**Government of India**
**Ministry of Chemicals & Fertilizers**
**Department of Pharmaceuticals**
**National Pharmaceutical Pricing Authority**

# Guidelines for Consumer Awareness, Publicity and Price Monitoring (CAPPM) Scheme and Price Monitoring & Resource Units (PMRUs)

## 1. Introduction & Background

1.1. The National Pharmaceutical Pricing Authority (NPPA), constituted vide Gazette notification dated 29.08.1997 [Resolution No.159 (No.33/7/97-PI.I)], has been entrusted with the task of:

i. Price fixation/revision of prices of scheduled formulations [as listed in Schedule I of the Drug (Prices Control) Order DPCO] as revised by the Government from time to time,
ii. Monitoring and enforcement of the notified prices,
iii. Providing inputs to the Government for policy formulation and on other specific issues about the availability, accessibility and affordability of medicine for all.

1.2. The National Pharmaceutical Pricing Policy 2012, implementing authority for the policy inter alia, provides that NPPA would be provided with the required organizational and financial support to enable it to implement the various provisions of the policy as well as the DPCO, 2013, in a speedy, effective and transparent manner.

1.3. The DPCO, 2013, also provides for monitoring the production and availability of scheduled formulations, active pharmaceutical ingredients contained in the scheduled formulation and the manufacturer of scheduled formulations.

1.4. Keeping in view the changing scenario in the Pharma Sector and the recommendations of the various committees, the existing Central Sector Plan Scheme was revised/ modified on 29.10.2015 initially for the period of two years and renamed as “Scheme of Consumer Awareness & Publicity and Price Monitoring” (CAPPM). The Scheme outlined the modalities for setting up Price Monitoring

and Resource Units (PMRUs) at the State level, which will work under the direct supervision of the respective State Drugs Controllers to increase the outreach of NPPA initiatives at the State level. In 2018, the existing Scheme was again revised/ modified as the Centrally Sponsored Scheme for a period of 3 years (2017-18 to 2019-20). The scheme was further extended as the Centrally Sector Scheme till 2025-26. The following guidelines have been issued regarding the scheme on 16.07.2020:

i. Consumer Awareness & Publicity and Price Monitoring (CAPPM) Scheme Guidelines.
ii. Guidelines for Setting up Price Monitoring and Resource Units (PMRUs) at the State / Union Territories under the Central Sector Scheme of Consumer Awareness, Publicity and Price Monitoring.

1.5. The CAPPM Scheme has two components, viz.,

i. Assistance to Price Monitoring and Resource Units (PMRUs), and
ii. Advertisement and Publicity for CAPPM

1.6. PMRUs will be registered State/UT societies under the Chairmanship of the State Drug Controller, with representatives of NPPA, State Health Department, civil societies and other stakeholders. Each Unit will function under the direct supervision of the concerned State Drug Controller and shall provide necessary support to the State Drug Controllers and NPPA. The Department shall provide financial assistance for hiring of contractual manpower, having qualifications and experience in pharmacy, running and maintenance of PMRU office, collection of drug samples for price monitoring, market-based price monitoring and activities relating to consumer awareness and publicity about drug prices.

1.7. The CAPPM scheme implemented during 2020–25 was evaluated by a third party, Management Development Institute Gurgaon (MDI Gurgaon), Gurugram, in 2025. The report states, *“This CAPPM scheme is extremely useful for spreading consumer awareness on prices and availability of scheduled and non-scheduled drugs as well as price monitoring of the PMRUs. Various advertisements, publicity campaigns, and other IEC activities are very*

*important. Therefore, the continuity of this scheme is recommended."*

1.8. Further, in the said evaluation, multiple recommendations were given to strengthen the implementation of the CAPPM scheme. Accordingly, based on these recommendations and the implementation experience, the Guidelines for Consumer Awareness, Publicity and Price Monitoring (CAPPM) Scheme and Price Monitoring & Resource Units (PMRUs) are being revised.

