

Fourth-term Commission on Poverty convenes second meeting

The Chief Secretary for Administration, Mr Matthew Cheung Kin-chung, chaired the second meeting of the fourth-term Commission on Poverty (CoP) held online this afternoon (December 23).

Members noted the implementation progress of various assistance programmes and the financial position of the Community Care Fund (CCF). The CoP endorsed a proposal to introduce new drugs/clinical indications under a medical assistance programme and revision of the 2020-21 annual indicative budget for that assistance programme, the proposed indicative budgets for three CCF medical assistance programmes for 2021-22, and the extension of two existing assistance programmes. Details of the resolutions are as follows:

(1) The CoP agreed to introduce three new self-financed cancer drugs to the coverage of the First Phase Programme of Medical Assistance Programmes (First Phase Programme) with effect from the fourth quarter of 2020, including Inotuzumab ozogamicin, Abemaciclib and Atezolizumab. It is expected to benefit 520 patients in the first 12 months of implementation. The CoP also agreed to add new indications for the existing drug Nivolumab and relax the clinical guidelines of Ixazomib and Lenalidomide. Having considered the expected increase in financial requirements for the existing drugs and the additional subsidy incurred in this operation year for the proposed introduction of new drugs/clinical indications and relaxation of clinical guidelines of existing drugs in the fourth quarter of 2020, the CoP agreed to uplift the 2020-21 indicative budget for the approved subsidy for the First Phase Programme from \$725 million to \$893 million. The approved administrative fee in the original budget remains unchanged.

(2) The CoP approved the proposed indicative budgets for three CCF medical assistance programmes for 2021-22, including the First Phase Programme, the "Subsidy for Eligible Patients to Purchase Ultra-expensive Drugs (Including Those for Treating Uncommon Disorders)" Programme and the "Subsidy for Eligible Patients of Hospital Authority to Purchase Specified Implantable Medical Devices for Interventional Procedures" Programme. Their indicative budgets are \$1,447.95 million, \$318.15 million and \$52.5 million respectively.

(3) The CoP agreed to extend the "Subsidy for Comprehensive Social Security Assistance (CSSA) Recipients Living in Rented Private Housing" Programme (the Programme) for six months until end-April 2021. The Programme provides a one-off subsidy to CSSA recipients living in rented private housing and paying a rent, which exceeded the maximum rent allowance under the CSSA to relieve their financial burden as a result of periodic increases in rent. Eligible CSSA households are not required to submit applications. The Social Welfare Department (SWD) will identify eligible households based on their reported rental records in the Computerised Society Security System as at July 31, 2020. The subsidy under the extended Programme is expected to commence

disbursement progressively starting from end-January 2021 at the earliest. The original funding provision of the Programme was \$197.1 million and the revised budget is \$230.87 million, with an additional funding provision of \$33.77 million. It is expected to benefit 13 000 households.

(4) The CoP agreed to extend the "Pilot Scheme on Support for Elderly Persons Discharged from Public Hospitals after Treatment" (Pilot Scheme) until end-September 2023 under a new mode of operation starting from October 1, 2021. Launched in February 2018, the Pilot Scheme adopts a "medical-social collaboration" model under which the Hospital Authority (HA) conducts an assessment and refers persons aged 60 or above who are in need of transitional services (except for elderly persons covered by the existing "Integrated Discharge Support Programme for Elderly Patients") to the Pilot Scheme, which will provide them with transitional services for not more than six months. The SWD has set up a Discharge Support Team, consisting mainly of social workers, to follow up on all cases under the Pilot Scheme. Under the new mode of operation, the SWD will select three suitable non-government organisations through invitation for proposals to set up a transitional care team each in Kowloon East, New Territories East and New Territories West. Working directly with the medical staff of relevant HA clusters, the teams will formulate appropriate nursing, rehabilitation and care support plans for elderly persons discharged from hospitals, and provide transitional residential care and/or community care and support services for four months. In case an individual elderly person is assessed by a medical staff of the HA to be in need of transitional care services for over four months, the transitional care team can initiate an application to the SWD for consideration. The revised funding provision of the Pilot Scheme is \$234.18 million, with an additional provision of \$8.28 million.

The CoP was also briefed on the poverty statistics and analysis for 2019 produced jointly by the Office of the Government Economist and the Census and Statistics Department. The CoP discussed the analysis and noted that the Government would publish the "Hong Kong Poverty Situation Report 2019" (the Report) after the meeting. The Report has been uploaded to the CoP's dedicated website (www.povertyrelief.gov.hk).