



The Provisional Hong Kong Academy of Nursing Limited
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**Response to Consultation Paper of
Voluntary Health Insurance Scheme (VHIS)**
「自願醫保計劃」

The Provisional Hong Kong Academy of Nursing in principle agrees with the objectives of the VHIS. It offers choice to those who can afford and are willing to pay, thus take over some responsibilities from the public sector and able to focus on the target service areas. Below are concerns raised by the Fellows of the Provisional Hong Kong Academy of Nursing.

- 1) The VHIS, as presented, is primarily hospital-focused. For cost and patient benefits, a comprehensive scheme spanning from hospital admission to a specified period after discharge with the support of a multidisciplinary team should be considered. Inpatient care is expensive and research evidence has shown that transitional care supporting patients after discharge using multidisciplinary team can reduce hospital length of stay, readmission and is cost-effective.
- 2) The Scheme is medical oriented. It directs the consumers to focus only the use of medical and in-patient care. It has not made the best use of the human capacity in the health care system such as nursing, physiotherapy and others to help reduce hospital days, thus control cost.
- 3) Existing laws and regulations need to be reviewed and updated in order to optimize the contribution of all healthcare professionals other than medical doctors. For example, the advanced practicing nurses can help follow up patients after an acute episode of illness after hospital discharge and before the next medical consultation. When patients are stabilized in the community with symptom control, healthy lifestyle maintenance and medication adherence, they will have less readmission and visit to Emergency Room which will eventually reduce cost.
- 4) In what way the Scheme is going to sustain, particularly the concern for the exhaustion of resources consumed by the high risk pool.
- 5) The standard plan guaranteed acceptance with premium loading capped at 200% of standard premium for all ages within the first year and those aged 40 or below starting from the second year of the implementation. What is the reason for only accepting aged above 40 in the first year? Furthermore, how to ensure people aged above 40 get this information.

- 6) The document informed that for the triennial cycle starting from 2012/13 academic year, the government has substantially increased the number of first-year first-degree places in medicine by 100 (i.e. from 320 to 420), nursing by 40 (i.e. from 590 to 630), and Allied Health professionals by 146 (i.e. from 231 to 377). The number of increased places for nursing is definitely not enough to cater for the opening of new private hospitals and the demand resulting from aging population.

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