For information on 20 March 2017

LEGISLATIVE COUNCIL PANEL ON PUBLIC SERVICE

OVERVIEW OF MEDICAL AND DENTAL BENEFITS FOR CIVIL SERVANTS, PENSIONERS AND ELIGIBLE DEPENDANTS

PURPOSE

This paper provides Members with the latest overview of the provision of medical and dental benefits (hereafter referred to as "civil service medical benefits") available to civil service eligible persons 1 .

BACKGROUND

2. The Government, as the employer of civil servants, has a contractual obligation to provide civil service medical benefits. The scope of the benefits is set out in the Civil Service Regulations (CSRs), Civil Service Bureau Circulars and Circular Memoranda. Those provisions form part of the terms and conditions of employment of civil servants.

¹ Civil service eligible persons consist of:

⁽a) monthly paid civil servants and their eligible dependants;

⁽b) retired civil servants living in Hong Kong and in receipt of a pension or an annual allowance and their eligible dependants living in Hong Kong;

⁽c) eligible dependants of civil servants killed on duty and living in Hong Kong;

⁽d) eligible dependants living in Hong Kong and in receipt of a pension under the Widows and Orphans Pension Scheme or the Surviving Spouses' and Children's Pension Scheme following the death of civil servants while in service or after retirement; and

⁽e) other persons who are eligible for civil service medical benefits by way of their terms of appointment.

3. Civil service eligible persons are entitled to receive medical services and dental treatment provided by the Department of Health (DH) and the Hospital Authority (HA) free of charge, save for the charges applicable to hospital maintenance, dentures and dental appliances as provided for in CSRs². If the attending HA/DH doctors certify that the drugs, equipment and services concerned are prescribed according to medical necessity and are not available in HA/DH, civil service eligible persons may apply to DH for reimbursement of the expenses incurred. For drugs on HA's list of self-financed items and some specified self-financed equipment/services that are prescribed according to medical necessity and are available in HA, civil service eligible persons are not required to pay for them out-of-pocket, as DH will reimburse HA direct with the expenses incurred under a direct payment arrangement upon receiving reimbursement applications from civil service eligible persons.

IMPROVEMENT MEASURES

4. Through systematic planning, we strive for providing proper medical and dental benefits to around 540 000 civil service eligible persons in a strategic manner to meet their various medical needs. With the full support of DH and HA, the improvement measures that we implement have made achievements. Subject to the approval of the 2017-18 Draft Estimates of Expenditure by the Legislative Council, we will further improve the provision of civil service medical benefits. Details of the improvement measures are set out in paragraphs 5 to 14 below.

(a) Families Clinic services

5. We have arranged Families Clinics which provide exclusive services to civil service eligible persons to be located in different geographic locations and increased the number of consultation rooms gradually with a view to facilitating utilisation of such services by civil service eligible persons. In addition to the four Families Clinics in Wan Chai, Chai Wan, Hung Hom and Tsuen Wan, DH opened the fifth Families Clinics in Fanling in 2016. Last year, we undertook to set up the sixth Families Clinic in Sai Kung, which is expected to commence service in 2018-19. By that time, the total number of consultation rooms in Families Clinics will increase by more than double from 20 consultation rooms in 2009 to 44. The overall distribution of Families Clinics will become more even, covering Hong Kong Island, Kowloon, New Territories East, New Territories West and New Territories North. As for supporting services, DH set up a new dispensary at the Tang Chi Ngong Specialist Clinic Building in 2014. For patients of Hong Kong Families Clinic, their waiting time for dispensary service has been shortened significantly. DH also launched an automated telephone booking system in 2015 to provide flexibility for booking of appointments at Families Clinics.

² CSRs sets out the hospital maintenance fees applicable to all civil service eligible persons, as well as the schedule of charges for dentures, dental appliances and other restorations according to the civil servant's monthly salary at specified Master Pay Scale (MPS) pay points or equivalent. For pensioners, their monthly pension will be benchmarked against the MPS pay points for determining the applicable level of charges.

6. DH has provided clinical psychology service in Families Clinics on a small scale since 2016. The Clinical Psychologist provides professional counselling services to help civil service eligible persons in need to manage pressure arising from their work and life in a positive manner. To further meet the demand of civil service eligible persons for clinical psychology service, DH will enhance the clinical psychology service provided by Families Clinics in 2017-18. DH has been invited to set out as soon as practicable the most effective mode to provide professional counselling service to colleagues in need.

(b) Dental services

7. There are 38 General Dental Clinics under DH and around 60 dental surgeries have been added over the past five years. DH has just opened four more general dental surgeries this month in Sai Ying Pun and Kwai Chung. At present, DH maintains over 200 general dental surgeries for the exclusive use by civil service eligible persons.

