



THE HONG KONG MEDICAL ASSOCIATION

REPORT OF DOCTORS' FEES SURVEY 2010

April 2010

PREPARED BY THE HONG KONG MEDICAL ASSOCIATION

BACKGROUND

The Hong Kong Medical Association has been conducting surveys on doctors' fees regularly since 1991, aiming to gather information on the prevailing charges of medical services in the private sector. The last survey was conducted four years ago. Recently, we have been working with the insurance industry to formulate a basic medical insurance product. The product, which is still in the pipeline, should be affordable by the majority of Hong Kong people. We find it timely to conduct a new round of fee survey. The results will be used as reference for the formulation of the product mentioned above. This report outlines the results of the survey conducted from February to April 2010 – the ninth exercise ever since.

METHODOLOGY

A total of 3,453 HKMA members in private practice were extracted from the membership database. Serial-numbered questionnaires were sent to these members randomly to preserve anonymity on 18 February 2010 with a reminder on 8 March 2010. The final deadline fell on 7 April 2010.

背景

香港醫學會自一九九一年進行醫生收費調查，籍以搜集在私營市場運作的醫療收費。自上次的收費調查，至今已四年了。最近，本會與保險業代表合作制定一套適合大部份香港市民購買的醫療保障計劃，為確保保單條款合理，本會認為有需要在這時候舉行另一次收費調查，作為參考之用。是次收費調查在二零一零年二月至四月期間進行，已是本會第九次進行的收費調查。這份報告簡介了是次調查的結果。

調查方法

我們在會員資料庫中抽出 3,453 位屬私人執業的醫生。問卷於二月十八日郵寄至名單中的醫學會會員。為預防匿名回覆的問卷被重複點算，所有問卷均印有編號以隨機形式寄出。本會於三月八日向還沒有回應的會員發出提示，最後回應限期為四月七日。

RESULTS OF 2010 SURVEY

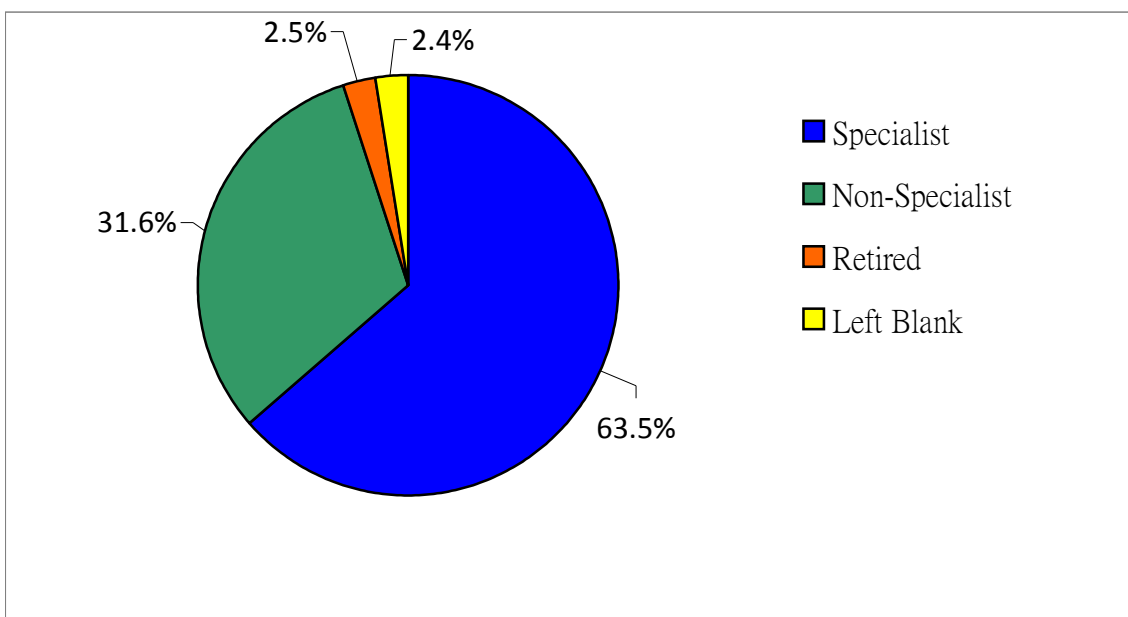
A total of 3,453 private doctors were surveyed and a total of 630 valid questionnaires were received and analyzed. The response rate was 18.2%.

