
Findings of Opinion Poll on Healthcare Reform and Financing

Food and Health Bureau

Hong Kong Special Administrative Region Government

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Key Observations

- About two-thirds of the respondents supported that the healthcare system must be reformed now.
- The supplementary financing option “Voluntary private health insurance” has received the largest proportion (more than 70%) of support from respondents.
- Respondents who were young or middle-aged, self-perceived belonging to the upper social class, with higher income or education level preferred financing their own healthcare expenditures and thus supplementary financing options without wealth redistribution.
- Respondents who were not working, self-perceived belonging to the lower social class, with lower income or education level were less willing to contribute.

(A) Background

1. During March to August 2008, a telephone opinion poll was conducted to elicit public views on:
 - (i) the need for healthcare reform;
 - (ii) whether the private sector could help to improve the quality of public healthcare services; and
 - (iii) the support for seven supplementary financing options:
 - Tax increase (加稅)
 - Social health insurance (社會醫療保障)
 - Out-of-pocket payments (用者自付費用)
 - Medical savings accounts (醫療儲蓄戶口)
 - Voluntary private health insurance (自願醫療保險)
 - Mandatory private health insurance (強制醫療保險)
 - Personal healthcare reserve (個人康保儲備).
2. The dates of survey and sample sizes are given in **Annex I**, the questions asked are shown in **Annex II**, and a brief account of the survey methodology is provided in **Annex III**.

(B) Results

Overall situation (Table 1 and Figure 1)

Table 1: Opinion on healthcare reform and supplementary healthcare financing

	Strongly agree / Agree (%)	Strongly disagree / Disagree (%)
Healthcare system must reform now	66	11
Private sector helps improve quality of public healthcare services	68	12
Tax increase	35	42
Social health insurance	40	39
Personal healthcare reserve	42	30
Mandatory private health insurance	44	31
Out-of-pocket payments	47	35
Medical savings accounts	58	25
Voluntary private health insurance	71	13

3. Overall, 66% of the respondents supported that the healthcare system must be reformed now. Only 11% did not support for a reform of the healthcare system. Similarly, 68% of the respondents opined that the private sector could help to improve the quality of public healthcare services. Only a mere 12% opined otherwise.
4. For the analysis of the ranking of the healthcare financing options, Table 1 and Figure 1 show that “Voluntary private health insurance” had received the greatest support with 71% of the respondents supporting this supplementary financing option. This was followed by “Medical savings accounts” (58%), “Out-of-pocket payments” (47%), “Mandatory private health insurance” (44%), “Personal healthcare reserve” (42%), “Social health insurance” (40%), and the least supported supplementary financing option was “Tax increase” (35%).
5. “Tax increase” received the greatest objection with 42% of the respondents not supporting this supplementary financing option. This was followed by “Social health insurance” (39%), “Out-of-pocket payments” (35%), “Mandatory private health insurance” (31%) and “Personal healthcare reserve” (30%), “Medical savings accounts” (25%) and “Voluntary private health insurance” (13%).

By age (Table 2 and Figure 2)

Table 2: Views on healthcare reform and supplementary healthcare financing by age group

Age group	18 - 29		30 - 49		50+	
	Strongly agree / Agree (%)	Strongly disagree / Disagree (%)	Strongly agree / Agree (%)	Strongly disagree / Disagree (%)	Strongly agree / Agree (%)	Strongly disagree / Disagree (%)
Healthcare system must reform now	67	6	69	10	62	14
Private sector helps improve quality of public healthcare services	68	12	71	13	65	12
Tax increase	33	39	34	45	38	39
Social health insurance	39	38	39	44	43	34
Personal healthcare reserve	40	31	41	36	44	23
Mandatory private health insurance	43	31	44	36	44	24
Out-of-pocket payments	46	33	51	32	43	40
Medical savings accounts	65	21	58	29	55	23
Voluntary private health insurance	75	9	75	12	65	16

6. Respondents aged 30-49 had the greatest tendency to support healthcare reform, with 69% opined that healthcare reform was needed (compared with 67% for the age group 18-29 and 62% for the age group 50+). Moreover, 71% of respondents aged 30-49 opined that the private sector could help to improve the quality of public healthcare services. This group of respondents is getting old and they might be particularly concerned that public healthcare services would be worsened by the time when they need them most.
7. For the ranking of the healthcare financing options, “Voluntary private health insurance” was the most preferred supplementary financing options among all age groups. However, compared with respondents from the younger age groups that some 75% of them supported this option, a much smaller proportion of only 65% of respondents aged 50 and over opined the same. “Medical savings account” was the second most preferred supplementary financing options, and the level of support decreased with age.
8. Older respondents were particularly against “Out-of-pocket payments”. Among respondents aged 50 and over, 40% of them did not agree to raise

public healthcare resources through increasing user fees at public hospitals or clinics, compared with around 32% - 33% among their younger counterparts. In other words, young and middle-aged persons were relatively less reluctant to pay for their own health expenditures.

9. Interestingly, the proportions objecting “Mandatory private health insurance” and “Personal healthcare reserve” among the older respondents were 24% and 23% respectively, which are the lowest among the various age groups. A possible reason may be because elder persons presumed that they would unlikely need to contribute under these two supplementary financing options.

By educational attainment (Table 3 and Figure 3)

Table 3: Views on healthcare reform and supplementary healthcare financing by educational attainment

Educational level	Primary or below		Secondary		Post-secondary or above	
	Strongly agree / Agree (%)	Strongly disagree / Disagree (%)	Strongly agree / Agree (%)	Strongly disagree / Disagree (%)	Strongly agree / Agree (%)	Strongly disagree / Disagree (%)
Healthcare system must reform now	57	16	66	11	70	8
Private sector helps improve quality of public healthcare services	60	12	70	12	70	13
Tax increase	34	39	37	40	33	45
Social health insurance	38	32	42	39	39	43
Personal healthcare reserve	39	22	44	30	41	36
Mandatory private health insurance	36	23	46	30	45	35
Out-of-pocket payments	32	49	47	35	55	28
Medical savings accounts	48	22	61	24	58	29
Voluntary private health insurance	57	19	71	13	78	9

10. Persons with education at primary level or below showed the least support for healthcare reform (57%), compared with 66% for those with secondary education and 70% for those with post-secondary or higher education. Also, a comparatively lower proportion (60%) of persons with education at primary level or below opined that the private sector could help to improve the quality of public healthcare services.

