

# Doctors' Groups Demand Universal 50% On-Call Allowance Raise

**By Boo Su-Lyn | 26 September 2025**

MMA and HDK demand for a “long overdue” 50% on-call allowance raise to be allocated in Budget 2026 (RM110-RM125 increment for MOs/specialists). They say this ETAP increase must be given to all doctors doing on-call, regardless of department/work schedule.



*Malaysian Medical Association (MMA) president Dr R. Arasu (left) and Hartal Doktor Kontrak (HDK) spokesman Dr Muhammad Yassin (right). Dr Arasu's photo by Sam Tham for CodeBlue, Dr Muhammad's photo courtesy of himself.*

**KUALA LUMPUR, Sept 26** — Two doctors' groups have demanded a 50 per cent on-call allowance (ETAP) increase to be allocated in Budget 2026 for medical officers across the board.

The Malaysian Medical Association (MMA) said although it maintained its position for a new ETAP rate of RM25 per hour, a 50 per cent raise would be "next best" and was long overdue, given that the last revision was over a decade ago in 2012.

Medical officers currently receive ETAP at RM220 per shift for a weekend active call, equivalent to RM9.16 per hour for a 24-hour shift.

An RM25 hourly rate is equivalent to RM600 per shift, marking a 173 per cent (RM380) increase, whereas a 50 per cent raise translates to an additional RM110, totalling RM330 per shift (RM13.75 per hour).

"Any increase in on-call rates must be applied fairly across the board. Every doctor in the system doing on-call deserves to be recognised equally for their contribution," MMA president Dr R. Arasu told *CodeBlue* yesterday in a statement.

The government previously allocated a 25 to 26 per cent increase of on-call allowance rates in Budget 2025 at an additional RM55 to RM65 for medical/dental officers and specialists respectively.

Health Minister Dzulkefly Ahmad said in a recent written Dewan Negara reply that the Ministry of Health (MOH) was working on a Cabinet memorandum to propose a new ETAP rate for medical and dental officers, as well as new "guidelines" to improve implementation of on-call duty.

Dzulkefly also said a 50 per cent raise of ETAP, which currently costs the MOH about RM288 million annually, would increase the cost of on-call allowance by RM144 million to RM432 million a year.

Despite the Budget 2025 allocation of ETAP increment, the government failed to implement it this year because the MOH limited the on-call allowance raise to select departments or units scheduled to pilot the Waktu Bekerja Berlainan (WBB) shift system.

The Cabinet axed the WBB pilot project in January due to fierce backlash from doctors, who criticised the injustice of giving the increment to certain groups and risk to patient safety from proposed 18-hour shifts (3pm-9am).

Hartal Doktor Kontrak (HDK) similarly demanded a 50 per cent on-call allowance raise for doctors in the government health service.

"The current RM220-RM250 per on-call shift equates to about RM9.16 per hour, which is widely regarded as undervalued, even less than pay for unskilled workers," HDK spokesman Dr Muhammad Yassin told *CodeBlue* in a statement yesterday.

Specialists currently receive ETAP of RM250 per shift (RM10.42 per hour) for weekend active calls. A 50 per cent raise means an additional RM125, totalling RM375 per shift.

HDK described the RM144 million annual cost of a 50 per cent ETAP increment as a “small amount compared to large government projects”, but that would significantly improve doctors’ morale amid workforce shortages and rising patient loads.

The contract doctors’ group further demanded compulsory ETAP revisions every three years with fixed percentage increases of 20 to 30 per cent.

“HDK also emphasises that remuneration is key to retaining doctors, with many resignations linked to low pay and burnout. Therefore, adequate ETAP increases are vital to sustaining the public health care system,” said Dr Muhammad.

Following the health minister’s statement about new “guidelines” for on-call work, HDK expressed fears that any on-call allowance increment allocated in Budget 2026 might be tied to a revival of the WBB model.

“HDK insists the ETAP increase must be universal for all qualified medical officers, regardless of department or work schedule, to unify morale and avoid discrimination,” said Dr Muhammad.

“Linking pay raises to work schedule changes dilutes the purpose of ETAP, which is to fairly compensate on-call services. It also risks further stress and dissatisfaction if new working conditions are unpopular or difficult to implement.”

When asked how government doctors’ working hours could be improved, HDK called for mandatory post-call off days across all departments, so that medical officers and specialists can leave after morning handover instead of continuing work till late afternoon.

“HDK advocates for integrated planning between workforce expansion, fair ETAP remuneration, and humane work schedules to maintain service quality and staff well-being.”

MMA said the real issue was manpower distribution.

“When resources are stretched unevenly, some facilities bear a heavier load, forcing doctors into excessive on-call duties,” said Dr Arasu.

“The MMA has long suggested that the MOH implement a dashboard with data on the distribution of its manpower. Only by looking at this data, and the needs in each state, can better planning of our health care human resources be achieved.”