Response Rates Compared with Previous Years

<u>Year</u>	<u>Response rate</u>	<u>Number of completed questionnaire</u>
2010	18.2%	630
2006	25.7%	703
2002	27.7%	664
1999	33.5%	761
1996	35.3%	705
1994	24.7%	394
1993	27.8%	505
1992	33.3%	648
1991	35.0%	622

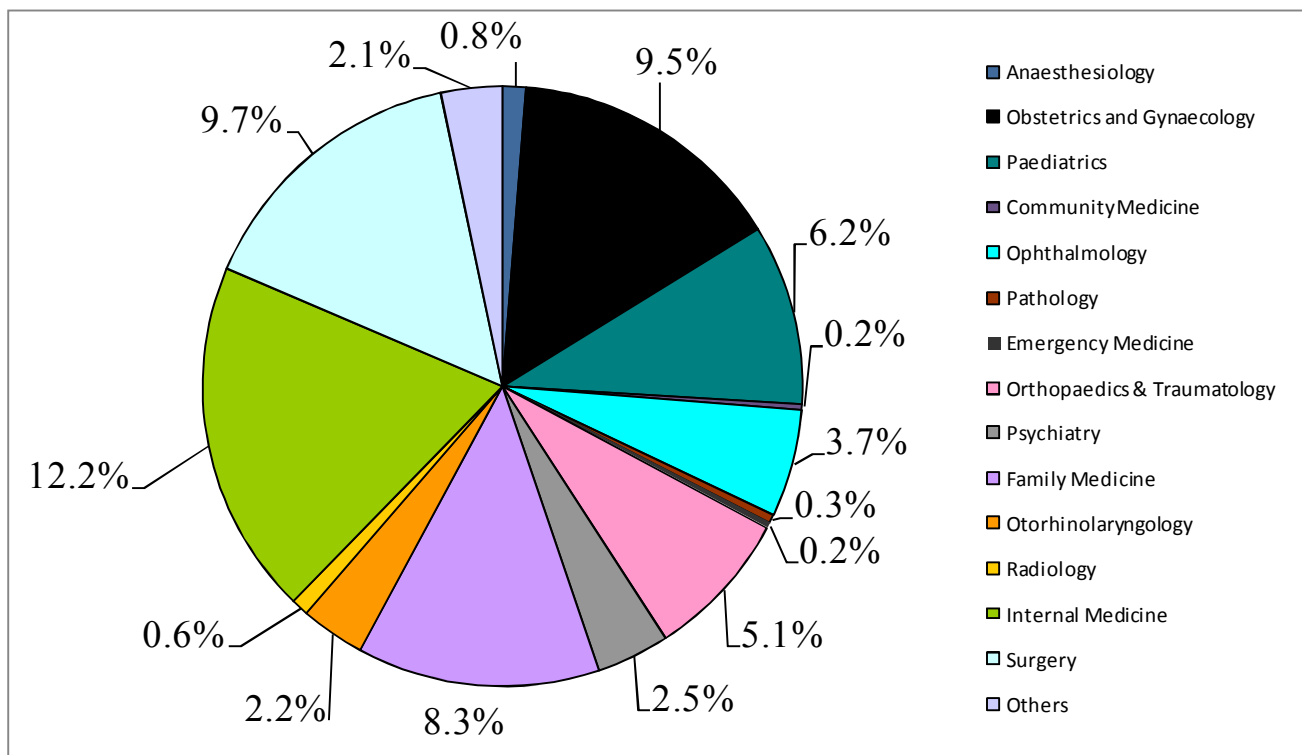
1a. Are you a specialist or non-specialist?

	Frequency	Percent
Specialist	400	63.5
Non-Specialist	199	31.6
Retired	16	2.5
Left Blank	15	2.4
Total	630	100.0



1b. Please indicate your specialty.

