

Higher income earners more likely to get doctors' appointments than lower income people

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People of high socioeconomic status are more likely to be able to access primary care than those of low socioeconomic status, even within a universal health care system in which physicians are reimbursed equally for each patient, found an article published in *CMAJ (Canadian Medical Association Journal)*.

"A person calling a physician's office and asking to be seen as a new primary care patient was more than 50% more likely to be given an appointment if he or she presented as being of high [socioeconomic status](#)," says senior author Dr. Stephen Hwang from the Centre for Research on Inner City Health, Li Ka Shing Knowledge Institute, St. Michael's Hospital, and the Department of Medicine, University of Toronto.

"Because we see this finding in a single-payer universal health insurance system, it provides evidence of discrimination by physicians' offices on the basis of socioeconomic status."

Researchers undertook a randomized controlled audit study to determine whether socioeconomic status as well as health status affected a potential patient's ability to secure an appointment with a primary care physician. They telephoned 568 family physician and [general practitioner](#) offices in Toronto, Ontario, Canada, posing as a bank employee (someone of high socioeconomic status) and a welfare recipient ([low socioeconomic status](#)) with chronic health conditions (diabetes and back pain) or no major conditions. Final data were available from 375 offices; most responses

were from administrative staff.

Canada has a universal [health insurance system](#) in which all patients may receive care, because health care fees are paid through a third party. Inability to pay is not a barrier to care as in some countries where users pay for health care. However, about 15% of Canadians do not have a regular medical doctor; a key reason is that physicians are not accepting new patients.

In this study, people of high socioeconomic status were more likely than people of low socioeconomic status to receive an appointment offer (23% v. 14%) or an offer of an appointment, screening visit or place on a waiting list (37% v. 24%). On the positive side, people with chronic health conditions were more likely to receive appointment offers than people without these conditions (24% v. 13%).

"Although it is reassuring that patients with [chronic health conditions](#) received prioritized access to primary care, our results suggest a need for greater efforts to ensure that physicians and their office staff do not discriminate against people of low socioeconomic status," state the authors.

More information: www.cmaj.ca/lookup/doi/10.1503/cmaj.121383

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