立法會 Legislative Council

LC Paper No. FC304/15-16 (These minutes have been seen by the Administration)

Ref: FC/1/1(24)

Finance Committee of the Legislative Council

Minutes of the 52nd meeting held at Conference Room 1 of the Legislative Council Complex on Saturday, 19 March 2016, at 2:30 pm

Members present:

Hon CHAN Kin-por, BBS, JP (Chairman)

Hon CHAN Kam-lam, SBS, JP (Deputy Chairman)

Hon Albert HO Chun-yan

Hon LEE Cheuk-yan

Hon LEUNG Yiu-chung

Hon Emily LAU Wai-hing, JP

Hon TAM Yiu-chung, GBS, JP

Hon Abraham SHEK Lai-him, GBS, JP

Hon Tommy CHEUNG Yu-yan, GBS, JP

Hon WONG Kwok-hing, BBS, MH

Prof Hon Joseph LEE Kok-long, SBS, JP, PhD, RN

Hon Jeffrey LAM Kin-fung, GBS, JP

Hon Andrew LEUNG Kwan-yuen, GBS, JP

Hon WONG Ting-kwong, SBS, JP

Hon Cyd HO Sau-lan, JP

Hon Starry LEE Wai-king, JP

Hon CHAN Hak-kan, JP

Dr Hon Priscilla LEUNG Mei-fun, SBS, JP

Hon WONG Kwok-kin, SBS

Hon IP Kwok-him, GBS, JP

Hon Paul TSE Wai-chun, JP

Hon LEUNG Kwok-hung

Hon Albert CHAN Wai-yip

Hon WONG Yuk-man

Hon Claudia MO

Hon NG Leung-sing, SBS, JP

Hon Steven HO Chun-yin, BBS

Hon Frankie YICK Chi-ming, JP

Hon WU Chi-wai, MH

Hon YIU Si-wing, BBS

Hon Gary FAN Kwok-wai

Hon MA Fung-kwok, SBS, JP

Hon Charles Peter MOK, JP

Hon CHAN Chi-chuen

Hon CHAN Han-pan, JP

Dr Hon Kenneth CHAN Ka-lok

Hon CHAN Yuen-han, SBS, JP

Hon LEUNG Che-cheung, BBS, MH, JP

Hon Alice MAK Mei-kuen, BBS, JP

Dr Hon KWOK Ka-ki

Hon KWOK Wai-keung

Hon Christopher CHEUNG Wah-fung, SBS, JP

Dr Hon Elizabeth QUAT, JP

Hon Martin LIAO Cheung-kong, SBS, JP

Hon POON Siu-ping, BBS, MH

Hon TANG Ka-piu, JP

Dr Hon CHIANG Lai-wan, JP

Hon CHUNG Kwok-pan

Hon Alvin YEUNG Ngok-kiu

Members absent:

Hon James TO Kun-sun

Dr Hon LAU Wong-fat, GBM, GBS, JP

Hon Frederick FUNG Kin-kee, SBS, JP

Hon Vincent FANG Kang, SBS, JP

Dr Hon LAM Tai-fai, SBS, JP

Dr Hon LEUNG Ka-lau

Hon CHEUNG Kwok-che

Hon Mrs Regina IP LAU Suk-yee, GBS, JP

Hon Alan LEONG Kah-kit, SC

Hon Michael TIEN Puk-sun, BBS, JP

Hon James TIEN Pei-chun, GBS, JP

Hon Kenneth LEUNG

Hon Dennis KWOK

Dr Hon Fernando CHEUNG Chiu-hung Hon SIN Chung-kai, SBS, JP Dr Hon Helena WONG Pik-wan Hon IP Kin-yuen Ir Dr Hon LO Wai-kwok, SBS, MH, JP Hon Christopher CHUNG Shu-kun, BBS, MH, JP Hon Tony TSE Wai-chuen, BBS

Public officers attending:

