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27 April 2018

Clerk to Panel on Public Service
(Attn.: Ms Wendy JAN)
Legislative Council Complex
1 Legislative Council Road
Central
Hong Kong

Dear Ms JAN,

Regarding the submission from the Coalition of Civil Servants on Medical and Dental Benefits (the Coalition) to the Panel on Public Service (the Panel) made on 14 March 2018, the Government's written response is set out in the ensuing paragraphs.

(1) The Government Tampering with the Terms of Employment Contract in Secret

The Government, as the employer of civil servants, is dedicated to fulfilling its contractual obligation to provide medical and dental benefits to civil service eligible persons (CSEPs) as part of the terms and conditions of employment of civil servants. The scope of the benefits is set out in the Civil Service Regulations (CSRs), Civil Service Bureau Circulars and Circular Memoranda.

CSR 902 stipulates that "the treatment provided will be dictated by the medical necessity of the case. Every endeavour will be made to give officers and their families the best available medical attendance and treatment, but the medical officer in charge of the case has sole discretion as to the amount and the nature of treatment provided."

We mentioned in our paper to the Panel in March 2018 that "we strive to provide proper medical and dental benefits to over 540 000 civil service eligible persons in a holistic approach." The expression is a description of our work in relation to the civil service medical benefits but not a quotation of the provisions in

CSRs. We definitely do not have the intention to mislead Legislative Council Members. Neither have we amended the regulations provided under CSRs.

(2) Imaging Centre for CSEPs

As mentioned in our paper to the Panel, in 2018-19, we will extend the service hours of Magnetic Resonance Imaging (MRI) in the Block G Imaging Centre at Queen Elizabeth Hospital from 9:00 am – 5:00 pm, Monday to Friday, to 8:00 am – 6:00 pm, Monday to Saturday, increasing the service hours by 50%. The extended service hours will greatly reduce the waiting time for the service. Apart from that, we will also expand the service scope of the Block G Imaging Centre in 2018-19 by introducing mammographic service for CSEPs.

As at 30 March 2018, the waiting times for Computed Tomography, MRI and ultrasound scanning services provided by the Block G Imaging Centre to CSEPs were 6 weeks, 40 weeks and 10 weeks respectively.

We will continue to monitor the utilisation of the Block G Imaging Centre and work with the Hospital Authority (HA) closely, and continue to explore feasible options of enhancing imaging services for CSEPs.

(3) Specialist Out-patient Services for Civil Servants

The Government has provided additional resources to HA to set up the 9H Specialist Out-patient Clinic (9HSC) at the Prince of Wales Hospital and the Saturday Specialist Out-patient Clinic (SSOPC) at the Queen Mary Hospital for the use of CSEPs.

The specialist out-patient services provided by 9HSC and SSOPC are in general provided by the specialists in the related specialties. The services serve as a bridging measure to supplement the specialist out-patient services currently provided by HA to CSEPs. If a CSEP who has booked a first appointment at an HA specialist out-patient clinic wants to have an earlier appointment, he/she may approach 9HSC or SSOPC to see if an earlier appointment can be arranged. If that can be arranged, the CSEP's case will be managed by the relevant clinic starting from the appointment date until the original appointment date at the HA specialist out-patient clinic.

As at December 2017, the appointment dates for new cases of specialist out-patient services provided by 9HSC and SSOPC to CSEPs had, on average, shortened their waiting times by 60 weeks and 61 weeks respectively, compared with their original specialist out-patient appointment dates.

(4) Families Clinic (General Out-patient)

The Department of Health (DH) will deliver in Families Clinics the Risk Assessment and Management Programme which aims to better control the disease

progression of CSEP patients with diabetes mellitus. DH will commence the preparatory work for the programme in 2018-19 with a view to delivering it in 2019-20. We will closely monitor the implementation and results of the programme and examine if the scope of service should be extended where necessary.

(5) Reimbursement of Medical Expenses

Public health care services are highly subsidised by the Government and cover an extensive scope, including various medical services, medical procedures and consultation services. However, charges are imposed on items that are not covered in the standard services of HA, such as self-financed medical items and drugs.

The above notwithstanding, according to the existing arrangement, the Government will arrange direct payment to HA or reimburse the CSEPs to help CSEPs pay for the self-financed medical items and drugs, as long as the criteria stipulated in Civil Service Bureau Circular No. 2/2013 are met.

(6) Dental Services

According to the available records kept by DH, the waiting time for general and specialised dental services from 2011 is listed below-

As at	Waiting time	
	General Dental Services	Specialised Dental Services
31 December 2011	Less than 1 month to 27 months	5 to 45 months
31 December 2012	Less than 1 month to 23 months	5 to 48 months
31 December 2013	2 to 19 months	5 to 46 months
31 December 2014	2 to 20 months	5 to 47 months
31 December 2015	2 to 19 months	5 to 41 months
31 December 2016	1 to 16 months	5 to 40 months
31 December 2017	1 to 16 months	4 to 33 months

We have explored in detail with DH the feasibility of providing specialised dental services to CSEPs through public private partnership. However, taking into account the cost effectiveness of the proposal, impact on existing manpower, service quality and monitoring mechanism etc., we consider the proposal not feasible. We will continue to seek additional resources for further improving civil service dental benefits provided by DH.

(7) Chinese Medicine Services

Regarding Chinese medicine services, we have explained at previous Panel meetings (including the Panel meeting on 19 March 2018) why the Government could not include Chinese medicine services in the medical and dental benefits for CSEPs. Currently, DH does not operate any Chinese Medicine Clinic nor does HA provide any Chinese medicine service as part of its standard services. The 18 public Chinese Medicine Centres for Training and Research (CMCTRs) now providing service are operating on a tripartite collaboration model involving HA, a non-governmental organisation (NGO) and a local university. Their purpose is to promote the development of “evidence-based” Chinese medicine. The NGOs are responsible for the day-to-day operation of the public CMCTRs, and staff of these centres are employed by them (i.e. they are not HA staff). Having regard to the main purpose of these CMCTRs, their mode of operation, and that their services do not form part of HA’s standard services, Chinese medicine services fall outside the scope of civil service medical benefits under the prevailing policy.

We will keep in touch with the Food and Health Bureau and pay close attention to the development of Chinese medicine in Hong Kong. Depending on the future role of HA and DH in the provision of Chinese medicine services, we will assess the possible implications on civil service medical benefits in a timely manner.

Coalition of Civil Servants on Medical and Dental Benefits

With the arrangement of the Panel Chairman, Hon POON Siu-ping, we met the representatives of the Coalition in the presence of Hon POON on 18 April 2018 to give detailed explanations on their issues of concern. We will maintain contact with the Coalition and strive to improve medical and dental benefits for CSEPs.

Yours sincerely,



(Miss Winnie TSE)
for Secretary for the Civil Service

c.c. Hon POON Siu-ping, BBS, MH
Chairman, Legislative Council Panel on Public Service

Director of Health
(Attn: Dr YC LO)

Chief Executive, Hospital Authority
(Attn: Ms Magdalene CHAN)

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