1.9. The revised/modified scheme will be implemented at the Central level by the National Pharmaceutical Pricing Authority (NPPA) and at the State level by the Price Monitoring and Resource Units (PMRUs) as a registered Society. These guidelines consolidate the framework for the CAPPM Scheme and the setting up of PMRUs to ensure improved efficiency, accountability, and effective implementation from FY 2026–27 till FY 2030-31.

## 2. Aims and Objectives of the CAPPM Scheme

2.1. The objectives of the Scheme are to disseminate information on the functioning of NPPA and to educate the public at large, in particular the consumers of pharma products, about-

i. Ceiling prices of scheduled medicines notified by the Government;
ii. Permissible price increase for scheduled and non-scheduled medicines;
iii. Availability of medicines at reasonable prices and promotion of generic medicines;
iv. Precautions to be taken while purchasing medicines from chemists/retailers, such as checking the MRP (which includes all taxes), manufacturing and expiry dates, price list of medicines, obtaining a bill for the medicines bought, etc.
v. Requirement for prescription of medicines by their generic names;
vi. Price control, monitoring, and enforcement activities of NPPA;
vii. Lodging complaints to NPPA for any violation, including violation of DPCO, 2013, as well as unethical practices in the Pharma sector.

## 3. Objectives of setting up the PMRUs:

3.1. The objectives of setting up the PMRUs are to provide necessary technical assistance to the State Drug Controllers and NPPA towards:

i. Monitoring the notified prices of medicines, detection of violation of the provisions of DPCO (revised from time to time), pricing compliance and ensuring availability of medicines;

ii. Monitoring the price movement of scheduled and non-scheduled formulations based on periodical returns filed by the industry, revision of price of scheduled formulations by the manufacturer based on the annual increase in Wholesale Price Index (WPI) as per provisions contained in the DPCO, oversee the price of non-scheduled formulations so that the prices of such formulations are not increased beyond 10% annually;

iii. Collection and compilation of market-based data of scheduled as well as non-scheduled formulations and analyse them.

iv. Collect test samples of medicines at the retail market whenever required;

v. Conduct training, seminars and workshops at the State and District levels for consumer awareness and publicity covering aspects relating to the role and functions of NPPA, availability of scheduled and non-scheduled medicines at reasonable prices, and care to be taken while purchasing the medicines from the chemists/ retailers and availability of alternative, cheaper medicines. The resource persons for the training will be provided by the State Drug Controller and by the NPPA, whenever required; and

vi. Any other related works as assigned to them by the NPPA from time to time.

3.2. The above task requires constant interaction with various stakeholders, viz., concerned State Government Departments, State Drug Controllers, consumer groups, etc., for forging linkages. Thus, the PMRUs will be the key collaborating partners of NPPA at the State / UT level for forging linkages with various stakeholders. While

the PMRUs will render necessary technical assistance to the State Drug Controllers and NPPA, the Units will, however, have no authority to reach out, communicate and interact with any of the pharma industry.

## 4. Activities to be undertaken by PMRUs:

4.1. PMRUs will be the key collaborating partners of NPPA with an information gathering mechanism at the grassroots levels. They will create public awareness so that the benefits of the DPCO (revised from time to time) trickle down to the grassroots levels. Their activities will include:

i. Monitoring price trends of both scheduled and non-scheduled formulations through systematic market-based data collection and analysis, as and when required/ directed by NPPA.
ii. Conducting Training, seminars and workshops at the State and District level for consumer awareness and publicity.
iii. IEC (Information, Education, and Communication) activities, including advertisement, publication of newsletters, etc.
iv. Collection/ purchase of test samples of medicines.
v. Market Survey of the availability of the scheduled formulations in the State/District/Specific area, as and when required and in accordance with directions issued by NPPA.