11. The proportions of respondents supporting “Voluntary private health insurance” and “Out-of-pocket payments”, and the proportion of respondents objecting the other five supplementary financing options increased with education level.

12. Persons with primary education or below strongly objected “Out-of-pocket payments”, with only 32% supported but 49% objected, compared with 55% supported and 28% objected among those with post-secondary or higher education. Furthermore, “Voluntary private health insurance” and “Medical savings accounts” received support from more than half of the respondents with secondary education and post-secondary or higher education. It is speculated that most of these persons have relatively high income and they do not mind paying for their own health expenditure.

By personal income (Table 4 and Figure 4)

Table 4: Views on healthcare reform and supplementary healthcare financing by monthly personal income

Monthly income	< \$10,000		\$10,000 - \$24,999		\$25,000+	
	Strongly agree / Agree (%)	Strongly disagree / Disagree (%)	Strongly agree / Agree (%)	Strongly disagree / Disagree (%)	Strongly agree / Agree (%)	Strongly disagree / Disagree (%)
Healthcare system must reform now	63	12	68	10	73	9
Private sector helps improve quality of public healthcare services	68	13	72	13	74	13
Tax increase	37	39	37	42	33	48
Social health insurance	38	41	39	43	41	45
Personal healthcare reserve	41	32	42	35	44	38
Mandatory private health insurance	43	31	46	35	47	38
Out-of-pocket payments	39	40	53	31	65	22
Medical savings accounts	60	24	59	29	55	33
Voluntary private health insurance	67	16	76	11	82	9

Note: Included employed persons only.

13. Persons with income of HK\$25,000 and over had a higher tendency to support healthcare reform (73%) and believed that the private sector could help to improve the quality of public healthcare services (74%).

14. Statistics with breakdown by income were very similar to that analysed by educational attainment because personal income and educational attainment were highly correlated. The proportion of respondents supporting “Voluntary private health insurance” and “Out-of-pocket payments” and the proportion of respondents objecting the other five financing options increased with personal income.
15. Persons with income below HK\$10,000 strongly objected the “Out-of-pocket payments” with only 39% agreed but 40% objected, compared with 65% agreed and 22% objected among persons with income HK\$25,000 and over.
16. It should be noted that most persons with income of HK\$25,000 and over (82%) supported “Voluntary private health insurance” as a supplementary healthcare financing option, with only 9% objected.

By economic activity status (Table 5 and Figure 5)

Table 5: Views on healthcare reform and supplementary healthcare financing by economic activity status

Economic activity status	Non-Working		Working	
	Strongly agree / Agree (%)	Strongly disagree / Disagree (%)	Strongly agree / Agree (%)	Strongly disagree / Disagree (%)
Healthcare system must reform now	68	10	63	11
Private sector helps improve quality of public healthcare services	71	13	65	11
Tax increase	35	40	35	43
Social health insurance	42	33	39	43
Personal healthcare reserve	42	25	42	35
Mandatory private health insurance	42	25	45	35
Out-of-pocket payments	40	40	52	31
Medical savings accounts	59	20	58	29
Voluntary private health insurance	65	15	75	11

17. Analysed by economic activity status, non-working persons had higher proportions of supporting healthcare reform (68%) and believing that the private sector could help to improve the quality of public healthcare services (71%).

18. The pattern of support for the various supplementary financing options was similar between the working and non-working persons. However, a relatively lower proportion of non-working persons supported “Out-of-pocket payments”, (40% vs. 52% among working persons) while a higher proportion of them objected the option (40% vs. 31% among working persons). This may be because most people in this group have relatively little savings and is concerned if they are required to pay more.

By social class (Table 6 and Figure 6)

Table 6: Views on healthcare reform and supplementary healthcare financing by self-perceived social class

Self-perceived social class	Lower/Middle lower		Middle		Upper/Middle upper	
	Strongly agree / Agree (%)	Strongly disagree / Disagree (%)	Strongly agree / Agree (%)	Strongly disagree / Disagree (%)	Strongly agree / Agree (%)	Strongly disagree / Disagree (%)
Healthcare system must reform now	64	12	69	9	72	8
Private sector helps improve quality of public healthcare services	66	13	72	11	75	11
Tax increase	37	40	34	44	39	41
Social health insurance	39	38	41	40	44	39
Personal healthcare reserve	42	29	43	32	44	35
Mandatory private health insurance	44	29	45	33	46	35
Out-of-pocket payments	41	40	54	30	61	25
Medical savings accounts	58	24	59	26	61	27
Voluntary private health insurance	67	15	76	11	81	8

19. Compared with persons in other social classes, larger proportion of persons in “upper class” supported healthcare reform (72%) and believed that the private sector could help to improve the quality of public healthcare services (75%).

20. The proportions of respondents supporting “Voluntary private health insurance”, “Out-of-pocket payments” and “Social health insurance” and the proportion of respondents objecting “Medical savings account”, “Mandatory private health insurance” and “Personal healthcare reserve” escalated from lower to upper social class.

21. Those reported as “lower class” had a stronger tendency of objecting “Out-of-pocket payments” (41% supporting vs. 61% among respondents in “upper class”; 40% objecting vs. 25% among respondents in “upper class”).
22. “Tax increase” received least support from all three social classes (34% – 39%).

(C) Analysis of the Poll Results

23. Two levels of analyses were done for the poll results, which investigate (i) whether there is statistically significant difference between supporting and objecting each particular option, and (ii) whether there is statistically significant difference in the supports (or objections) between options.