Ms Elizabeth TSE Man-yee, JP Permanent Secretary for Financial Services and the Treasury (Treasury) Deputy Secretary for Financial Services Ms Esther LEUNG, JP and the Treasury (Treasury)1 Principal Executive Officer (General), Mr Alfred ZHI Jian-hong Financial Services and the Treasury Bureau (The Treasury Branch) Mr Raistlin LAU Chun. JP Deputy Secretary for Financial Services and the Treasury (Treasury) 3 Assistant Secretary Ms Jasmine CHOI Suet-yung Principal Financial Services and the Treasury (Treasury)(Works) Mr Joseph LO Kwok-kuen Chief Assistant Secretary for Development (Works) 1, Development Bureau Director Mr Tony MOYUNG Hon Assistant of Lands (Acquisition), Lands Department Chief Estate Surveyor (Acquisition), Ms Joyce NG Suet-yee Lands Department Mr LEUNG Koon-kee, JP Director of Architectural Services Mr HUI Chiu-kin Assistant Director of Architectural Services (Property Services). Architectural Services Department Director of Drainage Services Mr Edwin TONG Ka-hung, JP Mr Samson LAI Yiu-kei Assistant Director of Environmental Protection (Waste Management Policy) Assistant Director of Environmental Ms Betty CHEUNG Miu-han Protection (Environmental Infrastructure) Mr Daniel CHUNG Kum-wah, JP Director of Civil Engineering and Development Deputy Director of Highways Mr CHUI Wing-wah

Mr Raymond KONG Tai-wing	Deputy Project Manager/Major Works (1), Highways Department
Mr Ivan CHUNG Man-kit	Principal Assistant Secretary for Development (Planning and Lands) 5, Development Bureau
Miss Charmaine WONG Hoi-wan, JP	<u> </u>
Mr Martin KWAN Wai-cheong	Chief Engineer (Works), Home Affairs Department
Ms Maggie CHIN Man-yi	District Planning Officer (Fanling, Sheung Shui and Yuen Long East), Planning Department
Mr LAM Ka-tai, JP	Deputy Director of Social Welfare (Services)
Mr KOK Che-leung	Assistant Director of Social Welfare (Subventions)
Mr Kelvin SIU Yun-piu	Assistant Secretary-General (Capital), University Grants Committee Secretariat
Mr LEE Kam-yuen	Chief Maintenance Surveyor (School Premises Maintenance), Education Bureau
Mr Murphy CHIU Hon-fai	Senior Maintenance Surveyor (School Premises Maintenance), Education Bureau
Dr LAI Shu-ming	Head of Estates, Health and Safety Division, Vocational Training Council
Mr LEUNG Wing-lim, JP	Assistant Director of Water Supplies (New Works)
Mr Timothy CHENG Leung-kit	Chief Systems Manager (Governance and Resources), Office of the Government Chief Information Officer
Mr LO Kwok-kong	Chief Civil Engineer (Public Works Programme), Housing Department
Mr Richard YUEN, JP	Permanent Secretary for Food and Health (Health)
Ms Wendy AU	Acting Deputy Secretary for Food and Health (Health) 2
Dr Teresa LI	Assistant Director of Health (Family and Elderly Health Services)
Ms Natalie CHAN	Chief Executive Officer (Health Care Voucher), Department of Health

Clerk in attendance:

Ms Anita SIT Assistant Secretary General 1

Staff in attendance:

Mr Derek LO Chief Council Secretary (1)5 Mr Ken WOO Senior Council Secretary (1)5

Mr Keith WONG Council Secretary (1)5
Mr Raymond SZETO Council Secretary (1)6

Mr Frankie WOO Senior Legislative Assistant (1)3

Ms Michelle NIEN Legislative Assistant (1)5

Action

Item No. 1 – FCR(2015-16)48 RECOMMENDATION OF THE PUBLIC WORKS SUBCOMMITTEE MADE ON 17 FEBRUARY 2016

PWSC(2015-16)48

Block allocations for Heads 701 to 711 under the Capital Works Reserve Fund

Continuation of discussion on the motion to be proposed under paragraph 47 of the Finance Committee Procedure

The meeting continued the discussion on the motion to shorten the division bell from five minutes to one minute proposed by Mr IP Kwok-him under paragraph 47 of the Finance Committee Procedure ("FC Procedure").

