

立法會
Legislative Council

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Subcommittee to Study Issues Relating to Mainland-HKSAR Families

**Minutes of the 22nd meeting
held on Tuesday, 22 May 2012, at 8:30 am
in Conference Room 1 of the Legislative Council Complex**

Members present : Hon LEE Cheuk-yan (Chairman)
Hon LEUNG Yiu-chung (Deputy Chairman)
Hon Miriam LAU Kin-ye, GBS, JP
Hon Audrey EU Yuet-mee, SC, JP
Hon WONG Kwok-hing, MH
Prof Hon Patrick LAU Sau-shing, SBS, JP
Hon Cyd HO Sau-lan
Hon CHEUNG Kwok-che
Hon WONG Sing-chi

Members absent : Hon Albert HO Chun-yan
Hon TAM Yiu-chung, GBS, JP
Hon Ronny TONG Ka-wah, SC
Hon CHAN Hak-kan
Hon WONG Yuk-man

Public Officers attending : Item I

Miss Janice TSE Siu-wa, JP
Deputy Secretary for Food and Health (Health) 1
Food and Health Bureau

Dr Tina MOK
Principal Medical and Health Officer (1)
Department of Health

Dr K H LEE
Chief Manager (Cluster Performance)
Hospital Authority

Attendance by invitation : Item I

Mainland - Hong Kong Families Rights Association

Mr MUNG Wai-sing
Member

關注中港家庭權利聯席

Mr TSANG Koon-wing
Member

Clerk in attendance : Miss Betty MA
Chief Council Secretary (2) 4

Staff in attendance : Ms Candice LAM
Senior Council Secretary (2) 4

Miss Maggie CHIU
Legislative Assistant (2) 4

Action

- I. Use of local obstetric services by Mainland women whose spouses are Hong Kong residents**
[LC Paper Nos. CB(2)2027/11-12(01), CB(2)2030/11-12(01) and CB(2)2092/11-12(01)]

The Subcommittee deliberated (index of proceedings attached at **Annex**).

2. Two deputations attending the meeting expressed grave concern about the latest arrangements for the use of local obstetric services by Mainland pregnant women whose husbands were Hong Kong residents. They pointed out that Mainland expectant mothers whose husbands were Hong Kong

Action

residents having been pregnant for over 28 weeks were denied entry if they could not produce proof of booking arrangements with a local hospital. In addition, the arrangement for Mainland pregnant women whose husbands were Hong Kong permanent residents to make delivery bookings in private hospitals in 2012 was not applicable to those whose husbands had resided in Hong Kong for less than seven years.

3. Deputy Secretary for Food and Health (Health) 1 ("DS(H)1") said that the Administration understood that some Mainland pregnant women whose spouses were Hong Kong permanent residents hoped to give birth in Hong Kong but were unable to make their bookings in hospitals in 2012. The special arrangement could help those pregnant women who were already in Hong Kong to make bookings with private hospitals, so as to prevent them from seeking emergency admission through the Accident and Emergency Department ("AED") of public hospitals for delivery. DS(H)1 further said that Mainland expectant mothers having been pregnant for over 28 weeks were denied entry into Hong Kong if they could not produce proof of booking arrangements with a local hospital. This would deter Mainland pregnant women from seeking emergency deliveries through AEDs shortly before labour. Moreover, it was difficult to ascertain the marriage status of Mainland pregnant women at boundary control points.

4. Members noted that the number of children born to Mainland women and fathered by Hong Kong residents was rather stable and stood at some 6 000 cases each year, and that such demand for local obstetric services could be fully absorbed by public hospitals.

5. DS(H)1 advised that in the light of the upward trend for use of public obstetric services by local pregnant women, there was a need to limit the number of non-local women to give births in Hong Kong at a level that could be supported by the public healthcare system. DS(H)1 further advised that to assist Mainland pregnant women whose husbands were Hong Kong permanent residents to give birth in Hong Kong in 2012 if they were already in Hong Kong, the Administration had reached consensus with some private hospitals to provide obstetric services for these women. With private hospitals stopping the admission of Mainland pregnant women whose husbands were non-Hong Kong residents for delivery in 2013, the Administration believed that there should be adequate manpower capacity and facilities for private hospitals to take care of the Mainland wives of Hong Kong residents.

