

Malaysia: Think tank backs call for review of MySalam

Thursday 12 September 2019, by [AUGUSTIN Robin](#) (Date first published: 7 August 2019).

PETALING JAYA: A think tank has backed a former MP's call for a review of the MySalam insurance scheme, saying it excludes some people because of flaws in its design.

"MySalam was rushed, poorly conceived and simplistic in its design," Galen Centre for Health and Social Policy CEO Azrul Mohd Khalib said in support of a call by Dr Jeyakumar Devaraj, who is the chairman of Parti Sosialis Malaysia and a former MP for Sungai Siput.

In a recent open letter to the prime minister, Jeyakumar referred to the case of a 48-year-old lorry driver with Stage 4 colon cancer. He said MySalam rejected the man's application for assistance because he was not diagnosed at a government hospital.

"The situation raised by Jeyakumar is not unexpected," said Azrul, attributing it to the poor design of the insurance scheme.

He told FMT many of MySalam's shortcomings could have been avoided had the government solicited feedback from stakeholders and paid heed to concerns that were raised by several quarters.

He said one of the scheme's weaknesses was its exclusion of private hospitals as a source of medical reports.

"It assumes that people in the B40 income category could not possibly afford to have their illnesses diagnosed by doctors in private healthcare.

"It also excludes pre-existing conditions, behaving like a for-profit insurance plan."

Azrul noted media reports saying fewer than 150 claims for critical illness coverage had been approved.

He said he would have expected thousands to have applied for the critical illness payout, adding that the low rate of approval could have been due to the scheme's use of the template for private insurance coverage.

"MySalam should seek to include the bulk of people in the B40 needing assistance. It seems to require that you are of the right age, have the right kind of illness and be at the right time of diagnosis.

"For example, a 58-year-old single mother paralysed by a stroke and diagnosed last year would have no chance of benefiting from MySalam."

He said the same would apply to someone diagnosed in a private healthcare facility.

“Such a person would need, in his stricken state, to get diagnosed in a government facility and get the same medical report which he could have received from the previous doctor.”

He said no sick person would have the time and energy to go through the process again simply to fit the bureaucratic requirements of MySalam.

“This must change. The MySalam scheme must make it easier, not harder, for beneficiaries to apply and succeed in their claims.”

The MySalam scheme covers 36 critical illnesses, including cancer, heart disease and Alzheimer’s disease.

Recipients are given assistance of RM8,000 and a daily payment of RM50 for a maximum amount of RM700 a year as replacement income.

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