Table 7: Comparisons of the proportions of respondents agreeing or disagreeing a financing option

	Strongly agree / Agree (%)	95% Confidence Interval (%)		Strongly disagree / Disagree (%)	95% Confidence Interval (%)	
Tax increase	35	34.2	35.8	42	41.2	42.8
Social health insurance	40	39.2	40.8	39	38.2	39.8
Personal healthcare reserve	42	40.7	43.3	30	28.8	31.2
Mandatory private health insurance	44	43.2	44.8	31	30.3	31.7
Out-of-pocket payments	47	46.2	47.8	35	34.2	35.8
Medical savings accounts	58	57.2	58.8	25	24.3	25.7
Voluntary private health insurance	71	70.3	71.7	13	12.5	13.5

Notes: The confidence interval width is given by the formula $[p \pm 1.96 * (p * (1-p) / n)^{(1/2)}] * 100$, where n is the sample size for each option. The z-value for 95% CI for comparison under normal distribution = 1.960

Table 8: Comparison of the proportions of respondents agreeing among options or disagreeing among options

	Strongly agree / Agree (%)	95% Confidence Interval (%)		Strongly disagree / Disagree (%)	95% Confidence Interval (%)	
Tax increase	35	33.8	35.7	42	40.8	43.2
Social health insurance	40	38.8	41.2	39	37.8	40.2
Personal healthcare reserve	42	40.0	44.0	30	28.2	31.8
Mandatory private health insurance	44	42.8	45.2	31	29.8	32.2
Out-of-pocket payments	47	45.8	48.2	35	33.8	36.2
Medical savings accounts	58	56.8	59.2	25	23.9	26.1
Voluntary private health insurance	71	69.9	72.1	13	12.2	13.8

Notes: The confidence interval width is given by the formula $[p \pm 3.0381 * (p * (1-p) / n)^{(1/2)}] * 100$, where n is the sample size for each option. The adjusted z-value for 95% CI for a combination of 21 ($= {}_7C_2$) comparisons under normal distribution = 3.038

24. Table 7 shows that for all the options except “Social Health Insurance”, there is statistically significant difference between the proportions of respondents supporting and objecting each of the options.
25. From Table 8, it can be seen that the proportions of respondents supporting “Tax increase”, “Out-of-pocket payments”, “Medical savings accounts” and “Voluntary private health insurance” are significantly different from each other. However, there are no statistically significant differences between the proportions of respondents supporting the following options (i) between “Social health insurance” and “Personal healthcare reserve” and (ii) between “Personal Healthcare Reserve” and “Mandatory Private Health Insurance”.
26. It is also shown in Table 8 that the proportions of respondents objecting “Tax increase”, “Social health insurance”, “Out-of-pocket payments”, “Medical savings accounts” and “Voluntary private health insurance” are significantly different from each other. On the other hand, there is no statistically significant difference between the proportions of respondents objecting the “Personal Healthcare Reserve” and “Mandatory Private Health Insurance” options; which means the proportion objecting these two options is similar.
27. Results of the opinion poll conducted in 15 weeks from March to August 2008 are shown in Figure 7.

