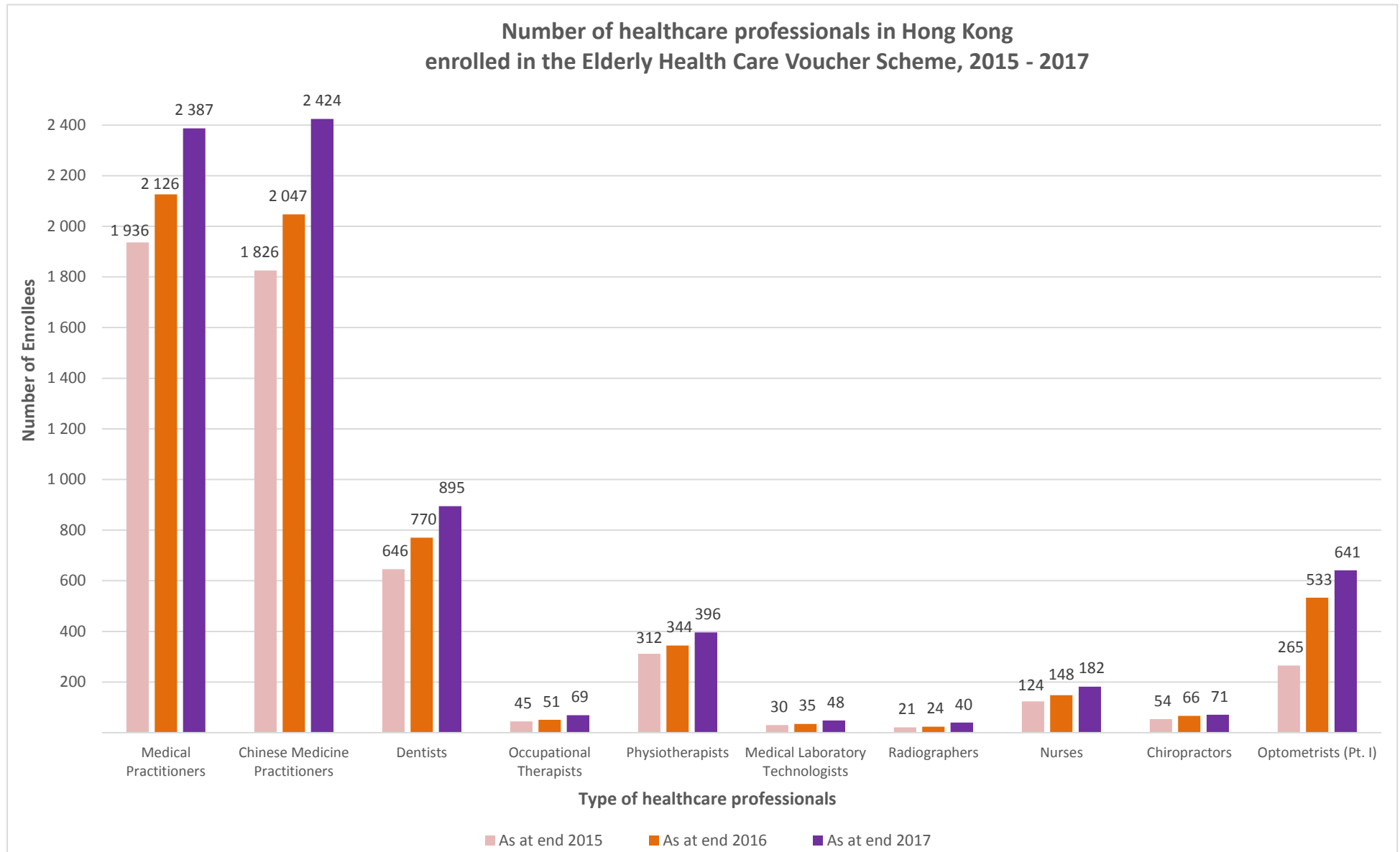
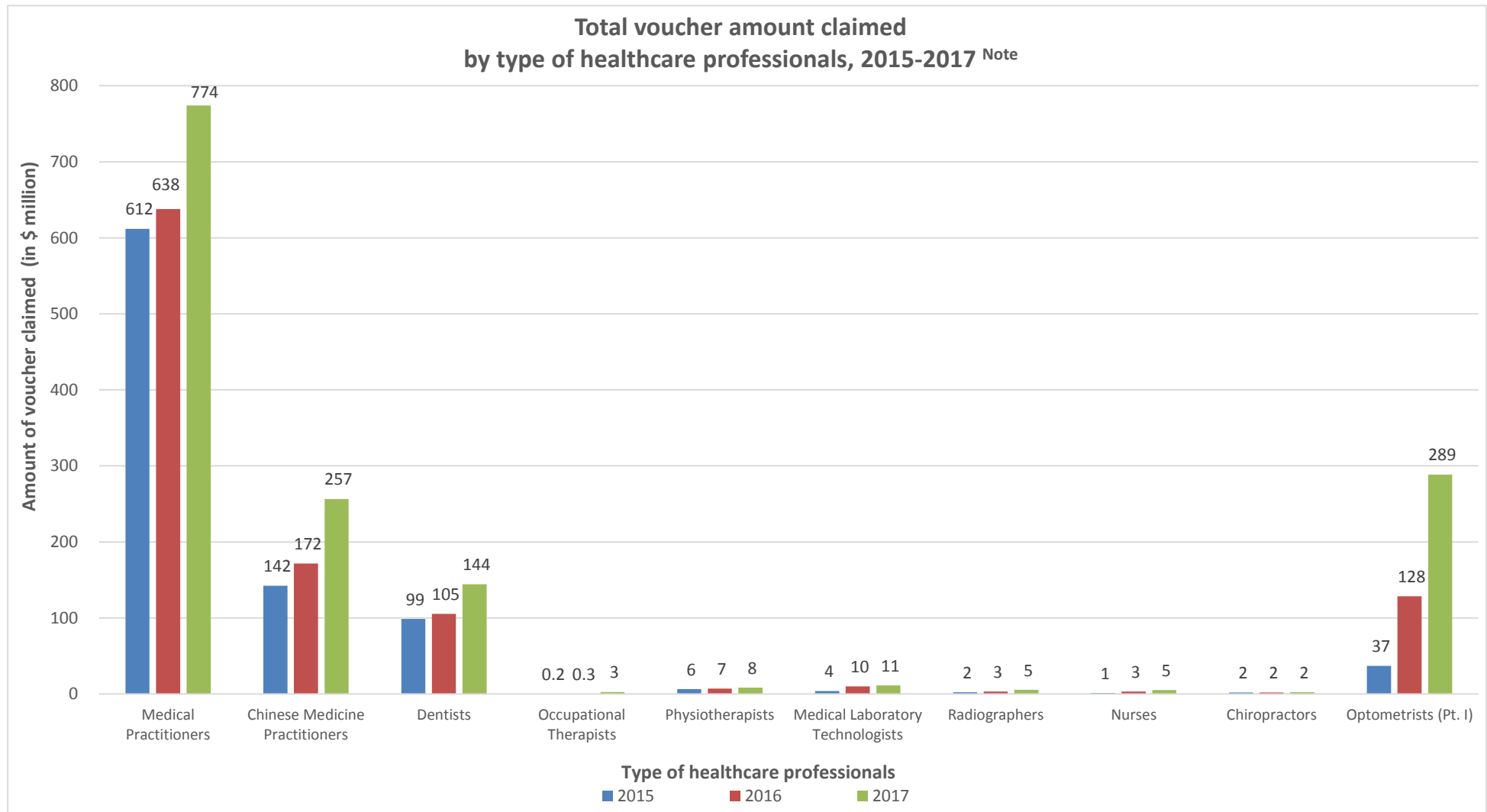


