



National Medical Commission (NMC) Bill 2017

What is the issue?

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- There is nationwide opposition to the proposed National Medical Commission (NMC) Bill 2017.

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- With Lok Sabha sending it to the Parliamentary standing committee on health, the provisions need a serious rethink.

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What are the key provisions?

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- **Commission** - The NMC bill seeks to replace the Medical Council of India with National Medical Commission as the top regulator of medical education.

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- The 20 members **National Medical Commission** will be at the top of a four-tier structure for regulation.

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- NMC will comprise of a Chairperson, a member secretary, eight ex-officio members and 10 part-time members.

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- Out of the 8 ex-officio members, four shall be presidents of the boards constituted under the act.

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- The remaining four shall be nominees from three ministries viz. Health, Pharmaceuticals, HRD and one from Director General of Health Services.

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- **Autonomous Boards** - The Bill sets up under the supervision of the NMC certain autonomous boards which are:\n

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- i. the Under-Graduate Medical Education Board (UGMEB) and the Post-Graduate Medical Education Board (PGMEB)
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 - ii. the Medical Assessment and Rating Board (MARB)
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 - iii. the Ethics and Medical Registration Board
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- Each board will consist of a President and two members, appointed by the central government.
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 - **Medical Advisory Council** - It will be a platform for the states/union territories to put forth their views and concerns before the NMC.
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 - Essentially, the Council will advise/make recommendations to and oversee the functions of the NMC.
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 - **Exam** - Students have to clear the common entrance exam NEET for MBBS.
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 - Besides, the **National Licentiate Examination** will be mandatory for medical graduates before practising/pursuing PG.
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 - Under specified regulations, the NMC can also permit a medical professional to perform surgery or practise medicine without qualifying the licentiate (exit) exam.
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 - **AYUSH practitioners** - On completion of a **bridge course**, practitioners of Indian systems of medicine, including Ayurveda and homoeopathy would be allowed to practise allopathy.
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 - The rationale is to address the shortfall of rural doctors by creating a new cadre of practitioners.
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 - **Private college** - The government, under the NMC, can dictate guidelines for fees up to 40% of seats in private medical colleges.
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 - This is aimed at giving students relief from the exorbitant fees charged by these colleges and is a standout feature of the bill.
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What are the contentions?

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- **Registry** - Graduates of Bachelor of Ayurvedic Medicine and Surgery, and Bachelor of Homeopathic Medicine and Surgery are already registered with their respective councils.

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- The NMC registry, in addition to this, could result in dual registration, which is neither open nor permissible.

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- **Corruption** - The bill aims to overhaul the corrupt and inefficient Medical Council of India.

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- This is sought to be accomplished through an independent Medical Advisory Council.

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- However all members of the Council are members of the NMC as well, thereby undermining the council's independence and its very purpose.

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- **Bridge Course** - The provision has created widespread resentment among allopathy doctors.

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What could possibly be done?

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- The government could empower existing doctors before integrating alternative-medicine practitioners into modern medicine.

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- Notably, MCI regulations prevent even experienced MBBS doctors from carrying out procedures like caesarians and ultrasound tests.

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- Also, nurses are barred from administering anaesthesia.

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- An alternative would be to have a three-year diploma for rural medical-care providers, as earlier practised in Chhattisgarh.

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- Graduates from such diploma courses could be allowed to provide basic care in under-served regions, to meet out the shortfall.

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Source: The Hindu, Financial Express

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