



中華人民共和國香港特別行政區政府總部食物及衛生局

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The Government of the Hong Kong Special Administrative Region
The People's Republic of China

Our ref: FH/H/1/5 Pt. 102

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3 November 2009

Ms Mary So
Clerk to Panel
Panel on Health Services
Legislative Council
8 Jackson Road
Central

Dear Ms So,

Obstetric Service Arrangements for Non-eligible Persons

I refer to item 1 of Appendix VI to LC Paper No. CB(2)11/09-10. At the Panel meeting held on 30 April 2007, Members discussed the captioned issue and the Administration was requested to provide a written response to the following motion passed by the Panel –

“That this Panel expresses regret that the new obstetric package charge (\$39,000/\$48,000) implemented by the Health, Welfare and Food Bureau and the Hospital Authority in early February this year for Mainland women giving birth in public hospitals has failed to take into account its impact on Hong Kong families (i.e. those with the father being a Hong Kong resident and the mother a Two-way Permit holder), and urges the Government to exempt these families from the new fee charging policy.”

The Administration was also requested to include in its written response to the Panel the suggestion of refunding fees paid at the time of booking for public obstetric services if the delivery did not take place eventually due to valid reasons such as a miscarriage.

Policy on obstetric services for Non-eligible persons (NEPs)

At present, the public healthcare services in Hong Kong are available to Hong Kong residents at heavily subsidized level at about 95%. To ensure rational use of our finite public resources, only Eligible Persons (EPs) (i.e. holders of Hong Kong Identity Card and children who are Hong Kong residents and under 11 years of age) are eligible for public healthcare services at the highly subsidized rates. As for Non-eligible Persons (NEPs) (i.e. persons who are not holders of Hong Kong Identity Cards and children under 11 years of age who are not Hong Kong residents), have to pay the specified NEP charges for access to our public healthcare services. The present definition of EPs and NEPs, which was adopted in 2003 having regard to recommendation made by the Task Force on Population Policy, applies to the respective charges for all public healthcare services, including obstetric service.

It is our policy to ensure that Hong Kong residents are given proper and adequate obstetric services. In recent years, there was rapid increase in the demand for obstetric services in Hong Kong by non-Hong Kong resident women (including Mainland women), causing tremendous pressure on the capacity of obstetric service in public hospitals and affecting such services to Hong Kong resident women. It was also noted that there was a large number of non-Hong Kong resident women seeking emergency admission to public hospitals through the Accident and Emergency Departments (A&EDs) for delivery. To tackle the problem, the Hospital Authority (HA) has implemented since 1 February 2007 revised the arrangements for obstetric service for NEPs to ensure that Hong Kong resident women are given priority for proper obstetric service. The new arrangements also seek to limit the number of NEPs coming to Hong Kong to give births to a level that can be supported by our public healthcare system, and to deter their dangerous behaviour of seeking emergency hospital admissions through A&EDs shortly before labour.

Under the revised arrangements, all NEPs who wish to seek obstetric service in public hospitals have to make prior booking and pay for a package charge of \$39,000, which covers one antenatal check in specialist out-patient clinic, the delivery and the first three days and two nights stay for the delivery. For cases of delivery by emergency admission through the A&EDs, the charge would be \$48,000. This charging policy applies to all NEPs regardless of whether their husbands are Hong Kong residents. HA would reserve sufficient places for EPs to ensure that they have priority over NEPs in the booking of obstetric services, and HA would only accept booking from NEP when spare service capacity is available.

The revised arrangements have been effective in meeting our policy objectives as mentioned in paragraph 3 above. By comparing the first eight months of 2009 with the same period in 2006, the number of local pregnant women giving birth in public hospitals has increased by 8.7% while the number of non-local pregnant women giving birth in public hospitals has decreased by 12.8%. Most notably, the

number of deliveries by non-local pregnant women in public hospitals through the A&EDs has decreased significantly by 92.2%.

We consider that all NEPs (including those whose spouses are Hong Kong residents) should continue to be subject to the same NEP rates for relevant services in our public healthcare system. The suggestion to exempt the Mainland women whose spouse is Hong Kong resident from the NEP obstetric charges would re-open the avenue for NEPs to come to Hong Kong to seek access to obstetric service in public hospitals thereby competing for the services for Hong Kong resident women. Taking into account the Government's policy objectives of the obstetric service charge arrangements as detailed above; the read-across implications on other heavily subsidized public services; and the need to ensure rational use of our finite public resources, on balance, the Administration considers that the existing obstetric service charge arrangements for NEPs remains appropriate.

As for the Panel's suggestion concerning the refund arrangement, we have provided a written response on 5 December 2007 and we have nothing further to add.

Yours sincerely,



(Kirk Yip)

for Secretary for Food and Health

c.c. Hospital Authority