

Shared Use of Vouchers between Spouses

Demonstration on eHealth System (Subsidies)



Change Details

To facilitate shared use of vouchers between spouses, the below functions have been enhanced in the eHealth System (Subsidies)(**Note**) -

Service Provider Platform

(A) Spouse Declaration

- (i) In-person Declaration – Inserting Smart ID Card
- (ii) In-person Declaration – Manual Input
- (iii) Declaration via Consent Form
- (iv) New Registration - For Voucher Recipient without Validated Account
- (v) Additional Checking / Special Handling

(B) Claim

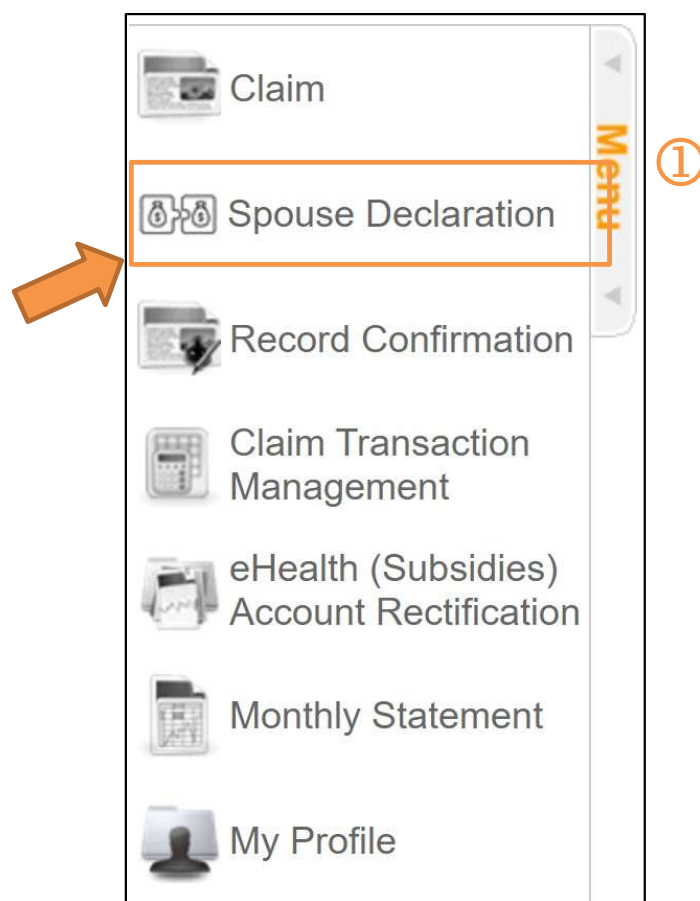
- (i) Sharing Spouse Voucher
- (ii) Consent to Use Voucher (Paper form)
- (iii) Sharing Spouse Voucher (Special Handling)
- (iv) Claim without Linked Spouse

****Note: The information displayed in the system is for demonstration only. The system layout might be subject to changes.**

Service Provider Platform

- (A) Spouse Declaration

Service Provider Platform – Spouse Declaration



1. "Spouse Declaration"

- Menu item **"Spouse Declaration"** was added

Service Provider Platform – Spouse Declaration

Choose method for making spouse declaration

The screenshot shows the 'Spouse Declaration' page in the Health System (Subsidies) platform. The user is logged in as 'CHAN, FIVE MAN'. The page title is 'Spouse Declaration' with a subtitle 'Practice Hong Kong Central Library - Booth 2 (2)'. The instruction says 'Please select the method for making spouse declaration'. Below this, there is a note: 'For mentally incapacitated voucher recipient(s), declaration should be made via consent form, which should be completed by guardian(s) as appropriate'. There are two main options: 'In-person declaration' with a 'Make Declaration' button, and 'Declaration via consent form' with a 'Record declaration and consent' button. The interface includes a stethoscope logo and the '醫健通 ehealth' logo.

Health System (Subsidies)

CHAN, FIVE MAN

Home Inbox Logout

Menu

Spouse Declaration

Practice Hong Kong Central Library - Booth 2 (2)

Please select the method for making spouse declaration

For mentally incapacitated voucher recipient(s), declaration should be made via consent form, which should be completed by guardian(s) as appropriate

In-person declaration

Make Declaration

Declaration via consent form

Record declaration and consent

Two declaration means:

1. In-person Declaration (親身作出聲明)
2. Declaration via Consent Form
(透過「擁有配偶關係的醫療券使用者
共用醫療券同意書」作出聲明)

Service Provider Platform – Spouse Declaration

(i) In-person Declaration – Reading Smart ID Card

Service Provider Platform – Spouse Declaration

In-person declaration

The screenshot shows the 'Spouse Declaration' page in the Health System (Subsidies) platform. The user is logged in as CHAN, FIVE MAN. The page title is 'Spouse Declaration' with a subtitle 'Practice Hong Kong Central Library - Booth 2 (2)'. It instructs the user to 'Please select the method for making spouse declaration'. Two options are presented: 'In-person declaration' and 'Declaration via consent form'. The 'In-person declaration' option is highlighted with an orange box and a circled '1', indicating the next step. The 'Declaration via consent form' option is also visible.

Health System (Subsidies)

CHAN, FIVE MAN

Home Inbox Logout

Menu

Spouse Declaration

Practice Hong Kong Central Library - Booth 2 (2)

Please select the method for making spouse declaration

For mentally incapacitated voucher recipient(s), declaration should be made via consent form, which should be completed by guardian(s) as appropriate

In-person declaration

Declaration via consent form

Make Declaration

Record declaration and consent

1. Click “Make Declaration” to start the declaration

Service Provider Platform – Spouse Declaration

In-person declaration > Voucher Recipient > Read Smart ID Card

eHealth System UAT
(Subsidies)

KUNG, CHUNG KONG
Home Inbox Logout

繁體 English
醫健通
eHealth
香港特別行政區政府 HKSARGOVT
24/11/2025 16:41:46

Menu

Spouse Declaration

Practice KUNG CHUNG KONG - Branch 2 Clinic*** (2)

Document Type

☒ Hong Kong Identity Card ☐ Certificate of Exemption ②

Please instruct the Voucher Recipient 1 to insert Smart ID card to

③ i. make declaration on their spousal relationship under monogamous marriage recognized by the laws of Hong Kong, and
ii. give consent when either of their eHealth (Subsidies) Accounts has no more health care vouchers, any vouchers remaining in the other of their eHealth (Subsidies) Accounts may be used by either of them

1 2

Insert Smart ID Card

Cancel x Read Smart ID Card ④

Privacy Policy | Important Notices | System Maintenance

- Choose between 2 identity document types
 - Hong Kong Identity Card (HKIC) **[Default]**
 - Certificate of Exemption (CoE)

- Instruction and highlight on the declaration/consent for the 1st Voucher Recipient (VR1)

Two input means for selecting HKIC:

- Smart ID Card Reader **[Default]**
- OR
- Manual Input

- Ask VR1 to insert Smart ID Card into card reader

Service Provider Platform – Spouse Declaration

In-person declaration

>

Voucher Recipient

>

Read Smart ID Card



Spouse Declaration

Practice Hong Kong Central Library - Booth 2 (2)

Document Type

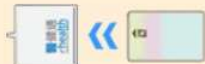
☒ Hong Kong Identity Card

☐ Certificate of Exemption

Please instruct the **Voucher Recipient 1** to insert Smart ID card to
i. make declaration on their spousal relationship under monogamous marriage recognized
ii. give consent to share the vouchers in their accounts with each other when there are no n



Insert Smart ID Card



5

Cancel ✕

Read Smart ID Card ▶

Privacy Policy | Important Notices | System Maintenance

Health System (Subsidies)

CHAN, FIVE MAN

Home Inbox Logout



Spouse Declaration

Practice Hong Kong Central Library - Booth 2 (2)

Document Type

☒ Hong Kong Identity Card

☐ Certificate of Exemption

Please instruct the **Voucher Recipient 1** to insert Smart ID card to
i. make declaration on their spousal relationship under monogamous marriage re
ii. give consent to share the vouchers in their accounts with each other when there



Insert Smart ID Card



Cancel ✕

Read Smart ID Card ▶

Privacy Policy | Important Notices | System Maintenance



30/06/2023 15:36:07



Smart ID has been inserted into card reader and the VR has agreed to let the system gain access to the data stored in the chip.

