Trends and Analysis of Government Health Expenditure in Andhra Pradesh

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I. Background

Data from the State Health Accounts¹ and the Indian National Health Accounts² indicate a total health spending of Rs. 8998 crore in Andhra Pradesh in 2001-02. This works out to 5.94% of the GSDP. Government health expenditure which includes expenditure by central, state and local governments on provision of health services to the general population and health care of their employees account for 18.48% of the total health expenditure. Households contribute the major share and accounts for about 73% of the total health expenditure in the state. Funding by external sources which accounts for 3.72% of the total expenditure include external aid received by state government and nonprofit agencies. Spending by public and private enterprises on health care of their employees contribute to about 5% of the total health expenditure.



Figure-1: Percent Distribution of Health Expenditure in AP by Source of Funds (2001-02)

Source: Estimates of State Health Accounts for AP (2001-02) revised using household health expenditure data from the National Health Accounts India (2001-02)

¹ George C.K and Pattnaik G.S. State Health Accounts for Andhra Pradesh, 2001-02, Institute of Health Systems, Hyderabad, 2004

² National Health Accounts India 2001-02, Ministry of Health and Family Welfare, Government of India, 2006

It is seen that the major financial burden of ill health falls on the households. An analysis of financing of out of pocket expenses on hospitalization by economic status is revealing (Figure-2). The poor and the better off, both bear a substantial financial burden on account of out of pocket expenditure on hospitalization. While households APL are to some extent able to meet expenditure by dipping into their savings or being reimbursed by some form of insurance mechanism, BPL households resort to selling their assets and borrowing. The greater reliance of poor groups on borrowing, often at high rates of interest is more marked in rural areas of the State (76%) than urban areas (54.1%).³



Figure-2: Financing Hospitalization Expenses in AP, by source and economic status

Source: Estimates based on NSS 52nd Round as reported in IHSG (2003)

A key health policy goal of the government is to alleviate the heavy financial burden on households due to ill health. Government's ability to achieve equity, provide public goods type of services and handle market failures is linked to the quantum and composition of health sector expenditure. In thinking about new strategies to address health policy goals, it is therefore crucial to know where funds for health care by the government are coming from and how they are being utilized. This paper contributes to the development of the Medium Term Health Expenditure Framework for the Government of Andhra Pradesh by assessing the sources and uses of funds for provision of health care by the Department of Health, Medical and Family Welfare (DoHMFW) and other government agencies. The remainder of the paper undertakes the following main tasks. Section II outlines the conceptual framework and methods used for health expenditure analysis. Section III examines the main trends in aggregate spending by the DoHMFW and its distribution. The section also provides a preliminary discussion of the way DOHMFW spending has been financed in recent years. Section IV

³ IHSG (2003). A medium term strategy and expenditure framework for health in Andhra Pradesh. Report submitted to DoHMFW, GoAP and DfID, India by International Health Systems Group, Harvard School of Public Health, Boston, 2003.

analyzes the sources and uses of funds by other health care agencies of the State government.

II. Conceptual Framework for Health Expenditure Analysis

A Defining Health Expenditure

The World Health Organization (WHO) makes a distinction between health services and health related services⁴. "Health services" mainly consist of public health services, hospital services, education and training for health services and alternate systems of medicine. "Health related services" include education, water supply, sewerage and sanitation, housing for poor, community development, nutritional and other welfare programmes which could have a bearing on health status. Health expenditure has been defined to include expenditure on health services as well as the health related services.⁵ However in health accounting, only expenditure on activities whose 'primary purpose' is improving health are included in total estimates of health spending⁶. Therefore expenditure on health related services which have multiple objectives, are excluded from our analysis. Hence nutritional and other welfare programmes which could have a bearing on health status, but are primarily anti poverty measures, are excluded from the analysis. However, we have included expenditure on ICDS programme, as the primary objective of the programme is promotion of health of mothers and children. While education is a health related service and hence not included within the health accounts boundary, expenditure on medical education and training is considered as health expenditure.

For the purpose of the study we have defined health expenditure as all expenditures for activities whose primary purpose is health improvement for the State during a period of one year (April to March). Health expenditure includes spending on primary care, secondary care, tertiary care, administration of health services and programmes, medical education, training and research and capital investment for health purpose.

B National Health Accounts Framework

We use a National health accounts (NHA) framework for Health Expenditure Analysis. NHA is an internationally accepted tool for summarizing, describing and analyzing health care financing and expenditure within a particular health system. Health expenditure

⁴ World Health Organization, Development of indicators for monitoring progress towards health for all by the year 2000, Geneva, 1981

⁵ Mahapatra Prasanta. Government expenditure on health in Andhra Pradesh since the eighties: Has it been appropriate? IHS Working Paper 09/1994, Institute of Health Systems, Hyderabad, 1994
⁶ World Health Organization. Guide to producing national health accounts- with special applications for low

^o World Health Organization. Guide to producing national health accounts- with special applications for low income and middle income countries, 2003, Geneva

consists of financial outlays that service the health system. NHA trace the flow of resources invested and consumed in the production of health and answers questions such as:

- Who in the country pays for health care? How much do they spend and on what types of services?
- Who manages and organizes funds for health care?
- Who are the recipients of health care funds?
- How are funds distributed across different health services?
- Who benefits from health expenditures?

The NHA framework adopts its basic principles of health accounting from the System of Health Accounts (SHA) of the Organization for Economic Cooperation and Development (OECD). The SHA provides the International Classification for Health Accounts (ICHA), which classifies health care entities and categorizes each type of health expenditure. Based on health policy requirements and form in which data available in the country, the classification of health accounts have been modified by the Government of India⁷. The National Health Accounts framework identifies four principal entities within a health system:

1. Financing Sources

Sources refer to the entities from which financial resources are generated for health. Health spending by sources answer the question "who pays for health care?" In the Andhra Pradesh context, sources include: governments (state, central and local), quasi government organizations, public sector enterprises, private sector enterprises, NGOs, households and external assistance.

2. Financing Agents

Financing Agents are institutions or entities that channel funds provided by financing sources and use the funds to pay for, or purchase, the activities inside the health accounts boundary. Examples are State and Central Ministries for Health, local governments, house-holds, NGOs, social and private insurance, private and public enterprises etc. This category sheds light on the question "who manages and organizes funds for health care?"

3. Providers of Care

They are the end users or final recipients of health care funds. They are the entities which deliver health services. They include hospitals and dispensaries under MoHFW, SDH local bodies, social insurance, quasi government bodies, private sector and NGOs; private doctors; traditional care providers; Trained Birth Attendants; drug outlets; diagnostic centers;

⁷ National Health Accounts India 2001-02, Ministry of Health and Family Welfare, Government of India, 2006

medical education and training institutions; research and development institutions; providers of collective health services such as public health and RCH programs; general health administrators and health insurance administration. This category provides information on the question "To whom does the money go?"

4. Functions of Care

Functions refer to the services or activities that providers deliver with their funds. Information at this level answers the question" what type of service product or activity was actually produced? Functions include: primary care, secondary care, tertiary care, disease control programmes, RCH programmes, health administration, medical education, training and research and capital formation.

C Materials and Methods

Government Health Expenditure includes that on:

- 1. Department of Health, Medical and Family Welfare (DoHMFW) and In Kind transfer of materials and supplies from MoHFW
- 2. Other line departments of the state government such as the Labour, Women and Child Welfare and Tribal Welfare.
- 3. Government organized Societies for disease control and family welfare
- 4. Provision/Reimbursements for health care of its employees

In the current analysis we focus on expenditure by departments and societies. Data for analysis is from budget documents of respective departments and income and expenditure statements of respective societies. Data was analyzed up to "detailed head" level of the budgets of departments using National Health Accounts framework adopted by the Government of India⁸ to understand trends in public health spending.

Analysis of health expenditure of GoAP departments includes (a) entire expenditure of DoHMFW (b) expenditure on ESIS by Department of Labor (c) expenditure on Tribal Health Services by Department of Tribal Welfare, and (d) expenditure on ICDS by Department of Women Welfare and Child Welfare. Expenditure of these departments are included in the Social Services Sector. The corresponding sub-sectors and major heads under which expenditure is recorded is given in Table-1

⁸ National Health Accounts India 2001-02, Ministry of Health and Family Welfare, Government of India, 2006

			пог пеаш	n Experian	ture in Budget
Sub-Sector	Department	HoD			Major Heads
Health and	DoHMFW	-	Plan	Non Plan	2059 Public Works
Family					2210 Medical and Public Heath
Welfare		HMFW	2210	2210	2211 Family Welfare
				2059	2225 Welfare of SCs & STs
				2251	2235 Social Security and Welfare
		Medical	2210 4210	2059 2210	2251 Secretariat Social Services
		Education	6210	4210 6210	3435 Ecology and Environment
		Health	2210	2059	3454 Census Surveys & Statistics
			2225	2210	4210 Capital Outlay on Medical
			3454	2211	and PH
			4210	2225	4211 Capital Outlay on Family
				3454	Welfare
				4210	6210 Loans for Medical and PH
		FW	2211		
			4211		
		IPM	2210	2210	
		AYUSH	2059	2210	
			2210	_	
		DCA	2059	2210	
			2210		
Labour and	Department	Insurance	2210	2210	
Labour Wel-	of Labour	Medical			
fare		Services			
Welfare of SC,	Department	Tribal Wel-	2225	2225	
ST and BC's	of Tribal	fare			
	Welfare				
Social Welfare	Department	Women De-	2235		
and Nutrition	of Women,	velopment			
	Child and	and Child			
	Disabled	Welfare			
	Welfare				

Table 1: Classification of Health Expenditure in Budget

III. Analysis of Department of Health, Medical and Family Welfare (DoHMFW) Expenditure

1. Total DoHMFW Spending

Annex- 1 provides details of overall health care spending by DOHMFW during the thirty- year period from 1975-76 to 2005-06. For the year 2005-06, the expenditure figures are based on actual expenditure estimated by the Department of Finance. For all other years, figures are based on actual expenditure reported in the Demand for Grants of the Government of Andhra Pradesh. The data indicate that overall DOHFW spending has been increasing over time both in terms of current prices and constant prices. The general trend of an increase has held consistent throughout the period, except for a dip in the early 1990s and more recently in 2002-03 (Figure-3).



Figure 3: Trends in DoHMFW spending in Current and Constant Prices (1975-2006)

Aggregate and per capita real DOHMFW spending increased by 250 % and 107% respectively, over the period from 1975 to 2005. However with the exception of the period between 1995-2000, growth rate of health spending in terms of current and constant prices and per capita has been declining (Table-2). The growth rate of DoHMFW spending in the last decade was 7.94% and 4.27% in current and constant prices respectively. While the growth rate in aggregate real health spending during 1996-2000 was 8.55% in 1996-2000, the subsequent 5 year period between 2000-01 and 2005-06 recorded a growth rate of only 0.89% . The growth rate in aggregate real health spending during the latter period is lower than the rate of population increase in the state. As a result this period had a negative growth rate of -0.28% in real per capita health spending.

Growth Rate	1996-2000	2001-2005	1996-2005			
Total Expenditure (Current Prices)	14.49	4.65	7.94			
Total Expenditure (1993-94 Prices)	8.55	0.89	4.27			
Total Expenditure Per Capita (1993-94 Prices)	6.87	-0.28	3.2			
Non Plan Expenditure	14.59	7.7	9.45			
Plan Expenditure	14.31	-0.88	5.34			

Table-2: Growth Rates of DoHMFW Expenditure

Figure-4 indicate that DOHMFW health expenditures, whether taken as a proportion of total state domestic product (GSDP), or total government spending have been steadily declining. From about 1% of the GSDP or 4% of total government spending in 1997-98, DoHMFW spending has declined to 0.71% of the GSDP or 3.32% of the total government spending in 2005-06. This suggests that health has not been accorded any much priority in

terms of amounts allocated to it, relative to other activities of the government.