	Frequency	Percent
Anaesthesiology	5	0.8
Obstetrics and Gynaecology	60	9.5
Paediatrics	39	6.2
Community Medicine	1	0.2
Ophthalmology	23	3.7
Pathology	2	0.3
Emergency Medicine	1	0.2
Orthopaedics & Traumatology	32	5.1
Psychiatry	16	2.5
Family Medicine	52	8.3
Otorhinolaryngology	14	2.2
Radiology	4	0.6
Internal Medicine	77	12.2
Surgery	61	9.7
Others	13	2.1
Total	400	100.0



2a. Daily hospital attendance charge

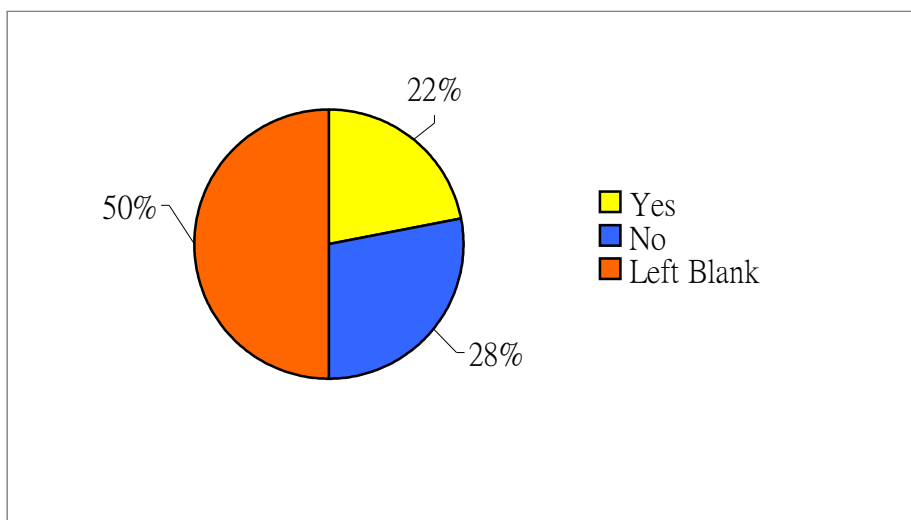
	Single Room / First Class	Double Room / Second Class	Ward
Median	\$2,000	\$1,200	\$700
Mode	\$2,000	\$1,000	\$700
10 th percentile	\$1,200	\$800	\$595
90 th percentile	\$3,000	\$2,000	\$1,000

**2b. How much do you normally charge for surgical operations?
(See Appendix for representative surgical operations.)**

	Level 1	Level 2	Level 3	Level 4	Level 5	Level 6
Median	\$50,000	\$30,000	\$22,000	\$15,000	\$7,000	\$4,000
Mode	\$50,000	\$30,000	\$20,000	\$15,000	\$6,000	\$5,000
10 th percentile	\$29,000	\$20,000	\$15,000	\$9,600	\$4,800	\$1,500
90 th percentile	\$85,000	\$45,800	\$38,000	\$30,000	\$11,000	\$7,500

2c. Do you perform emergency surgery?

	Frequency	Percent
Yes	138	21.9
No	177	28.1
Left Blank	315	50.0
Total	630	100.0



Remarks (備註) :

Median	中位數
Mode	眾數 (一組數字中出現次數最多的數)
10th percentile	第十個百分位數
90th percentile	第九十個百分位數

**3. Part I – General Practice
Consultation Fee ***

	Regular clinic consultation charge	Additional charges for extended consultation	Hospital OPD charge outside regular clinic hours	Home visit charge
Median	\$200	\$100	\$800	\$700
Mode	\$200	\$100	\$1,000	\$500
10 th percentile	\$150	\$31	\$336	\$300
90 th percentile	\$500	\$400	\$2,000	\$2,000

*** Inclusive of the following number of days of medication**

Median	3
Mode	3

**3. Part II – Specialist Practice
Consultation Fee ***

	Regular clinic consultation charge	Additional charges for extended consultation	Hospital OPD charge outside regular clinic hours	Home visit charge
Median	\$575	\$300	\$1,000	\$2,000
Mode	\$500	\$200	\$1,000	\$2,000
10 th percentile	\$300	\$100	\$500	\$1,000
90 th percentile	\$1,000	\$1,200	\$1,820	\$4,000

*** Inclusive of the following number of days of medication**

Median	3
Mode	0

4. Normal charges for giving one dose of the following vaccines including the cost of the vaccines and consultation fees, if any.