Confirm

Cancel

5. Click “Read Smart ID Card” after inserting the Smart ID Card into Card reader

Service Provider Platform – Spouse Declaration

In-person declaration

>

Voucher Recipient

>

Read Smart ID Card

eHealth System (Subsidies)

CHAN, FIVE MAN

Home Inbox Logout

繁體 English 醫健通 ehealth 香港特別行政區政府 HK SAR GOVT 30/06/2023 15:26:33

Spouse Declaration

Practice Hong Kong Central Library - Booth 2 (2)

Please enter the information

Document Type Hong Kong Identity Card

Name LO, LO PAK (盧姥柏)

Date of Birth 20-09-1932

Gender Male

Date of Issue 19-06-18

HKIC No. TK807444(2)

HKIC Symbol ☐ A ☐ C ☐ R ☐ U ☐ Others

Contact No. +852 92123960 Language preference for SMS ☒ 中文 ☐ English

(Please ask the voucher recipient to provide his/her contact number, or one belonging to his/her relative or carer, that can receive SMS notification)

Cancel X Next

Privacy Policy | Important Notices | System Maintenance

6. For **validated account**, EHCP should ask and input the below information of VR1:
- **HKIC Symbol**
 - **HK Contact Mobile Number**
 - **Preferred Language for SMS (Default: Chinese)**

Service Provider Platform – Spouse Declaration

In-person declaration

> Voucher Recipient

> Validated Account

eHealth System (Subsidies)

CHAN, FIVE MAN

Home Inbox Logout

30/06/2023 15:22:58

Spouse Declaration

Read Smart ID Card Fail
Operation stopped at your request. [021301-ERR001]

Practice Hong Kong Central Library - Booth 2 (2)

☒ Document Type
☒ Hong Kong Identity Card ☐ Certificate of Exemption

Please instruct the Voucher Recipient 1 to insert Smart ID card to

i. make declaration on their spousal relationship under monogamous marriage re

ii. give consent to share the vouchers in their accounts with each other when there

1 **2**

Insert Smart ID Card

Cancel ☒ Read Smart ID Card

Completed.
Please return the Smart ID Card to the card holder.

Privacy Policy | Important Notices | System Maintenance

Service Provider Platform – Spouse Declaration

In-person declaration > Spouse > Read Smart ID Card

Spouse Declaration

Practice **MAN PRUNE Clinic (1)**

☒ Document Type
☒ Hong Kong Identity Card ☐ Certificate of Exemption

Please instruct the **Voucher Recipient 2** to insert Smart ID card to

- i. make declaration on their spousal relationship under monogamous marriage recognized by the laws of Hong Kong, and
- ii. give consent when either of their eHealth (Subsidies) Accounts has no more health care vouchers, any vouchers remaining in the other of their eHealth (Subsidies) Accounts may be used by either of them

  ⑦

Insert Smart ID Card

 << 

Privacy Policy | Important Notices | System Maintenance

Declaration/consent by spouse (VR2)

*The declaration of spouse workflow & available option are same as those for VR1

Service Provider Platform – Spouse Declaration

In-person declaration

Confirmation

eHealth System
(Subsidies)

CHAN, FIVE MAN

Home Inbox Logout



醫健通
eHealth
30/06/2023 15:42:59

Spouse Declaration

Practice Hong Kong Central Library - Booth 2 (2)

Spouse Information(TBC)

	Voucher Recipient 1	Voucher Recipient 2
Name	LO, LO PAK(盧培柏)	LEE, LEE(李季)
Document Type	Hong Kong Identity Card	Hong Kong Identity Card
Document No.	TK807444(2) / A	B440829(8) / A
Date of Birth / Gender	20-09-1932 / Male	01-01-1950 / Female
Date of Issue	19-06-18	01-01-20
Contact No. / Language	60831910 / English	92123960 / 中文
Declaration Means	Insert Smart ID Card	Insert Smart ID Card

Verification Checklist

1. The identities of the two voucher recipients have been verified by checking against the particulars on identity documents.
2. The two voucher recipients have declared that they are in a spousal relationship under monogamous marriage recognized by the laws of Hong Kong.
3. The two voucher recipients have given consent that when either of their eHealth (Subsidies) Accounts has no more health care vouchers, any vouchers remaining in the other of their eHealth (Subsidies) Accounts may be used by either of them.
4. The two voucher recipients have read and agreed to the content of the consent to share use (including the Statement of Purpose and the transfer and release of personal data). / (for illiterate voucher recipients) The consent (including the Statement of Purpose and the transfer and release of personal data) has been read over and explained to the voucher recipients who have agreed to its content. / (for mentally incapacitated service recipient) The consent (including the Statement of Purpose and the transfer and release of personal data) has been read and completed by the guardian of the voucher recipients.
5. The two voucher recipients have further given consent, after their respective eHealth (Subsidies) Accounts are paired up, to reveal the balance of vouchers in their respective eHealth (Subsidies) Account to one another for the purpose of facilitating each other's advanced planning of the use of vouchers.
6. The voucher recipients have declared that all information provided in this consent is true, accurate and complete, and have confirmed their understanding that if they knowingly or wilfully make any false statement, withhold any information, or otherwise mislead the Government for the purpose of sharing the vouchers in their eHealth (Subsidies) Accounts, they will be liable for prosecution. The voucher recipients have further confirmed that they fully understand their obligations and liability under this consent.
7. I have recorded all the above declaration and consent made by the voucher recipients on the web-based eHealth System (Subsidies) Platform.

☐ I, hereby certify that the above verifications are complete

Cancel Confirm

1. The identities of the two voucher recipients have been verified by checking against the particulars on identity documents.
2. The two voucher recipients have declared that they are in a spousal relationship under monogamous marriage recognized by the laws of Hong Kong.
3. The two voucher recipients have given consent that when either of their eHealth (Subsidies) Accounts has no more health care vouchers, any vouchers remaining in the other of their eHealth (Subsidies) Accounts may be used by either of them.
4. The two voucher recipients have read and agreed to the content of the consent to share use (including the Statement of Purpose and the transfer and release of personal data). / (for illiterate voucher recipients) The consent (including the Statement of Purpose and the transfer and release of personal data) has been read over and explained to the voucher recipients who have agreed to its content. / (for mentally incapacitated service recipient) The consent (including the Statement of Purpose and the transfer and release of personal data) has been read and completed by the guardian of the voucher recipients.
5. The two voucher recipients have further given consent, after their respective eHealth (Subsidies) Accounts are paired up, to reveal the balance of vouchers in their respective eHealth (Subsidies) Account to one another for the purpose of facilitating each other's advanced planning of the use of vouchers.
6. The voucher recipients have declared that all information provided in this consent is true, accurate and complete, and have confirmed their understanding that if they knowingly or wilfully make any false statement, withhold any information, or otherwise mislead the Government for the purpose of sharing the vouchers in their eHealth (Subsidies) Accounts, they will be liable for prosecution. The voucher recipients have further confirmed that they fully understand their obligations and liability under this consent.
7. I have recorded all the above declaration and consent made by the voucher recipients on the web-based eHealth System (Subsidies) Platform.