Figure-4: DoHMFW Spending as % of GSDP and Total Public Expenditure (1975-2005)

2. Plan and Non-Plan Expenditure

The Budget is organized in terms of Plan and Non Plan Expenditure. Non-plan expenditure reflects expenditure of the government on maintaining the current level of services. In other words, it reflects the administrative expenses of the government. On the other hand, plan expenditure of the government refers to the expenses incurred by the government towards the projects that are planned as part of the Five-Year Plans of the state.

Table-3 present details on the composition of DOHMFW expenditure since 1990. In the first half of the 1990s Non-plan expenditures accounted for around 70 percent of all spending by DOHFW. In the latter half of the 1990s Non Plan spending declined to around 60% of the DoHMFW expenditure. This decline was mostly on account of increases in expenditures on plan activities supported by the World Bank under the APFRP and the APERP projects. With these projects completed share of Non Plan expenditure has been around 65-68% in the recent years.

In the last decade the growth rate of Non Plan and Plan Expenditure was 9.45% and 5.34% respectively. While the growth rate in non plan and plan expenditure during 1996-2000 was 14.59% and 14.31% respectively in 1996-2000, the corresponding growth rates in the subsequent 5 year period between 2000-01 and 2005-06 was 7.7% and -0.88%. The high rate of growth in plan expenditure during the first half of the decade was primarily on account of the different externally aided projects. The negative growth in the latter half of the past decade is attributable to completion of these projects and a decline in central funding.

Year	DoHFW Hea	alth Expenditure	% Share in Total Expenditure		
	Plan	NonPlan	Total	Plan	Non Plan
1990-91	95	236	331	28.68	71.32
1995-96	182	423	605	30.08	69.92
1996-97	280	490	770	36.39	63.61
1997-98	331	519	850	38.97	61.03
1998-99	465	574	1,039	44.76	55.24
1999-00	459	706	1,165	39.44	60.56
2000-01	464	830	1,294	35.88	64.12
2001-02	526	814	1,340	39.25	60.75
2002-03	478	858	1336	35.78	64.22
2003-04	506	946	1,452	34.85	65.15
2004-05	490	1002	1492	32.84	67.16
2005-06	497	1095	1592	31.22	68.78

Table-3: Trends in Non Plan and Plan Expenditure of DoHMFW (1990-2005)

3. Expenditure by Resource Categories

Table-4 provides distribution of DoHMFW by major expenditure accounts. In recent years relative share of debt repayments has increased to about 4% of the total expenditure. Share of Capital expenditure has varied between 5% and 0.35% of the total expenditure.

	DoHMFW Expenditure (Rs. Cr)			% Share			
Year	Revenue	Capital	Loans	Total	Revenue	Capital	Loans
1998-99	1037.68	1.32		1,039	99.87	0.13	
1999-00	1104.75	60.25		1,165	94.83	5.17	
2001-02	1246.06	47.94		1,294	96.30	3.70	
2001-02	1287.15	53.31		1,340	96.06	3.98	
2002-03	1302.94	33.47		1336	97.53	2.51	
2003-04	1420.77	8.23	23	1,452	97.85	0.57	1.58
2004-05	1428.79	15.21	48	1492	95.76	1.02	3.22
2005-06	1520.47	5.49	65	1592	95.5	0.35	4.08

Table-4: Share of Major Expenditure Accounts in DoHMFW Expenditure

Annex-2 presents information about the composition of revenue expenditures, both plan and non-plan, by major resource categories. The data indicate that wage and salary expenditures constitute a substantial chunk of DOHMFW spending, in excess of 60 percent for 2003-4, and even higher in earlier years. Wage and salary component includes expenditure on pay, allowances, wages and salary grants. It is possible that a part of the expenditures under the "grants" category may also constitute wage and salary expenses so that the actual proportion going to establishment charges may be even higher than indicated in the Annex-2. Wages and salaries has declined in the last few years, from a high of 72 percent of revenue expenditure in 1996-96, to current levels of about 65%. One reason for this tendency could

be the freeze in recruitment in recent years as a result of which number of posts are lying vacant.

Drugs and the expenditure head "materials and supplies" constitute a second major source of spending. The share of drugs and materials and supplies has declined from around about 20% percent of DOHFW spending in 1975 to about 7.4% in 1999-2000. In recent years spending on this account has marginally increased to about 10% of the total health spending. The share of drugs alone is only about 6% of the total spending data possibly indicating a problem area in so far as drug availability and hence of quality of care at public facilities is concerned.

A third area of major expenditures is "operations and administration" accounting for roughly one-fifth of all DOHMFW spending. Expenditures in this category include "other grants in aid", as well as expenses associated with office travel, miscellaneous office expenses, rent payment, fuel and publications, and contractual expenses. Increases in its share since the mid-1990s are due partly to increases under the head "other grants in aid" funded by external support under APFRHSP and APERP. In more recent years the increase in its share has been mainly due to greater reliance on contractual manpower due to a freeze in government recruitment.

In addition to the above, small portions of D0HMFW spending are allocated for stipend and scholarship support (between 1-2 percent) and maintenance and minor works relating to buildings and equipment. Sub component wise details of expenditure under each resource category for the last four years are provided in Annex 3.1- 3.4

Table-5 provides details of resource category wise composition of plan and non plan expenditure in recent years. Between two thirds and three fourths of the non plan expenditure has been on wages and salary. Given that these are establishment charges are which are potentially committed expenditures, there is very little flexibility for changes in allocation of DoHMFW spending. On the other hand wages and salary component accounts for 40-50% of the Plan spending suggesting a greater degree of flexibility in planning for changes in allocation of DOHMFW spending, relative to non-plan spending. However this may not be readily feasible as about 70 percent of all plan expenditures, is on specific programmes supported by external funding and centrally sponsored schemes of the Government of India. The Department is further constrained since about 4.5% of its funds are earmarked for loan repayments (2005-06)

Year	Salaries	Stipend	Opera-	Material	Maintenance	Capital	Loans
	and Wag-		tions &	& Sup-	& Minor		
	es		Admin	plies	Works		
2002-03							
Non Plan	73.94	0.19	14.59	11	0.28	0	0
Plan	42.88	3.83	38.42	5.39	2.49	7.01	0
Total	62.83	1.49	23.11	8.99	1.07	2.51	0
2003-04							
Non Plan	69.56	0.16	16.58	11.09	0.18	0	2.43
Plan	50.8	2.73	34.56	8.07	2.21	1.63	0
Total	63.02	1.05	22.85	10.04	0.89	0.57	1.58
2004-05							
Non Plan	66.56	0.25	14.46	10.34	3.60	0.00	4.79
Plan	52.23	4.38	26.35	10.02	3.92	3.10	0.00
Total	61.85	1.61	18.36	10.24	3.70	1.02	3.22
2005-06							
Non Plan	70.63	0.20	12.66	9.50	2.97	0.00	4.04
Plan	47.45	4.88	31.01	9.55	0.61	1.1	5.2
Total	62.96	1.75	19.01	9.52	2.19	0.35	4.08

Table-5: Resource cost wise composition of plan and non plan expenditure (2002-2005)

4. Expenditure by Functions of Care

Heads of Department wise expenditure on functions for the years 2002-03 to 2004-06 is provided in Annex 4.1-4.4. Expenditure has been disaggregated in terms of core functional areas such as provision of primary, secondary and tertiary care services; medical education, training and research; capital formation; debt repayment, quality control of food, water and drugs; and manufacture of drugs and vaccines.

While expenditure on direction and administration on health programmes, training and capital formation are normally taken separately in the health accounts framework, from a policy perspective these are expenditures incurred for provision of services. Similarly expenditure on quality control of food, water and drugs and manufacture of vaccines are that on primary preventive services. Accordingly these expenditures have been included in respective services and expenditure on various functions estimated for the last two years (Table-6). Expenditure on different functions has been estimated on the basis of allocation to sub heads. Details of sub heads included under each function is provided in Annex 6.1 and 6.2

	Expenditur	e (Rs lakh)	% Share	
Functions	2004-05	2005-06	2004-05	2005-06
General Direction and Administration	166.42	229.12	0.25	0.30
Primary Care	86459.21	87475.054	57.91	54.94
Secondary Care	21263	22747.847	14.24	14.29
Tertiary Care	22485.84	27121.76	15.06	17.03
Medical Education and Research	14117.48	15158.73	9.32	9.37
Repayment of Loans	4800	6500	3.22	4.08
Total	149292	159232.51	100.00	100.00
Primary Care as % of GSDP	0.43%	0.39%		

Table 6: DoHMFW Expenditure by Functions of Care (2004-03 & 2005-06)

Expenditure on primary care includes that on provision of services through PHCs, sub centers, maternal and child health centers, AYUSH dispensaries, Department of Health dispensaries and societies. It also includes expenditure on disease control programmes, family welfare programmes, quality control of water, food and drugs, manufacture of vaccines and sera. Between 55-58% of the health expenditure is on provision of primary care services. It is seen that expenditure on primary care was about 0.43% and 0.39% of the GSDP in 2004-05 and 2005-06 respectively.

Secondary care expenditure includes that on provision of services through APVVP hospitals, secondary care institutions of the Department of Health, AYUSH medical colleges and nonprofit hospitals providing secondary level eye care. About 14% of the DoHMFW expenditure is on provision of secondary care services.

About 15% and 17% of the respective expenditure for the last two years was on provision of tertiary care services. About 2% of the total DoHMFW budget is spent on providing assistance to autonomous tertiary care institutions like NIMS, SVIMS, MNJ Institute of Oncology etc., assistance for free treatment at these institutions and assistance for care of children with heart problems. The remainder is spent on provision of tertiary care services through intuitions under the DME. About 22% of the DoHMFW budget is normally allocated for DME. However only about 15% to 17% is spent on provision of treatment while the rest of the spending is on repayment of loans, education and related expenses.

About 9% of the DoHMFW expenditure is on medical education and research. This includes expenditure of the Directorate of Medical Education, NTR University of Health Sciences, State Institute of Health and Family Welfare, provision of education through medical, AYUSH, nursing and paramedical colleges, and research schemes.

Though the Department spends about 8% on Direction and Administration, much of

the expenditure is related to provision of specific services and have been included under expenditure on respective services. General Direction and Administration includes expenditure that cannot be assigned to a particular service such as expenditure of the Secretariat, compilation of vital statistics and health insurance. In the last two years the expenditure on this account amounted to 0.25% and 0.3% of the budget respectively. In recent years repayment of loans account for 3-4% of the DoHMFW budget.

5. Expenditure by Providers

Annex 5.1-5.4 provides details expenditure by Providers of Care in recent years. Expenditure on different providers has been estimated on the basis of allocation to sub heads. Details of sub heads included under each provider is provided in Annex 6.1 and 6.2.

Primary Care providers such as subcentres, PHCs, DoH hospitals and dispensaries, family welfare centres/MCH centres, OSM dispensaries, societies and hospitals and providers of collective services account for about 55% of the budget. Collective health services are expenditure on disease control programs and family welfare services provided through these institutions for which provider wise break up is not available

Secondary Care providers include APVVP hospitals and larger DoH hospitals and they account for 12 to 14 % of the budget. Tertiary Care providers include teaching hospitals in allopathy and OSM and autonomous tertiary hospitals like NIMS, SVIMS etc. They account for about 20% of the budget. This includes expenditure on both treatment and education. Other training and education institutions account for about 1% of the budget.

Expenditure on Government Administrators include that on Secretariat and State and district headquarters of sub-departments. They account for about 8% of the budget.

