NA Proposal-2: Internet Charges : Proposed under IT recurring Expenses AAM Proposal-3: Misc Cost : Not proposed , to be met out of State Fund-Contingencies
203.5.8	IT Interventions	Closed User Group Connections	Lump sum	97351000	973.51	0	0	Background: Post paid mobile connection to Health Service Providers was introduced in January 2010 for efficient communication amongst various field functionaries and programme officers of the Health Department. In this system, Health Service Providers can communicate with each other without any charges. These users are tied in a pre – specified loop through which they are able to send or receive messages. It provides unlimited talk time & SMS services between the users. Provisions : As per the provision ASHAs are given Rs.79/- plan per month, Sector/ Block/ District/ State level workforce are given Rs.89/- plan & Block/ District/ State level Officers are given Rs.149/- plan. Approved Amount in F.Y. 2025-26: Rs.973.51 Lakhs (Rs.414.30 Lakhs approved under Sl. No. 194 & Rs.559.21 Lakhs approval under Sl.No. 159) Proposal in 2026-27: Rs. 973.51 lakhs as approved last year.
203.5.9	IT Interventions	Management & Maintenance of Portals/ Applications						
203.5.9.1	IT Interventions	Management & Maintenance of HMIS & RCH Portal	Lumpsum		0.00		-	
203.5.9.1.1	IT Interventions	Capacity Building/ Training						Budget Proposed under HSS-16_Capacity Building Including Training_Sl.No.201
203.5.9.1.2	IT Interventions	IT Interventions						Proposed in this section - Internet Connections at PMU & Service Delivery

Annexure - IT Interventions (Details of proposal under Sl. No. 203)

Amount in Rs. (Lakhs)

S. No	Programme/ Theme	Activity Proposed	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	Quantity/ Target	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
203.5.9.1.3	IT Interventions	IEC & Printing						Budget Proposed under HSS-19_IEC & Printing_SI.No. 204
203.5.9.1.4	IT Interventions	Planning & Programme Management						Contingency for Report Returns shall be met out of Administrative Contingencies provisioned for PMU at all level. Budget Proposed under HSS-11_Technical Assistance_ SI.No.194
203.5.9.2	IT Interventions	Other Activities						
203.5.9.2.1	IT Interventions	Implementation of RCH Portal/ ANMOL/ MCTS- Device allowance to ANMs for online reporting	Per SC	850	0.01	242	14.81	Ongoing Activity Total Sub center - 6688 Rural + 580- Virtual SC Urban + 1338 New = Total 8606 Mobile / Tab / Internet charges per month @ Rs. 850/- per ANM of SC • ANMs are using their mobile for data update in different Apps & portals (ANMOL, NCD, HWC, FPLMIS, IDSP, E ASHA, U WIN, NCD portal etc) • The tablet provided to ANMs during 2018-19 does not support in running the Application due to low version of Android App. Again it is having 2 GB RAM and hence the device performance is poor. • AS part of this initiative each ANM is being provided Rs.750/- as device allowance and Rs. 100/- as internet charge subject to > 85 % achievements reported in desired data fields. • The BDMS will validate the achievement % in each portal and approved for release of payment Budget proposed 60% of total budget as it is a performance based deliverable.
203.5.9.3	IT Interventions	Data Validation/ Triangulation						
203.5.9.3.1	IT Interventions	Internal validation of data by State & District Team	Per District	95000	0.95	0		Nature of Activity: Ongoing This activity shall be carried out in 6 districts yearly once jointly by State M & E Team + District reporting personnel. Evaluation of data quality in terms of completeness, correctness and timeliness of reporting in HMIS formats, related records/registers and HMIS portal needs validation of HMIS data at various levels which is highly necessary. This activity shall be carried out in 6 districts (2 from each zone) yearly once jointly by State M & E Team + District reporting personnel. HMIS verification app. Shall be used for the said internal validation.

Annexure - IT Interventions (Details of proposal under Sl. No. 203)

Amount in Rs. (Lakhs)

S. No	Programme/ Theme	Activity Proposed	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	Quantity/ Target	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
203.5.9.3.2	IT Interventions	Data Validation/ Triangulation by 3rd Party						Proposal: In the F.Y. 2026-27, about 10% i.e. 700 SHC will be identified on random basis for validation/ triangulation of data comparing register, report and attending beneficiaries in the field. Modalities of Implementation: This exercise will be taken-up through Medical Colleges, AIIMS & Development Partners working with the State Govt. The detailed modalities of validation will be finalized in consultation with representatives from Medical Colleges & AIIMs. After such rigorous exercise they shall have to present the findings before district level authorities for appropriate action if any. Budget Proposed under HSS-1_CPHC_Independent Monitoring Cost for performance assessment of AAMs
203.5.9.4	IT Interventions	Management & Maintenance of State Specific Portals & Applications						
203.5.9.4.1	IT Interventions	e-Rakt Kosh	Lumpsum	1430970	14.31	0		Odisha has been implementing e-Blood Bank since 2012, which is currently being operational in 63 Blood Centers. The Application has been integrated with the e-Rakt Kosh & have features like Collection, Issue, Camp through APIs. It is also having state specific features like Annual Indent of Consumables, Monthly and Annual Progress Report etc. Total Target: 91 Blood Centers Justification: NHM is maintaining the Application Since 2016 through NICSI and making necessary changes as per the requirement of State Blood Transfusion Council. Proposed Changes in 2026-27 apart from regular maintenance- The Application will now in the process of Integration with the Odisha e-HMIS (e-Sushrut) for seamless flow of information between the Nursing Requisition Module of the Hospital MIS and e-Blood Bank. It also now a part of Chief Minister's Citizen Centric Chat Bot, where the Stock Position is Shown to Citizens on request. The generation of Donor Certificate and Camp Registration will be on board to the Chat Bot in 2026-27. The Application will also be audited for Cyber Security in 2026-27. Budget Breakup: • No. of Resources engaged through NICSI- 2 (One Level-7 and One Level-2) • Per Month Cost- Rs 60000+Rs30000= Rs 90000/- • Annual Cost (12 Months)- 90000*12=10,80,000/- • Agency Margin (4.94%)- 53,352/- Per Year • NICSI Margin for on-going project before 2022 (7%)- 79,335/- • GST on above (18%)- 2,18,284/- Total Budget Proposed- 14,30,970/-
203.5.9.4.2	Quality Assurance	NQAS- Facility based KPI Reporting	Lumpsum	2030000	20.30	0	-	Budget Not Approved

Annexure - IT Interventions (Details of proposal under Sl. No. 203)

Amount in Rs. (Lakhs)

S. No	Programme/ Theme	Activity Proposed	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	Quantity/ Target	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
203.5.9.4.3	Community Engagement	Mobile Handset Allowances to ASHAs	Per ASHA	250	0.0025	1133	23.79	Ongoing activity: Proposed as approved last year ASHAs are given mobile handset allowances as they are not been given handset by the Dept.. ASHAs are eligible to avail mobile allowance in case 1. the have the Mobile Hand Set 2. Active in the official whatsapp group at SC level Budget Proposed 70% of the total requirement based on the eligibility of ASHAs to avail the benefit as per the previous reported data.
203.5.9.4.4	HRH	Human Resource Information Systems (HRIS)	Lumpsum	1000000	10	0	0.00	This has been developed to maintain the Profile and activities coming under HR Development of all the contractual staff positioned under the NHM Scheme. • Number of Resources engaged through National Informatics Centre Services Inc. - NICSI (Level-7)- 1 • Resource Cost- Rs 60,000/- Per month • Annual Cost (12 Months) – 60,000*12= Rs 7,20,000/- • Agency Margin (4.94%)- 35,568/- Per Year • NICSI Consultancy Charges (9%) - 68,000/- • GST on above (18%)- 1,48,242/- • Miscellaneous Cost – 28,190/- (Include incidental expenditures and Training, if required) Total Budget Proposed- 10,00,000/-
203.5.9.5	Other State Specific IT System							Other System Managed & Maintained by State are : T-QAS, e-ASHA, e-Swasthya Nirman, NHM Web Site, Mission Connect, ORMS, NGO Monitoring System and BI Dash Board for ODK Toolkit Data Details of Application & its requirement are given below: Budget Breakup: • Annual Maintenance and Change Request Cost Arrived through Tender- Rs 18,81,486/- • GST (18%)- Rs 3,38,668 • Total Cost- Rs 22,20,154/- • Cost for SMS (M-Seva ,C-DAC)- 6 Lakhs Units*0.11 Paisa+ GST= 77,880/- • Cost for Whatsapp Message SMS (M-Seva ,C-DAC)- 6 Lakhs Units*0.12 Paisa+ GST= 84,960/- • Tentative Cost for Cyber Security Audit for e-ASHA and NHM Web Site- Rs1,17,006/- Total Budget Proposed- 25,00,000/-

Annexure - IT Interventions (Details of proposal under Sl. No. 203)

Amount in Rs. (Lakhs)

S. No	Programme/ Theme	Activity Proposed	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	Quantity/ Target	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
203.5.9.5.1	Other State Specific IT System	e-ASHA	Lumpsum	500000	5.00	0		Background : e-ASHA is a combination of Web Portal and Mobile Application to track the activities performed by ASHAs which has the features like Personal Profile Management, Claim Management, Training Management, Provisioning Management, Kalyan Yojana, Success Stories and Alert/ Notifications via SMS/ Whatsapp. - The Claim entry was done at the SC AAM level through mobile app and the same is verified and processed for payment at the block level through the web portal. Changes proposed in 2026-27- Code up gradation to Latest .NET Core and integration with IFMS (SNA Spars A/c) Implementation : By vendors empanelled by OCAC
203.5.9.5.2	Other State Specific IT System	e-Swasthya Nirman	Lumpsum	500000	5.00	0		Background: e - Swasthya Nirman is a web-enabled and Mobile Based Application developed to track and trace the physical and financial progress of all new construction activities undertaken by Department of Health & Family Welfare, Govt. of Odisha at State, district and block level. The Construction Activities of the schemes like NHM, PM-ABHIM, ECRP-II, OMBADC, State Budget, 15th Finance Commission and DMF from the year 2019-20 are covered under the scope of the Application. Changes proposed in 2026-27- Attendance of Monitoring Officers at Spot, More Reports as per User Requirements Implementation : By vendors empanelled by OCAC
203.5.9.5.3	Other State Specific IT System	T-QAS (Training Quality Assessment System)	Lumpsum	500000	5.00	0		Background: It is an online system with Mobile APP for Participants and Resource Persons to ensure training quality parameters of different training programmes under NHM-Odisha. The focus areas of TQAS are Conduct Training as per Schedule, Online registration of Participants and RPs, Daily attendance through a Geo-Tag enabled System, Conduction of Online Pre and Post Test, Online Feedback on Training, Generation of Claim Sheets and Settlements, Generation of Relive Order &Generation of Analytic Reports of Analysis of Pre-Post Test Answers, Feedbacks and Claim Settlements Changes proposed in 2026-27- Integration with Sashakt Portal and Stabilization with More analytical Reports Implementation : By vendors empanelled by OCAC
203.5.9.5.4	Other State Specific IT System	NHM Web Site	Lumpsum	500000	5.00	0		Background: The Bilingual NHM Web Site required continuous Updation and Cyber Security Audit. - Budget Proposed for Maintenance and Audit:- 5 Lakhs Implementation : By vendors empanelled by OCAC

Annexure - IT Interventions (Details of proposal under Sl. No. 203)

Amount in Rs. (Lakhs)

S. No	Programme/ Theme	Activity Proposed	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	Quantity/ Target	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
203.5.9.5.5	Other State Specific IT System	Other State Specific Modules	Lumpsum	500000	5.00	0		Background: NGO Application System : This is a web based system to automate the process of handling the PPP mode Projects, starting from the Applying through Tender, Scrutiny, Award of Work and Monitoring the Financial Status. Mission Connect : Around 60000 CUG Subscribers are currently enrolled in this system. The process of Activation/ Deactivation and Management of Database are done through this web enabled system. It also provides the Numbers for - Public View. ORMS: The Online Recruitment Management System is developed to automate the Recruitment System of NHM, starting from Applying for a post online to Scrutiny and selection of the candidates. Budget Proposed for Maintenance: 5 Lakhs Implementation : By vendors empanelled by OCAC The proposal is considered for approval as per the discussion in the NPCC meeting
Total Budget Approved							99.15	

Annexure - IEC & Printing (Details of proposal under Sl. No. 204)

Amount in Rs. (Lakhs)

S. No	Programme/ Theme	Activity Proposed	Unit of Measure	Unit Cost (Rs)	Quantity/ Target	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
A. Integrated IEC activities							Proposal : Comprehensive IEC / BCC Strategy for improving Health Service Delivery , NHM PIP 2026-27 : The Comprehensive IEC / BCC Strategy will be majorly focused on system approach rather than domain specific initiatives. However, to deal with programme specific requirements, selected initiatives will be undertaken. 1) System approach for strengthening IEC / BCC: - This approach has been proposed wherein the interventions planned are targeted for all domains not for any specific domain & majorly intended towards strengthening/creating Systems which will facilitate implementation of IEC/BCC activities in the community/ Facility level. Further, it will address issues of duplication / overlapping of efforts & rational utilisation of fund. - As part of this health system strengthening, entire IEC activities have been broadly categorised as Facility Level, Community level & Cross cutting areas interventions. 2) Programme specific IEC/ BCC: - This approach will focus on programme centric initiatives & thematic campaigns (wherever required). - Here in this case, the plan has been developed to address communication needs through a mix of mass media, mid-media and Inter Personal Communication (IPC) for different programmes. - Special Interventions have been planned as part of convergent actions with various Deptts viz. Bus Panel Advertisement with the support of Odisha Transport Deptt., Branding of major Railway Stations & jingle before & after announcements with the support of Indian Railways , advertisement at 709 selected Common Service Centres across the State with support of Ministry of Electronic & Information Technology (MeitY).
204.1	Facility Level Activities						
204.1.1		Digital IEC Corner at OPD	Per Unit	60,000	8	4.80	Digital IEC Corner at OPD: OPD lobby is the place where patients and their attendants find some times when they wait for Doctor's consultation. In order to make use of the time, OPD lobby has to be divided into various IEC subzones based on the health thematic areas i.e. OG OPD, Pediatric OPD, Medicine OPD, NCD Clinic etc. Further, in order to avoid cluttering and standardization of IEC messaging, it is proposed that, the type of IEC in the OPD areas will be a mix of digital and print. Special focus here in the OPD will be on promotion of patient rights, entitlements and schemes (National and State). Printed IEC displays are there at Facility level & thus Digital Kiosks are proposed. This way State can also reduce printed displays from the wall. This year, Digital Standees are proposed only for FRUs in the State i.e. 92 Facilities. Proposal : For DHH -Digital Kiosk/Standee @4/DHH for 32 DHHs=128 For SDH/CHC FRUs - Digital Kiosk/Standee @2/SDHs and CHCs FRU X 60 FRUs = 120 - Total Digital Kiosk/Standee : 248 nos Size/ Specification: 50-55 inch Budget : @ Rs. 60,000 per unit

Annexure - IEC & Printing (Details of proposal under Sl. No. 204)

Amount in Rs. (Lakhs)

S. No	Programme/ Theme	Activity Proposed	Unit of Measure	Unit Cost (Rs)	Quantity/ Target	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
204.1.2		Branding of facility based Integrated counselling Centres	Per CHC/ UCHC	75,000	4	3.00	Nature of Activity –New Branding Integrated Counseling Centre (ICC) Human Interface and counseling is also an integral part of the behavior change package. Keeping this in mind trained and dedicated counselors have been posted at Integrated Counseling Centers upto CHCs. These counselors provide health messaging on integrated health themes like NCD, MCH, DCP and others. However, current ICCs need up gradation as per the changed requirement and health demands. They will be provided with 1 LED TV for conducting group sessions and Flip books for individual counseling. Facility-based platform such as Integrated Counseling Centres offer a valuable opportunities for focused health communication and counseling. The Integrated Counseling centres have been established at all Facilities upto CHC level. These venues naturally bring together beneficiaries already seeking health services, making them ideal for reinforcing key behaviors, promoting entitlements, and addressing concerns directly. These Integrated Counseling Centres are needed to be equipped with audio-video aids, Standees and Flip Books for conducting structured Counseling sessions. As on this year, Integrate Counseling Centres at DHH & SDHs have been equipped. In the Current year proposal is to equip CHC/UCHC level Integrated Counseling centres. It is to mention here that, Positions of Counselors for CHCs/UCHCs have been sanctioned in PIP & recruitment process has been initiated. Budget Equipping one Integrated Counseling Centres (LED TV, Standees , Flip Books, branding etc) @ Rs.75,000/- X could able to functionalise 150 CHC/UCHCs out of 321 CHCs/UCHCs (314 Block CHC + 7 UCHCs)
204.1.3		Hoardings in strategic locations	Per hoarding	30,000	8	2.40	Dynamic Hoardings in strategic locations of Hospital Activity : Ongoing The Dynamic hoardings (Iron Frame Hoarding) are installed at key, high-visibility locations in both rural and urban areas act as effective tools for continuous public engagement on health messages, entitlements, and positive behaviors. These visually engaging displays showcase rotating or regularly updated (hence called Dynamic Hoarding) content on RMNCHA+N, NCDs, and Disease Control Programmes, ensuring that the messages stay fresh, relevant, and aligned with seasonal priorities. There are 1200 (about 4/5per Block) such hoardings existing in the State & mostly at community level, owned by H& FW Deptt across the State. The plan is to installed 339 (314 Blocks X1 + 5 Municipal Corporations X5) new hoardings at Public Health Facility level. Plan : - Erection of New iron frame hoarding 1 per block & 5 per MCs to put in the strategic locations of the Block/MCs @ Rs.30,000/- per hoarding - As per the campaign aligned, it will be periodically changed in flex/ fabric in the existing hoarding & for the same budget has been proposed in respective PIP of different divisions. Budget : Installation of new Hoarding @ 30,000/- per hoarding X 339 (314 Blocks X1 + 5 Municipal Corporations X5)new hoardings

Annexure - IEC & Printing (Details of proposal under Sl. No. 204)

Amount in Rs. (Lakhs)

S. No	Programme/ Theme	Activity Proposed	Unit of Measure	Unit Cost (Rs)	Quantity/ Target	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
204.1.4		Setting up of IEC theatre at DHH for promoting Family Led Care & Management	Per DHH	10,00,000	0		IEC Theatre: Odisha's healthcare landscape is supported by a robust network of 32 District Headquarters Hospitals (DHHs), each equipped with 300 or more beds with advanced critical care facilities, like Sick Newborn Care Units (SNCU), Nutrition Rehabilitation Centres (NRC), Intensive Care Units (ICU), Dialysis Centres, and Cancer Care units etc. These facilities deliver quality health care services to vulnerable populations, particularly in rural and tribal-dominated districts. However, post-discharge care remains a critical gap, as beneficiaries often from remote communities rely on family members for home-based management of chronic conditions, nutrition, neonatal care and rehabilitation. Objective of the Health Theatre: • This will promote Family led Management/ Care of discharged patients. Establishing similar theatres in District hospitals /High-footfall health institutions will: • Strengthen IEC/BCC efforts through continuous, structured dissemination of health messages. • Ensure equitable access to information for rural and underserved populations visiting these facilities. • Serve as hubs for community engagement and health promotion via interactive media. Implementation modalities: • Overall management of the Health Theatre will be done by the Counselor. • Case shall be mobilized mainly by the ASHAs associated with ASHA Gruhas. ASHA Gruhas have been established at all high case load institutions and managed by the ASHAs. Special Screening of shows on topics: • Post SNCU Care, Post NRC Care, Post ICU Management, Palliative care, Care of Home bound discharged cases etc. Budget : • Audio-Visual Sound Proof Hall (Soundproofing setup (walls, doors, acoustic panels) for AV hall; includes basic wiring for AV integration) @ Rs. 5.00 Lakhs • One Wall mount LEV TV panel (55-inch or more 4K LED Smart TV for video playback) @ Rs. 50,000/- • 2 nos. Small Sound boxes (Speakers for audio enhancement) @ Rs. 10,000/- • Ceiling Lights (LED panel/spotlights (cool white, energy-efficient) with installation for even illumination) @Rs. 10,000/- • 2 nos. of 1.5-ton inverter split ACs @ Rs. 0.5 Lakhs per AC x 2 nos = Rs. 1.00 Lakhs • 5 nos. of high-speed wall-mounted fans @ Rs.3000/- per fan x 5 nos= Rs. 15,000/- • 30-seater seating capacity with deluxe Conference chairs (leatherette, adjustable arms, for comfort in meetings/trainings) @ Rs.80,000 per chair x 30 chairs= Rs. 2.40 Lakhs • Branding with IEC materials (Custom banners, posters, wall graphics, and standees with health education (IEC) themes (e.g., vinyl printing, framing etc) @ Rs. 50,000/- • Electrical Connection & Wiring (The electrical infrastructure in hospitals is a fundamental component of patient safety, operational reliability, and regulatory compliance) @ Rs.25,000/- • Development of communication materials (Creating clear and relevant materials allows for efficient and effective communication that is tailored for specific needs of different groups)- Budgeted separately under NHM Total Budget Requirement: Rs. 10.00 Lakhs per DHH x 10 DHHs
Sub Total Facility Level (A.1)						10.20	
204.2	A.2 Community Level						
204.2.1		Preparing change agents (Traditional healers & influential; Local leaders) for IPC in Tribal blocks	Per Meeting				Traditional Healers Meet (in 118 Tribal Blocks) Nature of Activity- Ongoing A strong network of community change agents—such as traditional healers and other influential local leaders can play a critical role in fostering trust, dispelling myths and promoting positive health behaviors. It is planned to enhance the capacity and in interpersonal communication (IPC) and counseling to effectively deliver accurate health messages on RMNCHA+N, NCDs, and DCP, and to foster community trust. As part of SBC, 2 sensitization meetings (Min Participants-50) shall be organized in a Block in frequency of half yearly once on major components for their support. Budget: @ Rs.30, 000 per meeting X 2 meetings per tribal block X 118 tribal blocks =Rs. 70.80 Lakhs Activity Dropped, as it has been proposed under various programmes as per need

Annexure - IEC & Printing (Details of proposal under Sl. No. 204)

Amount in Rs. (Lakhs)

S. No	Programme/ Theme	Activity Proposed	Unit of Measure	Unit Cost (Rs)	Quantity/ Target	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
204.2.2		School Level Awareness Initiatives	Lumpsum	10,00,000	0		About 30% Schools in Odisha has smart LED Boards (Alternative to Black Board) available for teaching of students in the Schools. The Health & FW Deptt shall take leverage of it & use the same for awareness on different key themes. In order to produce age appropriate content, animated comic series will be developed with the help of professional agency, decided through competitive bidding process. As proposed, this year, at least 6 short videos (Half hour duration) will be developed as part of the series. This will be displayed in Schools with the support of School Authorities (School Health ambassadors). In order to facilitate it, same will be discussed in different convergence meetings held at all levels , Budget: Rs. 10 Lakhs has been kept on the head production of new videos for conducting educational sessions in schools.
204.2.3		Special campaign in Aspiration Block for improving 6 Key Performance Indicators	per block	2,00,000	0		Special campaign in Aspiration Block for improving 6 Key Performance Indicators To accelerate health outcomes in Aspirational Blocks, a Special Campaign is proposed focusing on identified poor indicators for that particular block out of 6 Key Performance Indicators (KPIs) proposed for improving under this initiative. A 360-degree Social and Behaviour Change approach, ensuring convergence with ICDS, PRI, SHGs, and community platforms will be taken up as part of this campaign Scope : There are 40 selected blocks in Odisha for the ABP programme. The campaign will be extensively organised for 15 days & especial focus will be on 20 selected media dark villages of each aspirational block . Activities Planned : These series of activities shall be organised in each targeted aspirational block. - o Flagging up of Communication Rath (IEC Van) for improving general awareness (Branding of vehicle Rs30000/- + hiring charges including pol for 15 days 50000/- + DA to Communication officers attached to the Van Rs.5000/ + leaflet for distribution Rs15000/-= Rs.1,00 Lakhs) - o Focused group Discussions (FGDS) with key stakeholders like SHGs, CBOs. @ Rs.500/- X 20 selected villages of the block = Rs10,000/- - o Patient Support Group meetings in case of TB ,NCD cases (@ Rs 500/- X 20 Villages with more nos of patients in the block = Rs.10000/-) - o SAAS Bohu Meet , Eligible Couple meet for improving RCH Indicators (@ Rs 500/- X 20 selected villages where process indicators are poor in the block = Rs10000/-) - o Recognition of achievers / recovered patients etc as Ambassadors of change by local representatives (Lump sum 5000/-) - o Performing Folk Shows @Rs.3000/- X 20 Villages = Rs.60000/- - o Misc & Any other as per the felt need @ Rs.5000/- Budget : @ Rs.2.00 Lakhs per Block
Sub Total Community Level (A.2)						-	
204.3	A.3 Cross cutting areas						

Annexure - IEC & Printing (Details of proposal under Sl. No. 204)

Amount in Rs. (Lakhs)

S. No	Programme/ Theme	Activity Proposed	Unit of Measure	Unit Cost (Rs)	Quantity/ Target	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
204.3.1		Social Media Campaign	Per month	8,50,000	0		Social Media Campaign Nature of Activity : Ongoing Last PIP approved Head :HSS-3 : 163 The social media channels will be strategically leveraged as a tool for promoting health and well-being awareness, digital engagement, community mobilization and encourage adopting behaviour change across key thematic areas such as RMNCHA+N, Non-Communicable Diseases (NCDs), and Disease Control Programmes (DCP). A year-long campaign will be planned and implemented, covering 12 theme based health issues over 52 weeks, using community engaging formats such as info graphics, short videos, reels, shorts, testimonials, and interactive contents in Odia and local language(Desia, Kui, Sambalpuri and Santali). This will be taken up by engaging a professional agency in the field through competitive bidding process. The campaigns will ensure consistent outreach through official social media platforms (Face book, X/Twitter, Instagram, YouTube, WhatsApp) of NHM.The detailed activities for each thematic area are provided below: • Creation of YouTube, Facebook & Instagram account for NHM • Development of Social Media Post • Development of videos for social media • Purchasing of slots for social media posts Budget : Proposed as approved last NHM PIP • Social media Handler and media management (including posting, analysis and reporting) @ Rs. 1.00 Lakhs Per month • Development of creative's for social media posts @ Rs. 1000/ per creative's for 50 creative's per month @ Rs. 0.50 Lakhs Per month • Development of videos for social media @ Rs. 60,000/- per video for 10 videos in a month including animated video @ Rs. 6.00 Lakhs Per month • Purchasing of slots for social media posts @ Rs. 1.00 Lakhs Per month Total: Rs. 8.50 Lakhs per month Total budget requirement per annum: Rs. 8.50 Lakhs Per Month x 12 months
204.3.2		Bulk SMS services (BSNL)	Per SMS	0.280	0		Nature of Activity : Ongoing Last PIP approved Head :HSS-3 : 163 SMS services are being utilized as a quick and cost-effective communication tool to reinforce key health messages and behaviours across RMNCHA+N, NCD and Disease Control Programmes, as well as during emergencies. These SMS messages will be linked to the 12 thematic campaigns (attached as annexure) mentioned above, as well as various health programmes, observance days, and special health campaigns. These messages will serve as timely reminders for actions such as ANC check-ups, immunization, NCD screening, disease prevention practices, and emergency preparedness. These services will be taken up in collaboration with BSNL in the State. Budget provision for the SMS services: 50,000 bulk SMS per district for all 30 districts in each time x 2 times in a month x 12 months x@ Rs0.28 Paisa per SMS (TRAI exempted Cost) = Rs.100.80 lakhs(new rate chart of BSNL)

Annexure - IEC & Printing (Details of proposal under Sl. No. 204)

Amount in Rs. (Lakhs)

S. No	Programme/ Theme	Activity Proposed	Unit of Measure	Unit Cost (Rs)	Quantity/ Target	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
204.3.3		Outdoor Digital Display Boards	Per Digital Display Board per annum	9,60,048	0		Operation Management of Digital Display Boards at DHHs(Ongoing) (Last PIP approved Head :HSS-3 : 163) Digital Bill board is one of the major outdoor media to aware public on major health information for behavior change. Odisha State Health & Family Welfare Society (OSH&FWS) has set up 40 nos (MCH-12, DHH-22, and UCHC-6) of outdoor LED Display Boards at various Govt. Health Institutions. An outsourced Agency is engaged through a competitive bidding process to operate and maintain the Digital Display Boards. The operation & maintenance cost includes supply, installation, commissioning of the Digital Board which includes all cost related to civil construction work required for installation of LEDs, Mounting of Structures, Electrical Earthing, Plumbing and entire site readiness, Software to run the Content and end to end Digital Media Solution. Budget Requirement (As per recent tender rate): 1. Operation & Maintenance of one LED Display Board including warranty & maintenance as per scope of work given in the RFP for a further period of one year from the date of signing of the renewal agreement @Rs. 80,004/- per month per Digital Display Boards X 40 Boards X 12 months = Rs.384.02 Lakhs Budget Proposed: Rs. (70% budget proposed as payment cannot be made in case of defunct of any Display boards)
204.3.4		Involvement of Mobile Health Unit (MHU) in difficult area for IEC/ BCC	Per MHU	50,000	0		Involvement of Mobile Health Unit (MHU) in difficult area for IEC/ BCC Nature of Activity : New The Mobile Health Units (MHUs) are deployed at blocks to provide treatment and services at selected remote and hard-to-reach villages. Currently 171 MHUs have been providing outreach services; this year State has proposed 143 new MHUs for implementations through state specific funding. Area specific communication need to be assessed & accordingly a calendar of Communication plan shall be prepared for its execution. Each MHU will be provided with following tools for improving communication in media dark areas. • Audio System @ Rs30,000/- per Unit • PICO Projector @ Rs20,000/- per Unit The details of IEC/BCC activities proposed with the involvement of MHUs are given below: • Milking • Conducting video show • Focused Group Discussions This year, provision shall be made for 171 MHUs already operational in the State. Budget : @ Rs 50,000/- per MHU

Annexure - IEC & Printing (Details of proposal under Sl. No. 204)

Amount in Rs. (Lakhs)