☐ I, hereby certify that the above verifications are completed

- Details of VRs1&2 are displayed for final checking
- See verification checklist and click checkbox to confirm actions completed

8. Click "Confirm" to complete the spouse declaration

Service Provider Platform – Spouse Declaration

In-person declaration > Complete Declaration

eHealth System (Subsidies)

CHAN, FIVE MAN

Home Inbox Logout

30/06/2023 15:43:35

Spouse Declaration

Declaration completed!

Practice Hong Kong Central Library - Booth 2 (2)

Spouse Information(TBC)

	Voucher Recipient 1	Voucher Recipient 2
Name	LO, LO PAK(盧銘柏)	LEE, LEE(李李)
Document Type	Hong Kong Identity Card	Hong Kong Identity Card
Document No.	TK807444(2) / A	B440829(8) / A
Date of Birth / Gender	20-09-1932 / Male	01-01-1950 / Female
Date of Issue	19-06-18	01-01-20
Contact No. / Language	60831910 / English	92123960 / 中文
Declaration Means	Insert Smart ID Card	Insert Smart ID Card

Return

Privacy Policy | Important Notices | System Maintenance

- Spouse declaration completed
- Both VRs will receive SMS upon successful account linkage

English Version

[EHVS] You (LO P*) and LEE L* declared spousal relationship and consented to share use health care vouchers. Accounts successfully linked on 27/07/2023 at the practice of CHAN TAI MAN (Tel: 23002344). EHVS hotline: 28382311 [Do not reply]

Chinese Version

[醫療券]你(盧*柏)與李*聲明配偶關係，並同意共用醫療券。你們的戶口於2023年7月27日在陳大文的執業地點(電話：23002344)連結成功。計劃熱線：28382311 [請勿回覆]

Service Provider Platform – Spouse Declaration

(ii) In-person Declaration – Manual Input



1. Manual input of HKIC and Date of Birth (DOB) in accordance with the format on HKIC (i.e. DD-MM-YYYY)
2. Choose reason for using manual input for HKIC is mandatory ***[Pull-down menu of reasons list is available]***
 - The chip on Smart ID card cannot be read
 - Technical issue, e.g. card reader is not working
 - Others, please specify

★ may switch to use “Smart ID Card reader”

Service Provider Platform – Spouse Declaration

In-person declaration > Voucher Recipient > Manual Input > Certificate of Exemption

Spouse Declaration

Practice **MAN PRUNE Clinic (1)**

Document Type

☒ Hong Kong Identity Card ☐ Certificate of Exemption ③

Please instruct the **Voucher Recipient 1** to insert Smart ID card to

i. make declaration on their spousal relationship under monogamous marriage recognized by the laws of Hong Kong, and

ii. give consent when either of their eHealth (Subsidies) Accounts has no more health care vouchers, any vouchers remaining in the other of their eHealth (Subsidies) Accounts may be used by either of them

1 **2**

Insert Smart ID Card

Cancel **Read Smart ID Card**



[Privacy Policy](#) | [Important Notices](#) | [System Maintenance](#)

3. Search by CoE
- Manual Input only

Service Provider Platform – Spouse Declaration

Declaration via Consent Form

Service Provider Platform – Spouse Declaration

Declaration via Consent Form

Menu

 **Spouse Declaration**

Practice **MAN PRUNE Clinic (1)**

Please select the method for making spouse declaration

For mentally incapacitated voucher recipient(s), declaration should be made via consent form, which should be completed by guardian(s) as appropriate

In-person declaration



[Make Declaration](#)

Declaration via consent form



[Record declaration and consent](#)

Privacy Policy | Important Notices | System Maintenance

1. Click “Make Declaration” to start the declaration

Service Provider Platform – Spouse Declaration

Declaration via Consent Form

>

Voucher Recipient

>

Manual Input

>

Hong Kong Identity Card

eHealth System UAT (Subsidies)

KUNG, CHUNG KONG

Home Inbox Logout

繁體 English 醫健通 eHealth 香港特別行政區政府 HKSAR GOVT 24/11/2025 17:12:28

Menu

Spouse Declaration

Practice KUNG CHUNG KONG - Branch 2 Clinic*** (2)

Document Type

☒ Hong Kong Identity Card ☐ Certificate of Exemption

Please instruct **Voucher Recipient 1** to insert Smart ID card to search eHealth (Subsidies) Account and record the declaration made via consent form

1 2

Insert Smart ID Card

Cancel Read Smart ID Card

Privacy Policy | Important Notices | System Maintenance

2. Choose between 2 identity document types
 - HKIC **[Default]**
 - CoE
3. Instruction for the 1st Voucher Recipient (VR1)
4. Ask VR1 to insert the HKIC into smart card reader

Service Provider Platform – Spouse Declaration

Declaration via Consent Form > Voucher Recipient > Validated Account

Health System COVID-19 DEMO (Subsidies)

CHAN, FIVE MAN

Home Inbox Logout

醫健通 ehealth

30/06/2023 15:26:33

Spouse Declaration

Practice Hong Kong Central Library - Booth 2 (2)

Please enter the information

Document Type	Hong Kong Identity Card
Name	LO, LO PAK (盧焯柏)
Date of Birth	20-09-1932
Gender	Male
Date of Issue	19-06-18
HKIC No.	TK807444(2)
HKIC Symbol	☐ A ☐ C ☐ R ☐ U ☐ Others
Contact No.	+852 92123960

Language preference for SMS ☒ 中文 ☐ English

(Please ask the voucher recipient to provide his/her contact number, or one belonging to his/her relative or carer, that can receive SMS notification)

Cancel X Next

Privacy Policy | Important Notices | System Maintenance

5. For **validated account**, EHCP should ask and input the below information of VR1 :

- **HKIC Symbol**
- **HK Contact Mobile Number**
- **Preferred Language for SMS (Default: Chinese)**

5

Service Provider Platform – Spouse Declaration

Declaration via Consent Form > Voucher Recipient > Validated Account

eHealth System (Subsidies)

CHAN, FIVE MAN

Home Inbox Logout

醫健通 ehealth

30/06/2023 15:29:33

Spouse Declaration

Practice Hong Kong Central Library - Booth 2 (2)

Confirm Details

Document Type	Hong Kong Identity Card
Name	SURNAME, GIVEN NAME (陳小明)
DOB	20-09-1932
Gender	Male
Date of Issue	19-06-18
HKIC No. / Symbol	TK807444(2) / A
Contact No.	60831910
Language preference for SMS	English

⑥

Back Confirm

Privacy Policy | Important Notices | System Maintenance

6. Confirm the details of voucher recipient and input information

Service Provider Platform – Spouse Declaration

Declaration via Consent Form

> Voucher Recipient

> Manual Input

> Hong Kong Identity Card

eHealth System UAT (Subsidies)

KUNG, CHUNG KONG

Home Inbox Logout

Menu

Spouse Declaration

Practice KUNG CHUNG KONG - Branch 2 Clinic*** (2)

Document Type

☒ Hong Kong Identity Card ☐ Certificate of Exemption

Please instruct Voucher Recipient 1 to submit the consent form, and search the eHealth (Subsidies) account of Voucher Recipient 2 with the copy HKIC or Certificate of Exemption attached, and record the declaration made via the consent form

