National Medical Commission (NMC) Bill 2017

What is the issue?

There is nationwide opposition to the proposed National Medical Commission (NMC) Bill 2017. With Lok Sabha sending it to the Parliamentary standing committee on health, the provisions need a serious rethink.

What are the key provisions?

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

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

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

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

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

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

  - i. the Under-Graduate Medical Education Board (UGMEB) and the Post-Graduate Medical Education Board (PGMEB)

  - ii. the Medical Assessment and Rating Board (MARB)
• Each board will consist of a President and two members, appointed by the central government.

• Medical Advisory Council - It will be a platform for the states/union territories to put forth their views and concerns before the NMC.

• Essentially, the Council will advise/make recommendations to and oversee the functions of the NMC.

• Exam - Students have to clear the common entrance exam NEET for MBBS.

• Besides, the National Licentiate Examination will be mandatory for medical graduates before practising/pursuing PG.

• Under specified regulations, the NMC can also permit a medical professional to perform surgery or practise medicine without qualifying the licentiate (exit) exam.

• AYUSH practitioners - On completion of a bridge course, practitioners of Indian systems of medicine, including Ayurveda and homoeopathy would be allowed to practise allopathy.

• The rationale is to address the shortfall of rural doctors by creating a new cadre of practitioners.

• Private college - The government, under the NMC, can dictate guidelines for fees up to 40% of seats in private medical colleges.

• This is aimed at giving students relief from the exorbitant fees charged by these colleges and is a standout feature of the bill.

What are the contentions?

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

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

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

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

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

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

What could possibly be done?

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

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

- Also, nurses are barred from administering anaesthesia.

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

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

**Source: The Hindu, Financial Express**