



Delay display of medicine prices until GP issues resolved, says MMA

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The association points out that consultation fees have not changed in 30 years, and that prescription drugs are randomly sold at pharmacies and online.



Beginning this year, private healthcare facilities must display medication prices to enhance transparency and prevent arbitrary price increases. (Freepik pic)

PETALING JAYA: The Malaysian Medical Association has urged the government to delay the implementation of mandatory price displays until key issues affecting private general practitioners are resolved.

MMA president Dr Kalwinder Singh Khaira said the two main issues were GP consultation fees, which have not changed in 30 years despite rising operational costs, and the unregulated sale of prescription drugs at pharmacies and online.

“While MMA supports transparency in healthcare pricing, enforcing this policy without addressing the long-standing issue of GP consultation fees will threaten the sustainability of

private primary care services, endanger GP clinics, and push more patients towards already overcrowded public healthcare facilities,” he said in a statement today.

His remarks come despite the health ministry maintaining that private healthcare facilities must display medicine prices starting this year under the Price Control and Anti-Profiteering Act 201

The move has largely been opposed by MMA and the Federation of Private Medical Practitioners’ Associations, Malaysia.

Kalwinder also said that patients at private clinics can already request information on service and medication costs.

“With medicine price display, there is a strong likelihood of consumers opting to purchase prescription drugs from pharmacies or via online shopping.

“We are deeply concerned about the lack of control over the widespread sale of prescription drugs without a doctor’s prescription at pharmacies and online,” he said.

Citing a 2017 MMA study showing that only 10% of clinics were financially stable, Kalwinder warned that any additional regulatory burden without economic safeguards would lead to more closures, ultimately limiting access to affordable primary care.

“Many clinics rely on cross-subsidisation from medicine dispensing revenue to keep services affordable.

“Implementing the price display policy without revising consultation fees will force clinics to either increase charges or reduce service quality,” he said.

He also noted that the surge in contract doctors leaving government service for private practice has led to 4,000 new private clinics opening in recent years, intensifying competition and financial strain.