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The Hong Kong Medical Association

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FOUNDED IN 1920-INCORPORATED IN 1960 AS A COMPANY LIMITED BY GUARANTEE
MEMBER OF WORLD MEDICAL ASSOCIATION AND CONFEDERATION OF MEDICAL ASSOCIATIONS IN ASIA & OCEANIA

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25 January 2011

The Hon. Donald TSANG, GBM
Chief Executive
Hong Kong Special Administrative Region
People's Republic of China
Government House
Hong Kong

Dear Mr. TSANG,

Re: Unfounded accusation against the medical profession

"Some doctors have raised their fees on patients who use the vouchers," a person familiar with the scheme said. "As a result, the elderly cannot fully benefit from the government subsidy ... the vouchers are effectively shared between the patients and doctors." (SCMP, 17 January 2011)

「政府派錢，醫生可與病人對分」(Mingpao, 17 January 2011)

On 17 January 2011, 4 newspapers reported on the same topic of Health Care Vouchers Scheme. The papers reported that an unnamed government official accused doctor(s) participating in the scheme of inappropriate charging. It was further suggested that because of this, the Health Care Vouchers Scheme fees would not be raised. Based on data collected, the official was disappointed that the vouchers were used for acute events instead of preventive measures. He suggested that government would seek business partners to facilitate the use of the Vouchers for screening illness or preventive medicine.

The above statements were quoted from 2 of the 4 newspapers. These bureaucrat comments, improperly proclaimed by a government official, were very serious accusations deliberately conveyed to specific reporters with the aim of disseminating defamatory messages to the public through the media in a concerted manner.

The Hong Kong Medical Association (HKMA) is not aware that there was any evidence for the harsh criticism about medical profession raising their fees on patients using the health care vouchers. The HKMA is unaware of any evidence to show any doctor doing the acts as accused in the reports. The HKMA is also unaware that any statistics or survey study was done on this subject matter by government or any non-government organization.

Even if there were a few mischievous doctors practicing below standard, it was ungrounded to extrapolate their actions to the whole profession. Sporadic cases

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within the line of work certainly could not be generalized to the entire profession. And after all, to determine whether the actions accused were lawful and ethical, investigations and discussions would be needed. If the government official found it necessary to do so, he may refer the case(s) to the police if fraud is suspected or to the Hong Kong Medical Council if excessive charging is obvious, for further action. It is definitely not fair and just to draw the conclusions with adverse inference and comments. It is unfair to the elderly for a government official to accuse the doctor(s) and then make a decision for government not to raise the fee for the health care vouchers for the elderly.

An additional point about the statistics of the use of Health Care Vouchers Scheme (HCVs) is that there are intrinsic defects in the design of the system. Only one option can be chosen as the purpose for the use of vouchers in each consultation. However, for each general practice or family medicine consultation, it usually includes management of acute problems, counseling, screening and healthcare preventive education. The statistics collected from this faulty design cannot be used to evaluate the use of HCVs. And the purpose of the collection of such statistics had never been stated. In view of all these, the Hong Kong Medical Association (HKMA) is going to recommend our members to choose "prevention" as the response to all consultations with the component of preventive education in the future uses of HCVs since the unidentified government official thought so highly of preventive medicine.

Patients have complaint to our Association that it is near impossible to be seen nowadays in General Out-patient clinics even if they queue up early in the morning when they develop acute respiratory problems, fever, dizziness, or colic or diarrhoea. It is also difficult for them to get an appointment on the same day via the phone appointment system to see a doctor in these clinics for their acute illness. This is exactly how the Health Care Vouchers can help the elderly patients to deal with their health problems when they need health care most. To suggest that using the vouchers for their acute problems is inappropriate is absurd and inconsiderate.

The HKMA was approached by the Deputy Director of the Department of Health a few months ago to boost the use of the Health Care Vouchers. We have organized a 'fall prevention' program to help elder citizens to take care of their own health which will be taking place in various districts of Hong Kong. These will involve preventive measures and hopefully can involve physiotherapists and occupational therapists to do active preventive jobs and help to use the vouchers. We have done our best to collaborate with government on preventing health deterioration of the elderly. We are totally disappointed with the nasty accusation.

We are also aware of a case where a member was not reimbursed for his consultation 3 months after he saw the patient. We were told that the patient died in the public hospital and the computer system is at a loss as to the claim for someone who passed away after being seen using the Health Care Voucher. We have not condemned the government for not paying up in time and have not disseminated this malpractice to the media. We are disappointed at the contrary.

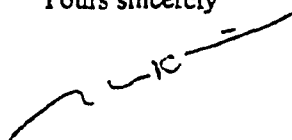
The conclusions drawn and the proposed actions alleged to be taken by the government annoyed the profession. The finger-pointing not only jeopardizes the

well-established relationship between the Health Bureau and the HKMA, but also has a bad influence on the trust between doctors and patients.

We would like to reiterate that such improper disseminations of ungrounded accusations are totally unacceptable to the medical profession. If these irresponsible behaviors are not stopped, it will destroy the very basis of the ongoing communication and collaboration that have proved vital for safeguarding the health of our community."

We would sincerely hope that you could look into the matter and prevent further deterioration in the relationship between the profession and the government.

Yours sincerely



Dr. CHOI Kin
President
The Hong Kong Medical Association

c.c. Dr. the Hon. York CHOW, GBS, JP, Secretary for Food and Health
c.c. Dr. the Hon. LEUNG Ka Lau, Legislative Councillor
c.c. Dr. PY LAM, JP, Director of Health
c.c. All members of the Legislative Council

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