## 5. Categories of States/ UTs for setting up and operation of the PMRU:

5.1. For grants under the Scheme, staffing, infrastructure and expenditure, States / UTs have been divided into three categories as follows:

i. Category I – States/ UTs having a population of more than 3% of the total population;

ii. Category II – States/ UTs having a population of less than 3% but more than 1% of the total population; and

iii. Category III – States/ UTs having a population of less than 1% of the total population.

| Category I | Category II | Category III |
|---|---|---|
| 1. Andhra Pradesh<br>2. Bihar<br>3. Gujarat<br>4. Karnataka<br>5. Madhya Pradesh<br>6. Maharashtra<br>7. Odisha<br>8. Rajasthan<br>9. Tamil Nadu<br>10. Uttar Pradesh<br>11. West Bengal | 1. Assam<br>2. Chhattisgarh<br>3. Delhi<br>4. Haryana<br>5. Jammu & Kashmir<br>6. Jharkhand<br>7. Kerala<br>8. Punjab<br>9. Telangana | 1. Andaman & Nicobar Islands<br>2. Arunachal Pradesh<br>3. Chandigarh<br>4. Dadra & Nagar Haveli and Daman & Diu<br>5. Goa<br>6. Himachal Pradesh<br>7. Ladakh<br>8. Lakshadweep<br>9. Manipur<br>10. Meghalaya<br>11. Mizoram<br>12. Nagaland<br>13. Puducherry<br>14. Sikkim<br>15. Tripura<br>16. Uttarakhand |

5.2. The above categorization has been made for staffing and infrastructure as detailed in para 6 and 7 below.

## 6. Administrative Structure of PMRUs:

6.1. The PMRUs will function under the direct supervision of the concerned State Drug Controller as per the duties assigned to them. The strength of the PMRUs and their structure will be as follows:

| Category I | Category II | Category III |
|---|---|---|
| 1. One (1) Project Coordinator | 1. One (1) Project Coordinator | 1. One (1) Project Coordinator |
| 2. Four (4) Field Investigators | 2. Three (3) Field Investigators | 2. One (1) Field Investigator |
| 3. Two (2) Data Entry Operators (DEO)/ Office Assistants | 3. One (1) Data Entry Operator (DEO)/ Office Assistant | 3. One (1) Data Entry Operator (DEO)/ Office Assistant |

## 7. Expenditure per PMRU:

A. Non-Recurring Expenditure:

7.1. The scale of expenditure and the indicative list of items covered under the one-time non-recurring grants for newly set-up PMRUs would be as follows:

| **Indicative list of items** | **One-time expenditure per PMRU (₹ in lakh)** | | |
|---|---|---|---|
| | **Category I** | **Category II** | **Category II** |
| i. Computers (Hardware and Software)<br>ii. Office Tables<br>iii. Chairs<br>iv. Almirahs<br>v. Air Conditioner/ Fans<br>vi. Internet Connectivity | 8.00 | 6.00 | 4.00 |

B. Recurring Expenditure:

7.2. The scale of expenditure under recurring grants per annum would be:

| **Particulars** | **Amount (₹ in Lakh)** |
|---|---|
| **Category I** | |
| i. Remuneration/Honorarium of Staff | ₹ 32.40 |
| ii. Market-Data-Collection/monitoring of Price movement, etc. | ₹ 8.50 |
| iii. Consumer Awareness and Publicity<br>At the State Level<br>At the District level | <br>₹ 6.00<br>₹ 24.00 |
| **Total (Category I)** | **₹ 70.90** |
| **Category II** | |
| i. Remuneration/Honorarium of Staff | ₹ 24.60 |
| ii. Market-Data-Collection/monitoring of Price movement, etc. | ₹ 7.00 |
| iii. Consumer Awareness, Publicity and IEC | |

| | |
|---|---|
| activities<br>At the State Level<br>At the District level | <br>₹ 4.00<br>₹ 20.00 |
| **Total (Category II)** | **₹ 55.60** |
| **Category III** | |
| i. Remuneration/Honorarium of Staff | ₹ 15.00 |
| ii. Market-Data-Collection/monitoring of Price movement, etc. | ₹ 4.50 |
| iii. Consumer Awareness, Publicity and IEC activities<br>At the State Level<br>At the District level | <br>₹ 3.00<br>₹ 16.00 |
| **Total (Category III)** | **₹ 38.50** |

7.3. The provisioning for recurring grants per PMRU has been worked out as under three components. Need for additional expenses in any of these three components may be met out of other component/s, subject to prior approval of NPPA. The three components are detailed in the following paragraphs.