- 2. <u>Mr Albert CHAN</u> and <u>Mr CHAN Chi-chuen</u> spoke against Mr IP Kwok-him's motion. <u>Mr Paul TSE</u> and <u>Mr TAM Yiu-chung</u> expressed support for Mr IP Kwok-him's motion.
- 3. <u>The Chairman</u> put the motion to vote. As members requested for a division, the Chairman ordered a division and the division bell was rung for five minutes. <u>The Chairman</u> announced that 29 members voted in favour of, and six members voted against the motion. The votes of individual members were as follows –

For:

Mr Albert HO Chun-yan Mr CHAN Kam-lam
Ms Emily LAU Wai-hing Mr TAM Yiu-chung
Mr Abraham SHEK Lai-him Mr WONG Kwok-hing

Mr Jeffrey LAM Kin-fung Mr Andrew LEUNG Kwan-yuen

Mr WONG Ting-kwongMr CHAN Hak-kanMr WONG Kwok-kinMr IP Kwok-himMr Paul TSE Wai-chunMr NG Leung-sing

Mr Steven HO Chun-yin Mr Frankie YICK Chi-ming

Mr WU Chi-wai Mr YIU Si-wing

Mr MA Fung-kwok Mr Charles Peter MOK
Mr CHAN Han-pan Mr LEUNG Che-cheung
Ms Alice MAK Mei-kuen Mr KWOK Wai-keung

Mr Christopher CHEUNG Wah-fung Mr Martin LIAO Cheung-kong

Mr POON Siu-ping Mr TANG Ka-piu

Dr CHIANG Lai-wan

(29 members)

Against:

Prof Joseph LEE Kok-long Mr Albert CHAN Wai-yip Mr Gary FAN Kwok-wai Mr CHAN Chi-chuen

Dr Kenneth CHAN Ka-lok Mr Alvin YEUNG Ngok-kiu

(6 members)

4. <u>The Chairman</u> declared that the Committee approved the motion.

5. The Chairman advised that the 40 motions submitted by Mr LEUNG Kwok-hung under paragraph 37A of the FC Procedure ("37A motions") were the same in content as those submitted by Mr Alvin YEUNG. The Chairman ruled that 13 of these motions were not directly related to the agenda item and were thus inadmissible. He suggested that Mr LEUNG consolidate five of the rest of the motions into two motions, and consolidate the remaining 22 motions into two motions, and then submit them again. As Mr LEUNG Kwok-hung was not present at the meeting, the Chairman directed that the motions returned be placed on Mr LEUNG's table.

Continuation of discussion on the motion to be proposed under paragraph 37A of the Finance Committee Procedure

Motion proposed by Mr CHAN Chi-chuen

6. <u>The Chairman</u> put to vote the question that the motion proposed by Mr CHAN Chi-chuen numbered <u>42</u> be proceeded forthwith. With the

agreement of the Chairman, <u>Mr CHAN Chi-chuen</u> read out his motion. As requested by members, the Chairman ordered a division and the division bell was rung for one minute. The question was negatived.

Voting on FCR(2015-16)48

7. Given that no more member submitted 37A motions on FCR(2015-16)48 and no member requested to raise further questions, the Chairman put the item to vote. At members' request for a division, the Chairman ordered a division and the division bell was rung for one minute. The Chairman announced that 33 members voted in favour of, and three members voted against the item. The votes of individual members were as follows –

For:

Mr Albert HO Chun-yan Mr CHAN Kam-lam Ms Emily LAU Wai-hing Mr TAM Yiu-chung Mr Abraham SHEK Lai-him Mr WONG Kwok-hing Mr Jeffrey LAM Kin-fung Prof Joseph LEE Kok-long Mr Andrew LEUNG Kwan-yuen Mr WONG Ting-kwong Ms Cyd HO Sau-lan Mr CHAN Hak-kan Mr IP Kwok-him Mr WONG Kwok-kin Mr Paul TSE Wai-chun Mr NG Leung-sing Mr Frankie YICK Chi-ming Mr Steven HO Chun-yin Mr WU Chi-wai Mr YIU Si-wing Mr Charles Peter MOK Mr MA Fung-kwok Mr CHAN Han-pan Dr Kenneth CHAN Ka-lok Mr LEUNG Che-cheung Ms Alice MAK Mei-kuen Mr KWOK Wai-keung Mr Christopher CHEUNG Wah-fung

Mr Martin LIAO Cheung-kong Mr POON Siu-ping Mr TANG Ka-piu Dr CHIANG Lai-wan

Mr Alvin YEUNG Ngok-kiu

(33 members)

Against:

Mr Albert CHAN Wai-yip Mr CHAN Chi-chuen

(3 members)

Mr Gary FAN Kwok-wai

8. <u>The Chairman</u> declared that the Committee approved the item.

