

Restricted (Staff)

FORM A

**Application for Direct Payment of Medical Expenses on Drugs
Provided by the Hospital Authority**

in accordance with CSB Circular No. 2/2013

*(Applicants should read CSB Circular No. 2/2013 and the Notes for Applicants at the end of
this application form before completing the form)*

To : Director of Health (Attn : Medical Reimbursement Section, Finance and Supplies Division)
Unit 1107-1108, 11/F, 248 Queen's Road East, Wan Chai, Hong Kong
via Hospital Authority

Part A : To be completed by the applicant (i.e. the Government servant / pensioner unless specified in (c))

I wish to apply for direct payment to be made to the Hospital Authority for expenses for the drug(s) set out below (name and cost of the drug(s) as stated in the **attached invoice(s)** issued by the Hospital Authority) -

(a) Name of the Hospital Authority hospital / clinic attended: _____

(b) Particulars of the patient -

(i) Name: _____

(ii) HKID Card No.: _____

(iii) Date of birth: _____

(Please tick the appropriate box for (c))

(c) I am (or am applying on behalf of) :

a Government servant

a Pensioner

others, please specify : _____

If applying on behalf of an eligible applicant, please also complete the following:

(i) relationship with the eligible applicant : _____, and

(ii) reason(s) why he / she cannot complete this application :

Part A (cont'd) : To be completed by the applicant (i.e. the Government servant / pensioner unless specified in (c))

- (d) I hereby authorise the Department of Health to ask the Hospital Authority for further information on my or the patient's (if he or she is a dependant of the applicant and is below the age of 18 or an eligible dependant above the age of 18 but with mental infirmity) health condition where the Director considers necessary.
- (e) I have read CSB Circular No. 2/2013 and the **Notes for Applicants** at the end of this form. I understand and accept the terms and conditions governing the grant of direct payment of medical expenses set out in the CSB Circular and the **Notes for Applicants** of the form.

[(f) below is only applicable to pensioners]

- (f) I declare that on the date when the medical expenses above are / were incurred, I am / was in receipt of a pension or an annual allowance. In the event that the medical expenses have not yet been incurred and that my pension or an annual allowance has been suspended under the pensions legislation before the medical expenses are incurred, I will immediately notify the Department of Health and will provide such details as may be required.

(All applicants should complete the following part)

I understand that I will be liable to criminal prosecution if I wilfully furnish false or incomplete information in connection with this application.

Signature: _____	Contact telephone no.: _____
Name of the applicant: _____	Department: _____
HKID Card No.: _____	Date: _____

Part B: To be completed by the patient who is an eligible dependant and aged 18 or above (except for those with mental infirmity).

I hereby authorise the Department of Health to ask the Hospital Authority for further information on my health condition where the Director considers necessary.

Signature: _____	
Name of the patient: _____	Date: _____

Notes for Applicants

1. Drugs prescribed by the attending Hospital Authority (HA) doctor **and** available at the pharmacy of the attending HA hospital / clinic will be printed on a prescription form using landscape mode (i.e. the page is presented horizontally).
2. The direct payment arrangement set out in Civil Service Bureau Circular No. 2/2013 does **not** apply to drugs purchased from community pharmacies (i.e. outside the HA).
3. Applications for direct payment of drugs provided by the attending HA facility should be made by the Government servant or pensioner, except under special circumstances where the Government servant or pensioner is unable to complete the form, in which case their next of kin or legal guardian may exceptionally sign the form as an applicant.
4. Civil service eligible persons (CSEPs) who are hospitalised are only required to submit one application for direct payment of drugs within the same episode of hospitalisation in the same hospital. For CSEPs using outpatient services, including those who have been discharged from hospitals, a fresh application should be submitted for each prescription form (which may comprise multiple pages and include one or more drugs), even if the prescription is for the same drug.
5. Applicants who are pensioners but **not** covered by the Medical and Dental Benefits Eligibility Checking System (for example, pensioners without Hong Kong Identity cards) should also attach a valid Try. 447 to the application FORM A as a proof of the patient's eligibility for civil service medical benefits.
6. Drugs forming an essential part of the medical treatment must fulfil the following criteria for direct payment:
 - (a) they are prescribed on medical grounds;and
 - (b) there is no alternative treatment of equivalent efficacy available in HA free of charge; or if such is available, the patient does not respond well clinically to the alternative treatment.The following will **not** be covered under the reimbursement / direct payment arrangement:
 - lifestyle items that are not prescribed on the basis of medical necessity but rather as a matter of personal convenience or preference, or
 - items not related to treatment of ailment.
7. In accordance with Civil Service Regulations and Civil Service Bureau Circular No. 2/2013, the attending HA doctor of the case has sole discretion as to the amount and the nature of treatment provided, having regard to the medical necessity of the case.