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Figure 1

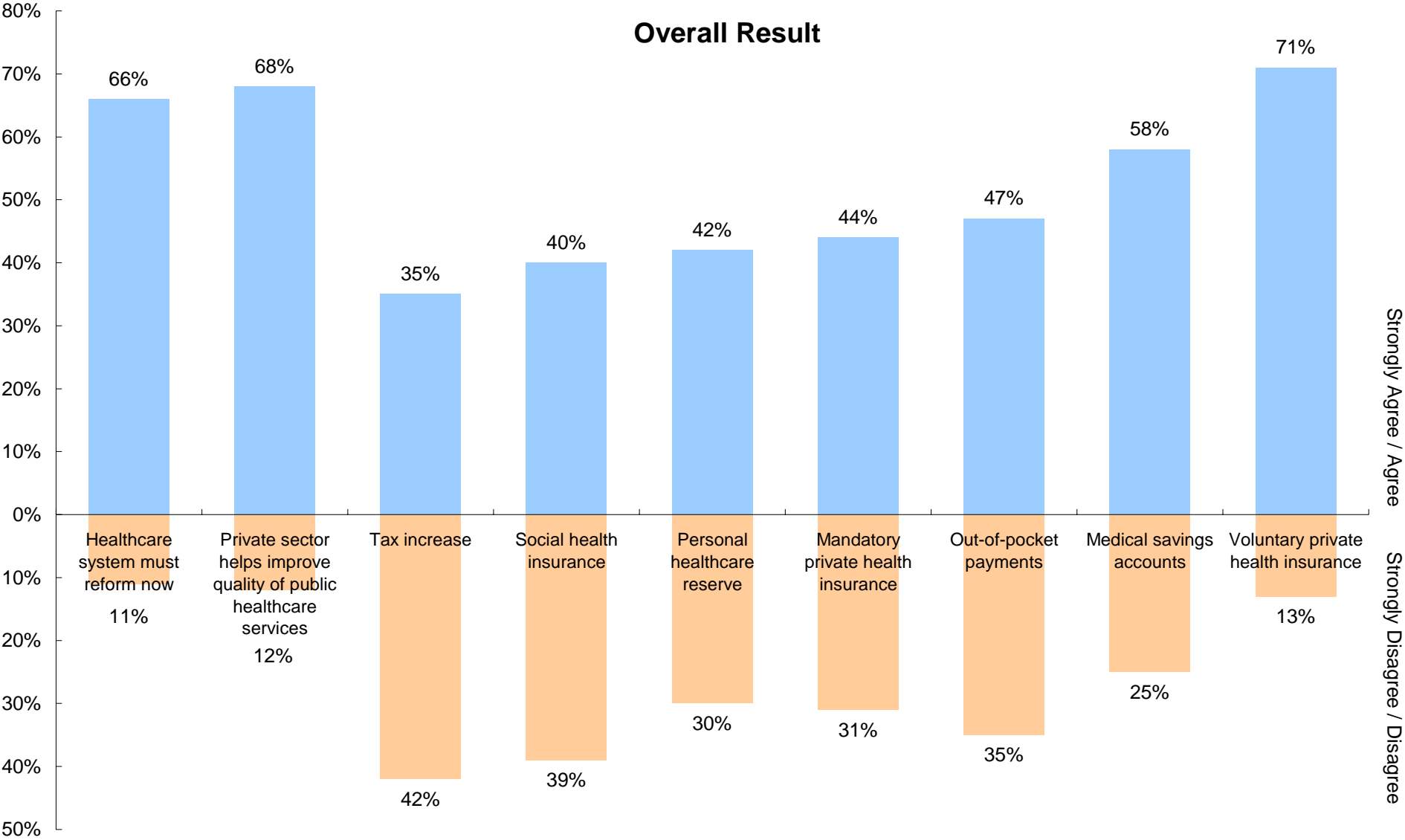


Figure 2

