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Primary Health Care Strategy: New Zealanders Pay Less, Use More Services

Researchers have found that the Government’s Primary Health Care Strategy, introduced in 2001, is resulting in New Zealanders paying less for, and using more, primary health care services.

A report from the evaluation team released today provides a first set of analyses of data collected from a sample of New Zealand general practices, focusing on the fees that patients are charged when they use primary health care services and on consultation rates.

“There is clear evidence that New Zealanders are paying less in 2005 than they were in 2001 as a result of the new funding,” says project leader Dr Jacqueline Cumming, Director of the Health Services Research Centre at Victoria University of Wellington’s School of Government.

Other findings from the study included:

- In Access practices – where new funding has been allocated first – adults are paying between $2 and $9 (about 20-30 percent) less on average for a consultation with a doctor in 2004/05 than they were in 2001/02.

- In Access practices, fees for doctor visits averaged around 45c for child visits (for those aged under six), $7.60 for young people aged 6-17 and $15-$19 for adults in 2004/2005. In these practices, the government has been aiming for no fees for child visits, fees of $7-$10 for young people and fees under $20 for adults. Thus, although fees for child visits are higher than the Government had hoped for, the Government’s aims for young people’s and adults’ visits are being achieved.

- In Interim practices, new funding was provided to reduce the fees patients pay, for those aged 6-17 in October 2003 (with funding increasing by $5 for those with community services cards and $10 for those not holding cards) and for those aged 65 years and over in July 2004 (with funding increasing by $10 for those with community services cards and $25 for those without cards). “We don’t see much change in the fees that young people paid as a result of the new funding, but there was a fall in the average fees paid by people aged 65 years and over after new funding was rolled out to this group,” says Dr Cumming.

- Thus, between 2003/04 and 2004/05, fees for doctor visits in Interim practices for those aged 65 years and over fell by an average of $3.34 (13 percent) for those who previously held a community services card and by an average of $12.23 (33 percent) for those who previously did not hold a community services card.”

- The researchers have also looked at what is happening to consultation rates over the time the Strategy has been implemented. They found an increase in consultation rates for almost all age groups for both doctor and nurse visits, in both Access and Interim practices, and for different ethnic groups. Consultation rates have increased overall by between 0.4 and 1.6 consultations per annum (an 11-22 percent increase) in Access practices, and by around 1.7 consultations per annum (a 25 percent increase) for those aged 65 years and over in Interim practices.

- The research also revealed evidence of increased involvement of nurses in the delivery of primary health care services, although this may be due to changes in reporting.
“Overall our findings suggest that the government is generally achieving its aims in primary health care, with lower fees for patients and increasing consultation rates,” said Dr Cumming.

The researchers looked at data covering the period from July 2001, before the Primary Health Care Strategy began to be implemented, to the end of December 2005.

An evaluation of the impact of the Strategy is being led by Dr Jacqueline Cumming, Director of the Health Services Research Centre at Victoria University of Wellington's School of Government. The research is funded by the Health Research Council of New Zealand, the Ministry of Health and the Accident Compensation Corporation.

The evaluation is continuing through until the end of 2008.

The report is available from http://www.vuw.ac.nz/hsrc or from Maggy Hope, maggy.hope@vuw.ac.nz, ph 463 6565.

For more information please contact Dr Jacqueline Cumming on (04) 463 6567 or 027 563 6567, jackie.cumming@vuw.ac.nz