6. Members generally considered the arrangement for 2013 acceptable, but they remained concerned that the assistance provided for Mainland

Action

pregnant women whose husbands were Hong Kong permanent residents to make delivery bookings in 2012 should be extended to those whose husbands had resided in Hong Kong for less than seven years. Members also took the view that Mainland women whose spouses were Hong Kong residents should be entitled to use public obstetric services as they were members of Hong Kong families, and therefore they should not be regarded as non-local women under the existing arrangement to control the use of obstetric service by non-local women. Existing policies in respect of the use of obstetric services were punitive and discriminatory against Mainland spouses of Hong Kong residents, as well as detrimental to family unity and social integration.

II. Any other business

7. The Chairman said that the Chief Secretary for Administration should be invited to attend the next Subcommittee meeting to be held in June 2012 to discuss the population policy and issues relating to Mainland-HKSAR families.

8. Ms Cyd HO suggested that the Head of the Chief Executive-elect's office be invited to attend the next meeting to explain the proposal of the re-organization of the Government Secretariat in relation to the population policy portfolio having impact on Mainland-HKSAR families.

9. There being no other business, the meeting ended at 10:42 am.

**Proceedings of the 22nd meeting of the
Subcommittee to Study Issues Relating to Mainland-HKSAR Families
on Tuesday, 22 May 2012, at 8:30 am
in Conference Room 1 of the Legislative Council Complex**

Time marker	Speaker(s)	Subject(s)	Action required
<i>Agenda item I – Use of local obstetric services by Mainland women whose spouses are Hong Kong residents</i>			
000407 - 000635	Chairman	Opening remarks.	
000636 - 001217	Administration Chairman	Briefing by the Administration on the use of obstetric services by Mainland pregnant women whose husbands were Hong Kong permanent residents. [LC Paper No. CB(2)2027/11-12(01)]	
001218 - 001619	Mainland - Hong Kong Families Rights Association Chairman	Presentation of views as detailed in the submission. [LC Paper No. CB(2)2092/11-12(01)] (a) the obstetric service charges of private hospitals were too expensive to be affordable by most cross-boundary families; (b) Mainland expectant mothers whose husbands were Hong Kong residents having been pregnant for over 28 weeks were denied entry if they could not produce proof of booking arrangements with a local hospital; (c) the special arrangement for Mainland pregnant women whose husbands were Hong Kong permanent residents to make delivery bookings in private hospitals in 2012 was not applicable to those whose husbands had resided in Hong Kong for less than seven years; (d) delivery quota to use obstetric services at public hospitals should be allocated to Mainland women whose husbands were Hong Kong residents in 2013; and (e) high-risk pregnancy cases should be admissible to public hospitals.	
001620 - 002202	關注中港家庭權利聯席 Chairman	Presentation of views - (a) a few dozen cases of Mainland pregnant women whose husbands were Hong Kong husbands could not secure delivery bookings at private hospitals due to various reasons. The Administration	

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		<p>should require private hospitals to enhance the transparency of the availability of delivery places;</p> <p>(b) consideration should be given to allowing Mainland women whose husbands were Hong Kong residents having been pregnant over 28 weeks but had not yet made delivery bookings to enter Hong Kong and have delivery in Hong Kong;</p> <p>(c) the Administration to explain explicitly whether Mainland pregnant women whose husbands had resided in Hong Kong for less than seven years were eligible to use local obstetric services;</p> <p>(d) the Administration should, in working out the future arrangement for the use of local obstetric service, allow Mainland pregnant women whose husbands were Hong Kong residents to make their own choice to have their delivery in private or public hospitals; and</p> <p>(e) the Administration should review the eligibility of Mainland spouses of Hong Kong residents for subsidised medical services.</p>	
002203 - 003012	Administration Chairman	<p>Advice of the Administration -</p> <p>(a) although about 21% of booked delivery cases with HA hospitals would not turn up, it was anticipated that the number of local pregnant women giving birth at public hospitals in 2013 would still rise to 41 000. Coupled with about 2 000 delivery cases admitted via the Accident and Emergency Departments ("AEDs") of public hospitals, there would be no spare capacity of public obstetric services to accept delivery bookings by Mainland pregnant women;</p> <p>(b) it understood that some Mainland pregnant women whose spouses were Hong Kong permanent residents hoped to give birth in Hong Kong but were unable to make their bookings in hospitals in 2012. As they had been in Hong Kong, the special arrangement for them to make bookings with private hospitals would prevent them from seeking emergency admission through AED for delivery; and</p>	