I. Key Statistics on the Elderly Health Care Voucher Scheme for 2015 – 2017

A. Number of healthcare professionals in Hong Kong enrolled in the Elderly Health Care Voucher Scheme, 2015 - 2017



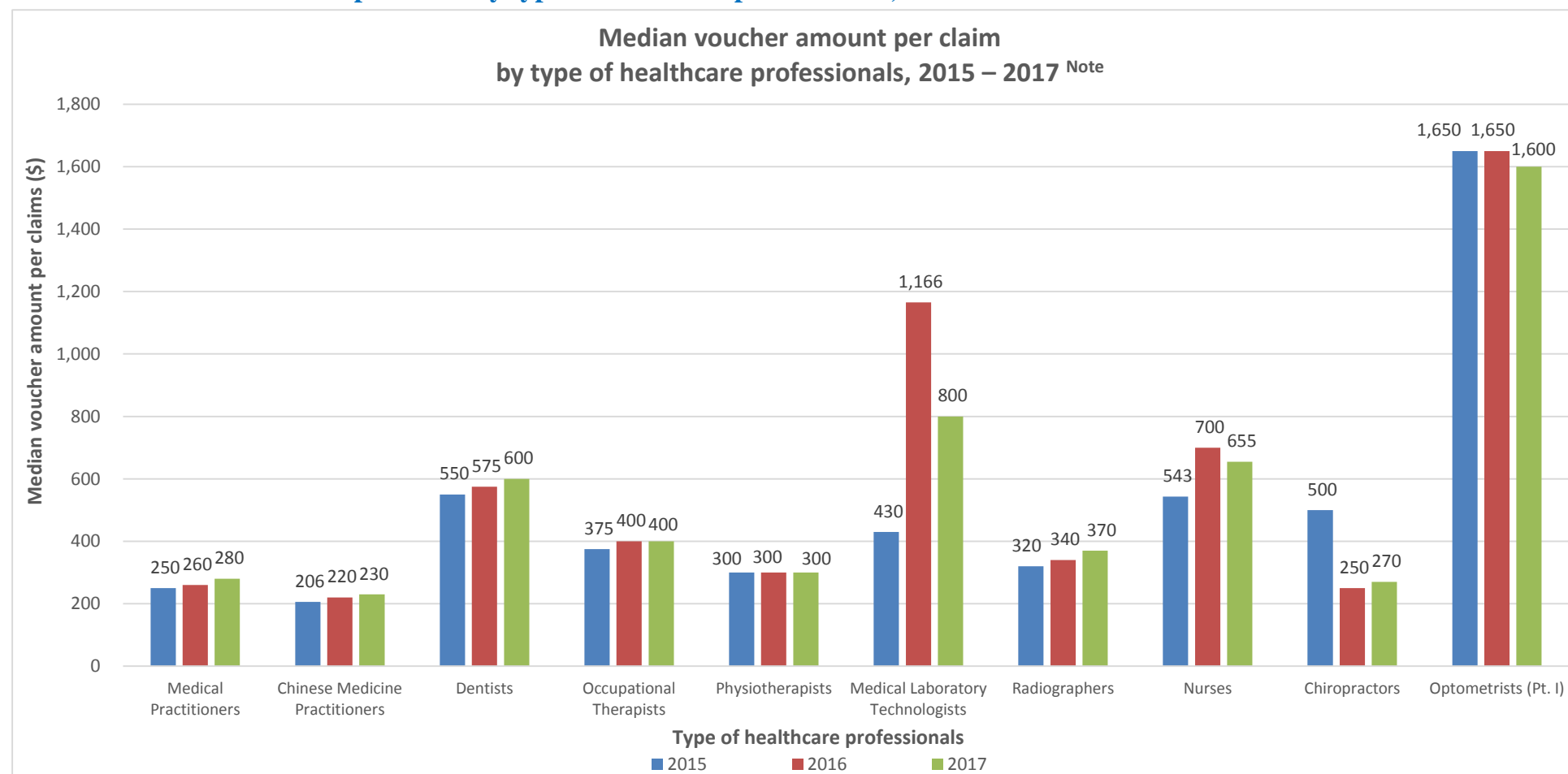
B. Total voucher amount claimed by type of healthcare professionals, 2015 - 2017



Note:

- The above only reflects the amount of fees settled by vouchers and does not include any out-of-pocket payment (i.e. co-payment) made by elders for each consultation, if any.