8. With the expansion of primary dental care services, the number of referral cases to specialised dental services for assessment has increased correspondingly. In 2014, DH set up four oral-maxillofacial and dental surgeries for the exclusive use of civil service eligible persons³ in particular to deal with more complex dental treatment procedures. Last year, DH also undertook to set up additional prosthodontic surgeries by phases from 2018-19, increasing the number of dental surgeries by more than double from 5 to 12.

9. Periodontal disease is a chronic inflammatory problem. It is also a major cause of tooth loss in adults of Hong Kong. It is very likely that periodontal patients suffering from tooth loss will have to resort to dental implant as denture and bridge would increase the loading and have detrimental effect on the remaining teeth. Hence, early and regular treatment of periodontal disease is required to minimise patients' risk in bone and tooth losses. We will start the preparatory work for setting up three additional periodontal surgeries in 2017-18 with a view to meeting the anticipated service demand and shortening the waiting time for the services concerned.

10. Separately, there is often a gap of a few months to a year between two dental appointments. The Short Message Service (SMS) reminder function will be gradually implemented at all dental clinics of DH through the Clinical Information Management System. Civil service eligible persons will receive the SMS through the new system as a reminder of their next dental appointments. This would help avoid wasting of appointment slots.

³ There was no oral-maxillofacial and dental surgery for the exclusive use of civil service eligible persons in the past. Civil service eligible persons had to receive treatment at the Oral & Maxillofacial Surgery and Dental Units in seven public hospitals alongside members of the public. Additional resources were sought in 2014-15 to set up a total of four oral-maxillofacial and dental surgeries in Queen Mary Hospital, Queen Elizabeth Hospital, North District Hospital, and Prince of Wales Hospital for the exclusive use of civil service eligible persons.

(c) Reimbursement of medical expenses

11. A provision of \$620 million was earmarked in the Original Estimate for 2016-17 to meet the applications for reimbursement of medical expenses from civil service eligible persons. The approved provision represents an increase of 59% over the Revised Estimate of \$390 million for 2015-16 and is made in anticipation of an increase in the reimbursement applications from civil service eligible persons in 2016-17. The provision under the Original Estimate for 2017-18 will further increase to \$633.4 million to meet the anticipated reimbursement expenditure.

12. For the first nine months of 2016-17 (i.e. 1 April 2016 to 31 December 2016), DH approved about 61 000 applications for reimbursement of medical expenses from civil service eligible persons, amounting to some \$436 million. This represents a 16% and 25% increase in the number of applications approved and reimbursement expenditure respectively, as compared with the first nine months of 2015-16.

13. To save civil service eligible persons from paying in advance for drugs or other services/ equipment which are chargeable in HA, the direct payment arrangement mentioned in paragraph 3 above has been extended to cover all drugs provided by HA with effect from 25 March 2013. The direct payment arrangement also covers other specified self-financed items including percutaneous transluminal coronary angioplasty (PTCA) procedures, intraocular lens operation, non-PTCA consumables for interventional cardiology, and positron emission tomography service ⁴. As at 31 December 2016, around 86% of the total reimbursement expenditure in the first nine months of 2016-17 was covered by the direct payment arrangement, as compared with 85% for the same nine-month period in 2015-16.

(d) Specialist out-patient services and imaging services

14. To address the staff side's concerns over the long waiting times for medical services in HA hospitals, the Government has provided additional resources to HA on top of the subvention to HA since 2009-10 to provide dedicated specialist out-patient (SOP) services and imaging services to civil service eligible persons. For example, the service targets of 9H Specialist Clinic (9HSC) at Prince of Wales Hospital are restricted to civil service eligible persons. As at December 2016, the median waiting times for new cases for various specialties at 9HSC ranged from one week to 13 weeks. The waiting times were shorter as compared to those in other HA SOP clinics, facilitating early diagnosis for civil service eligible persons.

⁴ The majority of the equipment/services not covered under the direct payment arrangement are those which are comparatively less expensive or less frequently prescribed items. Having regard to HA's ongoing review on the equipment items provided to patients without charge, it is expected that the number of self-financed items will decrease.

CHINESE MEDICINE SERVICES

15. We have explained at previous Panel meetings the reasons for not providing Chinese medicine services as part of civil service medical benefits. We will closely monitor the future role of HA and DH in the provision of Chinese medicine services in order to assess their implications on civil service medical benefits in a timely manner.

WAY FORWARD

16. We will continue to work closely with HA and DH to further enhance the medical benefits for civil service eligible persons, taking into account the Government's contractual obligation, and the cost-effectiveness and financial implications of any proposed improvement measures.

17. Members are invited to note the contents of this paper.

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