

Implementing pay-for-performance in Australian primary care: lessons from the United Kingdom and the United States

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TO THE EDITOR: In their paper, Campbell and colleagues list the potential pitfalls of introducing pay-for-performance into Australian primary care.¹ They emphasise that, in Australia, the electronic medical records used in general practice would not support the introduction of a scheme such as the Quality and Outcomes Framework (QOF) that is in place in the United Kingdom. In 2009, we demonstrated that it was quite possible to apply a QOF in a large Australian

general practice by adapting the in-built search facility of a commonly used medical records program.² We concluded that the introduction of a QOF in Australia would drive up the quality of our care.

The non-clinical standards of a QOF are already similar to those set by the Royal Australian College of General Practitioners for accreditation and could be readily achieved.

Campbell and colleagues suggest that the QOF is expensive and without proven benefits.¹ This is incorrect. As predicted, the QOF has not only led to a reduction in cardiovascular disease events, but the benefit is greatest in the lowest socioeconomic groups.³ It is now possible to measure the cost effectiveness of a QOF, which is likely to show that it pays for itself by way of reduced morbidity and health service costs.⁴ Rather than argue for general practitioner remuneration based on pay-for-performance to be less than 20%, one should err on the side of caution, which recognises that 20% has ensured a massive public health gain for the British population.

Now that 95% of GPs use computers, at least for prescribing,⁵ it is plausible that an Australian QOF could be developed, but pay-for-performance may need to include some pay-for-data incentives.

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1 Campbell SM, Scott AS, Parker RM, et al. Implementing pay-for-performance in Australian primary care: lessons from the United Kingdom and the United States. *Med J Aust* 2010; 193: 408-411.

2 Elliot-Smith A, Morgan MA. How do we compare? Applying UK pay for performance indicators to an Australian general practice. *Aust Fam Physician* 2010; 39: 43-48.

3 Kiran T, Hutchings A, Dhalla I, et al. The association between quality of primary care, deprivation and cardiovascular outcomes: a cross-sectional study using data from the UK Quality and Outcomes Framework. *J Epidemiol Community Health* 2010; 64: 927-934.

4 Dunbar JA. The quality and outcomes framework reduces disparities in health outcomes for cardiovascular disease. *J Epidemiol Community Health* 2010; 64: 841-842.

5 Henderson J, Britt H, Miller G. Extent and utilisation of computerisation in Australian general practice. *Med J Aust* 2006; 185: 84-87. □