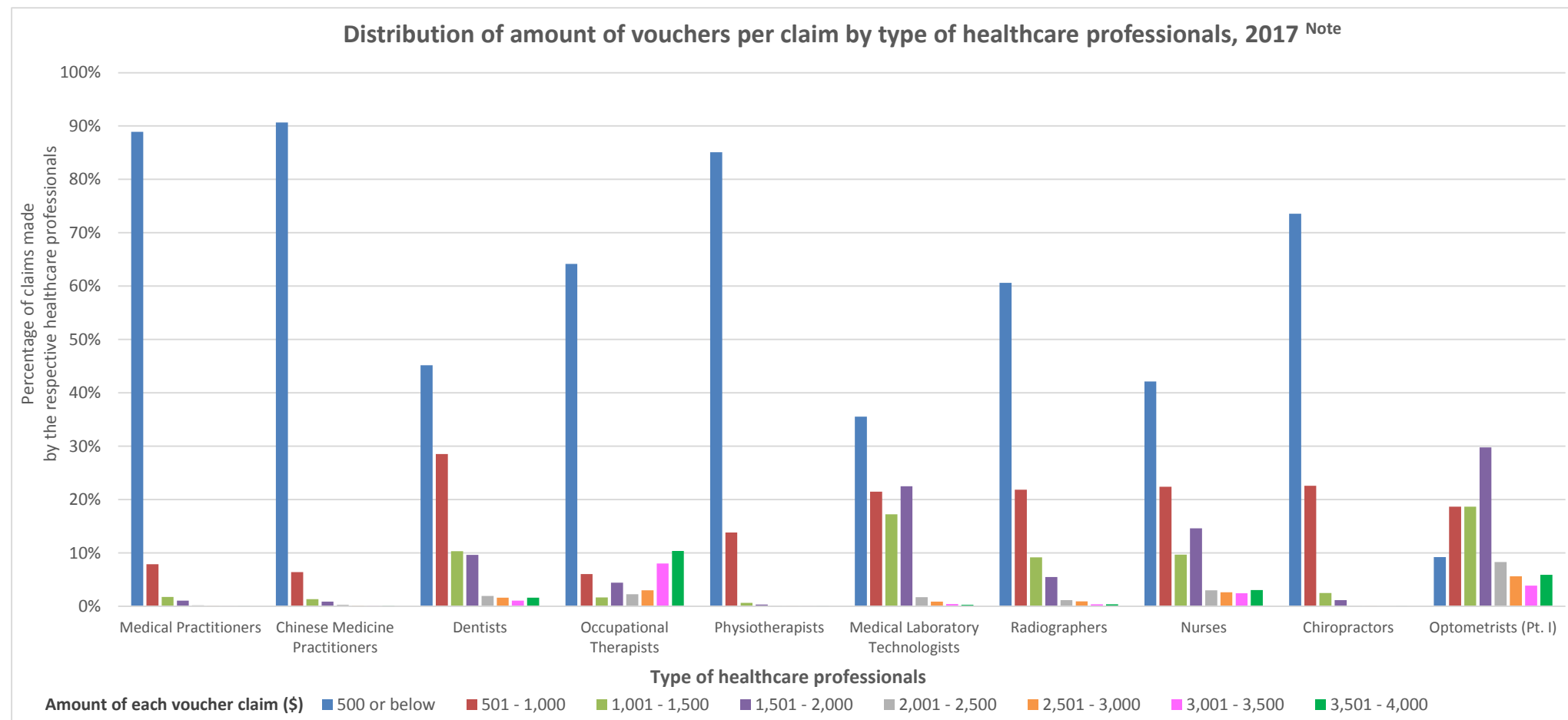
C. Median voucher amount per claim by type of healthcare professionals, 2015 - 2017



Note:

1. The above only reflects the amount of fees settled by vouchers and does not include any out-of-pocket payment (i.e. co-payment) made by elders for each consultation, if any.
2. The above statistical data are compiled based on the actual voucher claims made by the healthcare service providers and should not be interpreted as fees recommended by the Government. The amount of healthcare service fees can be affected by various factors, such as the individual elder's health condition, the complexity of the case, and the healthcare treatment/ management options involved.

