

National Medical Commission Bill, 2019 [UPSC Notes for GS II]

National Medical Commission Bill, 2019

Context: President Ram Nath Kovind has approved the National Medical Commission Bill, 2019.

Background:

Chief concerns with respect to the regulation of medical education and practice:

- Many experts have studied the MCI's functioning and recommended a different system of structure and governance for its regulatory powers. Some of the issues raised by them include:

(a) Separation of regulatory powers

- For the past few years, the Medical Council of India has received flak for its slow and cumbersome functioning because of the centralisation and concentration of all regulatory functions in a single body.
- The reason for this is that the Council regulates medical education and also medical practice.
- To counter this, there were recommendations that the MCI, like its other professional counterparts should regulate only the practise of medicine and not be involved in academic functions. Such academic functions should be included under an apex body for higher education to be known as the National Commission for Higher Education and Research.
- This would ensure separation of the regulation of medical practice and medical education.

(b) Looking at Recommendations by an Expert Committee:

- An Expert Committee chaired by Professor Ranjit Roy Chaudhury in 2015 recommended structurally reorganising the MCI's functions and suggested the formation of a National Medical Commission through a new Act.
- Here, the National Medical Commission would be an umbrella body for supervision of medical education and oversight of medical practice.
- It will have four segregated verticals under it to look at: (i) under-graduate medical education, (ii) post-graduate medical education, (iii) accreditation of medical institutions, and (iv) the registration of doctors.

(c) Composition of MCI

- With most members of the MCI being elected, the NITI Aayog Committee in 2016 observed that there was a conflict of interest, where the regulated elect the regulators, and possibly preventing the entry of skilled professionals for the job.
- The Committee suggested a framework be set up under which regulators are appointed through an independent selection process.

(d) Fee Regulation:

- The NITI Aayog Committee (2016) recommended that a medical regulatory authority, such as MCI, should not engage in fee regulation of private colleges.
- Such regulation of fee by regulatory authorities may encourage an underground economy for medical education seats with capitation fees (any payment in excess of the regular fee), in regulated private colleges.
- Further, the Committee stated that having a fee cap may discourage the entry of private colleges limiting the expansion of medical education in the country.

(e) Professional conduct:

- The Standing Committee on Health (2016) observed that the present focus of the MCI is only on licensing of medical colleges.
- There is no focus on enforcing medical ethics in education and on instances of corruption noted within the MCI.
- Viewing this, the Committee suggested that medical education and medical practice should be split from each other in terms of enforcement of the appropriate ethics for each of these stages.

NMC Act 2019:

The act paves the way for the establishment of the country's new regulator of medical education and certification.

The Union Health Minister described the NMC Act as a 'progressive' legislation that would help to reduce

1. The burden on students,
2. Ensure probity in medical education,
3. Bring down costs of medical education,
4. Simplify procedures,
5. Aid in increasing the number of medical seats in the country,
6. Ensure quality education,
7. And provide better access to people for quality healthcare.

The Minister also wanted to quell the impression that the NMC is dominated by nominees of the central govt. He stated that there would be 10 VCs of State Health Universities and 9 elected members of the State Medical Councils.

Features of the bill

- The bill provides for the setting up of a medical commission in place of the Medical Council of India (MCI) and repeal of the Indian Medical Council Act, 1956.
- The NMC will be 25-member body partly selected and partly elected.
- The NMC will have control over medical education — approvals for colleges, admissions, tests and fee-fixation.
- A 'singular' feature of the NMC Act is that it provides for the regulation of fees and all other charges in 50% seats in private colleges as well as deemed Universities.
- Medical Advisory Council: As per the Bill, the union government will constitute a Medical Advisory Council which would be the chief platform by which the states/UTs can express their views and concerns before the Commission.
- The NMC will lay down the standards which the medical colleges will have to conform to. There would be no need for annual renewals if they conform once and are allowed to function.
- As per the bill, the NMC will have four autonomous boards,
 - under-graduate medical education board,
 - post-graduate medical education board,
 - medical assessment and rating board and
 - Ethics and medical registration board.
- There will be a uniform **National Eligibility-cum-Entrance Test** for admission to under-graduate and postgraduate superspeciality medical education in all medical institutions regulated under the Act.
- Further, the Act introduces a common final year undergraduate examination called the National Exit Test for students graduating from medical institutions to obtain the license for practice. This test will also serve as the basis for admission into postgraduate courses at medical institutions.
- Under this Act, Foreign medical practitioners may be permitted temporary registration to practice in India.

To fill in the gaps of availability of medical professionals, the Act provides for the NMC to grant limited license to certain mid-level practitioners called community health providers, connected with the modern medical profession to practice medicine. These mid-level medical practitioners may prescribe specified medicines in primary and preventive healthcare. However, in any other cases, these practitioners may only

prescribe medicine under the supervision of a registered medical practitioner.

Concerns:

Community Health Provider

- The Indian Medical Association (IMA) has expressed concerns over Section 32 of the Bill that provides for licensing of non-medical persons or Community Health Providers (3.5 lakhs in number) to practise modern medicine.
- Some time back, there was a proposal in which alternate medicine practitioners could practise modern medicine after clearing a bridge course. This proposal saw major opposition from doctors. Then, the govt. made changes to the bill but proposed another similar move, involving community health providers to assist with tackling the disease burden in rural regions.
- The IMA in an official statement had expressed its opinion that the definition of the term Community Health Provider was vague and that it allowed anyone connected with modern medicine to get registered via NMC and get the license to practise modern medicine.
- This implies that persons without medical background could become eligible to practise modern medicine and prescribe treatment independently.

National Exit Test (NEXT)

- Section 15 (1) of the NMC Bill has proposed a common final-year MBBS exam called the National Exit Test (NEXT), which has to be cleared for an individual to start practising medicine and to take admission for PG medical courses and also to enrol in the State or National Register.
- The medical student community has rejected the NEXT in its current format reasoning that merit alone should determine admission for PG. They also said that the present system of NEET-PG exam should be continued.

Private colleges Fee regulation

- In private colleges and deemed universities, NMC will have regulation over the fees and all other charges for 50% of the seats.
- The bill provides that there should be an upper limit restriction for the fee charged by unaided medical colleges. Accordingly, the current fee regulation system by the Fee Regulating Authority should be continued and this provision in the bill would be amended accordingly.

Composition of Commission:

- 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.
- Indian Medical Association (IMA) opposed the bill that it will cripple the functioning of medical professionals by making them completely answerable to the bureaucracy and non-medical administrators.