6. Expenditure by Sources of Fund

Table 7 provides details of contribution of various sources to DoHMFW expenditure in recent years. GoAP contribution currently accounts for about 84% of DoHMFW funds. Relative contribution of GoAP has been increasing in recent years due to completion of major external aided projects and decline in central government funding. External aid which accounted for about 12 % of the budget in 2001-02 currently accounts for about 0.53% of the total budget. Government of India contribution is provided under the centrally sponsored programs, finance commission grants and PMGY. GOI contributions have declined as a proportion of the budget from 17.38% in 2001-02 to about 11% at present.

	Expenditure (Rs Crore)				% Share		
Year	GoAP	GoI	External	Total	GoAP	GoI	External
2001-02	984.33	242.63	168.8	1395.76	70.52	17.38	12.09
2002-03	1009.8	246.06	80.14	1336	75.58	18.42	6
2003-04	1189.01	169.44	95.55	1454	81.77	11.65	6.57
2004-05	1256.95	202.43	33.54	1492.92	84.19	13.56	2.25
2005-06	1407.19	176.63	8.51	1592.33	88.37	11.09	0.53

Table 7: DoHMFW Expenditure by Sources of Funds

7. DoHMFW Expenditure at the District Level

There are twenty-three districts in Andhra Pradesh, and there is substantial variation across districts in economic and human development achievement. Annex 7.1 provides information on select key socioeconomic and demographic in Andhra Pradesh districts and highlights the inter-district differences. There is substantial inter-district variation especially with regard to income per capita, the proportion of rural population living below the poverty line and indicators of human development achievement, such infant and child mortality and the adult literacy rate. Generally there appears to be good correlation between economic achievement and indicators of health and education across districts.

Annex 7.2- 7.5 describe, for selected years, the allocation of health expenditures (by district) for major sub-departments under DOHMFW – the Directorate of Health, Family Welfare, Directorate of Medical Education (DME), and APVVP. Expenditures on the first two comprise the bulk of spending on primary health care.

It is also seen that that primary health and family welfare expenditures per capita are positively correlated with higher infant mortality districts (Figure-5) and inversely correlated with income per capita (Figure-6), which is along the desired lines in that allocations are associated with need.

While it is reasonable to assume that the district wise allocation is more or less in accordance with local requirements, data from facility surveys commissioned by the GOI indicate that there are significant differences between districts when it comes to facilities at the sub centre and PHC level. The first survey was conducted in 12 districts in 1999-2000 and covered PHCs in the district. The second survey was conducted in 11 districts⁹ in 2002-03 and in addition covered sub centers. The first survey indicated that there was huge gaps in infrastructure, personnel and supplies in the selected districts. The second survey done after three years indicate a much healthier situation in the selected districts mostly on account of

⁹ The districts include: Vizianagaram, Mahboobnagar, Khamam, RangaReddy, Prakasam, East Godavari, Nellore, Adilabad, Chittoor, West Godavari and Srikakulam

investments under APERP which has substantially improved primary care infrastructure throughout the state. However significant gaps in infrastructure, personnel and facilities, continue to remain.



Figure-5: District Spending Patterns 2000-01: Primary Health Spending and IMR

Source: Mahal Ajay, Narayana K.V, Rao Sampath. Expenditures and Financing of Department of Health and Family Welfare in Andhra Pradesh: Towards a Resource Envelope in the Period 2003-07. 2003



Figure-6 District Spending Patterns 2000-01: Primary Health Spending and Income Per Capita

Source: Mahal Ajay, Narayana K.V, Rao Sampath. Expenditures and Financing of Department of Health and Family Welfare in Andhra Pradesh: Towards a Resource Envelope in the Period 2003-07, 2003

IV. Health Expenditure of Other Government Departments and Societies

A. Health Expenditure by Societies

These are expenditures that would ordinarily be classified as being under DOHMFW auspices, were it not for the fact that the funds supporting such expenditures are directly provided to the concerned directorates and state- and district-level functionaries in a form that

leads to their being excluded in the accounting under the Demand for Grants. They include expenditures by "societies" such as the Andhra Pradesh State AIDS Control Society (APSACS) and the State Society for Health and Family Welfare. Similar societies exist for tuberculosis, leprosy, malaria and blindness. Because of the way these non-profit organizations are registered, most funds received by them are not recorded under the demand for grants. Indeed the purpose of these societies appears primarily to serve as a conduit for an easy transfer of new funds directly to entities related to vertical programs. The societies are primary funded by external aid and GOI. Share of GoAP has been usually minimal. In 2004-05, these societies together had an expenditure of about 92 crores. However, the relative share of Societies in State health expenditure will significantly increase in the next five years on account of the scaling up of RCH and NACP programmes. The RCH-II has already committed about Rs. 800 crores to AP for the next five years.

Year	Amount (Rs. Lakhs)					
2002-03	5076.33					
2003-04	7116.49					
2004-05	9236.65					

Table –8: Expenditure of Societies (2002-2005)

B. Health Expenditure by Other Line Departments

Health expenditure by other line departments include (a) expenditure on Insurance Medical Services by Department of Labor (b) expenditure on Tribal Health Services by Department of Tribal Welfare, and (c) expenditure on Integrated Child Development Services (ICDS) by Department of Women Welfare and Child Welfare. While expenditure on Insurance Medical Services is considered as secondary care expenditure, expenditure on Tribal Health Services and ICDS is considered as primary health care expenditure.

Table-7. Meanin Expenditure by other GOAF de	partments	
	2004.05	2005 04

Table Q: Health Expanditure by other GoAD departments

Primary Care	2004-05	2005-06 (RE)	2006-07 (BE)
Department of Tribal Welfare	3537	4702	5058
Department of Women, Child and Disabled Welfare	1662153	2504903	2473844
Total (Primary Care)	1665690	2509605	2478902
Secondary Care			
Department of Labour (Insurance Medical Services)	633410	554219	589973
Total (Other Departments) (Rs thousands)	2299100	3063824	3068875

In 2005-06, these departments had a health expenditure of about 306 crore Rupees. Of this about 250 crore Rupees was spent on primary health care and 55 crore Rupees on secondary health care (Table-9)

V. Total Health Expenditure by GoAP Departments and Societies

Total health expenditure of GoAP departments and societies was about Rs.2013 crore rupees in 2005-06. Inclusion of societies and other departments increases the relative share of primary care expenditure of State government agencies from about 55% to around 62% of the total health expenditure. Total primary care expenditure is about 0.56% and 0.54% of the GSDP in 2004-05 and 2005-06 respectively.

Function	DoHM	FW & Societ	ies	Other	Total
	DoHMFW			Departments	
Direction & Administration	2.29		2.29		2.29
Primary Care	874.75	85.36	960.11	250.96	1211.07
Secondary Care	227.48		227.48	55.42	282.90
Tertiary Care	271.22		271.22		271.22
Training & Research	151.59		151.59		151.59
Repayment of Loans	65.00		65.00		65.00
Total (Rs. Crores)	1592.33	85.36	1677.69	306.38	1984.07
% Share		•			
Direction & Administration	0.14		0.14		0.12
Primary Care	54.94	100.00	57.23	81.91	61.04
Secondary Care	14.29		13.56	18.09	14.26
Tertiary Care	17.03		16.17		13.67
Training & Research	9.52		9.04		7.64
Repayment of Loans	4.08		3.87		3.28
Total	100.00	100.00	100.00	100.00	100.00

Table-10:Total Health Expenditure by GoAP Departments and Societies by Functions (2005-06)

The total health expenditure of GoAP departments and societies for the year 2005-06, by sources of funds is provided in Table-11. The share of GoAP in expenditure of health departments in 2005-06 was about 88.39% . Its relative share declines to about 84% when expenditure of societies are taken into accounts. GoAP share further declines to about 73.74% when we consider the total health expenditure of its health care agencies. This is mainly on account of greater contribution of GoI funds in the expenditure of Societies and other line departments. In 2005-06, share of GoI in expenditure of health departments was around 11%. This increases to about 23.6% when we take into account the total health expenditure of all the GoAP health care agencies. The contribution of external aid to the total health expenditure of GoMP agencies was about 2.7% in 2005-06. The actual share of external sources will be higher, given that GoI funding to RCH and AIDS Control Societies is financed through an external aid component.

(2005-00)							
	DoHMW and its Societies			Other			
Sources	DoHMFW	Societies	Total	Departments	Total HE		
GoAP	1407.19		1407.19	55.89	1463.08		
GoI	176.63	85.36	261.99	206.19	468.18		
External Aid	8.51		8.51	44.30	52.81		
Total (Rs. Crores)	1592.33	85.36	1677.69	306.38	1984.07		
% Share							
GoAP	88.37		83.88	18.24	73.74		
GoI	11.09	100.00	15.62	67.30	23.60		
External Aid	0.53		0.51	14.46	2.66		
Total	100.00	100.00	100.00	100.00	100.00		

Table-11:Total Health Expenditure by GoAP Departments and Societies by Sources of Funds (2005-06)

Year	Total Health	Total Health	Health	Health	Health
	Spending (Rs.	Spending (Rs.	Spending per	Spend-	Spending
	Crores) Cur-	Crores) 1993-	Capita (Rs.)	ing/GDP	/Total Public
	rent Prices	94 Prices	1993-94 Pric-	(Percent)	Expenditures
			es		(Percent)
1975-76	41.00	243.00	51.56	0.96	6.00
1980-81	90.00	357.00	67.28	1.23	6.40
1985-86	189.00	506.00	84.79	1.41	6.00
1990-91	331.00	494.00	74.25	1.06	5.03
1995-96	605.00	490.41	68.84	0.84	3.87
1996-97	770.00	587.74	81.36	0.94	4.27
1997-98	850.00	602.26	82.02	0.99	4.04
1998-99	1039.00	688.07	92.17	1.00	3.90
1999-00	1165.00	740.52	98.45	0.93	3.83
2000-01	1294.00	798.95	103.53	0.92	3.42
2001-02	1395.00	835.41	109.62	0.92	3.26
2002-03	1384.00	797.76	103.40	0.85	3.59
2003-04	1510.92	840.64	107.67	0.82	3.09
2004-05	1541.92	831.13	105.24	0.76	3.37
2005-06	1645.82	855.61	107.15	0.73	3.32

Annex:-1 Trends in DoHMFW Spending 1975-2005

Source: GoAP Budget Documents. GSDP from Economic Survey of Andhra Pradesh and Population projections from Registrar General of India

Note: The figures include expenditure on ESIS, though they have been transferred from the DoHMFW to Department of Labour in 2001-02, to provide comparability with earlier years.