Item No. 2 – FCR(2015-16)40 HEAD 37 – DEPARTMENT OF HEALTH Subhead 000 – Operational expenses

9. <u>The Chairman</u> advised that item FCR(2015-16)40 invited the Committee to approve a supplementary provision of \$380.7 million under Head 37 Department of Health Subhead 000 Operational expenses to meet the estimated expenditure for the Elderly Health Care Voucher ("EHV") Scheme in 2015-2016. The Food and Health Bureau ("FHB") consulted the Panel on Health Services of the Legislative Council on the funding proposal on 16 November 2015. Prof Joseph LEE, Chairman of the Panel, reported to members the outcome of the discussion.

Concerns about the eligible age and the financial cap on the cumulative amount

- 10. <u>Miss Alice MAK, Mr LEUNG Yiu-chung, Mr WONG Kwok-hing</u> and <u>Dr KWOK Ka-ki</u> urged the Administration to lower the eligible age for EHV services to 65. <u>Miss MAK, Mr Tommy CHEUNG, Mr WU Chi-wai, Mr Albert CHAN</u> and <u>Miss CHAN Yuen-han</u> requested that the financial cap on the cumulative amount of unspent vouchers be revised upward or the number of years that an elder might carry forward the unspent voucher amount be extended. <u>Miss MAK</u> considered that lowering the eligible age could encourage more elders to use the services provided by private healthcare facilities, thereby making the Public-Private Partnership Programme more effective.
- 11. Permanent Secretary for Food and Health (Health) ("PS for FH(H)") advised that, in lowering the eligible age to 65, an additional funding of \$700 million would be needed each year to cover the EHV expenditure. As such, in exploring the feasibility of extending the Scheme to elders under the age of 70, it was necessary to consider carefully the sustainability of resource allocation. In addition, there was concern that raising the financial cap on the cumulative amount of unspent vouchers might discourage elders from seeking immediate medical consultation when they fell sick. This was contrary to the purpose of the Scheme to assist elders in receiving "preventive treatment of disease" and promote the concept of family doctors. The Administration was reviewing the effectiveness of the Scheme, including examining the principles on the cumulative amount of vouchers.

Services that could be paid by vouchers

- Ms Cyd HO expressed concern about the long waiting time for first appointment in specialist services under the Hospital Authority ("HA") that could range from 18 to 20 months, and enquired whether elders could use the EHV amount to pay for the consultation fees at private specialist clinics. She requested the Administration to provide the latest figures on the waiting time for specialist new cases in each administrative cluster of HA.
- 13. <u>PS for FH(H)</u> advised that elders could use EHV to pay for the consultation fees at private specialist clinics that had enrolled in the Scheme. The Administration was currently addressing the problem of long waiting time for specialist new cases at HA by various means, such as recruitment of additional manpower, expansion of hospitals and establishment of new hospitals, public-private partnership and training.
- 14. While vouchers could not be used solely for the purchase of drugs and medical equipment, Ms Claudia MO enquired whether discretion would be given in handling cases of using vouchers for the purchase of medical appliances that assisted elders in their daily living (such as walking sticks and commode chairs). Assistant Director of Health (Family and Elderly Health Services) ("AD of H (FEHS)") advised that vouchers could be used to pay for the medical appliances prescribed and provided by healthcare service providers who had enrolled in the Scheme.

Extension of the EHV Scheme to other Mainland districts

- 15. Given that a number of elders who had moved to the Mainland for settlement resided in districts other than Shenzhen, Mr WONG Kwok-hing considered it inadequate to provide EHV services only at the University of Hong Kong Shenzhen Hospital ("HKU-SZ Hospital"). Sharing the same concern, Mr TAM Yiu-chung, Miss Alice MAK and Miss CHAN Yuen-han expressed support for extending the Scheme to districts other than Shenzhen. Mr LEE Cheuk-yan was concerned how healthcare service providers on the Mainland would be monitored.
- 16. In response, <u>PS for FH(H)</u> advised that the pilot scheme launched with the HKU-SZ Hospital since October 2015 had achieved satisfactory results and the Administration would continue to monitor its implementation. As this involved the use of public money for paying cross-boundary healthcare services, a sound monitoring mechanism was essential in order to further extend service coverage to more districts. The pilot scheme would be reviewed in

October 2016. He advised that whether suitable healthcare service providers on the Mainland could be identified was one of the important factors in extending the Scheme on the Mainland. As the HKU-SZ Hospital was under the management of the Hong Kong University ("HKU"), it was regarded as a suitable healthcare service provider. Even if the service coverage was to be extended to more districts, the Administration would prefer to cooperate with those clinics established in Shenzhen by Hong Kong healthcare service providers on the Agreement on Trade in Services under the framework of the Mainland and Hong Kong Closer Economic Partnership Arrangement.

