

Overview of the differences between the healthcare systems in China and Hong Kong



Purple Tse
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In the final session of the conference, Purple provided an overview of the Hong Kong healthcare system and outlined some of the challenges that insurers may face when looking for suitable care for a client. He pointed out that good assistance begins by seeking an appropriate doctor or specialist. "I am often asked to recommend a good hospital, but in Hong Kong, care is more doctor-based rather than hospital-based," he said. Purple added that most good private doctors and specialists affiliated themselves to several private hospitals in order to ensure the availability of a room and their equipment needs. He also said that although most private hospitals were excellent, there are no specialist hospitals in Hong Kong. Regarding public hospitals, he gave the opinion that they were best avoided. "Public hospitals in Hong

Kong do provide good medical care," he said, "but they are simply too busy to produce the prompt medical reports required by insurers. You could apply for a report, but it will take up to six weeks." He added that even in a private hospital, a report would not be available until the end of the day. Purple also said that in the case of an emergency, if a public ambulance were called, the patient would be taken to the closest emergency room. He also warned that the typical waiting time in a public hospital could be up to six hours. Purple enlightened delegates about the 12 private general hospitals in Hong Kong. He said the care is very good, but warned that only the private Union Hospital has a 24-hour emergency unit. All the other private hospitals only work on an outpatient basis and do not accept critical or emergency cases.

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Kenneth Ng
CEO -
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Kenneth turned the delegates' attention to healthcare in mainland China. He started by saying that it was not uncommon for patients to reject local healthcare and travel for days to reach a bigger hospital in an urban area. Interestingly, he pointed out that although 70 per cent of the population live in rural areas, it was urban hospitals that had benefitted from recent investment, hence the need to travel great distances to receive better care. Kenneth enlightened delegates to the true situation about healthcare in China with a series of short and informative film clips, one of which stated that only about one third of doctors hold a four-year degree and the remaining two thirds only have basic training. "However, it is important to realise that during the 1980s, public funding for hospitals was reduced from 100 per cent to less than 30 per cent, leaving the majority of running costs having to be met by the hospitals themselves. This is why there

is the current drive for profitability," said Kenneth. The current Chinese system has been likened to a cash machine on the backs of the patient, trying to extract as much money as possible by overprescribing treatment and drugs. "The reason for this is clear," said Kenneth. "In most cases, the sale of drugs contributes over 60 per cent of a

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hospital's income. However, the government is currently trying to reduce the over-use of drugs." Despite the difficulties, Kenneth said that although the standard of healthcare in China was behind many countries, progress is being made. However, citizens in rural areas still have to pay 90 per cent of their own medical expenses and are either unaware of or unable to pay for insurance. "I do think that medical insurance will be the key to changing healthcare in China," said Kenneth. He went on to say that the government did try to implement a system in urban areas whereby the employer and employee both contributed to insurance. "In rural areas, there was also something called the co-operative medical scheme, but it wasn't successful. This was mainly due to a lack of education. The concept of insurance is still not strong and people are reluctant to pay for anything if they can't see an immediate benefit," he said.

