

# National Medical Commission (NMC) Bill

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## Manifest pedagogy:

Health as a topic under Governance needs to be studied from two dimension

1. Health as science
2. Health as governance

This topic below is related health governance ,its problems and solutions

## **In news:**

- President Ram Nath Kovind recently gave assent to a key legislation aimed at replacing the nearly 63-year-old Indian Medical Council Act.

## **Current dimensions:**

- NMC bill, 2019 provisions
- Problems in the sector which the bill aims to solve
- Criticisms against the bill

## **Content:**

Recently Rajya Sabha cleared the National Medical Commission (NMC) Bill by including a crucial amendment brought in by the government to increase representation of States in the new body, as demanded by the Opposition. The Bill was passed by a voice vote. The Lok Sabha had earlier cleared the proposed law on July 29,2019. The NMC will replace the Medical Council of India (MCI)

## **What is NMC Bill 2019?**

- The NMC Bill proposes to repeal the Indian Medical Council Act, 1956 and replace the Medical Council of India (MCI).
- The president had dissolved the MCI in 2018 following corruption charges against its president Ketan Desai by the Central Bureau of Investigation (CBI).
- A board of governors was appointed to perform its functions.
- As per the Bill, a National Medical Commission will be set up in place of MCI that will have responsibilities such as:
  1. approving and assessing medical colleges,
  2. conducting common MBBS entrance and exit examinations
  3. regulating medical course fees
- The NMC will be an overarching body, which will frame policies and coordinate the activities of four autonomous boards. These boards will look after the work of under-graduate and postgraduate education, Medical Assessment and Rating and Ethics and Medical Registration

### **Provisions of the bill:**

#### **Community Health Provider**

According to the Bill, the Commission may grant limited licence to practice medicine at mid-level as Community Health Provider to such person connected with modern scientific medical profession who qualifies such criteria as may be specified by the regulations (provided that the limited license to be granted under this subsection shall not exceed more than one-third of the total number of licensed medical practitioners registered under sub-section (1) of section 31)

The earlier proposal of a bridge course clearing by which alternative medicine doctors could practise modern medicine was removed when doctors had opposed. The government made changes in the bill for the provision *to help tackle the disease burden in rural areas*. According to the Bill, the Community Health Provider may prescribe specified medicine independently, only in primary and preventive healthcare, but in cases other than primary and preventive healthcare, he may prescribe medicine only under the supervision of medical practitioners registered under sub-section (1) of section 32.

### **National Exit Test (NEXT)**

**Section 15 (1)** of the bill proposes a common final-year MBBS exam, the **National Exit Test (NEXT)**, before an individual starts practising medicine and for seeking admission to postgraduate medical courses and for enrolment in the State Register or the National Register. It will also be a screening test for foreign medical graduates. It will be applicable to all institutes including those of national importance like AIIMS

### **Medical Advisory Council**

Under the Bill, the central government will constitute a Medical Advisory Council. The Council will be the primary platform through which the states/union territories can put forth their views and concerns before the NMC. Further, the Council will advise the NMC on measures to determine and maintain minimum standards of medical education

### **Private colleges Fee regulation**

NMC would frame guidelines for determination of fees and all other charges for 50% of the seats in private medical colleges and deemed universities which are governed under the provisions of this Act because there should be capping on the fee charged by the unaided medical institutions

## **Membership of NMC:**

As per the Bill, of 25 members proposed for the NMC, only five would be elected which means the non-elected members would be either government officials or those nominated by the government

## **States representation in Commission:**

There will be 10 vice-chancellors of state health universities and nine elected members of state medical councils in the NMC

## **NEET to stay**

NEET, a national entrance test along with common counselling for MBBS is provided, which is already an institutionalised mechanism for the successful conduct of tests in 13 languages. Its syllabus is decided by considering the curricula of State Boards and it will be improved continuously.

The NMC, after the law is implemented, will be constituted in nine months and in the next three years, it will set up the mechanism for conducting NEXT for all MBBS students. Based on the results, the students will get their degrees and licence to practise (after an internship). Performance in the theory paper will decide eligibility for admission to postgraduate courses

## **Problems in the sector which the bill addresses:**

The Bill aims to provide for a medical education system that improves access to quality and affordable medical education, ensures the availability of adequate and high quality medical professionals in all parts of the country

- A provision has been made to register community health providers (CHPs) who will be modern medicine professionals and not those dealing with any alternative system of medicine. Also, they will have limited powers for providing primary and preventive healthcare at the

mid-level. The eminent doctors in NMC will decide their qualifications through regulations which will be finalized after extensive public consultation and debate.

- There was no provision to regulate fees in the Indian Medical Council Act 1956. In view of the lack of a regulatory mechanism, the Supreme Court had to pass orders for setting up of fees committees in each state to be chaired by retired high court judges. Hence the Act provides for regulation of fees and all other charges in 50 percent seats in private colleges as well as deemed-to-be universities. This means that almost 75 percent of total seats in the country would be available at reasonable fees.
- The act will ensure probity, quality education and bring down the costs of medical education. It simplifies procedures and provides wider access to people for quality healthcare.
- The NEXT results will eliminate the need for students to approach multiple colleges and take part in multiple counselling processes for admission. This will save students and their families unnecessary physical and financial trauma.
- The Act does not impose any restriction on the number of attempts at NEXT for improving the rank for admission to postgraduate courses.
- 19 out of 33 members, which is more than half of the total strength, would be from states and only a minority of members will be appointed by the Central government thereby ensuring NMC is representative, inclusive and respecting the federal structure of Indian polity.
- The NMC will have eminent medical personalities as members who will be appointed for only one term of four years and will not be eligible for any further extension. They will have to declare their assets at the time of being appointed and again while demitting office.

- The members will also have to declare their professional and commercial engagement or involvement which will be published on the website of the Commission. This ensures transparency of the highest posts.
- It has been further provided that chairperson/member on ceasing to hold office will not accept for a period of two years any employment in any capacity in a private medical institute whose matter has been dealt with them either directly or indirectly

### **Criticisms against the bill:**

1. The new section 32 has been added where community health providers like compounders, lab technicians, blood sample collectors, etc. could get license to practice medicine without the supervision of a qualified doctor. This means persons without medical background are becoming eligible to practise modern medicine and prescribe independently. This is like creating 3.5 lakh, legally, registered quacks in India.
2. Medical student fraternity has completely rejected NEXT in its present format and is against scrapping the NEET-PG. According to them, merit should be the determining factor in securing a PG seat and the current NEET-PG should not be scrapped.
3. The system of allopathic health care by qualified MBBS graduates should be governed only by qualified MBBS graduates. But as per the bill, only 20 percent of the members would be elected which means the non-elected members would be either government officials or those nominated by the government.
4. The decreasing percentage of seats under controlled fees structure in private medical colleges and deemed universities from 85% to 50% is opposed.
5. The **section 45** of the bill, which empowers the Union government to override any suggestion of the NMC is criticised