- 17. <u>Dr Kenneth CHAN</u> considered that it was not justified for the Administration to choose to launch the pilot scheme in collaboration with the HKU-SZ Hospital on the ground that the Hospital was affiliated to HKU. He enquired how healthcare service providers on the Mainland would be monitored and the criteria in assessing the effectiveness of the pilot scheme. <u>Dr CHAN</u> remarked that many local elders who had settled on the Mainland preferred to return to Hong Kong for medical treatment.
- 18. <u>PS for FH(H)</u> responded that as the HKU-SZ Hospital was under the management of HKU, its healthcare model and regulatory framework were similar to those in Hong Kong and could facilitate the implementation of a pilot scheme. The Administration noted that most elders who moved to the Mainland for settlement resided in Shenzhen or its vicinity. Launching the pilot scheme in Shenzhen could provide elders with one more option to stay on the Mainland for medical treatment, so that elders would enjoy greater convenience in seeking curative and preventive care. This also helped relieve the pressure on the demand for public outpatient services in Hong Kong.

Take-up rate of the EHV Scheme

- 19. While expressing support for the item, <u>Ms Emily LAU</u> enquired the percentages of the 5 200 Western medical practitioners ("WMPs"), Chinese medicine practitioners ("CMPs") and dentists who had enrolled in the Scheme to the numbers of private practitioners throughout the territory; and the reasons why other healthcare service providers did not enrol in the Scheme.
- AD of H (FEHS) advised that the number of WMPs who had enrolled in the Scheme was about 1 900, accounting for 39% of the private medical practitioners in Hong Kong, while the numbers of dentists and CMPs who had enrolled in the Scheme were about 600 and 1 800 respectively, accounting for 38% of the private dental practitioners and 30% of the CMPs. PS for FH(H) said the Scheme aimed at providing primary care services and hence the tendency for specialists to enrol was lower. In addition, healthcare service

providers under the Scheme were required to record in the computer system the services provided. As the use of computers by CMPs was not as common as among WMPs, the enrolment rate of CMPs was lower than that of WMPs. With the gradual increase in the annual voucher amount, the number of healthcare service providers enrolled in the Scheme had also increased. In response to Ms LAU's remark that elders preferred to seek consultation from CMPs, PS for FH(H) responded that, throughout the territory, there were 18 Chinese medicine clinics under HA that had carried out computerization. Elders might seek consultation and make use of the vouchers at such clinics where the practitioners had enrolled in the Scheme.

- 21. Mr WU Chi-wai, Mr TAM Yiu-chung and Miss CHAN Yuen-han expressed support for the item. Mr TAM noted that about 170 000 (i.e. 22%) eligible elders had never made use of the vouchers and he asked about the reasons for that. Mr WU enquired about the amount of EHV that had not been claimed. Miss CHAN was of the view that there was a lack of knowledge among some elders on the EHV services and it was necessary to step up publicity.
- 22. PS for FH(H) and AD of H (FEHS) explained that as EHV Scheme was not subject to assets test, it was probable that some eligible elders who had no financial needs did not use the vouchers. On the other hand, some elders stayed in residential care homes for the elderly for a long period of time, or some were used to seeking public healthcare services, or the healthcare personnel from whom they usually sought consultation had not enrolled in the Scheme. All these were also the reasons why some elders had not used the vouchers. AD of H (FEHS) advised that, as at January 2016, there were 291 000 elders whose cumulative amount had exceeded the financial cap of \$4,000 and as a result the exceeded amount was cancelled. The total amount cancelled was \$375 million, representing an average of around \$1,200 per person.