Year	Wages and Salaries (%)	Drugs Medical Supplies (%)	Stipend & Scholar-ships (%)	Maintenance & Minor Works (%)	Operations (%)
1975-76	62.09	19.33	1.78	0	16.8
1980-81	61.71	16.58	2.25	0.64	18.83
1985-86	61.29	18.01	1.33	0.2	19.17
1990-91	68.41	12.31	1.61	0.1	17.57
1995-96	72.29	12.02	1.22	0.31	14.15
1996-97	64.46	13.87	1.2	0.84	19.63
1997-98	64.56	12.12	0.85	0.66	21.81
1998-99	59	11.43	0.87	2.97	25.73
1999-00	69.21	7.38	0.94	2.4	20.08
2000-01	66.28	10	1.01	1.05	21.66
2001-02	66.57	9.61	1	1.57	21.24
2002-03	64.45	9.22	1.10	1.53	23.70
2003-04	64.40	10.26	0.91	1.07	23.35
2004-05	64.59	10.69	1.68	3.87	19.17
2005-06	65.98	9.98	1.83	2.29	19.92

Annex-2: Share of Different Resource Categories in DoHFW Revenue expenditure (1975-2005)

Source: Updated from Mahal Ajay, Narayana K.V, Rao Sampath. Expenditures and Financing of Department of Health and Family Welfare in Andhra Pradesh: Towards a Resource Envelope in the Period 2003-07. Back-ground paper for the IHSG MTSEF for GOAP, DoHMFW Budget documents

Resource Costs	Amount (I	Rs.lakhs)		Share in T	otal (%)	
	Non.Plan	Plan	Total	Non.Plan	Plan	Total
Salaries and Wages	1	4	I.	ll.	1	- I
Pay	35731.05	12738.73	48469.78	41.62	26.66	36.27
Allowances	9636.75	3201.75	12838.50	11.23	6.70	9.61
DA	8552.85	3030.63	11583.48	9.96	6.34	8.67
Wages	357.66	54.49	412.15	0.42	0.11	0.31
Grant in aid to salaries	9194.71	1461.66	10656.37	10.71	3.06	7.97
Total Salary	63473.02	20487.26	83960.28	73.94	42.88	62.83
Stipend	160.32	1829.43	1989.75	0.19	3.83	1.49
Operations & Administration		1			1	1
TA	1159.70	1462.80	2622.50	1.35	3.06	1.96
Purchases	99.62	3622.49	3722.11	0.12	7.58	2.79
Office Expenses	3115.68	2264.13	5379.81	3.63	4.74	4.03
Rent	214.88	190.87	405.75	0.25	0.40	0.30
Professional fees	57.87	102.80	160.67	0.07	0.22	0.12
Other contractual services	21.40	-25.14	-3.74	0.02	-0.05	0.00
Other Grant in AID	3742.88	10290.50	14033.38	4.36	21.54	10.50
Petrol Oil	1071.79	243.85	1315.64	1.25	0.51	0.98
Publications	99.81	0.50	100.31	0.12	0.00	0.08
Advertising	1.64	2.25	3.89	0.00	0.00	0.00
Others	2942.13	201.71	3143.84	3.43	0.42	2.35
Total Operations & Admin	12527.40	18356.76	30884.16	14.59	38.42	23.11
Materials & Supplies	1	1			1	1
Drug	5101.88	743.11	5844.99	5.94	1.56	4.37
Diet & Rations	583.54	25.36	608.90	0.68	0.05	0.46
Other materials & supplies	3758.70	1805.45	5564.15	4.38	3.78	4.16
Total Material & Supplies	9444.12	2573.92	12018.04	11.00	5.39	8.99
Minor Works & Maintenance]	1			1	1
Motor vehicles	186.49	33.12	219.61	0.22	0.07	0.16
Building and equipment	55.72	1154.50	1210.22	0.06	2.42	0.91
Total Maint & Minor Works	242.21	1187.62	1429.83	0.28	2.49	1.07
Capital		3347.46	3347.46	0.00	7.01	2.51
Loans		0.00	0.00	0.00	0.00	0.00
Total	85847.10	47782.45	133629.55	100.00	100.00	100.00

Annex 3.1: DoHMFW Expenditure by Resource Costs (2002-03)

Resource Costs	Amount (H	Rs.lakhs)		Share in T	otal (%)	
	Non.Plan	Plan	Total	Non.Plan	Plan	Total
Salaries and Wages		1		1		
Pay	34533.85	13772.95	48306.80	36.50	27.22	33.27
Allowances	9788.81	3658.58	13447.39	10.35	7.23	9.26
DA	10089.20	4025.67	14114.87	10.66	7.96	9.72
Wages	347.96	51.78	399.74	0.37	0.10	0.28
Grant in aid to salaries	11044.22	4197.49	15241.71	11.67	8.30	10.50
Total Salary	65804.04	25706.47	91510.51	69.56	50.80	63.02
Stipend	152.03	1378.95	1530.98	0.16	2.73	1.05
Operations & Administration						
ТА	507.54	1158.97	1666.51	0.54	2.29	1.15
Purchases	190.34	4362.57	4552.91	0.20	8.62	3.14
Office Expenses	2592.39	5612.81	8205.20	2.74	11.09	5.65
Rent	152.60	191.64	344.24	0.16	0.38	0.24
Professional fees	118.11	47.02	165.13	0.12	0.09	0.11
Other contractual services	3564.14	0.17	3564.31	3.77	0.00	2.45
Other Grant in AID	3734.49	4897.66	8632.15	3.95	9.68	5.94
Petrol Oil	146.46	727.31	873.77	0.15	1.44	0.60
Publications	40.31	0.84	41.15	0.04	0.00	0.03
Advertising	3.20	21.79	24.99	0.00	0.04	0.02
Others	4638.08	465.82	5103.90	4.90	0.92	3.52
Total Operations & Admin	15687.66	17486.60	33174.26	16.58	34.56	22.85
Materials & Supplies						
Drug	8202.02	870.14	9072.16	8.67	1.72	6.25
Diet & Rations	621.44	65.43	686.87	0.66	0.13	0.47
Other materials & supplies	1666.96	3149.27	4816.23	1.76	6.22	3.32
Total Material & Supplies	10490.42	4084.84	14575.26	11.09	8.07	10.04
Maintenance & Minor Works		1		1		I
Motor vehicles	99.48	376.73	476.21	0.11	0.74	0.33
Building and equipment	69.22	743.73	812.95	0.07	1.47	0.56
Total Maint & Minor Works	168.70	1120.46	1289.16	0.18	2.21	0.89
Capital	0.00	823.05	823.05	0.00	1.63	0.57
Loans	2300.00	0.00	2300.00	2.43	0.00	1.58
Total	94602.85	50600.37	145203.22	100.00	100.00	100.00

Annex 3.2: DoHMFW Expenditure by Resource Costs (2003-04)

	Resour	rce Costs (R	(s 000	Share	in Total	l (%)
Resource Categories	Non.Plan	Plan	Total	Non.Plan	Plan	Total
Salaries and Wages						
Salaries	5533414	2144288	7677702	55.18	43.75	51.43
Wages	33770	48993	82763	0.34	1.00	0.55
Grant in aid to salaries	1107273	366440	1473713	11.04	7.48	9.87
Total Salary	6674457	2559721	9234178	66.56	52.23	61.85
Scholarships and Stipend	25537	214612	240149	0.25	4.38	1.61
Operations & Administration						
Office Expenses	239174	192762	431936	2.39	3.93	2.89
Rents Rates and Taxes	12102	29239	41341	0.12	0.60	0.28
Travel Allowance	84443	143010	227453	0.84	2.92	1.52
Publications	4314	367	4681	0.04	0.01	0.03
Other Administrative Expenses	1719	497	2216	0.02	0.01	0.01
Petrol, Oil and Lubricants	10420	38981	49401	0.10	0.80	0.33
Advertisements	3434	1897	5331	0.03	0.04	0.04
Professional Services	500184	4635	504819	4.99	0.09	3.38
Other Contractual Services	0	4726	4726	0.00	0.10	0.03
Other Grant in AID	538228	467891	1006119	5.37	9.55	6.74
Other Charges	56062	401655	457717	0.56	8.20	3.07
Inter Account Transfers	0	5557	5557	0.00	0.11	0.04
Total O&A	1450080	1291217	2741297	14.46	26.35	18.36
Materials & Supplies						
Materials and Supplies	110979	356508	467487	1.11	7.27	3.13
Drugs and Medicines	830695	130322	961017	8.28	2.66	6.44
Cost of Ration/Diet Charges	62967	2580	65547	0.63	0.05	0.44
Clothing, Tentage and Store	32592	1856	34448	0.33	0.04	0.23
Total M&S	1037233	491266	1528499	10.34	10.02	10.24
Maintenance & Minor Works						
Minor Works	351948	31975	383923	3.51	0.65	2.57
Motor Vehicle	8407	5032	13439	0.08	0.10	0.09
Machinery and Equipment	447	155187	155634	0.00	3.17	1.04
Total Maintenance	360802	192194	552996	3.60	3.92	3.70
Major Works	0	152076	152076	0.00	3.10	1.02
Repayment of Loans	480000	0	480000	4.79		3.22
Grand Total	10028109	4901086	14929195	100	100	100

Annex 3.3: DoHMFW Expenditure by Resource Costs (2004-05)

	Resou	rce Costs (H	<u>Rs 000)</u>	Shar	e in Total	(%)
Resource Categories	Non.Plan	Plan	Total	Non.Plan	Plan	Total
Salaries and Wages						
Salaries	6941791	2428687	9370478	41.32	58.40	52.75
Wages	36228	8974	45202	0.15	0.30	0.25
Grant in aid to salaries	1417638	351218	1768856	5.98	11.93	9.96
Total Salary	8395657	2788879	11184536	47.45	70.63	62.96
Scholarships and Stipend	23410	286942	310352	4.88	0.20	1.75
Operations & Administration						
Office Expenses	336479	191067	527546	3.25	2.83	2.97
Rents Rates and Taxes	14915	36159	51074	0.62	0.13	0.29
Travel Allowance	65760	187568	253328	3.19	0.55	1.43
Publications	4581	230	4811	0.00	0.04	0.03
Other Administrative Expenses	1812	100	1912	0.00	0.02	0.01
Petrol, Oil and Lubricants	12374	35514	47888	0.60	0.10	0.27
Advertisements	6440	12210	18650	0.21	0.05	0.10
Professional Services	511255	4615	515870	0.08	4.30	2.90
Other Contractual Services	0	272404	272404	4.63	0.00	1.53
Other Grant in AID	484252	571459	1055711	9.72	4.07	5.94
Other Charges	66785	560087	626872	9.53	0.56	3.53
Inter Account Transfers	0	0	0	0.00	0.00	0.00
Total O&A	1504653	1871413	3376066	31.84	12.66	19.01
Materials & Supplies						
Materials and Supplies	109679	413933	523612	7.04	0.92	2.95
Drugs and Medicines	904512	144148	1048660	2.45	7.61	5.90
Cost of Ration/Diet Charges	82932	2100	85032	0.04	0.70	0.48
Clothing, Tentage and Store	32587	1258	33845	0.02	0.27	0.19
Total M&S	1129710	561439	1691149	9.55	9.50	9.52
Maintenance & Minor Works						
Minor Works	332952	3055	336007	0.05	2.80	1.89
Motor Vehicle	8461	9270	17731	0.16	0.07	0.10
Machinery and Equipment	11225	23402	34627	0.40	0.09	0.19
Total Maintenance	352638	35727	388365	0.61	2.97	2.19
Major Works		3000	3000	0.05	0.00	0.02
Repayment of Loans	480000	330000	810000	5.61	4.04	4.56
Grand Total	11886068	5877400	17763468	100.00	100.00	100.00

Annex 3.4: DoHMFW Expenditure by Resource Costs (2005-06 RE)

Functions of Care			Head	ls of Depart	ment			Total (Rs.	% Share
	DHFW	DME	DoH	IPM	OSM	DCA	FW	Thousand)	
Health Services									
Primary Health Care Services			2637214		399452			3036666	22.72
Disease Control			1939602		0			1939602	14.51
Family Welfare			107120		0		2023749	2130869	15.95
Total Primary Care			4683936		399452		2023749	7107137	53.19
Secondary	1726153				1759			1727912	12.93
Tertiary	127915	1642918						1770833	13.25
Total Health Services	1854068	1642918	4683936		401211		2023749	10605882	79.37
Education and Research	37085	953899	32363		108021		76107	1207475	9.04
Direction & Administration	77139	93422	510513		27320		327348	1035742	7.75
Manufacture of Drugs, Vaccines				113370	22638	41144		177152	1.33
Drug, Food and Water Quality				1429		514		1943	0.01
Capital Expenditure		57500	277246					334746	2.51
Loans								0	0.00
Total	1968292	2747739	5504058	114799	559190	41658	2427204	13362940	100.00
% Share	14.41	20.11	40.28	0.84	4.09	0.30	17.76	100.00	

Annex-4.1: DoHFW Expenditure by Functions of Care (2002-03)