1 2

Manual Input Help

HKIC No. D983473(8)

Date of Birth 01011952

Cancel X Search

Privacy Policy | Important Notices | System Maintenance

7. Choose between 2 identity document types

- HKIC **[Default]**
- CoE

8. Instruction and highlight on the declaration/consent for the 2nd VR (VR2)

9. Input HKIC & DOB for searching

- Manual Input only

10. Search

*The declaration of spouse workflow & available option are same as those for VR1

Service Provider Platform – Spouse Declaration

Declaration via Consent Form

> Confirmation

eHealth System UAT
(Subsidies)

KUNG, CHUNG KONG

Home Inbox Logout

Spouse Declaration

Practice KUNG CHUNG KONG - Branch 2 Clinic*** (2)

Spouse Information

	Voucher Recipient 1	Voucher Recipient 2
Name	HO, BANANA (何香薰)	LEE, PEAR (李梨)
Document Type	Hong Kong Identity Card	Hong Kong Identity Card
Document No.	F024467(4) / A	D983473(8) / A
Date of Birth / Gender	1950 / Male	01-01-1952 / Female
Date of Issue	01-01-20	01-01-22
Contact No. / Language	+852 98765432 / 中文	+852 65432123 / 中文
Declaration Means	Consent Form	Consent Form

Verification Checklist

1. The identities of the two voucher recipients have been verified by checking against the particulars on their identity documents, including a copy of the identity document of the voucher recipient who does not attend the EHCP's place of practice.
2. The "Consent of Sharing Health Care Vouchers between Voucher Recipients in Spousal Relationship" has been duly completed and signed.
3. The "Consent of Sharing Health Care Vouchers between Voucher Recipients in Spousal Relationship" and copy of identification document of the voucher recipient not attending in person has been kept for any future inspection.

☒ I, hereby certify that the above verifications are completed and the consent form is collected for audit purpose.

Cancel

Confirm



繁體 English
醫健通
eHealth
香港特別行政區政府 HKSAR GOVT

24/11/2025 17:24:58

Verification Checklist

1. The identities of the two voucher recipients have been verified by checking against the particulars on their identity documents, including a copy of the identity document of the voucher recipient who does not attend the EHCP's place of practice.
2. The "Consent of Sharing Health Care Vouchers between Voucher Recipients in Spousal Relationship" has been duly completed and signed.
3. The "Consent of Sharing Health Care Vouchers between Voucher Recipients in Spousal Relationship" and copy of identification document of the voucher recipient not attending in person has been kept for any future inspection.

I, hereby certify that the above verifications are completed and the consent form is collected for audit purpose.

11. Details of VR1 & VR2 are displayed for final checking

12. See verification checklist and click checkbox to confirm actions completed

13. Click "Confirm" to complete the spouse declaration

Service Provider Platform – Spouse Declaration

Declaration via Consent Form > Complete Declaration

Health System (Subsidies)

CHAN, FIVE MAN

Home Inbox Logout

Menu

Spouse Declaration

Declaration completed!

Practice Hong Kong Central Library - Booth 2 (2)

Spouse Information(TBC)

	Voucher Recipient 1	Voucher Recipient 2
Name	SURNAME, GIVEN NAME(陳小明)	WONG, ALEXA(黃婷婷)
Document Type	Hong Kong Identity Card	Hong Kong Identity Card
Document No.	W377796(3) / A	NY076535(4) / A
Date of Birth / Gender	01-01-1950 / Male	01-01-1950 / Female
Date of Issue	01-01-20	01-01-20
Contact No. / Language	60831910 / 中文	60831910 / 中文
Declaration Means	Consent Form	Consent Form

Return

Privacy Policy | Important Notices | System Maintenance

Spouse declaration completed

Both VRs will receive SMS upon successful account linkage

English Version

[EHVS] You (CHAN M*) and WONG A* declared spousal relationship and consented to share use health care vouchers. Accounts successfully linked on 27/07/2023 at the practice of CHAN TAI MAN (Tel: 23002344). EHVS hotline: 28382311 [Do not reply]

Chinese Version

[醫療券]你(陳*明)與黃*婷聲明配偶關係，並同意共用醫療券。你們的戶口於2023年7月27日在陳大文的執業地點(電話：23002344)連結成功。計劃熱線：28382311[請勿回覆]

Service Provider Platform – Spouse Declaration

(iv) New Registration

- for Voucher Recipient without Validated Account

Service Provider Platform – Spouse Declaration

New registration



Hong Kong Identity Card

eHealth System (Subsidies)

CHAN, FIVE MAN

Home Inbox Logout

30/06/2023 14:52:51

Spouse Declaration

Practice Hong Kong Central Library - Booth 2 (2)

Please enter the information

Document Type Hong Kong Identity Card

Name in English CHAN SIU MING
(Surname) (Given name)

Chinese Commercial Code 1234 5678 1324 Chinese Name

Chinese Name

Date of Birth 01-01-1950

Gender

Female 女 Male 男

Date of Issue 01-01-2017

HKIC No. W377796(3)

HKIC Symbol ☐ A ☐ C ☐ R ☐ U ☐ Others

Contact No. +852 92123960 Language preference for SMS ☒ 中文 ☐ English

(Please ask the voucher recipient to provide his/her contact number, or one belonging to his/her relative or carer, that can receive SMS notification)

Cancel X Next

Privacy Policy | Important Notices | System Maintenance

For **new registration** by using **HKIC**, please input the below information:

- Gender
- HKIC Symbol
- HK Contact Mobile No.
- Preferred Language for SMS (Default: Chinese)

Service Provider Platform – Spouse Declaration

New registration



Certificate of Exemption

Spouse Declaration

Practice **MAN PRUNE Clinic (1)**

Please enter the information

Serial No. ☐ Not Provided

Reference [Specific Format](#)

Date of Issue

Name in English

(Surname) (Given name)

Chinese Name

Gender

☒ Female ☐ Male

HKIC No.

Date of Birth

Date of Birth Type

Contact No.

☒ Date of Birth reported ☐ Date of Birth reported on travel document

Please select Language preference for SMS ☒ 中文 ☐ English

(Please ask the voucher recipient to provide his/her contact number, or one belonging to his/her relative or carer, that can receive SMS notification)

[Cancel](#) [Next](#)

Privacy Policy | Important Notices | System Maintenance

For **new registration** by using **CoE**, please input the below information:

- Serial No.
- Reference
- Date of Issue
- Name in English
- Name in Chinese
- Gender
- HKIC No.
- Date of Birth
- HK Contact Mobile No.
- Preferred Language for SMS (Default: Chinese)

Service Provider Platform – Spouse Declaration

(v) Additional Checking / Special Handling

Service Provider Platform – Spouse Declaration

Scenario 1: Records with SAME Gender

Spouse Declaration

Practice: **MAN PRUNE Clinic (1)**

Spouse Information

	Voucher Recipient 1	Voucher Recipient 2
Name	CHAN, TAI MAN	LEE, TAI MAN
Document Type	Hong Kong Identity Card	Hong Kong Identity Card
Document No.	A000111(5) / A	A000222(7) / A
Date of Birth / Gender	01-01-1900 / <u>Male</u>	01-01-1900 / <u>Male</u>
Date of Issue		
Contact No. / L		
Declaration Me		

Confirmation

The records in the system show the two voucher recipients are of the same gender. Please verify their personal particulars with the records before proceeding.

