

## LCQ18: Primary Chinese medicine services

Following is a question by Professor the Hon Chan Wing-kwong and a written reply by the Secretary for Health, Professor Lo Chung-mau, in the Legislative Council today (June 19):

Question:

Regarding the Chinese medicine (CM) services provided to members of the public by District Health Centres (DHCs) and DHC Expresses (DHCEs), will the Government inform this Council:

- (1) of the respective details about the provision of CM services by various DHCs and DHCEs in the past three years;
- (2) of the respective numbers of CM practitioners involved in and members of the public who have benefited from the CM services mentioned in (1);
- (3) of the details of the CM services (including the estimated number of members of the public to be benefited) that various DHCs and DHCEs plan to provide this year; and
- (4) whether it plans to further enhance the CM services provided by various DHCs and DHCEs in the future; if so, of the details; if not, the reasons for that?

Reply:

President,

The consolidated reply to the respective parts of the question raised by Professor the Hon Chan Wing-kwong is as follows:

Multi-disciplinary care is one of the focuses in delivering primary healthcare services and management of chronic disease, Chinese Medicine (CM) plays an important role in primary healthcare. In line with the recommendations of the Primary Healthcare Blueprint (Blueprint), the Government will further develop a community-based, family-centric, coherent and comprehensive community healthcare system based on the service model of District Health Centers (DHC). In this regard, the Government actively promotes the enhancement of CM service elements in DHCs, including encouraging CM practitioners to join as part of the community network service providers.

Currently, DHCs (including DHC Expresses) provide members with stroke rehabilitation programme and management programmes on osteoarthritic knee pain and low back pain. The operators of DHCs will establish a service network with CM practitioners and healthcare professionals as well as formulate subsidy arrangements, whereby participants in the programmes can

receive personalised CM and other healthcare services on a co-payment basis. As at the first quarter of 2024, nearly 400 CM practitioners have been engaged by DHCs as network service providers. Members with stroke, osteoarthritic knee pain and low back pain may opt for these subsidised CM services which include acupuncture and acupressure treatment according to their needs. Network CM practitioners will also provide disease prevention, health maintenance and health education, including group activities on dietary therapy. The DHCs also actively collaborate with the Chinese Medicine Clinics cum Training and Research Centres (CMCTRs), including promote or provide Tianjiu service in DHCs under collaborative model. In the past three years (as at March 31, 2024), DHCs have provided CM class activities or individualised healthcare services with an accumulative attendance of 5 700 approximately (provisional figures).

In fact, the resources in the CM sector in Hong Kong are mainly concentrated in the private sector. More than 90 per cent of CM practitioners practice in the private market, providing around 14 million attendances for CM outpatient services every year, which has established a strong service network at the community level. Through the Elderly Health Care Voucher Scheme (EHVS), the Government provides eligible Hong Kong elderly person with an annual voucher amount of \$2,000 to subsidise their use of private primary healthcare services provided by 14 categories of healthcare professions, including CM practitioners. In the past three years, the amount claimed by the elderly person for using CM services under the EHVS has increased year-on-year. In 2023, the amount claimed was nearly \$1,141 million, the second highest among the healthcare professions under the EHVS.

Furthermore, as regards Government-subsidised CM primary healthcare services, the 18 CMCTRs currently provide services for about 1.5 million attendances each year on average, of which the annual quota of Government-subsidised outpatient services has increased from about 600 000 to 800 000 since October 2023, representing a surge of over 30 per cent. The Hong Kong's first Chinese Medicine Hospital will also provide a series of Government-subsidised outpatient services when it commences operation by phases starting from the end of 2025.

The Government will continue to develop various primary healthcare services (including CM services) in accordance with the Blueprint to optimise the use of resources in both public and private CM sectors. Meanwhile, the involvement of the CM in the primary healthcare reference frameworks will be further explored by the Government with a view to unleashing the potential advantage of the CM in health management and facilitating cross-disciplinary collaboration in primary healthcare services. With a view to leveraging on the strengths and advantages of the CM, the Government will continue to explore directions and strategies for further strengthening CM primary healthcare services, such as enhancing the participation of private CM sector in subsidised services through strategic purchasing, exploring the formulation of appropriate service scope and models, enhancing cross-disciplinary collaboration, and promoting further synergies between primary healthcare services and CM services through development of relevant training, publicity and promotion, health assessment, preventive care and introduction

of new programmes with the involvement of the CM practitioners, in particular in the area of chronic disease prevention and health management.

In parallel, the Health Bureau is collaborating with the CM sector to formulate the CM Development Blueprint, in which a comprehensive review on the long-term strategies and planning for the development of the CM services will be conducted, including relevant areas such as the involvement of CM in primary healthcare and the mode of further collaboration with DHCs.