

Restore 300L Monthly Fuel Subsidy Quota For Health Workers — MMA

By CodeBlue | 3 April 2026

We recommend restoring the 300-litre monthly fuel subsidy quota, or implementing a specific exemption, for health care workers who are required to be physically present for duty in MOH. Policies must remain equitable and grounded in operational realities.



Malaysian Medical Association president Dr R. Arasu speaks at a doctors' rally in Putrajaya on May 6, 2025, to protest the Domestic Trade and Cost of Living Ministry's (KPDN) jurisdiction over mandatory drug price display under the Price Control and Anti-Profiteering Act 2011 (Act 723). Photo by Sam Tham for CodeBlue.

The Malaysian Medical Association (MMA) supports the call by MAPSU for the government to restore the 300-litre monthly fuel subsidy quota under Budi95 for health care workers under the Ministry of Health (MOH).

This is not a matter of privilege, but one of operational necessity and fairness.

Healthcare delivery is inherently presence-dependent. Across Malaysia, in both Peninsular states as well as Sabah and Sarawak, doctors, nurses, paramedics, and allied health professionals are required to be physically present at health care facilities every day. There is no work-from-home alternative when it comes to patient care.

In contrast to other sectors that may benefit from flexible arrangements, health care workers have continued to report for duty regardless of location, shift hours, or personal cost. A uniform approach to fuel subsidy rationalisation therefore does not reflect the realities on the ground.

More importantly, this issue must be viewed within the broader context of our public health care system. Today, the system is underfunded, overworked, and understaffed yet it continues to serve the majority of Malaysians, with an estimated 70 per cent of the population relying on public health care services.

An underfunded, overworked, and understaffed system cannot absorb another burden.

At a time when demand is rising driven by chronic diseases, an ageing population, and increasing health care needs, we should be strengthening, not straining, the workforce that sustains this system. The burden of non-communicable diseases alone already costs Malaysia billions annually and continues to grow.

Additional financial pressures on health care workers, even if unintended, risk affecting morale, focus, and retention. This is not just a workforce issue, it is a patient care issue.

MMA therefore urges the government to adopt a targeted and pragmatic approach. We recommend restoring the 300-litre monthly subsidy quota, or implementing a specific exemption, for health care workers who are required to be physically present for duty under MOH.

We support fiscal responsibility and the need for subsidy rationalisation. However, policies must remain equitable and grounded in operational realities.

Supporting our health care workers is not a concession, it is a necessary investment in the resilience, stability, and performance of Malaysia's public health care system.

This statement was issued by Dr R. Arasu, president of the Malaysian Medical Association (MMA).

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