7.3.1. Consolidated Remuneration/Honorarium of Contractual PMRU staff from FY 2026-27 is as follows:

| **States/ UTs Category** | **Designation** | **Salary/Honorarium per annum (Amount in ₹)** |
|---|---|---|
| **Category I** | Project Coordinator | 60,000 X 1 X 12= 7,20,000 |
| | Field Investigators | 40,000 X 4 X 12= 19,20,000 |
| | DEO/Office Assistant | 25,000 X 2 X 12= 6,00,000 |
| | **Total** | **32,40,000** |
| **Category II** | Project Coordinator | 60,000 X 1 X 12= 7,20,000 |
| | Field Investigators | 40,000 X 3 X 12= 14,40,000 |
| | DEO/Office Assistant | 25,000 X 1 X 12= 3,00,000 |
| | **Total** | **24,60,000** |

| | | |
|---|---|---|
| **Category III** | Project Coordinator | 60,000 X 1 X 12= 7,20,000 |
| | Field Investigator | 40,000 X 1 X 12= 4,80,000 |
| | DEO/Office Assistant | 25,000 X 1 X 12= 3,00,000 |
| | **Total** | **15,00,000** |

i. Salary/Honorarium of contractual PMRU staff shall be subject to minimum wages as notified from time to time by the Government of the respective States/UTs or authority concerned to do so.

ii. The salary for a DEO/Office Assistant is to be fixed based on the prevailing minimum wages prescribed for graduates by the Government of the respective States/UTs or the authority concerned to do so. For the purpose of the calculation above, the minimum wages prescribed for graduates in the National Capital Territory of Delhi have been referred.

7.3.2. Market-based data collection, compilation, analysis and management of scheduled/ non-scheduled formulations; Monitoring of price movement of scheduled/ non-scheduled formulations; Collection/ purchase of test samples of medicines; routine expenditure on maintenance of office, etc.

| **States/UTs Category** | **Expenditure per PMRU per annum (₹ in lakh)** |
|---|---|
| Category I | 8.50 |
| Category II | 7.00 |
| Category III | 4.50 |

7.3.3. Conducting Training, Seminars and Workshops at the State and District levels for Consumer Awareness and Publicity; IEC (Information, Education, and Communication) activities, including advertisement, publication of newsletter, etc.

| **Items** | **Expenditure per PMRU per annum (₹ in lakh)** | | |
|---|---|---|---|
| | **Category** | **Category** | **Category** |

| | I | II | III |
|---|---|---|---|
| a) Conduct training, seminars, workshops and IEC activities at the State level for consumer awareness and publicity | 6.00 | 4.00 | 3.00 |
| b) Conducting training, seminars, workshops and IEC activities at the district levels for consumer awareness and publicity | 24.00 | 20.00 | 16.00 |

To facilitate the effective implementation of IEC activities under the scheme across the State/UT and district levels, the staff engaged in the PMRUs may be required to undertake official travel. Accordingly, the following provisions shall govern the entitlement, approval, regulation, and reimbursement of Travelling Allowance (TA) and Daily Allowance (DA) for PMRU personnel under the Scheme for IEC activities:

i. The staff engaged in the PMRUs shall be entitled to Travelling Allowance (TA) and Daily Allowance (DA), including expenses incurred on local travel, for undertaking official tours in connection with IEC activities under the Scheme.

ii. Such entitlements shall be governed by the TA/DA rules as notified by the respective State Government or Union Territory Administration from time to time. For the purpose of determining TA/DA eligibility, the entitlement of PMRU staff shall be commensurate with their gross remuneration/pay level and aligned with that of equivalent categories of personnel possessing similar educational qualifications under the applicable State/UT norms, as amended from time to time.

iii. The staff of the PMRUs shall strive to ensure effective implementation of activities across the respective State/Union Territory to facilitate delivery of the scheme's benefits to consumers throughout the State/UT, with IEC activities covering all the districts of the State/UT at least once in a year.

