

Billed for change: amendments to the National Medical Council Bill

The [Union Cabinet this week approved six out of the dozens of changes to the contentious National Medical Commission \(NMC\) Bill](#) that were suggested by a Parliamentary Standing Committee earlier this month. These changes address some of the loudest criticisms of the Bill. Among them, the final year MBBS exam is now merged with an exit exam for doctors, and a contentious bridge course for AYUSH (Ayurveda, Yoga and Naturopathy, Unani, Siddha, Homeopathy) practitioners has been axed. Health-care experts had recommended other modifications, which the Cabinet ignored. For example, despite the Cabinet's amendments, the NMC, the regulatory body that will replace the Medical Council of India, will be heavily controlled by the government. Its members are to be picked by a search committee headed by the Cabinet Secretary, while the Central government is to be the appellate body for those aggrieved by the NMC's decisions. The parliamentary committee had batted for an independent appellate body. The amendments cleared by the Cabinet also increase State representation in the NMC from three part-time members to six, in what seems like a gesture to please the States. Contrast this with the parliamentary committee's recommendation to include 10 State representatives, given India's vastness. Another amendment that doesn't go far enough is the decision to raise the proportion of private college seats for which fees will be regulated from 40% to 50%. The fees for unregulated seats could then skyrocket, pushing poorer medical aspirants out of the system.

Despite these deficiencies, if passed by Parliament, the legislation will mark a new era for medical education in India. The next step will be to design rules and regulations that capture the intent of this law. This itself will be a massive challenge. How, for one, will the logistical difficulty of conducting a common final year MBBS examination across the country be overcome? Multiple-choice questions are easy to administer, but testing the range of theoretical knowledge and practical skills expected of medical graduates is more difficult. Throw in the enormous inter-State variations in medical education across India, and the challenge is obvious. Lawmakers will have to tackle this gigantic task in a slow and phased manner. Another concern is that under the new amendments States now have the freedom to implement an AYUSH bridge course, even if no longer mandatory. How will the Centre ensure the quality of such courses to prevent a new set of poorly trained doctors from emerging? The coming days may see many more protests against the NMC Bill, perhaps delaying its passage and prompting further discussion. For a Bill that marks the first major reform in medical education since 1956, such an extended debate is not a bad thing.

The revival of the Trans-Pacific Partnership, sans U.S., must buttress the free trade debate

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