S. No	Programme/ Theme	Activity Proposed	Unit of Measure	Unit Cost (Rs)	Quantity/ Target	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
204.3.5		Media Advocacy	Per Media meet				Media Advocacy Nature of Activity –New To strengthen public outreach and foster positive health behaviours, NHM will Engage with print, electronic, and Social media influencers to advocate health programmes and schemes, share success stories, and promote social protection health benefit programs. The engagement shall be on Periodic basis for sustained collaboration. Proposed activities: 1. Organising press meets around key health observance days and new launching programmes alien with thematic campaign. 2. Influencers Meet to advocate achievements/ appeals etc. Budget : Media Meet @ Rs 30,000/- (Head of expenses; Media Kits& refreshments) X 12 meets = Rs 3.60 Lakhs Activity Dropped, as per the discussion in the NPCC meeting
204.3.6		Advertisement in Cinema Halls	Per minute	50,000	0		Of late, Cinema Halls have regained its popularity. Hence, to harness this medium, the Deptt has planned to give advertisements in Cinema halls across the State. There is a structured mechanism to give advertisements also in Cinemas. A professional body is there in Odisha who coordinate & cover 107 Digital cinema halls in the State. Budget : • Per Advertisement cost (Rs.50000/- per min) : • Proposed minutes of airing in 2026-27: 3 mins daily (1 minute each in 3 shows) X 50 days /annum(mostly during running of good movies)= 150 minutes Budget- @ Rs.50000/- per minute X 150 minutes = Rs. 75.00 Lakhs .
204.3.7		Equipping State IEC/BCC cell for Strengthening IEC/BCC interventions	Lumpsum				1. Purchase of Software's /AMC for designing of IEC materials Ongoing Activity Last PIP approved Head :HSS-3 : 163 Designing software (Corel Draw Graphic Suite) for developing and designing IEC (Information, Education, and Communication) materials is essential for creating effective and visually appealing educational content. IEC materials often include text, images, diagrams, and multimedia elements. Design software available in market allows to create and format text, design graphics, and integrate multimedia elements seamlessly, making it easier to develop engaging content. NHM has a in-house IEC/Designing wing who does IEC designs, convert prototypes in Odia language, those are generally provided by GoI. In order to meet the essential requirement (for new purchase/AMC of software), a lumpsum fund has been proposed. Budget: Rs. 5.00 lakh (lumpsum)- Budget To be met out of State Budget Activity Dropped, as per the discussion in the NPCC meeting

Annexure - IEC & Printing (Details of proposal under Sl. No. 204)

Amount in Rs. (Lakhs)

S. No	Programme/ Theme	Activity Proposed	Unit of Measure	Unit Cost (Rs)	Quantity/ Target	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
204.3.8		Equipping State IEC/BCC cell for Strengthening IEC/BCC interventions	Lumpsum	10,00,000	0		2. Translation & dubbing of audio & Video clips shared by Gol in Odia / Local Languages Ongoing Activity Last PIP approved Head : HSS-3 : 163 Mass media plays a pivotal role in disseminating information and promoting various health initiatives under the National Health Mission (NHM). This note outlines the effective use of mass media to address thematic issues like RMNCH+A, NCD, DCP and other health services. Mass media will deal Awareness Campaigns- Utilize television, radio, and social media platforms to create awareness about various thematic issues. For the same, many such video & Audio spots are received time to time from Gol. In order to translate & dubbing, a lump sum fund has been proposed under NHM PIP 2026-27. Budget : Rs.10.00 Lakhs
204.3.9		Equipping State IEC/BCC cell for Strengthening IEC/BCC interventions	Lumpsum	10,00,000	0		3. Publicity in Souvenirs developed by Medical Colleges & hospitals and other health Institutions Ongoing Activity Last PIP approved Head : HSS-3 : 163 Health seminars/workshops in different medical colleges/Institutions provide a platform for experts to share valuable information and insights related to health and wellness. By sponsoring such seminars/workshops, NHM can contribute to public education and awareness on important health topics, Support in skill/knowledge development of Doctors & other service providers. Further, Souvenirs are generally published & distributed in such Seminars & Workshops to participants. On publicizing features of Flagship programme implemented by NHM, general awareness can be improved Budget: Lumpsum proposed: Rs. 10.00 Lakh
Sub Total Crosscutting (A.3)						-	
204.4	B. Major pool-specific						
204.4.1	RCH-1						
204.4.1.1	Maternal Health	IEC/BCC at VHSND Session Sites	Per flipbook	300	0		Budget Not Approved
204.4.1.2	Maternal Health	Banding of PMSMA Sites	Per PMSMA site	25,000			There are 557 PMSMA/E-PMSMA functional sites in the State. Currently, there is lack of IEC materials at PMSMA/E-PMSMA Sites as per the report received from monitors. In order to bring visibility and improve awareness, a temporary IEC corners /IEC Kiosks shall be set up on the said days at each PMSMA site. Budget : Rs. 25,000/- per site (Kiosk- Rs 10000/- Foldable Standee to be placed near the site- 6 X Rs.2000/- per Standee , Banner/Backdrop & Selfie Point with iron frame - Rs.3000 /-) X 557 =Rs.139.25 Lakhs Budget to be met out of State Specific Scheme (SAMPURNA)
204.4.1.3	Maternal Health	Improving use of Kilhari					Status : No exclusive interventions shall be taken up to improve the use of Kilhari by beneficiaries but the matter will be part of VHSND site branding, PMSMA Site IEC materials, Flip book used for taking educational sessions etc. Budget : NA

Annexure - IEC & Printing (Details of proposal under Sl. No. 204)

Amount in Rs. (Lakhs)

S. No	Programme/ Theme	Activity Proposed	Unit of Measure	Unit Cost (Rs)	Quantity/ Target	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
204.4.1.4	Maternal Health	Engaging Self Help Groups for IEC/BCC	Per Hand Book	10	10276	1.03	Proposal Submitted: Even though, it is mandated to have one SUMAN Volunteer at each village, State has engaged 21402 SUMAN Volunteers in the State & their number will increase by 16052 by the end of 2026-27. In order to help them to take structured sessions with beneficiaries, each one will be given a flip book (developed & piloted by CCC). They will be oriented and then handed over this tool. Proposal Revised as per the discussion in the NPCC meeting: Self-help Group (SHG network) is very vibrant in the State of Odisha. Currently there are 600000 SHGs are functional. As per the decision SHG member shall have to be oriented/ sensitized in their existing platform in convergence with Mission Shakti Deptt. Govt. of Odisha. These SHG members will be sensitized using SUMAN modules. In order to equip them for taking of counseling sessions each SHG will be provided a handbook Revised Budget : @ Rs.10/- per handbook
204.4.1.5	Maternal Health	Safe Motherhood Booklet	Per Booklet	10	0	-	A safe Motherhood Book let is a guide (with Pictorial presentation) for pregnant women that contains information on pregnancy, child birth and new born care. Nirapada Matrutva , Safe Motherhood Booklet: Nirapada Matrutva Booklet for 686704 ANC cases (624277 ANC cases X 1 per case + 10% (62427) buffer stock = 686704 (@Rs. 10/- (recent tender rate) (Coloured Copy) Budget: @ Rs. 10/- per copy
204.4.1.6	Maternal Health	Observation of Designated Days					The special day (i.e. Safe Motherhood day on 11th April) shall be observed to raise awareness about the importance of maternal health & the risks faced during pregnancy & Child Birth. Mass Media Interventions : State Level: • State Level Launching followed by media bites: @ Rs.30000/- • Advertisement in News Daily (2 leading odia paper colour) : Rs.2,00,000/- (I&PR Rate) - o Broadcast in FM (9FMCs) & Community Radio Stations (24CRS) : @ Rs.35000/- per minute X 5 minutes= Rs.1.75 Lakhs - o AIR 1 time @ Rs65000/- = Rs.65,000/- - o TV Spots (21 Channels): @ Rs.1.80/- X 1 day = Rs.1.80 Lakhs • Media Meet, Social Media publicity, Publicity by MHUs at difficult villages etc. are also to be taken up, however budget for the same has not be factored here as budgeted under HSS. • Budget- Rs.6.5 Lakhs Community Level Interventions at PHC/UPHC & SC AAMs: • The special day - Safe Motherhood day shall be observed all across the State especially at selected feeding villages of SC & PHC/UPHC Ayushman Arogy Mandirs. As part of wellness activities, SAAS Bohu Sameelan shall be organised for sensitising of both of them. • Budget: The budget for the same shall be met out of funds allotted for Wellness sessions
204.4.1.6.1	Maternal Health	Mass Media Interventions : State Level:	Lumpsum	6,50,000	0	-	The special day (i.e. Safe Motherhood day on 11th April) shall be observed to raise awareness about the importance of maternal health & the risks faced during pregnancy & Child Birth. Mass Media Interventions : State Level: • State Level Launching followed by media bites: @ Rs.30000/- • Advertisement in News Daily (2 leading odia paper colour) : Rs.2,00,000/- (I&PR Rate) - o Broadcast in FM (9FMCs) & Community Radio Stations (24CRS) : @ Rs.35000/- per minute X 5 minutes= Rs.1.75 Lakhs - o AIR 1 time @ Rs65000/- = Rs.65,000/- - o TV Spots (21 Channels): @ Rs.1.80/- X 1 day = Rs.1.80 Lakhs • Media Meet, Social Media publicity, Publicity by MHUs at difficult villages etc. are also to be taken up, however budget for the same has not be factored here as budgeted under HSS. • Budget- Rs.6.5 Lakhs Community Level Interventions at PHC/UPHC & SC AAMs: • The special day - Safe Motherhood day shall be observed all across the State especially at selected feeding villages of SC & PHC/UPHC Ayushman Arogy Mandirs. As part of wellness activities, SAAS Bohu Sameelan shall be organised for sensitising of both of them. • Budget: The budget for the same shall be met out of funds allotted for Wellness sessions

Annexure - IEC & Printing (Details of proposal under Sl. No. 204)

Amount in Rs. (Lakhs)

S. No	Programme/ Theme	Activity Proposed	Unit of Measure	Unit Cost (Rs)	Quantity/ Target	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
204.4.1.6.2	Maternal Health	Other Interventions (Change of Flex for Hoarding at District & Block Level)	per Hoarding	2,000	12	0.24	Budget: The budget for the same shall be met out of funds allotted for Wellness sessions under CPHC. Other Interventions o Change of Flex for Hoarding at District & Block Level: It will be unveiled on the day for awareness of general population. Budget: @ Rs. 2000/- per flex (for CHC/UCHC, DHHs, SDHs)
204.4.1.7	Maternal Health	Observation of Safe Abortion Day (Sept 28th)	Lumpsum	6,50,000	0		Observation of the International Safe Abortion day has been planned to advocate for the right to safe and legal abortion and to raise awareness about the dangers of unsafe abortion. For wider awareness on the issues, following mass media interventions are planned. State level • Advertisement in News Daily (2 leading odia paper colour) : Rs.2,00,000/- (I&PR Rate) - o Broadcast in FM (9FMCs) & Community Radio Stations (24CRS) : @ Rs.35000/- per minute X 5 minutes= Rs.1.75 Lakhs - o AIR 1 time @ Rs65000/- = Rs.65,000/- - o Pannel Discussions (half anhour- 2 slots): @ Rs.2.10 Lakhs • Media Meet, Social Media publicity, Publicity by MHUs at difficult villages etc. are also to be taken up, however budget for the same has not be factored here as budgeted under HSS. • Budget- Rs.6.5 Lakhs Community Level Interventions at PHC/UPHC & SC AAMs: • The day shall be observed at selected feeding villages of SC & PHC/UPHC Ayushman Arogya Mandirs as part of wellness activities by conducting FGDs with Women's group including SHGs • Budget: The budget for the same shall be met out of funds allotted for Wellness sessions under CPHC .

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Amount in Rs. (Lakhs)

S. No	Programme/ Theme	Activity Proposed	Unit of Measure	Unit Cost (Rs)	Quantity/ Target	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
204.4.1.8	Maternal Health	Special IEC in convergence with Railway / Transport Deptt.	Lumpsum	62,95,000	0		The IEC display in Govt. run buses is a targeted, cost-effective strategy to reach out to the masses both in rural and urban areas. Further, information dissemination through Public Address System in major Railway Stations and Branding has lasting impact for development of awareness. This medium has been proposed due to the following reasons: • Captive audience: Such announcements are listened very keenly by passengers and visitors present at the station premises. • Brand Recall: High frequency communication throughout the day results in a high level of brand recall. The proposed communication mediums shall be used to create awareness on key interventions for preventing maternal morbidity & mortality and publicise scope of beneficiary orient schemes for promoting use of the services . - Activities Planned: 1) Railway Deptt.: a. Audio Jingle add air before & after announcements in 7 Major Railway Stations (Balasore, Bhubaneswar, Berhampur, Cuttack, Puri, Sambalpur & Rourkela): @Rs. 30/- for 30s (Indian Railways approved rate) x 18 Hrs (64800secs) per month x 1 month = Rs. 64800/- (Say 0.65 Lakhs) b. Branding in 7 Major Railway Stations (Balasore, Bhubaneswar, Berhampur, Cuttack, Puri, Sambalpur & Rourkela): @Rs.500000/- (Indian Railways approved rate) x 7 Railway Stations for 30 days display = Rs. 3500000/- (say 35 Lakhs). 2) Transport Deptt.: a. Branding in Govt. Buses: Back Panel of OSRTC buses (development, mounting & display) - @Rs. 13000/- per bus x 70 buses x 3 months = Rs.27.30 Lakhs Total Budget = Rs.62.95 Lakhs
204.4.1.9	Maternal Health	A week long Special Campaign for improving Mother & Child Health					Quarterly such campaign shall be organised to reinforce Behaviour change practices in the community. The focus will be on use of mid-media interventions with local relevance. The campaign will be funded under SAMPuRNA (State Specific Funding)
Sub Total (RCH-1)						1.27	
204.4.2	RCH-2						
204.4.2.1	PC&PNDT	Sensitisation of PRI Members	Per Block	20,000	8	1.60	There is an urgent need of creating public opinion to curb the current imbalances in sex ratio at birth. In order do so, a ½ day sensitisation meeting shall be organised at block level for PRI members. Further, 2 Posters on celebrate Daughters, Celebrate Equality (Materials to be used -Sun Board) shall be handed over to display the same in strategic location of each panchayat building. Budget : • Sensitisation Meeting : @ Rs.20000/- per block (expecting 40 Participants in each such meeting) X 314 blocks = 62.80 Lakhs • Vinyl Poster : Rs 600/- for 3 sets of poster X 6801 Panchayats = Rs.40.80 Lakhs- Activity Dropped as per Recommendation of NPCC Budget Revised as per recommendation of NPCC

Annexure - IEC & Printing (Details of proposal under Sl. No. 204)

Amount in Rs. (Lakhs)

S. No	Programme/ Theme	Activity Proposed	Unit of Measure	Unit Cost (Rs)	Quantity/ Target	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
204.4.2.2	PC&PNDT	Observation of Designated Days					The special days (i.B. National Girl Child Day- 24th January) shall be organised all across the State especially at SC & PHC/UPHC Ayushman Arogya Mandirs. Budget : • State Level launching: @ Rs 2.00 Lakhs (Programme Proposed : Meeting by Hon'ble CM & Health Minister followed by Mini Marathon and Cyclothon etc) & media Briefing • Advertisement in News Daily (2 leading odia paper colour) : Rs.2,00,000/- (I&PR Rate) o Broadcast in FM (9FMCs) & Community Radio Stations (24CRS) : @ Rs.35000/- per minute X 5 minutes= Rs.1.75 Lakhs o AIR 1 time @ Rs65000/- = Rs.65,000/- o TV Spots (21 Channels):@ Rs.1.80/- X 1 day = Rs.1.80 Lakhs • Media Meet, Social Media publicity, Publicity by MHUs at difficult villages etc. are also to be taken up, however budget for the same will not be factored here as budgeted under HSS. Sub Total - Rs.8.20 Lakhs • Other Activities o Change of Flex for Hoarding at District & Block Level @ Rs. 2000/- X 448 Nos of Hoardings (384 CHC/UCHC + 32 DHHs+ 32 SDHs) Budget Not Approved o The budget for organising National Girl Child Day at selected feeding villages of PHC/SC AAM shall be met out of funds allotted for Wellness sessions under CPHC programme o Media Meet, Social Media publicity, Publicity by MHUs at difficult villages etc. are also to be taken up, however budget for the same will not be factored here as budgeted under HSS.
204.4.2.2.1	PC&PNDT	At State Level activities	Lumpsum	8,20,000	0		
204.4.2.2.2	PC&PNDT	Change of Flex for Hoarding at District & Block Level	Per Institution	2,000	0		
Sub Total (RCH-2)						1.60	
204.4.3	RCH-3						
204.4.3.1	Child Health	Stop Diarrhoea Campaign (16th June to 31st July)					The Stop Diarrhoea Campaign aims at preventing & treating childhood Diarrhoea. The key activities include promoting hygiene practices,, providing ORS & Zinc and educate family on prevention & treatment on Diarrhoea. Budget : • State level launch (Meeting Followed by Media Bites)@ Rs.30,000/- • Advertisement in News Daily (2 leading odia paper colour) : Rs.2,00,000/- (I&PR Rate) X 2 Times = Rs.4.00 Lakhs • Broadcast in FM (9 FMCs) & Community Radio Stations (24CRS) : @ Rs.35000/- per minute X 5 minutes in the week= Rs.1.75/- X 2 times =Rs.3.50 Lakhs • TV Spots (21 Channels):@ Rs.1.80/- X 2 day = Rs.3.60 Lakhs • District level Launching followed by media Bites @ Rs.15000/- • ORS & ZINC Corner at Facility level – No additional fund required ,to be managed using RKS/JAS fund • School Level Event (Awareness Camp) – To be organised using wellness fund at PHC /SC AMMs under CPHC Programme • Reference Folder to ASHAs for IPC during household visits @ Rs.6/- per Ref. Materials
204.4.3.1.1	Child Health	At State Level activities	Lumpsum	11,40,000	0		
204.4.3.1.2	Child Health	District level Launching	Per district	15,000	1	0.15	
204.4.3.1.3	Child Health	Reference Folder to ASHAs	Per Unit	6	1133	0.07	

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Amount in Rs. (Lakhs)

S. No	Programme/ Theme	Activity Proposed	Unit of Measure	Unit Cost (Rs)	Quantity/ Target	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
204.4.3.1.4	Child Health	Change of Flex for Hoarding at District & Block Level	Per Institution	2,000	12	0.24	- Change of Flex of existing Hoarding at District & Block Level @ Rs. 2000/- per flex (for CHC/UCHC, DHHS, SDHS) - Media Meet, Social Media publicity, Publicity by MHUs at difficult villages etc. are also to be taken up, however budget for the same will not be factored here as budgeted under HSS.
204.4.3.2	Child Health	National Newborn Week (15–21 November)					National New Born Week observed to raise awareness on essential newborn care, early identification of danger signs, and facility-based and home-based newborn interventions. Interventions Planned & mostly focus on mid media activities.
204.4.3.2.1	Child Health	At State Level activities	Lumpsum	50,000	0		- State level felicitation ceremony with observation of National Newborn Week: @ Rs.50,000/- - Sensitisation of ASHAs on Sector meeting on danger signs , home based management,, timely care seeking etc for strengthening IPC (Budget under ASHA Sector meeting head, hence no additional budget proposed)
204.4.3.2.2	Child Health	District level Activities	Per folk Show	5,000	0		Folk Shows : It is planned at villages with high, low birth weight incidence in 40 aspirational blocks @ Rs.5000/- per show X 200 Shows (5 Show per block)
204.4.3.3	Child Health	SAANS Campaign (November–February)					SAANS Campaign promotes pneumonia prevention and management, including timely care-seeking, immunization. Mass media Interventions planned under this initiatives are as follows
204.4.3.3.1	Child Health	At State Level activities	Lumpsum	5,85,000	0		- State level inauguration of SANNs Campaign : @ Rs.30,000/- - Advertisement in News Daily (2 leading odia paper colour) : Rs.2,00,000/- - Broadcast in FM (9FMCs) & Community Radio Stations (24CRS) : @ Rs.35000/- per minute X 5 minutes in the week= Rs.1.75/- - TV Spots (21 Channels):@ Rs.1.80/- Interventions Planned & mostly focus on mid media activities.
204.4.3.3.2	Child Health	Reference Folder to ASHAs	Per Unit	6	1133	0.07	- Sensitisation of ASHAs on Sector meeting on danger signs , home based management,, timely care seeking etc for strengthening IPC (Budget under ASHA Sector meeting head, hence no additional budget proposed) - Sensitisation of service providers in routine platform on Standard Treatment Protocols for management of Child Hood Pneumonia (no additional budget proposed)
204.4.3.3.3	Child Health	Change of Flex for Hoarding at District & Block Level	Per Institution	2,000	12	0.24	- Reference folder to ASHAs for IPC : @ Rs.6/- per Ref. Folder - Change of Flex of existing Hoarding at District & Block Level @ Rs. 2000/- per flex (for CHC/UCHC, DHHS, SDHS)
204.4.3.4	Child Health	A week long Special Campaign for improving Mother & Child Health					Quarterly such campaign shall be organised to reinforce Behaviour change practices in the community. The focus will be on use of mid-media interventions with local relevance. The campaign will be funded under SAMPuRNA (State Specific Funding)
204.4.3.5	Child Health	Branding of MHT Vehicles	Per MHT	6,000			Branding of MHT vehicle is a mandate under RBSK. The MHT vehicles are engaged on hired basis. Due to withdrawal of vehicles by Vehicle Owners, about 40 % of vehicles are required branding every year. Status : Out of sanctioned 640 MHTs, 632 MHTs are functional Budget : @ Rs.6000/- per MHT vehicle X 250 = Rs.15.00 Lakhs Budget Shifted to RCH-3 , CH under OOC head as per Recommendation of NPCC
Sub Total (RCH-3)						0.77	

Annexure - IEC & Printing (Details of proposal under Sl. No. 204)

Amount in Rs. (Lakhs)

S. No	Programme/ Theme	Activity Proposed	Unit of Measure	Unit Cost (Rs)	Quantity/ Target	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
204.4.4	RCH-4						
204.4.4.1	Immunisation	Special IEC/BCC Campaign in Tribal Blocks for sustaining FI Coverage					Special IEC/BCC Campaign: Immunisation is one of the most cost-effective public health interventions, yet coverage gaps persist due to lack of awareness, myths and misconceptions, irregular service utilization, and challenges in reaching marginalized populations. Hence, a special IEC/BCC campaign is planned in 55 PVTG Blocks under PM -JANMAN of 15 districts to sustain FI coverage as desired. A 360-degree SBC approach will be adopted to increase full immunisation coverage, timely vaccination, and to reduce dropouts in the form of campaign for 15 day in FY 2026-27. Proposed Interventions include:
204.4.4.1.1	Immunisation	District Level Activities	Per District	15,000	0		District Level Activities : - o Flagging up of IEC Vans by local representative followed by media briefing @ Rs. 15000/ X 15 districts Block Level Activities : - o General Awareness through IEC Van @ Rs.1.00 Lakh for 15 days (Branding of vehicle Rs.30,000/- + hiring charges including pol for 15 days 50000/- + DA to Communication officers attached to the Van Rs.5000/ + leaflet for distribution Rs.15,000/-= Rs.1.00 Lakh) - o Awareness meeting with representatives of from SHGs , CBOS, NGOs followed by recognition of parents of full immunised children in selected hard to reach villages by local representatives @ Rs.1000/- X 30 such villages (daily 2 villages will be targeted for organising such activity)= Rs. 30,000/- - o Sensitisation of ASHAs in Sector meeting for improving FI coverage (Non Budgeted Activity) Total Budget (Block level Activities) : @ Rs 1.30 Lakhs per Block x 55 PM JANMAN Blocks The proposal is considered for approval as per the discussion in the NPCC meeting
204.4.4.1.2	Immunisation	Block Level Activities	Per Block	1,30,000	0		
204.4.4.2	Immunisation	Immunisation Schedule Tracker	Per tracker				The immunisation schedule tracker is proposed for all targeted beneficiaries in the State. The total Beneficiaries targeted in 2026-27 is 6.11 Lakhs . This tracker shall help in identifying date of next vaccination schedules when put date of birth of a child. This will enable beneficiaries to attend session site without fail. This has also been implemented successfully in other States (MP etc.). Budget : @ Rs.10/- per Tracker X 6.20 Lakhs (6.11 beneficiaries + Buffer)=Rs.62.00 Lakhs Budget Dropped per recommendation of NPCC (as it is already part of UWIN)
204.4.4.3	Immunisation	Branding of Vaccine Van	Per van	39,000	0		Branding of Vaccine Vans is an essential component of the Routine Immunization (RI) communication and visibility strategy. It serves to enhance public awareness, promote the importance of immunization and also act as a mobile information unit. Branding shall essentially include Side and rear panel stickers, Safety messages, Contact information & Reflective strips and design consistency for easy identification. Budget : @ Rs.39,000/- per Van

Annexure - IEC & Printing (Details of proposal under Sl. No. 204)

Amount in Rs. (Lakhs)

S. No	Programme/ Theme	Activity Proposed	Unit of Measure	Unit Cost (Rs)	Quantity/ Target	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
204.4.4.4	Immunisation	Branding of Session Site	Per Session Site	3,500	0		In order to strengthen and standardize Routine Immunization (RI) services at the community level, it is proposed to provide a uniform set of lightweight and durable branding materials for each RI Session Site. Initially this is being planned for the 6688 nos. of Sub Centres & 116 nos of UPHCs. These materials will help beneficiaries easily identify session sites and emphasize key immunization messages. The materials will be lightweight, foldable, easily carryable and durable designed for field use and repeated reusability during RI sessions. Budget : @ Rs.3,500/- per site x 6804 sites = Rs.238.14 Lakhs Budget; To be met out of State Specific Scheme (SAMPURNA)
204.4.4.5	Immunisation	Observation of Designated Days					The special days (i.B. World Immunisation Week on 24th April) shall be organised to promote the use of vaccines to protect people of all ages against vaccine preventable diseases. Activities planned as part of the programme are as follows. Budget: • State level launch (Meeting Followed by Media Bites)@ Rs.30,000/- • Advertisement in News Daily (2 leading odia paper colour) : Rs.2,00,000/- (I&PR Rate) o Broadcast in FM (9FMCs) & Community Radio Stations (24CRS) : @ Rs.35000/- per minute X 5 minutes in the week= Rs.1.75/- lakhs o TV Spots (21 Channels):@ Rs.1.80/- = Rs.1.80 Lakhs • Change of Flex for Hoarding at District & Block Level @ Rs. 2000/- X 448 Nos of Hoardings (384 CHC/UCHC + 32 DHHs+ 32 SDHs) Budget Not Approved • Media Meet, Social Media publicity are to be taken up, however budget for the same has not been factored here as budgeted under HSS. • Rally shall be organised as part of wellness sessions & the budget for the same shall be met out of funds allotted for Wellness sessions under CPHC. • Publicity by MHUs at difficult villages will be carried out & the budget for the same shall be met out of funds allotted for Wellness sessions under CPHC.
204.4.4.5.1	Immunisation	At State Level activities	Lumpsum	5,85,000	0		
204.4.4.5.2	Immunisation	Change of Flex for Hoarding at District & Block Level	Per Institution	2,000	0		
Sub Total (RCH-4)						-	
204.4.5	RCH-5						
204.4.5.1	Adolescent Health	Flip Book to transact School health sessions on 11 defined themes	Per Booklet	300	485	1.46	The proposed Flip Books will be provided to School Health Ambassadors which will facilitate to transact School health sessions on 11 defined themes. This was a long standing demand from the School Health Ambassadors as refresher training is not being planned every year. These flip books will be provided on priority basis to 19000 Upper primary Schools in the State in the 1st phase i.B. 2026-27. Budget Flip Book - @ Rs.300/- per Book X 1 Book per School X 17,148 Flip Books Target Revised as approved in RoP

Annexure - IEC & Printing (Details of proposal under Sl. No. 204)

Amount in Rs. (Lakhs)

S. No	Programme/ Theme	Activity Proposed	Unit of Measure	Unit Cost (Rs)	Quantity/ Target	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
204.4.5.2	Adolescent Health	Promotion of Menstrual Hygiene among Adolescent Girls	Lumpsum	18,00,000	0		Intended for improving healthy & hygienic practices among adolescent girls, proposal has been submitted for mass media interventions with engagement of following medias. The mass media publicity will be done on periodic basis mostly quarterly intervals. Budget : • Advertisement in News Daily (2 leading Odia paper colour) : Rs.2,00,000/- X 4 =Rs. 8.00 Lakhs • Broadcast in FM (9FMCs) & Community Radio Stations (24CRS) : @ Rs.35000/- per minute X 2 minutes in the week= Rs.70 Lakhs /- X 4 = Rs.2.80 Lakhs • TV Spots (21 Channels):@ Rs.1.80/- X 4 day = Rs.7.2 Lakhs
Sub Total (RCH-5)						1.46	
204.4.6	RCH-6						
204.4.6.1	Family Planning	NSV Week					NSV Week is planned to raise awareness about Non- Scalpel Vasectomy & to promote male sterilisation in Family Planning at State, District & 5 Municipal Corporation level , Interventions planned : • State Level Launch followed by media bites @ Rs.30, 000/- • Advertisement in News Daily (2leading odia paper colour) : Rs.2,00,000/- (I&PR Rate) • Broadcast in FM (9FMCs) & Community Radio Stations (24CRS) : @ Rs.35000/- per minute X 5 minutes in the week= Rs.1,75,000/- • Special EC Meeting @ 1 at SC where in NSV beneficiaries shall be called along with other ECs of that village. HW-F shall identify one such village where NSV beneficiaries are there to select it as a targeted village for conducting Special EC meeting. There in the meeting, NSV beneficiaries shall also be appreciated by local PRIs. Budget : @ Rs, 500/- (for banner & refreshment) X 2214 SCs(1/3 SCs targeted)
204.4.6.1.1	Family Planning	State Level Activities	Lumpsum	4,05,000	0		
204.4.6.1.2	Family Planning	Special EC Meeting at SCs	Per SC	500	63	0.32	
204.4.6.2	Family Planning	World Population Fortnight					It is observed from July 11 to July 24 to increase awareness and provide intensive family planning Services including counselling and free access to various contraceptives Planning at State, District & 5 Municipal Corporation level. IEC/BCC Interventions planned during the fortnight • State level launch@ Rs.2.00 Lakhs (Venue hiring & Dias Management-Rs. 50,000/-, IEC displays-Rs.50,000/-, Media Kit & Refreshment- Rs. 300/- x 50 Nos= Rs. 15,000/-, Refrehment of beneficiaries-Rs. 300 per benficiary x 200= Rs. 60,000/-, Contingency & Consumables- Rs. 25,000/-) • Award to the Service Providers (Budget Shifted from HSS-9, HRS as per the recommendation of NPCC Meeting) 1. Top three best performing service providers for NSV, Female Sterilization & PPIUCD Budget: @Rs.20,000/- X 9 = Rs.1.80 lakhs 2. Top three districts for overall family planning performance (based on composit indicator), Budget: @Rs. 20,000/- X 3 districts =Rs.0.60 lakhs 3. Recognition to districts for FPLMIS rollout- Rs. 10,000/- x 3 Districts= Rs. 0.30 Lakhs 4. Top 3 ASHAs for achievment in long acting reversible contaseptives- Rs. 10,000/- x 3= Rs. 0.30 Lakhs Total Budget: Rs. 3.00 lakhs
204.4.6.2.1	Family Planning	State level launching Activities	Lumpsum	2,00,000	0		
204.4.6.2.2	Family Planning	Award to the Service Providers	Lumpsum	3,00,000	0		

