

From: Paul Wong

Subject: Feedback regarding Healthcare Reform Consultation Document

Date: 12-June-2008

**(I) Personal View:**

- 1) **Support the proposed Supplementary Financing Options (4) Voluntary Private Health Insurance and (2) Out-of-pockets payment.**
- 2) All “safety-net” population should still covered by the Government.
- 3) Government should encourage the users-pay model so that citizens are able to use the medical facility in caution and in needed manner (to avoid abuse use).
- 4) In line with HK “small government” policy and to encourage more private sectors involvement as well as competition i.e. medical providers, insurance providers.
- 5) Government to provide incentives e.g. medical coupons to all tax-payers each year so to allow them for either purchase private insurance cover or actual clinical visit use.

**(II) Other Suggestions/Comments:**

- 1) Primary & Preventive Healthcare
  - Government should withdraw from Clinical/Out-patients market, only remain the service for the safety-net
  - Foster more PPP and encourage family doctor practice (like Canada), allow private sector to play a more vital role in terms of Out-patients care
  - Better allocate Government resources onto Preventive care. Increase more public services for subsidizing citizens’ preventive check-up i.e. annual health check
  - Focus more on advanced medical technology so to help treatment for major diseases like cancer. This could eventually become a user-pay service
- 2) Mandatory workers medical insurance
  - Can consider setting up minimum Employees Benefits Medical insurance requirements for employers like Workmen Compensation Insurance
- 3) To improve & enlarge the Voluntary Insurance market
  - Currently around 11% population with own private insurance, more tax-break or incentives should be given to those who choose to buy own protection. With more demand, there will be more business competition so to lower the insurance premiums
  - For high-risk groups or people with chronic diseases, Government could ask the insurers to create another “facility pool” to look after this population. Within the facility pool, no one should be denied to get insurance cover. Different rating and premiums should be devised under this pool. (NB: this is like in Canada we underwrite young & high-risk drivers whereby all motor insurers will have to participate in this facility pool)

---

Thanks for listening my feedback.

Paul Wong

(I am from insurance industry – AXA General Insurance)