8. Any reimbursement and / or direct payment of medical expenses is granted to the applicant on condition that any overpayment to him / her is recoverable in full as a debt with interest (as appropriate) and all costs and expenses incurred in recovering such debt and interest from him / her. In consideration of the Government granting to him / her the reimbursement and / or direct payment of medical expenses, he or she charges in favour of the Government all salaries, pensions, gratuities, allowances, benefits (including reimbursement for expenses already incurred) and any other monies payable or due to him / her or his / her estate from the Government (collectively, "Salaries and Pensions") and accrued benefits derived from voluntary contributions under any provident fund scheme ("Accrued Benefits") as security for payment or repayment of all sums (including interest, costs and expenses incurred in recovery, if any) payable or due to the Government arising from or incidental to the reimbursement and / or direct payment of medical expenses (collectively, "Indebtedness"). The Government shall deduct at such times at its own absolute discretion as it deems fit from his / her Salaries and Pensions in all circumstances including, but not limited to, where he or she becomes insolvent until the Indebtedness is fully recovered. Until the Indebtedness is fully recovered the Government is a secured creditor and has a charge on his / her Salaries and Pensions and Accrued Benefits for repayment of the Indebtedness. In applying for and on receipt of the reimbursement of medical expenses and / or upon direct payment being made by the Government, as the case may be, the applicant accepts in full the terms and conditions above.
9.
 - (a) The information provided will be used by the Department of Health for processing this application for direct payment of medical expenses in accordance with Civil Service Regulations and /or Civil Service Bureau Circulars. It may be transferred to other Government bureaux and departments and related persons and organisations (including the Hospital Authority) for the administration and provision of civil service medical benefits and related purposes.
 - (b) It will not be possible to process the application if the applicant fails to provide all the information required. Please ensure that the information provided is accurate. Obtaining benefits for oneself or another by furnishing false information may constitute a criminal offence.
 - (c) Data subjects may request for access to or correction of personal data provided on this form in accordance with the provisions of the Personal Data (Privacy) Ordinance. Such requests may be made in writing to the Director of Health (Attn.: Medical Reimbursement Section, Finance and Supplies Division).
10. As the attending doctor may prescribe both drugs available in the HA facility where the CSEP attended, as well as drugs which are not available in the said HA facility and need to be purchased in community pharmacies by the CSEP, different prescription forms will be issued for drugs available and not available in the HA facility. Upon provision of the requisite prescription, the steps to be followed by CSEPs in handling these prescriptions should be as follows:

Drugs available from the Pharmacy of the HA facility where the CSEP attends

The CSEP should receive a prescription form printed in landscape mode (i.e. the page is presented horizontally) from the attending HA doctor. The CSEP should then present that prescription form to the pharmacy to collect an invoice. For hospital in-patients, drug invoice(s) will be provided by ward staff. The duly completed application FORM A, together with the invoice should then be presented to the shroff of the attending HA facility. Upon checking the eligibility, the shroff will issue a receipt to the CSEP, who should then present the receipt to the ward / pharmacy for obtaining the prescribed drugs. A flowchart illustrating the key steps is attached at **Annex A1** to this form.