Annexure - IEC & Printing (Details of proposal under Sl. No. 204)

Amount in Rs. (Lakhs)

S. No	Programme/ Theme	Activity Proposed	Unit of Measure	Unit Cost (Rs)	Quantity/ Target	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
204.4.6.2.3	Family Planning	Mass media Activities at State Level	Lumpsum	5,50,000	0		- Advertisement in News Daily (2 leading odia paper colour) : Rs.2.00 Lakhs (I&PR Rate) - o Broadcast in FM (9FMCs) & Community Radio Stations (24CRS) : @ Rs.35000/- per minute X 10 minutes in the week= Rs.3.50 Lakhs - o General Awareness through IEC Van @ Rs.85,000/ for 15 days (Branding of vehicle Rs30000/- + hiring charges including PoL for 15 days 50000/- + DA to Communication officers attached to the Van Rs.5000/ +) X 100 Vans (1 van for 3 blocks)= Rs.85.00 Lakhs
204.4.6.2.4	Family Planning	General Awareness through IEC Van at Block Level	Per Van	85,000	3	2.55	- Banner & Standee at facility Level : To be met out of RKS /JAS fund - Media Meet, Social Media publicity, Publicity by MHUs at difficult villages etc. are also to be taken up, however budget for the same will not be factored here as budgeted under HSS. Budget Revised as per discission in the NPCC meeting
204.4.6.3	Family Planning	FP Counselling Card for ASHA	Per Card				Development and Printing of ASHA Family Planning Counselling Card: The counselling card will Illustrate all FP methods, including spacing and limiting methods (Condom, OCP, ECP, IUCD 380A, IUCD 375, PPIUCD, Antara, Chaya,). Include benefits, usage instructions and side effects. Introducing the Family Planning ASHA Counselling Card will strengthen interpersonal communication at the grassroots level and support informed decision-making for eligible couples. This aligns with NHM's strategic goals on maternal and child health, particularly reducing total fertility rate (TFR) and unmet need for contraceptive. Printing of counselling card (laminated, colour, A4): One-time printing for 50825 ASHAs & District / Block Level monitors (say 51000) - @Rs. 10/-x51000 = Rs.5,10,000/- Activity Dropped as per recommendation of NPCC
Sub Total (RCH-6)						2.87	
204.4.7	RCH-7						
204.4.7.1	Nutrition	Campaign on National De-worming Day(NDD)					A public health initiative to administer deworming medication to children to eliminate worm infestation. In order to improve acceptance, thereby coverage, following IEC / BCC interventions are planned.
204.4.7.1.1	Nutrition	State level launching	Lumpsum	75,000	0		State level launching (Meeting followed by Media Bites) = Rs. 0.75 Lakhs
204.4.7.1.2	Nutrition	Launching at School/AWW at District level	Per District	50,000	1	0.50	- Launching at School/AWW at District level @ Rs.50000/- per district X 30 = Rs.15.00 Lakhs - Advertisement in News Daily (2 leading odia paper colour) : Rs.2,00,000/- (I&PR Rate) X 2 Rounds = Rs.4.00 Lakhs
204.4.7.1.3	Nutrition	Advertisement in News Daily	Per round	2,00,000	0		o Broadcast in FM (9FMCs) & Community Radio Stations (24CRS) : @ Rs.35000/- per minute X 10 minutes in the week= Rs.3,50,000/- X 2 Rounds = Rs.7.00 Lakhs
204.4.7.1.4	Nutrition	Broadcast in FM (9FMCs) & Community Radio Stations	Per round	3,50,000	0		o AIR 1 time @ Rs.65000/- X 2 rounds X 3 times = Rs.3.90 Lakhs
204.4.7.1.5	Nutrition	Broadcast in AIR	Per round	65,000	0		Media Meet, Social Media publicity, Publicity by MHUs at difficult villages etc. are also to be taken up, however budget for the same will not be factored here as budgeted under HSS.
204.4.7.1.6	Nutrition	Reporting (Forms/Formats)	Per SC	100	189	0.19	o Reporting (Forms/Formats) : Rs. 100/- per SC Budget Revised as per discission in the NPCC meeting

Annexure - IEC & Printing (Details of proposal under Sl. No. 204)

Amount in Rs. (Lakhs)

S. No	Programme/ Theme	Activity Proposed	Unit of Measure	Unit Cost (Rs)	Quantity/ Target	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
204.4.7.2	Nutrition	World Breast Feeding Week (August)					It is proposed to be observed in the State to inform, anchor, engage and galvanize actions on breast feeding and related issues The IEC/BCC activities includes the following :
204.4.7.2.1	Nutrition	State Level Activities	Lumpsum	7,65,000	0		• State level launch (Meeting, distribution of award on best BHFI, best LMU, best CLMC & best NRC, followed by Media Bites)@ Rs.30,000/- • Advertisement in News Daily (2 leading odia paper colour) : Rs.2,00,000/- • o Broadcast in FM (9FMCs) & Community Radio Stations (24CRS) : @ Rs.35000/- per minute X 5 minutes in the week= Rs.1.75/- • o TV Spots (21 Channels):@ Rs.1.80/- X 2 day = Rs.3.60 Lakhs
204.4.7.2.2	Nutrition	Change of Flex for Hoarding	Per hoarding	2,000	12	0.24	• Change of Flex for Hoarding at District & Block Level @ Rs. 2000/- per flex (for CHC/UCHC, DHHs, SDHs) • Sensitisation of Service Providers of Pvt MCHs, Nursing Colleges etc. At State & District level @ Rs.30,000 pe units • Media Meet, Social Media publicity are to be taken up, however budget for the same has not been factored here as budgeted under HSS.
204.4.7.2.3	Nutrition	Sensitisation of Service Providers of Pvt MCHs, Nursing Colleges	Per unit	30,000	1	0.30	• Mass media rates quoted as per I&PR rates • The proposal is considered for approval as per the discussion in the NPCC meeting
204.4.7.3	Nutrition	Special IEC in convergence with Railway / Transport Deptt.	Lumpsum	62,95,000			- Budget Dropped as per discussion in the NPCC meeting
204.4.7.4	Nutrition	A week long Special Campaign to increase awareness on improving anaemia conditions					Quarterly such campaign shall be organised to reinforce Behaviour change practices in the community. The focus will be on use of mid-media interventions with local relevance. The campaign will be funded under SAMPuRNA-AMLAN (State Specific Funding)
Sub Total (RCH-7)						1.23	
204.4.8	RCH-8						
204.4.8.1	NIDDCP	Awareness –cum Salt Testing Campaign for prevention of Iodine Deficiency disorders					In order to promote iodized salt use and conduct community-based salt testing, an awareness-cum-Salt testing camps proposed at all AWCs in targeted districts (17) to prevent iodine deficiency disorders.
204.4.8.1.1	NIDDCP	Distribution of leaflets	for 50 leaflets	50	0		Interventions prior & on the day of Camp at AWCs Prior to the Camp- • Distribution of leaflets (Containing benefit of use of iodised salt & date & time of camp and details of camp site)to households . @ Rs.1/- X 50 leaflets /SC in 17 targeted districts.
204.4.8.1.2	NIDDCP	Banner	Per SC	200	0		On the day of Camp • One Banner - @ Rs200/- per SC (to be used by AWC during the scheduled Screening camp) in 17 targeted districts
Sub Total (RCH-8)						-	
Grand Total IEC (RCH)						9.18	
204.5	NDCP						
204.5.1	NDCP-1						
204.5.1.1	IDSP						- No Proposal for FY 206-27
204.5.2	NDCP-2						
204.5.2.1	NVBDCP						

Annexure - IEC & Printing (Details of proposal under Sl. No. 204)

Amount in Rs. (Lakhs)

S. No	Programme/ Theme	Activity Proposed	Unit of Measure	Unit Cost (Rs)	Quantity/ Target	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
204.5.2.1.1	Malaria	Observation of World Malaria day (25th April)	Lumpsum	6,50,000	0		It is proposed to commemorate on 25th April to recognise Global efforts to control Malaria. The extensive mass media activities proposed for the day is as follows. State Level Activities : • State level launch (Meeting Followed by Media Bites)@ Rs.30,000/- • Advertisement in News Daily (2 leading odia paper colour) : Rs.2.00/- o Broadcast in FM (9FMCs) & Community Radio Stations (24CRS) : @ Rs.35000/- per minute X 5 minutes = Rs.1.75Lakhs o AIR 1 time @ Rs.65,000/- o TV Spots (21 Channels):@ Rs.1.80/- The proposal is considered for approval as per the discussion in the NPCC meeting
204.5.2.1.2	Malaria	Observation of Anti Malaria Month (June)					It is proposed to raise awareness and prevent the transmission of malaria, especially before the monsoon in the community. Promotional activities proposed are as follows. • Mass Media Interventions at State level o Advertisement in News Daily (2 leading odia paper colour) : Rs.2.00/- X 2 times in the campaign period = Rs.4.00 Lakhs o Broadcast in FM (9FMCs) & Community Radio Stations (24CRS) : @ Rs.35000/- per minute X 5 minutes = Rs.1.75Lakhs X 2 times in the campaign period =Rs.3.50 Lakhs o AIR 1 time @ Rs65000/- 2 times in the campaign period = Rs.1.30 Lakhs o TV Spots (21 Channels):@ Rs.1.80/- 2 times in the campaign period = Rs.3.60 Lakhs
204.5.2.1.2.1	Malaria	State Level Activities	Lumpsum	12,40,000	0		• District and Sub-district Level Activities o District launch (Meeting Followed by Media Bites)@ Rs.15,000/- X 30 districts = Rs.4.50 Lakhs o Change of Flex at Hoarding at Public Health facilities@ Rs. 2000/- per flex (for CHC/UHC, DHs, SDHs) o District Level Sensitisation of PRI members (especially Sarpanchs & other Panchayat Samiti members) (@ Rs. 20000/- 30 Meetings)= Rs.6.00 Lakhs o Special GKS (VHSNC) Level Meeting at SCs with API>1 at Non High Burdened districts (21 Districts): There are 30 districts in the State. Out of which 2 districts don't have SC > 1 API. Further, 7 districts are supported under GFATM- NGO –SR project. Hence 21 districts are focus under NHM. Herein the programme, It is proposed to sensitise GKS members for taking vector control measures at village level with participation from general population (Additional fund not proposed , required budget to be met out of GKS untied fund with approval of GKS members) o IEC Materials for SCs with API >1 in 22 districts : Each SC will be provided with a set of IEC materials (1 banner & 2 Standees) for display at SC & also be used at Special GKS Meeting venues (Budget-@ Rs 1500/- per SC X 310 nos of SC with API>1)=Rs.4.65 Lakhs o IEC Corners at Facility level other than SCs (PHC to DHH to be established as per the prototypes given by the State)- No additional budget required to be met out of RKS/JAS fund o Demonstration of use of Insecticidal Bed Nets by SC AAMs & Followed by FGD at 21 districts with API >1 with local community members (No additional fund required , budget to be met out of CPHC head - wellness activities at AAM level) o Above all under GFATM-NGO-SR support 7 high burdened SC AAMs will be supported for observation of Anti Malaria Month
204.5.2.1.2.2	Malaria	District Level Activities					
204.5.2.1.2.2.1	Malaria	District launch (Meeting Followed by Media Bites)	Per Dist	15,000	1	0.15	
204.5.2.1.2.2.2	Malaria	Change of Flex at Hoarding	Per Flex	2,000	12	0.24	
204.5.2.1.2.2.3	Malaria	District Level Sensitisation of PRI members	Per Dist	20,000	1	0.20	
204.5.2.1.2.2.4	Malaria	IEC Materials for SCs with API >1 in 22 districts	Per SC	1,500	0		

Annexure - IEC & Printing (Details of proposal under Sl. No. 204)

Amount in Rs. (Lakhs)

S. No	Programme/ Theme	Activity Proposed	Unit of Measure	Unit Cost (Rs)	Quantity/ Target	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
204.5.2.1.3	AES/JE	Media Campaign prior & during the transmission season	Lumpsum	6,20,000	0		State Level Activities : • Advertisement in News Daily (2 leading odia paper colour) : Rs.2.00/- lakhs - o Broadcast in FM (9FMCs) & Community Radio Stations (24CRS) : @ Rs.35000/- per minute X 5 minutes = Rs.1.75Lakhs - o AIR 1 time @ Rs.65,000/- - o TV Spots (21 Channels):@ Rs.1.80/- Total Budget : Rs.6.2 Lakhs The proposal is considered for approval as per the discussion in the NPCC meeting
204.5.2.1.4	Dengue and Chikungunya	Dengue Day (16th May)					It is proposed to organise for raising awareness among general population about the disease & preventing disease. Activities proposed as part of observation of the Day are as follows. • State level launch (Meeting Followed by Media Bites)@ Rs.30,000/- • Mass /Mid Media Interventions at State level
204.5.2.1.4.1	Dengue and Chikungunya	State Level Activities	Lumpsum	6,50,000	0		- o Advertisement in News Daily (2 leading odia paper colour) : Rs.2.00/- Lakhs - o Broadcast in FM (9FMCs) & Community Radio Stations (24CRS) : @ Rs.35000/- per minute X 5 minutes = Rs.1.75Lakhs - o AIR 1 time @ Rs.65,000/- - o TV Spots (21 Channels):@ Rs.1.80/-
204.5.2.1.4.2	Dengue and Chikungunya	Change of Flex at Hoarding	Per flex	2,000	12	0.24	o Change of Flex at Hoarding at Public Health facilities@ Rs. 2000/- per flex (for CHC/UHC, DHHS, SDHS) The proposal is considered for approval as per the discussion in the NPCC meeting
204.5.2.1.5	Dengue and Chikungunya	Anti Dengue Month (July)					It is planned to observe to raise awareness & conduct preventive activities against spread of dengue. IEC/BCC activities planned during the month are as follows. • Mass Media Interventions at State level
204.5.2.1.5.1	Dengue and Chikungunya	State Level Activities	Lumpsum	12,40,000	0		- o Advertisement in News Daily (2 leading odia paper colour) : Rs.2.00/- X 2 times in the campaign period = Rs.4.00 Lakhs - o Broadcast in FM (9FMCs) & Community Radio Stations (24CRS) : @ Rs.35000/- per minute X 5 minutes = Rs.1.75Lakhs X 2 times in the campaign period =Rs.3.50 Lakhs - o AIR 1 time @ Rs.65,000/- 2 times in the campaign period = Rs.1.30 Lakhs - o TV Spots (21 Channels):@ Rs.1.80/- 2 times in the campaign period = Rs.3.60 Lakhs
204.5.2.1.5.2	Dengue and Chikungunya	District /Sub district level Activities					• District /Sub district level Activities - o District Level launch (Meeting Followed by Media Bites)@ Rs.15,000/- X 30 districts = Rs.4.50 Lakhs - o Sensitisation of ASHAs & MAAS members on prevention of Dengue- To be taken up in Sector meeting/ MAAS meeting, hence no additional budget required.
204.5.2.1.5.2.1	Dengue and Chikungunya	District Level launch	Per Dist	15,000	1	0.15	- o Special GKS/MAAS Meetings – No additional budget required, budget if needed to be met out of GKS/VHSNC fund/MAAS. - o Handouts for Dengue Volunteers (Pictorial Guidance Note for creating general awareness) @ Rs.20/- per handout

Annexure - IEC & Printing (Details of proposal under Sl. No. 204)

Amount in Rs. (Lakhs)

S. No	Programme/ Theme	Activity Proposed	Unit of Measure	Unit Cost (Rs)	Quantity/ Target	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
204.5.2.1.5.2.2	Dengue and Chikungunya	Handouts for Dengue Volunteers	Per Handout	20	20	0.00	o General Awareness through IEC Van @ Rs.1.00 Lakh for 15 days (Branding of vehicle Rs.30,000/- + hiring charges including pol for 15 days 50000/- + DA to Communication officers attached to the Van Rs.5000/- + leaflet for distribution Rs.15,000/-= Rs.1,00 Lakhs) x 33 units (1 per districts x 27 districts & 2 per 3 large districts)
204.5.2.1.5.2.3	Dengue and Chikungunya	General Awareness through IEC Van	per Van	1,00,000	1	1.00	Other Activities : • Media Meet, Social Media publicity, Publicity by MHUs at difficult villages etc. are also to be taken up, however budget for the same will not be factored here as budgeted under HSS. The proposal is considered for approval as per the discussion in the NPCC meeting
204.5.2.1.6	LF	MDA Campaign					The MDA campaign involve distribution of antiphastic drugs to an entire at risk population in a specific area to halt transmission wherein people's participation and compliance of drug intake is most important. This is generally done in 2 phases. In order to ensure people's participation and improve drug compliances following IEC/BCC campaign is planned. • State level launch (Meeting Followed by Media Bites)@ Rs.30,000/- • Mass Media Interventions at State level
204.5.2.1.6.1	LF	State Level Activities	Lumpsum	12,90,000	0		o Advertisement in News Daily (2 leading odia paper colour) : Rs.2.00/- X 2 times in the campaign period = Rs.4.00 Lakhs o Broadcast in FM (9FMCs) & Community Radio Stations (24CRS) : @ Rs.35000/- per minute X 5 minutes = Rs.1.75Lakhs X 2 times in the campaign period =Rs.3.50 Lakhs o AIR 1 time @ Rs65000/- 2 times in the campaign period = Rs.1.30 Lakhs o TV Spots (21 Channels):@ Rs.1.80/- 2 times in the campaign period = Rs.3.60 Lakhs o Sensitisation of Professional Organisations & Philanthropic intuitions Like Lions Club, IMA etc. @ Rs.10000/- X 2 Times = Rs.20,000/-
204.5.2.1.6.2	LF	District level Activities					• District level Activities o Launching Ceremony (Meeting Followed by Media Bites)@ Rs.15,000/- X 27 districts o Sensitisation of Professional Organizations Philanthropic intuitions, Civil Society Organizations like Lions Club, IMA etc. @ Rs. 5000/- per meeting X 27 districts
204.5.2.1.6.2.1	LF	Launching Ceremony	Per District	15,000	1	0.15	• IU level activities : o Cyclohone/ Mini-marathon @ Rs.5000/- per IU X 98 IUS o Distributions of Leaflets @ 5000 per IU X 98 IUs X Rs.1/- per leaflet o Miking @5000/- per IU (to focus on difficult pockets only) X 98 IUS o Banner @ 10,000 per IU for 98 IU o Poster @ 15000 per IU for 98 IUs o Dynamic Hoarding @ 2000 for 98 IUs
204.5.2.1.6.2.2	LF	Sensitisation of Professional Organizations Philanthropic intuitions, Civil Society	Per Meeting	5,000	1	0.05	Total Budget (@ Rs. 42,000 per IU • Other Activities : o Media Meet, Social Media publicity, Publicity by MHUs at difficult villages etc. are also to be taken up, however budget for the same will not be factored here as budgeted under HSS.
204.5.2.1.6.3	LF	IU level activities	Per IU	42,000	1	0.42	
Sub Total (NDCP-2)						2.60	
204.5.3	NDCP-3						

Annexure - IEC & Printing (Details of proposal under Sl. No. 204)

Amount in Rs. (Lakhs)

S. No	Programme/ Theme	Activity Proposed	Unit of Measure	Unit Cost (Rs)	Quantity/ Target	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
204.5.3.1	NLEP	Observation of Anti Leprosy Day /SPARSH Campaign (30th Jan to 13th Feb)					The Anti Leprosy Day /SPARSH Campaign is proposed to be observed in the State to reduce stigma & increase awareness about Leprosy and promote screening & Services. The IEC/BCC Interventions proposed under this campaign are as follows
204.5.3.1.1	NLEP	State Level Activities	Lumpsum	12,70,000	0		State Level Activity • State level launching (Meeting followed by Media Bites) = Rs 30,000/- • Mass Media Interventions at State level o Advertisement in News Daily (2 leading odia paper colour) : Rs.2.00/- (I&PR Rate) X 2 times in the month = Rs.4.00 Lakhs o Broadcast in FM (9FMCs) & Community Radio Stations (24CRS) : @ Rs.35000/- per minute X 5 minutes X 2 times during the campaign = Rs.3.50 Lakhs (I&PR Rate) o AIR 1 time @ Rs65000/- X 1 time in day= Rs. 65000/- (I&PR Rate) X 2 = Rs.1.30 Lakhs o TV Spots (21 Channels):@ Rs.1.80/- (I&PR Rate)X 2 times during the Campaign = Rs.3.60 Lakhs o Sub Total = Rs.12.40 Lakhs
204.5.3.1.2	NLEP	District / Sub District Level Activities					District / Sub District Level Activities o School Level awareness & Competitions – This has to be done in 60 selected schools in each district during the month where in an educational sessions shall be organised followed by Essay/Debate/Quiz Competitions & recognition of achievers. This activity shall be done with the support of MHTs/BNWs. Budget : @ 500/- per School X 60 Schools per District o Focused Group Discussions at community level especially with representatives from SHG members, CBOs, NGOs to promote screening & services @ Rs. 500/- per SC per meeting (Banner & refreshment) X 1 meeting at 60 selected SCs with cases/District
204.5.3.1.2.1	NLEP	School Level awareness & Competitions	Per School	500	60	0.30	
204.5.3.1.2.2	NLEP	Focused Group Discussions at community level	Per SC	500	60	0.30	
Sub Total (NDCP-3)						0.60	
204.5.4	NDCP-4						
204.5.4.1	NTEP	TB Mukd Panchayat Initiatives					It aims to make Panchayat TB Free by empowering local self Governance Bodies, Panchatiraj Institutions to take action & achieve community wide TB prevention & Control. ACSM & advocacy Interventions Planned under this Programme are • Sensitisation Meeting of Block Panchayat members & other elected members at district level @ Rs.20000/- per meeting X 33 Meeting(2 Meetings proposed each for Ganjam, Sundargarh & Mayurbhanj as district having more than 20 blocks) for 30 districts • Sensitisation Meeting of Sarpanchs at Block level @ Rs.10000/- X 314 blocks • Vinyl Printed Posters for Panchayat Office on TB Mukd Panchayat(need to participate every year to qualify for it)- @ Rs. 300/- X 6800= Rs.20.40 Lakhs- Activity Dropped as per the discussion in the NPCC Meeting • Rallies at villages of Panchayats as part of Wellness sessions (No additional fund required , to be met out of AAM wellness Budget under CPHC programme)
204.5.4.1.1	NTEP	Sensitisation Meeting at District Level	Per Meeting	20,000	1	0.20	

Annexure - IEC & Printing (Details of proposal under Sl. No. 204)

Amount in Rs. (Lakhs)

S. No	Programme/ Theme	Activity Proposed	Unit of Measure	Unit Cost (Rs)	Quantity/ Target	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
204.5.4.1.2	NTEP	Sensitisation Meeting at Block Level	Per Block	10,000	8	0.80	- School Level Debate, Essay , Quiz completion by MHTs & recognition(Non Budgeted activity) - Wall Writing at strategic locations at selected villages @ Rs300/- (to be met out of GKS/VHSNC fund) - Media Meet, Social Media publicity, Publicity by MHUs at difficult villages etc. are also to be taken up, however budget for the same will not be factored here as budgeted under HSS. Budget Revised as per the discussion in the NPCC Meeting
204.5.4.2	NTEP	Special Awareness campaign for improving Screening & Services in vulnerable areas	Lumpsum				Proposal : Special Awareness during 100 days Campaign in High-Risk TB vulnerable Areas (Villages/Urban Wards) Background: Based on the AI tool mapping, in Odisha 13,271 High Risk villages/Wards have been identified. The categorization of villages/wards aims to support: - Targeted interventions for screening of vulnerable populations in high-risk villages to intensify case-finding activity. - Enhanced microplanning at the community level to strengthen TB screening and preventive services. Proposal for Special Awareness Campaign in PIP 2026-28: 13,271 High Risk Villages/Wards with population of 132.71 Lakhs (considering average population of 1000 per village/ward) to be targeted under this special awareness campaign. - Sensitization & community mobilization by ASHA Budget for community level activities: ☑ Miking - State has planned to inbuilt audio System at mobile health units (177 operational). Fund for the same has been proposed in other heads. Hence Budget dropped ☑ Printing of Leaflets: Rs. 16,58,875 (@ Rs.5000/- per every 10000 Households (considering 250 HHs per village or ward))- Budget dropped after discussion the NPCC Meeting ☑ Printing of Banners: one per Block/ward @ Rs 500 per banner x 319 (314 blocks & 5 MCs) = Rs 1,59,500- Budget dropped after discussion the NPCC Meeting

Annexure - IEC & Printing (Details of proposal under Sl. No. 204)

Amount in Rs. (Lakhs)

S. No	Programme/ Theme	Activity Proposed	Unit of Measure	Unit Cost (Rs)	Quantity/ Target	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
204.5.4.3	NTEP	Involvement of Community Institutions/ Groups/ Individuals in Behaviour Change Communication at SC AAM level	Per SC AAM	2,000	189	3.78	Ongoing Activity: Approved last year Active and structured engagement of the SC AAM team with the community groups and community leaders is instrumental in creating awareness, removing superstitions and misbelieve; increasing footfall, treatment compliance TB patients and regular follow up. Patient support group meeting helps to improve the treatment compliance of the TB patients and also gives a platform to the TB patients to break the social stigma or taboo associated with the disease. The community involvement of the SC AAM is envisaged using the following platforms: 1. Patient Support Groups(To improve compliance to TB treatment) 2. Self-help Group meeting(To create awareness, removal of social taboo and increase referral of Presumptive TB) 3. School Health ambassador(To create awareness) 4. Religious leaders meeting(To create awareness, removal of social taboo and increase referral of Presumptive TB) The activities will be conducted as per requirement of the SC-AAM. The SC-AAM having high case load will conduct Patient Support Group meeting, and the SC-AAM having less case or no case may go for SHG meeting, School health ambassador, and Religious leader meet to reduce social stigma, create awareness and improve presumptive TB examination rate. This will help to prepare the Panchayat for TB Mukh Panchayat status. Total budget for NTEP activities will be @ Rs 2000/- per SC-AAM per year. Activity wise Budget breakup 1.Patient Support Group Meeting 10 TB patients including TB Champion Rs. 500/- 2.School Health Ambassador 10 Teachers Rs. 500/- 3.SHG Meeting 20 SHG members Rs. 500/- 4. Religious Healers Meet 10 Nos (including Influencers i.B. PRI/ Teachers/ Village Head Man) Rs. 500/-
204.5.4.4	NTEP	IEC for Promoting TB Notification at Pvt Hospital & Clinics	Per sun board	300	69	0.21	Promoting TB notification in Pvt facilities requires multipronged approaches that address barriers like lack of awareness, patient confidentiality & concerns etc. Hence, to promote awareness, a poster has to be displayed in strategic locations with relevant messages. Budget : Poster (Materials -Sun board): @ Rs.300/-per sun board

Annexure - IEC & Printing (Details of proposal under Sl. No. 204)

Amount in Rs. (Lakhs)

S. No	Programme/ Theme	Activity Proposed	Unit of Measure	Unit Cost (Rs)	Quantity/ Target	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
204.5.4.5	NTEP	Printing & Supply of Guidance Note on Differentiated TB Care for Service Providers & Front line Workers	Lumpsum				Gol has developed & shared prototypes of guidance Note on differentiated TB care for following categories of personnel • Medical Officers • Community Health Officers • TB Health Visitors • STLS • STS • ASHAs & Volunteers As decided , State has proposed to print hand outs for Service providers for Doctors at different levels , however the same shall be printed in ASHA Dairy & develop a Poster (Sun Board) & displayed in OPD at SC AAMs for her reference. Budget : • Reference Materials for ASHAs : No additional fund required as same will be printed in her Dairy • Reference Poster for CHOs @ Rs 200/- X 5400= Rs.10.80 Lakhs • Colour Handouts for Doctors : @ Rs 5/- X 9000/- = Rs Rs.45,000/- Total Budget = Rs.11.25 Lakhs Activity Dropped after discussion in the NPCC meeting
204.5.4.6	NTEP	Observation of World TB day (24th March)					It is proposed to be observed to amplify the urgency of ending TB. State Level Activity • State level launching (Meeting followed by Media Bites) = Rs 30,000/- • Advertisement in News Daily (2 leading odia paper colour) : Rs.2.00/- (I&PR Rate) • Broadcast in FM (9FMCs) & Community Radio Stations (24CRS) : @ Rs.35000/- per minute X 5 minutes in the week = Rs.1.75 Lakhs (I&PR Rate) • AIR 1 time @ Rs65000/- X 1 time in day= Rs. 65000/- (I&PR Rate) • TV Spots (21 Channels):@ Rs.1.80/- (I&PR Rate) • Sensitisation of Professional Organisations & Philanthropic institutions Like Lions Club, IMA etc. @ Rs.10000/- X 1 Time = Rs.10,000 • Media Meet, Social Media publicity, Publicity by MHUs at difficult villages etc. are also to be taken up, however budget for the same will not be factored here as budgeted under HSS.
204.5.4.6.1	NTEP	State Level Activity	Lumpsum	6,60,000	0		
204.5.4.6.2	NTEP	District ,Sub-district & Facility Level Activities					District ,Sub-district & Facility Level Activities • Observation of World TB day (Meeting followed by Media Bites) = Rs 10,000/- X 30 districts • Change of Flex at Hoarding at Public Health facilities@ Rs. 2000/- per flex (for CHC/UCHC, DHHs, SDHs)
204.5.4.6.2.1	NTEP	Observation of World TB day	per District	10,000	1	0.10	
204.5.4.6.2.2	NTEP	Change of Flex at Hoarding	per Flex	2,000	12	0.24	Community Level Interventions : • The day shall be observed at selected feeding villages of SC & PHC/UPHC Ayushman Arogya Mandirs as part of wellness activities by Rally

Annexure - IEC & Printing (Details of proposal under Sl. No. 204)

Amount in Rs. (Lakhs)

S. No	Programme/ Theme	Activity Proposed	Unit of Measure	Unit Cost (Rs)	Quantity/ Target	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
204.5.4.7	NTEP	Special IEC for TB Mukht Barat in convergence with Railway / Transport Deptt.	Lumpsum	62,95,000	0		The IEC display in Govt. run buses is a targeted, cost-effective strategy to reach out to the masses both in rural and urban areas. Further, information dissemination through Public Address System in major Railway Stations and Branding has lasting impact for development of awareness. This medium has been proposed due to the following reasons: • Captive audience: Such announcements are listened very keenly by passengers and visitors present at the station premises. • Brand Recall: High frequency communication throughout the day results in a high level of brand recall. The proposed communication mediums shall be used to create awareness among general population on screening & Service facilities available in Public Health Sectors for TB elimination & time of its use. Activities Planned: 1) Railway Deptt.: a. Audio Jingle add air before & after announcements in 7 Major Railway Stations (Balasore, Bhubaneswar, Berhampur, Cuttack, Puri, Sambalpur & Rourkela): @Rs. 30/- for 30s (Indian Railways approved rate) x 18 Hrs (64800secs) per month x 1 month = Rs. 64800/- (Say 0.65 Lakhs) b. Branding in 7 Major Railway Stations (Balasore, Bhubaneswar, Berhampur, Cuttack, Puri, Sambalpur & Rourkela): @Rs.500000/- (Indian Railways approved rate) x 7 Railway Stations for 30 days display = Rs. 3500000/- (say 35 Lakhs). 2) Transport Deptt.: a. Branding in Govt. Buses: Back Panel of OSRTC buses (development, mounting & display) - @Rs. 13000/- per bus x 70 buses x 3 months = Rs.27.30 Lakhs
Sub Total (NDCP-4)						5.33	
204.5.5	NDCP-5						
204.5.5.1	NVHCP	Observation of World Hepatitis Day (July 28)					It is proposed to be observed to raise awareness and encourage prevention, diagnosis & treatment. IEC /BCC Activities proposed as a part of World Hepatitis Day are as follows: State Level Activities • State level launching (Meeting followed by Media Bites) = Rs 30,000/- • Mass Media Interventions at State level
204.5.5.1.1	NVHCP	State Level Activities	Lumpsum	6,50,000	0		o Advertisement in News Daily (2 leading odia paper colour) : Rs.2.00/- (I&PR Rate) o Broadcast in FM (9FMCs) & Community Radio Stations (24CRS) : @ Rs.35000/- per minute X 5 minutes =Rs.1,75 Lakhs o AIR 1 time @ Rs65000/- (I&PR Rate) o TV Spots (21 Channels) : @ Rs.1.80/- (I&PR Rate)
204.5.5.1.2	NVHCP	District Level Activities (Awareness Camp at Jail / TI Project sites)	Per District	10,000	1	0.10	District Level Activities : • Awareness Camp at Jail / TI Project sites @Rs. 10,000/- per District Other Activities : • Media Meet, Social Media publicity, Publicity by MHUs at difficult villages etc. are also to be taken up, however budget for the same will not be factored here as budgeted under HSS.

