Author’s response to reviews

Title: Costs of medicines and health care: a concern for Australian women across the ages

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Author’s response to reviews:

Dr Louisa Gordon,
Section Editor
BMC Health Services Research

Dear Dr Gordon,

Please find attached a revised copy of our manuscript “Costs of medicines and health care: a concern for Australian women across the ages” for publication as a research article in BMC Health Services Research.

Thank you for the opportunity to address the reviewer’s comments and revise our manuscript.

Associate editor’s comments:

1. Overall the paper needs to have in mind the international readership and therefore further clarify health system attributes to Australia in greater detail e.g. ‘bulk billing’.

References to Australian health system attributes have been explained in more detail.

2. Background section of abstract needs aim of study.

Background has been amended to include aims of study.

3. Competing interests: Authors are required to complete a declaration of competing interests.

This was included in our previous cover letter but has now been included in the manuscript.

Reviewer 1 comments (Ian Stewart McRae):

1. The paper is not clear when the surveys were conducted – it is necessary to specify this as factors like increasing/decreasing bulk billing rates and various
policy decisions frame the interpretation of the respondent comments.

A sentence has been added to the Methods section of the paper detailing the time frame for when the surveys were conducted.

2. The actual sample explored is 357 responses of 150,000 or 0.24% of all responses. The authors do not discuss whether the same people report financial problems in more than one survey, which would further reduce the real response rate.

a. The paper should mention whether there is repetition by respondents over time.

b. The paper needs to acknowledge that the responding sample is tiny, and biased towards those with problems.

c. This means broad statements like that on page 17 that “others continue to struggle – the working poor ….” should be qualified. The data shows that this is true of some working poor, but it is not reasonable to generalise to all working poor. Similar statements throughout the paper need to be qualified.

a. There were 319 individuals whose comments were included in the sample, as some women made relevant comments in more than one survey. This information has been added to the abstract and results section of the paper.

b. The discussion section has been amended to more clearly acknowledge the very small sample size, and that comments are biased toward the negative.

c. The discussion regarding the results has been qualified to emphasise the difficulty in generalising from such a small sample.

3. The paper notes (p19) that some specific issues raised by respondents are no longer a concern due to policy changes. One contextual factor not mentioned is that while GP bulk billing rates fell rapidly in the early 2000’s they have been rising overall ever since. While respondents will be concerned about their access to bulk billing at all times, the concerns about declining bulk billing levels should be framed in the context of the time of survey response. If such comments were from the period pre-2003 they fit with the known patterns, if they were post-2003 they are more surprising and in some ways more of a problem to be highlighted.

Additional information has been provided in the Discussion framing the survey responses in the context of the survey administration. The first three surveys of each age cohort were conducted prior to 2003. The fourth and fifth surveys were post-2003. Even the latter two surveys contained some comments regarding lack of bulk-billing services, although it is difficult (due to the small sample size) to determine the extent of the problem.

4. With respect to medical costs, it is remarkable that almost all comments quoted relate to access to general practice rather than specialists or hospital costs which while less common are much higher costs. The authors may wish to comment on this pattern.

The focus of this paper was on the costs of medicines and *related* health care.
There were certainly comments made regarding the costs of specialist care but mostly relating to costs of surgery or other hospital procedures; and concerns that out-of-pocket costs were still occurring despite having private hospital insurance. However, an analysis of these comments was beyond the remit of this paper.

Reviewer 2 comments (Christine Walker):

1. This is a qualitative study of free text comments and I would strongly recommend that the methods be more explicit in this article.

We have amended the Methods section to expand on the qualitative methods used.

2. I think it is a great pity there are no income levels to show the proportion of medicines costs to people’s incomes. If this information was not available it should appear in the limitations section. Similarly if it was available and used in a quantitative study that study should be referenced.

As part of the greater Australian Longitudinal Study of Women’s Health, information about costs of medicines and income levels have been collected. It was beyond the scope of this small research project to assess this information however a reference to another paper with a quantitative assessment of medicines cost and income in the Australian setting was included in this paper (Reference 17 – Kemp et al.).

3. I consider the discussion section could be strengthened. On p15 there is a statement that ‘data show that the decreasing number of bulk-billing practices and out of pocket costs have a detrimental impact.’ This could be cross referenced to other studies showing similar findings. At the same time I believe that at present bulk-billing has actually increased so some reference to the date this statement refers would be a help here.

This comment was also raised by Reviewer 1 and has been addressed above.

4. There is then a reference to ‘groups that might be at particular risk…’. This requires referencing to support the supposition as does the sentence that follows it.

This reference was made in light of the results of our survey. A statement has been made to emphasise that further research is required in this area.

5. On p16 there is a statement that health care costs were a problem despite universal health insurance and government subsidies designed to mitigate the costs. I think these government policies could be briefly described here to assist an international audience who won’t be familiar with the Australian system. Additionally there could be references to other articles that have researched this.

The Australian health care system has been described in more detail in the introduction to the paper, and additional information has been provided in the discussion to assist an international audience.
6. There is also need to reference the ‘working poor’ on page 17 and explain this in the Australian contexts. Further on p17 there is a statement about the ‘user pays’ principle which could be explained in the Australian context to an international audience. The statement that ‘there can be unintended consequences’ should be developed. The statement that families have stress and anxiety should also be developed and referenced as there was little evidence that this was a strong finding in this piece of work.

A reference has been added for the ‘working poor,’ to explain the term in the Australian context. The ‘user pays’ principle has been clarified.

7. Finally I thought the results showed some interesting data on bulk-billing and that this area could be developed in the Discussion section. It was evident in the results that bulk-billing was valued by some and not by others. Bulk-billing might also need to be better described to international readers.

More information has been added to the discussion regarding bulk-billing, and we have attempted to improve the description of bulk-billing in all areas of the paper to help international readers.

We again thank you for the opportunity to revise and re-submit this paper, and look forward to hearing from you regarding this manuscript.

Yours sincerely,
Emily Walkom.