

Public Consultant Doctors Group

Mr. York Chow

Secretary of Food and Health Bureau

Hong Kong Special Administrative Region Government

12th June 2008

Comments on the Consultation Document on Health Care Reform

Our Group welcomes the release of the Consultation Document on Health Care Reform by the Secretary. The public health system in Hong Kong needs to be enhanced to face the challenges ahead. We are concerned with the gradual decline in the quality of public health care standard resulting from insufficient government funding.

It is good to hear the Chief Secretary's pledge to increase the government expenditure from 15% to 17% of recurrent government expenditure by 2011 -12. However, the Government should think twice before reducing the public health expenditure during economy downturn. The cut in government budget to the Hospital Authority a few years back has caused a severe dip in our junior doctors' morale and service standard. These damages may never be completely undone.

If there is addition funding available after we have adopted a financing option, there is a concern how the additional money would be distributed amongst the public and private health services. Our private colleagues would not like to see the Hospital Authority to grow in "market share" with the additional fund. Our public colleagues would argue that the current budget is too small to meet the public demands. There should be a open and fair mechanism in the allocation of the additional fund.

The middle class may reject all the financing options as they would see they are being targeted to fish out more money to support the public health system. The debate may take a long time before we make the final choice. It is important for us to continue explore ways and means to improve the health system of Hong Kong. A committee should be established to serve this vital function.

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The public should expect the fees of public health services to increase with time disregarding which financing options we finally adopted. A gradual rise in fees with safety net would partially recover the cost of the services and would discourage of inappropriate use and abuse.

Amongst all the health reform measures raised in the document, we agreed that we should spend more effort in preventive care and improve the community health. The public health cost would be much reduced if majority of us can stay healthy. It is important for our private colleagues to contribute more if we are going to develop an electronic health record for all. At present, the majority of data is contributed by the Hospital Authority only.

There are similar papers and proposal on health care reform and financing in the past. Regrettably they all came to nothing and precious time has been wasted. One of the reasons is they failed to include opinions from major stake holders. We would see the current proposal facing similar criticism. We would hope this can be used as a background for further discussion and we should just reject the document and dismiss the whole subject.

Dr. Wong Tak Cheung

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