

To: Panel on Health Services

Financial planning service for cancer patients by Pharmacists:

Corporate governance and manpower situation of Hospital Authority

In view of the recent protests for resources issues and shortage of doctors in public hospitals, our foundation (WeCareBill Foundation) proposes the following suggestions on the "Corporate governance and manpower situation of Hospital Authority":

Problem :

The founder of the Foundation is a family member of cancer patients. From recent consultations experiences, cancer patients in public hospitals face the pain points as follows:

- 1) The waiting time for oncology clinic is worsening. Chemotherapy treatments are often delayed for one to two months.
- 2) There is a shortage of front line oncologists. Consultation time is usually only 5-8 minutes for each patient. Doctors do not have the time to explain medication options. It is also difficult for them to suggest expensive treatments for patients.
- 3) Doctors and medical social workers cannot answer patients' enquiries as they lack the tools to update various subsidies and fees of medication. Therefore, patients often have to go through a few referrals to know the price.
- 4) Some patients realize they can no longer afford cost of cancer treatment in the middle of the treatments. They have to downgrade their treatments or go back to public hospitals.
- 5) Insured patients often choose to wait in public hospitals due to the lack of price transparency in private hospitals.

The cost of cancer treatment is rising. In particular, middle-class cancer patients cannot necessarily afford drugs when they are not eligible for subsidy from the Safety Net of Hospital Authority. Affordability has become an important consideration for their choice of drugs. However, the current private medical charges in Hong Kong are not transparent. Patients do not have comprehensive information on the choices and subsidies from both public and private sectors to participate in the drug decision.

Solution:

Registered pharmacists could conduct drug usage counseling and financial consultations for cancer patients. Through counseling and collection of data, a specific database could be established to assist pharmacists in providing new value-added services to patients.

The financial planning for expensive drugs could help to enhance public-private collaboration, allowing patients to consider their affordability to

- 1) Start treatment once or twice in private sectors during the waiting period in public hospitals
- 2) Proactively ask doctors in public hospitals about the details of non-subsidized drugs
- 3) Proactively ask about drug treatment proposals that are not available in the public hospitals and consider private services where they see fit.

When the database is mature with medication list and indicative cost range, healthcare professionals can answer patient's questions regarding the prices of drugs. We have interviewed front line oncologists and social workers in public hospitals: they support financial counseling and hope to have tools to prepare for patients' questions on fees. This could achieve patient-centered care services.

Therefore, the Foundation is now approaching different non-profit-making organizations (e.g. The Philanthropic Community Pharmacy with St. James' Settlement and Cancer Patient Alliance) to discuss collaboration. We also plan to provide free trial services for cancer patients on financial counseling, with the help of volunteers from pharmacy students from the University of Hong Kong.

Conclusion:

With such limited medical resources, the proposal aims to improve the welfare of patients without the need of a significant grant or alteration of the medical ecosystem. The use of financial counseling services for cancer treatments can alleviate the mounting pressure of long queue and long working hours of medical staff in public hospitals



We propose this new value-added services to the Hospital Authority and the government: the database is a knowledge management software that would enable medical professionals and front line staff to assist cancer patients in coping with rising treatment costs.

[The supporter names of the joint statement are available in Chinese Version only.]