☒ If the gender record(s) in the system is incorrect, the concerned voucher recipient(s) should be asked to submit [Form on Change of Particulars in eHealth \(Subsidies\) accounts](#) to Department of Health.

Verification

- The identity documents
- The two v
- The two voucher recipients have given consent that when either of their eHealth (Subsidies) Accounts has no more health care vouchers, any vouchers remaining in the other of their eHealth (Subsidies) Accounts may be used by either of them.
- The two voucher recipients have read and agreed to the content of the consent to share use (including the Statement of Purpose and the transfer and release of personal data). / (for illiterate voucher recipients) The consent (including the Statement of Purpose and the transfer and release of personal data) has been read over and explained to the voucher recipients who have agreed to its content. / (for mentally incapacitated service recipient) The consent (including the Statement of Purpose and the transfer and release of personal data) has been read and completed by the guardian of the voucher recipients.
- The two voucher recipients have further given consent, after their respective eHealth (Subsidies) Accounts are paired up, to reveal the balance of vouchers in their respective eHealth (Subsidies) Account to one another for the purpose of facilitating each other's advanced planning of the use of vouchers.
- The voucher recipients have declared that all information provided in this consent is true, accurate and complete, and have confirmed their understanding that if they knowingly or wilfully make any false statement, withhold any information, or otherwise mislead the Government for the purpose of sharing the vouchers in their eHealth (Subsidies) Accounts, they will be liable for prosecution. The voucher recipients have further confirmed that they fully understand their obligations and liability under this consent.
- I have recorded all the above declaration and consent made by the voucher recipients on the web-based eHealth System (Subsidies) Platform.

☒ I, hereby certify that the above verifications are completed.

Privacy Policy | Important Notices | System Maintenance

1. Same gender found in the records of both VRs
2. Display to remind service provider to verify their identities before proceeding, with a hyperlink for downloading the “Form on Change of Particulars in eHealth (Subsidies) accounts”
3. Click the checkbox to acknowledge verification is completed. “Confirm” button is enabled. Click confirm to proceed

Service Provider Platform – Spouse Declaration

Scenario 2: Active Declaration Record found

The screenshot displays the eHealth System (Subsidies) interface. At the top, the user is logged in as CHAN, FIVE MAN, with navigation links for Home, Inbox, and Logout. The date and time are 30/06/2023 15:25:07. The main section is titled "Spouse Declaration" and shows the practice "Hong Kong Central Library - Booth 2 (2)". Under "Document Type", "Hong Kong Identity Card" is selected. A confirmation message is displayed: "According to the system record, LO, LO PAK (TK807XXX(X)) has already declared spousal relationship with LEE, LEE. Please verify the latest spousal relationship to proceed..". Below the message is a checkbox labeled "LO, LO PAK declares the aforesaid spousal relationship has changed." and two buttons: "Cancel" and "Confirm". The "Confirm" button is highlighted with an orange box and a circled number 3. A circled number 1 points to the confirmation message, and a circled number 2 points to the checkbox. At the bottom, there is a section for "Insert Smart ID Card" with a "Read Smart ID Card" button.

1. Message is displayed when account has already been linked.
2. Click checkbox to confirm VR requires to make a new declaration.
3. "Confirm" button is enabled. Click confirm to proceed

Service Provider Platform – Spouse Declaration

Scenario 3: Used up the quota for new declaration this year

The screenshot displays the 'Spouse Declaration' interface. At the top, there is a progress bar with three steps: '1. Voucher Recipient Makes Declaration' (highlighted), '2. Spouse Makes Declaration', and '3. Complete Declaration'. Below this, the 'Document Type' section has two options: 'Hong Kong Identity Card' (selected) and 'Certificate of Exemption'. A text block instructs the user to insert a Smart ID card and provides two options for declaration. A 'Warning' dialog box is overlaid on the screen, containing the message: 'According to the system record, YEUNG, KIWIFRUIT (E334XXX(X)) has declared spousal relationship with WONG, AVOCADO. He/She is not eligible to declare another spousal relationship within this calendar year.' The dialog box has an 'OK' button. Below the dialog box, there is a 'Read Smart ID Card' button and a 'Cancel' button. A 'Menu' button is visible on the left side of the interface. At the bottom, there are links for 'Privacy Policy', 'Important Notices', and 'System Maintenance'.

Menu

Spouse Declaration

>>> 1. Voucher Recipient Makes Declaration 2. Spouse Makes Declaration 3. Complete Declaration

Document Type

☒ Hong Kong Identity Card ☐ Certificate of Exemption

Please instruct the Voucher Recipient to insert Smart ID card to

i. make declaration on their spousal relationship under monogamous marriage recognized by the laws of Hong Kong, and

ii. give consent when either of their eHealth (Subsidies) Accounts has no more health care vouchers, any vouchers remaining in the other of their eHealth (Subsidies) Accounts may be used by either of them.

Warning

1

According to the system record, YEUNG, KIWIFRUIT (E334XXX(X)) has declared spousal relationship with WONG, AVOCADO. He/She is not eligible to declare another spousal relationship within this calendar year.

OK

2

Cancel Read Smart ID Card

Privacy Policy | Important Notices | System Maintenance

1. Message is displayed when VR has already changed his spousal declaration once after account linkage within the same calendar year.
2. **Not allowed** to proceed the new declaration

Service Provider Platform

- (B) Claim

Service Provider Platform – Claim

(i) Sharing Spouse Voucher

Service Provider Platform – Claim

Utilize spouse voucher




1. Search eHealth (Subsidies) Account >>> 2. Enter Details 3. Complete Claim

Enter Details

Account Information

Document Type: Hong Kong Identity Card

Name: YEUNG, KIWIFRUIT (楊奇異果) Date of Birth / Gender: 01-01-1940 / Male

HKIC No. / Symbol: E334XXX(X) / A Date of Issue: 06-06-23

Claim Information

Practice: KUNG CHUNG KONG - Branch 2 Clinic (2)

Scheme: Health Care Voucher Scheme

Service Date: 06-06-2023

DHC-related Services: ☐ KWUN TONG

Reason for Visit

Principal		Secondary (Optional)	
Please select ---		Please select ---	
Please select ---		Please select ---	

	Service Recipient		Spouse
	Voucher	Reward	
Available Voucher Amount	\$ 8,000	N/A	\$ 7,000

①

Total Available Voucher Amount: \$ 15,000

Voucher Amount Claimed: \$

Net Service Fee Charged: \$

Contact No.: +852 92222222 Language preference for SMS: ☒ 中文 ☐ English

(Please ask the voucher recipient to provide his/her contact number, or one belonging to his/her relative or carer, that can receive SMS notification)

Cancel Claim

Privacy Policy | Important Notices | System Maintenance

- For a service recipient with **active** spouse declaration record, both the service recipient's and spouse's "Available Voucher Amount" are displayed.