D. Distribution of amount of vouchers per claim by type of healthcare professionals, 2017

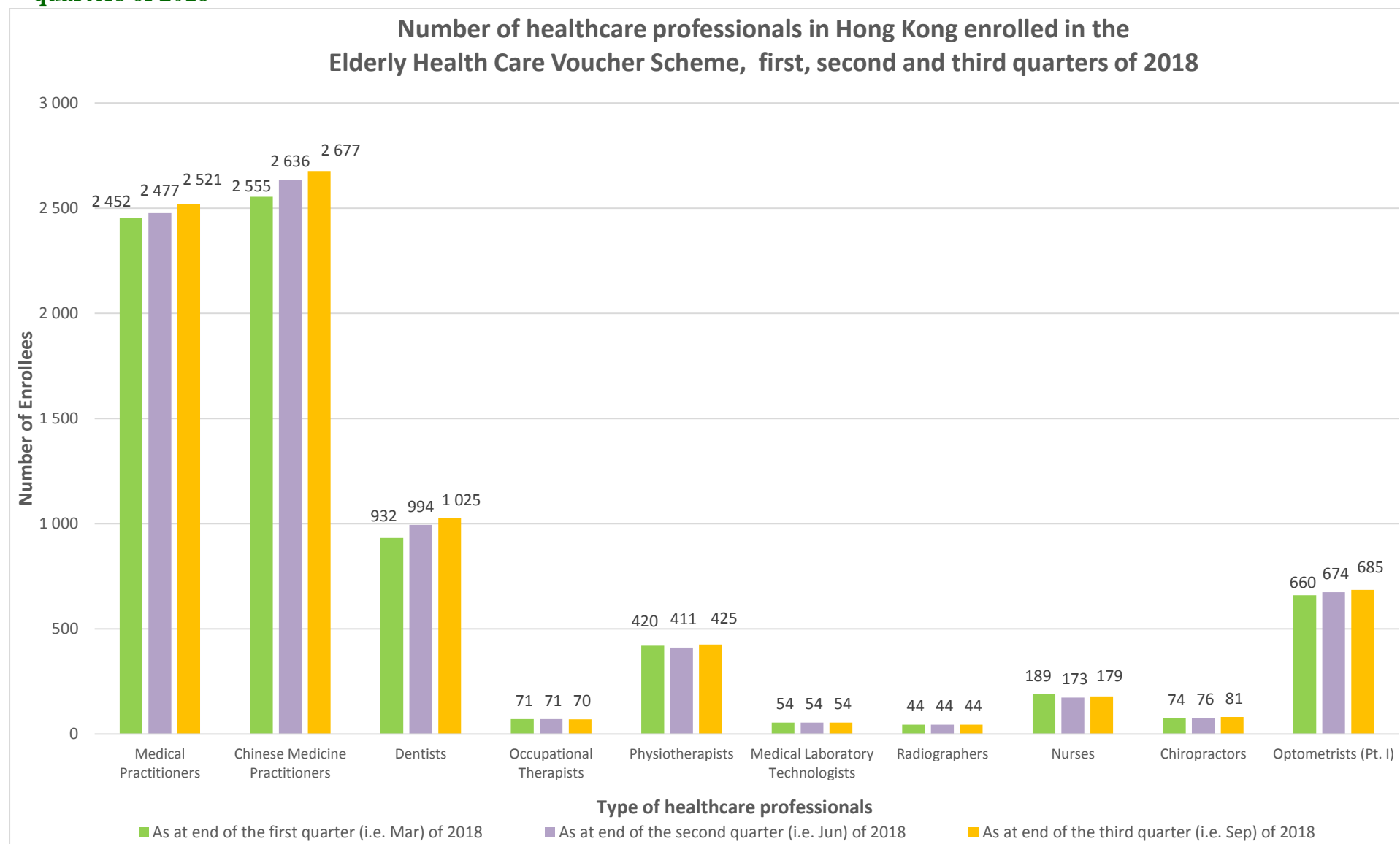


Note:

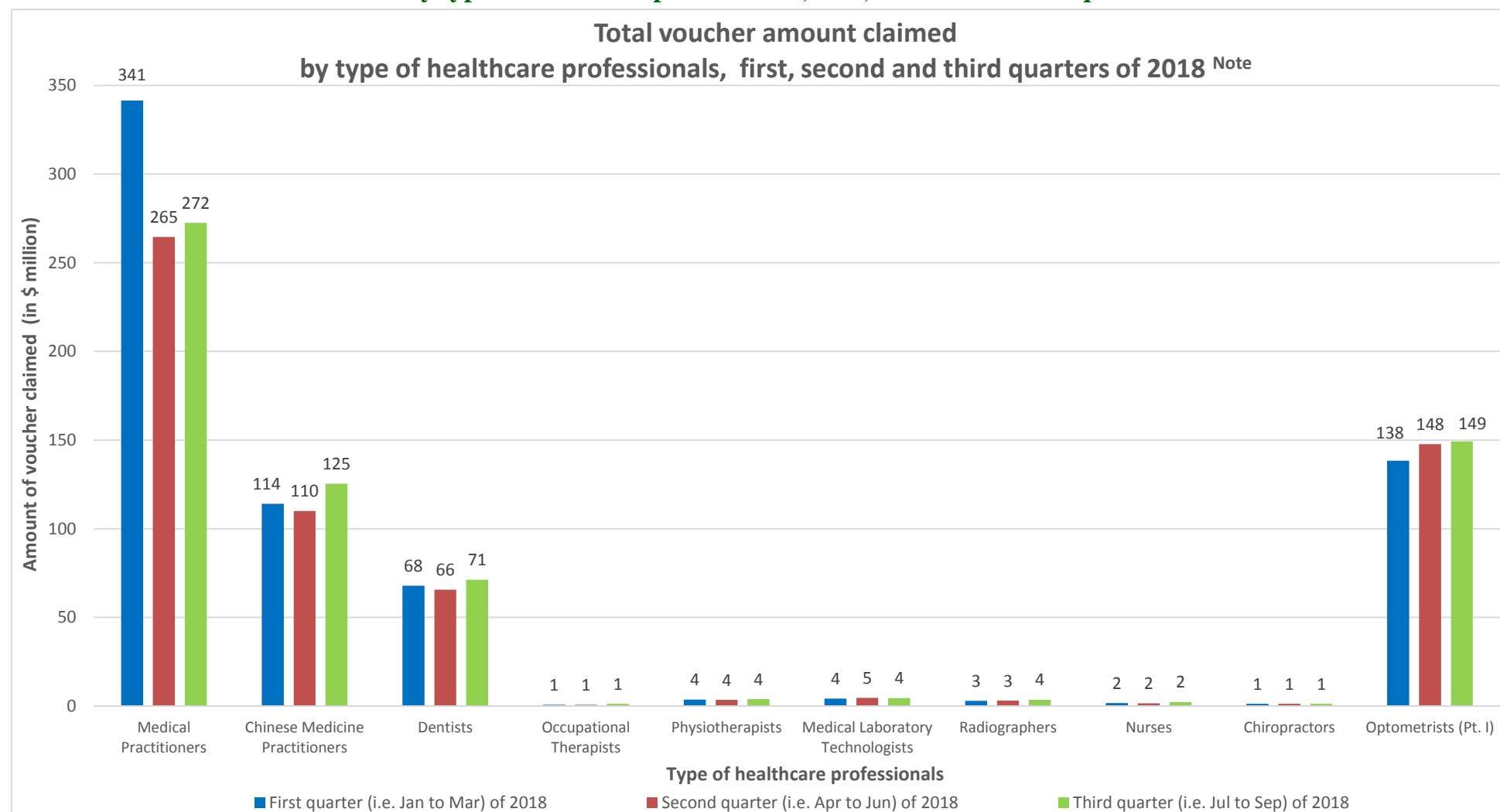
1. The above only reflects the amount of fees settled by vouchers and does not include any out-of-pocket payment (i.e. co-payment) made by elders for each consultation, if any.
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II. Key Statistics on the Elderly Health Care Voucher Scheme for the First, Second and Third Quarters of 2018

