

你可刊登我的意見，我想以不記名方式刊登。

This is an anonymous submission.

I am a medical practitioner graduated in Australia in the early 80's. I am working in the Hospital Authority.

I have worked in many overseas countries - Australia, USA and New Zealand. I have worked in the primary care as well as tertiary care and have some understanding how the health system works in each country.

I feel strongly and responsible to make an submission on the consultation paper "Your Health Your Life." The following is a summary of my views.

This consultation paper is conceived as a paper aiming to strive for an improvement of health care for the HK people, in an environment of an aging population, increasing cost in advanced medical technologies, a decreasing population able to support health care financing etc etc.

This consultation paper has painted an overwhelmingly gloomy picture as supported by predictions of future public health expenditures. Based on this picture and then following the logic, there should be a reaction - a reaction that actions should be taken, and this action is not to be delayed any further.

But in the past 1 - 2 months, the government has heard an opposing view. The argument is based on the government's percentage spending on health care in the past years which had basically remained at the same level, and secondly the projected health expenditure expressed as a percentage of GDP, which is predicted still to be low in comparison with other overseas countries, in 20 years' time. The government needs to address this.

Experience has told me that the existing health care system in HK has done wonders. Our achievements have surpassed other countries, such as life expectancy, infant mortality rate, publication in esteemed journals etc etc. It is vital to remember that HK is achieving these at a **lower cost compared** to other countries. Based on this and then following the logic, the existing health care system is cost effective compared to oversea countries.

Then why do we need a change? Time changes. Obviously we need to change, but for what and how? Do we want changes as drastic as proposed in the consultation paper - to introduce something so drastic as compulsory insurance, compulsory savings, or do we want to effect meaningful and workable changes to the existing deficiencies? I would opt for the latter.

We see lots of deficiencies in the current health system- in the poor state of primary care, in hospital services like long waiting lists, in discrepancy of private and public patient loads, in the poor interfacing between public and private sectors, and many many more. These are ongoing problems and new problems would deem to arise. History has taught us that HK could overcome problems within the prevailing resources. I would have hoped that the consultation paper would suggest concrete plans to effect changes in the ongoing deficiencies using the 50 billion set aside for making the health reform. This is a matter of urgency. Unfortunately little is written in the paper to suggest solution for such. In its place we are led to believe there must be imminent changes in the health system. We are given six options to choose from, and to embark on something that we have no experience on, that we have seen failures overseas where considerable amount of money is unnecessarily channeled into the health insurance industry and administrative managements.

People are to be responsible for their own health. The government has the responsibility to oversee population health. It has a duty to make sure that no one is deprived of the basic health care. More to this, the government has to ensure equality. The rising sentiments among middle class needing to bear the health cost of the whole population need to be addressed. What is equality to the poor would not be the same for the middle class, nor would the rich be concerned for that matter. I have always enjoyed treating people alike from all walks of life. I would hate to see we have to treat patients differently according to their health options, whether insured or uninsured, whether certain medications or certain tests are covered or not covered, and to divert our energy into billings for services. Mixing money with treatment decisions is detrimental to patients. This has always been my belief. I see patients receiving their best care from the Hospital Authority - one of the reasons I am happy working in HA. Patients are blessed in a sense.

The paper has deviated from what most people simply want - **to be healthy and to be well cared for when in sickness.**

Majority of the discussion in the paper focuses on **health care financing instead of how to strive for healthier people and healthier health care system**. The consultation paper offers what seems to be a comprehensive coverage of possible options.

Talking about these options, how would the government ensure that they are sustainable and properly supervised? It is simple to come up with ideas, but when it is the practicality that kills. How does the government ensure that the whatever options chosen is a better option of the current system? This is an answer no one can answer without a crystal ball.

One more comment on the way this consultation is put forward. It may be a good time for the push, for we have the money now, and we have more political certainty. The consultation fails in that the paper is not answering what HK people want, but instead the government is conceived to be shunning away from its responsibility in overlooking the health financing. People do not see the urgency to make drastic changes, nor does this paper help aligning HK citizens with the government's plight.

End.