Functions of Care			1	ds of Depart	ment			Total (Rs.	% Share
	DHFW	DME	DoH	IPM	OSM	DCA	FW	Thousand)	
Health Services									
Primary Health Care Services			3480173		419932			3900105	26.86
Disease Control			1764053					1764053	12.15
Family Welfare			93155				2345499	2438654	16.79
Total Primary Care								8102812	55.80
Secondary	1624943		124970					1749913	12.05
Tertiary	143570	1723023						1866593	12.86
Total Health Services								11719318	80.71
Education and Research	41425	936358	37599		121923		78367	1215672	8.37
Direction & Administration	89204	122730	618267		27603		234883	1092687	7.53
Manufacture of Drugs, Vaccines,	,			106675	25340			132015	0.91
Drug, Food and Water Quality				378		47941		48319	0.33
Capital Expenditure			82305					82305	0.57
Loans		230000						230000	1.58
Total (Rs thousand)	1899142	3012111	6200522	107053	594798	47941	2658749	14520316	100.00
% Share	13.08	20.74	42.70	0.74	4.10	0.33	18.31	100.00	

Annex-4.2: DoHFW Expenditure by Functions of Care (2003-04)

Functions of Care		.5. Dom (* 1	Expenditure t Hea	ds of Depart	· · ·) 1 05 KL)		Total (Rs.	% Share
	DHFW	DME	DoH	IPM	OSM	DCA	FW	Thousand)	
Health Services									
Primary Health Care Services			3667135		429104			4096239	24.40
Disease Control			2148947					2148947	12.80
Family Welfare			172756				3199139	3371895	20.08
Total Primary Care			5988838		429104		3199139	9617081	57.28
Secondary	1692366		44403					1736769	10.34
Tertiary	159959	1843151						2003110	11.93
Total Health Services								13356960	79.55
Capital Expenditure			109740				2000	111740	0.67
Direction & Administration	86661	210716	625642		28880		489798	1441697	8.59
Education and Research	44688	868228	39448		124468		114026	1190858	7.09
Manufacture of Drugs, Vaccines				114174	32452			146626	0.87
Drug, Food and Water Quality				600		61220		61820	0.37
Loans		480000						480000	2.86
Total (Rs thousand)	1983674	3402095	6808071	114774	614904	61220	3804963	16789701	100
% Share	11.81	20.26	40.55	0.68	3.66	0.36	22.66	100.00	

Annex-4.3: DoHFW Expenditure	bv	Functions of	of Care	(2004-05 RE)	

Functions of Care			1	ads of Depar	tment			Total (Rs.	% Share
	DHFW	DME	DoH	DHFW	DME	DoH	DHFW	Thousand)	
Health Services									
Primary Health Care Services			3585393		464770			4050163	22.20
Disease Control			2389796					2389796	13.10
Family Welfare			201347				3427166	3628513	19.89
Total Primary Care								10068472	55.19
Secondary	1846532		126474					1973006	10.81
Tertiary	241649	1957271						2198920	12.05
Total Health Services								14240398	78.05
Capital Expenditure			109740				3000	112740	0.62
Direction & Administration	82891	226813	647406		30873		517668	1505651	8.25
Education and Research	45701	1006217	25158		129732		39028	1245836	6.83
Manufacture of Drugs, Vaccines				119990	29057			149047	0.82
Drug, Food and Water Quality				600		65442		66042	0.36
Loans		810000						810000	4.44
Total (Rs thousand)	2218039	4011476	7101795	120590	654991	65442	4072421	18244754	100.00
% Share	12.16	21.99	38.93	0.66	3.59	0.36	22.32	100.00	

Annex-4.4: DoHFW Expenditure by Functions of Care (2005-06 BE)

Annex 5.1: Ex	penditure by	v providers c	of care ((2002-03)

Providers	DHFW	DME	DoH	IPM	OSM	DCA	FW	Total	% Share
Primary Care Providers									
Sub Centres							790680	790680	5.45
PHCs			3181302					3181302	21.91
Family Welfare/MCH Centres			98229				812879	911108	6.27
DoH Dispensariess & Hospitals			11882				57904	69786	0.48
OSM Hospitals and Dispensaries					445272			445272	3.07
Collective Health Services (DoH)			1976742				653322	2630064	18.11
Societies			173000					173000	1.19
Total								8201212	56.48
Secondary Care Providers									
APPVVP Hospitals	1624943							1624943	11.19
DoH Hospitals			124970				30714	155684	1.07
Total								1780627	12.26
Tertiary Providers									
Teaching Hospitals (Allopathy)	1005	2618619						2619624	18.04
Other Tertiary Providers (Allopathy)	143570							143570	0.99
Teaching Hospitals (OSM)	24489				118723			143212	0.99
Total								2906406	20.02
Med. Education Training & Research									
NTRUHS	15931							15931	0.11
IIHFW							7650	7650	0.05
Govt. Paramedical Training Centres			16836				49915	66751	0.46
Nursing Colleges		21650						21650	0.15
ANM training schools run by local bodies							20802	20802	0.14
Private Teaching Hospitals (OSM)					3200			3200	0.02
Total								135984	0.94
Government Administrators	89204	122730	618267		27603		234883	1092687	7.53
Financial Agencies		230000						230000	1.58
IPM				107053				107053	
Drug Control Administration						47941		47941	0.33
Total DoHMFW Expenditure	1899142	3012111	6200522	107053	594798	47941	2658749	14520316	100.00
% share	13.07	20.73	42.67	0.74	4.09	0.33	18.30	100.00	

Providers	<u></u>		/ 1		$\frac{(2004-03)}{\text{Heads of Det}}$	/			
	DHMFW	DME	DoH	IPM	OSM	DCA	FW	Total	% Share
Sub Centres							1366427	1366427	8.14
PHCs			3670174					3670174	21.86
Family Welfare centres/MCH Centres			193184				1041469	1234653	7.35
Rural Hospitals			8548					8548	0.05
Urban Hospitals and Dispensaries			75903				64574	140477	0.84
DoH Providers of Collective Health Services			2027745				678635	2706380	16.12
Societies			160000					160000	0.95
Total Primary Care Providers								9286659	55.31
APPVVP Hospitals	1693272						50034	1743306	10.38
DoH Hospitals			44403					44403	0.26
OSM Hospitals and Dispensaries					461556			461556	2.75
Total Secondary Care Providers									13.40
Other Tertiary care Providers	159959							159959	0.95
Teaching Hospitals (Allopathy)		2663771	650					2664421	15.87
Teaching Hospitals (OSM)	24721				121076			145797	0.87
Total Tertiary Providers									17.69
NTRUHS	18761							18761	0.11
State Institute of Health and Family Welfare							8415	8415	0.05
FW Training Centres/Other							77781	77781	0.46
Government Paramedical Training Centres		23524						23524	0.14
Nursing Colleges		23984						23984	0.14
ANM training schools run by local bodies			1822				27830	29652	0.18
Private Teaching Hospitals (OSM)					3392			3392	0.02
Total Other Education & Research Institutions									1.10
Institute of Preventive Medicine				114774				114774	0.68
Drug Control Administration	<u>.</u>					61720		61720	0.37
Government Administrators	86661	210716	625642		28880		489798	1441697	8.59
	l Agencies	480000						480000	2.86
Total DoHMFW Expenditure	1983374	3401995	6808071	114774	614904	61720	3804963	16789801	100.00

Annex 5.3: Expenditure by providers of care (2004-05 RE)

Annex 5.4: Ex	penditure by	providers of	care ((2005-06 BE)
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	HMFW	DME	DoH	IPM	OSM	DCA	FW	Total	% Share
Primary Care Providers									
Sub Centres							1559796.00	1559796.00	8.55
PHCs			3663608.00				5000.00	3668608.00	20.11
Family Welfare centres/MCH Centres			199323.00				754812.00	954135.00	5.23
Rural Hospitals			30091.00					30091.00	0.16
Urban Hospitals and Dispensaries			1434.00					1434.00	0.01
DoH Providers of Collective Health Services			2294785.00				975130.00	3269915.00	17.92
Societies			136000.00					136000.00	0.75
OSM Hospitals and Dispensaries					493827.00			493827.00	2.71
Total								10113806.00	55.43
Secondary Care Providers									
APPVVP Hospitals	1847798.00		47184.00				135428.00	2030410.00	11.13
DoH Hospitals			79290.00					79290.00	0.43
Total								2109700.00	11.56
Other Tertiary care Providers	241649.00							241649.00	1.32
Teaching Hospitals (Allopathy)		2927401.00						2927401.00	16.05
Teaching Hospitals (OSM)	25698.00				126679.00			152377.00	0.84
NTRUHS	20003.00							20003.00	0.11
State Institute of Health and Family Welfare							8415.00	8415.00	0.05
FW Training Centres/Other							46115.00	46115.00	0.25
Government Paramedical Training Centres		22725.00	650.00				39444.00	62819.00	0.34
Nursing Colleges		24437.00						24437.00	0.13
ANM training schools run by local bodies			2024.00				30613.00	32637.00	0.17
Private Teaching Hospitals (OSM)					3612.00			3612.00	0.02
Total Other Education & Research								198038.00	0.00
Institute of Preventive Medicine				120590.00				120590.00	0.66
Drug Control Administration						65442.00		65442.00	0.36
Government Administrators	82891.00	226813.00	647406.00		30873.00		517668.00	1505651.00	8.25
Financial Agencies		810000.00						810000.00	4.44
Total DoHMFW Expenditure	2218039.00	4011376.00	7101795.00	120590.00	654991.00	65442.00	4072421.00	18244654.00	100.00

HOD	Major Head	Sub-Major	Minor Head	Scheme/	Sub Head	Function	Provider
		Head		Group			
HMFW	2059 Public	01 Office	053 Maintainance		29 Buildings under Secretariat	1	1
Secretariat	Works	Building	and repair				
	2210 - Medi-	01 UHS-	001Direction and		05 Assistance to APVVP	3	9
	cal and Public	Allopathy	Administration		74 Building APVVP	3	9
	Health				75 Lump Sum Provision	3	9
			003 Training		04 Training	3	9
			110 Hospitals and	01 Teaching	07 MNJ	4	13
			-	Hospitals			
				02 Other Hospitals	14 Assistance to APVVP	3	9
					15 AP Medicinal & Aromatic Plants Board	1	24
					28 NIMS	4	13
					33 Assistance to NIMS for free treatment	4	13
					34 SVIMS	4	13
					35 Assistance to SVIMS for free treatment	4	13
					36 Assistance to Lions Club Eye Hospital	3	11
					74 Buildings	3	9
		05 Medical	105 Allopathy		23 Assistance to University of Health Sciences	5	15
		Education	200 Other Sys-		06 Assistance to APYP	5	14
		Training and Research	tems		74 Buildings	5	14
		06 Public	001Direction and		05 Assistance to APVVP	3	9
		Health	Administration				
	2251 Secreta- riat Social		090 - Secretariat		06 Health Medical and Family Welfare Depart- ment	1	1
DME HOD	Services 2059 Public	01 Office	053 Maintenance		30 - Buildings of Teaching Hospitals	4	12
	Works	Building	and repair		31 - Buildings of Medical Education	5	1

Annex 6.1: Classification of Budget Sub-Heads by Provider and Function (DoHMFW: Non Plan)