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		<p>(c) Mainland expectant mothers having been pregnant for over 28 weeks were denied entry into Hong Kong if they could not produce proof of booking arrangements with a local hospital. This would deter Mainland pregnant women from seeking emergency deliveries through AEDs shortly before labour. Moreover, it was difficult to ascertain the marriage status of Mainland pregnant women at boundary control points.</p>	
003013 - 003852	Mr WONG Kwok-hing Chairman Administration	<p>Views of Mr WONG Kwok-hing -</p> <p>(a) Mainland pregnant women whose husbands were Hong Kong residents should enjoy the same as local women in using obstetric service;</p> <p>(b) discretion should be given to allowing some 10 cases of Mainland women having been pregnant over 28 weeks with Hong Kong resident husbands to enter into Hong Kong and make bookings for obstetric services; and</p> <p>(c) it was unfair to restrict Mainland pregnant women whose Hong Kong husbands had resided in Hong Kong for less than seven years from making bookings in private hospitals in 2013.</p> <p>Advice of the Administration -</p> <p>(a) non-local pregnant women who intended to have deliveries in Hong Kong were required to undergo antenatal checkups at an appropriate stage. To allow Mainland women having been pregnant for over 28 weeks to enter into Hong Kong to give birth would pose to these women additional risks associated with travelling; and</p> <p>(b) the policy to define eligible persons ("EPs") and non-eligible persons ("NEPs") was necessary to ensure that the heavily subsidised healthcare services was properly utilised and priority should be given to local people, instead of merely controlling the use of obstetric services by Mainland women. A change to the definition of EPs would have read-across implications on other heavily subsidised</p>	

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		healthcare services.	
003853 - 004843	Mr CHEUNG Kwok-che Chairman Administration	<p>Views of Mr CHEUNG Kwok-che -</p> <p>(a) Mainland pregnant women with Hong Kong husbands intended to give birth in Hong Kong just for the sake of family unity. If these women were not allowed to give birth in Hong Kong, this was not conducive to family reunion and early integration into the community; and</p> <p>(b) there was a consensus in the community that the Government should provide assistance to Mainland pregnant women with Hong Kong husbands to give birth in Hong Kong. If these women could provide documents to prove their identity and marriage relationship, they should be allowed to make delivery bookings in Hong Kong, even though they had been pregnant for over 28 weeks and were staying on the Mainland.</p> <p>The Administration's response -</p> <p>(a) given that the waiting time for Mainland spouses of Hong Kong residents under the One Way Permit ("OWP") system had been shortened to around four years, children born to these parents and resided on the Mainland might come to Hong Kong together with their mothers when the latter had obtained approval under the OWP system;</p> <p>(b) it was difficult to verify the identity and marriage status of Mainland pregnant women at border control points; and</p> <p>(c) noting that some Mainland pregnant women whose husbands were Hong Kong permanent residents hoped to give birth in Hong Kong but were unable to make their bookings in hospitals in 2012, the Administration had reached consensus with some private hospitals to provide obstetric services for these women.</p>	
004844 - 005307	Mr WONG Sing-chi Chairman Administration	Views of Mr WONG Sing-chi that the Administration should refine the existing policy on the use of local obstetric service by non-local women with a view to allowing Mainland pregnant women whose husbands were Hong Kong residents to give birth in Hong Kong.	

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		Views of the Chairman that the issues of concerns raised by members and deputations should be examined from the perspective of the population policy.	
005308 - 010202	Ms Miriam LAU Chairman Administration	<p>Views of Ms Miriam LAU -</p> <p>(a) the number of children born to Mainland women fathered by Hong Kong residents remained stable in the region of 6 000 annually. It was considered that the impact on subsidised medical services would be minimal even if these women were allowed to give birth in Hong Kong;</p> <p>(b) the Administration should review the existing policy on the use of obstetric service by non-local women and make administrative arrangement to allow Mainland pregnant women whose husbands were Hong Kong residents to give birth in Hong Kong; and</p> <p>(c) the Administration should consider abolishing the policy of granting right of abode to children born to parents who were non-local residents.</p> <p>The Administration's advice -</p> <p>(a) the special arrangement sought to facilitate those Mainland pregnant women whose husbands were Hong Kong permanent residents and who hoped to give birth in Hong Kong but were unable to make their bookings in hospitals in 2012, under which these women could make delivery bookings with private hospitals;</p> <p>(b) with private hospitals stopping the admission of Mainland pregnant women whose husbands were non-Hong Kong residents for delivery in 2013, there should be adequate manpower capacity and facilities for private hospitals to take care of the Mainland wives of Hong Kong residents;</p> <p>(c) the Administration had no statutory power to regulate the charges of private hospitals, but private hospitals were required to have a schedule of charges for reference by the public;</p>	