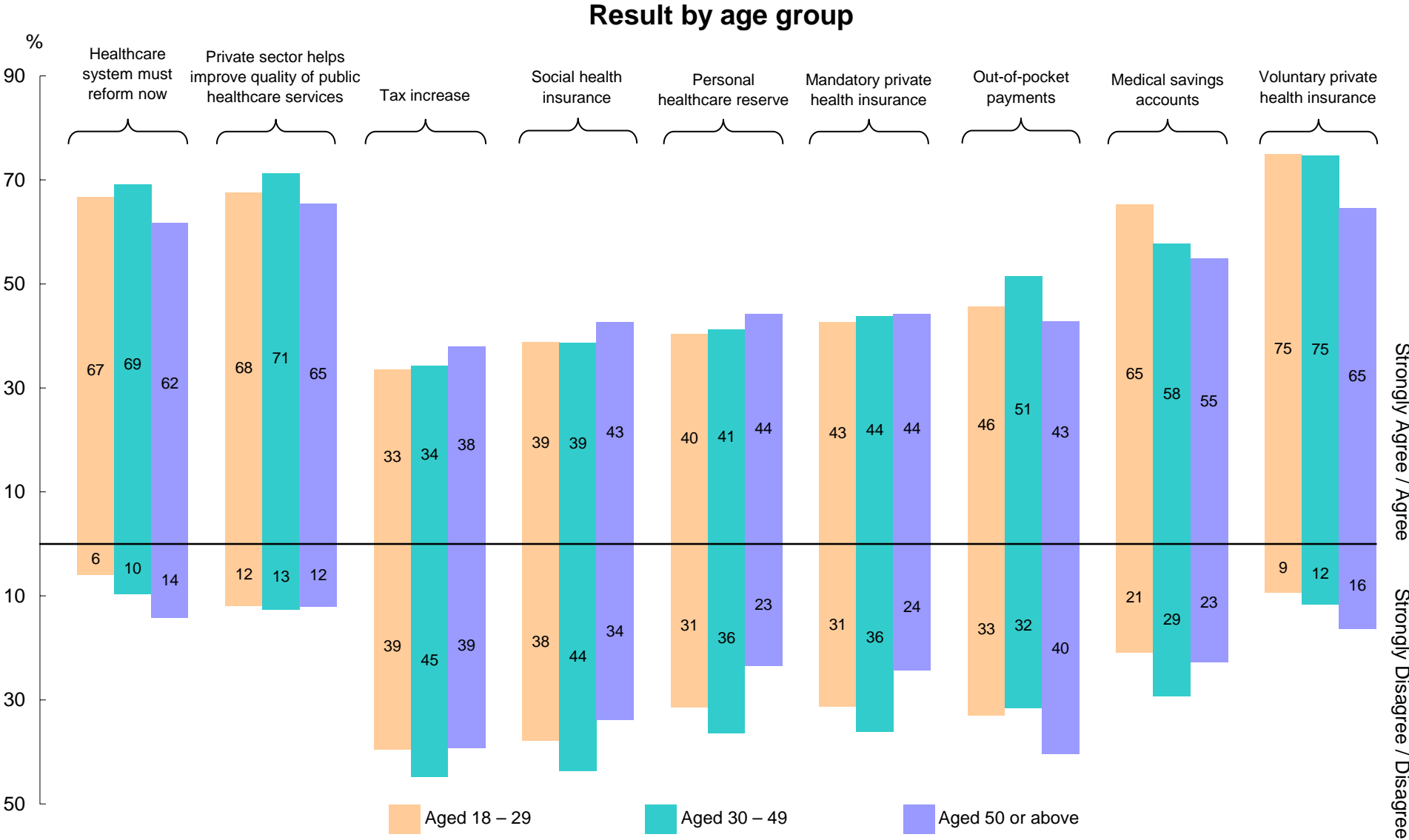


Figure 3

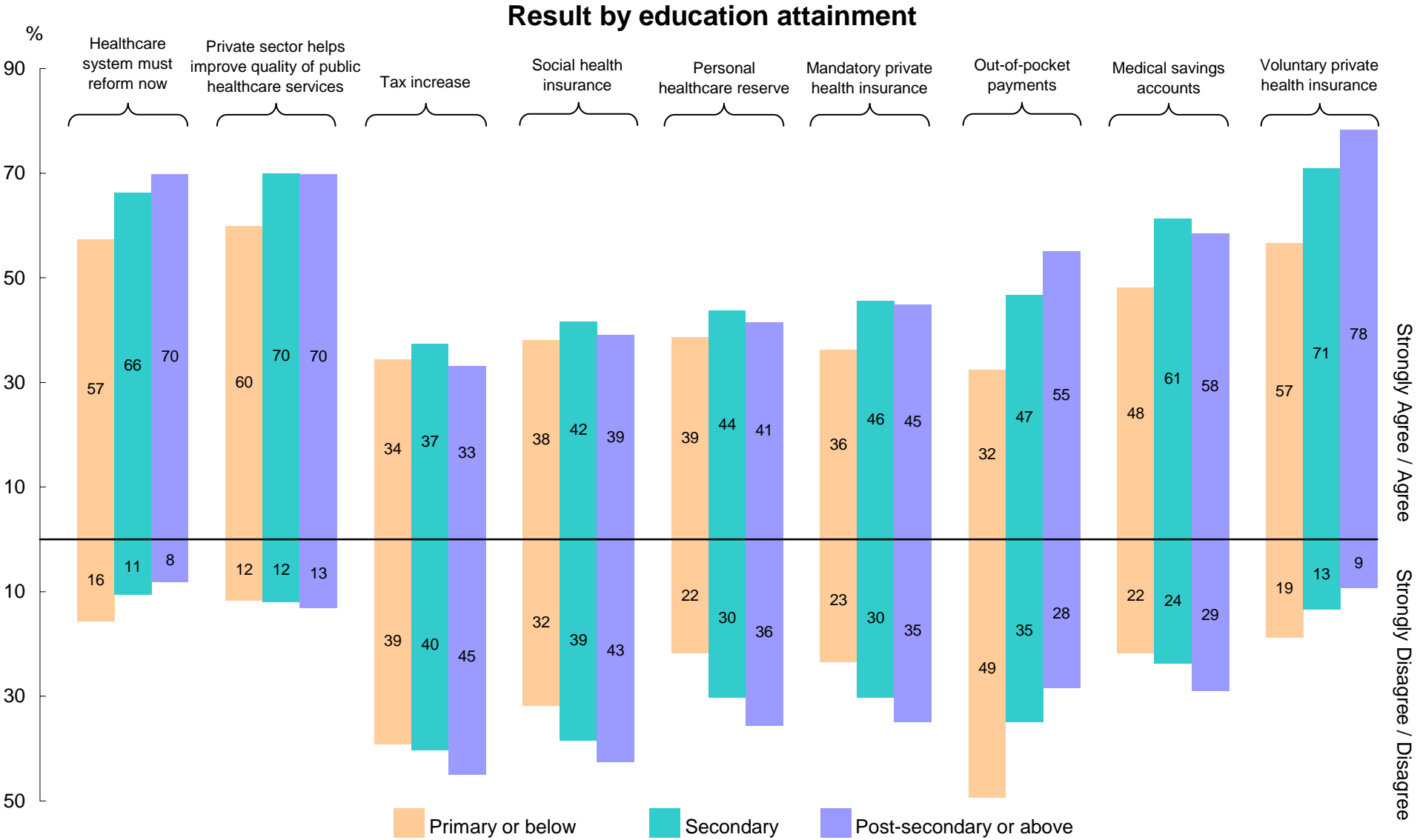


Figure 4

**Result by monthly personal income