Service Provider Platform – Claim

Utilize spouse voucher

1. Search eHealth (Subsidies) Account>>> 2. Enter Details 3. Complete Claim

Enter Details

Account Information

Document Type: Hong Kong Identity Card

Name: YEUNG, KIWIFRUIT (楊奇異果) Date of Birth / Gender: 01-01-1940 / Male

HKIC No. / Symbol: E334XXX(X) / A Date of Issue: 06-06-23

Claim Information

Practice: KUNG CHUNG KONG - Branch 2 Clinic (2)

Scheme: Health Care Voucher Scheme

Service Date: 06-06-2023

DHC-related Services: ☐ KWUN TONG

Reason for Visit

Principal		Secondary (Optional)	
Preventive		Please select ---	
Health advice/counseling		Please select ---	

	Service Recipient		Spouse
	Voucher	Reward	
Available Voucher Amount	\$ 8,000	N/A	\$ 7,000

Total Available Voucher Amount: \$ 15,000

Voucher Amount Claimed: \$ 9000

Net Service Fee Charged: \$ 1000

Contact No.: +852 92222222 Language preference for SMS: ☒ 中文 ☐ English

(Please ask the voucher recipient to provide his/her contact number, or one belonging to his/her relative or carer, that can receive SMS notification)

Privacy Policy | Important Notices | System Maintenance

- Spouse Voucher Sharing is allowed only if
“Available Voucher Amount” < “Voucher Amount Claimed”

Service Provider Platform – Claim

Utilize spouse voucher

eHealth System UAT
(Subsidies)

KUNG, CHUNG KONG

Home Inbox Logout



繁體 English
醫健通
eHealth
香港特別行政區衛生局
24/11/2025 18:12:37



Menu Claim

1. Search eHealth (Subsidies) Account >>> 2. Enter Details 3. Complete Claim

Enter Details

Account Information

Document Type

Name

HKIC No. / Symbol

Hong Kong Identity Card

HO, BANANA (何香蕉)

F024XXX(X) / A

Claim Information

Practice

Scheme

Service Date

DHC / CDCC Service

Reason for Visit

KUNG CHUNG KONG - Branch 2 Clinic

Health Care Voucher Scheme

24-11-2025

☐ Chronic Disease Co-Care

Reason for Visit

Principal

Management of acute episodic condition

Management of trauma

Service Rec

Voucher

Available Voucher Amount

\$ 8,000

N/A

\$ 8,000

Total Available Voucher Amount

\$ 16,000

Voucher Amount Claimed

\$ 9000

Net Service Fee Charged

\$ 200

Contact No.

+852

98765432

Language preference for SMS ☒ 中文 ☐ English

(Please ask the voucher recipient to provide his/her contact number, or one belonging to his/her relative or carer, that can receive SMS notification)

Cancel

Claim

Confirmation

Please confirm the voucher recipient consent to use spouse voucher and confirm spouse's information

Document Type

Hong Kong Identity Card

Name

LEE, PEAR (李梨)

Date of Birth

01-01-1952

Gender

Female

Date of Issue

01-01-22

HKIC No.

D983473(8)

HKIC Symbol

☒ A ☐ C ☐ R ☐ U ☐ Others

Contact No.

+852 65432123

Language preference for SMS ☒ 中文 ☐ English

(Please ask the voucher recipient to provide his/her contact number, or one belonging to his/her relative or carer, that can receive SMS notification)

☐ I, hereby certify that the identity of spouse has been verified with his/ her identity document.

☐ The service recipient has declared that his/her spouse is currently alive and still eligible for using vouchers.

Cancel

Confirm

2. The following detail of spouse is required to be input:

- **HKIC Symbol***

Service Provider Platform – Claim

eHealth System UAT (Subsidies)
KUNG, CHUNG KONG
Home Index Logout

Claim
1. Search eHealth (Subsidies) Account >>> 2. Enter Details 3. Complete Claim

Account Information
Document Type: Hong Kong Identity Card
Name: HO, BANANA (何香蕉) Date of Birth / Gender: 1960 / Male
HKIC No. / Symbol: F024XXX(X) / A Date of Issue: 01-01-20

Spouse's Account Information
Document Type: Hong Kong Identity Card
Name: LEE, PEAR (李潔) Date of Birth / Gender: 01-01-1962 / Female
HKIC No. / Symbol: D983XXX(X) / A Date of Issue: 01-01-22

Claim Information
Scheme: Health Care Voucher Scheme
Service Date: 24 Nov 2025
Practice: KUNG CHUNG KONG - Branch 2 Clinic*** (2)
Bank Account No.: 000-XXX-X02X13X
Service Type: Registered Medical Practitioners
Reason for Visit:
Principal: Management of acute episodic condition
- Management of trauma
Secondary (Optional): Follow-up / Monitoring of long term conditions
- Management of chronic musculoskeletal conditions

	Service Recipient's Account HO, BANANA (何香蕉)		Spouse's Account LEE, PEAR (李潔)	
	Voucher	Reward		
Before Claim	\$8,000	N/A		\$8,000
Claimed	\$8,000	N/A		\$1,000
Remaining Balance	\$0	N/A		\$7,000
Total Amount Claimed				\$9,000
Net Service Fee Charged				\$200
Contact No.	+852 98765432		+852 65432123	

Consent to use voucher
Consent Means: Paper Consent Form
Paper Consent Reason: The chip on Smart ID card cannot be read. [Switch to Smart ID Card](#)

Verification Checklist
1. The identity of the service recipient/ (for mentally incapacitated service recipient) the identity of the person who has completed the consent in the capacity as the guardian of the service recipient has been verified by checking against the particulars on identity document.
2. If the service recipient would use voucher in the paired up eHealth (Subsidies) Account of his spouse/ The identity of the service recipient's spouse has been verified by checking the copy of the identity document of the spouse. The service recipient has also declared that his/her spouse is currently alive and still eligible for using vouchers.
3. The service recipient has read and agreed to the content of the consent (including the Statement of Purpose and the transfer and release of personal data) / (for alternate service recipient) The consent (including the Statement of Purpose and the transfer and release of personal data) has been read over and explained to the service recipient who has agreed to its content. / (for mentally incapacitated service recipient) The consent (including the Statement of Purpose and the transfer and release of personal data) has been read and completed by the guardian of the service recipient.
4. The service recipient declares that all information provided in the consent is true, accurate and complete, and confirm his/her understanding that if he/she knowingly or virtually makes any false statement, withholds any information, or otherwise misleads the Government for the purpose of sharing the vouchers respectively in his/her eHealth (Subsidies) Account and, if applicable, the eHealth (Subsidies) Account of another voucher recipient, he/she will be liable for prosecution. He/she fully understands his/her obligations and liability under the consent.
5. I have rendered healthcare services categorized under the "Reason(s) for Visit" to the service recipient and have confirmed that the selected "Reason(s) for Visit" reflect(s) such services provided. The service fee charged to the service recipient is reduced by the amount claimed accordingly.
6. The service recipient (or, if the service recipient is mentally incapacitated, his/ her guardian) consents to use the amount claimed accordingly for the healthcare services provided by signing on the consent.
☒ I, hereby certify that the above verifications are completed.

[Print "Consent Form & Notice on Use of Health Care Voucher"](#) [中文](#) [English](#)
☐ Use pre-print blank consent form & "Notice on Use of Health Care Voucher" form
[Back](#) [Confirm](#)

私隱政策 | 重要告示 | 系統維護

Service Recipient Information

Claim Information

Consent to use voucher

Verification Checklist

Service Provider Platform – Claim

● Account Information			
Document Type	Hong Kong Identity Card		
Name	YEUNG, KIWIFRUIT (楊奇異果)	Date of Birth / Gender	20-09-1932 / Male
HKIC No. / Symbol	TK807XXX(X) / A	Date of Issue	19-06-18
● Spouse's Account Information			
Document Type	Hong Kong Identity Card		
Name	WONG, AVOCADO (黃牛油果)	Date of Birth / Gender	01-01-1950 / Female
HKIC No. / Symbol	B440XXX(X) / A	Date of Issue	01-01-20

Service Recipient Information

If the service recipient has active spouse declaration record, the account information of the spouse are displayed.