Monitoring mechanism

23. Mr LEE Cheuk-yan was concerned about how healthcare service providers who had enrolled in the Scheme were monitored and enquired about the cases where healthcare service providers had overcharged the elders. Mr Alvin YEUNG was concerned about how service providers involved in anomalous cases were handled and whether such providers were in solo practice or group practice; whether sanction actions had to be supported by criminal investigation results or the court's judgment.

- 24. <u>AD of H (FEHS)</u> advised that, according to the interim review on the EHV Scheme conducted in 2010, nearly half of the elders interviewed indicated that they did not notice any rising trend in consultation fees. The above issue would be examined in the comprehensive review on the EHV Scheme being conducted currently. As for cases involving fraud or fraudulent claims by healthcare service providers, apart from being referred to the Police for investigation, the service provider concerned would be removed from the list of recognized providers without pending the court's judgment or investigation results of law enforcement departments. She advised that, from the implementation of the Scheme to the end of December 2015, a total of 12 healthcare service providers enrolled in the Scheme had been removed from the list due to anomalous claims.
- 25. <u>Ms Claudia MO</u> enquired, apart from referral to the Police, whether the professional supervisory bodies concerned had been informed of the aforesaid 12 cases.
- AD of H (FEHS) advised that the 12 healthcare service providers included CMPs and WMPs. Those cases involving CMPs had been referred by the Chinese Medicines Section under the Department of Health ("DH") to the professional supervisory bodies for CMPs for follow-up. Information about the cases involving fraudulent claims by WMPs that had been referred to the Medical Council of Hong Kong would be provided after the meeting. Ms Claudia MO requested the Administration to provide such information in writing.

[*Post-meeting note*: The supplementary information provided by the Administration in response to members' questions was issued to members vide LC Paper No. FC180/15-16(01) on 1 April 2016.]

Capacity of the public healthcare system

Mr LEE Cheuk-yan and Dr KWOK Ka-ki were concerned about the problem of insufficient general outpatient services under DH. Dr KWOK criticized that no additional elderly health centre ("EHC") was set up in the past five years, while the number of general outpatient clinics also increased slowly. He requested the Administration to provide information on the waiting time for elders to enrol as members of EHCs. Mr LEE enquired whether public healthcare services, including general outpatient and dental services under DH, would be further curtailed after the implementation of the EHV Scheme.

- 28. <u>PS for FH(H)</u> advised that, given the great public demand for services provided by the public healthcare system due to the aging population, the Administration would increase public healthcare services, including investing \$200 billion for expansion of hospitals, increasing the quota for general outpatient clinics under HA, recruiting additional healthcare personnel of various grades and retaining them, etc. He advised that while private healthcare service providers under the EHV Scheme could provide elders primary care services beyond the public healthcare system, healthcare services provided for elders by the public system would not be curtailed as a result.
- 29. <u>AD of H (FEHS)</u> advised that, as at the end of 2015, the median overall waiting time for enrolling as members of EHCs was 17 months, while as at February 2016, the waiting time had been shortened to 10 months. An additional clinical team was formed in 2015 to provide services for EHCs and another clinical team would be added in April 2016.

Reasons for application for a supplementary provision

- 30. <u>Mr CHAN Chi-chuen</u> noted that a provision of \$811 million was set aside in the 2015-2016 approved estimates to meet the expenditure for the EHV Scheme. After deducting the actual expenditure of \$480 million from April 2015 to October 2015, the remaining \$300 million should be enough to meet the expenditure for the remaining months of 2015-2016. <u>Mr CHAN</u> enquired about the reasons why a supplementary provision of \$380 million was required. <u>Ms Claudia MO</u> and <u>Mr Alvin YEUNG</u> were concerned whether the supplementary provision applied for would involve payment for the costs for conducting the comprehensive review or the administrative costs of the HKU-SZ Hospital.
- 31. <u>AD of H (FEHS)</u> responded that the actual expenditure in the first seven months of 2015-2016 had increased by 40% as compared with that of the same period in 2014-2015. It was anticipated that the remaining provision set aside was inadequate to meet the estimated expenditure in the second half of 2015-2016. As such the Administration started to prepare a paper in October 2015 to apply for a supplementary provision from the Finance Committee and it was estimated at that time that an additional \$380.7 million was required. As at the end of February 2016, the total expenditure under the EHV Scheme was \$825.2 million, which had exceeded the provision set aside by \$14 million. Considering that there was still one month left before the end of 2015-2016 and the monthly actual expenditure recently ranged from \$50 million to \$108 million, and the fact that it was difficult to make an accurate forecast of the EHV amount to be spent by elders which might vary depending on their

individual needs, the Administration applied for an additional provision of \$300 million to ensure that it would be adequate to meet all the EHV expenditures in 2015-2016. PS for FH(H) added that the supplementary provision would not be used for conducting the review or paying administrative costs.