(Working Population only)**

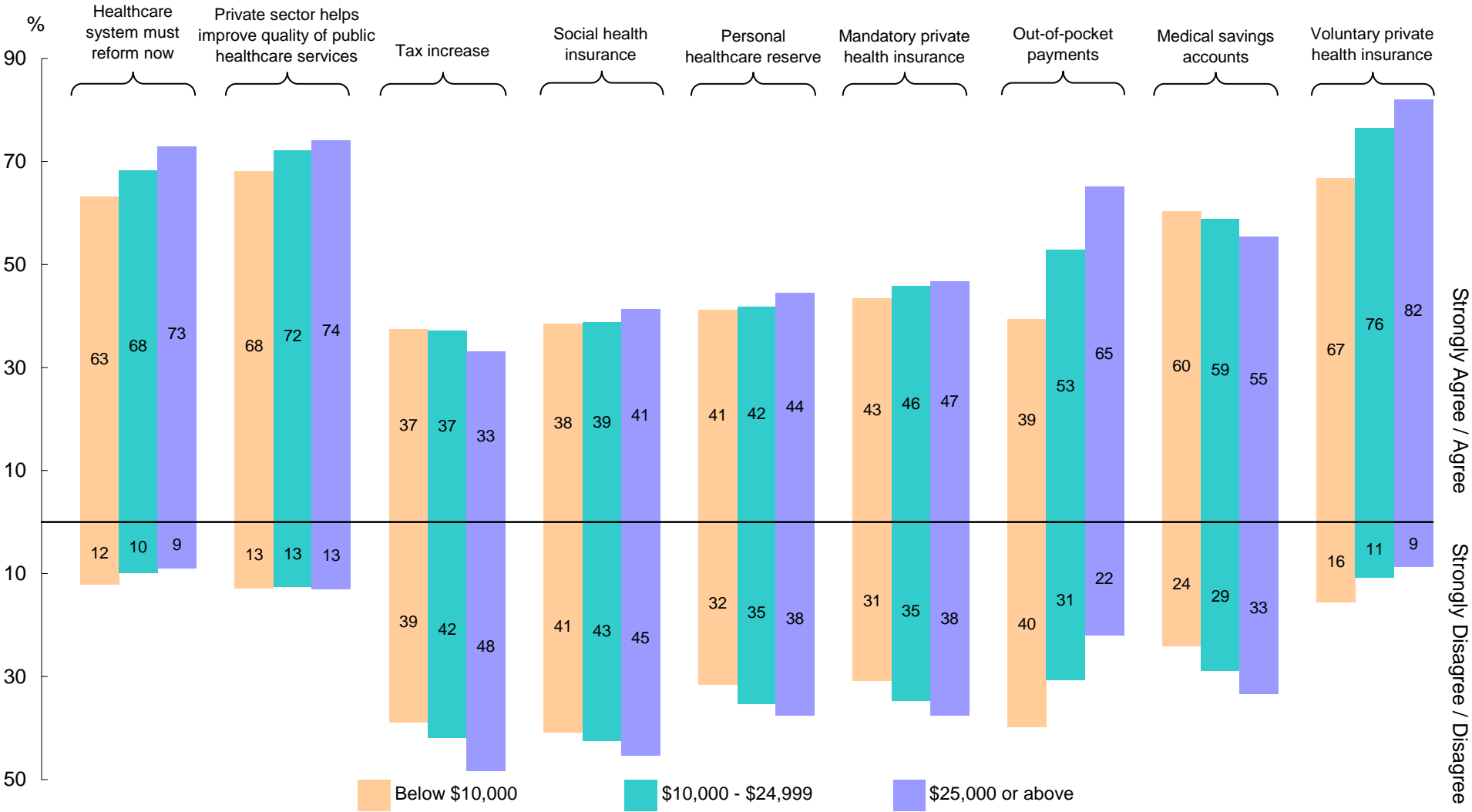


Figure 5

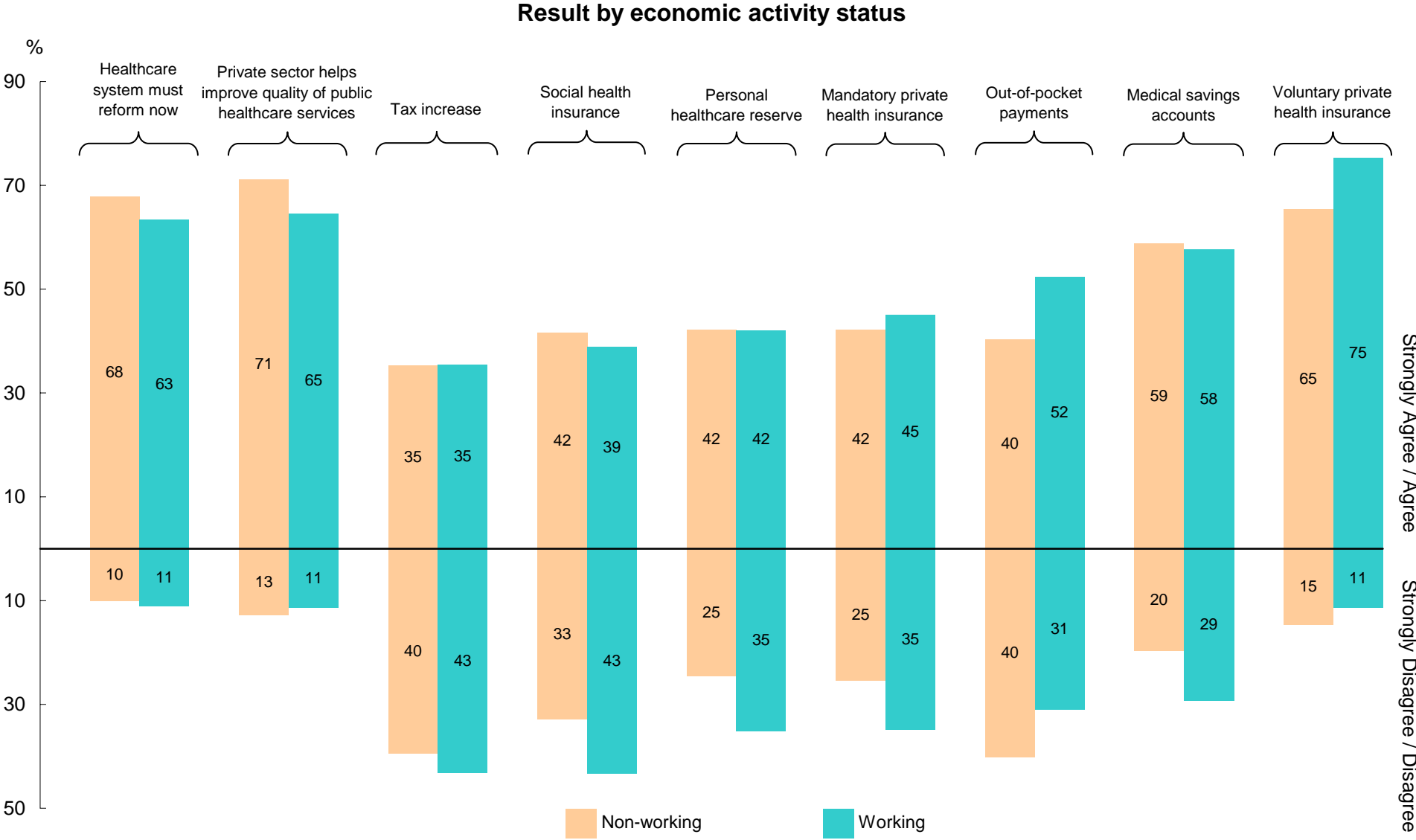


Figure 6

