

# Malaysia Needs A Health Service Commission Authorised With Manpower, Funding Powers — MMA

By CodeBlue | 4 May 2026

Malaysia needs a Health Service Commission — with full independence over manpower and funding. Health care workforce planning cannot operate effectively within a one-size-fits-all civil service framework.



*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) welcomes and commends Health Minister Dzulkefly Ahmad for taking a bold step in

forming an inter-ministerial panel. His recognition that this crisis cannot be solved by the Ministry of Health (MOH) alone reflects

the whole-of-government approach needed. However, intent must now be matched with clear timelines, committed budget, and measurable accountability.

The public sector is pushing specialists out — that is the elephant in the room that must be addressed directly. Long working hours, heavy workloads, limited career progression, and uncertainty in specialist training pathways are key reasons they leave.

If we want to retain talent, we must fix the system. The Ministry of Finance (MOF) and Public Service Department (JPA) must expand the JUSA post structure, ensure transparent career progression, and create a pathway worth staying for.

At a structural level, two shifts are needed. First, Malaysia needs a Health Service Commission with full independence over manpower and funding. Health care workforce planning cannot operate effectively within a one-size-fits-all civil service framework.

Second, central policy, local implementation. National standards must be set federally, but execution must reflect realities on the ground. A uniform directive from Putrajaya cannot deliver equitable outcomes across all regions.

What must be different this time is execution. The Prime Minister must personally chair accountability reviews, set clear quarterly public milestones, and ensure MOF and JPA act decisively — not advise, but act.

Health care reform must not be diluted by the political calendar. The rakyat cannot afford for this to become an election talking point rather than a delivered outcome.

*This press release was issued by Malaysian Medical Association (MMA) president Dr R. Arasu.*

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