

**Hong Kong Women Professionals and Entrepreneurs Association**  
**Response to ‘Building a Healthy Tomorrow – Discussion Paper on the**  
**Future Service Delivery Model for our Health Care System’**

**I. Health Care Delivery Model**

1. We support the concept of family doctor and agree with putting the emphasis on primary care in the future health care delivery model.
2. As Hong Kong is facing a rapidly aging population, the health care of elderly must be addressed. We support that every nursing home should have a family doctor to look after the elderly residents.
3. The public is not familiar with the concepts of ‘family doctor’ and ‘responsibility for one’s own health’, we propose that the government should conduct mass public health programs to educate the public on continuity of care by the same doctor, healthy lifestyle and disease prevention. District Boards, non-government organizations, schools and media can be co-opted into the public health programs to promote the concept of family doctor.
4. Not all of the existing general practitioners and medical specialists share the same definition of ‘family doctor’. Variation in consultation and fee charging tend to occur among the medical practitioners from different specialties.

**II. Financing of Health Care Services**

1. The affordability of fees in the private sector and the lack of transparency are always concerns to the patients and their private health care insurers. This is a major obstacle in the transfer of public patients to the private sector and is also a major factor in causing the public-private imbalance.
2. To address the issue of public-private imbalance and to protect health care consumers in the private sector, the government should introduce regulation on fee structure, such as increase fee transparency and set range of fee for service in the private health market. While doing so, professional autonomy and market forces should be respected.
3. The present tax-based funding of public health care should continue as the major

source of finance. In addition, supplementary savings accounts and private health insurance can provide more choices for the middle class. In other words, the government should continue to subsidize basic service. If patients want choice of doctor and better accommodation, they can opt for private ward in a public hospital or go to a private hospital which charges more by topping up the price difference with their supplementary saving accounts or private health insurance.

4. In the four focus areas to be provided by public health care – acute and emergency care; low income; catastrophic illness; and training of health professionals, the government has neglected the rights of the middle class who pay taxes to support the public health and welfare system. If financial means test were to be implemented in public hospitals to distinguish the poor from the rest and the middle class were asked to pay higher fees, this would be an unfair treatment by the government to the great contributors of its narrow tax base.
5. The government should curb the return of emigrants to seek public health care service. When they are no longer paying taxes, they should not be entitled to Hong Kong's health care benefits.

October 2005