

Letters

Public perceptions of general practice and the allocation of funds

I WRITE in response to the paper, 'How much of Australia's health expenditure is allocated to general practice and primary healthcare?', by Wright et al. This research concluded that 6.8% of the total healthcare spend in Australia went on non-referred services (general practices).

My hypothesis was that GP funding is lower than the general public's perception. To investigate this, I commissioned Roy Morgan to survey a representative sample of 1000 Australian adults with three questions about their perception of general practice care and funding in 2021.

The first question asked, 'how important do you think GPs (general practitioners, sometimes referred to as family doctors) are for the Australian

healthcare system?'. On a Likert scale where 10 is very important, 90.6% of respondents rated GPs as ≥ 8 out of 10. These results suggest that the public hold general practice in high regard.

The second and third questions asked respondents to estimate as a percentage 'how much of their total healthcare needs were looked after by GPs', and 'how much of all healthcare spending do you believe goes on funding GPs and GP practices?', respectively.

For the second question, 64% of respondents estimated that GPs looked after $>50\%$ of their total healthcare needs. For the final question, results showed most (58.3%) respondents estimated general practice funding at between 20% and 40% of total health expenditure. Less than 2% of respondents suggested that GPs receive $<10\%$ of total health funding (Figure 1).

These results confirm a large gap between patient perception and reality

as to the actual level of general practice funding. This information could prove useful in educating the medical profession, the public and our political decision makers on the value and true costs of general practice. Failure to address this misunderstanding may increase the risk of poor policy outcomes for general practice.

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1. Wright M, Versteeg R, van Gool K. How much of Australia's health expenditure is allocated to general practice and primary healthcare? *Aust J Gen Pract* 2021;50(9):673-78. doi: 10.31128/AJGP-11-20-5746.

Reply: Consumer and clinical data needed to guide primary care reform

We thank the author for contributing data and furthering discussion about the allocation of Australia's health expenditure. The author uses market research techniques to understand patient expectations of general practice expenditure and the value of general practice care. These findings are particularly interesting in highlighting the disparity between community expectations of how much of health expenditure is thought to be allocated to general practice (median 30-40%), and the actual expenditure reported in our paper (6.8%).¹

These findings provide support for strengthening Australia's health system through increased focus on primary and preventative care, as proposed in

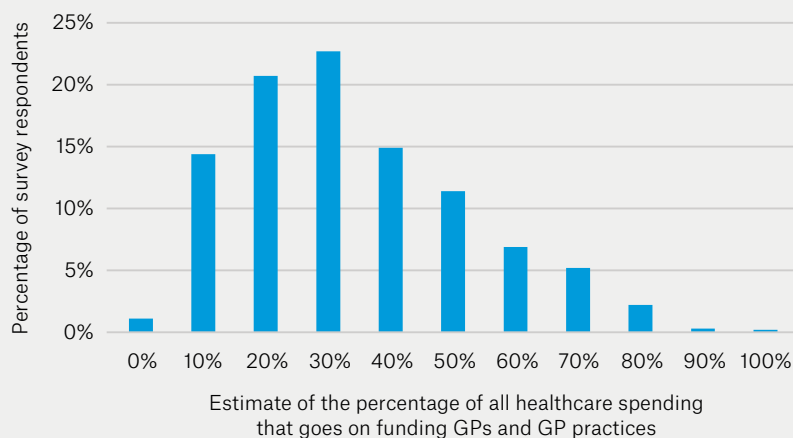


Figure 1. How much of all healthcare spending do you believe goes on funding GPs and general practices?

Australia's 10-Year Primary Health Plan,² and are timely as the Medicare Strengthening Taskforce ('Taskforce') completes its program of work. The Taskforce aims include: 'improving patient access to general practice and GP-led multidisciplinary teams, making primary care more affordable, improving prevention, and reducing pressure on hospitals',³ and these data suggest that increasing general practice funding to support the Taskforce's aims is consistent with community expectations.

The use of market researchers to rapidly access data is innovative and highlights the value of consumer input into health policy decision making, reinforcing the need for sharing of routinely collected data to better understand allocation of health system expenditure. There is an urgent need for systematically including community expectations into the public debate on health system priorities. There has not been such a national discussion about the expectations and priorities of consumers since the National Health and Hospital Reform Commission in 2009.⁴ Perhaps it is timely to re-visit a national conversation around healthcare priorities rather than policy being driven by politics and interest groups.

As the financial impacts of the COVID-19 pandemic and the associated public health response continue to emerge,^{5,6} it is important that opinions of end-users (both consumers and clinicians) are consulted, and community expectation is incorporated in system design and health policy evaluation.

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