Service Provider Platform – Claim

● Claim Information

Scheme **Health Care Voucher Scheme**
 Service Date **30 Jun 2023**
 Practice **Hong Kong Central Library - Booth 2 (2)**
 Bank Account No. **000-X0X-X00X03X**
 Service Type **Registered Medical Practitioners**
 Reason for Visit

Principal	Preventive - Health advice/counseling
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	Service Recipient's Account	Spouse's Account
Before Claim	\$300	\$8,000
Claimed	\$300	\$200
Remaining Balance	\$0	\$7,800
Total Amount Claimed	\$500	
Net Service Fee Charged	\$100	
Contact No.	+852 92222222	+852 93333333

Claim Information

Display information of both service recipient and spouse **[if any]**

- Before Claim
- Claimed
- Remaining Balance
- Total Amount Claimed
- Net Service Fee Charged
- HK Contact Mobile No.

Service Provider Platform – Claim

● Consent to use voucher

Please instruct voucher recipient to insert Smart ID card or sign on consent form to express the consent to the use of amount claimed. (Guardian is required to fill in and sign on the consent form if the voucher recipient is mentally incapacitated.)

①

Read Smart ID Card



Read Smart ID Card ▶

↺ Switch to Paper Consent Form ▶

Consent to use voucher

1. Click “Read Smart ID Card” to start to using Smart ID card reader

Service Provider Platform – Claim

Consent to use voucher

Please instruct the service recipient to insert Smart ID card to give the consent to the use of amount claimed. (Guardian is required to fill in and sign on the consent form if the service recipient is mentally incapacitated.)



Verification Checklist

1. The identity of the service recipient has been verified by checking against the particulars on identity document.
2. (If the service recipient would use voucher in the paired up eHealth (Subsidies) Account of his spouse) The identity of the service recipient's spouse has been verified by checking the copy of the identity document of the spouse. The service recipient has also declared that his/her spouse is currently alive and still eligible for using vouchers.
3. The service recipient has read and agreed to the content of the consent (including the Statement of Purpose and the transfer and release of personal data). / (for illiterate service recipient) The consent (including the Statement of Purpose and the transfer and release of personal data) has been read over and explained to the service recipient who has agreed to its content.
4. The service recipient declares that all information provided in the consent is true, accurate and complete; and confirm his/her understanding that if he/she knowingly or willfully makes any false statement, withholds any information, or otherwise mislead the Government for the purpose of sharing the vouchers respectively in his/her eHealth (Subsidies) Account and, if applicable, the eHealth (Subsidies) Account of another voucher recipient, he/she will be liable for prosecution. He/she fully understands his/her obligations and liability under the consent.
5. I have rendered healthcare services categorized under the "Reason(s) for Visit" to the service recipient and have confirmed that the selected "Reason(s) for Visit" reflect(s) such services provided. The service fee charged to the service recipient is reduced by the amount claimed accordingly.
6. The service recipient consents to use the amount claimed accordingly for the healthcare services provided.

☐ I, hereby certify that the above verifications are completed.



Consent to use voucher

2. Show consent means [Default: use Smart ID Card reader]

Verification Checklist

3. Click the checkbox below the verification checklist to confirm completing relevant actions
4. Choose print "Notice on Use of Health Care Voucher" or use pre-print blank form
5. Confirm the claim

Verification Checklist

1. The identity of the service recipient has been verified by checking against the particulars on identity document.
2. (If the service recipient would use voucher in the paired up eHealth (Subsidies) Account of his spouse) The identity of the service recipient's spouse has been verified by checking the copy of the identity document of the spouse. The service recipient has also declared that his/her spouse is currently alive and still eligible for using vouchers.
3. The service recipient has read and agreed to the content of the consent (including the Statement of Purpose and the transfer and release of personal data). / (for illiterate service recipient) The consent (including the Statement of Purpose and the transfer and release of personal data) has been read over and explained to the service recipient who has agreed to its content.
4. The service recipient declares that all information provided in the consent is true, accurate and complete; and confirm his/her understanding that if he/she knowingly or willfully makes any false statement, withholds any information, or otherwise mislead the Government for the purpose of sharing the vouchers respectively in his/her eHealth (Subsidies) Account and, if applicable, the eHealth (Subsidies) Account of another voucher recipient, he/she will be liable for prosecution. He/she fully understands his/her obligations and liability under the consent.
5. I have rendered healthcare services to the service recipient and the service fee charged to the service recipient is reduced by the amount claimed accordingly.
6. The service recipient consents to use the amount claimed accordingly for the healthcare services provided.

Service Provider Platform – Claim

New layout




1. Search eHealth (Subsidies) Account 2. Enter Details >>> 3. Complete Claim

 Claim completed! Please fill in the Consent Form the complete Transaction No.

Account Information

Document Type: Hong Kong Identity Card
 Name: YEUNG, KIWIFRUIT (楊奇異渠)
 HKIC No. / Symbol: TK807XXX(X) / A
 Date of Birth / Gender: 20-09-1932 / Male
 Date of Issue: 19-06-18

Spouse's Account Information

Document Type: Hong Kong Identity Card
 Name: WONG, AVOCADO (黃牛油果)
 HKIC No. / Symbol: B440XXX(X) / A
 Date of Birth / Gender: 01-01-1950 / Female
 Date of Issue: 01-01-20

Claim Information

Transaction No.: TV23630-212-7
 Transaction Date: 30 Jun 2023 16:02
 Scheme: Health Care Voucher Scheme
 Service Date: 30 Jun 2023
 Practice: Hong Kong Central Library - Booth 2 (2)
 Bank Account No.: 000-X0X-X00X03X
 Service Type: Registered Medical Practitioners
 Reason for Visit:

Principal	Preventive - Health advice/counseling
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	Service Recipient's Account	Spouse's Account
Before Claim	\$6,850	\$8,000
Claimed	\$6,850	\$3,150
Remaining Balance	\$0	\$4,850
Total Amount Claimed		\$10,000
Net Service Fee Charged		\$100

Transaction Status	Ready to Reimburse	Pending eHealth (Subsidies) Account Validation
Contact No.	+852 92222222	+852 93333333

Created By: 90002760

Consent to use voucher

Consent Means: Insert Smart ID Card

Next Claim > Claim For Same Patient >

Privacy Policy | Important Notices | System Maintenance

Completion of claim for Spouse Voucher Sharing

English Version

[EHVS] CHAN TAI MAN (Tel: 23002344) made a claim on 30/06/2023 (TV23630-212-7) with the following health care voucher amount: \$300 from your (LO P*) account & \$200 from your spouse's (LEE L*) account. Your voucher balance: \$0. EHVS hotline: 28382311[Do not reply]

Chinese Version

[醫療券] 陳大文 (電話: 23002344) 於 2023 年 6 月 30 日申報醫療券 (TV23630-212-7) · 扣減你 (盧*柏) \$300 醫療券 及 你配偶 (李*) \$200 醫療券。你的醫療券餘額: \$0。計劃熱線: 28382311[請勿回覆]

Service Provider Platform – Claim

(ii) Consent to Use Voucher (Paper Form)

Service Provider Platform – Claim

☒ Consent to use voucher

Please instruct voucher recipient to insert Smart ID card or sign on consent form to express the consent to the use of amount claimed. (Guardian is required to fill in and sign on the consent form if the voucher recipient is mentally incapacitated.)

Read Smart ID Card



Read Smart ID Card ▶

Switch to Paper Consent Form ▶

①

Please select the reason for using paper consent form.

☐ The chip on Smart ID card cannot read.

☐ Voucher recipient is mentally incapacitated.

☐ Technical issue, e.g. card reader is not working.

