

## Legislative Council Panel on Health Services

### Supplementary Information on the Review of Fees and Charges for Non-eligible Persons and Private Patients in the Hospital Authority Requested in the Meeting on 17 December 2012

This note provides supplementary information in response to the requests made and the motion passed at the meeting of the Panel on Health Services on the Review of Fees and Charges for Non-eligible Persons (NEP) and Private Patients in the Hospital Authority (HA) on 17 December 2012.

(a) *The number of default cases of NEP and private patients in the past few years and the corresponding amounts written off*

2. The number of default cases of NEP and private patients in HA in the past three years and the corresponding amounts written off are set out in the following table –

	2009/10		2010/11		2011/12	
	Total write-off amount (\$M)	No. of cases	Total write-off amount (\$M)	No. of cases	Total write-off amount (\$M)	No. of cases
NEP	31.3	5,954	24.2	5,731	31.1	6,048
Private Patients	0.4	79	0.2	76	1.7	132

(b) *The number of NEPs who had been granted a waiver under HA's medical fee waiver mechanism and the amount of fees waived in the past five years*

3. The number of NEPs who had been granted a waiver under HA's medical fee waiver mechanism and the amount of fees waived in the past five years are set out in the following table –

	2007/08	2008/09	2009/10	2010/11	2011/12
Total waived amount (\$M)	\$18.3	\$15.0	\$29.7	\$40.6	\$38.3
No. of cases	4,709	7,992	13,241	14,992	14,154

(c) *Persons that would fall into the category of "Other persons approved by the Chief Executive of HA" and be eligible for the rates of charges applicable to eligible persons ("EPs") under the refined formulation of the definition of EPs*

4. As mentioned in footnote 1 of the paper for the Panel's meeting on 17 December 2012, "other persons approved by the Chief Executive of the Hospital Authority" is one of the categories of persons falling within the current definition of EP. This category of persons will remain in the refined formulation of EP to provide a mechanism for the Chief Executive of HA to approve a person as EP under very exceptional circumstances and on a case-by-case basis. Since 2003, there were only two approved cases involving patients who failed to provide identity documents at the time of admission for hospitalization, and who were subsequently granted Hong Kong resident status midway through the period of hospitalization after verification by the Immigration Department.

(d) *Motion on the status of Mainland spouses of Hong Kong residents*

5. At the meeting, the Panel passed the following motion –

"That this Panel urges the Government to accord Mainland spouses of Hong Kong residents equal status with Hong Kong residents and abolish all discriminatory charging policies."

6. Public healthcare services in Hong Kong are highly subsidized by the Government. It is necessary for the Government to ensure that our public healthcare services can meet public demand and at the same time can sustain in the long-term within the limited financial resources. There is thus a genuine need to draw up eligibility criteria for receiving the heavily subsidised public healthcare services and accord priority to taking care of the needs of Hong Kong residents. And the eligibility criteria are applied throughout with regard to the status of the patient directly receiving the services (i.e. depending on whether the patient

himself/herself is an EP or not), rather than the status of his/her family members. As for non-local residents, they may use public healthcare services when capacity permits, but they have to pay NEP fees.

7. Against this background, there is no plan to introduce any substantive amendment to the current definition of EP.