Annexure - IEC & Printing (Details of proposal under Sl. No. 204)

Amount in Rs. (Lakhs)

S. No	Programme/ Theme	Activity Proposed	Unit of Measure	Unit Cost (Rs)	Quantity/ Target	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
204.5.5.2	NVHCP	Branding of Treatment Centres	Per Treatment Centre	30,000	1	0.30	Branding of Treatment Centres at DHHs: It is to bring visibility of treatment sites, provides sinages for reaching out easily and also promote awareness on the Programme & Scope of Treatment Centres. Budget : Rs.30,000/- (IEC Material, sinages & provision of protocols etc.) per TC
Sub Total (NDCP-5)						0.40	
204.5.6	NDCP-6						
204.5.6.1	NRCP	Observation of World Rabies Day (28th September)	Lumpsum	6,50,000	0		World Rabies Day is observed every year on 28th September to raise awareness about rabies prevention, control, and the importance of timely post-exposure prophylaxis. The day serves as a global advocacy platform to promote the “Zero by 2030” goal for eliminating dog-mediated human rabies deaths. The major IEC/BCC activities proposed under this initiatives are as follows State Level Activity • State level launching (Meeting followed by Media Bites) = Rs 30,000/- • Mass Media Interventions o Advertisement in News Daily (2 leading odia paper colour) : Rs.2.00/- (I&PR Rate) o Broadcast in FM (9FMCs) & Community Radio Stations (24CRS) : @ Rs.35000/- per minute X 5 minutes = Rs.1.75 Lakhs (I&PR Rate) o AIR 1 time @ Rs65000/- X 1 time in day= Rs. 65000/- (I&PR Rate) o TV Spots (21 Channels):@ Rs.1.80/- (I&PR Rate) Total IEC/BCC Budget :Rs. 6.5 Lakhs
204.5.6.2	NRCP	Branding of PHC ARV Centres	Per PHC/UPHC	3,000	27	0.81	Anti Rabies centre at facility level provides post-exposure prophylaxis to individuals who have been exposed to rabies through an animal bite or scratch. This year, the plan is to establish ARV centres at PHC/UPHC level. Hence to bring visibility, improve awareness on Do's and Dont's and protocols for service providers, fund has been proposed @ Rs, 3000/- per PHCs/UPHCs. Budget : 1014 PHCs/UPHCs X Rs.3000/- per PHC/UPHC
204.5.6.3	NRCP	Special IEC/ BCC for Rabies free cities campaign	Lumpsum	37,56,000	0		In line with National Action Plan for elimination of dog mediated Rabies by 2030 , the State proposed in PIP 2026-27 for Rabies free cities campaign in Bhubaneswar, Cuttack & Rourkela. Accordingly, PIP 2026-27 focuses on spreading awareness among general population of the above cities, with following IEC/ BCC activities. • Advertisement in News Daily (2 leading Odia paper colour) : Rs.2,00,000/- (I&PR Rate) X 4 Times = Rs.8.00 Lakhs • Broadcast in FM (9FMCs) & Community Radio Stations (24CRS) : @ Rs.35000/- per minute X 5 minutes each = Rs.1.75/- X 4 times =Rs.7.00 Lakhs • TV Spots (21 Channels) : @ Rs.1.80/- X 4 days = Rs.7.20 Lakhs • Information dissemination through Public Address System (Jingles before & after announcements) in Major Railway Stations (Bhubaneswar, Cuttack & Rourkela): @Rs. 30/- for 30s (Indian Railways approved rate) x 10 Hrs (36000s) per month x 1 month = Rs. 36000/- (Say 0.36 Lakhs) • Branding in Major Railway Stations (Bhubaneswar, Cuttack & Rourkela): @Rs.500000/- (Indian Railways approved rate) x 3 for 30 days display = Rs. 1500000/- (say 15 Lakhs)
Sub Total (NDCP-6)						0.81	
204.5.7	NDCP-7						

Annexure - IEC & Printing (Details of proposal under Sl. No. 204)

Amount in Rs. (Lakhs)

S. No	Programme/ Theme	Activity Proposed	Unit of Measure	Unit Cost (Rs)	Quantity/ Target	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
204.5.7.1	PPCL	IEC on Prevention and Control of Leptospirosis					The IEC / BCC activities in the current year are targeted for improving awareness among agricultural workers. There are about 404 Officially Regulated Agricultural Market Yards in the State. Initially in the proposed year (2026-27) will focus on two major Agricultural Market Yards in the district for following IEC / BCC interventions. The programme will be implemented in coordination with Department of Agriculture & Farmers' Empowerment, Govt. of Odisha. • Installation of temporary hoarding: @Rs.10000/- per hoarding x 60 = 6.00 Lakhs • Leaflet for distribution among agricultural farmers attending market yard: @Rs.5000/- per sitex60 = 3.00 Lakhs • One Sensitization meeting of Market Yard workers & farmers on the disease & its management, who shall distribute the leaflet and answer the primary queries. In need shall share the mobile number of concerned ANM for further information: @Rs.2000/- per meeting x 60 = 1.20 Lakhs. Total Budget: Rs. 10.20 Lakhs (GoI normative Budget limit is @Rs. 1 Lakh per district; i.e. Rs. 30 Lakhs)
204.5.7.1.1	PPCL	Installation of temporary hoarding	Per Hoarding	10,000	2	0.20	
204.5.7.1.2	PPCL	Leaflet for distribution among agricultural farmers attending market yard	Per Site	5,000	2	0.10	
204.5.7.1.3	PPCL	One Sensitization meeting of Market Yard workers & farmers	Per meeting	2,000	2	0.04	
Sub Total (NDCP-7)						0.34	
Grand Total IEC (NDCP)						10.08	
204.6	NCD						
204.6.1	NCD-1						
204.6.1.1	NPCB&VI	Observation of Eye Donation Fortnight (25th august to 8th Sept)					Eye Donation Fortnight is an annual campaign proposed to raise awareness about eye donation and its importance in preventing corneal blindness. IEC/BCC activities planned for this fortnight are as follows. Extensive Mass Media Publicity (Rate proposed as per I&PR Deppt , GoO rate) • Advertisement in News Daily (2 leading odia paper colour) : Rs.2,00,000/- - o Broadcast in FM (9FMCs) & Community Radio Stations (24CRS) : @ Rs.35000/- per minute X 5 minutes in the week=1.75Lakhs - o AIR 1 time @ Rs65000/- - o TV Spots (21 Channels):@ Rs.1.80/- - o Sensitization of Stakeholders at State Level: Rs.0.10 Lakhs Budget : 6.3 Lakhs Eye Bank Level Activities : Organise a function at Eye Bank to appraise media personnel (Print, Electronic & Social Media Influencers) about the services available at Eye Bank for wider publicity local news papers & channels. This will strengthen uptake of the concerned banks. - Budget : @ 50,000/- per Eye Bank (Heads of Expenses-Gate, Standees depicting IEC messages, Media kit etc) Budget Revised after discussion in the NPCC meeting
204.6.1.1.1	NPCB&VI	State Level Activities	Lumpsum	6,30,000	0		
204.6.1.1.2	NPCB&VI	Eye Bank Level Activities	Per Eye Bank	50,000	0		

Annexure - IEC & Printing (Details of proposal under Sl. No. 204)

Amount in Rs. (Lakhs)

S. No	Programme/ Theme	Activity Proposed	Unit of Measure	Unit Cost (Rs)	Quantity/ Target	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
204.6.1.2	NPCB&VI	Branding of Eye Bank	Per Centre				State has 4 operational Eye Bank in Public health facility & in the PIP 2026-27, two (2) new Eye Banks have been proposed for establishment. There is no uniform branding and awareness material there at Eye Donation Centres. Hence, an uniform prototypes will be prepared and Awareness material developed for which fund has been proposed Budget @ Rs50,000/- per Centre The Proposal is dropped in view of taking this activity along with other branding as part of general facility branding with the funding under State budget.
204.6.1.3	NPCB&VI	World Eye Sight Day					It is proposed to celebrate to raise awareness about vision impairment and blindness, promote eye health, and highlights eye care services . Proposed IEC/BCC Activities planned are as follows: State Level • Advertisement in News Daily (2 leading odia paper colour) : Rs.2,00,000/- o Broadcast in FM (9FMCs) & Community Radio Stations (24CRS) : @ Rs.35000/- per minute X 5 minutes in the week=1.75Lakhs o AIR 1 time @ Rs65000/- o TV Spots (21 Channels):@ Rs.1.80/- Total Budget (State) = Rs. 6.2 Lakhs District Hqr Hospital Level : Organise a function at DHH level to appraise media personnel (Print, Electronic & Social Media Influencers) about the services available in the Public Health system for wider publicity. Budget @ Rs15,000/- (Heads of Expenses-Gate, Standees depicting IEC messages, Media kit etc) Community Level : Proposed to organise educational sessions at selected school (1) followed by Competitions out of wellness fund approved under CPHC head (No additional budget required) for SC AAMs.
204.6.1.3.1	NPCB&VI	State Level Activities	Lumpsum	6,20,000	0		
204.6.1.3.2	NPCB&VI	District Hqr Hospital Level Activities	Per District	15,000	1	0.15	
204.6.1.4	NPCB&VI	Branding of Mobile Ophthalmic Van	Per Van				There are 30 Mobile Ophthalmic vans operational in the State with the funding from NHM. The plan is for branding those vans for wider visibility, general awareness and prevents misuse of the vehicles. Budget : @ Rs 10000/- per van Branding of Mobile Ophthalmic Vans shall have been integrated as part of MoU. Hence, Budget dropped

Annexure - IEC & Printing (Details of proposal under Sl. No. 204)

Amount in Rs. (Lakhs)

S. No	Programme/ Theme	Activity Proposed	Unit of Measure	Unit Cost (Rs)	Quantity/ Target	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
204.6.1.5	NPCB&VI	Chaskhyu Ratha (Eye Awareness Chariot)	Per Van				Objectives • To create awareness among communities about the causes and prevention of blindness. • To promote participation in Cataract Month and other NPCBVI activities such as refractive error screening, diabetic retinopathy, glaucoma, and childhood blindness initiatives. • To disseminate information on the availability of free eye care services, screening camps, and surgical facilities. • To encourage regular eye check-ups, especially among the elderly, school children, and vulnerable populations. • To strengthen community engagement through folk media, visual aids, and interactive IEC activities. The “Chaskhyu Ratha” (literally meaning “Eye Awareness Chariot”) will be a specially designed and branded vehicle equipped with: - IEC materials (banners, posters, audio-visual displays). - Loudspeaker/public address system for announcements. - LED screen (optional) for eye health videos. - Information desk with IEC leaflets for distribution. The vehicle will travel across blocks, PHCs, schools, and marketplaces to spread awareness messages and mobilize the community during major eye health drives such as Cataract Month or World Sight Day. Activity dropped as per the discussion in the NPCC meeting
Sub Total (NCD-1)						0.15	
204.6.2	NCD-2						

Annexure - IEC & Printing (Details of proposal under Sl. No. 204)

Amount in Rs. (Lakhs)

S. No	Programme/ Theme	Activity Proposed	Unit of Measure	Unit Cost (Rs)	Quantity/ Target	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
204.6.2.1	NMHP	Publicising Tele-MANAS Programme & its Toll Free Help Line -14416	Lumpsum	24,80,000	0	-	The Tele-MANAS programme launched to provide free mental health support to people in need. There is a further need of publicise the Toll free Nos , so that people can access it.In order to publicise the same, Mass, Mid media Interventions are proposed periodically (Quarterly) to reinforce its use. • Advertisement in News Daily (2 leading odia paper colour) : Rs.2,00,000/- X 4 times (Quarterly)= Rs.8.00 Lakhs - o Broadcast in FM (9FMCs) & Community Radio Stations (24CRS) : @ Rs.35000/- per minute X 5 minutes in the week X 4 times (Quarterly)= Rs.7.00 Lakhs - o AIR 1 time @ Rs65000/- X 4 times (Quarterly)= Rs.2.60 Lakhs - o TV Spots (21 Channels):@ Rs.1.80/- X 4 times (Quarterly)= Rs.7.20 /- Total Budget : Rs.24.80 Lakhs Further, it is proposed to publicise once on the occasion of Mental health Day (10TH Oct), out of 4 times proposed to be taken up during 2026-27. Wellness sessions will also be conducted on the day at selected feeding villages of SC& PHC AAMs, for which budget has been earmarked at CPHC Head. Mid Media Interventions : • Panel Discussion in DD: Panel discussion is proposed on the occasion of mental health day along with mass media publicity initiatives. (Budget – Rs.2.20 Lakhs)- Not Approved • Printing of Toll Free No & Scope of Services in the ASHA Dairy: It is proposed to print it in the ASHA Dairy so that awareness can reach to last miles (No additional fund required, Budget proposed under ASHA Programme). Other Activities : • Media Meet, Social Media publicity, Publicity by MHUs at difficult villages etc. are also to be taken up, however budget for the same will not be factored here as budgeted under HSS. • Printing of the Toll Free No in the ASHA Dairy for wide publicity through IPC by ASHAs.- No additional Budget required , fund for printing of ASHA dairy is CPRC head.
Sub Total (NCD-2)						-	
204.6.3	NCD-3						
204.6.3.1	NPHCE	Observation of International Day for Older Person					The International day of older Person is observed on 1st Oct each year and the same observation extends for 1 month where in special camps are organised at Public Health facilities for older persons. The State has proposed to organise at least 1 Special camp at PHCs & UPHCs (as theses are near to the community where MOs are present) as per the scheduled micro plan. IEC Plan Mass Media • Messages about Special camps at PHC/UPHCs & elderly care in Radios - o Broadcast in FM (9FMCs) & Community Radio Stations (24CRS) : @ Rs.35000/- per minute X 5 minutes in the week X 4 times (in the month)= Rs.3.50 Lakhs - o AIR 1 time @ Rs65000/- X 4 times (4 times in a month)= Rs.2.60 Lakhs
204.6.3.1.1	NPHCE	State Level Activities (Mass Media)	Lumpsum	6,10,000	0	-	
204.6.3.1.2	NPHCE	District Level Activities (Mid Media)					

Annexure - IEC & Printing (Details of proposal under Sl. No. 204)

Amount in Rs. (Lakhs)

S. No	Programme/ Theme	Activity Proposed	Unit of Measure	Unit Cost (Rs)	Quantity/ Target	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
204.6.3.1.2.1	NPHCE	Leaflets	Per Leaflet	1	3700	0.04	Mid Media • Leaflets (100 per PHC/UPHC) X 1394 PHC/UPHC X @ Rs1. Per leaflet (These leaflets will be given to each of the households with elderly persons for general awareness & invitation to attend special camps) • Banner & 2 Standees per PHC/UPHCs = @Rs.1000/- per PHC/UPHC • Wellness day activities at SC AAM level & old age Home is budgeted under CPHC
204.6.3.1.2.2	NPHCE	Banner & Standees	Per PHC/UPHC	1,000	37	0.37	
Sub Total (NCD-3)						0.41	
204.6.4	NCD-4						
204.6.4.1	NTCP	Observation of World No Tobacco Day (31st May)					It is proposed to observe across the State to inform the public on the dangers of using Tobacco. State Level Activities : • Mini Marathon -@ 30000/- • Advertisement in News Daily (2 leading Odia paper colour) : Rs.2,00,000/- o Broadcast in FM (9FMCs) & Community Radio Stations (24CRS) : @ Rs.35000/- per minute X 5 minutes in the week=1.75Lakhs o AIR 1 time @ Rs65000/- o TV Spots (21 Channels):@ Rs.1.80/- Total Budget (State) = Rs. 6.5 Lakhs
204.6.4.1.1	NTCP	State Level Activities	Lumpsum	6,50,000	0		
204.6.4.1.2	NTCP	District Level Activities (Meeting followed by Mini-marathon)	Per District	10,000	1	0.10	District Level Function : o Meeting followed by Mini-marathon @ Rs.10000/- per district
204.6.4.2	NTCP	Tobacco Free Youth Campaign(2 months /Annum)					The Campaign proposed to be organised for strengthening vision of a tobacco free generation in the State. Hence, to make it happen, a 360 degree multimedia campaign is proposed in the PIP. Mass Media Interventions • Advertisement in News Daily (2 leading odia paper colour) : Rs.2,00,000/- X 4 times (Quarterly)= Rs.8.00 Lakhs o Broadcast in FM (9FMCs) & Community Radio Stations (24CRS) : @ Rs.35000/- per minute X 5 minutes in the week X 4 times (Quarterly)= Rs.7.00 Lakhs o AIR 1 time @ Rs65000/- X 4 times (Quarterly)= Rs.2.60 Lakhs o TV Spots (21 Channels):@ Rs.1.80/- X 4 times (Quarterly)= Rs.7.20 /-
204.6.4.2.1	NTCP	Mass Media Interventions	Lumpsum	24,80,000	0		
204.6.4.2.2	NTCP	Mid Media Interventions					Mid Media Interventions : • Mini Marathon/ Cyclothon by local youths at State/ District Hqr = Rs 3.30 Lakhs (State @ Rs.30000/- + District @Rs. 10000/- X 30 districts) • Rally as part of wellness sessions at selected villages of AAM SCs(1Village/SC) – No additional fund required (Budget at CPHC head) • Change of Flex at Hoarding at Public Health facilities@ Rs. 2000/- per flex (for CHC/UHC, DHHS, SDHS)
204.6.4.2.3	NTCP	Mini Marathon/ Cyclothon by local youths at State	Lumpsum	30,000	0		
204.6.4.2.4	NTCP	Mini Marathon/ Cyclothon by local youths at District	Per District	10,000	1	0.10	• Media Meet, Social Media publicity, Publicity by MHUs at difficult villages etc. are also to be taken up, however budget for the same will not be factored here as budgeted under HSS.
204.6.4.2.5	NTCP	Change of Flex at Hoarding	Per Flex	2,000	12	0.24	

Annexure - IEC & Printing (Details of proposal under Sl. No. 204)

Amount in Rs. (Lakhs)

S. No	Programme/ Theme	Activity Proposed	Unit of Measure	Unit Cost (Rs)	Quantity/ Target	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
Sub Total (NCD-4)						0.44	
204.6.5	NCD-5						
204.6.5.1	NP-NCD	Mass Media Interventions for Universal Screening & thereon availing Services of NCDs	Lumpsum	13,30,000	0		The Universal Screening of NCD is proposed for early detection & management to improve health outcomes. This is being done on regular basis. However, Mass Media Interventions are planned on quarterly basis to reinforce the effort & improve coverage & achieve in the given time frame. Mass Media Interventions • Advertisement in News Daily (2 leading odia paper colour) : Rs.2,00,000/- X 4 times (Quarterly)= Rs.8.00 Lakhs - Budget Not Approved • Broadcast in FM (9FMCs) & Community Radio Stations (24CRS) : @ Rs.35000/- per minute X 5 minutes in the week X 4 times (Quarterly)= Rs.3.50 Lakhs • AIR 1 time @ Rs65000/- X 4 times (Quarterly)= Rs.2.60 Lakhs • TV Spots (21 Channels):@ Rs.1.80/- X 4 times (Quarterly)= Rs.7.20 /- • Media Meet, Social Media publicity, Publicity by MHUs at difficult villages etc. are also to be taken up, however budget for the same will not be factored here as budgeted under HSS
204.6.5.2	NP-NCD	Special IEC for improving NCD Screening & Services in convergence with Railway / Transport Deptt.	Lumpsum	62,95,000	0		The IEC displays in Govt. run buses is a targeted, cost-effective strategy to reach out to the masses both in rural and urban areas. Further, information dissemination through Public Address System in major Railway Stations and Branding has lasting impact for development of awareness. This medium has been proposed due to the following reasons: • Captive audience: Such announcements are listened very keenly by passengers and visitors present at the station premises. • Brand Recall: High frequency communication throughout the day results in a high level of brand recall. The proposed communication mediums shall be used to create awareness among general population on screening & Service facilities available for 5 common NCDs in Public Health Sectors & promote use of the same . Activities Planned: 1) Railway Deptt.: a. Audio Jingle add air before & after announcements in 7 Major Railway Stations (Balasore, Bhubaneswar, Berhampur, Cuttack, Puri, Sambalpur & Rourkela): @Rs. 30/- for 30s (Indian Railways approved rate) x 18 Hrs (64800secs) per month x 1 month = Rs. 64800/- (Say 0.65 Lakhs) b. Branding in 7 Major Railway Stations (Balasore, Bhubaneswar, Berhampur, Cuttack, Puri, Sambalpur & Rourkela): @Rs.500000/- (Indian Railways approved rate) x 7 Railway Stations for 30 days display = Rs. 3500000/- (say 35 Lakhs). 2) Transport Deptt.: a. Branding in Govt. Buses: Back Panel of OSRTC buses (development, mounting & display) - @Rs. 13000/- per bus x 70 buses x 3 months = Rs.27.30 Lakhs During NPCC meeting, programme wise IEC/ BCC budget sealing has been withdrawn. Hence the proposal may please be approved

Annexure - IEC & Printing (Details of proposal under Sl. No. 204)

Amount in Rs. (Lakhs)

S. No	Programme/ Theme	Activity Proposed	Unit of Measure	Unit Cost (Rs)	Quantity/ Target	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
204.6.5.3	NP-NCD	Day Celebrations					Days proposed to be observed • World Cancer day (4th Feb) • World Hypertension Day (17th May) • World Heart Day (29th Sept) • Stroke Day (29th Oct) • World Diabetics day (14th Nov) • COPD Day
204.6.5.3.1	NP-NCD	State Level Launching shall be organised at community level Institutions	Per Meeting	30,000	0		Activities : • As part of day observation, State Level Launching shall be organised at community level Institutions where Meeting will be organised by People's representative Followed by Media Briefing @ Rs.30000/- per such meeting X 6 Meetings = Rs.1.80 Lakhs
204.6.5.3.2	NP-NCD	Change of Flex at Hoarding	Per Flex	2,000	72	1.44	• Social Media Advocacy: Fund under HSS • Flex at Hoarding (based on proposed Day): @ Rs.2000/- X 448 Hoardings X 6 times
Sub Total (NCD-5)						1.44	
204.6.6	NCD-6						
204.6.6.1	PMNDP	Branding of Dialysis Units	Per Centre	30,000	1	0.30	There are 66 Dialysis Units established & functional in the State. These units are to be branded uniformly across the State. The proposed branding shall bring visibility of treatment sites, provides sinages for reaching out easily and also promote awareness on the Programme & Scope of Treatment Centres. Budget: Rs.30, 000/- (IEC Material, sinages & provision protocols etc.) per Centres
Sub Total (NCD-6)						0.30	
204.6.7	NCD-7						
204.6.7.1	NPCCHH	IEC/ BCC on NPCCHH	Lumpsum	6,50,000	0		Mass Media Interventions • Day observation – Int. Day of Climate Action (24th Oct) - State Level launching Rs. 30,000/- • Advertisement in News Daily (2 leading odia paper colour): Rs. 2.00 Lakhs, • Broadcast in FM (9FMCs) & Community Radio Stations (24CRS) : @ Rs.35000/- per minute X 5 minutes = Rs.1.75 Lakhs • AIR 1 time @ Rs.65,000/- • TV Spots (21 Channels):@ Rs.1.80/- Lakhs • Media meet, social media publicity, publicity by MHUs at difficult villages etc. shall be taken up and the Budget for the same has been factored in HSS. Hence no additional Budget proposed.
Sub Total (NCD-7)						-	
204.6.8	NCD-8						

Annexure - IEC & Printing (Details of proposal under Sl. No. 204)

Amount in Rs. (Lakhs)

S. No	Programme/ Theme	Activity Proposed	Unit of Measure	Unit Cost (Rs)	Quantity/ Target	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
204.6.8.1	NOHP	IEC/ BCC on Oral Health	Lumpsum	6,50,000	0		Mass Media Interventions • Day observation – Oral Health (20th March) - State Level launching Rs. 30,000/- • Advertisement in News Daily (2 leading odia paper colour): Rs. 2.00 Lakhs, • Broadcast in FM (9FMCs) & Community Radio Stations (24CRS) : @ Rs.35000/- per minute X 5 minutes = Rs.1.75 Lakhs • AIR 1 time @ Rs.65,000/- • TV Spots (21 Channels):@ Rs.1.80/- Lakhs • Media meet, social media publicity, publicity by MHUs at difficult villages etc. shall be taken up and the Budget for the same has been factored in HSS. Hence no additional Budget proposed.
Sub Total (NCD-8)						-	
204.6.9	NCD-9						
204.6.9.1	NPPC						
204.6.10	NCD-10						
204.6.10.1	NPPCF						
204.6.11	NCD-11						
204.6.11.1	NPPCD	Celebration of World Hearing Day (3rd March)	Lumpsum	6,50,000	0		The celebration of world Hearing Day will help to create awareness about deafness and recognise the achievements of deaf people. Mass media campaign is planned to be organised on the occasion. • Day observation - world Hearing Day (3rd March) - State Level launching Rs. 30,000/- • Advertisement in News Daily (2 leading odia paper colour) : Rs.2,00,000/- • Broadcast in FM (9FMCs) & Community Radio Stations (24CRS) : @ Rs.35000/- per minute X 5 minutes = Rs.1.75 Lakhs • AIR 1 time @ Rs.65000/- • TV Spots (21 Channels):@ Rs.1.80/- • Media Meet, Social Media publicity, Publicity by MHUs at difficult villages etc. are also to be taken up, however budget for the same will not be factored here as budgeted under HSS
Sub Total (NCD-11)						-	
Grand Total IEC (NCD)						2.74	
204.7	HSS-Urban						Total Urban population in the State is 67 Lakhs. So the budget. As per the discussion in NPCC, there is no ceiling of cost norm for individual programmes. However a cost norm shall be fixed by ministry for total IEC/BCC outlay to total budget
204.7.1	NUHM	Digital IEC Corner at OPDs	Per Unit	50,000	0		Digital Standees are proposed for UPHCs & UCHCs generally to address the untidiness at OPDs , happened due to placement of various old standees, posters etc. Proposal: In the year 2026-27, the plan is to provide digital Standees for all 7 UCHCs & 14 UPHC Polyclinics. The provision for rest UPHCs will be made in subsequent years. • For UCHC Digital Kiosk/Standee @2 / UCHC for 7 UCHCs =14 • For Polyclinics @ 1 per Poly clinic for 14 • Total Digital Kiosk/Standee & Budget : 28 nos @ Rs. 50000/- = Rs.14.00 Lakhs • Digital Standees will be procured following due financial procedures through GEM. • Draft Specifications – 6 ft height X 2.5 ft width

