

HMOs embrace contract medicine and insurance companies for control of the panel doctor besides manipulation of employees. Their practice could cause lowering in standard.

1. Improper use of antibiotics
 - limit the course of antibiotic to cheap ones
 - instead of 7 days of ordinary antibiotics to just 3 days without choice

2. Intervention of the professional judgement of Dr. and jeopardising the health needs of patients
 - limit the follow-up rates, e.g. Bupa: GP<10%, specialists<15%
 - cost of medicine in a practice for each consultation
 - limit the choice of patients in receiving treatment, e.g. only day-care service for colonoscopy
 - when a patient is admitted to hospital for a surgery, e.g. Cholecystectomy or herniotomy only surgical care is eligible but not his other medical problems eg. If he has concomitant heart problem or kidney disease, such medical care is not eligible for consultation fee for the same doctor treating the surgical disease. This is not a holistic care.
 - limit the specialist referral rate.

3. Purchase and use of unregistered vaccine or medicine, e.g. generic antibiotics not yet patented, without informing the doctors/employees. The public is in danger, yet only doctors are controlled by MC but HMOs are NOT.

The HMO is running a business, the purpose is to earn and bargain and so is prove to put profit over ethical care for the patients.

The Hong Kong Medical Association