A. Number of healthcare professionals in Hong Kong enrolled in the Elderly Health Care Voucher Scheme, first, second and third quarters of 2018



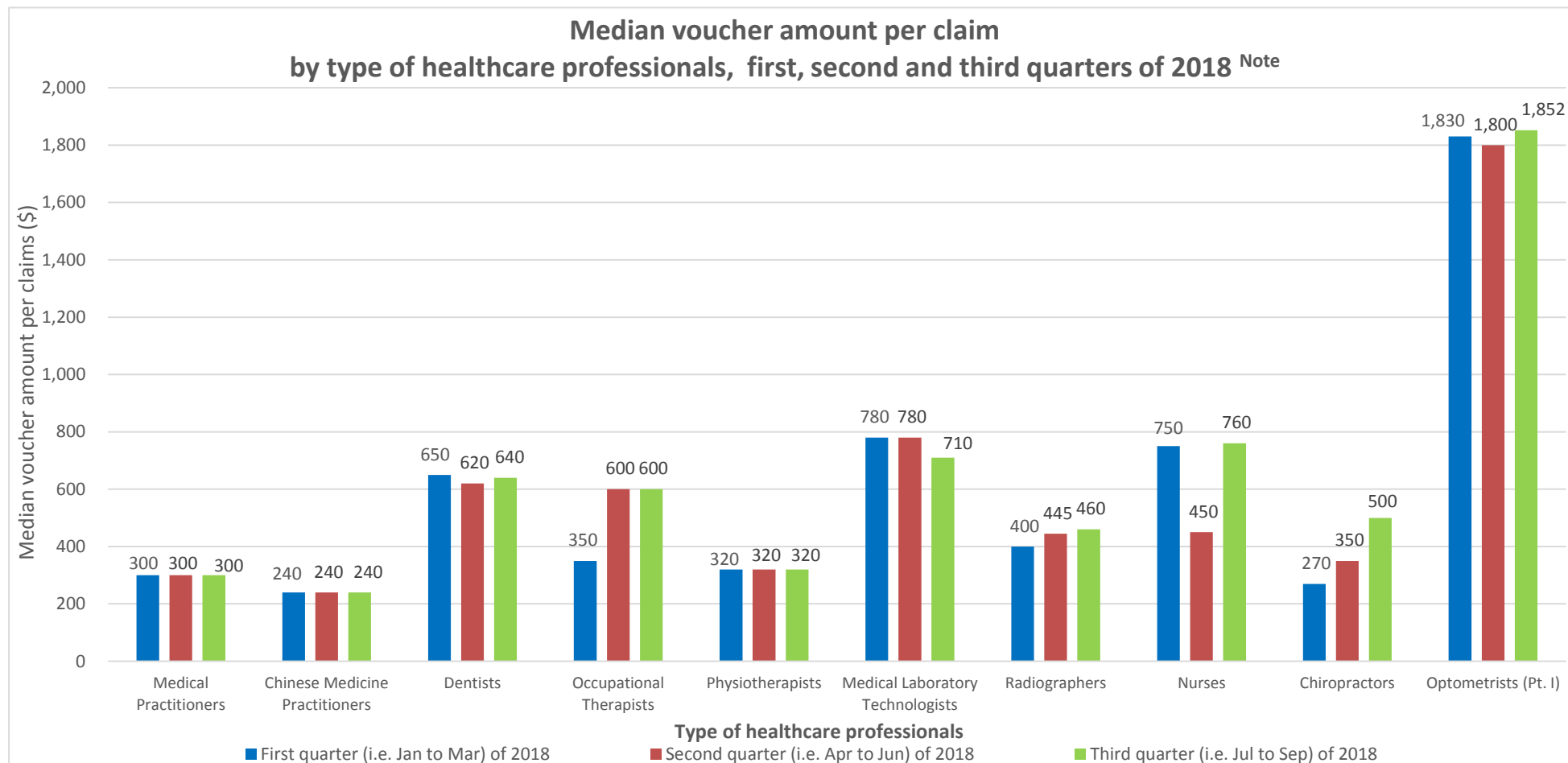
B. Total voucher amount claimed by type of healthcare professionals, first, second and third quarters of 2018



Note:

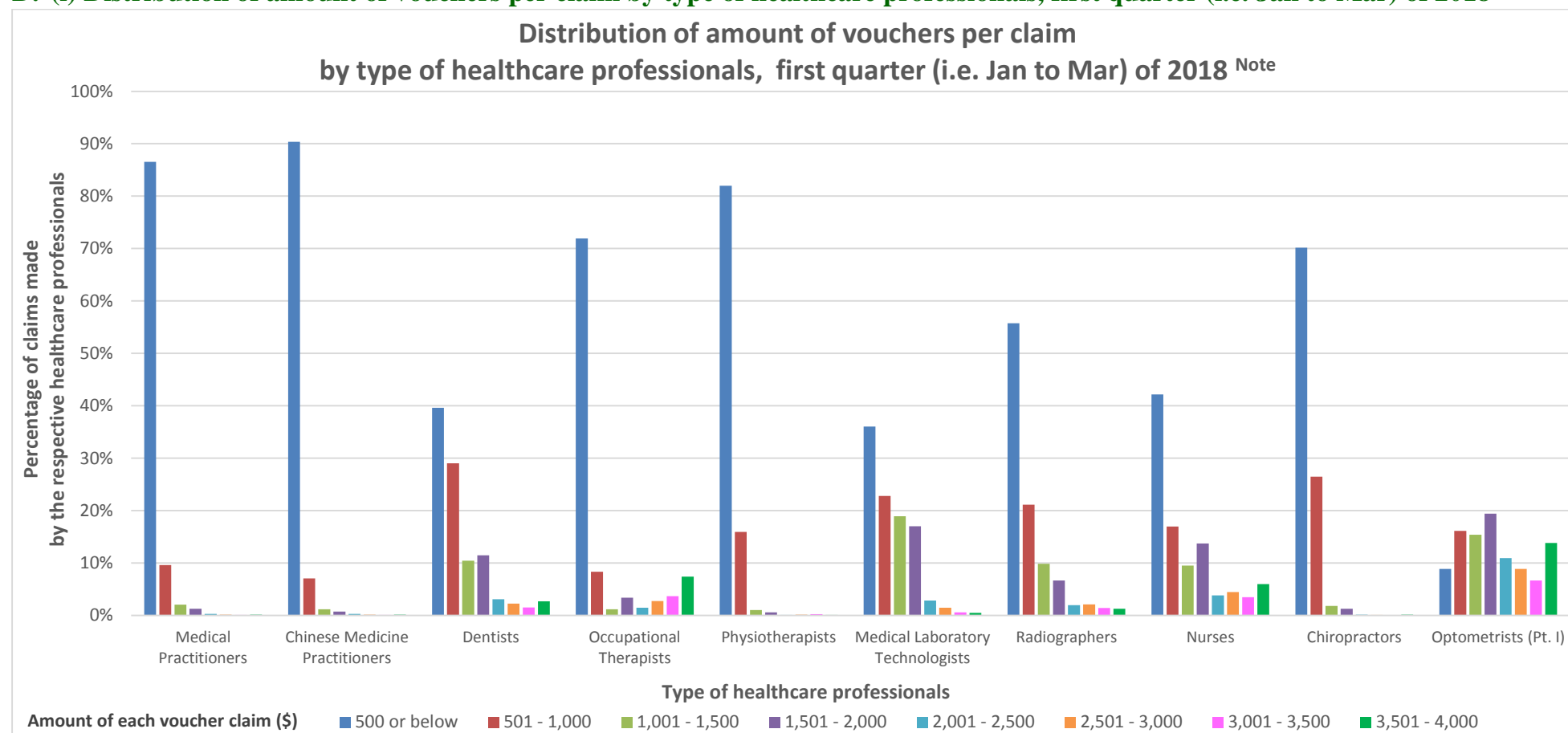
1. The above only reflects the amount of fees settled by vouchers and does not include any out-of-pocket payment (i.e. co-payment) made by elders for each consultation, if any.
2. On 8 June 2018, each eligible elder was provided with an additional voucher amount of \$1,000 on a one-off basis, and the accumulation limit of vouchers was increased to \$5,000 as a regular measure.

C. Median voucher amount per claim by type of healthcare professionals, first, second and third quarters of 2018



- Note:**
1. The above only reflects the amount of fees settled by vouchers and does not include any out-of-pocket payment (i.e. co-payment) made by elders for each consultation, if any.
 2. The above statistical data are compiled based on the actual voucher claims made by the healthcare service providers and should not be interpreted as fees recommended by the Government. The amount of healthcare service fees can be affected by various factors, such as the individual elder's health condition, the complexity of the case, and the healthcare treatment/ management options involved.
 3. On 8 June 2018, each eligible elder was provided with an additional voucher amount of \$1,000 on a one-off basis, and the accumulation limit of vouchers was increased to \$5,000 as a regular measure.