	6 in 1	Bacillus Calmette Guerin / BCG	Chicken-pox	Hepatitis A	Hepatitis B	Hexa	Hib / Haemophilus Influenza Type b	Human Papilloma Virus	Influenza
Median	\$665	\$350	\$500	\$500	\$250	\$600	\$300	\$1,200	\$180
Mode	\$600**	\$500	\$500	\$500	\$250	\$600	\$300	\$1,200	\$200
10 th percentile	\$505	\$200	\$400	\$327	\$200	\$471	\$180	\$1,000	\$140
90 th percentile	\$800	\$550	\$650	\$650	\$353	\$780	\$500	\$1,400	\$280

** Multiple modes exist. The smallest value is shown

	Japanese B Encephalitis	Meningo-coccal A&C	MMR	Pneumo 23	Prevenar Pneumo-coccal	Quadriplegia –Polio / Poliomyelitis; Tetanus; Pertussis; Diphtheria	Rotavirus	Synflorix
Median	\$350	\$350	\$250	\$250	\$710	\$500	\$650	\$740
Mode	\$250	\$300**	\$200	\$250	\$700	\$500	\$650	\$700
10 th percentile	\$200	\$206	\$150	\$200	\$600	\$300	\$500	\$650
90 th percentile	\$900	\$594	\$400	\$400	\$830	\$750	\$800	\$900

** Multiple modes exist. The smallest value is shown

5. Normal charges in writing medical reports

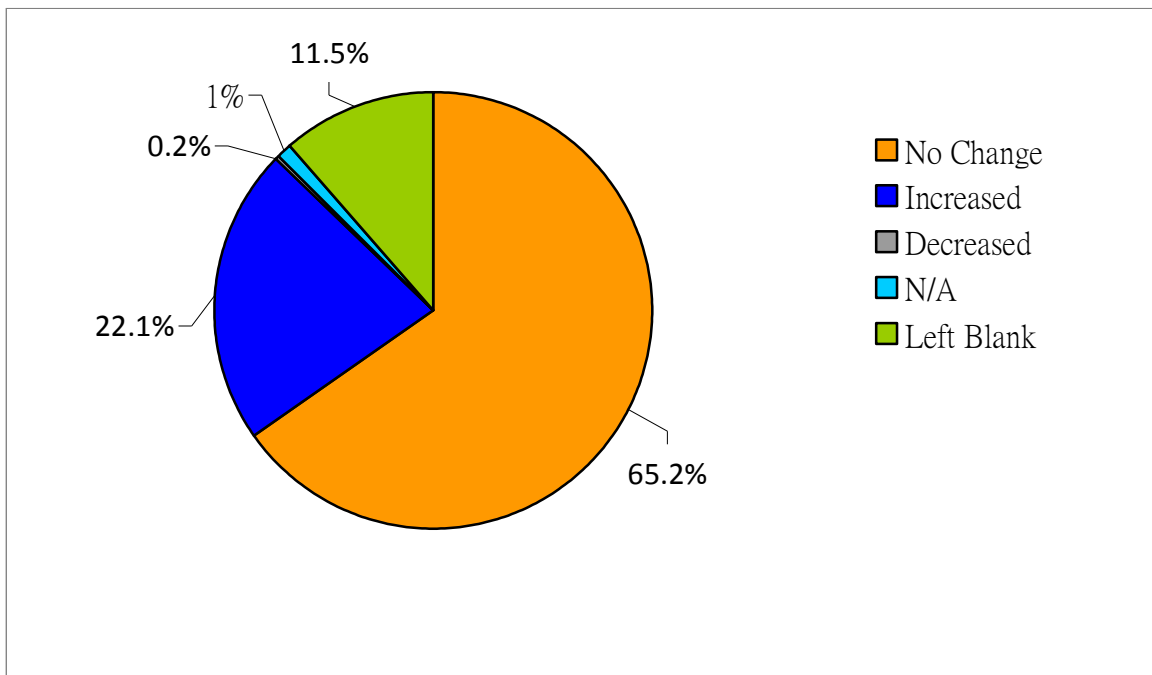
	Simple Medical Report for Patient	Detailed Medical Report for Patient	Simple Medical Report for Insurance Company	Detailed Medical Report for Insurance Company	Medical Report with Assessment of Disability
Median	\$300	\$800	\$500	\$1,000	\$2,000
Mode	\$0	\$1,000	\$500	\$1,000	\$1,000
10 th percentile	\$0	\$0	\$200	\$450	\$340
90 th percentile	\$1,000	\$3,000	\$1,200	\$3,000	\$13,400