☐ Others, please specify:

Cancel ✕ Confirm ▶

Consent to use voucher

1. Click “Switch to Paper Consent Form”, a popup box will be prompted to choose the reason why paper consent form is used.

Service Provider Platform – Claim

Consent to use voucher

Consent Means: Paper Consent Form

Paper Consent Reason: The chip on Smart ID card cannot be read.

Switch to Smart ID Card

Verification Checklist

1. The identity of the service recipient/ (for mentally incapacitated service recipient) the identity of the person who has completed the consent in the capacity as the guardian of the service recipient has been verified by checking against the particulars on identity document.
2. (If the service recipient would use voucher in the paired up eHealth (Subsidies) Account of his spouse) The identity of the service recipient's spouse has been verified by checking the copy of the identity document of the spouse. The service recipient has also declared that his/her spouse is currently alive and still eligible for using vouchers.
3. The service recipient has read and agreed to the content of the consent (including the Statement of Purpose and the transfer and release of personal data) / (for illiterate service recipient) The consent (including the Statement of Purpose and the transfer and release of personal data) has been read over and explained to the service recipient who has agreed to its content. / (for mentally incapacitated service recipient) The consent (including the Statement of Purpose and the transfer and release of personal data) has been read and completed by the guardian of the service recipient.
4. The service recipient declares that all information provided in the consent is true, accurate and complete; and confirm his/her understanding that if he/she knowingly or willfully makes any false statement, withholds any information, or otherwise mislead the Government for the purpose of sharing the vouchers respectively in his/her eHealth (Subsidies) Account and, if applicable, the eHealth (Subsidies) Account of another voucher recipient, he/she will be liable for prosecution. He/she fully understands his/her obligations and liability under the consent.
5. I have rendered healthcare services categorized under the "Reason(s) for Visit" to the service recipient and have confirmed that the selected "Reason(s) for Visit" reflect(s) such services provided. The service fee charged to the service recipient is reduced by the amount claimed accordingly.
6. The service recipient (or, if the service recipient is mentally incapacitated, his/ her guardian) consents to use the amount claimed accordingly for the healthcare services provided by signing on the consent.

☒ I hereby certify that the above verifications are completed.

Print "Consent Form & Notice on Use of Health Care Voucher" 中文 English

☐ Use pre-print blank consent form & "Notice on Use of Health Care Voucher" form

Back Confirm

Consent to use voucher

2. The consent means of paper consent is shown. Allowed to switch to using Smart ID Card reader to make consent

Verification Checklist

3. Click the checkbox in the verification checklist to confirm actions completed
4. Choose print "Consent Form & Notice on Use of Health Care Voucher" or use pre-print blank form
5. Confirm the claim

Verification Checklist

1. The identity of the service recipient/ (for mentally incapacitated service recipient) the identity of the person who has completed the consent in the capacity as the guardian of the service recipient has been verified by checking against the particulars on identity document.
2. (If the service recipient would use voucher in the paired up eHealth (Subsidies) Account of his spouse) The identity of the service recipient's spouse has been verified by checking the copy of the identity document of the spouse. The service recipient has also declared that his/her spouse is currently alive and still eligible for using vouchers.
3. The service recipient has read and agreed to the content of the consent (including the Statement of Purpose and the transfer and release of personal data) / (for illiterate service recipient) The consent (including the Statement of Purpose and the transfer and release of personal data) has been read over and explained to the service recipient who has agreed to its content. / (for mentally incapacitated service recipient) The consent (including the Statement of Purpose and the transfer and release of personal data) has been read and completed by the guardian of the service recipient.
4. The service recipient declares that all information provided in the consent is true, accurate and complete; and confirm his/her understanding that if he/she knowingly or willfully makes any false statement, withholds any information, or otherwise mislead the Government for the purpose of sharing the vouchers respectively in his/her eHealth (Subsidies) Account and, if applicable, the eHealth (Subsidies) Account of another voucher recipient, he/she will be liable for prosecution. He/she fully understands his/her obligations and liability under the consent.
5. I have rendered healthcare services to the service recipient and the service fee charged to the service recipient is reduced by the amount claimed accordingly.
6. The service recipient (or, if the service recipient is mentally incapacitated, his/ her guardian) consents to use the amount claimed accordingly for the healthcare services provided by signing on the consent.

Service Provider Platform – Claim

(iii) Sharing Spouse Voucher (Special Handling)

Service Provider Platform – Claim

Utilize spouse voucher




1. Search eHealth (Subsidies) Account>>> 2. Enter Details 3. Complete Claim

Enter Details

● Account Information

Document Type **Hong Kong Identity Card**

Name **WONG, MAN** Date of Birth / Gender **1940 / Male**

HKIC No. / Symbol **E987XXX(X) / A** Date of Issue **02-01-23**

● Claim Information

Practice **KUNG CHUNG KO**

Scheme **Health Care Voucher S**

Service Date **16-06-2023**

DHC-related Services ☐ **KWUN TONG**

Reason for Visit

Principal	Secondary (Optional)
Please select ---	Please select ---
Please select ---	Please select ---

Service	Recipient
Spouse 	\$ 0

Available Voucher Amount \$ 8,000

Total Available Voucher Amount \$ 8,000

Voucher Amount Claimed  \$

Net Service Fee Charged \$

Contact No. **+852 92222222** Language preference for SMS ☒ 中文 ☐ English

(Please ask the voucher recipient to provide his/her contact number, or one belonging to his/her relative or carer, that can receive SMS notification)

If the spouse or its account is under special

- Spouse deceased
- Account suspended
- Account terminated

The spouse's "Available Voucher Amount" will be displayed **\$0** and has alert icon 

The tooltip of alert icon  will show “The account of spouse cannot be used. Please contact Department of Health for assistance.”

Service Provider Platform – Claim

(iv) Claim without Linked Spouse

Service Provider Platform – Claim

Claim

1. Search eHealth (Subsidies) Account >>> 2. Enter Details 3. Complete Claim

Enter Details

Account Information

Document Type: Hong Kong Identity Card

Name: LEE, GRAPE (李提子) Date of Birth / Gender: 01-01-1950 / Male

HKIC No. / Symbol: I554XXX(X) / A Date of Issue: 06-06-23

Claim Information

Practice: KUNG CHUNG KONG - Branch 2 Clinic (2)

Scheme: Health Care Voucher Scheme

Service Date: 06-06-2023

DHC-related Services: ☐ KWUN TONG

Reason for Visit

Principal	Secondary (Optional)
Please select ---	Please select ---
Please select ---	Please select ---

Voucher Recipient

Available Voucher Amount: \$ 8,000 [Go to Spouse Declaration](#)

Voucher Amount Claimed: \$

Net Service Fee Charged: \$

Contact No.: +852 92222222 Language preference for SMS: ☒ 中文 ☐ English

(Please ask the voucher recipient to provide his/her contact number, or one belonging to his/her relative or carer, that can receive SMS notification)

[Cancel](#) [Claim](#)

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[Go to Spouse Declaration](#)

If the service recipient has no active spouse declaration record, only the “Available Voucher Amount” of the service recipient will be shown.

eHealth System (Subsidies) COVID-19 DEMO

CHAN, FIVE MAN

Home Inbox Logout

Spouse Declaration

Practice: Hong Kong Central Library - Booth 2 (2)

Please select the method for making spouse declaration

For mentally incapacitated voucher recipient(s), declaration should be made via consent form, which should be completed by guardian(s) as appropriate

In-person declaration

[Make Declaration](#)

Declaration via consent form

[Record declaration and consent](#)

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*Redirect to Spouse Declaration function (if needed)