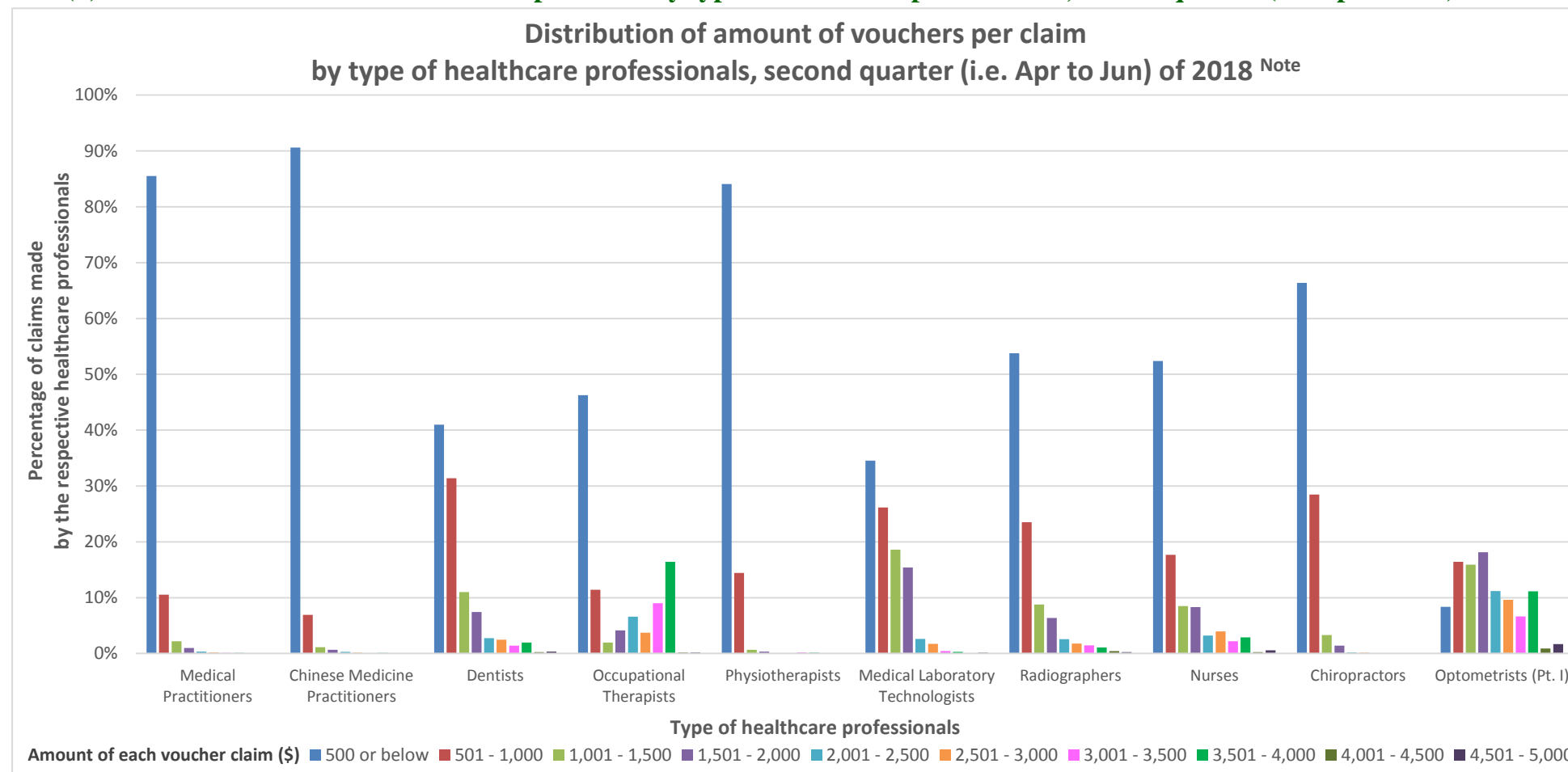
D. (i) Distribution of amount of vouchers per claim by type of healthcare professionals, first quarter (i.e. Jan to Mar) of 2018



Note:

1. The above only reflects the amount of fees settled by vouchers and does not include any out-of-pocket payment (i.e. co-payment) made by elders for each consultation, if any.
2. The above statistical data are compiled based on the actual voucher claims made by the healthcare service providers and should not be interpreted as fees recommended by the Government. The amount of healthcare service fees can be affected by various factors, such as the individual elder's health condition, the complexity of the case, and the healthcare treatment/ management options involved.

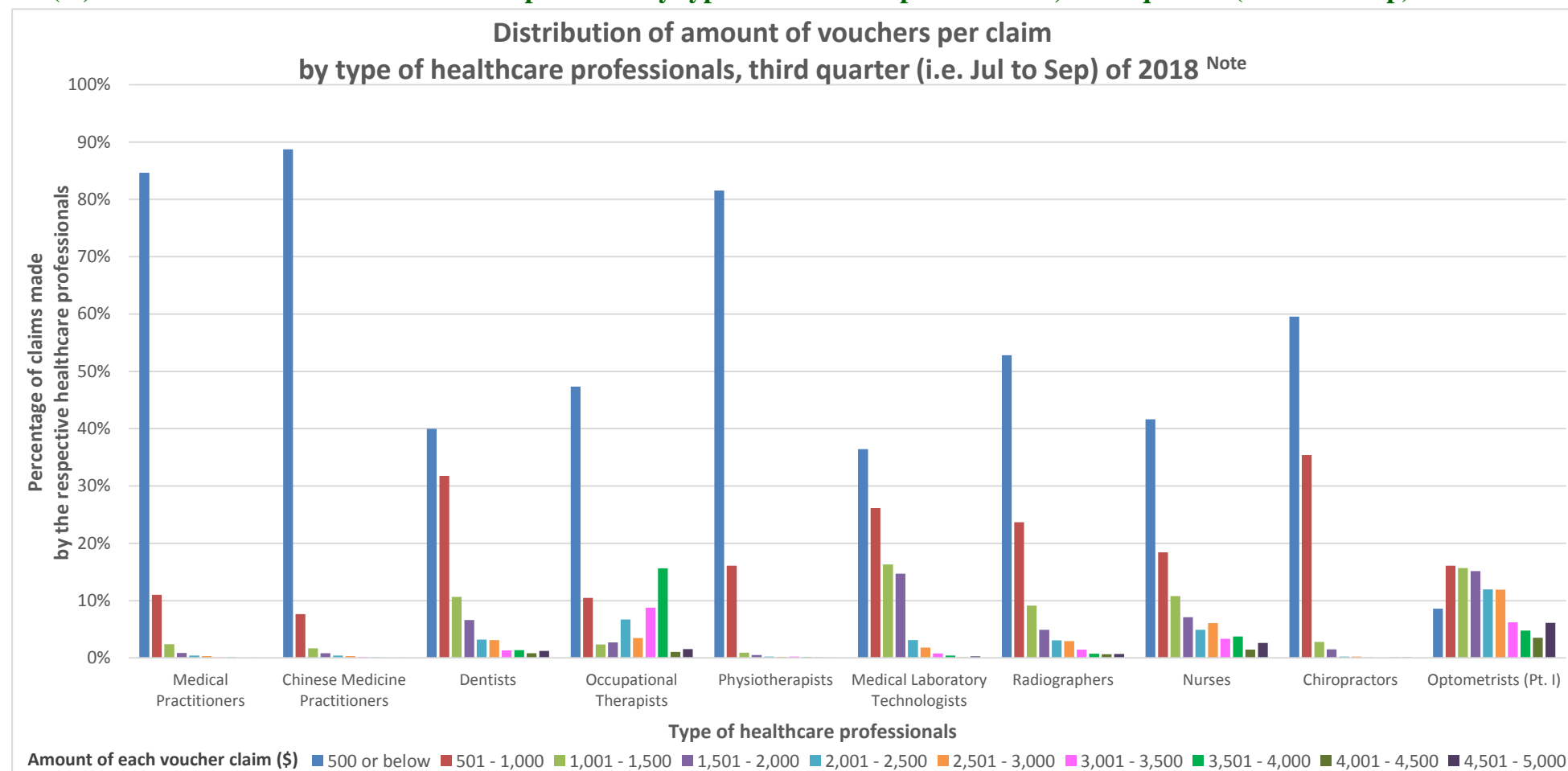
D. (ii) Distribution of amount of vouchers per claim by type of healthcare professionals, second quarter (i.e. Apr to Jun) of 2018



