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Conference Abstract

## Access points to the different level of health care in a country without a gatekeeping system; numbers and reasons

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## Abstract

**Purpose and Theory:** The challenges for health care systems are evident in terms of healthy life expectancy, health equity, and costs. Currently, the most promising way to face these challenges seems to strengthen the PHC sector. It was the aim of this study to assess the access points towards the different levels of care in a country without gate-keeping function.

**Methods:** The database used for this analysis was the Austrian Health Interview Survey 2006-07, with data from 15,474 people. Statistical analyses included descriptive statistics as well as multivariate logistic regression models.

**Findings:** 78.8% of the participants consulted a GP, 67.4% a specialist, 18.6% visited an outpatient department, and 22.8% had a hospital stay at least once. Overall, 15.1% visited a specialist, 8.5% an outpatient department and 8.1% a hospital directly without GP consultation. One of the main reasons for direct specialist use was a preventive check-up visit.

**Discussion:** The overall and direct access rates for specialists are high without reflecting that high utilisation in a higher healthy life expectancy or better health equity compared to EU countries with gate-keeping system. The findings point into the direction of a benefit through a structurally supported advocacy role for primary health care professionals.

**Keywords:**

**health care utilisation, gate-keeping system, demographic predictors, primary health care, austria**

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