Annexure - IEC & Printing (Details of proposal under Sl. No. 204)

Amount in Rs. (Lakhs)

S. No	Programme/ Theme	Activity Proposed	Unit of Measure	Unit Cost (Rs)	Quantity/ Target	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
204.7.2	NUHM	Dynamic Hoardings at Public Health Facilities	Per Unit	2,000	15	1.20	The large iron hoardings are there at all UPHCs & U CHCs. The total nos. of such hoardings present in UPHC/UCHCs are 470 in nos. The plan is to change the content in hoardings through change of flex on quarterly basis as per theme of the drive / Campaign, organised time to time as part of programme guidelines. Budget : Change of Flex in the Hoarding @ Rs.2,000/- per flex X 469 Hoardings X 4 times in a year
204.7.3	NUHM	Displays at Bus Queue Shelters in Municipal Corporation Cities	Per Unit	70,000	0	-	The Urban Municipal Corporation Cities have Display boards at Bus Queue Shelters (BQS) for general advertisement. These places can be potentially used for creation of awareness among general population. The plan is to target 70 such BQS in Municipal Corporation Cities in the FY 2026-27. Budget : Display Board (6 Mtr X 3 Mtr) @ Rs.70000/- PM X 1 month X 70 BSQs X 2 themes (twice)
204.7.4	NUHM	Equipping MHUs for Campaigns	Per MHU	50,000	0	-	There are 9 Mobile Health Units (MHUs) operational in 8 cities of the State. These MHUs are attending predefined treatment sites mainly vulnerable areas like construction sites , Slums , Shelter homes etc. These MHUs are also engaged in epidemic preparedness & management whenever required. Thus, the plan to equip MHUs with given tools / instruments. • Audio System @ Rs30,000/- per Unit • PICO Projector @ Rs20,000/- per Unit The details of IEC/BCC activities proposed with the involvement of MHUs are given below: • Milking • Conducting video show • Focused Group Discussions Budget : @ Rs 50,000/- per MHU
204.7.5	NUHM	Slum Specific IEC /BCC Interventions					There are 2584 slums across 50 cities in the State. However, 137 are large slums (population > = 1500 Population). The issues with different slums may vary from each other. So after due need assessment, content for thematic IEC/BCC activities shall be planned.
204.7.5.1		Street Theatre	Per Street Theatre	5,000	28	1.40	Following activities shall be organised in these identified slums : • Street Theatre: @Rs.5000/- per Street Theatre X 137 Slums X 4 times in a year
204.7.5.2		Patient Support Groups meetings	Per Meeting	1,000	42	0.42	• Patient Support Groups meetings (This activity will help in improve compliances on treatment / management of chronic diseases (TB, NCD etc.)) : @ Rs.1000/- per meeting X 6 meetings in such slums X 137 Slums

Annexure - IEC & Printing (Details of proposal under Sl. No. 204)

Amount in Rs. (Lakhs)

S. No	Programme/ Theme	Activity Proposed	Unit of Measure	Unit Cost (Rs)	Quantity/ Target	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
204.7.6	NUHM	Branding of UHSND & FID Sites	Lumpsum	-	1	-	Periodic outreach sessions i.e. UHSND are being planned & organised in urban locations as part of RMNCAH+N Package. In order to ensure visibility of the UHSND sites and create environment for general awareness, promote interactive learning sessions , branding of sessions sites are proposed. In PIP 2026-27, focus shall be on branding UHSND session sites at 5 Municipal Corporation Cities in 1st phase. As part of this initiative , a set of following tools & IEC displays will be provided to USHCs in 5 MCs in PIP 2026-27 ; • Standee (Foldable & light weight) : @ Rs 5000/- X 4 = Rs.20,000/- • Interactive Learning Materials (C-3 designed): Rs.20,000/- • Display boards (Name plate session site & session details)- Rs. Rs.5000/- • Flip Book for Educational Sessions (a set for different programmes) : Rs.5000/- Total : Rs.50,000/- per USHCs X 60 USHCs in 5 MCs = Rs.30.00 Lakhs + Prototype & print ready version development @ Rs.1.00 Lakhs = Rs.31.00 Lakhs It will be developed in such a way that the entire set shall be kept in a tool bag & carry to each sites
204.7.7	NUHM	Day Observations at City Level	Per day	1,00,000	0	-	Important days are being observed at UPHCs & its feeding areas following Health Calendar, out of fund allotted under head wellness sessions / activities (CPHC). However, in order to involve a large population at city level & organise the same in a broad perspective 6 major days shall be observed at city level like World Health Day , World Environment Day, World Blood Donor Day , World Mental Health day, Yoga Day , Ayushman Bharat Health & Wellness Day . On these days, selected activities out of the basket of IEC/BCC interventions like Mini Marathon/ Cyclothon/ Street Theatres/ Publicity Vans shall be taken up. Budget : Rs.1.00 Lakhs per day X 6 days X 5 MCs
204.7.8	NUHM	Sensitisation Programmes with citizen groups during major campaigns	Per MC	1,00,000	0	-	There is an urgent need for sensitisation of citizen groups (i.e. Loin club, Rotary Clubs etc) during the major campaigns like Pulse Polio, MDA Campaign, Dengue Month, TB elimination campaign for ensuring their participation in the campaign and facilitate mobilisation of eligible beneficiaries for services. In order to organise such sensitisation programme, a lumpsum fund has been kept which shall be utilised observing OSHFWS financial Norms with due approval from appropriate authority. Budget : @ Rs.1.00 Lakhs per MCs X 5 MCs

Annexure - IEC & Printing (Details of proposal under Sl. No. 204)

Amount in Rs. (Lakhs)

S. No	Programme/ Theme	Activity Proposed	Unit of Measure	Unit Cost (Rs)	Quantity/ Target	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
204.7.9	NUHM	Mass Media Interventions	Lumpsum	36,40,000	0		This intervention will specifically meant to publicise Urban Health Interventions (Services at USHCs, Polyclinic, Evening OPD, Afternoon Immunisation Sessions etc.) for improving foot fall in the Urban health centres • Advertisement in News Daily (2 leading odia paper colour) : Rs.2,00,000/- (I&PR Rate) X 4 times in a year = Rs.8.00 Lakhs - o Broadcast in FM (9FMCs) & Community Radio Stations (24CRS) : @ Rs.35000/- per minute X 28 minutes/annum = Rs.9.80 Lakhs - o AIR 1 time @ Rs65000/- X 12 times/Annum = Rs.7.80 Lakhs - o TV Spots (21 Channels):@ Rs.1.80/- 1 time in a day X 6 times = Rs.10.80 Lakhs Total :Rs. 36.4 Lakhs
204.7.10	NUHM	Wellness Sessions at AAM	Per UPHC AAM	50,000	2	1.00	Ayushman Arogya Mandirs (AAMs) are mandated to conduct at least 10 wellness sessions per month as part of preventive and promotive healthcare initiatives. These include observing 2 Programme specific health-related wellness days to promote community participation. The wellness activities shall be chosen from the list of Annual Health Calendar, based on area specific need. Under NHM PIP 2026-27, Budget has been proposed as per Gol norms : • UPHC AAM : Rs.50000/- per UPHC AAM per Annum X 116 = Rs.58.00 Lakhs Budget Revised as per discussion in the NPCC meeting
Grand Total (HSS-U)						4.02	
204.8	HSS-Rural						
204.8.1	HSS-1						
204.8.1.1	Comprehensive Primary Health Care Services	Observation of HWC day					It is proposed to be organise across the State on 14th April to mark the establishment of AB-HWC and to promote comprehensive Primary Health Care Services through various community Health Initiatives. To mark the occasion and popularise the services at HWCs following IEC/BCC activities planned. • State level launch (Meeting Followed by Media Bites including display of Banner & Standee at site)@ Rs.30,000/-
204.8.1.1.1	Comprehensive Primary Health Care Services	State Level Activities	Lumpsum	5,85,000	0		• Advertisement in News Daily (2 leading odia paper colour) : Rs.2,00,000/- (I&PR Rate) - o Broadcast in FM (9FMCs) & Community Radio Stations (24CRS) : @ Rs.35000/- per minute X 5 minutes in the week= Rs.1.75 Lakhs /- - o TV Spots (21 Channels): @ Rs.1.80/- X 1 day = Rs.1.80 Lakhs • Cyclothon / Mini Marathon at District level for advocating CPHC Services. @ Rs.10000/- X 30 = Rs.3.00 Lakhs
204.8.1.1.2	Comprehensive Primary Health Care Services	District Level Activities	Per District	10,000	1	0.10	- o Rally at selected feeding villages (1 each)falls under SC AAM & PHC AAM shall be planned & budget for the same shall be met out of wellness sessions budget head under CPHC program. - o Media Meet, Social Media publicity , Publicity by MHUs at difficult villages etc. are also to be taken up, however budget for the same will not be factored here as budgeted under HSS

Annexure - IEC & Printing (Details of proposal under Sl. No. 204)

Amount in Rs. (Lakhs)

S. No	Programme/ Theme	Activity Proposed	Unit of Measure	Unit Cost (Rs)	Quantity/ Target	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
204.8.1.2	Comprehensive Primary Health Care Services	Observation of Universal Health Coverage Day	Lumpsum	5,55,000	0		Universal Health Coverage day is planned on 12th Dec to retreat resolutions to provide citizens affordable & quality health care Services. On the occasion, mass media interventions are planned to advocate Schemes of Govt of Odisha for ensuring Universal Health Coverage. Mass Media & Mid Media Interventions are planned are • Advertisement in News Daily (2 leading odia paper colour) : Rs.2,00,000/- (I&PR Rate) • Broadcast in FM (9FMCs) & Community Radio Stations (24CRS) : @ Rs.35000/- per minute X 5 minutes in the week= Rs.1.75 Lakhs /- • TV Spots (21 Channels):@ Rs.1.80/- X 1 day = Rs.1.80 Lakhs • Rally at selected feeding villages (1 each) falls under SC AAM & PHC AAM shall be planned & budget for the same shall be met out of wellness sessions budget head under CPHC program. • Media Meet, Social Media publicity, Publicity by MHUs at difficult villages etc. are also to be taken up, however budget for the same will not be factored here as budgeted under HSS
204.8.1.3	Comprehensive Primary Health Care Services	Observation Wellness Sessions at AAMs					Ayushman Arogya Mandirs (AAMs) are mandated to conduct at least 10 wellness sessions per month as part of preventive and promotive healthcare initiatives. These include observing 2 Programme specific health-related wellness days to promote community participation. The wellness activities shall be chosen from the list of Annual Health Calendar, based on area specific need. Under NHM PIP 2026-27, Budget has been proposed as per Gol norms : • SC AAM : Rs.25,000/- per SC AAM per annum • PHC AAM : Rs.50000/- per PHC AAM per Annum Budgeted: 70% of the total estimated budget depending on the expenditure trend
204.8.1.3.1	Comprehensive Primary Health Care Services	At SC AAM	Per SC AAM	25,000	189	33.08	
204.8.1.3.2	Comprehensive Primary Health Care Services	At PHC AAM	Per PHC AAM	50,000	35	12.25	
204.8.1.4	Comprehensive Primary Health Care Services	Popularizing e-Sanjeevani programme					e-Sanjeevani is a telemedicine service for strengthening Primary Health Care services. The platform focused on doctor-to-doctor consultations in a hub-and-spoke model to support remote healthcare delivery system on specific needs. Objective: • Popularizing the services among beneficiaries for remote consultation especially among discharge cases, chronic cases etc. Mediums to be used: • Publicity through use of 709 Common Service Centers (CSCs) in the State. In this regard Ministry of Information & Broadcasting has taken admirable steps for displaying messages through the same medium with DAVP approved rates. Message will be displayed through 43" digital screens installed in selected 709 Common Service Centers (CSCs) in the State to aware and mobilize urban and rural people.

Annexure - IEC & Printing (Details of proposal under Sl. No. 204)

Amount in Rs. (Lakhs)

S. No	Programme/ Theme	Activity Proposed	Unit of Measure	Unit Cost (Rs)	Quantity/ Target	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
204.8.1.4.1	Comprehensive Primary Health Care Services	State Level Activities	Lumpsum	18,00,000	0	-	• Use of Print & Electronic media • Use of Radio Jingles Justification: • This platform needs to be popularized for mobilization of more number of beneficiaries. • This will also boost visibility & uniform message dissemination. Topics to be covered: • On e-Sanjeevani Benefits • On Specialist/ Super specialist Consultation • On User Satisfaction • On Patient/ Client Satisfaction Budget: 1. State Level Activities: • Advertisement in News Daily (2 leading Odia paper colour) : Rs.2,00,000/- X 4 =Rs. 8.00 Lakhs • Broadcast in FM (9FMCs) & Community Radio Stations (24CRS) : @ Rs.35000/- per minute X 2 minutes in the week= Rs.70 Lakhs /- X 4 = Rs.2.80 Lakhs • TV Spots (21 Channels):@ Rs.1.80/- X 4 day = Rs.7.2 Lakhs 2. District Level Activities: • Publicity campaign using digital screens to highlight program: Use of 43" digital screens in selected 709 CSCs across State with 30 sec AV / banner/ static Ad (as per DAVP approved rates) – @ Rs. 42.54 Lakhs (Proposed Slot size of 30 seconds, Exposures – 200 x 30 days X 1 slot/s = 6000 slots per screen per month x Total exposures on 709 LED Screens).
Sub Total (HSS-1)						47.41	
204.8.2	HSS-2						
204.8.2.1	Blood Safety	Observation of National Voluntary Blood Donation Day on 1st Oct					Budget Not Approved
204.8.2.1.1	Blood Safety	State Level Activities	Lumpsum	5,95,000	0	-	
204.8.2.1.2	Blood Safety	District/ Sub District Level Activities					
204.8.2.1.2.1	Blood Safety	District Level Launch at selected Blood Centre	Per District	15,000	0	-	
204.8.2.1.2.2	Blood Safety	Cyclothon / Mini Marathon at District level	Per District	5,000	0	-	
204.8.2.2	National Sickle Cell Anemia Elimination Mission	Observation of World Sickle Cell Day					The World Sickle Cell Day observed annually on 19th June, is a Global initiative dedicated for awareness generation on Sickle Cell Disease (SCD) and its impact on individuals, families, and communities Worldwide. IEC/BCC Activities planned under this initiatives are as follows: • State level launch (Meeting Followed by Media Bites including display of Banner & Standee at site)@ Rs.30,000/- • Cyclothon / Mini Marathon at State level for advocating on Voluntary Blood Donations. @ Rs.10000/- X 1 = Rs.10,000/- • District Level Launching @ Rs.15000/- X 21 Districts = Rs.3.15 Lakhs • Advertisement in News Daily (2 leading odia paper colour) : Rs.2.00.000/- (I&PR Rate)
204.8.2.2.1	National Sickle Cell Anemia Elimination Mission	State Level Activities	Lumpsum	5,95,000	0	-	
204.8.2.2.2	National Sickle Cell Anemia Elimination Mission	District/ Sub District Level Activities					

Annexure - IEC & Printing (Details of proposal under Sl. No. 204)

Amount in Rs. (Lakhs)

S. No	Programme/ Theme	Activity Proposed	Unit of Measure	Unit Cost (Rs)	Quantity/ Target	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
204.8.2.2.2.1	National Sickle Cell Anemia Elimination Mission	District Level Launching	Per District	15,000	0		o Broadcast in FM (9FMCs) & Community Radio Stations (24CRS) : @ Rs.35000/- per minute X 5 minutes in the week= Rs.1.75 Lakhs /- o TV Spots (21 Channels):@ Rs.1.80/- X 1 day = Rs.1.80 Lakhs.
204.8.2.2.2.2	National Sickle Cell Anemia Elimination Mission	Change of Flex in Hoarding	Per Flex	2,000	12	0.24	o Change of Flex in Hoarding at District & Block Level @ Rs. 2000/- per flex (for CHC/UHC, DHHS, SDHS)
204.8.2.3	National Sickle Cell Anemia Elimination Mission	Formation of a Network for Sickle Cell Disease & Trait cases- Sickle Cell Mitra					Sickle Cell Mitra - Network for Sickle Cell Disease & Trait cases- As per the National Sickle Cell Anaemia Elimination Mission (NASCEM) Portal, there are about 1,04,00 SCD cases & 4,50,000 Trait cases in the State. Prerequisite for Network Members: The association in the network will be voluntary in nature. However, the only pre requisite is s/he shall be a SCD / Trait case. In order to join/ register in the network, an online module will be developed. Registration for membership: This application would have two Modules; i.B. Registration Module & Awareness Module. All registered beneficiaries will have access to the Awareness Module, which will be a self learning tool. After completion of the Module, the beneficiaries shall appear for a small assessment online in the same platform. Once s/he qualifies and obtain the minimum performance benchmark, s/he would be awarded a certificate& recognized as Sickle Cell Mitra. Task : The Sickle Cell Mitra shall conduct network meetings at SC-AAM Level and awareness programmes for general population. These events will be organized and funded as part of wellness activities at SC-AAM level.
204.8.2.3.1	National Sickle Cell Anemia Elimination Mission	Sensitisation of SCD Mitra	Per District	20,000	0		
204.8.2.3.2	National Sickle Cell Anemia Elimination Mission	Coloured Handouts to SCD Mitras	Per Handout	20	0		
204.8.2.3.3	National Sickle Cell Anemia Elimination Mission	Net work Meeting / Patient Support Group Meeting at District level	Per District	20,000	0		Support from NHM & Partners : • Development of Portal for registration – UNICEF • Chat bot platform for interaction & providing quick and efficient responses to common questions- UNICEF • Sensitisation of SCD Mitra (1/2 day)- @ 1 meeting per district with min 40 Participants @ Rs. 20000/- X 21 Targeted District (NHM Fund) • Coloured Handouts to SCD Mitras (1000 in 2026-27) : Rs.20/- per Hand out • Net work Meeting / Patient Support Group Meeting at District level (Half yearly once) @ Rs.20000/ 21 districts
204.8.2.4	National Sickle Cell Anemia Elimination Mission	Other Special Programmes					
204.8.2.4.1	National Sickle Cell Anemia Elimination Mission	Folk Shows in PMJANMAN Villages	Per Show	3,000	0		- Budget Not Approved

Annexure - IEC & Printing (Details of proposal under Sl. No. 204)

Amount in Rs. (Lakhs)

S. No	Programme/ Theme	Activity Proposed	Unit of Measure	Unit Cost (Rs)	Quantity/ Target	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
204.8.2.4.2	National Sickle Cell Anemia Elimination Mission	Tribal Healers meet	Per District	20,000	0	-	
Sub Total (HSS-2)						0.24	
204.8.3	HSS-3						
204.8.4	HSS-4						
204.8.5	HSS-5						
204.8.5.1	Emergency Patient Transport Services & Health Help Line	Publicity of EMAS & 104 Services	Lumpsum	3370000	0		Patient Transport Services : In order to publicise the Patient Transport Services & Use of Call centre, Mass media Interventions are proposed periodically (Quarterly) to reinforce its use. Mass Media • Advertisement in News Daily (2 leading odia paper colour) : Rs.2,00,000/- X 4 times (Quarterly)= Rs.8.00 Lakhs • Broadcast in FM (9FMCs) & Community Radio Stations (24CRS) : @ Rs.35000/- per minute X 5 minutes in the week X 4 times (Quarterly)= Rs.3.50 Lakhs • AIR 1 time @ Rs65000/- X 4 times (Quarterly)= Rs.2.60 Lakhs • TV Spots (21 Channels):@ Rs.1.80/- X 4 times (Quarterly)= Rs.7.20 /- Total Budget (Patient Transport): Rs. 21.30Lakhs 104 Health Help Line : 104 Health Line has been functioning in the State for making out bound call to follow up of sample RCH Beneficiaries, make calls for early child hood education etc & inbound calls for health advice & registered complaints illegal USG etc. Both Mass & Mid media interventions are planned for publicise the same. • Advertisement in News Daily (2 leading odia paper colour) : Rs.2,00,000/- X 2 times (Quarterly)= Rs.4.00 Lakhs - o Broadcast in FM (9FMCs) & Community Radio Stations (24CRS) : @ Rs.35000/- per minute X 5 minutes in the week X 2 times (Quarterly)= Rs.3.50 Lakhs - o AIR 1 time @ Rs65000/- X 2 times (Quarterly)= Rs.1.30 Lakhs - o TV Spots (21 Channels):@ Rs.1.80/- X 2 times (Quarterly)= Rs.3.60 /- - o Printing of 104 Health Line No in ASHA Dairy (No additional Budget proposed here in the section, budget at ASHA Programme) - o Wall Writing at villages utilising GKS/ VHSNC Fund at strategic locations. Total Budget (Health Help Line) :Rs. 12.40 Lakhs
Sub Total (HSS-5)						-	
204.8.6	HSS-6						

Annexure - IEC & Printing (Details of proposal under Sl. No. 204)

Amount in Rs. (Lakhs)

S. No	Programme/ Theme	Activity Proposed	Unit of Measure	Unit Cost (Rs)	Quantity/ Target	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
204.8.6.1	Quality Assurance	IEC/BCC Budget , Quality Assurance Initiatives	Lumpsum	300000	1	3.00	The QA framework for National Quality Assurance Standards (NQAS), LaQshya, MusQan & Kayakalp envisages for patient rights & Patient's satisfaction. In addition, there is an urgent requirement of service delivery as per treatment/management protocols & thus display of protocols at appropriate places in a hospital as per the quality Assurance mandate is an essential requirements. The effective SBC can increase both demand for quality services and accountability of health facilities/Service Providers. In order to ensure proper branding & conduct PSS, a lump sum budget has been earmarked for taking up of SBC initiatives in the targeted Public health facilities as per need following guidelines. • Display of sinages • Display of treatment/Management protocols • Awareness Posters • Information e-Kiosks • PSS • Any other Even though, 3209 facilities (10 DHH, 10 SDHs, 15 CHCs, 145 PHCs, 39 UPHCs, 2990 AAM SC) have been targeted for NQAS, 12 Facilities (3 MCH, 5 DHH, 2 SDH & 2 CHCs) targeted for LaQshya & 38 Facilities targeted for MusQan, a lumpsum budget has been earmarked per district, as all facilities may not required to be completely branded afresh /again. Estimated budget: Rs. 96.00 Lakhs (Rs.3.00 Lakhs per district X 27 districts) + (Rs. 5.00 Per District for 3 Large Districts) The activities following Gol guidelines shall be taken up as per need from the pool of budget earmarked under this head.
Sub Total (HSS-6)						3.00	
204.8.7	HSS-7						
204.8.8	HSS-8						
204.8.8.1	BMW	Improving IMEP Practices					IEC/BCC activities proposed to be taken with the funding from State Budget. Hence not proposed under NHM PIP.
Sub Total (HSS-8)						-	
204.8.9	HSS-9						
204.8.10	HSS-10						
204.8.11	HSS-11						
204.8.12	HSS-12						
204.8.13	HSS-13						
204.8.14	HSS-14						
204.8.15	HSS-15						

Annexure - IEC & Printing (Details of proposal under Sl. No. 204)

Amount in Rs. (Lakhs)

S. No	Programme/ Theme	Activity Proposed	Unit of Measure	Unit Cost (Rs)	Quantity/ Target	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
204.8.15.1	Prevention, Control & Management of Snake bite	IEC on Prevention and Control of Snake Bite	Per Brochure	10	0		The PIP 2026-27 has proposed for creating awareness in flood prone areas, where reported Snake bite cases are high. 11 districts (116 Blocks) of the State are having flood prone areas. The ASHAs will be sensitized in the existing sector meeting platform & shared with a brochure for IPC activities. • Brochure for ASHAs on Snake Bite (coloured): @Rs.10/- x20000 (ASHAs in 11 districts- 19220, Say 20,000) = 2.00 Lakhs Total Budget: Rs. 2.00 Lakhs
Sub Total (HSS-15)						-	
204.8.16	HSS-16						
204.8.17	HSS-17						
204.8.18	HSS-18						
204.8.18.1	IT Interventions and Systems	Health Management Information System	Per unit	70	0		Background: GOI has issued a D. O No. Z-130151 / 11/2020 – Stats (HMIS) Dated 31st December, 2024 to issue necessary directions for dissemination and utilization of IEC materials by the health facilities to reach target audience for generating an impact. The sample copy of the IEC materials (Types – 3 for Data Manager, LTs & ANMS)on English/ Hindi language has provided by GOI. Budget Not Approved
Sub Total (HSS-18)						-	
Grand Total IEC (HSS)						50.65	
Total Budget Proposed (IEC/BCC)						86.87	
Printing Activities							
204.9.1	RCH-1						
204.9.1.1	Maternal Health	Printing of reporting forms & formats	Lumpsum	664600	0		Proposal-1: Sub centre level monthly reporting format of SC AAM (1 Booklet containing 100 pages with self-carbonated duplicate pages) for all 6688 existing + 1338 newly sanctioned + 580 (Urban virtual SC) = 8606 SC AAM (@ Rs. 75/- per booklet X 8606 units) = Rs. 6.46 lakhs Proposal-2: VHSND/UHSND monitoring format for BPMU/UPHC and DPMU /CPMU (1 Booklet containing 100 pages for 314 blocks, 30 DPMUs, 5 CPMUs & 116 UPHC)= 465 units (@ Rs. 40 per booklet X 465 = Rs.18,600/-) Total Budget Requirement: Rs. 6.65 Lakhs (Source of funding: To be met from state specific SAMMPUrNA budget)
204.9.1.2	Maternal Health	Printing					
204.9.1.2.1	Maternal Health	Mother & Child Protection Card (MCP Card)	Per Card	17	0		Background: Every registered pregnant woman is provided with MCP card which provides her information regarding the services she has received for her and her child including immunization. This card is also used as IEC tool having information for both mother and baby. Current status: MCP card is printed every year as per the reported number of Pregnant Women. Proposal: Mother & Child Protection Card (MCP Card- Revised) : MCP Card for 686704 Pregnant Women (624277 Pregnant Women reported in 2024-25 X 1 MCP Card per case + 10% buffer stock (62427) = 686704 Units x Rs. 17/- per unit (as per recent tender rate)= Rs. 116.74 Lakhs

Annexure - IEC & Printing (Details of proposal under Sl. No. 204)

Amount in Rs. (Lakhs)

S. No	Programme/ Theme	Activity Proposed	Unit of Measure	Unit Cost (Rs)	Quantity/ Target	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
204.9.1.2.2	Maternal Health	Family & Couple Counseling Booklet (Nirapada Matrutwa)	Per Case	10			Background: Every registered pregnant woman is provided with Family & Couple Counseling Booklet (Nirapada Matrutwa) which used as IEC tool having information for both mother and baby, family planning methods, nutrition and various schemes for mother and child. Current status: Family & Couple Counseling Booklet (Nirapada Matrutwa) will be printed year as per the reported number of Pregnant Women. Proposal:Nirapada Matrutva , Safe Motherhood Booklet: Nirapada Matrutva Booklet for 686704 Pregnant Women (624277 Pregnant Women reported in 2024-25 X 1 Booklet per case + 10% buffer stock (62427) = 686704 Units x Rs. 10/- per unit (as per recent tender rate)= Rs. 68.67 Lakhs Proposed under State Budget
204.9.1.3	Maternal Health	Printing of MDR formats					Printing of Maternal Death Surveillance & Response (MDSR) formats are required to ensure regular and timely reporting from various levels
204.9.1.3.1	Maternal Health	Annexure-4 for facility based investigation	Per Unit	4			Annexure-4 for facility based investigation (1 per facility maternal death) for 768 no. of deaths (70% of total expected death of 961 nos.) @ Rs. /- X 670 nos.=Rs.2680/- (Source of funding: To be met from state specific SAMMPUrNA budget)
204.9.1.3.2	Maternal Health	Annexure-5 for community level investigation	Per Unit	5			Annexure-5 for community level investigation for all maternal death for 768 no. of deaths (exp 80% of death) (@ Rs. 5/- X 989 = Rs.3840/- (Source of funding: To be met from state specific SAMMPUrNA budget)
204.9.1.3.3	Maternal Health	Annexure-6 for all maternal death	Per Unit	2			Annexure-6 for all maternal death for 768 no. of deaths (@ Rs.2/- X 989=Rs.1536/-) (Source of funding: To be met from state specific SAMMPUrNA budget)
204.9.1.3.4	Maternal Health	Annexure-1 for all near miss cases	Per Case	4			Maternal Near Miss Review format , Annexure-1 for all near miss cases for 5000 formats (@ Rs. 4/- X 5000=Rs. 20,000/-) (Source of funding: To be met from state specific SAMMPUrNA budget)
204.9.1.4	Maternal Health	Printing under Comprehensive Abortion Care Services					
204.9.1.4.1	Maternal Health	Consent Form –C	Per Boolket	20			Consent Form –C (1 booklet 104 pages)-2000 booklets (To be printed in Odia & English both side) Budget: @ 20/- X 2000 = Rs. 40000/- (Source of funding: To be met from state specific SAMMPUrNA budget)
204.9.1.4.2	Maternal Health	RMP Opinion Form	Per Boolket	50			RMP Opinion Form up to 20 weeks (1 booklet 104 pages)- 2000 booklets @Rs. 50/-X2000 unit (Source of funding: To be met from state specific SAMMPUrNA budget)
204.9.1.4.3	Maternal Health	Form-II	Per Boolket	50			1 booklet 100 pages, 1 original page, 1000 booklets (@Rs. 50/- X 1000= Rs. 50000/-) (Source of funding: To be met from state specific SAMMPUrNA budget)
204.9.1.4.4	Maternal Health	Admission register Form-III	Per Boolket	75			Admission register Form-III (1 booklet 150 pages, 1 original page)-1200 booklets (@ Rs. 75 X 1200) (Source of funding: To be met from state specific SAMMPUrNA budget)
204.9.1.4.5	Maternal Health	Evacuation Register	Per Boolket	75			Evacuation Register (1 booklet 210 pages, 1 original page)-1500 booklets (@ Rs. 75/- X 1500) (Source of funding: To be met from state specific SAMMPUrNA budget)
204.9.1.4.6	Maternal Health	MMA card (In Odia)	Per Card	1			MMA card (In Odia) - 12000 cards (@ Rs. 1/- X 12000=12000/-) (Source of funding: To be met from state specific SAMMPUrNA budget)