6. Normal charges in completing insurance claim form

	Simple Insurance Claim Form	Complex Insurance Claim Form
Median	\$200	\$500
Mode	\$0	\$0
10 th percentile	\$0	\$0
90 th percentile	\$525	\$1,000

9. Did you adjust the fees of your professional service in the past 12 months?

	Frequency	Percent
No Change	411	65.2
Increased	139	22.1
Decreased	1	0.2
N/A	6	1.0
Left Blank	73	11.5
Total	630	100.0



Comparison between 2006 and 2010 Results

Daily Hospital Attendance Charge

	First Class		Second Class		Third Class	
	2010	2006	2010	2006	2010	2006
Median	\$2,000	\$1,500	\$1,200	\$1,000	\$700	\$600
Mode	\$2,000	\$1,500	\$1,000	\$800	\$700	\$600

Charges of General Practice

	Regular consultation		Additional charges for extended consultation		Hospital OPD charge outside regular clinic hours		Charge for home visit	
	2010	2006	2010	2006	2010	2006	2010	2006
Median	\$200	\$180	\$100	\$100	\$800	\$500	\$700	\$500
Mode	\$200	\$150	\$100	\$100	\$1,000	\$500	\$500	\$500

Charges of Specialist Practice

	Regular consultation		Additional charges for extended consultation		Hospital OPD charge outside regular clinic hours		Charge for home visit	
	2010	2006	2010	2006	2010	2006	2010	2006
Median	\$575	\$500	\$300	\$250	\$1,000	\$800	\$2,000	\$1,500
Mode	\$500	\$500	\$200	\$200	\$1,000	\$800	\$2,000	\$1,000

Charges of Vaccines

	Chickenpox		Hep.B_Adult		Hep.B_Child		Influenza		MMR	
	2010	2006	2010	2006	2010	2006	2010	2006	2010	2006
Median	\$500	\$500	\$250	\$240	\$250	\$198	\$180	\$150	\$250	\$200
Mode	\$500	\$600	\$250	\$250	\$250	\$200	\$200	\$150	\$200	\$200

Normal charges in writing medical reports

	Simple Medical Report for Patient		Detailed Medical Report for Patient		Simple Medical Report for Insurance Company		Detailed Medical Report for Insurance Company		Medical Report with Assessment of Disability	
	2010	2006	2010	2006	2010	2006	2010	2006	2010	2006
Median	\$300	\$200	\$800	\$500	\$500	\$500	\$1,000	\$700	\$2,000	\$1,000
Mode	\$0	\$0	\$1,000	\$500	\$500	\$500	\$1,000	\$500	\$1,000	\$0

Normal charges in completing insurance claim form

	Simple Insurance Claim Form		Complex Insurance Claim Form	
	2010	2006	2010	2006
Median	\$200	\$180	\$500	\$350
Mode	\$0	\$0	\$0	\$0

