For information on 19 May 2008

LEGISLATIVE COUNCIL PANEL ON PUBLIC SERVICE

MEDICAL BENEFITS FOR SERVING CIVIL SERVANTS, RETIRED CIVIL SERVANTS AND ELIGIBLE DEPENDANTS

PURPOSE

This note sets out the provision of medical and dental benefits to civil service eligible persons (hereafter referred to as "civil service medical benefits").

CONTRACTUAL PROVISIONS AND EXISTING POLICY

Eligibility

2. The Government, as an employer, has a contractual obligation to provide civil service medical benefits to civil service eligible persons. Civil service eligible persons consist of:

- monthly paid civil servants and their eligible dependants (spouses, unmarried children aged under 19, and such children at and above the age of 19 but under 21 who are in full time education/vocational training or otherwise dependent on the officer as a result of physical or mental infirmity);
- 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 (see paragraph 3 below);
- eligible dependants living in Hong Kong of officers killed on duty;
- 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 Pensions Scheme following the death of officers while in service or after retirement; and
- other persons who are eligible for civil service medical benefits by way of their terms of appointment.

3. Civil servants appointed on or after 1 June 2000 on new terms are covered by the Mandatory Provident Fund Scheme or the Civil Service Provident Fund Scheme. Since they are not eligible for pension benefits after retirement, they (and their eligible dependants) will cease to enjoy civil service medical benefits once they leave the service. The only exception is those officers on new terms whose service is terminated as a result of injury on duty or occupational disease. They will continue to be eligible for civil service medical benefits (in addition to incapacity benefits) after they leave the service and until they die.

Scope of benefits

4. The scope of civil service medical benefits are set out in the relevant Civil Service Regulations (CSRs), Civil Service Bureau (CSB) Circulars and Circular Memoranda. These provisions form part of the terms and conditions of employment of civil servants.

5. Civil service eligible persons are entitled to medical treatment and services that are provided by the Government or the Hospital Authority (HA) free of charge, save for the charges applicable to hospital maintenance, dentures and dental appliances as provided for in the CSRs. In general, civil servants, irrespective of ranks and grades, are entitled to the same level of medical benefits¹.

6. In addition, civil service eligible persons may apply to the Government for reimbursement of expenses on drugs / equipment / services which form an essential part of the medical treatment as prescribed and certified by the attending HA doctors on medical grounds but are not available in HA's hospitals or clinics or are chargeable by HA. This arrangement enables access by civil service eligible persons to drugs, etc. which are necessary to their medical conditions, even though such drugs are classified as patient self-financed items by HA in its Drug Formulary.

DH as service provider

7. At present, a small part of the Government's contractual obligation – as an employer to provide medical benefits to civil service eligible persons – is met through the Department of Health's (DH) 34 dental² and three general clinics reserved for the exclusive use of civil service eligible persons; other DH clinics providing social hygiene services, elderly services, etc. which are also open to members of the public; as well as through the reimbursement arrangement (explained in paragraph 6 above).

¹ CSR 6.1 sets out the hospital maintenance fees applicable to all civil service eligible persons. CSR Annex 6.2 sets out the schedule of charges for dentures, dental appliances and other restorations in accordance with an officer'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. Officers at and above D3 level are eligible to receive an annual medical examination for themselves only at designated clinics of Department of Health.

² A very limited number of sessions are set aside to serve members of the public requiring emergency dental services (for pain relief and extraction only).

HA as service provider

8. The major part of the Government's contractual obligation is met through services – mainly free of charge - provided by HA through its network of general outpatient clinics, specialist outpatient clinics, and hospitals throughout the territory. Most of HA's general outpatient clinics have specified varying numbers of priority discs during normal day clinic sessions for serving civil servants who need medical treatment, to enable them to return to work after receiving treatment if their health conditions permit. Separately, dedicated clinic sessions for specialist services for civil service eligible persons are available at Queen Elizabeth Hospital (L Block). Civil service eligible persons benefit from the advancement in medical technology, the advent of new drugs and treatment protocol introduced by HA. The priority and mode of treatment of civil service eligible persons are determined by HA doctors, having regard to their medical conditions, available drugs, treatment options, etc.

IMPROVEMENT MEASURES

9. We have been working closely with HA and DH to monitor and improve the service provision for civil service eligible persons. For example, in 2008-09, the Administration will increase the provision for civil service medical benefits (under Head 37 Programme 7) by \$55.4 million to \$581.7 million. This represents a 10.5% increase over last year's provision. The additional provision will be used to expand the capacity of DH's dental clinics for the exclusive use of civil service eligible persons, and to meet an anticipated increase in applications for reimbursement of medical expenses from civil service eligible persons.

10. As a measure to streamline administrative procedures, we have developed jointly with HA an on-line eligibility checking system (ECS) to replace the current paper-based eligibility checking. With the new system, civil service eligible persons will no longer be required to present paper forms (i.e. GF 181, Try. 447 or pensioner's card) when seeking treatment at HA and DH medical and dental facilities. Thev only need to present proof of identity (e.g. a Hong Kong identity card) for inspection by clinic/hospital staff who will check their eligibility through the ECS. The ECS will bring greater convenience to civil service eligible persons and save administrative efforts of departmental management in issuing the paper forms. The first phase of the ECS, covering pensioners and their eligible dependants, was launched in January 2008. The second and final phase covering serving civil servants, their eligible dependants and the rest of persons eligible for civil service medical benefits will be implemented around mid-2008.

11. At a community-wide level, the Government has launched a public consultation exercise on the measures and options to reform the public healthcare system, with a view to improving service delivery and ensuring its long-term financial sustainability. The outcome of this consultation may impact on the provision of civil service medical benefits. We will closely monitor developments on this front. We have encouraged the staff sides of the central consultative councils to examine the issues raised in the public consultation document, having regard to the provision of civil service medical benefits to civil service eligible persons. We will take into account the views of the staff sides and the outcome of the public consultation exercise in our further consideration of what changes (if any) should be made to the provision of civil service medical benefits.

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

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