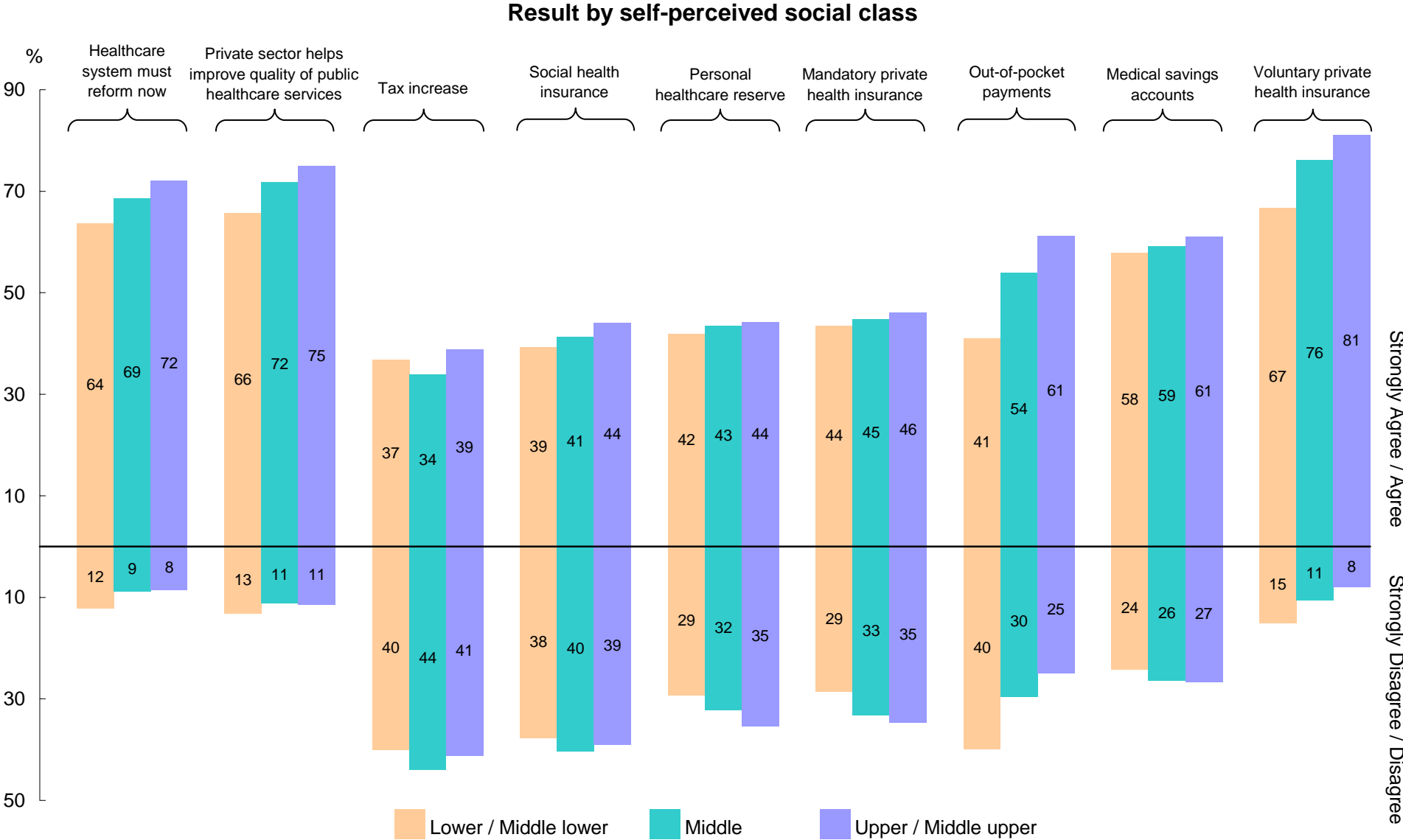
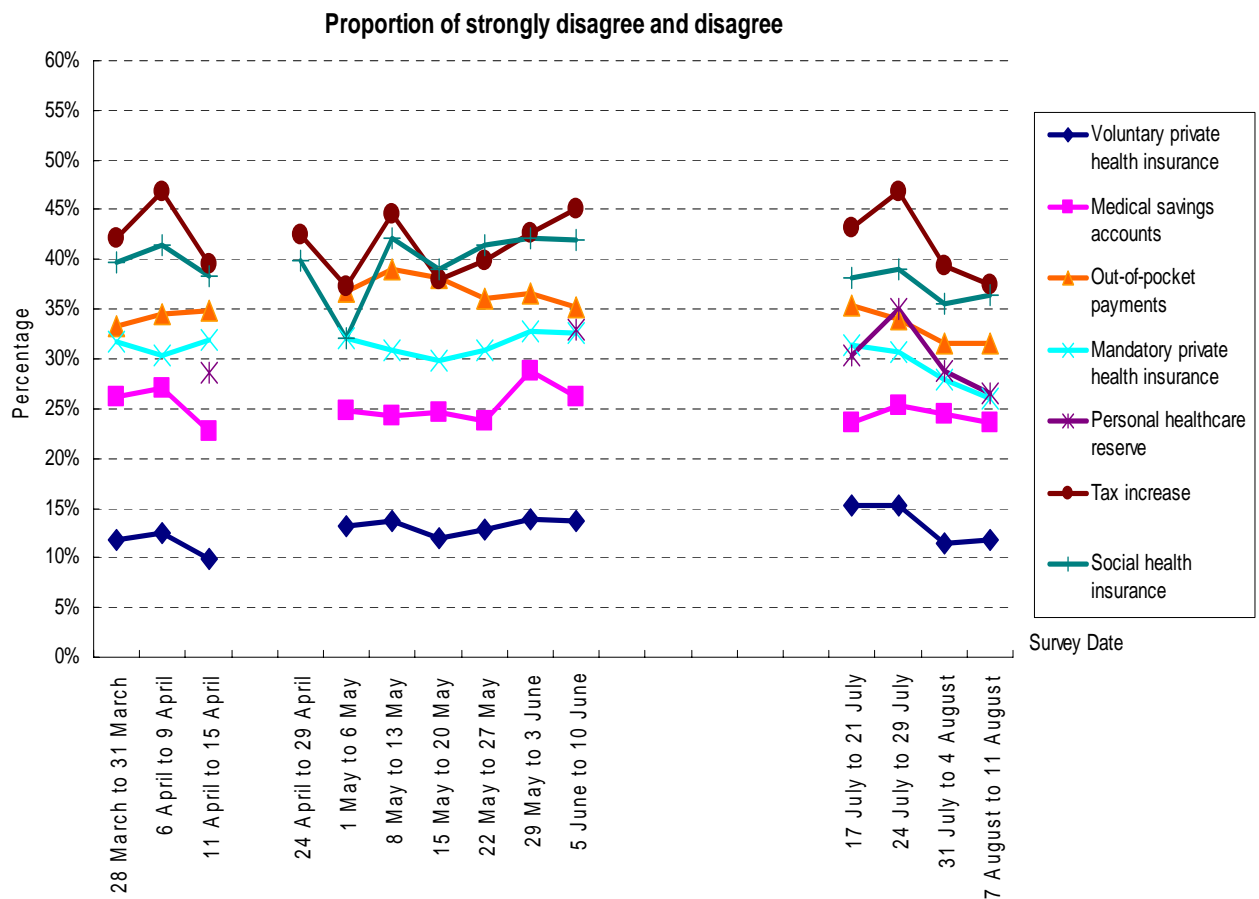
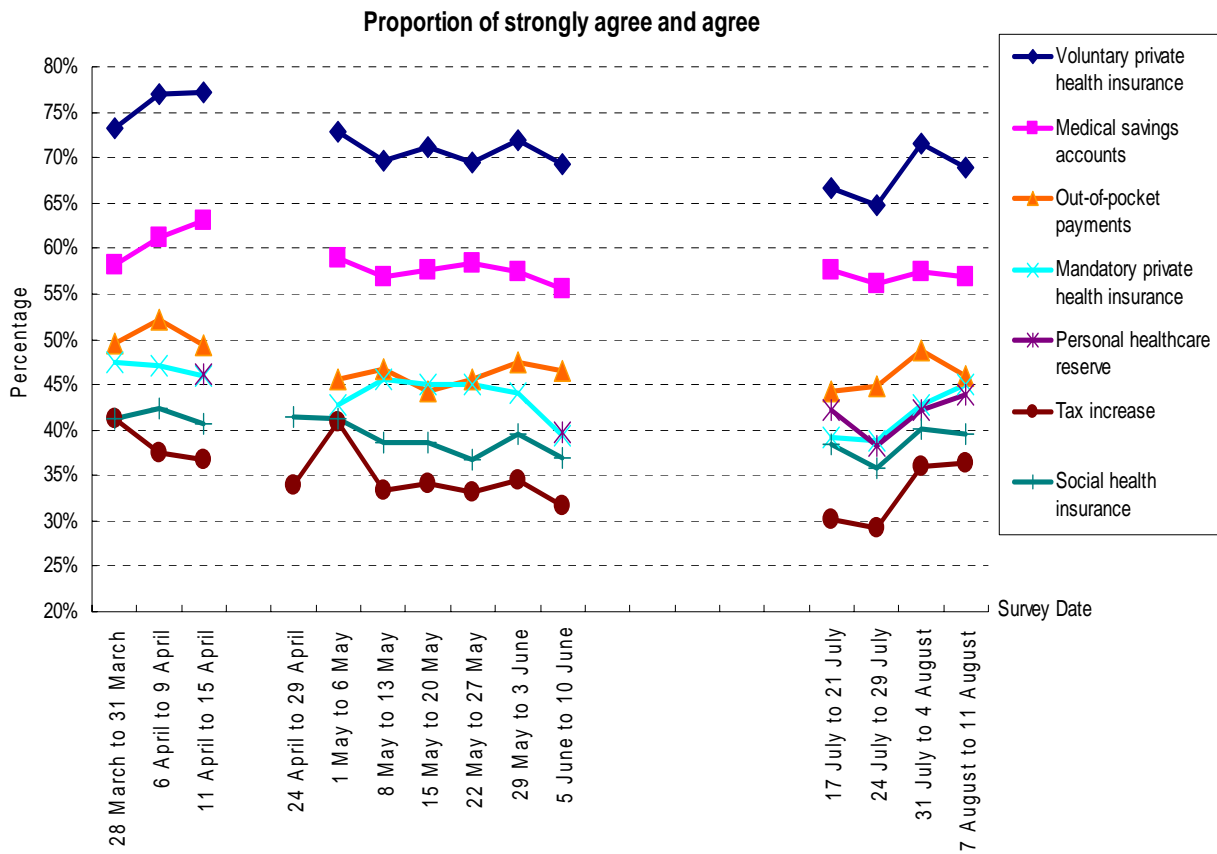