Codes for Common Surgical Operations

Appendix

SPECIALTY LEVEL	Anaesthesiology & pain	Cardiac surgery / Cardiology	ENT	Eye surgery	General surgery / Gastroenterology	Gynaecology	Orthopaedic & traumatology	Paediatric surgery	Plastic surgery	Thoracic surgery / Respiratory medicine	Urology
LEVEL 1 (Ultra-major)		0211 CABG 0212 Surgery of thoracic aorta 0213 Heart valve repair/ replacement 0214 Adult congenital heart surgery	0311 Laryngectomy 0312 Surgery on the inner ear 0313 Maxillectomy 0314 Nasopharyngectomy	0411 Orbit 0412 PV 0413 PK 0414 RD	0511 Hepatectomy 0512 Oesophagectomy 0513 Whipple's operation 0514 Radical total gastrectomy	0611 Debulking surgery for ovarian tumour 0612 Radical hysterectomy	0711 Spinal fusion / instrumentation 0712 Digital replantation 0713 Revision total joint surgery 0714 Bone and soft issue tumour excision with vascularized graft reconstruction	0811 Choledochal cyst surgery 0812 Kasai operation for biliary atresia 0813 Laparoscopic ureteric reimplantation, nephrectomy or pyeloplasty 0814 Pullthrough surgery for hirschsprung and imperforate anus	0911 Conservative total parotidectomy 0912 Free TRAM flap 0913 Radical neck dissection	1011 Pneumectomy 1012 Tracheal resection 1013 Bronchoplasty	1111 Radical cystectomy 1112 Radical prostatectomy 1113 Nephrectomy: partial 1114 Radical nephrectomy
LEVEL 2 (Major I)	0121 Intrathecal pump implantation 0122 Spinal cord stimulator implantation	0221 Median sternotomy and excision of anterior mediastinal tumour 0222 Chest wall resection	0321 Mastoidectomy 0322 Endoscopic sinus surgery 0323 Caldwell luc operation	0421 Squint 0422 DCR 0423 Ptosis 0424 Glaucoma	0521 Laparotomy 0522 Total/subtotal thyroidectomy 0523 Mastectomy & axillary dissection	0621 Hysterectomy	0721 Laminotomy + discectomy 0722 Primary total joint replacement 0723 Multiple (>/=2) arthroscopic ligament reconstruction of knee	0821 Hypospadias repair (penile or below) 0822 Open ureteric reimplantation or pyeloplasty (unilateral)	0921 Hemiglossectomy 0922 PM flap coverage 0923 Superficial parotidectomy	1021 Lobectomy 1022 Thymectomy	1121 Total nephrectomy 1122 Endoscopic (PCNL) / open surgery for complex renal stone 1123 TURBT for large tumours
LEVEL 3 (Major II)	0131 Radiofrequency thermocoagulation of trigeminal ganglion 0132 Epidurolysis 0133 Intradiscal electrothermal annuloplasty	0231 VATS pericardial window 0232 Coronary artery stenting	0331 Tympanoplasty 0332 Vulopalatopharyngoplasty (UPPP)	0431 Cataract 0432 Lasik	0531 Cholecystectomy 0532 Hemithyroidectomy/ lobectomy 0533 ERCP (therapeutic)	0631 Ovarian cystectomy/ oophorectomy 0632 Pelvic floor surgery	0731 ACL reconstruction 0732 Hip hemiarthroplasty	0831 Open orchidopexy 0832 Hypospadias repair (coronal or above)	0931 Wide excision of H&N tumour with local flap coverage 0932 Reduction mammoplasty	1031 Wedge lung resection 1032 Rigid bronchoscopy	1131 Transurethral resection/ vaporization of prostate 1132 Ureterolithotomy
LEVEL 4 (Intermediate I)	0141 Celiac plexus block	0241 Mediastinoscopy 0242 Mediastinotomy 0243 PTCA	0341 Tonsillectomy	0441 Eyelid surgery e.g. entropion, ectropion, epiblepharon 0442 Conjunctiva surgery	0541 Appendicectomy 0542 ERCP (diagnostic)	0641 Salpingectomy	0741 Fracture fixation with implants	0841 Penile condition including chordee and buried penis correction	0941 Wide excision of skin malignancy +/- local flap	1041 Thoracic sympathectomy	1141 Inguinal orchidectomy for testicular tumour
LEVEL 5 (Intermediate II)	0151 Lumbar sympathetic block		0351 Myringotomy + ventilation tube	0451 LPI 0452 Laser trabeculoplasty 0453 Retinal laser	0551 Colonoscopy	0651 Colposcopy & LEEP	0751 Carpal tunnel release	0851 Circumcision	0951 Emergency suturing	1051 Bronchoscopy	1151 Circumcision
LEVEL 6 (Minor)	0161 Peripheral nerve block		0361 Antral wash out	0461 I&C 0462 Syringing & probing	0561 Simple excision of skin and subcutaneous lesions	0661 Dilatation & curettage of uterus	0761 Cast application	0861 Tongue tie release	0961 Excision of skin and subcutaneous lesions	1061 Bedside talc slurry	1161 Simple excision of penile/ scrotal skin lesion