

MMA Demands Transparency On Rakan KKM Amid Backlash

By CodeBlue | 15 July 2025

MMA demands an immediate explanation about Rakan KKM amid the lack of details on its operational model, especially if recruitment efforts have already begun. “A key concern is whether the initiative may inadvertently create inequities in access to care.”



Malaysian Medical Association president Dr Kalwinder Singh Khaira speaks at the Industry Leadership Summit 2024 in Kuala Lumpur on October 10, 2024, organised by the Galen Centre for Health and Social Policy and supported by PMCare Sdn Bhd. Photo by Saw Siow Feng.

KUALA LUMPUR, July 15 — The Malaysian Medical Association (MMA) today demanded further explanation on Rakan KKM, amid public backlash over the perceived privatisation of the national health service.

The country's largest doctors' group highlighted the lack of clarity surrounding Rakan KKM's governance, operational model, scope of services, financing structure, and human resource planning.

"We urge that further explanation be done without delay to prevent confusion or concern among the health care community and the public. Transparency is essential, especially if recruitment efforts have already begun," said MMA president Dr Kalwinder Singh Khaira in a statement.

"MMA emphasises that any new initiative within the public health care framework must be people-centric, not profit-driven and must prioritise the interests of the rakyat.

"All reforms or partnerships in health care must be guided by the principles of equity, quality, transparency, and long-term sustainability."

Despite the disruptive nature of Rakan KKM – which goes far beyond upgrading the existing full-paying patient (FPP) service that was fully run by the Ministry of Health (MOH) without corporatisation – the ministry appears to have conducted very little stakeholder engagement or town halls with the general public on Rakan KKM.

The only Rakan KKM stakeholder engagement session publicly posted by the MOH was held solely for MOH staff at the National Cancer Institute (IKN) in [October 2024](#).

Rakan KKM received an RM25 million allocation from the Ministry of Finance (MOF) during Budget 2025 that was [tabled nearly a year ago last October](#).

Yet, the MOH has provided scant details on its new private health care service beyond vague buzzwords on [Rakan KKM's website](#) – until recently when [Health Minister Dzulkefly Ahmad told reporters](#) that Rakan KKM would fast-track paying patients for elective procedures in select government hospitals.

Dzulkefly released a few more details on Rakan KKM in a [post on X](#) last Sunday, including the fact that a government-linked investment company (GLIC) investor may take an equity stake in Rakan KKM Sdn Bhd, which is currently fully owned by the Minister of Finance Incorporated (MOF Inc.), and that the company's profits will be distributed to shareholders.

The MOH aims to launch Rakan KKM by the third quarter of this year at Cyberjaya Hospital, Putrajaya Hospital, Sultan Idris Shah Serdang Hospital, and IKN.

MMA called for details on the manpower structure of Rakan KKM, in light of job advertisements and current staff recruitment.

Many Malaysians have slammed the government for creating [management positions in Rakan KKM Sdn Bhd](#) with monthly salaries of up to RM20,000, while doctors and nurses in public service remain underpaid.

One of MMA's key concerns with Rakan KKM was the inadvertent creation of inequities in access to health care based on one's ability to pay.

Dr Kalwinder cited growing apprehension that wealthier patients could be given faster access to services through Rakan KKM within public facilities, effectively creating a two-tiered system.

"Such an outcome would undermine the principles of universal health coverage (UHC), which are built on fairness and equal access to care for all, regardless of socioeconomic status," he said.

Dr Kalwinder questioned the impact of Rakan KKM on the already strained public health care workforce.

"With severe shortages of doctors, nurses, and allied health professionals in public facilities, it is crucial that MOH clarify whether Rakan KKM will involve the secondment of government staff, external recruitment, or a transition of existing clinical and non-clinical personnel out of the public system," said MMA.

"Concerns on whether existing MOH resources, such as infrastructure, equipment, and administrative support, will be utilised for services provided under this initiative also need to be addressed."

MMA further highlighted concerns with regulatory oversight, since [Rakan KKM Sdn Bhd](#) is applying for licensing under the MOH's Private Medical Practice Control Section (CKAPS), in accordance with the Private Healthcare Facilities and Services Act 1998 (Act 586).

"As this is a government initiative, to be regulated by another arm of the government, public trust in its transparency, accountability, and compliance with health care standards must be assured."