

Evaluation of Cost-consciousness among Primary Health Care Physicians

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Objective: To evaluate the cost-consciousness among primary health care physicians.

Design: Descriptive cross-sectional survey.

Setting: Primary health care, Bahrain.

Method: The study was conducted from 1 to 30 April 2007. Two hundred forty-nine primary health care physicians were surveyed through a self-administered questionnaire, which consisted of two parts. The first part included four questions about personal characteristics and six questions related to practice patterns. The second part was about health care costs, their attitudes regarding the costs of tests and procedures and the importance of out of pocket payments.

Result: One hundred forty-seven (79.5%) agreed that trying to contain costs was their responsibility; 114 (62%) believed that there is too much emphasis on the costs of tests and procedures. One hundred seventy (93%) thought that physicians should take a prominent role in limiting the use of unnecessary tests. Ninety (48.6%) disagreed that physicians are too busy to worry about costs of tests and procedures. One hundred forty-seven (79.5%) disagreed that the cost is only important if the patient has to pay out of pocket and 62 (33.5%) thought it was unfair to ask physicians to be cost-conscious. The cost-consciousness score was higher among family physicians and those who saw fewer patients per day. Personal characteristics did not show any association with the level of cost-consciousness.

Conclusion: The cost-consciousness among primary health care physicians was above average and was higher for those who saw fewer patients per day.