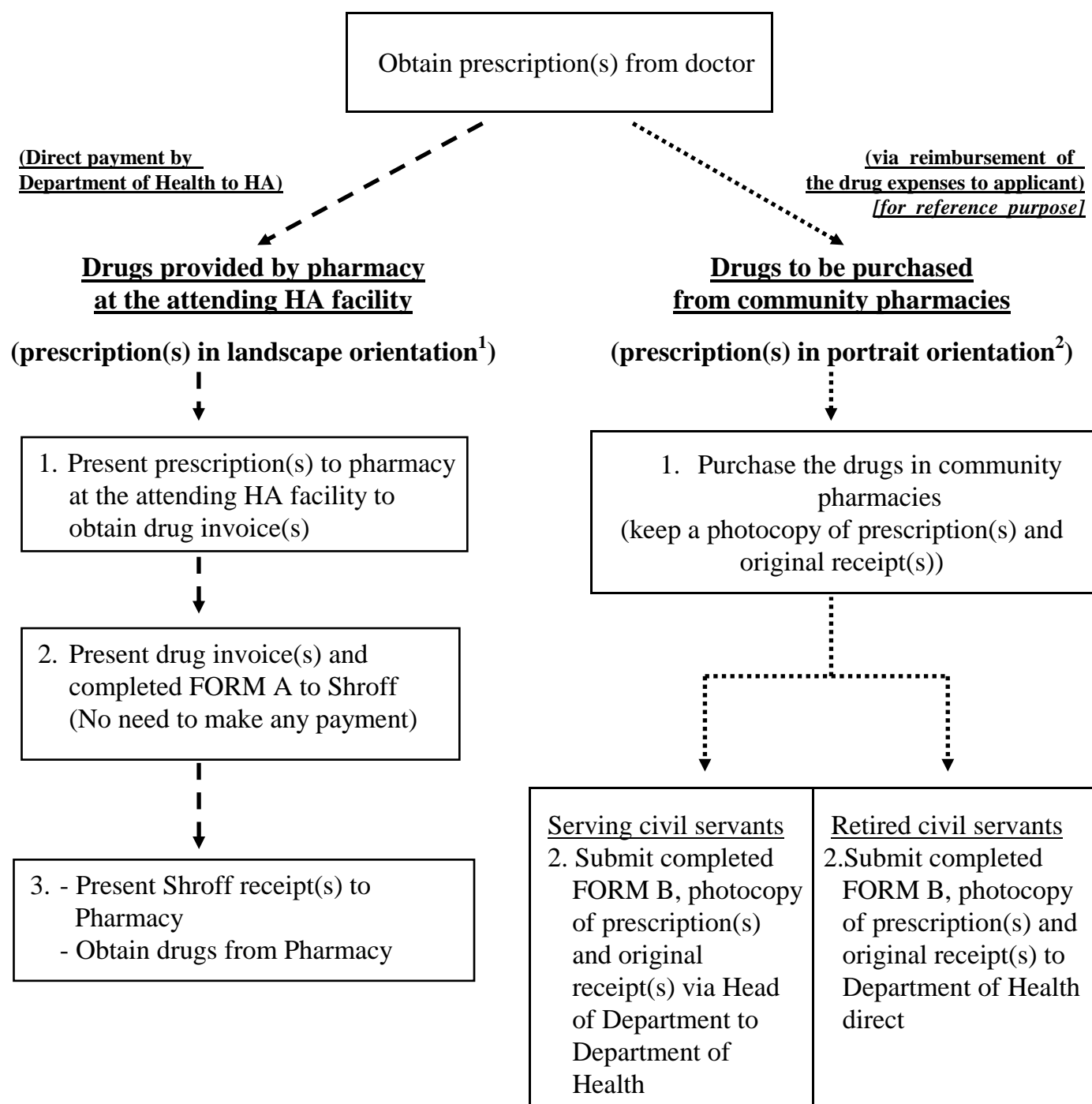
Drugs not available from the Pharmacy of the HA facility where the CSEP attends (mainly applicable for out-patient consultation)

The CSEP should receive a prescription form in portrait mode (i.e. the page is presented vertically). The CSEP should acquire the drugs from community pharmacies and apply thereafter to the Department of Health for reimbursement of medical expenses using FORM B as promulgated via Civil Service Bureau Circular No. 2/2013. A flowchart illustrating the key steps is attached at **Annex A1** to this form.