7.4. Any expenditure over and above the grant provided for under the recurring expenditure will have to be borne by the respective

State/UT.

7.5. The funds released would be subject to the following conditions:

i. The payment will be treated as a Grant-in-aid to the State Price Monitoring and Resource Unit.
ii. The funds shall be kept with any Nationalized Bank till they are withdrawn in part or in full for utilization.
iii. Transactions/Payments against grant-in-aid under (CAPPM) shall be made through the Expenditure Advance Transfer (EAT) Module of the Public Financial Management System (PFMS) by the State PMRU.

iv. Assets acquired substantially or wholly out of the grant shall not, without the prior approval of the NPPA, be disposed of, encumbered or utilized for purposes other than those for which the Grant-in-Aid has been sanctioned.
v. For the purpose, State PMRU shall maintain a register of the permanent and semi-permanent assets acquired wholly or mainly out of the Government Grants, and a copy thereof should be furnished to this Department.
vi. State Price Monitoring and Resource Unit shall submit a statement of expenditure with details of cumulative expenditure, actually incurred by it, within 1 month after the incurrence of any kind of recurring expenditure, to this Department.
vii. The accounts and the register of permanent and semi-permanent assets of the PMRU Society shall be open to inspection by the sanctioning authority and audit both by the Controller and Auditor General of India under the provisions of CAG (DPC) Act, 1971 and internal audit by the Principal Accounts Office of the Department of Pharmaceuticals.
viii. The fund is sanctioned subject to the condition that the Indian Audit Department and Departmentalized Accounts Officer shall have the right to access the Books and Accounts of ‘State Price Monitoring and Resource Unit’ involved in the Project, and they would be made available for scrutiny to the Audit.
ix. ‘State Price Monitoring and Resource Unit’ shall submit a report on the activity undertaken and the achievements to this Department.

x. An annual statement of accounts with a balance sheet duly certified by the Auditor of the State Price Monitoring and Resource Unit shall be submitted to this Department as soon as possible.

xi. Utilization Certificate in the form 12-A in respect of the above Grant-in-aid should be furnished by 'State Price Monitoring and Resource Unit' to NPPA and also to the Pay & Accounts Officer of the Ministry by 30th April of the financial year.

xii. The unspent balance of the grant in a financial year will be carried forward for the next financial year.

xiii. PMRUs will have to ensure that they will–

a. Not divert the grants or entrust execution of the scheme or work concerned to another Institution (s) or Organization (s);

b. Abide by other conditions specified in the agreement governing the grants-in-aid;

c. Exercise due economy in overall expenditure;

d. Abide by all the terms and conditions of the grants-in-aid under PMRU guidelines issued by this Office.

e. Deposit the interest earned on the unspent balances of the grant-in-aid to the consolidated fund of India as and when such interest is credited.

## 8. Method for Releasing Funds:

A. Non-Recurring Expenditure

8.1. In the first year, funds towards 90% of the non-recurring expenses shall be released in advance as the first instalment to PMRUs. The funds towards the remaining non-recurring expenses shall be released on the basis of the complete utilization of the first instalment released earlier.

8.2. Further, the existing PMRUs shall utilize the non-recurring grants, as available to them, exclusively for office establishment requirements by 31st March 2027. In cases where no such requirement exists, the unutilized non-recurring funds shall be deposited into the Consolidated Fund of India (CFI). Similarly, new PMRUs to be set up in the future shall utilize the non-recurring grants promptly and shall deposit the unutilized non-recurring funds into the Consolidated Fund of India (CFI), as and when directed by NPPA.

