

6.1 There was strong support in the community to reform the current healthcare system. The public generally agreed there was an imminent need to reform our healthcare system so as to ensure it could continue to provide the public with healthcare protection and quality services in view of the ageing population and rising medical costs. There was also a general support from the public that we should pursue the entire package of reform initiatives as a whole so as to achieve our vision and to ensure the long term sustainability of the healthcare system.

Service Reform

6.2 During the consultation, overwhelming supports were received from the public and the stakeholders on the service reforms initiatives. The respondents generally shared the view that the Government should expedite the implementation of these initiatives. With regard to the public views, we would proceed to take the service reform initiatives forward as far as possible, making use of the increased government funding for healthcare in the coming few years.

6.3 On top of the broad consensus on the reform proposals, we will involve relevant stakeholders and take into account their views and concerns expressed during the consultation. We would also address various issues on healthcare manpower planning, private sector capacity and institutional set up. We are in particular moving forward in respect of the four areas of service reforms –

Enhancement of Primary Care

6.4 With broad public support on the enhancement of primary care services, we have set up a Working Group on Primary Care comprising representatives of public and private healthcare professionals, patients and service users and other stakeholders to take forward relevant initiatives. The Working Group will recommend specific plans to implement the proposals, such as the development of basic models for primary care services, promotion of Primary Care Directory based on the family doctor concept as well as the exploration of the new concept of “community health centre”, to enhance primary care service in the community. In the meantime, we are also implementing a number of pilot projects on primary care services to test different models for enhancing primary care.

Promote Public-Private- Partnership in Healthcare

6.5 We are implementing a number of pilot projects to promote public-private partnership like purchase of private healthcare services, direct subsidization of patients for private healthcare, development of hospitals on PPP model and multi-partite medical centres of excellence. These pilot projects aim to relieving the waiting queue for public services, testing the concept of “money-follows-the-patient” as well as providing more choices of

healthcare services to patients. We will closely monitor and evaluate these projects to ensure that they would bring benefits to the community as a whole.

Electronic Health Record Sharing

6.6 With reference to the views received during the consultation, we will take the lead and devote resources to develop the necessary infrastructure for sharing eHR in both public and private sectors through engaging with the healthcare professionals in both sectors. To move forward, we will set up a dedicated office to co-ordinate the various development initiatives, and to leverage the existing systems and expertise of the HA to provide support to healthcare institutions in the private sector for their own eHR development.

Strengthen the Public Healthcare Safety Net

6.7 To further strengthen the existing safety net, we are in the process of seeking some \$1 billion funding for injection into the Samaritan Fund to provide more funding to cater for those in need. The improvement of public services and implementation of PPP initiatives would shorten the waiting queue for public services. It will benefit patients who are using public services and respond to public concerns over waiting time. As the idea of a “personal limit on medical expenses” was well-received by the respondents, we will further explore this idea with the aim to provide additional protection to individuals who require costly treatment.

Healthcare Financing Reform

6.8 On healthcare financing, the public had a meaningful and thorough discussion on the principles as well as pros and cons on the need of supplementary financing arrangement and various supplementary financing proposals. The public and stakeholders generally recognized that there was a need to address this issue due to the ageing population. Many considered financing an indispensable part of healthcare reform, which would have significant implications on the long term sustainability of our healthcare system. There was also a broad support but not yet a consensus in the community to reform the current financing arrangements.

6.9 The community had rather diverse views on each of the six proposals which reflected their divergence towards the societal values underpinning the issue of healthcare financing. The public and stakeholders, however, were generally willing to continue deliberations on the issue of healthcare financing with a view to finding an appropriate solution. Whilst taking forward the service reforms, we should continue the deliberations on healthcare financing aiming to move towards forging a consensus in the community.

6.10 We will examine possible proposals for further consultation, having regard to the following broad principle derived from the public opinions during the first stage consultation –

- (a) To preserve the existing public healthcare as a safety net for all, while providing better and wider choices for individuals who are using or able to afford private services.
- (b) To take forward financing reform through a step-by-step approach having regard to the range of views received, and consider possible proposal(s) by stages, with a view to reaching long-term solutions.
- (c) To consider standardized and incentivized arrangements to facilitate access to better protection and choices in healthcare with necessary flexibility to cater for the needs of different age/income segments of the population.
- (d) To be in line with the concept of “money-follows-patient” under the healthcare reform, while ensuring sufficient protection to users on quality, price transparency and cost-effectiveness.
- (e) To retain the \$50 billion fiscal reserve pending decision on supplementary financing and consider how the funding could be made use of to assist the implementation of supplementary financing.

Way Forward

6.11 We are working to formulate more detailed proposals to further consult the public on the future development of our healthcare system, including the healthcare financing arrangement. We are planning to launch the second-stage public consultation in the first half of 2009 to encourage further discussions.