HOD	Major Head	Sub-Major	Minor Head	Scheme/	Sub Head	Function	Provider
		Head		Group			
	2210 - Medi-	01 Urban	001Direction and		01 Headquarters Office	5	1
		Health Services	Administration		08 Assistance to the Children suffering from	4	13
	Health	- Allopathy			heart diseases		
			110 Hospitals and		29 - Establishment of Teaching Hospitals	4	12
				Hospitals	73 Buildings	4	12
		05 - Medical	105 Allopathy		04 Medical College Visakhapatnam	5	12
		Education			17 - Reorientation of Medical Education and	5	12
		Training and			involvement of Medical Colleges in Community		
		Research			Health Programme		
					18 - Medical Colleges	5	12
					19 Nursing Colleges	5	18
					24 - Training of Para-Medical Personnel	5	17
					25-Conduct of Government Nursing and Midwi-	5	1
					fery Examination		
					74 - Buildings	5	12
	6210 - Loans		190 - Loans to		04 - Loans to AP Health Medical Housing and	6	23
	for Medical		Public Sector and		Infrastructure Development Corpn for Repay-		
	and Public		Other Undertak-		ment of Loans to HUDCO		
	Health		ings				
Health	2059 - Public	01 - Office	053 - Maintenance		32 - Buildings of Health	2	7
HOD	Works	Buildings	and Repairs		33 - Buildings of Family Welfare Under Control	2	7
					of Health		
	2210 - Medi-	01 - Urban	001 - Direction and	1	02 - Regional Offices	2	1
	cal and Public	Health Services	Administration				
	Health	- Allopathy	109 - School		04 - Medical Inspection of Schools	2	7
			Health Scheme				
			110 - Hospitals and	02 - Other Hospit-	04 - City Hospitals	2	5
			Dispensaries	als	05 - District Headquarters Hospitals	3	10
					06 - Taluk Hospitals	3	10
					08 - Taluk Dispensaries	2	5
					09 - T.B. Centres and Clinics	2	7

HOD	Major Head	Sub-Major	Minor Head	Scheme/	Sub Head	Function	Provider
		Head		Group			
					96 - Add-Charges transferred from 06 P.H. to-	2	3
					wards repairs of Motor Vehicles of Primary		
					Health Centres on Pro-rata basis		
		03 - Rural	103 - Primary		04 - Primary Health Centres	2	3
		Health Servic-	Health Centres		05 - Centralised Purchase of Drugs and Medi-	7	25
		es-Allopathy			cines		
					74 - Buildings	2	3
			110 - Hospitals and		04 - Hospitals on Dam sites	2	5
			Dispensaries				
		06 - Public	001 - Direction and		01 - Headquarters Office	2	1
		Health	Administration		02 - Regional Offices	2	1
					03 - District Offices	2	1
				11 - Normal State	01 - Headquarters Office	2	1
				Plan			
			003 - Training		04 - Training of Health Staff	2	7
			101 - Prevention		04 - Health Services	2	7
			and Control of		05 - National Leprosy Eradiction Programme	2	7
			Diseases		NP		
					06 - National Malaria Eradication Programme -	2	7
					Urban and Rural		
					09 - Trachoma Control Programme	2	7
					17 - Development of Primary Health Centres	2	3
			113 - Public Health		04 - Publicity	2	7
			Publicity				
		80 - General	004 - Health Statis-		04 - Nutrition Research Scheme	5	7
			tics and Evaluation				
			800 - Other Ex-		04 - Health Transport	2	7
			penditure		06 - Centralised Purchase of Drugs and Medi-	7	25
					cines		
					90 - Deduct-Transfer of Repair Charges to Other	2	7
					Heads of Account on Prorata basis		
HOD	Major Head	Sub-Major	Minor Head	Scheme/	Sub Head	Function	Provider
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	2211 - Family	Head	101 - Rural Family	Group	07 - Assistance to the P.R. Institutions towards	2	7
	Welfare		Welfare Services		Maintenance of Family Planning staff quarters	Z	/
	wenale		wenale Services		and Public Health Centres		
			103 - Maternity		04 - Maternity and Child Health Centres	2	4
			and Child Health		74 - Buildings	2	4
	2225 Welfare	02 - Welfare of			07 - Hospitals and Dispensaries under the con-	2	5
		Scheduled Tri-	202 - Meanin		trol Director of Health and Family Welfare	2	5
	Castes Sche-	bes			for Director of freath and Fahiny Wenare		
	duled Tribes	003					
	and Other						
	Backward						
	Classes						
	3435 - Ecolo-	04 - Prevention	103 - Prevention of		05 - Scheme for Prevention of Water Pollution	2	7
			Air and Water Pol-				
	ronment	Pollution	lution				
	3454 - Census	02 - Surveys	111 - Vital Statis-		05 - Compilation of Vital Statistics	5	7
	Surveys and	and Statistics	tics		-		
	Statistics						
IPM HOD	2210 - Medi-	06 - Public	106 - Manufacture		04 - Institute of Preventive Medicine	2	21
	cal and Public	Health	of Sera And Vac-				
	Health		cine				
AYUSH		01 - Office	053 - Maintenance		34 - Buildings of AYUSH	2	6
HOD	Works	Buildings	and Repairs				
			001 - Direction and		01 - Headquarters Office	2	1
		Health Services			02 - Regional Offices	2	1
	Health	- Other Systems			74 - Buildings	2	1
		of Medicine	003 - Training		04 - Training	2	6
			101 - Ayurveda		04 Ayurvedic Hospitals and Dispensaries	2	6
			-		05 - Drug Manufacture	2	6
			102 - Homoeopa-		04 - Homoeopathic Hospitals and Dispensaries	2	6
			thy				

HOD	Major Head	Sub-Major Head	Minor Head	Scheme/ Group	Sub Head	Function	Provider
			103 - Unani	•	04 - Unani Hospitals and Dispensaries	2	6
					05 - Drug Manufacture	2	6
		04 - Rural	101 - Ayurveda		04 - Ayurvedic Hospitals and Dispensaries	2	6
		Health Services			05 - Drug Manufacture	2	6
		637 11 1	102 - Homoeopa- thy		04 - Homoeopathic Hospitals and Dispensaries	2	6
			103 - Unani		04 - Unani Hospitals and Dispensaries	2	6
		05 - Medical	101 - Ayurveda		04 - Ayurvedic Colleges	5	14
		Education			05 - Research	5	14
			102 - Homoeopa-		04 - Homoeopathic Colleges	5	14
		Research	thy		05 - Research	5	14
			103 - Unani		04 - Unani Colleges	5	14
					05 - Research	5	14
					06 - Assistance to Private Medical Colleges Un- ani	5	20
Drugs Con-	2059 - Public	01 - Office	053 - Maintenance		35 - Buildings of Drugs Control	2	22
trol Admin-	Works	Buildings	and Repairs				
		06 - Public	104 - Drug Control		04 - Administration of Drugs Act	2	22
HOD	cal and Public Health	Health			74 - Buildings	2	22

HOD	Major Head	Sub-Major Head	Minor Head	Scheme/Group	Sub Head	Function	Provider
HMFW Secretariat	2210 - Medical and Public	01 - Urban Health	110 - Hospitals and Dispensaries	0111 - Normal State Plan	14 - Assistance to A.P Vaidya Vidhana Pari- shad	3	9
Health	Health	Services - Allopathy			28 - Nizam's Institute of Medical Sciences Hyderabad	4	13
			789 - Special Component Plan for Scheduled Castes	11 - Normal State Plan	14 - Assistance to Andhra Pradesh Vaidya Vidhana Parishad	3	9
			796 - Tribal Areas Sub-Plan	11 - Normal State Plan	14 - Assistance to Andhra Pradesh Vaidya Vidhana Parishad	3	9
Outlay Medic		05 - Medical Education	105 - Allopathy	11 - Normal State Plan	23 - Assistance to University of Health Sciences	5	15
		Training and Research	200 - Other Sys- tems	11 - Normal State Plan	06 - Assistance to Andhra Pradesh Yogad- hyayana Parishad	5	14
	4210 - Capital Outlay on Medical and Public Health	01 - Urban Health Servic- es	110 - Hospitals and Dispensaries	0111 - Normal State Plan	74 - Buildings (M.N.J. Instutite of Oncology and Regional Cancer Centre Hyderabad)	4	13
Medical Edu-	2210 - Medical	01 - Urban	110 - Hospitals	0111 - Normal	08 Niloufer Hospital	4	12
cation HOD	and Public	Health	and Dispensaries	State Plan	29 - Teaching Hospitals	4	12
	Health	Services - Allopathy			35 - Ananthapur Government Hospital	4	12
			789 - Special Component Plan for Scheduled Castes	11 - Normal State Plan	29 - Teaching Hospitals	4	12
			796 - Tribal Areas Sub-Plan	11 - Normal State Plan	29 - Teaching Hospitals	4	12

Annex 6.2: Classification of Budget Sub-Heads by Provider and Function (DoHMFW: Plan)

HOD	Major Head	Sub-Major Head	Minor Head	Scheme/Group	Sub Head	Function	Provider
		05 - Medical Education	105 - Allopathy	11 - Normal State Plan	14 - Scheme for the benefit of Scheduled Caste Students	5	12
		Training and Research			17 - Re-orientation of Medical Education and Involvement of the Medical College in Com- munity Health Programme	5	12
					18 - Medical Colleges	5	12
					19 - Nursing Colleges	5	18
					24 - Training of Paramedical Personnel	5	17
			789 - Special	11 - Normal State	18 - Medical Colleges	5	12
l			Component Plan	Plan	19 - Nursing Colleges	5	18
			for Scheduled Castes		24 - Training of Paramedical Personnel	5	17
			796 - Tribal Area	11 - Normal State	18 - Medical Colleges	5	12
			Sub-Plan	Plan	19 - Nursing Colleges	5	18
					24 - Training of Paramedical Personnel	5	17
	4210 - Capital Outlay on Medical and Public Health	03 - Medical Education Training and Research	105 - Allopathy	10 - Centrally Sponsored Schemes	74 - Buildings	5	12
	6210 - Loans	80 - General	800 - Other Loans	11 - Normal State	04 - Construction of Medical Buildings	6	23
	for Medical and Public Health			Plan	05 - Construction of Dental College at Kadapa	6	23
Health HOD	2210 - Medical and Public Health	01 - Urban Health Services -	110 - Hospitals and Dispensaries	0204 - Eleventh Finance Commis- sion	36 - Regional Diagnostic Centres	3	7
		Allopathy		02-Other Hospitals	04 City Hospitals	2	5
		~ -			05 District Hospitals	3	10
					08- Taluk Dispensaries	2	5
				11-Normal State	06 - Taluk Hospitals	3	10
				Plan	35- Anantpur Government Hospital	3	10

HOD	Major Head	Sub-Major Head	Minor Head	Scheme/Group	Sub Head	Function	Provider
		03 - Rural	103 - Primary	03 - Externally	08 - Primary Health Centres under APERP	2	3
		Health Servic- es-Allopathy	Health Centres	Aided Projects	09 - DFID Health Programme	2	3
		1 5		05 - PMGY	04 - Primary Health Centres	2	3
				11 - Normal State	04 - Primary Health Centres	2	3
				Plan	05 - Continuation of APERP	2	3
					07 - Medical Insurance for BPL Families	1	1
			789 - Special	05 - PMGY	04 - Primary Health Centres	2	3
			Component Plan	11 - Normal State	04 - Primary Health Centres	2	3
			for Scheduled Castes	Plan	05 - Hospitals on Dam Sites	2	5
			796 - Tribal Area Sub-Plan	03 - Externally Aided Projects	08 - Primary Health Centres under APERP	2	3
				05 - PMGY	04 - Primary Health Centres	2	3
				11 - Normal State	04 - Primary Health Centres	2	3
				Plan	05 - Continuation of APERP	2	3
		06 - Public	001 - Direction	11 - Normal State	01 - Headquarters Office	2	1
		Health	and Administra- tion	Plan	04 - Implementation of Smoking Act	2	7
			003 - Training	11 - Normal State Plan	04 - Training of Health Staff	2	7
			101 - Prevention and Control of	03 - Externally Aided Projects	37-Assistance to APSACS	2	8
			Diseases		e 06 - National Malaria Eradication Programme	2	7
				Share	07 - National Filaria Control Programme	2	7
					08 - National T.B.Control Programme	2	7