B. Recurring Expenditure

8.3. In the first year, funds towards recurring expenses shall be released in advance (1st instalment). The first instalment shall not exceed 25% of the total amount earmarked for the respective PMRU for the financial year. Subsequent instalments, each not exceeding 25% of the total annual allocation, shall be released only upon:

i. Utilization of at least 75% of the funds released earlier;and
ii. Submission of Utilization Certificate (UC) of the funds received in the previous instalments, duly signed by SDC/FDA, in the format prescribed by the Government of India under General Financial Rules (GFR) for this purpose; and
iii. Compliance with the conditions as prescribed in the previous sanction order.

8.4. These provisions may be revised from time to time in accordance with directions/guidelines issued by the Government of India.

## 9. Method of Recruitment of Staff

9.1. The project staff, namely, Project Coordinator, Field Investigator and Data Entry Operator/Office Assistant, shall be recruited on a contract basis through the Government e-Marketplace (GeM) Portal. Preference will be given to NIPER pass-outs. The process of recruitment is to be completed within two months after the release of funds from NPPA. The Recruitment Committee may comprise the following:

| | | |
|---|---|---|
| **1.** | Principal Secretary/Secretary (Health) or his representative, nominated for the purpose. | Chairman |
| **2.** | State Drug Controller | Convenor |
| **3.** | One State Government official concerned with Health & Drug Administration (to be co-opted by the Chairman) | Member |

## 10. Educational Qualifications and other terms of contractual employment:

10.1. The educational qualifications, experience, age limit, and other

eligibility criteria for the various contractual project staff will be as follows:

**i. Project Coordinator:** A Bachelor's degree in Pharma from an Institution/University approved by the Pharmacy Council of India, with at least 2 years' relevant experience in the Pharma sector.

Further, candidates who possess a Master's Degree in Pharma from an Institution/University approved by the Pharmacy Council of India shall be given preference.

**ii. Field Investigator:** A Bachelor's degree in Pharma from an Institution/University recognized by the Pharmacy Council of India, with a minimum of one year of relevant experience preferred.

**iii. Data Entry Operator (DEO)/Office Assistant:** A Graduate or equivalent from an Institution/University approved by the UGC. Candidate must have good knowledge of working on a computer, viz., MS Office (Word/Excel/PowerPoint), internet, etc.

- **Age Limit:** The upper age limit for engagement to the respective contractual position shall be as prescribed in the recruitment notice issued for the post.

10.2. The period of contractual employment shall be two years, followed by extension, if required, for another one year at the discretion of the appointing authority.

## 11. Leave

11.1. Contractual staff engaged under the PMRUs shall be eligible for twelve (12) days of leave during the period of one year on a pro-rata basis, in addition to Gazetted holidays.

11.2. Un-availed leaves (leave not utilized within the year), if any, shall not be carried forward in cases where the contract is extended beyond one year. The principle of 'no work-no pay' will be applicable during the period of the contract if leave taken exceeds the prescribed limit.

## 12. Orientation Programme for the Staff of the PMRU

12.1. The project staff of each PMRU will have to undergo an orientation training programme as per NPPA's direction in this regard to update themselves on the recent developments on various issues related to DPCO, 2013.

## 13. Office Space for the PMRUs

13.1. The concerned State Government / UT Administration will have to provide the required office space for the PMRU free of cost, like rent, maintenance, etc.

13.2. All other expenses (both non-recurring and recurring expenses) will be met out of the funds provided under the Scheme. Any expenditure incurred over and above the grant (recurring or non-recurring) will have to be borne by the respective Government of State/UT.

## 14. Review of Performance of PMRUs

14.1. At the Central level, the Member Secretary, NPPA, along with the Director in charge of the PMRU Division/CAPPM, NPPA, shall oversee the implementation of the project. The progress of the Scheme shall be reviewed quarterly by the Director, PMRU Division/CAPPM, NPPA. Officers posted in the NPPA may also undertake visits to the PMRUs, as and when required, to review and monitor their performance.