Annexure - IEC & Printing (Details of proposal under Sl. No. 204)

Amount in Rs. (Lakhs)

S. No	Programme/ Theme	Activity Proposed	Unit of Measure	Unit Cost (Rs)	Quantity/ Target	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
204.9.1.4.7	Maternal Health	Printing of MMA Provider manual	Per Unit	600			Ongoing Activity Background: Keeping in view amendment in MTP Act & MMA training, this provider manual is to be printed. This is to be used during trainings & for reference by Programme Officers / Managers & service providers. No of pages: 56 (including Cover Page) Printing: 4+4 colour digital printing Binding: Section sewing and Perfect binding Paper: 170 matt inside & 300 matt cover page Fabrication: Matt Lamination thermal Size: 8.5 X 11.5 Inches Total 200 units (Source of funding: To be met from state specific SAMMPUrNA budget)
204.9.1.4.8	Maternal Health	Printing of CAC Operational Guideline	Per Unit	150			Ongoing Activity Background: Keeping in view amendment in MTP Act, the modified CAC Guidelines is to be printed. This is to be used during trainings & for reference by Programme Officers / Managers & service providers. Pages: 16 nos. Size: 8.50 × 11.00 in (portrait) (inch) Paper: 170gsm Sinar Matte Printing: 4+4 (front & back) Lamination: All pages both side lamination and Centre stapled Total 1000 units (Source of funding: To be met from state specific SAMMPUrNA budget)
204.9.1.5	Maternal Health	Printing of Labour Room register	Per Unit	300			Ongoing Activity Labour Room register for delivery points as per MNH toolkit. Each register will cost @ Rs. 300 inclusive of binding. Each Register will have 500 pages. Printing proposal is given for 2052 Registers. (@ Rs. 300/-X 2052 = Rs. 615600/-) (Source of funding: To be met from state specific SAMMPUrNA budget)
204.9.1.6	Maternal Health	Printing of Delivery Case sheet	Per Unit	7			Delivery Case sheet : Delivery Case sheet with partograph overleaf for all institutional delivery cases in public health institutions (565975 expected deliveries + 10% (56597) buffer= 622572) – (@Rs. 7/-X 622572= Rs.43,58,004/-) (Source of funding: To be met from state specific SAMMPUrNA budget)
204.9.1.7	Maternal Health	Printing activities under MH					(Source of funding: To be met from state specific SAMMPUrNA budget)

Annexure - IEC & Printing (Details of proposal under Sl. No. 204)

Amount in Rs. (Lakhs)

S. No	Programme/ Theme	Activity Proposed	Unit of Measure	Unit Cost (Rs)	Quantity/ Target	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
204.9.1.7.1	Maternal Health	PNC ward register	Per Unit	90			PNC ward register will comprise of two parts, one Mother & one Newborn. The mother & newborn register will be taken as one unit. (One for each SC DP and other DP will have register as per delivery load with each register having 300 pages). (@ Rs.90/- X 1767 = Rs.159030/-) PNC ward Register: Booklet @ 6 per MCH – 5MCH X 6 = 30 Booklet @3 per DHH - 32 DHH X 3= 96 Booklet @ 2 per SDH - 32 SDH X 2=64 Booklet @ 2 per CHC - 374 CHC X 2 = 748 Booklet @ 2 per OH - 54 OH X 2 =108 Booklet @ 1 per PHC (Functional DP) - 102 PHC X 1=102 Booklet @1 per PHC (Promising DP) - 456 PHC X 1 = 456 Buffer (10%) -160 Total = 1604+ 160 = 1764 (Source of funding: To be met from state specific SAMMPUrNA budget)
204.9.1.7.2	Maternal Health	Referral Slip Sub Centre per Booklet	Per Booklet	30			Referral Slip Sub Centre per Booklet (100 pages) : Referral Booklet @ 1 per Sub Centre (rural+urban) - 6688 SC X 1 = 6688+548(urban sc)=7236 Buffer (10%) -723 Total = 7236+723=7959 (@ Rs. 30/- X 7959= Rs. 238770/-) (Source of funding: To be met from state specific SAMMPUrNA budget)
204.9.1.7.3	Maternal Health	Referral Slip Inter Facility per Booklet	Per Booklet	30			Referral Slip Inter Facility per Booklet (100 pages): Booklet @ 6 per MCH – 5 MCH X 6 = 30 Booklet @3 per DHH - 32 DHH X 3= 96 Booklet @ 2 per SDH - 32 SDH X 2=64 Booklet @ 2 per CHC - 374 CHC X 2 = 748 Booklet @ 2 per OH - 54 OH X 2 =108 Booklet @ 1 per PHC (Functional DP) - 102 PHC X 1=102 Booklet @1 per PHC (Promising DP) - 456 PHC X 1 = 456 Buffer (10%) -160 Total = 1604 + 160 = 1764 (@ Rs. 30/- X 1764 = Rs. 52,920/-) (Source of funding: To be met from state specific SAMMPUrNA budget)

Annexure - IEC & Printing (Details of proposal under Sl. No. 204)

Amount in Rs. (Lakhs)

S. No	Programme/ Theme	Activity Proposed	Unit of Measure	Unit Cost (Rs)	Quantity/ Target	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
204.9.1.7.4	Maternal Health	Referral out Register per Register (50 pages)	Per Booklet	50			Ongoing activity Background: This register is to be maintained for all cases those are referred to higher facility with intimation for case management Proposal: Referral out Register per Register (50 pages) : Register @ 2 per DHH/MCH - 37X2=74 Register @ 2 per SDH - 32X2=64 Register @1 per CHC (Functional DP) - 316X1 = 316 Register @1 per CHC (Promising DP) - 61X1 = 61 Register @ 1 per OH (Functional DP) - 24x1=24 Register @ 1 per OH (Promising DP) - 24X1=24 Register @1 per each Sub Centre (Functional DP) - 80X1=80 Register @1 per each Sub Centre (Promising DP) - 69X1 = 69 Register @ 1 per PHC(N) (functional DP) - 102X1 =102 Register @ 1 per PHC(N) (Promising DP) -456X1=456 Buffer (10%) - 126 TOTAL = 1270+126=1396 (@ Rs. 50/- X 1396 = Rs. 69,800/-) (Source of funding: To be met from state specific SAMMPUrNA budget)
204.9.1.7.5	Maternal Health	Referral In Register	Per Register	50			Ongoing activity: Background: Referral In Register is to keep record of all referred cases so that proper priority can be give during treatment Proposal: Register @2 per DHH/MCH - 37X2=74 Register @ 2 per SDH - 32X2=64 Register @ 1 per CHC - 374X1 = 374 Register @ 1 per OH -54X1 = 54 Buffer (10%) - 56 Total = 566+56=622 (@ Rs. 50/- X 622= Rs. 31,100/-) (Source of funding: To be met from state specific SAMMPUrNA budget)
204.9.1.7.6	Maternal Health	Red Card	Per Card	5			Ongoing activity Background: Red Card is provided to all identified high risk PW, PNC and children in the age of 0-5 years. This card is provided with mark of high risk for priority treatment Proposal: Total reported PW : 624227 Expected High Risk PW :1,24,845 (20% of total Expected PW) Red card for expected High Risk PW : 1,24,845 Reported U5 as per F.I. data 2024-25: 6,10,065 Expected Sick U5 = 10% of 6,10,065= 61,100 Grand Total: 1,24,845 +61,100=1,85,845 Buffer: 10% (18,585) Total= 2,04,430 Cards @ Rs. 5/- per card (Source of funding: To be met from state specific SAMMPUrNA budget)
Sub Total Printing (RCH-1)						-	

Annexure - IEC & Printing (Details of proposal under Sl. No. 204)

Amount in Rs. (Lakhs)

S. No	Programme/ Theme	Activity Proposed	Unit of Measure	Unit Cost (Rs)	Quantity/ Target	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
204.9.2	RCH-2						
204.9.2.1	PC & PNDDT Act	Printing	Lumpsum	50000	0		1. Form F Medical Audit Report @Rs.30/- X 1000 = Rs.0.30 lakh State will conduct the audit of the submitted Form F (Pregnancy Scans by 1800 USG Clinics to anylise anomaly in the report, suspicious referral cluster, cross district USG travel plan, Referral pattern, audit of referral team etc.) the said report shall be disseminated among DAA/ SDAA & key stake holders to strengthen enforcement, prosecution & legal processes. 2. MoHFW Standard Operating Guidelines for DAA-30/ SDAA-58 & key stake holders (i.e. SP, DSWO, JMFC, DLSA)-120: 200 nos X (@Rs.100/- per unit)= Rs.0.20 lakh
Sub Total Printing (RCH-2)						-	
204.9.3	RCH-3						
204.9.3.1	Child Health	Printing of RBSK Card and Registers					Ongoing Activity with revised unit cost Background & Justification: RBSK Screening Card:RBSK screening card is prescribed by Govt. of India which is followed by MHT while screening of each child. For issue of new cards to newly enrolled children at AWC & Schools in 2026-27, total 12 Lakhs 0-6 & 6-18 years screening card is proposed to be printed. RBSK Registers: As per RBSK guideline, MHT screening registers are prescribed for AWC & Schools. The Prescribed Screening registers are to be supplied to each MHT to record child wise screening information.
204.9.3.1.1	Child Health	Screening Registers per MHT	Per Register	325	96	0.31	Printing of screening registers (2 types) per MHT @ Rs. 325/ register per MHT x 6 register per MHT x 640 MHTS. Rs.325/- Per register x 6 register per MHT Calculation revised as per recommendation of NPCC
204.9.3.1.2	Child Health	Printing of Screening Card	Per Card	6	0	-	For the year 2026-27, 12 Lakhs RBSK 0-6 & 6-18 years Screening card (6 Lakhs each) is proposed. Budget Proposed: @RS. 6/ Per unit X 12 Lakh Cards
204.9.3.2	Child Health	Printing of Forms & Formats	Lumpsum	38400	1	0.38	Ongoing Activity: Background & Justification: For printing of different assessment forms and registers of DEIC, the annual printing cost is approved in the last year's PIP . Progress: During the year 2024-26, the required printing activity were carried out by DEICs. Proposal for 2026-27: 1. Printing of 8 type of registers for DEIC @ Rs 300/register x 8 register per DEIC x 32 DEIC 2. Case assessment formats @ Rs 18/ format x 2000 per DEIC x 32 DEIC Budget revised as per the discussion in the NPCC meeting

Annexure - IEC & Printing (Details of proposal under Sl. No. 204)

Amount in Rs. (Lakhs)

S. No	Programme/ Theme	Activity Proposed	Unit of Measure	Unit Cost (Rs)	Quantity/ Target	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
204.9.3.3	Child Health	HBNC format for ASHA	10 Formats/ Per ASHA	10	11330	1.13	Ongoing Activity: Background: ASHAs use a HBNC checklist for recording the assessment & observations during a HBNC visit. Progress: Each ASHA is to be provided with 10 formats each, assuming one ASHA would visit 8-10 newborns in a year. Proposal: No. of ASHAs x 10 formats = 50825 ASHA x 10 formats = 5,08,250 formats @Rs.10 per format
204.9.3.4	Child Health	HBYC format for ASHA	One Booklet/ Per ASHA	30	1133	0.34	Ongoing Activity Background: HBYC is provided to all young children between 3-15 months through 5 quarterly home visits by ASHAs for growth monitoring, early identification of danger signs and referral, early childhood development and provision of IFA, ORS & Zinc. ASHAs use a HBYC checklist for conducting the visits. These checklists are provided to ASHA in form of a booklet. Progress: During 2024-26, one booklet each was printed for 49990 ASHAs in position. Proposal: As no. of newborns per ASHA will vary from 18 to 25, it is proposed to print 30 checklists per booklet and one booklet per ASHA. Accordingly, budget is proposed for 50825 targeted ASHAs during 2026-27
204.9.3.5	Child Health	Printing of SNCU Case Sheets/ Registers	Per Case Sheet	50	1025	0.31	Ongoing Activity Background: Standardized SNCU case sheets are used for maintaining the data of each SNCU admission which are also entered in the SNCU online software. Progress: Each year based on the expected SNCU admissions, the SNCU case sheets are printed. However utilization during 2024-25 has been 58%. Proposal: Printing of SNCU Case Sheet based on Expected admission in existing SNCUs during 2024-25 + 10% buffer Other printing i.e. Discharge Note, Referral Note, Admission Register (for SNCU & NBSU), Follow up Register, Facility Follow up record book, CPAP register, met out of SNCU contingency fund at district level Budget proposed @ Rs. 50/- per sheet x 80300 sheets. Proposed at 60% based on utilization.
204.9.3.6	Child Health	Printing of NBSU Case Sheets/ Registers	Per Case Sheet	50	134	0.04	Ongoing Activity Background: Standardized NBSU case sheets are used for maintaining the data of each NBSU admission which are also entered in the NBSU online software. Progress: Each year based on the expected NBSU admissions, the NBSU case sheets are printed Proposal: Printing of NBSU Case sheets as per Gol guidelines. Proposal based on Expected admission in existing NBSUs during 2024-25 + 10% buffer Budget proposed @ Rs. 50/- per sheet x 14500 sheets Proposed at 60% based on utilization.

Annexure - IEC & Printing (Details of proposal under Sl. No. 204)

Amount in Rs. (Lakhs)

S. No	Programme/ Theme	Activity Proposed	Unit of Measure	Unit Cost (Rs)	Quantity/ Target	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
204.9.3.7	Child Health	Printing of Child Death Review formats					Ongoing Activity Background: As per Gol guidelines, a set of forms & formats are to be used for conducting CDR at community & facility levels. Progress: During 2024-26, all forms & formats were proposed as per guidelines, but expenditure was 56% in FMR 2024-26 Proposal: Therefore, budget proposed for 60% of all forms & formats as per Gol guidelines.
204.9.3.7.1	Child Health	Form-1	Per form	1	910	0.01	Form 1-ASHA notification @Re.1/- per form x 17582 x 2 + 10% buffer = 38680 (80% of expected under five deaths *2 + 10% buffer)
204.9.3.7.2	Child Health	Form-2	Per form	2	455	0.01	Form 2-ANM investigation form @Rs.2/- per form x 17582 (80% expected under five deaths + 10% buffer) = 19340
204.9.3.7.3	Child Health	Form-3a	Per form	3	844	0.03	2/3 (no. of blocks * 6 cases per block*12 months) * 2+ 10% buffer
204.9.3.7.4	Child Health	Form-3b	Per form	3	422	0.01	1/3 (no. of blocks * 6 cases per block*12 months) * 2+ 10% buffer
204.9.3.7.5	Child Health	Form-3c	Per form	2	1268	0.03	No. of blocks * 6 cases per block*12 months * 2 + 10% buffer
204.9.3.7.6	Child Health	Form-4a	Per form	3	190	0.01	60%*No. of expected under five facility deaths (70% of 17582) + 10% buffer
204.9.3.7.7	Child Health	Form-4b	Per form	3	128	0.00	40%*No. of expected under five facility deaths (70% of 17582) + 10% buffer
204.9.3.8	Child Health	Printing of Still Birth Formats	Per Form	2	120	0.00	Background: Stillbirth surveillance requires detailed history taking and analysis of causes by filling up a defined stillbirth review checklist. The ToT & trainings on the subject will be completed by March 2026 and in 2026-27 it is proposed to implement the program in all MCHs & DHHs with high load of stillbirth cases. Progress: In 2024-25, a total of 5394 stillbirth cases have been reported in all MCHs & DHHs in the State. In addition of a 10% buffer, an estimated 5933 cases may be reported. Proposal: Accordingly, form printing has been proposed for 6000 cases @Rs.2 per form = Rs.12000
204.9.3.9	Child Health	Printing for Gentamycin treatment cards	Per unit	5	824	0.04	Background: As per Gol guidelines, gentamycin treatment cards are to be used at SC, PHC & CHC level for recording the data on treatment of PSBI cases. Progress: Printing of gentamycin treatment card is proposed for printing at district level based on 60% estimated PSBI cases plus 10% buffer, who would come to facility for treatment (as per guidelines). Proposal: Therefore, printing of cards has been proposed for 60% estimated PSBI cases (estimated PSBI cases = 15% of reported live births derived from FI data) + 10% buffer = $0.6 \times 0.15 \times 627916 + 10\% \text{ buffer} = 56512 + 5651 = 62163$ units per year
Sub Total Printing (RCH-3)						2.65	
204.9.4	RCH-4						
204.9.4.1	Immunisation	Printing of Forms & Formats	Per beneficiary	20	11,689	2.34	Proposal : Printing proposed for Vaccine Registers, Temperature log book, Preventive Maintenance register, AVD Formats, Due cum Tally sheets , other monitoring forms and various training Handbooks etc. Total Expected infant in 2026-27: 6,11,249
Sub Total Printing (RCH-4)						2.34	
204.9.5	RCH-5						

Annexure - IEC & Printing (Details of proposal under Sl. No. 204)

Amount in Rs. (Lakhs)

S. No	Programme/ Theme	Activity Proposed	Unit of Measure	Unit Cost (Rs)	Quantity/ Target	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
204.9.5.1	Adolescent Health	Printing under WIFS -WIFS cards, WIFS registers, reporting format etc	Lumpsum	1,42,05,680	0		1. WIFS Card has been integrated with MCP Card. 2. Auto Carbon reporting format for school and AWCs Background: The autocarbon reporting format has been supplied in 2022-23 which was for 2 years. Currently formats are not available at School and AWC level. Proposal for 2026-27: Printing of auto carbon reporting format: 127224 nos (for 74224 AWCs + 53000 Schools) X @Rs.70/- per unit = Rs.89.06 Lakhs 3. Integrated School Health and Wellness Register which comprises of formats for recording of WIFS/ RBSK/ School Health/ Sanitary Napkin informations in Register (New Activity) Background: Proposal for a school level register which comprises of WIFS/ RBSK/ School Health/ Sanitary Napkin distribution in a single register. Which can be easy for school level record keeping of health and wellness activities at school level. Proposal for 2026-27: Printing of Integrated Register: @Rs.100/- per unit X 53000 Schools
204.9.5.2	Adolescent Health	Printing of Odia Training and Resource material on School Health and wellness	per book	200	0		New Activity For each school provision of Odia Training and Resource material on School Health and wellness need to be distributed for better understanding of HWAs. Proposal: One per each school 25518
Sub Total Printing (RCH-5)						-	
204.9.6	RCH-6						
204.9.6.1	Family Planning	Printing under Female Sterilization- Manuals & Guidelines/Register/ Documets	Per register	600	0		Ongoing Activity Proposal for 2026-27: Register for all operational fixed day facilities Total Requirements : 200 registers @ Rs.600/- per register
204.9.6.2	Family Planning	Printing under Male Sterilization	Per booklet	200			- Not Proposed this year
204.9.6.3	Family Planning	Printing Under IUCD Services: Manuals & Guidelines/ Register/ Documents					-
204.9.6.3.1	Family Planning	Printing of IUCD Card	Per Card	2	4000	0.08	Printing of IUCD Card for beneficiaries as per projected ELA
204.9.6.3.2	Family Planning	Printing of IUCD Register	Per Register	300	0		- Printing of 300 Insertion & 300 Follow-up register
204.9.6.4	Family Planning	Printing under ANTARA					- Ongoing Activity Proposal is for 2026-27:
204.9.6.4.1	Family Planning	Printing of MPA cards	Per Card	10	483	0.05	Proposal-1: MPA Card Printing of MPA cards @Rs.10/- per card x 58000 cards = Rs.5.80 lakhs
204.9.6.4.2	Family Planning	MPA register	Per Register	600	0		Proposal-2: MPA register Printing of MPA Register: Rs.600/- per register X 600 = Rs.3.60 lakhs

Annexure - IEC & Printing (Details of proposal under Sl. No. 204)

Amount in Rs. (Lakhs)

S. No	Programme/ Theme	Activity Proposed	Unit of Measure	Unit Cost (Rs)	Quantity/ Target	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
204.9.6.5	Family Planning	Printing under FPIS					Proposal: Printing of FPIS manual Already available, hence, not Proposed
204.9.6.6	Family Planning	Printing of FPLMIS Manual	Per booklet	300			- Printed & supplied in 2022-24. Not Proposed this year
204.9.6.7	Family Planning	Other Printing activities under FP					-
204.9.6.7.1	Family Planning	Printing of Oral Pills Register for CHC and	Per register	120	0		Ongoing activity Budget Proposed during 2024-26, Not proposed in FY 2026-27
204.9.6.7.2	Family Planning	Integrated poster on all FP methods	Per Poster	15	0		Ongoing activity Budget Proposed during 2024-26, Not proposed in FY 2026-27
204.9.6.7.3	Family Planning	Poster on Basket of Choice of FP Methods	Per Poster	8	0		Ongoing activity Budget Proposed during 2024-26, Not proposed in FY 2026-27
Sub Total Printing (RCH-6)						0.13	
204.9.7	RCH-7						
204.9.7.1	Nutrition	Printing of compliance cards and reporting formats for National Iron Plus Initiative	Per Card				1.Compliance of 6 to 59 months children, Pregnant women, Lactating mother is included in MCP card. 2.Follow up card for 5 to 9 years children, Adolescent 10-19 years (both in school & out of school) & WRA 20-24 years - To be met out of State Budget
204.9.7.2	Nutrition	GP level wall painting on mobilization of SAM identification and the services provided for their management	Per GP	1000			- To be met out of VHSNC Unities fund
204.9.7.3	Nutrition	Printing for Micronutrient Supplementation Programme including IEC materials, reporting formats, guidelines / training materials etc. (For AMB and Vitamin A supplementation programmes)	Per district	100000	1	1.00	Ongoing Activity Printing of forms & Formats and IEC material will be done as per GoI guidelines. District will be released an amount of Rs.1.00 lakh per district.
204.9.7.4	Nutrition	Printing of IEC Materials and monitoring formats	Per unit	18000	1	0.18	In 30 districts and 5 municipal corporations @ Rs.18,000/- per district and MC Proposed as per last year approval
Sub Total Printing (RCH-7)						1.18	
Grand Total Printing (RCH)						6.30	
204.10	NDCP						
204.10.1	IDSP						
204.10.2	NVBDCP						

Annexure - IEC & Printing (Details of proposal under Sl. No. 204)

Amount in Rs. (Lakhs)

S. No	Programme/ Theme	Activity Proposed	Unit of Measure	Unit Cost (Rs)	Quantity/ Target	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
204.10.2.1	NVBDCP	Printing of recording and reporting forms/registers for Malaria	Lumpsum	193200	1	1.93	Ongoing Activity: Proposal-1: Background: Report return being an important activity needs availability of reporting formats at all levels. Though IHIP is piloted in the state, it will take time to replace paper based reporting system. Further reports are used as means of verifications for the reported data for its matching and comparison with source data. Budget Proposed: 1. M Registers((@Rs. 65/Register) Each ASHA have one Register) Rs. 65/Register * 50825 ASHAs 2. M1 Register((@Rs. 65/Register) Each Facility have one register) Rs. 65/Register * 8523 facilities 3. M2 Format((@Rs. 1/Format) 2 formats per ASHA per month for 12 months Rs. 1/format * 2 formats * 12 months * 50825 ASHAs 4. M3 Register(@Rs. 50/Register) 2 Registers per CHC Rs. 50/Register * 2 register * 378 CHCs 5. M4 Format(@Rs. 2/Facility per month for 12 months) Rs. 2/facility per month * 8548 facilities * 12 months 6. SS Lab Registers(SSLR)((@Rs. 50/Register) 2 Registers per SS Lab Rs. 50/register * 2 registers * 67 SS Labs 7. SS Malaria Registers(SSMR)((@Rs. 50/Register) 3 Registers per SS Lab Rs. 50/register * 2 registers * 67 SS Labs 8. Cross Checking Formats(@Rs. 1 per format per facility for 12 months) Rs. 1/format per month * 437 facilities * 12 months 9. Patient Cards((@Rs. 6/Patient Card) 1 Pt. Card per Expected Malaria Cases Rs. 6/case * 75789 predictive cases Proposal-2: Gol has introduce new formats for reporting asymptomatic malaria cases through M-1A, M-2A, M-3A & M-4A vide D.O. No. 14-4/2017-18/NVBDCP/MED/ TAC- Reconstitution, dtd. 30.04.2025. 1. M1A Register (@3 per SC, One per PHC, CHC, SDH & DHH): @Rs. 65/- Register X 21924 nos 2. M2A Format (@1000 formats per district): @Rs. 1/- X 30 districts 3. M3A Register (@1 per SHC AAM to be kept at CHC) @Rs.50/- per Register X 6688 SC 4. M4A Format (@Rs. 2/Facility per month for 12 months) Rs. 2/facility per month * 8548 facilities * 12
204.10.2.2	NVBDCP	Printing of M register for CHV	Per Register	200	0		- Budget Shifted from NDCP-2 NVBDCP, SI No-64 As per recommendation of NPCC
204.10.2.3	NVBDCP	Printing of IEC materials (Banners & Standee) for MHU team	Per team	2000	0		- Budget Shifted from NDCP-2 NVBDCP, SI No-64 As per recommendation of NPCC

Annexure - IEC & Printing (Details of proposal under Sl. No. 204)

Amount in Rs. (Lakhs)

S. No	Programme/ Theme	Activity Proposed	Unit of Measure	Unit Cost (Rs)	Quantity/ Target	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
204.10.2.4	NVBDCP	Any other (please specify)	Per Register	200	3	0.01	Ongoing Activity: 1. Printing of AES case register As per national guideline JE/AES NVBDCP GoI, all AES case must be reported under AES surveillance in the state. It is revealed that AES cases are not either recorded and/or reported from DHHs/MCHs with maintenance of date/area wise AES cases which could help the periodical screening of JE cases. Non availability of these data does not give any guidance to state to know the actual disease burden. Hence Printing of AES case register is required to maintain in the pediatric and medicine ward of each DHHs, SDHs & MCHs of the state. Proposal for FY 2026-27: AES Case Register (@Rs. 200/Register) Budget Breakup: a. Rs. 200/Register * 5 Registers/MCH * 16 (15 MCHs & PGI Capital Hospital) b. Rs. 200/Register * 3 Registers/DHH * 32 DHHs c. Rs. 200/Register * 2 Registers/SDH * 33 SDHs
204.10.2.5	NVBDCP	Printing of forms/registers for Lymphatic Filariasis/ MDA				-	Ongoing activity: Proposal for FY 2026-27:
204.10.2.6	NVBDCP	Printing of Family Register	Per register	25	866	0.22	1. Printing of Family Register Rs. 25/ Register per DA for 45018 DAs
204.10.2.7	NVBDCP	Printing of Flash card	Per Card	5	866	0.04	2. Printing of Flash card Rs. 5/ card per DA for 45018 DAs
204.10.2.8	NVBDCP	Printing of Patient Card	Per Card	3	2329	0.07	3. Printing of Patient Card Rs. 3 Rs / card for each lymphoedema and hydrocele patient for 82136 cases
204.10.2.9	NVBDCP	Printing of FAQs	per FAQ	25	866	0.22	4. Printing of FAQs Rs. 25/ per FAQ per DA for 45018 DAs
Sub Total Printing (NDCP-2)						2.48	
204.10.3	NDCP-3						
204.10.3.1	NLEP	Printing works	Lumpsum	20000	1	0.20	Ongoing Activity Printing of Master Register, DPMR Register, Patient Treatment Card Any other Register, formats as required by district. Budget: apoprox. 25000/- per district as per CLD norm Total Budget approved: Rs 20,000/- per districts
Sub Total Printing (NDCP-3)						0.20	
204.10.4	NDCP-4						
204.10.4.1	NTEP	State Level	Lumpsum	300000		-	Printing of Advocacy Materials at State Level. Budget Not approved, Hence Dropped
204.10.4.2	NTEP	District Level	Per DTC	25000		-	Printing Details at District level: 1. Printing of NTEP Registers (Notification register, Lab Register, NAAT Register, TPT Register, Referral Register for all TU & TDC) 2. Printing of Formats (Triplicate ASHA referral form, Sample Requisition form, TBI Testing formats, TB Treatment card, TB patient card etc.) Budget Not approved, Hence Dropped
Sub Total Printing (NDCP-4)						-	

Annexure - IEC & Printing (Details of proposal under Sl. No. 204)

Amount in Rs. (Lakhs)

S. No	Programme/ Theme	Activity Proposed	Unit of Measure	Unit Cost (Rs)	Quantity/ Target	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
204.10.5	NDCP-5						
204.10.5.1	NVHCP						- No Printing Proposed
Sub Total Printing (NDCP-5)						-	
204.10.6	NDCP-6						
204.10.6.1	NRCP	Printing of Animal Bite Register, Vaccination Cards for ARV & Formats for Monthly reporting					Ongoing Activity Background To track, record, follow up & for standardized reporting system of animal bite cases, Printing of Animal Bite Register, Vaccination Cards for ARV & Formats for Monthly reporting is done for all districts. Proposal Proposal for FY 2026-27: @Rs.20000/- per district X 30 districts + 3 Lakhs for State = Rs.9.00 Lakhs
204.10.6.1	NRCP	At State Level	Lumpsum	300000	0	-	
204.10.6.1	NRCP	At District Level	Per District	20000	1	0.20	
Sub Total Printing (NDCP-6)						0.20	
204.10.7	NDCP-7						
204.10.7.1	PPCL						- No Printing Proposed
Sub Total Printing (NDCP-7)						-	
Grand Total Printing (NDCP)						2.88	
204.11	NCD						
204.11.1	NCD-1						
204.11.1.1	NPCB& VI	Referral Card	Per 120 Cards	0			Ongoing Activity: Activity: Printing activities under NPCBVI Proposed following AAM guidelines Referral Card (ASHA to use avg 10 cards per month)- @ Rs.40/- for 120 card required per annum x 50825 ASHAs (budgeted for 2026-27) = Rs.20.33 lakhs Activity Dropped As pre recommendation of NPCC
Sub Total Printing (NCD-1)						-	
204.11.2	NCD-2						
204.11.2.1	NMHP	Printing of Toll Free No & Scope of Services in the ASHA Dairy		0		-	It is proposed to print it in the ASHA Dairy so that awareness can reach to last miles (No additional fund required, Budget proposed under ASHA Programme).
204.11.2.2	NMHP	Mental health treatment card	Per Card	20	1000	0.20	Proposal: Printing of Health Treatment Card for new case detection @ Rs.20/- per card to be given at 30 districts and for two new Mental Health Units at BBSR & Rourkella
Sub Total Printing (NCD-2)						0.20	
204.11.3	NCD-3						
204.11.3.1	NPHCE						- No Printing Proposed
Sub Total Printing (NCD-3)						-	
204.11.4	NCD-4						
204.11.4.1	NTCP	Printing of Challan Book for levy fine	Per Book	120	30	0.04	Challan Books are required for levy fines in case of violation of law. State has planned to provide Sarchpanchs of 600 targeted villages under Tobacco Free Village Initiatives & keep few with enforcement squads. Total Requirement: For Enforcement Squads: @10 nos chalan book per squard X 30 district level squads & 5 City Level Squads + 1 chalan book per targeted village X 600 books= 950 books (say 1000 books)