Views expressed by members on the scope of review

- Mr Albert HO enquired about the justifications for not allowing elders to use the vouchers for paying private patient service charges in public hospitals or for the purchase of drugs. As the Samaritan Fund could not provide full subsidies either, elders had to bear the cost of expensive drugs by themselves. Mr HO urged the Administration, in reviewing the Scheme, to relax the application of the subsidized amount so that elders could use the vouchers for the purchase of drugs. Mr WU Chi-wai expressed similar concern.
- 33. <u>PS for FH(H)</u> explained that one of the purposes of the Scheme was to encourage elders to make more frequent use of the services provided by private clinics so as to relieve the pressure on the public healthcare system. On the other hand, the Scheme intended to encourage elders to make use of the subsidized amount for primary care services, including ordinary medical consultation and check-up, so as to achieve the purpose of curative and preventive care at an early stage. As such, the use of vouchers solely for the purchase of drugs or other healthcare products was not allowed.
- Mr LEUNG Yiu-chung, Mr WONG Kwok-hing, Mr LEUNG Kwok-hung and Dr KWOK Ka-ki were of the view that the eligible age of the EHV services should be reviewed and lowered to 65. Mr LEUNG considered that lowering the eligible age could relieve the pressure on the public healthcare system. Mr WONG and Dr KWOK opined that the current Scheme was seen to be discriminating against people aged between 65 and 69 and requested the Administration to include those in this age group into the Scheme. Mr WONG requested the Administration to submit the review report to the next term of Legislative Council for reference. Dr Kenneth CHAN urged the Administration to study in the review the reasons why some elders and members from the profession did not enrol in the Scheme.
- 35. <u>PS for FH(H)</u> explained that the review would cover the medical consultation-seeking pattern and behavior of eligible elders, assessment of the effectiveness of the Scheme, as well as formulation of policies and proposals to encourage elders and service providers to enrol in the Scheme, so as to step up publicity. He advised that resource allocation would be a factor that must be

taken into account when considering whether to expand the Scheme to cover those aged between 65 and 69 and it was not appropriate to include this issue in the review. The Administration did not have the data showing the impact on the public healthcare system in case people aged between 65 and 69 were included into the EHV Scheme.

Other suggestions

36. Mr Albert CHAN suggested that, apart from EHV, resources could be provided to elders who suffered from more serious diseases to seek consultation from private specialists, so that they did not have to wait for a long time in public hospitals. PS for FH(H) advised that the Administration had to consider in detail Mr CHAN's suggestion.

Issue of order

- 37. At 4:15 pm, Mr Albert CHAN remarked that the Chairman and Mr CHAN Kam-lam had ignored the needs of the elders by advancing the deliberation on the additional funding for the cost overrun of the Guangzhou Shenzhen Hong Kong Express Rail Link ("XRL") and the Hong Kong Zhuhai Macao Bridge Project, thus causing a delay in the deliberation on the application for a supplementary provision for EHV. Mr CHAN alleged that the Chairman had a conflict of interest in the XRL's funding proposal due to his relationship with Munich RE.
- 38. At 4:20 pm, in response to Mr Albert CHAN's reproach, the Chairman asserted that Mr CHAN's accusation was inaccurate and groundless. If there was any ground, he should report to the relevant authorities and should not make a commotion on this excuse at the meeting. Mr CHAN continued to speak aloud and asserted that his accusation was made on the basis that the Chairman was a remunerated consultant of Munich RE. The Chairman advised that Mr CHAN should be strongly condemned for making such an inaccurate accusation against him.
- 39. At 4:30 pm, the Chairman declared that the meeting be adjourned and the Committee would continue the deliberation on the item at the next meeting to be held on the same day.
- 40. The meeting was adjourned at 4:30 pm.

<u>Legislative Council Secretariat</u> 13 September 2016