11. For enquiries, please contact the Departmental Secretary, who should approach the Medical Reimbursement Section, Finance and Supplies Division of the Department of Health (at 3107 3415 or 3107 3417; or by email at sco_mr@dh.gov.hk for enquiries) about the processing of applications and related payment and accounting arrangements. If Department Secretaries have other enquiries, they may contact the Conditions of Service Division of the Civil Service Bureau. Pensioners who require application forms may contact the Pensions Section of this bureau by phone (at 2810 3850) or by email (csbpen@csb.gov.hk).

**Application for Direct Payment of
Drugs Provided by the Attending Hospital Authority (HA) Facility**

Scenario 1
Out-patient service
(including patients being discharged from hospital)



Notes:

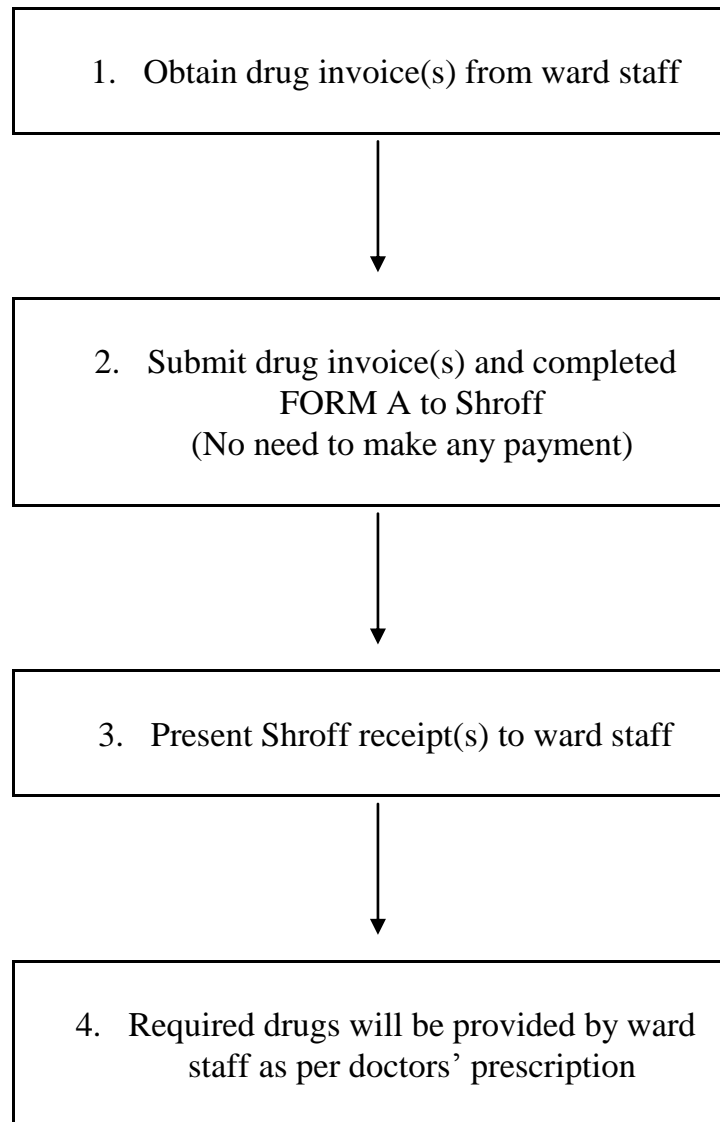
- Copies of FORM A and FORM B are attached to CSB Circular No. 2/2013, and are also available at CSB’s website (<http://www.csb.gov.hk/english/admin/benefits/64.html>).
- Please submit the “Application for Reimbursement/ Direct Payment of Medical Expenses” (FORM B) through the Medical Records Office at the HA hospital to seek the attending doctor’s assistance in completing Part A therein as necessary.

¹ i.e. the page is horizontally presented

² i.e. the page is vertically presented

**Application for Direct Payment of
Drugs Provided by the Attending HA Facility**

Scenario 2 : Hospital in-patient



Notes:

- Copies of FORM A and FORM B are attached to CSB Circular No. 2/2013, and are also available at CSB's website (<http://www.csb.gov.hk/english/admin/benefits/64.html>).
- Please refer to Appendix 7 of CSB Circular No. 2/2013 for the list of hospitals that keep a limited quantity of the application forms.