HOD	Major Head	Sub-Major Head	Minor Head	Scheme/Group	Sub Head	Function	Provider
				10 - CSS	05 - National Leprosy Eradication Programme	2	7
					06 - National Malaria Eradication Programme - Urban and Rural	2	7
					07 - National Filaria Control Programme	2	7
					08 - National T.B. Control Programme	2	7
					09 - National Trachoma Control Programme	2	7
					10 - National V.D. Control Programme	2	7
					13-National V.D. Control Programme	2	7
					14 - Guineaworm Eradication Programme	2	7
					17 - Development of Primary Health Centres	2	7
					18 - Development of District Hospitals	3	10
					23 - National Goitre Control Programme	2	7
					37 - National Programme for Control of Blind-	2	7
				11 - Normal State	ness 04 - Cholera Control Programme	2	7
				Plan		2	7
				Pian	05 - National Leprosy Eradication Programme		
					06 - National Malaria Eradication Programme - Urban and Rural	2	7
					33 - Diabetis Care and Control Programme	2	7
					35 Cataract blindness Control Project with WB Assistance	2	7
					36 - Assistance to State Blindness Control So- ciety	2	8
					37 - National Programme for Control of Blind- ness	2	7
					38 - School Health Services	2	7
					40 - Integrated Disease Surveillance Project	5	7
					97 - Add. Charges	2	7
			789 - Special	06 - Matching State	06 - National Malaria Eradication Programme	2	7
			Component Plan	Share	07 - National Filarea Control Programme	2	7

HOD	Major Head	Sub-Major Head	Minor Head	Scheme/Group	Sub Head	Function	Provider
			for Scheduled				
			Castes	10 - CSS	05- National Leprosy Eradication Programme	2	7
					06 - National Malaria Eradication Programme	2	7
					37 - National Programme for Control of Blind- ness	2	7
				11 - Normal State	01 - Headquarters Office	2	1
				Plan	05 - National Lepracy Eradication Programme	2	7
					35 - National Programme for Control of Blind- ness	2	7
					36 - Assistance to State Blindness Control So- ciety	2	8
					38 - School Health Services	2	7
			796 - Tribal Area Sub-Plan	06 - Matching State Share	06 - National Malaria Eradication Programme	2	7
				10 - CSS	05- National Leprosy Eradication Programme	2	7
					06 - National Malaria Eradication Programme	2	7
					37 - National Programme for Control of Blind- ness	2	7
				11 - Normal State	01 - Headquarters Office	2	1
				Plan	05 - National Lepracy Eradication Programme	2	7
					35 - National Programme for Control of Blind- ness	2	7
					36 - Assistance to State Blindness Control So- ciety	2	8
					38 - School Health Services	2	7
		80 - General	800 - Other Ex- penditure	11 - Normal State Plan	04 - Health Transport	2	7
	2225 - Welfare	e 02 - Welfare of		11 - Normal State	07 Hospitals under DoH	2	7
	of Scheduled	Scheduled Tri-		Plan			
	Castes Sche-	bes					
	duled Tribes						
	and Other						

HOD	Major Head	Sub-Major Head	Minor Head	Scheme/Group	Sub Head	Function	Provider
	Backward						
	Classes						
	4210 - Capital Outlay on Medical and	80 - General	789 - Special Component Plan for Scheduled	05 - PMGY	04 - Construction of Medical Buildings	2	2
	Public Health		Castes				
			796 - Tribal Area Sub-Plan	05 - PMGY	04 - Construction of Medical Buildings	2	2
			800 - Other Ex- penditure	05 - PMGY	05 - Construction of Medical Buildings	2	2
Family Wel-	2211 Family		001 - Direction	05 - PMGY	01 - Sukhibhava	2	1
fare HOD	Welfare		and Administra-	10 - Centrally	01 Headquarters Office	2	1
			tion		06 - District Family Welfare Bureau	2	1
				11 - Normal State	04 - State Population Policy	2	1
				Plan	05 - Sukhibhava	2	1
			003 - Training	10 - Centrally	04 - Regional Family Welfare Training Centres	2	1
				5	05 - Training of Auxillary Nurses Midwives Dayas and Lady Health Visitors	2	17
					06 - A.N.M. Training Schools run by Local Bodies and Voluntary Organisations	2	19
					07 - Training and Employment of Multipurpose Workers (Male)	2	17
			101 - Rural Family	10 - CSS	04 - Family Welfare Centres	2	4
			Welfare Services		09 - Sub-Centres	2	2
			11 - Normal State	04 - Family Welfare Centres	2	4	
			Plan	05 - Strengthening and Computerisation of Primary Health Centers	2	3	
					06 - Employment of ANMs	2	2
			102 - Urban ly Welfare Servic-	10 - CSS	04 - Urban Family Welfare Centres	2	4

HOD	Major Head	Sub-Major Head	Minor Head	Scheme/Group	Sub Head	Function	Provider
			es				
			103 - Maternity	10 - CSS	08 - Medical Termination of Pregnency	2	7
			and Child Health		10 - R.C.H. Programme	2	7
				11 - Normal State Plan	10 - R.C.H. Programme	2	7
			104 - Transport	10 - CSS	04 - Transport	2	7
			•		96 - Add-Charges	2	7
				11 - Normal State Plan	04 - Transport	2	7
			105 - Compensa- tion	10 - CSS	04 - Ex-gratia Assistance in Cases of Fatality/complication due to Vasectomy/Tubectomy and I.U.D. Insertions	2	1
				11 - Normal State Plan	04 - Ex-gratia Assistance in Cases of Fatality/complication due to Vasectomy/Tubectomy and I.U.D. Insertions	2	1
			106 - Mass Educa- tion	10 – CSS	04 - Mass Education	2	7
			108 - Selected Area Programme	06 - Matching State Share	12 - Bill & Melinda Gates Foundation	2	7
			C C	11 - Normal State Plan	05 - Area Project / Indian Population Project - VI	2	16
					06 - State Institute of Health and Family Wel- fare Hyderabad under I.P.P.VI	5	7
					10 - A.P Urban Slum Health care Project I.P.P. VIII extension	2	7
					12 - Bill & Melinda Gates Foundation	2	7
			200 - Other	10 - Centrally	04 - Maintenance of Sterilisation Beds	2	7
			Services and Sup-	•	05 Post Partum Schemes: District Hospitals	3	11
			plies		07 - Post Partum Schemes/Taluk Hospitals	3	10
					09 - Microsurgical Recanalisation	3	7
				11 - Normal State	05 - Post Partum Schemes: District	3	7

HOD	U	Sub-Major Head	Minor Head	Scheme/Group	Sub Head	Function	Provider
		IIcau		Plan	als/Teaching Hospitals		
					07 - Post Partum Schemes/Taluk Hospitals	3	10
			789 - Special Component Plan for Scheduled Castes	05 - PMGY	05 - Sukhibhava	2	1
				11 - Normal State Plan	05 - Sukhibhava	2	1
			796 - Tribal Area Sub-Plan	05 - PMGY	05 - Sukhibhava	2	1
	4211 - Capital Outlay on Family Welfare		101 - Rural Family Welfare Services	11 - Normal State Plan	74 - Buildings - Contsruction of Family Wel- fare Buildings	2	2
IPM HOD	2210 - Medical and Public Health	06 - Public Health	107 - Public Health Laborato- ries	11 - Normal State Plan	05 - Public Health Laboratories under Director of Institute of Preventive Medicine	2	21
AYUSH	2210 - Medical	02 - Urban	101 - Ayurveda	10 - Centrally	04 - Ayurvedic Hospitals and Dispensaries	2	6
HOD	and Public Health	Health Services -		Sponsored Schemes	05 - Drug Manufacture	2	6
		Other Systems of Medicine		11 - Normal State Plan	04 - Ayurvedic Hospitals and Dispensaries	2	6
			102 - Homoeopa- thy	10 - Centrally Sponsored Schemes	04 - Homeopathic Hospitals and Dispensaries	2	6
			103 - Unani	10 - Centrally Sponsored Schemes	04-Unani Hospitals and Dispensaries	2	6
				11 - Normal State Plan	04-Unani Hospitals and Dispensaries	2	6
		04 - Rural Health	101 - Ayurveda	10 - Centrally Sponsored Schemes	04 - Ayurvedic Hospitals and Dispensaries	2	6
		Services - Other Systems	102 - Homoeopa- thy	10 - Centrally Sponsored Schemes	04 - Homoeopathic Hospitals and Dispensaries	2	6
		of Medicine	103 - Unani	-	04 - Unani Hospitals and Dispensaries	2	6

HOD	•	Sub-Major Head	Minor Head	Scheme/Group	Sub Head	Function	Provider
		IIcau		Plan			
			789 - Special	11 - Normal State	04 - Ayurvedic Hospitals and Dispensaries	2	6
			Component Plan	Plan	05 - Homoeopathic Hospitals and Dispensaries	2	6
			for Scheduled Castes		06 - Unani Hospitals and Dispensaries	2	6
		05 - Medical	101 - Ayurveda	10 - CSS	04 - Ayurvedic Colleges	5	14
		Education Training and		11 - Normal State Plan	04 - Ayurvedic Colleges	5	14
		Research	102 - Homoeopa-	10 - CSS	04 - Homoeopathic Colleges	5	14
			thy	11 - Normal State Plan	05 - Homoeopathic Colleges	5	14
			103 - Unani	10 - CSS	04 - Unani Colleges	5	14
				11 - Normal State Plan	06 - Unani Colleges	5	14
			789 - Special	11 - Normal State	04 - Ayurvedic Colleges	5	14
			Component Plan for Scheduled Castes	Plan	05 - Homoeopathic Colleges	5	14
			796 - Tribal Area Sub-Plan	11 - Normal State Plan	04 - Homoeopathic Colleges	5	14
	4210 - Capital	02 - Rural	101 - Ayurveda	11 - Normal State	74 - Buildings	5	14
	Outlay on	Health Servic-	-	Plan			
	Medical and Public Health	es					
Drugs Control	2210 - Medical	06 - Public	104 - Drug Con-	11 - Normal State	04 - Administration of Drugs Act	2	22
Administration		Health	trol	Plan			

Codes for Providers and	d Functions of Care
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Providers	Code	Functions	Code
Government Administrator	1	Direction & Administration	1
Sub Center	2	Primary Care	2
PHCs	3	Secondary Care	3
Family Welfare/MCH Centres	4	Tertiary Care	4
DoH Dispensaries & Hospitals	5	Medical Education and Research	5
OSM Hospitals and Dispensaries	6	Repayment of Loans	6
Collective Health Services (DoH)	7	Centralized Drug Purchase	7
Societies	8		
APPVVP Hospitals	9		
DoH Hospitals	10	_	
NonProfit Agencies	11	_	
Teaching Hospitals (Allopathy)	12		
Other Tertiary Providers (Allopathy)	13		
Teaching Hospitals (OSM)	14		
NTRUHS	15		
IIHFW	16	_	
Government Paramedical Training Centers	17		
Nursing Colleges	18		
ANM training schools run by local bodies	19	_	
Private Teaching Hospitals (OSM)	20		
IPM	21		
Drug Control Administration	22		
Financial Agencies	23		
AP Medicinal and Aromatic Plants Board	24		

APHMIDC	25
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Annex-6.3 Health Expenditur	e under Budget Sub-Head	ls of Other Departments

