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Editorial

Bridging the Gap: The Urgent Need for Standardized Pay Scales for Allied Health Professionals in India

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ABSTRACT

The recent remuneration reforms introduced by the National Medical Commission (NMC) for medical teaching faculty have highlighted the persistent absence of standardized pay structures for Allied Health Professionals (AHPs) in India. Although the National Commission for Allied and Healthcare Professions (NCAHP) Act, 2021 has significantly advanced the regulation, recognition, and professionalization of allied healthcare education and practice, remuneration systems for AHPs remain fragmented and inconsistent across institutions, particularly in the private healthcare sector. Allied Health Professionals play a crucial role in diagnostics, rehabilitation, perioperative care, emergency services, and patient management, yet inadequate compensation continues to affect workforce morale, retention, and professional stability. This editorial highlights the growing disparity between professional recognition and economic valuation within the healthcare workforce. It emphasizes the urgent need for a nationally standardized remuneration framework based on educational qualifications, specialization, clinical responsibility, and experience. The article further advocates for minimum salary standards, CPC-equivalent benchmarking, and integration of remuneration compliance into accreditation and regulatory mechanisms. Establishing equitable pay structures for Allied Health Professionals is essential for workforce sustainability, healthcare quality, and the development of an inclusive and resilient healthcare system in India.

Keywords: Allied Health Professionals; Standardized Pay Scale; Remuneration; Workforce Policy; NCAHP Act 2021; Healthcare Workforce; Compensation Equity; Health Policy; India.

Introduction:

The recent remuneration directives issued by the National Medical Commission (NMC) for medical teaching faculty represent a significant advancement toward transparency, uniformity, and structured professional recognition in India's healthcare education system. These reforms reinforce the principle that professional expertise must be matched by equitable compensation. However, this development also draws attention to a longstanding and unresolved gap within the healthcare workforce—the absence of standardized pay structures for Allied Health Professionals (AHPs).

The enactment of the National Commission for Allied and Healthcare Professions (NCAHP) Act, 2021 marked a major milestone in the regulation and professionalization of allied healthcare education and practice in India [1,2]. Through successive notifications, the NCAHP has formally recognized and standardized multiple professional domains in allied health, including physician associates, health information management, anesthesia technology, radiology and imaging technology, radiotherapy technology, dialysis technology, nutrition and dietetics, optometry, psychology, physiotherapy, laboratory sciences, occupational therapy, emergency medical technology, respiratory care, social work, medical physics, and others. These developments have strengthened academic governance, curriculum uniformity, and professional identity [3,4].

Yet, despite regulatory recognition and educational standardization, remuneration systems for these professions remain fragmented and inconsistent. Unlike medical faculty, whose pay structures are increasingly guided by structured national frameworks, Allied Health Professionals continue to function in an institution-dependent salary environment, particularly within the private healthcare sector, where compensation often lacks uniformity, transparency, and fairness [5,6,7]. This disparity has significant implications for workforce stability and healthcare quality. Allied Health Professionals are central to diagnostics, therapeutic interventions, emergency care, rehabilitation, perioperative management, and patient monitoring [8,9]. Their contributions directly influence clinical outcomes and operational efficiency. However, inadequate and inconsistent compensation undermines professional morale, reduces job satisfaction, and contributes to workforce attrition and migration [10,11].

The paradox is evident: professional competencies are regulated and standardized at the national level, yet economic recognition remains unstructured. This disconnect weakens the very objectives of professional regulation. Recognition without equitable remuneration creates an incomplete workforce framework, where qualifications are acknowledged but professional value is insufficiently reflected in compensation [12, 13].

A sustainable and resilient healthcare system requires equity not only in education and regulation but also in economic valuation. Structured remuneration is fundamental to workforce retention, professional dignity, and long-term healthcare stability. The current disparity between medical and allied health remuneration frameworks reflects a broader imbalance in workforce valuation that requires immediate institutional attention [14,15,16]. Addressing this gap requires coordinated action from the Ministry of Health and Family Welfare, the NCAHP, State Health Departments, and healthcare institutions. A national standardized pay framework for Allied Health Professionals based on educational qualification, specialization, clinical responsibility, and experience should be developed. Such a framework may be benchmarked against CPC-equivalent structures to ensure parity, transparency, and career progression. In addition, minimum salary standards applicable across public and private healthcare institutions should be introduced to prevent underpayment and exploitation. Integrating remuneration compliance into institutional accreditation and licensing frameworks could strengthen implementation and accountability. Salary benchmarking through the NCAHP professional registry may further support evidence-based policy revisions and workforce planning [17, 18]. The formal recognition of Allied Health Professionals under the NCAHP framework represents an important and commendable step toward professionalization. However, professionalization without economic justice remains incomplete. If India aims to build an equitable, efficient, and future-ready healthcare system, standardized pay structures for Allied Health Professionals must become an essential component of healthcare reform.

Fair compensation is not merely a financial consideration; it is a reflection of professional value, institutional fairness, and workforce sustainability. Strengthening remuneration frameworks for Allied Health Professionals will not only improve retention and professional satisfaction but also reinforce the overall quality, resilience, and effectiveness of healthcare delivery in India.

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