Note:

1. The above only reflects the amount of fees settled by vouchers and does not include any out-of-pocket payment (i.e. co-payment) made by elders for each consultation, if any.
2. The above statistical data are compiled based on the actual voucher claims made by the healthcare service providers and should not be interpreted as fees recommended by the Government. The amount of healthcare service fees can be affected by various factors, such as the individual elder's health condition, the complexity of the case, and the healthcare treatment/ management options involved.
3. On 8 June 2018, each eligible elder was provided with an additional voucher amount of \$1,000 on a one-off basis, and the accumulation limit of vouchers was increased to \$5,000 as a regular measure.

D. (iii) Distribution of amount of vouchers per claim by type of healthcare professionals, third quarter (i.e. Jul to Sep) of 2018



Note:

1. The above only reflects the amount of fees settled by vouchers and does not include any out-of-pocket payment (i.e. co-payment) made by elders for each consultation, if any.
2. The above statistical data are compiled based on the actual voucher claims made by the healthcare service providers and should not be interpreted as fees recommended by the Government. The amount of healthcare service fees can be affected by various factors, such as the individual elder's health condition, the complexity of the case, and the healthcare treatment/ management options involved.
3. On 8 June 2018, each eligible elder was provided with an additional voucher amount of \$1,000 on a one-off basis, and the accumulation limit of vouchers was increased to \$5,000 as a regular measure.

III. Frequently Asked Questions

1. Do the statistics on the median voucher amount per claim by type of healthcare professionals represent the healthcare service fees recommended by the Government?

- The above statistical data are compiled based on the actual voucher claims made by the healthcare service providers and should not be interpreted as fees recommended by the Government. The amount of healthcare service fees can be affected by various factors, such as the individual elder's health condition, the complexity of the case, and the healthcare treatment/ management options involved.

2. Would the Government regulate the fee items included and the levels of fees charged by healthcare service providers enrolled under the Elderly Health Care Voucher Scheme (HCVS)?

- At present, vouchers can be used for private primary care services provided by 10 categories of locally registered healthcare professionals, including medical practitioners, Chinese medicine practitioners, dentists, occupational therapists, physiotherapists, medical laboratory technologists, radiographers, nurses, chiropractors and optometrists. As healthcare services provided to different patients by healthcare professionals come in different forms, it may not be practicable to regulate the fee items included and the levels of fees charged by all healthcare service providers enrolled under the HCVS.
- However, the Department of Health (DH) regularly reminds participating healthcare service providers of the proper practices in making voucher claims, including not imposing different levels of fees based on whether vouchers are used or not, enhancing the transparency of service charges, clearly explaining the charges to patients before providing services, and allowing patients to choose from different healthcare treatment/ management options which may have different service charges upon explanation by healthcare staff.
- Besides, registered healthcare professionals must abide by their codes of professional conduct and fulfil their professional obligations and ethics.
- The DH will also continue to enhance public education through different channels to remind elders to ask healthcare service providers to advise on the service fees before giving consent to using vouchers.

3. How should elders protect their own interests when using vouchers?

- It is stipulated in the terms and conditions of the Elderly Health Care Voucher Scheme Agreement that participating healthcare service providers shall ensure that

the voucher amount used by an elder does not exceed the fee for the healthcare service received on a particular occasion. They shall not charge the elder any fees for creating a voucher account or using vouchers.

- Before using vouchers, elders are advised to ask the healthcare service provider to advise on the service details and the charges involved. Elders have the absolute discretion to decide whether to use vouchers or not. If vouchers are used, elders also have the absolute discretion to determine the voucher amount to be used each time.
- Before signing a consent form to use vouchers, elders should check the information on the consent form, including the voucher amount to be used, name of the healthcare service provider, as well as the name and Hong Kong Identity Card Number of the elder himself/herself. Elders should also provide a contact phone number on the consent form so that DH staff can verify the details of their use of vouchers when necessary.

4. If a healthcare service provider participating in the HCVS is found in breach of the law/ scheme rules, what actions will be taken by the DH?

- Generally speaking, if any participating healthcare service provider fails to comply with the terms and conditions of the HCVS Agreement, the relevant voucher claims will not be reimbursed by the Government. In case the reimbursement has been made, the Government will recover the amount from the healthcare service provider concerned. The DH will also issue advisory letters/ warning letters to relevant healthcare service providers as appropriate. A healthcare service provider suspected of fraud or professional misconduct will be referred by the DH to the Police and/or relevant professional regulatory board/ council for follow-up, and might be disqualified from participating in the HCVS.

5. How can members of the public lodge a complaint against a participating healthcare service provider for suspected violation of the rules under the HCVS?

- To report any suspected cases, you can provide relevant information and details to the DH by phone (2838 2311), email (hcvu@dh.gov.hk), fax (3582 4115) or mail (1/F, Central District Health Centre, 1 Kau U Fong, Central, Hong Kong). For the complaints received, the DH will gather further information and investigate based on the situation.