Department	Plan/ Non Plan	HOD	Major Head	Sub-Major Head	Minor Head	Scheme/Group	Sub Head
Department of Tribal Welfare	Non Plan	Tribal Wel- fare HOD	2225 - Welfare of Scheduled Castes, Scheduled Tribes and Other Backward Classes	02 - Welfare of Sche- duled Tribes	282 - Health		04 - Hospitals and Dispensaries05 - Public Health
	Plan	Tribal Wel- fare HOD	2225 - Welfare of Scheduled Castes, Scheduled Tribes and Other Backward Classes	02 - Welfare of Sche- duled Tribes	282 - Health	11 - Normal State Plan	12 - Referal Fund for refer- ring patients from Tribal areas
Department of Labour and Em- ployment	Non Plan	Insurance Medical Ser- vices HOD	2210 - Medical and Pub- lic Health	01 - Urban Health Services - Allopathy	102 - Em- ployees State Insurance Scheme		01 - Headquarters Office 04 - Dispensaries
	Plan	Insurance Medical Ser-	2210 - Medical and Pub- lic Health	01 - Urban Health	003 - Training	11 - Normal State Plan	04 - Training
		vices HOD		Services - Allopathy	102 - Em- ployees State Insurance	11 - Normal State Plan	01 - Headquarters Office
					Scheme		04 - Dispensaries
Department of Women Welfare and Child Wel- fare	Plan	Women De- velopment and Child Welfare, HOD	2235 - Social Security and Welfare	02 - Social Welfare	102 - Child Welfare	10 - CSS	09 - Integrated Child Devel- opment Services Schemes
							13 - World Bank Assisted Enriched I.C.D.S. Pro- gramme

	Rural Poverty	Under-5 Mortali-	Infant Mortality	Adult Literacy	Urban popula-		SC/ST Popula-	
District	Ratio	ty Rate	Rate	Rate	tion	NDP per capita	tion	
District	Percent,	Per 1000 live	Per 1000 live	Percent of 15+	Percent of popu-	Constant 1993-	Percent of popu-	Total Population
	1993-94	births 1991	births 1991	population 2001	lation 2001	94 Prices	lation 1991	Millions 2001
Srikakulam	38.50	101	77	55.94	11.00	8171	9.34	2.53
Vizianagaram	40.80	120	99	51.82	18.36	8345	10.44	2.25
Vishakhapatnam	30.00	86	73	59.45	39.89	13408	7.82	3.79
East Godavari	18.80	73	54	65.49	23.33	11381	18.19	4.87
West Godavari	21.10	79	65	73.95	19.69	13156	17.89	3.80
Krishna	24.29	47	30	69.91	32.37	14665	16.58	4.22
Guntur	36.90	56	38	62.80	27.95	14650	13.96	4.41
Prakasam	24.20	64	46	57.86	15.28	11038	20.03	3.05
Nellore	22.80	62	46	65.90	22.70	13217	21.85	2.66
Chittoor	23.10	76	60	67.46	21.69	12287	18.38	3.74
Cuddapah	16.20	52	44	64.02	23.33	10321	14.90	2.57
Anantapur	39.10	88	70	56.69	25.28	9729	14.19	3.64
Kurnool	35.30	89	68	54.43	22.57	10771	17.43	3.51
Mahabubnagar	39.70	95	77	45.53	10.59	7642	17.63	3.51
Rangareddy	24.60	55	56	66.31	53.27	14564	17.22	3.51
Hyderabad	n.a.	32	23	79.04	100.00	13931	8.86	3.69
Medak	22.20	68	52	53.24	14.45	15611	17.87	2.66
Nizamabad	16.20	58	41	53.26	18.04	10039	15.12	2.34
Adilabad	32.50	75	51	53.51	26.47	9638	18.53	2.48
Karimnagar	13.50	45	35	56.00	19.53	13031	18.57	3.48
Warangal	31.40	77	59	58.41	19.21	8196	17.19	3.23
Khammam	23.80	68	47	57.72	19.80	12814	16.25	2.57
Nalgonda	28.90	72	58	57.84	13.26	10305	17.68	3.24
Andhra Pradesh	27.4	67	55	61.11	27.08	11779	15.93	75.73

Annex 7.1 Selected Socioeconomic Data for Districts of Andhra Pradesh

Sources: Andhra Pradesh Statistical Abstract 2000(GoAP 2001); Economic Survey 2001-2 (GoAP 2002b); Registrar General of India (1997). Reproduced from Mahal et.al

District	Plan Expenditures	Non-Plan Expendi-	Total Expenditures	District Share (Plan	District Share (Non-	District Share (Total
		tures		Exp)	Plan Exp)	Exp)
	2000-2001	2000-2001	2000-2001	2000-2001	2000-2001	2000-2001
	(Rs. Crores)	(Rs. Crores)	(Rs. Crores)	(percent)	(percent)	(percent)
Srikakulam	3.781	13.076	16.856	8.00	3.66	4.17
Vizianagaram	3.544	11.750	15.294	7.50	3.29	3.78
Visakapatnam	4.064	19.167	23.231	8.60	5.37	5.75
East Godavari	1.418	19.801	21.219	3.00	5.55	5.25
West Godavari	1.418	14.476	15.893	3.00	4.05	3.93
Krishna	2.316	15.745	18.060	4.90	4.41	4.47
Guntur	1.418	15.135	16.553	3.00	4.24	4.09
prakasam	2.079	12.997	15.076	4.40	3.64	3.73
Nellore	1.418	13.065	14.483	3.00	3.66	3.58
chittoor	1.418	13.903	15.321	3.00	3.89	3.79
Cuddapah	1.701	13.560	15.261	3.60	3.80	3.77
Ananthapur	2.647	13.884	16.531	5.60	3.89	4.09
kurnool	2.694	14.773	17.466	5.70	4.14	4.32
Mahabubnagar	2.363	13.696	16.059	5.00	3.84	3.97
Rangareddy	1.181	11.800	12.981	2.50	3.30	3.21
Hyderabad	0.945	42.284	43.229	2.00	11.84	10.69
Medak	2.363	13.385	15.747	5.00	3.75	3.89
Nizamabad	1.418	11.789	13.207	3.00	3.30	3.27
Adilabad	1.418	15.804	17.221	3.00	4.43	4.26
Karimnagar	1.513	15.023	16.535	3.20	4.21	4.09
Warangal	2.363	13.842	16.205	5.00	3.88	4.01
Khammam	1.890	15.043	16.933	4.00	4.21	4.19
Nalgonda	1.890	13.075	14.965	4.00	3.66	3.70

Annex 7.2. Distribution of DOH Expenditures by District in Andhra Pradesh, 2000-2001

TOTAL 47.26 357.070 404.329 100.00 100.00	00.00
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District	Plan Expenditures	Non-Plan Ex-	Total Expenditures	Total Population	Plan Expenditures	Non-Plan	Total Exp.
		penditures	_	_	per capita	Exp. per capita	Per capita
	(Rs. Crores)	(Rs. Crores)	(Rs. Crores)	(Millions)	(Rs.)	(Rs.)	(Rs.)
Srikakulam	3.781	13.076	16.856	2.53	14.95	51.71	66.67
Vizianagaram	3.544	11.750	15.294	2.25	15.79	52.34	68.12
Visakapatnam	4.064	19.167	23.231	3.79	10.72	50.57	61.30
East Godavari	1.418	19.801	21.219	4.87	2.91	40.64	43.55
West Godavari	1.418	14.476	15.893	3.80	3.73	38.13	41.87
Krishna	2.316	15.745	18.060	4.22	5.49	37.32	42.81
Guntur	1.418	15.135	16.553	4.41	3.22	34.36	37.57
Prakasam	2.079	12.997	15.076	3.05	6.81	42.54	49.35
Nellore	1.418	13.065	14.483	2.66	5.33	49.12	54.45
Chittoor	1.418	13.903	15.321	3.74	3.80	37.22	41.02
Cuddapah	1.701	13.560	15.261	2.57	6.61	52.69	59.30
Ananthapur	2.647	13.884	16.531	3.64	7.27	38.15	45.42
Kurnool	2.694	14.773	17.466	3.51	7.67	42.06	49.73
Mahabubnagar	2.363	13.696	16.059	3.51	6.74	39.06	45.79
Rangareddy	1.181	11.800	12.981	3.51	3.37	33.65	37.02
Hyderabad	0.945	42.284	43.229	3.69	2.56	114.70	117.27
Medak	2.363	13.385	15.747	2.66	8.88	50.27	59.15
Nizamabad	1.418	11.789	13.207	2.34	6.05	50.32	56.37
Adilabad	1.418	15.804	17.221	2.48	5.72	63.74	69.46
Karimnagar	1.513	15.023	16.535	3.48	4.35	43.21	47.56
Warangal	2.363	13.842	16.205	3.23	7.31	42.84	50.15
Khammam	1.890	15.043	16.933	2.57	7.37	58.64	66.01
Nalgonda	1.890	13.075	14.965	3.24	5.84	40.37	46.21
TOTAL	47.26	357.070	404.329	75.73	6.24	47.15	53.39

Annex 7.3 DOH Expenditures per capita, by District in Andhra Pradesh, 2000-2001

District	Plan Expenditures (Rs. Crores)	Population (Millions)	Exp. Per capita
Srikakulam	7.618	2.53	30.13
Vizianagaram	7.261	2.25	32.34
Visakapatnam	11.973	3.79	31.59
East Godavari	12.968	4.87	26.61
West Godavari	10.436	3.80	27.49
Krishna	10.566	4.22	25.05
Guntur	12.421	4.41	28.19
Prakasam	8.006	3.05	26.21
Nellore	7.713	2.66	29.00
Chittoor	10.471	3.74	28.03
Cuddapah	7.945	2.57	30.87
Ananthapur	9.654	3.64	26.53
Kurnool	10.033	3.51	28.57
Mahabubnagar	10.211	3.51	29.12
Rangareddy	6.275	3.51	17.89
Hyderabad	-0.010	3.69	16.68
Medak	7.034	2.66	26.42
Nizamabad	6.411	2.34	27.36
Adilabad	8.223	2.48	33.17
Karimnagar	10.463	3.48	30.09
Warangal	10.246	3.23	31.71
Khammam	10.193	2.57	39.73
Nalgonda	7.975	3.24	24.63
Headquarters	6.159	n.a.	n.a.
TOTAL	210.243	75.73	27.76

Annex 7.4: Family Welfare (Plan) Expenditures per capita by District in Andhra Pradesh, 2000-2001

District	Plan Expenditures (Rs. Crore)	Non-Plan Expenditures (Rs. Crore)	Total Expenditures (Rs. Crore)	District Share (Plan Exp) (%)	District Share (Non-Plan Exp) (%)	District Share (Total Exp) (%)
Srikakulam	0.000	0.000	0.000	0.00	0.00	0.00
Vizianagaram	0.000	0.000	0.000	0.00	0.00	0.00
Visakapatnam	2.558	29.474	32.032	11.68	13.20	13.07
East Godavari	0.863	17.127	17.990	3.94	7.67	7.34
West Godavari	0.000	0.000	0.000	0.00	0.00	0.00
Krishna	0.000	0.000	0.000	0.00	0.00	0.00
Guntur	0.468	18.814	19.282	2.14	8.43	7.87
Prakasam	0.000	0.000	0.000	0.00	0.00	0.00
Nellore	0.000	0.000	0.000	0.00	0.00	0.00
Chittoor	1.390	16.394	17.784	6.35	7.34	7.25
Cuddapah	0.000	0.000	0.000	0.00	0.00	0.00
Ananthapur	7.425	0.519	7.945	33.91	0.23	3.24
Kurnool	1.264	19.426	20.691	5.77	8.70	8.44
Mahabubnagar	0.000	0.000	0.000	0.00	0.00	0.00
Rangareddy	0.000	0.000	0.000	0.00	0.00	0.00
Hyderabad	6.472	103.115	109.587	29.55	46.19	44.70
Medak	0.000	0.000	0.000	0.00	0.00	0.00
Nizamabad	0.000	0.000	0.000	0.00	0.00	0.00
Adilabad	0.000	0.000	0.000	0.00	0.00	0.00
Karimnagar	0.000	0.000	0.000	0.00	0.00	0.00
Warangal	1.459	18.381	19.840	6.66	8.23	8.09
Khammam	0.000	0.000	0.000	0.00	0.00	0.00
Nalgonda	0.000	0.000	0.000	0.00	0.00	0.00
	21.90	223.250	245.149	100.00	100.00	100.00

Annex 7.5. Distribution of DME+Autonomous Tertiary Hospitals Expenditures by District in Andhra Pradesh, 2001-2002