Annexure - IEC & Printing (Details of proposal under Sl. No. 204)

Amount in Rs. (Lakhs)

S. No	Programme/ Theme	Activity Proposed	Unit of Measure	Unit Cost (Rs)	Quantity/ Target	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
204.11.4.2	NTCP	Records, Reports & other consumables	Per Record	10	4686	0.47	Ongoing Activity Name of the Activity : Printing & Suply of Case Records & Information Sheet for patients Performance Status: Behebheral Counselling sessions for Tobacco user: 1.10 lakhs Patient received NRT Cycle: 6428 Case records are printed for all Patients undergone Counselling aswell as NRT therapy. Expected cases in 2026-27 : 1.50 lakhs
Sub Total Printing (NCD-4)						0.50	
204.11.5	NCD-5						
204.11.5.1	NP-NCD	OpEx (printing of CBAC forms, registers, and reporting formats)	Per Format	1	1196700	7.18	Diagnostics Services: Expenditure under this head shall be managed through balance fund available in the State under XV-FC. Hence, no additional fund proposed. However, budget proposed for printing of CBAC forms, patient treatment card, referral form, registers, and reporting formats etc. Background : Total Population of the State: 470.00 lakhs Requirement of CBAC Form : CBAC forms were previously being filled up by ASHAs for the population above 30 years of age, to screen for common NCDs, as per Gol guidelines. Revised CBAC include other diseases like TB, Leprosy visual defects and Mental Health. Many of these ailments effort persons of age groups below 30 years of age. Any suspected detected from the CBAC forms are referred to higher centers for early diagnosis and treatment. Keeping in view the above and Gol guidelines for enrolment of the total population of all age. Hence, 470 lakhs CBAC forms are required. But looking migration of certain population, budget proposed for 80% of total target. The cost includes printing of CBAC forms, registers, and reporting formats. Budget proposed: 60%
Sub Total Printing (NCD-5)						7.18	
204.11.6	NCD-6 (PMNDP)						- No Printing Proposed
204.11.7	NCD-7 (NPCCHH)						- No Printing Proposed
204.11.8	NCD-8 (NOHP)						- No Printing Proposed
204.11.9	NCD-9 (NPPC)						- No Printing Proposed
Grand Total Printing (NCD)						7.88	
204.12	HSS-Urban (Printing)						

Annexure - IEC & Printing (Details of proposal under Sl. No. 204)

Amount in Rs. (Lakhs)

S. No	Programme/ Theme	Activity Proposed	Unit of Measure	Unit Cost (Rs)	Quantity/ Target	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
204.12.1	HSS(U) 1 -CPHC	Printing activities for AAMs (UPHC/USHC)	Per AAM	1,500	2	0.03	Ongoing Activity Proposal : Printing of updated printed OPD registers The standardized OPD registers will be implemented across all AAMs — SHCs, PHCs, UPHCs and U-SHCs. Printing will be undertaken at the district level and the registers will be distributed to all facilities. Printing of OPD Register (The standardized OPD registers will be implemented across all AAMs (SHCs, PHCs, UPHCs and U-SHCs). Printing will be undertaken at the district level and the registers will be distributed to all facilities.) As both UPHCs and U-SHCs receive almost the same number of OPD patients, the state proposes OPD registers with the same number of pages for both facility types. Justification: With AAMs now established, the focus has shifted from expansion to improving quality and accountability across all 12 service packages. Standardized OPD formats are proposed for all AAM categories to ensure uniform documentation, seamless integration with HMIS/AAM portals and better reporting. These formats will also strengthen systems, support NHM compliance, enhance transparency and provide reliable data for planning and monitoring. Budget: @Rs.1500/- per unit per annum 116 AAM UPHCs . (Budget for 138 AAM USHCs is not Approved by GoI)
204.12.2	HSS(U) 2 -Community Engagement						
204.12.2.1	HSS(U) 2 -Community Engagement	Printing of MAAS Hand Book	Per Hand Book	160	106	0.17	Total MAAS in the State : 3489 in 50 eligible cities ALL these MAA are functional This is a reference hand Book which shall help in improving functionality of MAAS members Budget Revised as per recommendation of NPCC
204.12.2.2	HSS(U) 2 -Community Engagement	Printing of MAAS Register	Per Register	200		-	Printing order for MAS register for FY 2025-26 has been placed, requirement for FY 2026-27 is to be met out of this stock. Hence Proposal has been dropped
204.12.2.3	HSS(U) 2 -Community Engagement	Printing of MAAS Grading Format	Lumpsum	1,272	1	0.0127	Proposal -1. MAAS are being graded in every quarter based on the 14 point grading score CARD. On the basis of performance in the grading , MAAS are certified (Red/ Yellow/ Green). @ Rs. 3/- per format x 14400 MAAS grading format= Rs. 43,000 (They are also give cash award to 50% Of the best performing MAAS to their concerned Bank Account.) Proposal -2. Printing of prescription, maintaining register etc for UCHC -07 @ Rs. 1000/- Per Unit Per Unit/ Per Month= Rs. 84,000 (Activity shifted from HSS-18, SI No 203.4.5 (IT Interventions))
204.12.2.4	HSS(U) 2 -Community Engagement	Printing of Community Feed Back Format	Per format	3		-	Printing of the for met is to ebe met out of JAS fund, Hence Proposal has been dropped
204.12.2.5	HSS(U) 2 -Community Engagement	Printing of JAS Hand Book	Per Hand Book	150		-	To be printed fromJAS untied fund of UAAM, Hence Proposal has been dropped

Annexure - IEC & Printing (Details of proposal under Sl. No. 204)

Amount in Rs. (Lakhs)

S. No	Programme/ Theme	Activity Proposed	Unit of Measure	Unit Cost (Rs)	Quantity/ Target	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
204.12.3	HSS(U) 3 - Public Health						- No Printing Proposed
204.12.4	HSS(U) 4 - Quality Assurance						- No Printing Proposed
204.12.5	HSS(U) 5 - HRH						- No Printing Proposed
204.12.6	HSS(U) 6- Technical Assistant						- No Printing Proposed
204.12.7	HSS(U) 7 - Access						- No Printing Proposed
204.12.8	HSS(U) 5 - Innovation						- No Printing Proposed
204.12.9	HSS (U) 9 - Untied Grant						- No Printing Proposed
Grand Total Printing (HSS-U)						0.21	
204.13	HSS-Rural						
204.13.1	HSS-1						
204.13.1.1	CPHC	Printing activities for AAMs (PHC/ SHC)	Lumpsum	241500	1	2.42	Ongoing Activity Printing of updated OPD registers The standardized OPD registers will be implemented across all AAMs — SHCs, PHCs, UPHCs and U-SHCs. Printing will be undertaken at the district level and the registers will be distributed to all facilities. Proposal-1: Printing of Modules for the 12 package of services for CHOs (i.e. Induction - 1, EPS-7, BPS - 8, Operational Guidelines- 7 = 23 modules) New CHOs expected to Join: 1282 Budget: 1282 units × 23 modules = 29486 modules (@Rs.38.16/- avg. unit cost for printing)- (To be printed at State Level) Proposal-2: Printing of OPD Register (The standardized OPD registers will be implemented across all AAMs (SHCs, PHCs, UPHCs and U-SHCs). Printing will be undertaken at the district level and the registers will be distributed to all facilities.). Justification: With AAMs now established, the focus has shifted from expansion to improving quality and accountability across all 12 service packages. Standardized OPD formats are proposed for all AAM categories to ensure uniform documentation, seamless integration with HMIS/AAM portals and better reporting. These formats will also strengthen systems, support NHM compliance, enhance transparency and provide reliable data for planning and monitoring. Budget: @Rs.1000/- per unit per annum X 6688 SHC AAMs + @Rs.1500/- per unit per annum
Sub Total Printing (HSS-1)						2.42	
204.13.2	HSS-2						
204.13.2.1	Blood Services	Records/ Reports for strengthening follow up SCD Cases	Lumpsum	0	1		1. Treatment and follow up Register: @Rs.200/- per unit X 6688 SHC AAM 2. Referral Card: @Rs.5/- X 4 lakhs cases 3. Individual Follow up Colour coded card for SCD and Trait cases: @Rs. 5/- X 20 lakhs card Budget Not Approved
Sub Total Printing (HSS-2)						-	
204.13.3	HSS-3						

Annexure - IEC & Printing (Details of proposal under Sl. No. 204)

Amount in Rs. (Lakhs)

S. No	Programme/ Theme	Activity Proposed	Unit of Measure	Unit Cost (Rs)	Quantity/ Target	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
204.13.3.1	CPRC	Printing of Certificates	Per unit	10	0	-	Justification: As per record, total 50724 ASHAs are registered in KMA. Out of which budget for 45000 ASHAs has already been approved during last few ROPs. Hence, for balance ASHAs (5724), RS. 0.57 lakh has been recommended. Budget Revised as per recommendation of NPCC
204.13.3.2	CPRC	Printing of ASHA Diary	Per Diary	100	0	-	Approved for existing 50825 ASHAs Ongoing activity with revised unit no.
204.13.3.3	CPRC	Village Health Register (For ASHA)	Per Register	100	0	-	Ongoing Activity Village Health register will be maintained by ASHAs to record the detailed information of different target beneficiaries for her own reference and reporting/record keeping
204.13.3.4	CPRC	Incentive Voucher Book	Per voucher book	100	0	-	Ongoing activity Justification : Incentive voucher book is being provided to ASHAs to submit their claim of incentive on a monthly basis. Single voucher book will be printed as per the requirement of ASHA soft application. Booking will be done as per bidding cost.
204.13.3.5	CPRC	Printing of GKS Register	Per GKS	60	0	-	Ongoing Activity GKS register is the user manual of GKS and all records related to GKS activities are being maintained in the register. The register is being provided to each GKS in two year interval.
204.13.3.6	CPRC	Printing of JAS Register	Per SC AAM-JAS	100	0	-	Ongoing activity: Printed JAS register is being provided to each JAS at SC AAMs in every two years interval. It is provided to maintain an uniformity of records across all SC AAM level. However, Register at PHC AAMs are managed out of JAS fund available at facility level. Total SC AAMs - 6688 including Buffer 7000 units proposed
Sub Total Printing (HSS-3)						-	
204.13.4	HSS-4 (Public Health Institutions as per IPHS)						- No Printing Proposed
204.13.5	HSS-5 (Referral Transport)						- No Printing Proposed
204.13.6	HSS-6 (Quality Assurance)						- No Printing Proposed
204.13.7	HSS-7 (Other Initiatives to improve access)						- No Printing Proposed
204.13.8	HSS-8 (Inventory management)						- No Printing Proposed
204.13.9	HSS-9 (HRH)						- No Printing Proposed
204.13.10	HSS-10 (Enhancing HR)						- No Printing Proposed
204.13.11	HSS-11 (Technical Assistance)						- No Printing Proposed
204.13.12	HSS-12 (IT interventions and systems)						- No Printing Proposed
204.13.13	HSS-13 (Innovation)						- No Printing Proposed
204.13.14	HSS-14 (Untied Grants)						- No Printing Proposed

Annexure - IEC & Printing (Details of proposal under Sl. No. 204)

Amount in Rs. (Lakhs)

S. No	Programme/ Theme	Activity Proposed	Unit of Measure	Unit Cost (Rs)	Quantity/ Target	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
204.13.15	HSS-15 (Snakebite envenoming)					-	No Printing Proposed
204.13.16	HSS-16) (Capacity Building Including Training	Printing of Modules for various Trainings	Lumpsum	10,00,000	0	-	Budget Not Approved by Gol
Sub Total Printing (HSS-16)						-	
204.13.17	HSS-17 (ASHA Incentive)					-	No Printing Proposed
Sub Total Printing (HSS-17)						-	
204.13.18	HSS.18					-	No Printing Proposed
204.13.18.1	IT Interventions and Systems	Printing of HMIS Formats	Per page	0.75	0		Ongoing Activity Institutions reporting through HMIS : Public = 6688 SC + 580 Virtual SC under NUHM +1338 (New to be established, UHWC-140), PHC-1406, CHC 386, SDH - 33, DHH-32, MCH -13 = 10616 Other Hospital -79, AYUSH-1200 - Buffer 659 = 12555 booklet. (Pages in format : MCH-22, DH-24, SDH-26, CHC-25, PHC-24, SC-16 , Other Format -7, Private Hospital-6) 24 Sets per institutions per year Private =MCH-3,DHH-19 + SDH- 682 + PHC-12 = 716 (Prototype will be provided) Cost of printing should be based on competitive bidding
204.13.18.2	IT Interventions and Systems	Printing of RCH Register	Per Register	250	0		Ongoing Activity SC - 6688 Rural, 580 VirtualUrban, 1338 New, UHWC 140, Buffer 518 =Total 9265 (As one register is applicable for 2 years, every SC/UAAM should be distributed only 1 register in FY 26-27.) • Each Sub Center / UAAM will be provided one register, New Register format will be developed on basic data fields. As State is planning for complete digitalization data on site to avoid duplicity of data capturing and avoid errors along reduce workload and focus on data quality. • Each register can capture at least 300 beneficiary (PW & Child) • The register cost will be Rs. 250/- each Cost of printing should be based on competitive bidding
Sub Total Printing (HSS-18)						-	
204.13.19	IEC & Printing					-	No Printing Proposed
204.13.20	Inventory Management					-	No Printing Proposed
204.13.21	Innovation					-	No Printing Proposed
Grand Total Printing (HSS)						2.42	
Total Budget Approved (Printing)						19.69	
Grand Total Budget Approved (IEC/BCC &Printing)						106.56	

Jagatsinghpur

HSS-20 _Inventory Management, Odisha (Status of PSA Plants of Odisha & Budget for CMC)

S.No.	Scheme/ Activity	Approval FY 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
	Total Inventory Management					0.00	Detailed in PSA Plants Annexure
205	PSA Plants (funded under PM-CARES)	Lumpsum	25980000	259.8	0	0.00	Total amount approved Rs. 259.80 lakhs for maintainance of 32 PSA plants @ 7% of TAV Detailed in PSA Plants Annexure

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

Amount in Rs. (Lakhs)

S.No.	Scheme/ Activity	Approval FY 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
	Total Innovation					-	
206	State-specific Initiatives and Innovations					0.00	
206.1	RCH Flexible Pool (including RI, IPPI, NIDDCP)						
206.1.1	Establishment of Mini Early Intervention Center	Per Unit	1460000	14.60	0	0.00	Out of 314 Blocks 132 Blocks are situated more than 50 KM away from District Head Quarter where DEIC is operational and in case of 10 aspirational district the distance of aspirational Blocks from district Head Quarter is even more. To strengthen the reach of Follow up treatment for Developmental Delay Cases of 132 interior blocks, 42 EICs at SDH/ CHC level is required. However, 10 new Mini EICs are proposed. The details Write-up, Justification & Budget is placed at State Specific Initiative & Innovation Write-up Annexure. Activity is Recommended for approval in the NPCC Meeting
206.1.2	Demonstration of innovative Home-Based Newborn and Child Care (HBNCC)						Currently, NHM Odisha implements Home-Based Newborn Care (HBNC) (0–42 days) and Home-Based Care for Young Child (HBYC) (3–15 months). While these interventions have improved early survival outcomes, a critical service gap exists for children aged 15–36 months, a period crucial for brain development, nutrition consolidation, and early childhood development (ECD). The absence of structured home-based follow-up during this phase results in missed opportunities for early detection of growth faltering, developmental delays, and illness. In order to address the gaps HBNCC programme is proposed. The details Write-up, Justification & Budget is placed at State Specific Initiative & Innovation Write-up Annexure. Budget Revised as per the recommendation of Child Health Division, GoI
206.1.2.1	1 day HBNCC Field Level Training	Per Batch	20,000	0.20	0	0.00	
206.1.2.2	Incentive to ASHA for completion of four HBNCC home visit	Per Visit	50	0.0005	0	0.00	
206.1.2.3	HBNC Card	Per Card	20	0.0002	0	0.00	
206.1.3	Inborn Error of Metabolism Screening for New Born at MC&H						State has piloted IEM screening among New Borns at SCB Medical College & Hospital. The pilot studies has suggest for screening of conditions like CH (Congenital Hypothyroidism) , CAH (Congenital Adrenal Hyperplasia) , PKU (Phenylketonuria) & G6PD (Glucose -6- Phosphate Dehydration Deficiency) only as these treatable conditions and recommended by the expert committee. Hence proposed across DHHs & MCHs. The details Write-up, Justification & Budget is placed at State Specific Initative & Innovation Write-up Annexure. Revised proposal submitted after discussion in the NPCC Meeting
206.1.3.1	Screening of metabolic disorder among New Born	Per New Boorn	450	0.00	0	0.00	
206.1.3.2	Training of Microbiologists, Nursing Officer & LT from each targeted MCHs (6 each from targeted MCH)	Per Batch	102000	1.02	0	0.00	

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

Amount in Rs. (Lakhs)

S.No.	Scheme/ Activity	Approval FY 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
206.1.4	State Special strategies for accelerated reduction of MMR in the State						The current MMR of the State is 153 per 1 lakh live births (SRS- 2021-23) which has increased from 136 (SRS- 2020-22) Hence, State Specific Special strategies have been developed and proposed for accelerated reduction of MMR in the State 1.Budget proposed for 20% of 218 facilities (13 districts) = 44 facilities x Rs. 2000/- (RS.1000/- for mobility & Rs. 1000/- as Honorarium)for 12 months = Rs. 10.56 Lakhs- Budget Not Approved
206.1.4.1	Mobilisation of O G spl/ BEmOC trained doctors from other facilities with special incentive and mobility support to provide quality ANC services in PMSMA clinics.	Per facility	2000	0.02	0	0.00	2. In order to have skilled and competent service providers, regular skill updation and practices will be ensured though skill labs at DHH and selected SDH/CHC facilities. Approved for 17 Mini Skill Labs by Gol @ Rs. 2,08,935 per mini skill lab for 17 identified districts
206.1.4.2	Setting up of Comprehensive RMNCH Skill lab	Per Skill lab	2,08,935	2.09	0	0.00	The details Write-up, Justification & Budget is placed at State Specific Initiative & Innovation Write-up Annexure. Budget Repropsoed after discussion in the NPCC Meeting
206.2	NDCP Flexi Pool						
206.3	NCD Flexi Pool						
206.3.1	Improving access, coverage and treatment of Cervical Cancer through Opportunistic screening of suspected cases at Facility Level						National Health Mission, Odisha, through its Innovation Fund and with technical support from the Norway India Partnership Initiative (NIPI), successfully implemented a pilot cervical cancer screening project using HPV-DNA self-sampling kits. During the pilot 4896 cases screened and found 322 High-risk HPV positive cases.
206.3.1.1	HPV Screening	Per Case	800	0.01	0	0.00	Proposed to scale-up the imitative through opportunistic screening at facility level.
206.3.1.2	ToT / Training of Health Care providers on treatment of Cervical Cancer through HPV DNA Testing	Lumpsum	2000000	20.00	0	0.00	The details Write-up, Justification & Budget is placed at State Specific Initiative & Innovation Write-up Annexure.
206.3.1.3	Sample transportation to Testing lab	Lumpsum	500000	5.00	0	0.00	
206.3.2	Augmenting Clinical Breast Examination with Digital Device						HTA Evaluation Pending
206.3.2.1	Screening Cost	Per Scan	400	0.00	0	0.00	
206.3.2.2	One–Day Refresher Training of Medical officers at PHC level on diagnostics and referral protocols	Per Batch	33000	0.33	0	0.00	
206.3.3	Diabetic Retinopathy Screening Among diagnosed cases of Diabetes mellitus						HTA Evaluation Pending
206.3.3.1	Cost for AI enabled Digital device for DR screening	Per Device	650000	6.50	0	0.00	
206.3.3.2	Training of Ophthalmologists	Per Batch	42000	0.42	0	0.00	
206.3.3.3	Training of Ophthalmic Asst	Per Batch	98000	0.98	0	0.00	

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

Amount in Rs. (Lakhs)

S.No.	Scheme/ Activity	Approval FY 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
206.3.4	Type 1 Diabetes Mellitus Management	Lumpsum	47,27,000	47.27	0	0.00	In Odisha, it is estimated that around 5,000 children are currently living with T1DM, though the true burden may be higher due to under diagnosis and limited population-based screening. However, we will target about 1000 cases in FY 2026-27. The details Write-up, Justification & Budget is placed at State Specific Initiative & Innovation Write-up Annexure. Revised proposal submitted after discussion in the NPCC Meeting
206.3.5	Expansion of Retinopathy of Pre Maturity (ROP) Screening & Services at Public Health Facilities						For prevention of ROP related blindness, timely screening is an utmost prerequisite. Those babies who are born before 34 weeks & less than 2kg birth weight are vulnerable & affect from ROP conditions. These babies are there at our hospitals at SNCUs & DEICs. In order to screen them , proposal is to equip 32 DHHs & for which budget has been proposed. Budget:
206.3.5.1	15 days hands on training of Ophthalmic Officer/ Optometric & Nursing Officers	Per Batch	174000	1.74	0	0.00	1. Procurement of 32 Pediatric Funds camera with AI- Budget to be met out of State Budget 2. 15 days hands on training of Ophthalmic Officer/ Optometric & Nursing Officers @ Rs 1.74 Lakhs per batch X 19 batches at State level The details Write-up, Justification & Budget is placed at State Specific Initiative & Innovation Write-up Annexure. Revised proposal submitted after discussion in the NPCC Meeting
206.4	Health System Strengthening (HSS) - Urban						
206.5	Health System Strengthening (HSS) Rural						
206.5.1	State/ District Innovation Fund	Lumpsum	17800000	178.00	0	0.00	Proposal : Continuation of “Innovation Fund” under NHM PIP, Odisha (FY 2026–27) Justification for Continuation of Innovation Fund (FY 2026–27) : Continuation of the Innovation Fund is justified on the following grounds: • Gap-Filling: Supports small but high-impact interventions that are not easily accommodated under routine NHM budget heads. • Culture of Innovation: Provides a formal platform for State and district staff to incubate ideas based on field realities and local context. • Flexible and Timely Financing: Ensures promising ideas are tested without delay, preserving relevance and enabling rapid learning. Estimated Budget : Budget proposed as approved last year. The details Write-up, Justification & Budget is placed at State Specific Initiative & Innovation Write-up Annexure.

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

Amount in Rs. (Lakhs)

S.No.	Scheme/ Activity	Approval FY 2026-27					State Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2026-27		
					Quantity/ Target	Budget (Rs. Lakhs)	
206.5.2	Establishment/ Strengthening of Integrated Data Centres	Per Data Centre	1800000	18.00	0	0.00	In order to address individualistic approach and incorporating better management through knowledge and workforce sharing, State of Odisha has planned for setting up of integrated Data Centre District level to provide systematic data collection, compilation & analyze the data at District level. Where all the data personnel sitting on one roof with a definite channel of reporting. Proposal is for 15 District level Data Centers (Proposal on Block level Data centers withdrawn in view of implementation of BPHU under PM ABHIM) The details Write-up, Justification & Budget is placed at State Specific Initiative & Innovation Write-up Annexure. Revised proposal submitted after discussion in the NPCC Meeting
206.5.3	Enhancement of Regional Training Centres at Nursing Institutions	Per Unit	6000300	60.00	0	0.00	Proposal: Proposal for augmentation and capacity enhancement of Regional Training Centers at Nursing Institutions To enable cadre-based, service-package-oriented, and competency-based training aligned with the 12 CPHC packages, it is proposed to strengthen four strategically selected Colleges of Nursing as Regional Training Sites for CPHC cadres. These institutions will be equipped with upgraded skills laboratories to facilitate integrated in-service training for SC-PHC teams. Details of Justification & Budget is at Regional Training Centers Annexure Activity is Recommended for approval in the NPCC Meeting
	Total Innovation					-	

Annexure - Programme Management Activities (Details of Proposal under Sl. Nos. 146 and 194)

											Amount in Rs. (Lakhs)
S. No	Programme/ Theme	Unit of Measure	Unit Cost (Rs)	Quantity / Target	Planning Activities	Meetings, Workshops and Conferences	Monitoring, Evaluation and Supervision	Mobility Support and Field Visits (including SRM)	Operational Costs (Expenses on account of consumables, office expenses, operating expenses, contingency, admin expenses,	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
Sl. No. 146	HSS-Urban										
	Organising Joint Reviews/ Convergence Meetings at all Levels (Sector/ City)										Background Information is mentioned in HSS R head . Same also can be referred from Write up Annexure , placed at Programme Management Folder
	UPHC /Sector Level Monthly meeting	Per Meeting	2000	0		0.00				-	Background: Meeting to be taken up under the chairpersonship of UPHC MO with presence field staff & representatives from all key Deptts on monthly basis Expected Participants -40 Budget: Rs.30.00 Lakhs (@ Rs. 2,000/- per meeting for refreshments & Contingency X 125 UPHCs X 12 meetings Budget Shifted to HSS(U)-3, SL No 137 as per Approval in RoP
	City Level Monthly Meeting at Municipal Corporation Cities	Per Meeting	10000	0		0.00				-	Background: Meeting to be taken up under the chairpersonship of Commissioner in presence of all key Deptts on monthly basis. Expected Participants -60 (UPHC MO, Programme Mangers & Officers at CPMU and other Representatives of key deptts) Budget: Rs.6.00/- Lakhs (@ Rs. 10,000/- per meeting for refreshments & Contingency X 5 Cities X 12 meetings)
	Qualrterly Urban Review Meeting at State level	Per Meeting	110000	0		0.00				-	Background: Urban Review Meeting at State level to be taken up under the chairpersonship of MD NHM in presence of all Programme Officers & Consultants from 5 Municipal Corporation Cities & other Urban areas. The duration/ periodicity of the meeting shall be for 1 day on quarterly basis. Expected Participants – 60 per day Budget: Rs 110000/- X 4 Meetings = Rs.4.40 Lakhs
	Monitoring & Supportive Supervision										Background Information is mentioned in HSS R head . Same also can be referred from Write up Annexure , placed at Programme Management Folder
	City Programme Management Unit at Municipal Corporation Cities	Per MC	1000000	0				0.00		-	1. Common Pool Vehicles with DOL (1) @ Rs 40000/- per month X 1 Vehicles X 12 Months: Rs.4.80 Lakhs. It will help in arranging vehicle without delay. 2. Pool Fund for hiring vehicle as per requirement (15 Trips per month) @ Rs.2000/- X 15 Trips per month X 12 months: Rs. 3.60 Lakhs 3. Additional requirement of vehicle if any shall be met out of this pool fund. Maintenance/ DOL for two-wheeler: Lumpsum for annum @ Rs.1.00 Lakhs 4. DA as applicable as per OSHFWS Norms: @Rs.0.60 Lakh per Annum Total Budget per MC: Rs.10.00 Lakhs
	UPHCs level Monitoring/ Supportive Supervision	Per UPHC	24000	0				0.00		-	Budget Not Approved

Annexure - Programme Management Activities (Details of Proposal under Sl. Nos. 146 and 194)

											Amount in Rs. (Lakhs)
S. No	Programme/ Theme	Unit of Measure	Unit Cost (Rs)	Quantity / Target	Planning Activities	Meetings, Workshops and Conferences	Monitoring, Evaluation and Supervision	Mobility Support and Field Visits (including SRM)	Operational Costs (Expenses on account of consumables, office expenses, operating expenses, contingency, admin expenses,	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
	Administrative Contingencies for Programme Management Units at all levels										Background Information is mentioned in HSS R head . Same also can be referred from Write up Annexure , placed at Programme Management Folder
	For City Programme Management Units	Per MC	900000	0					0	0.00	1. Urban – State Programme Management Unit Integrated with SPMU (HSS_R) cost, hence not additionally proposed 2. Administrative Contingencies for City Programme Management Units 2.1. Contingency & Consumables (Paper, Cartridges stationeries etc)@ Rs 20000/- PM X 12 months= Rs.2.40 Lakhs 2.2. Support Staff (House Keeping & Security) 2 Personnel @ Rs 600 per day X 26 days PM X 12 months= Rs. 3.74 Lakhs 2.3. Broad Band Internet Charges – Separately proposed as part of IT interventions
	For UPHCs	Per UPHC	1000	2					0.02	0.02	Budget Proposed under HSS-18_IT Interventions_ Sl. No. 203 2.4. Hospitality (Stay, travel etc.) for State /National Monitors (Lumpsum): Rs.1.00 Lakhs 2.5. Repair/Maintenance/replacement of office EIF: Rs.1.86 Lakhs Sub Total (2): Rs.9.00 Lakhs per MC 3. PMU at UPHCs (@1000/- per UPHC/ Per annum X 125= Rs.1.25 Lakhs
	HSS-Urban Sub-Total				0.00	0.00	0.00	0.00	0.02	0.02	
Sl. No. 194	RCH										
	Joint Reviews/ Convergence Meetings at all Levels (State/ District/ City/ Block/ Sector)									-	Programme wise fund allocation has not been made but fund has been pooled for utilisation as per the need following OSH&FW Society Norms. This is also done to limit PM cost within 9% of total budget. Budgeted under PM Activities_HSS (R & U)- Refer the same for details
	Monitoring & Supportive Supervision									-	Programme wise fund allocation has not been made but fund has been pooled for utilisation as per the need following OSH&FW Society Norms. This is also done to limit PM cost within 9% of total budget. Budgeted under PM Activities_HSS (R & U)-Refer the same for details
	RCH Sub-Total				0.00	0.00	0.00	0.00	0.00	0.00	
	NDCP										
	Joint Reviews/ Convergence Meetings at all Levels (State/ District/ City/ Block/ Sector)									-	Programme wise fund allocation has not been made but fund has been pooled for utilisation as per the need following OSH&FW Society Norms. This is also done to limit PM cost within 9% of total budget. Budgeted under PM Activities_HSS (R & U)-Refer the same for details

Annexure - Programme Management Activities (Details of Proposal under Sl. Nos. 146 and 194)

											Amount in Rs. (Lakhs)
S. No	Programme/ Theme	Unit of Measure	Unit Cost (Rs)	Quantity / Target	Planning Activities	Meetings, Workshops and Conferences	Monitoring, Evaluation and Supervision	Mobility Support and Field Visits (including SRM)	Operational Costs (Expenses on account of consumables, office expenses, operating expenses, contingency, admin expenses,	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
Sl. No. 194	Joint Reviews/ Convergence Meetings)- GFATM_NVBDP	Per RRM	136500	0		0				-	Ongoing Activity: GFATM Activity Travel & accommodation related claims for attending RRM for 5 State Consultants @Rs. 27300/- X 5 consultants X 3 RRM
	Monitoring & Supportive Supervision									-	Programme wise fund allocation has not been made but fund has been pooled for utilisation as per the need following OSH&FW Society Norms. This is also done to limit PM cost within 9% of total budget. Budgeted under PM Activities_HSS (R & U)-Refer the same for details
	Monitoring & Supportive Supervision- GFATM_NVBDP										Mobility Support (Proposed as per GFATM Norm) 1.1 Block Level mobility support (POL) for 150 MTS/VBDTS of 19 GFATM districts : @Rs.2800/- per month X 12 months X 150 VBDTS 1.2 DA: to be met out of general pool budget: Monitoring & Supportive Supervision
	Block Level mobility support (POL) GFATM	Per MTS Per Month	2800					0		-	2. Mobility support for strengthening Entomological surveillance - GFATM Budget: @Rs.50000/- Per unit Per Month X 7 units (Target – 7 functional Zonal X 12 Months
	Mobility support for strengthening Entomological surveillance	Per Unit	50000					0		-	2. Annual Maintenance of Vehicles (Proposed as per GFATM Norm) 1. Annual Maintenance of Vehicles used by VBDTS of 19 GFATM Districts- GFATM Budget: @ Rs. 3000/- Per Annum for 150 MTS X 150 bikes
	Annual Maintenance of Vehicles used by VBDTS of 19 GFATM Districts	Per Vehicle	3000					0		-	2. Annual Maintenance of Vehicles supplied under GFATM for entomological Zones for entomological zones Budget: @ Rs. 60000/- Per Unit Per Annum X 2 Zones (1 State + 1 Cuttack Zone)
	Annual Maintenance of Vehicles supplied under GFATM for entomological Zones for entomological zones	Per Vehicle	60000					0		-	Monitoring & Supportive Supervision for Non-GFATM districts integrated with HSS-Rural/ Urban Budget (As approved by the GoI, the expenditure under this head may be booked under Sl. No. 64. Accordingly, the budget has been shifted to Sl. No. 64.)