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		<p>(d) the fees for non-booked delivery via AEDs by non-local pregnant women had been raised to deter these women from such risky behaviour and from bypassing the booking system; and</p> <p>(e) the mechanism to verify the identity and marriage status of Mainland pregnant women was very complex, it was difficult to be completed at border control points.</p>	
010203 - 011743	Ms Cyd HO Chairman Administration	<p>Views of Ms Cyd HO -</p> <p>(a) the total number of babies born to Mainland wives of Hong Kong husbands was some 6 000 annually, such demand for local obstetric services could be fully absorbed;</p> <p>(b) many studies on the long-term impact of antenatal check on the health conditions of mothers and their babies showed that the healthcare cost for those expectant women who had not undergone antenatal check was higher than those having antenatal check;</p> <p>(c) the revised fee of \$90,000 for emergency delivery had imposed great financial burden on families of Mainland expectant mothers whose husbands were Hong Kong residents as most of them were grassroot families; and</p> <p>(d) the Administration should consider buying obstetric services from private hospitals to provide assistance to those Mainland wives of Hong Kong husbands who were unable to make delivery bookings.</p> <p>The Administration's advice -</p> <p>(a) the revised fee of \$90,000 for non-booked delivery via AEDs was applicable to all non-local women irrespective of whether their husbands were Hong Kong residents;</p> <p>(b) the policy on the use of local obstetric service was to ensure that the public healthcare services could meet local demand; and</p> <p>(c) Mainland women might make delivery bookings in private hospitals in 2012, and there should be adequate manpower</p>	

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		capacity and facilities for private hospitals to take care of the Mainland wives of Hong Kong residents in 2013.	
011744 - 013421	Chairman 關注中港家庭權利聯席 Administration	<p>Views of the Chairman -</p> <p>(a) to allow the Mainland expectant mothers with Hong Kong husbands to deliver in local hospitals would deter them from seeking emergency delivery and save future social cost incurred from healthcare services as well as facilitate their early integration; and</p> <p>(b) the Administration should provide assistance to Mainland pregnant women whose husbands were Hong Kong residents by purchasing obstetric service from private hospitals or topping up the differential fees between the charges of private hospitals and the obstetric service package charge at public hospitals.</p> <p>At the invitation of the Chairman, Mr TSANG of 關注中港家庭權利聯席 gave a brief account of the deputation's meeting with the Chief Executive-elect on the use of local obstetric services by Mainland women whose husbands were Hong Kong residents.</p> <p>Mr TSANG appealed to the Administration to -</p> <p>(a) formulate a long-term policy to cater the need of Mainland pregnant women whose husbands were Hong Kong residents in using local obstetric services; and</p> <p>(b) provide assistance to some 80 to 180 cases of Mainland expectant mothers with Hong Kong husbands, irrespective of whether they were permanent residents, who were unable to make delivery bookings following HA's decision to stop accepting bookings.</p> <p>Enquiry of the Chairman why the Administration had provided assistance to those Mainland pregnant women whose husbands were Hong Kong permanent residents to make delivery bookings in 2012, but not those whose husbands had resided in Hong Kong for less than seven years.</p> <p>The Administration's advice -</p>	

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		<p>(a) the special arrangement sought to provide assistance to those Mainland pregnant women with Hong Kong permanent resident husbands who had stayed in Hong Kong and chose to have their delivery in Hong Kong but were unable to make delivery bookings. Mainland women whose husbands were Hong Kong permanent residents could make delivery bookings with private hospitals under the existing arrangements if they were already in Hong Kong;</p> <p>(b) to prevent others from taking advantage of the special arrangement, all Mainland pregnant women whose husbands were Hong Kong permanent residents and who intended to give birth in Hong Kong would be required to submit supporting documents to verify their identity when making bookings; and</p> <p>(c) the number of live births born in Hong Kong to Mainland women had all along been grouped under two categories, i.e. Mainland women whose spouses were Hong Kong permanent residents and those whose spouses were not.</p>	
013422 - 015614	Mr LEUNG Yiu-chung Administration Chairman	<p>Concerns of Mr LEUNG Yiu-chung -</p> <p>(a) the practical difficulties encountered to differentiate Mainland pregnant women whose husbands were Hong Kong residents from those whose husbands were non-local residents;</p> <p>(b) Mainland pregnant women whose husbands were Hong Kong residents should be allowed to use public obstetric services as these women and their children would eventually settle in Hong Kong;</p> <p>(c) it was unfair to Hong Kong residents who were non-civil servants as Mainland spouses of civil servants were allowed to use public service as EPs; and</p> <p>(d) the Administration should plan ahead to ensure sufficient obstetric service provision for those in need.</p> <p>The Administration's advice -</p> <p>(a) in the light of the upward trend for use of</p>	

