

**For information
on 29 June 2009**

**Subcommittee to Study Issues Relating to Mainland-HKSAR
Families**

Updates of Obstetric Service Arrangements for Non-eligible Persons

PURPOSE

This paper provides Members with an update on the implementation of the obstetric service arrangements since 1 February 2007 for Non-eligible Persons (NEPs)¹.

BACKGROUND

2. To tackle the problem of rapid increase in the demand for obstetric services in Hong Kong by non-local women (including those from the Mainland) in recent years, the Hospital Authority (HA) has implemented since 1 February 2007 revised arrangements for obstetric service for NEPs. These include the setting up of a booking system in public hospitals for the use of such service, and the revision of the service package charge from the original \$20,000 to \$39,000 for booked cases and to \$48,000 for those cases that seek hospital admission without prior booking. Other measures, including the setting up of booking system in private hospitals and the implementation of complementary immigration measures by the Immigration Department, were also introduced since 1 February 2007.

3. The objectives of the arrangements are to:

¹ “NEPs”, for the purpose of subsidised public medical services, means persons who are not holders of Hong Kong Identity Card issued under the Registration of Persons Ordinance (Cap 177) or children under 11 years of age who are not Hong Kong residents.

- (a) ensure that local pregnant women are given proper obstetric services and priority to use such services;
- (b) limit the number of non-local pregnant women coming to Hong Kong to give births to a level that can be supported by our healthcare system; and
- (c) deter dangerous behaviour of non-local pregnant women in seeking emergency hospital admissions through Accident and Emergency Departments (A&EDs) shortly before labour.

THE OBSTETRIC SERVICE ARRANGEMENTS FOR NEP

4. Under the arrangements, all non-local pregnant women who wish to give birth in Hong Kong are required to make prior booking with a private or public hospital in Hong Kong for the necessary inpatient obstetric services. HA will reserve sufficient places for local pregnant women to ensure that they have priority over NEP in the booking of obstetric services. If extra places are available, HA will accept booking from non-local pregnant women and issue confirmation certificates upon their payment of the booking fees. However, once the service capacity is reached, HA will stop making bookings for non-local pregnant women. Similarly, all private hospitals offering obstetric services will issue a booking confirmation certificate to pregnant women who have secured a booking and paid a deposit for the necessary inpatient services.

5. As non-local pregnant women are only allowed to book obstetric services at public hospitals when service capacity is available, the booking system has effectively ensured that local pregnant women will be given priority in receiving services in public hospital.

UPDATES ON THE IMPLEMENTATION OF THE ARRANGEMENTS

6. Since the implementation of the arrangements for obstetric services for NEPs with effect from February 2007, there has been steady increase of local pregnant women giving birth in public hospitals whilst

the number of non-local pregnant women giving birth in public hospitals, through the A&EDs has continued to decrease. For the first 5 months of 2009, the number of local pregnant women giving birth in public hospitals has increased by 10.8% as compared to corresponding period in 2006; while the number of non-local pregnant women giving birth in public hospital has decreased by 9.3% as compared to corresponding period in 2006. The number of deliveries by non-local pregnant women in public hospitals through the A&EDs has continued to decrease significantly by 91.6% when compared to corresponding period in 2006.

7. The obstetric service package charge for NEPs in public hospitals is being challenged in two ongoing applications for judicial review. The Court of First Instance dismissed the first application in the judgment handed down on 17 December 2008. The applicants have lodged an appeal against the judgment and the hearing of the appeal will take place in March 2010. The second application for judicial review will be heard before the Court of First Instance in September 2009. As the above judicial review proceedings are ongoing, we would not make any comments on the issue involved at this stage.

8. It remains our policy to ensure that local pregnant women are given proper obstetric services and the priority to use such services. HA will continue to closely monitor the demand and the use of obstetric services in public hospitals and will continue to provide such services to non-local pregnant women subject to service capacity and the relevant arrangements.

ADVICE SOUGHT

9. Members are invited to note the content of the paper.

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