Figure 7



Date of Survey and Sample Size

Date of survey	Sample size
14 March to 18 March 2008	942
28 March to 31 March 2008	1015
6 April to 9 April 2008	1008
11 April to 15 April 2008	820
24 April to 29 April 2008	923
1 May to 6 May 2008	956
8 May to 13 May 2008	927
15 May to 20 May 2008	1013
22 May to 27 May 2008	1014
29 May to 3 June 2008	1025
5 June to 10 June 2008	1013
17 July to 21 July 2008	1024
24 July to 29 July 2008	1005
31 July to 4 August 2008	1017
7 August to 11 August 2008	1015

Questions asked in the Opinion Poll

- ◆ 你同唔同意醫療制度現在必須改革呢？
- ◆ Do you agree that the healthcare system must reform now?
- ◆ 你同唔同意話私營市場可以吸納更多服務需求，令到公營服務嘅輪候時間可以縮短，服務水平可以提高呢？
- ◆ Do you agree that the private sector can absorb more service demand and thus shorten the waiting time and improve the service quality in the public sector?
- ◆ 你同唔同意政府加稅，確保有足夠資源為全民提供公共醫療服務呢？
- ◆ Do you agree that the government should increase tax to ensure that there is adequate resource to provide public healthcare services to the whole population?
- ◆ 若果唔加稅，你同唔同意政府向在職人士徵收入息嘅一個百分比，專門用嚟支付醫療開支，以確保有足夠資源為全民提供公共醫療服務呢？
- ◆ If there is no tax increase, do you agree that the government should levy a certain percentage of income from the working population to specifically pay for healthcare expenditure, for ensuring that there is adequate resource to provide public healthcare services to the whole population?
- ◆ 若果唔加稅，你同唔同意政府提高公立醫院及診所收費，以增加公共醫療服務嘅資源？
- ◆ If there is no tax increase, do you agree that the government should raise the user fees in public hospitals and clinics, to increase the resources for public healthcare services?
- ◆ 若果唔加稅，你同唔同意政府規定入息某水平以上人士，將入息嘅一個百分比存到個人嘅醫療儲蓄戶口，供退休後支付醫療開支？
- ◆ If there is no tax increase, do you agree that the government should require people with income above a certain level to contribute a fixed percentage of their income into a personal medical saving account, to support their healthcare expenses after retirement?

- ◆ 你同唔同意政府應該鼓勵市民購買自願醫療保險呢？
- ◆ Do you agree that the government should encourage people to take out voluntary health insurance?
- ◆ 若果唔加稅，你同唔同意政府規定入息某水平以上人士，購買受政府規管、劃一保費及必須承保嘅醫療保險呢？
- ◆ If there is no tax increase, do you agree that the government should require people with income above a certain level to take out mandatory health insurance that is government-regulated with a fixed premium for everyone?
- ◆ 若果唔加稅，你同唔同意政府規定入息某水平以上人士，將入息嘅一個百分比存到個人嘅醫療儲蓄戶口，而其中一部分嘅錢用嚟購買受政府規管、劃一保費及必須承保嘅醫療保險呢？
- ◆ If there is no tax increase, do you agree that the government should require people with income above a certain level to contribute a fixed percentage of their income into a medical saving account, of which a portion would be used to take out mandatory health insurance that is government-regulated with a fixed-premium for everyone?

Note: The Chinese version of the questions was actually used in the survey. The English translation given here is for reference only.

Survey Methodology

- 1 The opinion poll was commissioned, via the Central Policy Unit, to the Hong Kong Polytechnic University (PolyU) and the Chinese University of Hong Kong (CUHK). The poll was carried out by the Centre for Social Policy Studies under the Department of Applied Social Sciences of the PolyU and the Hong Kong Institute of Asia-Pacific Studies of the CUHK. They were responsible for the work of sample selection, enumeration by telephone interviews, data processing and analysis as well as quality assurance.

- 2 A total of 15 weekly rounds of the poll were conducted during the period from March to August 2008. The residential telephone directory published by the PCCW Hong Kong was employed for selection of a random sample of telephone numbers. Then the “Last Birthday” method was used to randomly select a household member aged 18 or above for interview.

- 3 About 800 to 1000 respondents were successfully enumerated in each round of the opinion poll. All data collected were weighted by the age-sex distribution of the Hong Kong population. The margin of error at 95% confidence level for the percentages obtained from the collected data was estimated to be at most +/-3.3% to +/-3.5%.