

**Ill feelings over 1Care in East M'sia**  
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**Keruah Usit**

The expected swing among Sarawakian and Sabahan voters away from the incumbent BN in the upcoming general election will be given an extra push if the BN presses ahead with its controversial 1Care health financing reforms, according to Sarawak PKR information chief See Chee How.

"This 1Care circus will cost BN votes," See told Malaysiakini. "Poor rural people in Sarawak and Sabah - and their already neglected health - cannot afford to be held ransom to market forces."

See argues that decent, free health care is a basic human right for all Malaysian citizens.

"If the BN government were prudent and not wasteful, we would not need this move - a move to what is effectively privatised health care, that is subject to the profit motives of health maintenance organisations (HMOs) and insurance companies."

1Care is a fiercely contested reform package floated by the government.

It is the culmination of 30 years of a thinly disguised intent to privatise Malaysia's public health care system, even though it is lauded by the World Health Organisation as one of the best in any developing country.

1Care lumps together a mish-mash of new policies, ranging from the establishment of universal health insurance, to the uncoupling of medical consultations from the dispensing of medicines, in the hope of bulldozing them all through in one frenzied legislative drive.

#### Obligatory contribution

One of the most provocative recommendations mooted is a new tax: an obligatory contribution of 10 percent of each household's income, to finance a National Health Insurance fund.

NONE "For the healthcare providers it is not compulsory but for the people, it is mandatory," Dr Rozita Halina (left), deputy director of the National Health Financing Unit in the Health Ministry, told the press on February 9.

Health Minister Liow Tiong Lai has now retracted the figure of 10 percent, claiming it was simply "a proposal".

His director-general Dr Hasan Abdul Rahman echoed Liow's avowal that 1Care remains tentative. Dr Hasan backpedalled on the ministry's leaked announcements to stakeholders, including the Malaysian Pharmaceutical Society, that planning is in the final stages.

These damage control efforts have been greeted with derision by a robust online campaign, 'Tak Nak 1 Care' or 'Reject 1Care'.

The civil service has certainly struggled with credibility. Last December, Public Service Department head Abu Bakar Abdullah baldly denied rumours that the New Remuneration Scheme for Public Service (SBPA) would provide vastly disproportionate pay rises for the wealthiest civil servants.

The leaked information later proved to be accurate.

Dr Hasan, a dour ministry mouthpiece, has little support from government hospital doctors because of his

public health background. Private doctors have openly revolted.

mahathir heart institute ijn 160507 mokhzani 1Care aims to place private medicine under government control, a step further than former premier Dr Mahathir Mohamad's sweeping health privatisation upheavals in the 1980s that delivered a hefty windfall to Umno's partners, including Dr Mahathir's son Mokhzani (right).

Notwithstanding Dr Hasan's assertion, according to the New Straits Times, that 1Care is "still in the planning stage and nothing has been confirmed," he appears strangely certain that it will go ahead.

Dr Hasan said, in the same press briefing, that "once we reach the implementation stage, who knows, the government might decide to bear all the contributions and the people would not need to pay a single sen." But who knows, indeed?

Behind closed doors

1Care has been planned behind closed doors, and the rich sums of money involved, estimated to be more than RM40 billion for the National Health Insurance fund alone, have remained secret.

The only reason there is now a public revolt is that the startling figure of 10 percent of household income was leaked - no payment quantum had previously been mentioned.

'Tak Nak 1Care', has gathered momentum, attracting more than 3,000 supporters to its Facebook page. Its 1Care forum today in Kuala Lumpur is expected to draw a substantial audience.

The Citizens' Healthcare Coalition (the group behind 'Tak Nak 1Care'), BN component Gerakan, and the opposition DAP, have all called for transparency.

In contrast, MCA president Dr Chua Soi Lek (right), a former health minister, defended 1Care and dismissed leaked reports that doctors' consultations under 1Care would be limited to six a year as "nonsense", according to the Malay Mail.

Umno has stayed conspicuously silent on the matter.

Companies with close ties to the ruling party, including Tongkah, Pantai and Pharmaniaga, have traditionally been the main beneficiaries of previous 'reforms' of public health care.

Despite forays into running private hospitals, by government linked company Sime Darby, Johor Corporation member KPJ and

Petronas-owned Prince Court, corporate interests aligned with the ruling party have, until now, been unable to corner the lucrative private health care market.

Control of this growth market under a politically appointed National Health Financing Authority would be an attractive prospect.

1Care a political football

1Care is rapidly growing in political significance, with the general election looming in the coming months.

It may turn out that premier Najib Abdul Razak will attempt to portray himself as a statesman, and announce that 1Care will be postponed while studies are carried out, as he did following public anger over the ill-conceived SBPA.

NONENajib's (right) political strategy relies on a crude system of inducements and threats: carrots (such as the RM500 handouts in his so-called 'Bantuan Rakyat 1Malaysia', and promises of repeal of the

Internal Security Act) and sticks (such as the arrest of opposition leader Anwar Ibrahim, threats of ethnic violence, and the crackdown on Bersih 2.0).

The premier may hope that a big stick like 1Care, if withdrawn before the general election, may then produce a feel-good factor among voters, as the High Court dismissal of Anwar's sodomy charge did (pending the government's appeal to the higher courts).

Still, most Malaysians would agree that health care reforms are needed to address chronic underfunding - and leakages from privatisation exercises - in our public health system, and to reduce the ballooning costs in private care.

A consultant doctor in government service argues that 1Care is driven by greed, and cannot deliver the necessary improvements.

He insists that reforms must include strengthening public health care. "If public health care is improved, far fewer people would seek private treatment, and health care costs would be much more manageable."

PKR Sarawak state representative See agrees. "We need to review the weaknesses in our current system, and reform and revive our health service, as an efficient and exemplary public health system.

"When Pakatan Rakyat enters government, we will scrap this profit-oriented system and replace it with a human-oriented one."

The difficulty with this plan, for PKR and Pakatan, remains getting the information to rural populations.

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