

## LCQ12: Use of public healthcare services by persons who were issued Hong Kong identity cards in certain years

Following is a question by Dr the Hon Pierre Chan and a written reply by the Secretary for Food and Health, Professor Sophia Chan, in the Legislative Council today (April 3):

Question:

It has been reported that Hong Kong identity cards issued respectively from December 28, 2000 to July 31, 2011 and since August 1, 2011 have numbers beginning with "R" and "M", and a majority of those persons holding such identity cards (R and M persons) are new arrivals to Hong Kong. Regarding the use of public healthcare services by R and M persons, will the Government inform this Council:

(1) whether it knows the respective total numbers of new cases of R and M persons being diagnosed, in public hospitals during the period between 2013 and 2018, with the cancers set out in the table below; set out a breakdown in the table below by gender of such persons and the age group to which they belonged;

Type of cancers	Gender	Age group (years old)					Total
		0-19	20-44	45-64	65-74	75 or above	
Colorectal cancer	Female						
	Male						
Lung tumour	Female						
	Male						
Liver tumour	Female						
	Male						
Leukaemia	Female						
	Male						
Hodgkin's lymphoma	Female						
	Male						
Non-Hodgkin's lymphoma	Female						
	Male						
Total:	Female						
	Male						

(2) whether it knows the respective total numbers of new and old cases of R and M persons receiving diagnoses and treatments in public hospitals in each year between 2013 and 2018, with a tabulated breakdown by gender of such persons, the age group to which they belonged (as set out in the table above) and the following diagnoses and treatments as well as services they received: renal replacement therapy (including peritoneal dialysis and haemodialysis), cataract surgery, treatment for Hepatitis B and specialist outpatient services of psychiatry, chest, paediatrics and cardiology;

(3) given that countries such as Singapore, the United Kingdom, Canada and the United States require a person who applies for residence to pass a health check (including a confirmation that the person has not suffered from any infectious diseases such as tuberculosis, serious diseases or chronic diseases), whether the Government will, by making reference to this practice, impose a similar requirement on those persons coming to Hong Kong for settlement, with a view to relieving the burden on the public healthcare system; if so, of the details; if not, the reasons for that; and

(4) whether the Government will approach the Central Authorities to gain an understanding of the anticipated number of Mainland residents who will come to Hong Kong for settlement on Permits for Proceeding to Hong Kong and Macao (commonly known as "One-way Permits") in the coming 10 years as well as their age and gender distribution, so as to facilitate the making of accurate projections on the demand for and the capacities of healthcare and other public services in Hong Kong in future, and the corresponding planning work; if so, of the details; if not, the reasons for that?

Reply:

President,

Having consulted the Security Bureau, the Department of Health (DH) and the Hospital Authority (HA), reply to the various parts of the question raised by Dr the Hon Pierre Chan is as follows:

(1) and (2) Under the existing policy, HA collects from its patients their personal data for healthcare / general related purposes only. In this respect, the requested statistics on patients with subgroup breakdowns by prefix of their Identity Card numbers are not available.

(3) Local health authorities will enforce appropriate prevention and control measures in response to the latest epidemic situation in the region. Currently, an effective system for prevention and control of infectious diseases is in place in Hong Kong. In order to provide protection to the local community against infectious diseases, the DH coordinates and implements a series of public health programmes covering disease surveillance, outbreak management, health promotion, risk communication, emergency preparedness and contingency planning, infection control, vaccinations, as well as training and research. According to the Prevention and Control of Disease Ordinance (Cap 599), medical practitioners are

required to report suspected and confirmed cases of notifiable infectious diseases to the DH for investigation and follow-up actions as appropriate. The established system for prevention and control of infectious diseases has been effective. The DH will continue to review, from time to time, the mechanism to protect public health. Other measures, such as requiring New Arrivals to undertake physical examinations, are not considered necessary at this stage.

(4) The Hong Kong Special Administrative Region Government exchanges views with the Mainland authorities from time to time on the views of various sectors of society concerning Mainland residents coming to Hong Kong for family reunion.

For a long time, the Census and Statistics Department updates population projections statistics every two to three years taking into account the latest developments of the population, including the new arrivals, so as to provide a common basis for reference by the Government for formulating policies in housing, healthcare, education, social welfare, etc., as well as in planning public services and facilities.