14.2. At the State level, the progress of the PMRUs shall be monitored by the concerned State Drugs Controller. The State Drugs Controller shall convene meetings of the Executive Committee Meeting of the PMRU Society every quarter and meetings of the Governing Body Meeting twice in each financial year to review the progress of the Scheme. The minutes of the Executive Committee and Governing Body meetings shall be submitted promptly through the IPDMS Portal.

14.3. A monthly progress report, clearly indicating targets and other pre-determined parameters vis-à-vis achievements, shall be submitted to NPPA by the 15th of every month. In addition, a review

meeting at the level of Member Secretary/Chairman shall be conducted once every six months to assess overall performance and progress under the Scheme.

**15. IEC (Information, Education, and Communication) activities:**

15.1. With a view to enhancing consumer awareness and outreach at the grassroots level, each PMRU shall undertake a minimum number of Information, Education and Communication (IEC) activities across the respective State/Union Territory. Such activities shall include the following:

| **Activity** | **Category -I** | **Category -II** | **Category -III** |
|---|---|---|---|
| (i) Conduct of training programmes, workshops and seminars at the state level | 1 per year | 1 per year | 1 per year |
| (ii) Conduct of training programmes, workshops and seminars at the district and sub-district levels (including village-level outreach) | ≥ 3 per month | ≥ 2 per month | ≥ 1 per month |
| (iii) Display and dissemination of information through wall paintings, posters and other IEC materials in regional languages | ≥ 1 per month | ≥ 1 per month | ≥ 1 per month |
| (iv) Undertaking other IEC activities through digital, social and local media platforms, including community-based outreach initiatives such as street plays (nukkad natak) and similar engagements | ≥ 3 Campaigns or Posts per month | ≥ 3 Campaigns or Posts per month | ≥ 3 Campaigns or Posts per month |

15.2. Each PMRU shall include its achievements against the above parameters of IEC activities in its monthly progress report.

15.3. Without prejudice to the minimum IEC activities prescribed above, the following list of IEC activities shall be undertaken by the PMRUs to strengthen awareness, outreach, and stakeholder

engagement:

i. Publishing and disseminating information on the notifications of NPPA through the official SDC website and other appropriate digital platforms.

ii. Engagement with manufacturers/ marketers of drugs, pharma industry associations and consumer organizations to create awareness about DPCO, 2013, Pharma Sahi Daam App, Pharma Jan Samadhan, and the role and functioning of PMRUs and NPPA.

iii. Creating awareness among the manufacturers/ marketers of drugs operating in the State/UT regarding compliance requirements DPCO, including registration, filling of prescribed forms, other procedural requirements, etc., on the Integrated Pharmaceutical Database Management System (IPDMS) Portal of NPPA.

iv. Engagement with research institutions, medical colleges, State-level health agencies, and allied organizations to disseminate information and promote awareness on price regulation, consumer rights, etc., as per DPCO.

v. Awareness campaigns through regional television channels and other local media in vernacular languages, to ensure wider public outreach and accessibility of information.

**16. Auditing of the PMRUs:**

16.1. Each PMRU will be required to get the audit done annually by 30th September and the audit report submitted to NPPA in due course. Release of further grants will depend upon the performance, actual expenditure and production of the Utilization Certificate (UC) of funds received in the previous year (duly signed by SDC in the format prescribed by the Government of India for this purpose).

**17. Impact assessment and further release of grant to the PMRUs:**

17.1. Based on the monthly performance furnished by the State Level Committee, the NPPA would then make an impact assessment. The impact assessment, along with the Utilization Certificate (UC) for

funds (duly signed by SDC in the format prescribed by the Government of India for this purpose), would form the basis for further release of funds.

## 18. Period of Implementation

18.1. The revised/modified scheme is to be implemented in five years from the financial year 2026-27 through 2030-31. A mid-term review shall be undertaken after 2028-29. The Scheme may be reviewed for its extension for the period beyond 2030-31.

*****