Annexure - Programme Management Activities (Details of Proposal under Sl. Nos. 146 and 194)

											Amount in Rs. (Lakhs)
S. No	Programme/ Theme	Unit of Measure	Unit Cost (Rs)	Quantity / Target	Planning Activities	Meetings, Workshops and Conferences	Monitoring, Evaluation and Supervision	Mobility Support and Field Visits (including SRM)	Operational Costs (Expenses on account of consumables, office expenses, operating expenses, contingency, admin expenses,	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
	LQAS Related cost	Per Block	2000				0			-	Ongoing activity : Background: State has a sanction of 180 VBDS for 314 Blocks. Hence one VBDS is assigned with >1 Block. Low endemic coastal districts have only one VBDSs to work for multiple Blocks (even more than 5) of the districts. Sanction of funds for LQAS per VBDS will be inadequate to conduct LQAS in multiple Blocks. Hence sanction may be given per Block instead of per VBDS. Funds for LQAS (for printing of formats etc) for 30 MTS/VBDS of 314 Blocks @ Rs. 1000/- per block x twice a year Budget Proposed: Rs. 2000 per block (As approved by the GoI, the expenditure under this head may be booked under Sl. No. 64. Accordingly, the budget has been shifted to Sl. No. 64.)
	NDCP Sub-Total				0.00	0.00	0.00	0.00	0.00	0.00	
Sl. No. 194	NCD										
	Organising Joint Reviews/ Convergence Meetings at all Levels (State/ District/ City/ Block/ Sector)									-	Programme wise fund allocation has not been made but fund has been pooled for utilisation as per the need following OSH&FW Society Norms. This is also done to limit PM cost within 9% of total budget. Budgeted under PM Activities_HSS (R & U)-Refer the same for details
	Monitoring & Supportive Supervision									-	Programme wise fund allocation has not been made but fund has been pooled for utilisation as per the need following OSH&FW Society Norms. This is also done to limit PM cost within 9% of total budget. Budgeted under PM Activities_HSS (R & U)-Refer the same for details
	NCD Sub-Total				0.00	0.00	0.00	0.00	0.00	0.00	
	HSS-Rural (including cross cutting activities)										
	Health Action Plans									0	State forms various Technical/ Domain Specific Sub Committees which finalise Component Specific Plan in consultation with Stakeholders from Districts/Cities, DPs, MCHs, Experts. Also Inputs incorporated from Block level Stakeholders.
	At State	Lumpsum	1000000	0	0					0.00	Budget is proposed for organising planning meetings at State, District & Block level for development of Health Action Plan, Dissemination of approved plan/ PIP with stakeholders & Printing of PIPs etc. Budget Details:
	At District	Per District	20000	1	0.2					0.20	State -@ Rs 10.00 Lakhs
	At Block	Per Block	2000	8	0.16					0.16	District @ Rs.20000/- per unit X 30 districts Block @ Rs. 2000/- per block X 314 Blocks

Annexure - Programme Management Activities (Details of Proposal under Sl. Nos. 146 and 194)

											Amount in Rs. (Lakhs)
S. No	Programme/ Theme	Unit of Measure	Unit Cost (Rs)	Quantity / Target	Planning Activities	Meetings, Workshops and Conferences	Monitoring, Evaluation and Supervision	Mobility Support and Field Visits (including SRM)	Operational Costs (Expenses on account of consumables, office expenses, operating expenses, contingency, admin expenses,	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
	Organising Joint Reviews/ Convergence Meetings at all Levels (State/ District/ Block/ Sector)										Proposal: Organising Joint Reviews/ Convergence Meetings at all Levels (State/ District/ Block/ Sectors) for Improved Health Outcomes Background: While several review and monitoring mechanisms exist at different administrative levels, these are often programme-specific and implemented in silos, limiting their effectiveness in addressing cross-cutting implementation challenges. Fragmented reviews, parallel reporting systems, and limited platforms for structured inter-departmental engagement have constrained timely decision-making and joint action at the field level. Major Features: Sector / Block/ District Level Planning -cum -review Meeting (Monthly): Meetings shall be taken up on scheduled days between 26th to 31st, every month at sector level, 1st to 5th at block level and 7th to 10th at district level. Validation of data shall be done between 6th-8th at State level to provide feedback to districts/ MCs for facilitating monthly review meetings under the chairpersonship of Collector& DM. State Level Planning -cum -review Meeting (Quarterly): Separate review meetings will be organised for key domains such as RMNCHAN, DCP, NCD, and Health Systems Strengthening (HSS), including civil works and MIS. May also refer Write-up Annexure for details placed at Programme Management Folder
	District/Sub District Level - Review Meetings										
	Sector Level Monthly Meetings	Per Meeting	2000	315		6.3				6.30	Background: Sector Level Meetings (Meeting to be taken up under the chairpersonship of Sector MO with presence of field staff and representatives from all key Deptts on monthly basis) Expected Participants- 40 (CHO, ANM, HW-M, ASHA, AWW & other Representatives of key deptts) Budget: (@ Rs. 2,000/- per meeting for refreshments & Contingency X 1288 Sector meetings X 9 meetings) Expected average 9 meetings to be conducted & thus, accordingly budgeted
	Block level Monthly Meetings	Per Meeting	5000	96		4.8				4.80	Background: Block level Meetings (Meeting to be taken up under the chairpersonship of Block Public Health Officer with presence of field staff and representatives from all key Deptts on monthly basis) Expected Participants -50 (CHO, ANM, HW-M, MPHS & other Representatives of key deptts) Budget: (@ Rs. 5,000/- per meeting for refreshments & Contingency X 321 Block / Urban Meeting X 12 meetings)

Annexure - Programme Management Activities (Details of Proposal under Sl. Nos. 146 and 194)

											Amount in Rs. (Lakhs)
S. No	Programme/ Theme	Unit of Measure	Unit Cost (Rs)	Quantity / Target	Planning Activities	Meetings, Workshops and Conferences	Monitoring, Evaluation and Supervision	Mobility Support and Field Visits (including SRM)	Operational Costs (Expenses on account of consumables, office expenses, operating expenses, contingency, admin expenses,	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
	District Level Monthly Meetings	Per Meeting	10000	12		1.20				1.20	Background: District Level Monthly Meetings (Meeting to be taken up under the chairpersonship of Collector & DM in presence of field staff and representatives from all key Deptts on monthly basis) Expected Participants -60 (Block MO, BPM and other Representatives of key deptts) Background: (@ Rs. 10,000/- per meeting for refreshments & Contingency X 30 district X 12 meetings)
	State Level– Component wise Review Meetings										
	RMNCHAN Quarterly Review Meeting	Per Meeting	220000	0		0.00				-	Background: RMNCHAN Quarterly Review Meeting (Meeting to be taken up under the chairpersonship of DFW in presence of all Programme Officers & Consultants from State & District and the duration of the meeting shall be for 2 days) All programmes under RMNCHAN shall be reviewed in this platform. Expected Participants – 60 per day Budget: Rs 220000/- X 4 Meetings
	Immunisation Quarterly Review	Per Meeting	150000	0		0.00				-	Background: Immunisation Review on Quarterly Basis (Meeting to be taken up under the chairpersonship of DFW in presence of all Programme Officers & Consultants from State & District and the duration of the meeting shall be for 2 days) Expected Participants – 90 per day Budget: Rs 150000/- X 4 Meetings
	NTEP Half Yearly Review Meeting	Per Meeting	110000	0		0.00				-	Background: Half yearly NTEP Meeting to be taken up under the chairpersonship of DPHO in presence of all Programme Officers & Consultants from State & District level and the duration of the meeting shall be for 1 day) Expected Participants – 60 per day Budget: Rs 110000/- X 2 Meetings
	NVBDCP Half Yearly Review Meeting	Per Meeting	110000	0		0.00				-	Background: Half yearly NVBDCP Meeting to be taken up under the chairpersonship of DPHO in presence of all Programme Officers & Consultants from State & District level and the duration of the meeting shall be for 1 day) Expected Participants – 60 per day Budget: Rs 110000/- X 2 Meetings
	NLEP Half Yearly Review Meeting	Per Meeting	110000	0		0.00				-	Background: Half yearly NLEP Meeting to be taken up under the chairpersonship of DPHO in presence of all Programme Officers & Consultants from State & District level and the duration of the meeting shall be for 1 day) Expected Participants – 60 per day Budget: Rs 110000/- X 2 Meetings

Annexure - Programme Management Activities (Details of Proposal under Sl. Nos. 146 and 194)

											Amount in Rs. (Lakhs)
S. No	Programme/ Theme	Unit of Measure	Unit Cost (Rs)	Quantity / Target	Planning Activities	Meetings, Workshops and Conferences	Monitoring, Evaluation and Supervision	Mobility Support and Field Visits (including SRM)	Operational Costs (Expenses on account of consumables, office expenses, operating expenses, contingency, admin expenses,	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
	DCP Programme Review: NVHCP	per Participant	6700			0.00				-	Review meeting @ Rs 6700/participant x 66 TC/MTC x 2 participants from each TC/MTC (As approved by the GoI, the expenditure under this head may be booked under Sl. No. 81. Accordingly, the budget has been shifted to Sl. No. 81.)
	Overall –IDSP & Other Half yearly Programme Review	Per Meeting	110000	0		0.00				-	Background: DCP Programme Review: (Overall –IDSP & other) Half yearly Meeting to be taken up under the chairpersonship of DPHO in presence of all Programme Officers & Consultants from State & District level and the duration of the meeting shall be for 1 day) Expected Participants – 60 per day Budget: Rs 110000/- X 2 Meetings
	NCD Programme Review	Per Meeting	220000	0		0.00				-	Background: NCD Programme Review: Meeting to be taken up under the chairpersonship of DPHO in presence of all Programme Officers & Consultants from State & District level and the duration of the meeting shall be for 2 days Expected Participants – 60 per day Budget: Rs 220000/- X 4 Meetings
	HSS Half yearly Programme Review	Per Meeting	250000	0		0.00				-	Background: HSS Programme Review (Overall for DPMs, CPMs, CAMs & DAMs): Meeting to be taken up under the chairpersonship of MD NHM in presence of all Programme Officers & Consultants from State & District Level and concerned Development partners. The duration of the meeting shall be for 2 days Expected Participants – 70 per day Budget: Rs 250000/- X 2 Meetings
	CPHC Half yearly Programme Review	Per Meeting	110000	0		0.00				-	Background: CPHC Programme Review: Half yearly Meeting to be taken up under the chairpersonship of MD NHM in presence of all Programme Officers & Consultants from State & District Level and District Level and concerned Development partners. The duration of the meeting shall be for 1 day. Expected Participants – 60 per day Budget: Rs 110000/- X 2 Meetings
	Civil Work Half yearly Review Meeting	Per Meeting	150000	0		0.00				-	Budget: Half Yearly Civil Work Review Meeting to be taken up under the chairpersonship of MD NHM in presence of all Programme Officers & Consultants at State & District level and District Level and concerned Development partners. The duration of the meeting shall be for 1 day on half yearly basis. Expected Participants – 70 per day Budget: Rs 150000/- X 2 Meetings

Annexure - Programme Management Activities (Details of Proposal under Sl. Nos. 146 and 194)

											Amount in Rs. (Lakhs)
S. No	Programme/ Theme	Unit of Measure	Unit Cost (Rs)	Quantity / Target	Planning Activities	Meetings, Workshops and Conferences	Monitoring, Evaluation and Supervision	Mobility Support and Field Visits (including SRM)	Operational Costs (Expenses on account of consumables, office expenses, operating expenses, contingency, admin expenses,	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
Sl. No. 194	MIS Half Yearly Review Meeting	Per Meeting	150000	0		0.00				-	Background: Half Yearly MIS Review Meeting to be taken up under the chairpersonship of MD NHM in presence of all Programme Officers & Consultants from State & District Level & District Level and concerned Development partners. The duration of the meeting shall be for 1 day on quarterly basis. Expected Participants – 70 per day Budget Not Approved
	Community Process Half yearly Review Meeting	Per Meeting	110000	0		0.00				-	Background: Half yearly Community Process Review Meeting to be taken up under the chairpersonship of MD NHM in presence of all Programme Officers & Consultants from State & District Level & concerned Development partners. The duration of the meeting shall be for 1 day on quarterly basis. Expected Participants – 60 per day Budget: Rs 110000/- X 2 Meetings
	Quality Half yearly Review Meeting	Per Meeting	110000	0		0.00				-	Background: Half yearly Quality Review Meetings are planned. These are planned under the chairpersonship of MD NHM in presence of all Programme Officers & Consultants from State & District Level & concerned Development partners. The duration of the meeting shall be for 1 day on quarterly basis. Expected Participants – 60 per day Budget: Rs 110000/- X 2 Meetings
	Free Drugs & Diagnostic Services Half yearly Review Meeting	Per Meeting	110000	0		0.00				-	Background: Half yearly Free Drugs & Diagnostic Services are planned. These are planned under the chairpersonship of MD NHM in presence of all Programme Officers & Consultants from State & District Level & concerned Development partners. The duration of the meeting shall be for 1 day on quarterly basis. Expected Participants – 60 per day Budget: Rs.110000/- X 2 Meetings
	Convergence Meetings										Convergence Meeting at Block/ District/ State Level (Quarterly): Programme wise convergence meetings are discouraged. Convergence meetings are planned at Block, District & State Level respectively for all programmes under Health & Family Welfare Dept. as per schedule (1st week at Block level, 2nd week at district level & 3rd/4th week at State). There will be scope & means for escalating unresolved issues if any. It is planned under the chairpersonship of BDO at Block level, Collector & DM at District & Secretary Health & Chief Secretary at State Level. 7 Line Depts. i.e. W&CD, S&ME, ST/SC, Panchayat Raj Deptt, RWSS, RD & PWD shall participate in the meeting. MC & City Level Convergence Meetings are also integrated with the said meeting

Annexure - Programme Management Activities (Details of Proposal under Sl. Nos. 146 and 194)

											Amount in Rs. (Lakhs)
S. No	Programme/ Theme	Unit of Measure	Unit Cost (Rs)	Quantity / Target	Planning Activities	Meetings, Workshops and Conferences	Monitoring, Evaluation and Supervision	Mobility Support and Field Visits (including SRM)	Operational Costs (Expenses on account of consumables, office expenses, operating expenses, contingency, admin expenses,	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
	State Level Convergence Meetings	Per Meeting	25000	0		0.00				-	1. At the Level of Chef Secretary : State Level (Organise under the Chairpersonship of Chief Secretary on half yearly basis & attended by 7 Key Deptts i.e. W&CD, Panchayat Raj, School & School & Mass Education, SC&ST Development Deptt , RWSS, R&B and RD) ToR- Policy Decisions on addressing implementation gaps identified at the field level Budget: Rs. 50,000/- (@ Rs.25,000/-per meeting X 2 meetings) 2. At the level of Secretary, Health (Quarterly) : Rs.1.00 Lakhs (@ Rs.25,000/-per meeting X 4 meetings)
	District Level Convergence Meetings	Per Meeting	10000	4		0.40				0.40	District/ Municipal Corporation City Level (Organise under the Chairpersonship of Collector –cum-DM in the district and Commissioner at MCs with presence of all 7 key Deptts on quarterly basis in 30 districts & 5 Municipal Corporation Cites) Budget: (@ Rs.10,000 per meeting for refreshments & Contingency X 35 Units X 4 meetings) ToR Same as above, but the unresolved issues shall be escalated to State level for action
	Block Level Convergence Meetings	Per Meeting	2000	32		0.64				0.64	Block Level (Organise under the chairpersonship of BDO on quarterly basis with attendance of key Deptts) Budget: (@ Rs. 2,000/- per meeting for refreshments & Contingency X 4 meetings X 314 Blocks)
	Monitoring & Supportive Supervision										Background: Monitoring & Supportive supervision is essential to ensure effective program implementation, quality assurance, and course correction in various health programs. Regular field visits, debriefings, and multi-disciplinary reviews strengthen the national programs to attain their objectives. It addresses gaps in service delivery, builds capacity of field staff, facilitates real-time monitoring, and strengthens accountability across Program Management Units (PMUs) from state to sector levels. As per the program mandate, all Program Managers and Program Officers are required to undertake a minimum number of field visits, either as specified in their Terms of Reference (ToR) or based on programmatic requirements. Hence a budget is proposed in the PIP to facilitate smooth supportive supervision and monitoring visits across all levels. Here in the Proposal State has proposed for hybrid model – combining rented vehicles and a common vehicle pool – which enables flexible, timely, and cost-effective mobility support. It ensures uninterrupted field operations by balancing dedicated transport availability with on-demand hiring options, thereby improving accessibility and responsiveness in Monitoring & Supportive supervision activities.

Annexure - Programme Management Activities (Details of Proposal under Sl. Nos. 146 and 194)

											Amount in Rs. (Lakhs)
S. No	Programme/ Theme	Unit of Measure	Unit Cost (Rs)	Quantity / Target	Planning Activities	Meetings, Workshops and Conferences	Monitoring, Evaluation and Supervision	Mobility Support and Field Visits (including SRM)	Operational Costs (Expenses on account of consumables, office expenses, operating expenses, contingency, admin expenses,	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
	State Level – Periodic Field Visits	Per visit	20000	0				0.00		-	Periodic Field Visits- Planned 60 visits per Month (HSS Division- 20 visits + RMNCHAN Division -10 visits + NCD Division -10 visits DCP Divisions -15 visits, Nursing Education Division -5 visits) Budget: @ Rs.20000/- per visits (Visit in a team of min 2 Programme Officer/ Consultant for min 2 days & the cost includes travel, DA & stay) X 12 months to districts X 60 visits
	State Level- State Review Mission	Per Team	100000	0				0.00		-	10 multi disciplinary teams (representatives from all major divisions i.e. Finance, MIS, Programme) have been formed, lead by Officers of Director level and assigned the task to visit 3 districts per team at least thrice in a year. The visit is followed by a debriefing meeting, chaired by collector & DM of respective district. The team constituting of 9-10 members & minimum duration of each visit is minimum of 3 days. Budget: Expected visit 10 teams X 9 visits in a year X @ 100000/- (Including TA, DA & Stay)
	District Level –Periodic Field Visits										1. Vehicle for CDM& PHO -cum- District Mission Director with DOL (1): @ Rs 40000/- per month X 1 Vehicle X 12 Months= Rs.4.80 Lakhs 2. Common Pool Vehicles with DOL (2) @ Rs 40000/- per month X 2 Vehicles X 12 Months= Rs.9.60 Lakhs (It will help in arranging vehicle without delay) 3. Pool Fund for hiring vehicles per requirement (20 Trips per month) @ Rs.2000/- X 20 Trips per month X 12 months= Rs.4.80 Lakhs (Additional requirement of vehicle if any shall be met out of this pool fund.) 4. DA/ Travel allowance as applicable, to be reimbursed as per OSHFWS Norms @ 1.80 Lakhs per district Total Budget: @Rs.21.00 Lakhs per district 5. Additional fund for 1 District Urban NTEP Unit (Bhubaneswar): @Rs.2.00 Lakhs
	Vehicle for CDM& PHO -cum- District Mission Director with DOL	Per Vehicle/ PM	40000	1				4.80		4.80	
	Common Pool Vehicles with DOL	Per Vehicle/ PM	40000	2				9.60		9.60	
	Pool Fund for hiring vehicles per requirement	Per Vehicle	2000	20				4.80		4.80	
	DA/ Travel allowance	Per District	180000	1				1.80		1.80	
	Additional fund for 1 District Urban NTEP Unit	Per Unit	200000	0				0.00		-	
	Block Level- Periodic Field Visits	Per Block	500000	8				40.00		40.00	1. Pool Fund for hiring vehicle with POL as per requirement (15 Trips per month) @ Rs.2000/- X 15 trips per month X 12 months: Rs. 3.60 Lakhs 2. Motor Cycle DOL & Allowances to STS (319), STLS (109), VBDS -30 (Non GFATM District): DOL @ Rs. 60000/- per annum + Two-wheeler maintenance Cost -20000/- Total: Rs.80000/- per Block per annum 3. DA as applicable as per OSHFWS Norms @ 60000/- per Block Total Budget: @Rs.5.00 Lakhs X 314 Blocks
	Sector Level – Periodic Field Visits	Per Sector/ per annum	20000	35				7.00		7.00	Pool Fund for Field Visits @ Rs.20000/- Per annum per sector X 1288 Sectors Budget revised (proposed Rs. 20000 instead of Rs. 30000) to limit the same within 9% PM Cost

Annexure - Programme Management Activities (Details of Proposal under Sl. Nos. 146 and 194)

											Amount in Rs. (Lakhs)
S. No	Programme/ Theme	Unit of Measure	Unit Cost (Rs)	Quantity / Target	Planning Activities	Meetings, Workshops and Conferences	Monitoring, Evaluation and Supervision	Mobility Support and Field Visits (including SRM)	Operational Costs (Expenses on account of consumables, office expenses, operating expenses, contingency, admin expenses,	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
	Addl. Fund for 5 Urban NTEP Units at 5 Municipal Corporation Cities	per Unit	100000	0				0.00		-	Mobility Support for Supportive Supervision : @Rs.1.00 Lakhs per unit X 5 NTEP Urban Units
	Administrative Contingencies for Programme Management Units at State, District & Block Level										Background: State Programme Management Unit (SPMU), District PMUs (DPMUs), and Block PMUs (BPMUs) have been established to manage and monitor the implementation of various health system strengthening and public health initiatives across rural and urban areas. Effective functioning of these units requires adequate operational support for logistics, communication, maintenance etc.. Administrative contingency funds are therefore essential to meet routine yet critical expenses such as local conveyance, office maintenance, consumables, minor repairs, internet connectivity, and hospitality for visiting officials. These expenditures ensure uninterrupted day-to-day operations and enable timely coordination, reporting, and programme execution across all levels of management. Hence the Administrative contingency budget is Proposed at multiple levels — state, district, and block to integrate both rural and urban requirements under the Health Systems Strengthening (HSS) component.
	State Level- Administrative Contingencies										State Level State Programme Management Unit has been established at Mission Directorate (MD)& extended SPMU has been attached with the Director Family Welfare (DFW), Director Public Health (DPH), Director Nursing Education (DNE) and Director Health Services (DHS), State Institute of Health and Family Welfare (SIHFW) respectively. 1. Hiring of Vehicles for local conveyance & attending Meetings, Training etc.: 15 (MD-10, DFW-2 DPH-2, DHS-1) @ Rs.35,000/- PM (Including DOL) X 15 Vehicles X 12 months = Rs.63.00 Lakhs 2. Broadband Internet Charges – Separately proposed as part of IT interventions (Budget not included here) Budget Proposed under HSS-18_IT Interventions_ Sl. No. 203
	At State Level	Lumpsum	2.6E+07	0					0.00	-	

Annexure - Programme Management Activities (Details of Proposal under Sl. Nos. 146 and 194)

											Amount in Rs. (Lakhs)
S. No	Programme/ Theme	Unit of Measure	Unit Cost (Rs)	Quantity / Target	Planning Activities	Meetings, Workshops and Conferences	Monitoring, Evaluation and Supervision	Mobility Support and Field Visits (including SRM)	Operational Costs (Expenses on account of consumables, office expenses, operating expenses, contingency, admin expenses,	Approval FY 2026-27 (Rs. In Lakhs)	State Remarks
	Administrative Contingencies- (ATDC, Cuttack & Urban TB Unit, BBSR)	Per Unit	165000	0					0.00	-	3. Contingency & Consumables (Paper, Cartridges stationeries etc) @ Rs.1,45,000/- PM (MD-Rs.1,00,000/- DPH-Rs.15,000 /- + DFW-Rs.15000 /- + SIHFW-Rs.5000/-DHS-Rs.5000/- DNE-Rs. 5000/-) X 12 months= Rs.17.4 Lakhs 4. Support Staff (House Keeping & Security) for 45 Personnels (lumpsum) = Rs. 85.00 Lakhs 5. Hospitality (Stay, travel etc.) for National Monitors (Lump sum): Rs.10.00 Lakhs 6. Repair/Maintenance/replacement of office EIF: Rs.11.90 Lakhs 7. Other Logistic Support (lumpsum)= Rs. 73.58 Lakhs 8. Administrative Contingencies- STDC (ATDC, Cuttack & Urban TB Unit, BBSR): STDC (ATDC, Cuttack & Urban TB Unit, BBSR) @Rs.1.65 lakhs X 2 = Rs.3.30 Lakhs Total Budget: Rs.264.18 Lakhs
	District Level- Administrative Contingencies	Per District	749000	1					7.49	7.49	District Programme Management Unit (DPMU) District Programme Management Units have been established at all 30 districts in the State Similarly City Programme Management units have been functional at 5 Municipal Corporation Cities. 1. Contingency & Consumables (Paper, Cartridges stationeries etc) @ Rs 15000/- PM X 12 months= Rs.1.80 Lakhs 2. Support Staff (House Keeping & Security) 2 Personnel @ Rs 600 per day X 26 days PM X 12 months: Rs. 3.74 Lakhs 3. Broad Band Internet Charges – Separately proposed as part of IT interventions Budget Proposed under HSS-18_IT Interventions_ Sl. No. 203 4. Hospitality (Stay, travel etc.) for State/ National Monitors (Lump sum): Rs.50,000 5. Repair/Maintenance/replacement of office EIF: Rs. 1.75Lakhs Total Budget: Rs.749000/- per districts
	Block Programme Management Unit (BPMU)- Administrative Contingencies	Per Block	70000	8					5.60	5.60	1. Contingency & Consumables (Paper, Cartridges stationeries etc) @ RS.50,000/- per annum: 2. Support Staff (House Keeping & Security) 2 Personnel- To be managed with Manpower engaged under NIRMAL for facilities 3. Broad Band Internet Charges – Separately proposed as part of IT interventions Budget Proposed under HSS-18_IT Interventions_ Sl. No. 203 4. Repair/Maintenance/replacement of office EIF: Rs.0.20 Lakh Total Budget: Rs.0.70 Lakhs per block
	IT Interventions & Systems- Procurment of new Computers & Peripherals at all levels for PMU Staff									0	Procurement of new Computers & Peripherals at all levels Budget: @Rs.60000/- X 990 = Rs.594.00 Lakhs (Budget to be met out of State Budget) Details Justification & Budget is at IT Peripherals Write-up Annexure
	HSS-Rural Sub-Total				0.36	13.34	0.00	68.00	13.09	94.79	
	Total (Sl No.194)				0.36	13.34	0.00	68.00	13.09	94.79	
	Total Budget Proposed (Sl 146+ Sl 194)				0.36	13.34	-	68.00	13.11	94.81	