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		<p>public obstetric service by local pregnant women, there was a need to limit the number of NEPs to give birth in Hong Kong at a level that could be supported by the public healthcare system. The capacity of public obstetric services available had already taken into account the double booking of delivery places at both private and public hospitals by local women;</p> <p>(b) the Administration had allocated additional resources for increasing the manpower for public obstetric services;</p> <p>(c) the Administration would further consider the arrangement for making delivery bookings in 2013 by Mainland pregnant women whose husbands were Hong Kong residents who had resided in Hong Kong for less than seven years;</p> <p>(d) it was difficult to verify the identity and marriage status of Mainland pregnant women at boundary control points; and</p> <p>(e) some 100 cases of Mainland spouses of Hong Kong civil servants had used subsidised obstetric service in a year as part of the civil service medical benefits. Civil servants who gave false information would be subject to civil service disciplinary actions.</p>	
015615 - 020511	Mr CHEUNG Kwok-che Chairman Administration	<p>Concerns raised by Mr CHEUNG Kwok-che -</p> <p>(a) whether the Administration would allocate the unused delivery bookings in public hospitals to Mainland pregnant women whose husbands were Hong Kong residents and were unable to secure delivery bookings; and</p> <p>(b) whether the Administration would lower the obstetric service package charge of \$39,000 for NEPs and the fee of \$90,000 for emergency delivery by NEPs.</p> <p>The Administration's response -</p> <p>(a) the existing fees and measures in respect of the use of obstetric services by NEPs would remain unchanged in order to control the effective use of public healthcare resources;</p>	

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		<p>(b) the fees for non-booked delivery via AEDs by non-local pregnant women had been raised to \$90,000 to deter these women from engaging in such risky behaviour and from bypassing the booking system; and</p> <p>(c) as local women could make delivery bookings with public hospitals at anytime, it was difficult to estimate the number of unused places available for Mainland women whose husbands were Hong Kong residents.</p>	
020512 - 020935	關注中港家庭權利聯席 Chairman	<p>Supplementary views of 關注中港家庭權利聯席 -</p> <p>(a) the Administration should allocate more resources for public obstetric services;</p> <p>(b) the special arrangement for Mainland pregnant women whose husbands were Hong Kong permanent residents to make delivery bookings in 2012 should be extended to those whose Hong Kong husbands had resided in Hong Kong for less than seven years;</p> <p>(c) private hospitals might further increase obstetric service fees after the coming into force of the new arrangement of Mainland women whose husbands were non-Hong Kong residents were not allowed to make delivery bookings in 2013; and</p> <p>(d) the fee revision for emergency delivery via AEDs was considered effective in deterring non-local pregnant women from seeking emergency admission for delivery to bypass the booking system. It was envisaged the number of births by non-local pregnant women whose husbands were non-Hong Kong residents was decreasing.</p> <p>Views of the Chairman -</p> <p>(a) Mainland pregnant women whose husbands were Hong Kong residents were entitled to give birth in Hong Kong if they so wished; and</p> <p>(b) the Administration should formulate measures to address the imminent problems faced by Mainland pregnant</p>	

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		women with Hong Kong husbands - (i) allowing those having been pregnant over 28 weeks and were staying on the Mainland to make delivery bookings; (ii) the special arrangement for making delivery bookings in 2012 should be extended to those whose husbands had resided in Hong Kong for less than seven year; and (iii) taking care of high-risk pregnancy cases by public hospitals.	
<i>Agenda item II – Any other business</i>			
020936 - 021141	Chairman Ms Cyd HO	Date of next meeting. Meeting arrangements for the next meeting.	