

Health Bureau announces details of Chronic Disease Co-Care Pilot Scheme

The Health Bureau announced today (September 25) details of the Chronic Disease Co-Care Pilot Scheme (CDCC Pilot Scheme) which is set for launch in mid-November. Under the scheme, eligible persons will be subsidised by the Government to undergo screening by a family doctor of their own choice. Those who are diagnosed with prediabetes, diabetes mellitus (DM) or hypertension (HT) will be taken care of by their family doctor with long-term management including medical consultations and drug prescription as clinically indicated.

As projected in the Population Health Survey 2020-22 of the Department of Health, around 17 per cent of the population aged 45 to 84 have an underlying condition of DM or HT. In this connection, the Government will roll out the CDCC Pilot Scheme as a move to encourage early prevention and management of chronic diseases. All Hong Kong residents aged 45 or above with no known medical history of DM or HT are eligible to join the scheme. They can undergo DM and HT screening, attend doctor consultations and receive laboratory investigations in the private healthcare sector, and, subject to their health conditions, be offered prescribed medication, follow-up care at nurse clinics and allied health services.

The CDCC Pilot Scheme will operate on a co-payment model. Government subsidies will be offered during the screening and treatment phases, while participants being the one who should take the primary responsibility for their own health will have to pay a certain amount of the co-payment fee.

The 18 District Health Centres (DHCs) and DHC Expresses (DHCEs) will serve as the first point of contact for citizens' enrolment. Assisted by the DHC/DHCEs, citizens will pair with a family doctor after completion of registration as a DHC/ DHCE member and given consent to enrol in the Electronic Health Record Sharing System (eHealth). They will then be given medical consultation by the family doctor who will also arrange laboratory investigations for them and advise them on the diagnosis afterwards. During this screening phase, the Government will offer subsidies to cover the laboratory investigation fees in full and the consultation fee at an amount of \$196, whereas participants will need to pay a designated co-payment fee of \$120.

Participants who are diagnosed as not having any sign of DM or HT upon screening will be aided by the DHC/DHCEs to set health management goals. Arrangements will also be made on a need basis for them to participate in activities to help them adopt a healthier lifestyle for staying in good shape.

As for those who are diagnosed with prediabetes, DM or HT, they will be supported with Government subsidies for long-term follow-up by the family

doctor they selected. Participants diagnosed with prediabetes are entitled to a maximum of four subsidised consultation visits per year, while those diagnosed with DM or HT are entitled to a maximum of six subsidised consultation visits per year. In the treatment phase, the Government will subsidise a consultation fee of \$166 for each visit. The co-payment fee charged to the participants will be determined by the family doctors. The Government's recommended co-payment fee is \$150 per consultation.

The Government has drawn up a list of basic-tier drugs for use under the CDCC Pilot Scheme. Participants prescribed with drugs on this list will not be required to pay for such medication. At present, the list covers more than 40 items of basic-tier drugs, including drugs for regulating blood glucose level and blood pressure as well as drugs for treating episodic illnesses. The list is sufficient for treating patients with prediabetes, DM and HT in general. The Government will review the list from time to time to meet the needs of participants.

The Government has also made arrangements for participating family doctors to purchase drugs on the list from designated drug suppliers at discounted prices. On top of that, the Government will provide a quarterly drug subsidy to family doctors who have prescribed chronic diseases drugs on the list at a rate of \$105 per participant.

For clinical needs assessed by family doctors during medical consultations, participants will be arranged to receive follow-up services from nurse clinics and allied health. The Government will provide subsidies for such services while participants are required to pay a designated co-payment fee. Moreover, family doctors can arrange for participants with clinical needs to undergo laboratory investigations as appropriate. The Government has engaged medical laboratories on the provision of investigation services through tendering, and will subsidise a variety of common laboratory investigation services related to DM or HT. Depending on clinical diagnosis, the designated co-payment fee to be charged to the participants ranges from \$40 to \$130 for each test package (each covers two to five test items) in general.

To enhance the transparency of the scheme, the Government will provide details of the co-payment fees (including the consultation co-payment fees determined by individual family doctors) to be charged in the screening and treatment phases on the CDCC Pilot Scheme dedicated website. Such information will serve as a reference for participants in selecting their own family doctor. Persons aged 65 or above may settle the co-payment fees with Elderly Health Care Vouchers, including that for consultations, services by nurse clinics, allied health and laboratory investigation.

In addition, the Government has established under the CDCC Pilot Scheme a two-way referral mechanism with the Hospital Authority (HA). Participants with clinical needs upon assessment by a family doctor, such as having unsatisfactory management of conditions or signs of complications, will be referred to designated Medicine Specialist Outpatient Clinics (SOPC) of the HA for a one-off Medicine specialist medical consultation in accordance with

specified referral criterion and guidelines. After obtaining clinical advices on care plans from the Medicine SOPC, participants concerned will return to their own family doctor for continuous follow-up.

An incentive mechanism for participants diagnosed with DM or HT and their respective family doctor will be set up under the CDCC Pilot Scheme. For participants, the incentive will be counted from the second programme year upon entering the treatment phase as an encouragement for uplifting their self-management capabilities. Once the participants have achieved certain health incentive targets (such as having their health indexes monitored and subsequently uploaded to the eHealth mobile application, attended follow-up consultations regularly, completed health education programmes or undergone laboratory investigations as advised, etc), they will enjoy a reduction of co-payment fee with a maximum amount of \$150 (an amount equivalent to the Government-recommended consultation co-payment fee) for their first subsidised consultation in the following programme year (i.e. the third programme year).

On the family doctor side, they will receive incentive payment should 70 per cent of the participants under their care achieved the health incentive targets in regulating blood glucose and blood pressure level. The calculation of incentive payment is 15 per cent of the total amount derived from the number of actual subsidised visits in the treatment phase attended by the patients who have achieved their incentive targets, the Government subsidy and the Government-recommended consultation co-payment fee (not the co-payment fee determined by family doctors).

Deputy Secretary for Health Mr Eddie Lee said: "The CDCC Pilot Scheme is the very first significant project to be launched after the release of the Primary Healthcare Blueprint at the end of last year. The Scheme will strengthen Hong Kong's primary healthcare system through the establishment of a family doctor regime and the positioning of the DHC/DHCE as a hub in fostering expansion of healthcare network at the community level. Meanwhile, the Scheme will also enhance the overall well-being of citizens by encouraging them to start making Life Course Preventive Care plans for early prevention, early identification and early treatment."

Mr Lee also mentioned that hundreds of family doctors had expressed interest in joining the CDCC Pilot Scheme when the Health Bureau presented to the medical sector details of the scheme earlier. Upon issuance of the official invitation on August 29, over 200 doctors have registered to join in less than a month's time. The Government will spare no efforts in recruiting more family doctors to ensure ample options will be available for selection by the citizens at the time of launch in mid-November. Furthermore, the Government will collaborate with different professional groups to provide family doctors with training on areas including points they need to observe when advising participants on chronic disease prevention, such that clinical quality assurance will be maintained.

Details of the Scheme will be uploaded to the dedicated website of the CDCC Pilot Scheme of the Health Bureau (www.primaryhealthcare.gov.hk/cdcc).

For enquiries, citizens and doctors may also call the hotline of the scheme at 2157 5000. Dedicated staff of the hotline will answer calls from 9am to 9pm from Mondays to Saturdays.