

Friday, 9 January 2026

Public Healthcare Fees and Charges Reform
Strengthens Protection for Poor, Acute, Serious and Critical Patients
Number of Waiver Recipients is 3.5 times Annual Total of Previous Year

The Hospital Authority (HA) spokesperson announced today (January 9) that in addition to the 600 000 people who have been benefiting from medical fee waivers both before and after the reform (including Comprehensive Social Security Assistance recipients, Old Age Living Allowance recipients aged 75 or above, and holders of Residential Care Service Voucher Scheme Level 0 vouchers), as of January 7, the HA has approved 49 310 medical fee waiver applications. This figure is 3.5 times of approximately 14 000 patients who received medical fee waivers in previous year, demonstrating that the enhanced medical fee reduction mechanism has significantly strengthened support for low-income families and underprivileged groups. Over the past week, many patients have benefited from the enhanced medical fee waivers mechanism, receiving immediate fee reduction when using Accident and Emergency Departments (A&E), outpatient and inpatient services.

Medical fee waivers take effect covering more than 10 000 poor patients

As an essential component of the public healthcare fees and charges reform, the HA expanded its medical fee waivers mechanism at the same time, which significantly increased the number of eligible individuals from approximately 300 000 to about 1.4 million - around 4.6 times the previous number of beneficiaries. This ensures that limited medical resources can be more precisely directed to help those most in need: the poor, acute, serious, and critical patients. As of January 7, among the 49 310 medical fee waiver applications approved by the HA, 32 249 cases have completed assessment and received formal waiver certificates valid for up to 18 months but claimed. For patients who claim to meet the medical fee waivers eligibility criteria but are unable to submit supporting documents for financial assessment, the HA has exercised flexible arrangements to approve 17 061 "conditional waivers", allowing patients to obtain immediate medical fee reductions when using public healthcare services. These patients must submit relevant documentation within three months.

After the fees and charges reform, many patients are benefited for the first time from the expanded medical fee waivers mechanism, changing from paying full fees to receiving free services. From January 1 to 7, excluding the number of Comprehensive Social Security Assistance recipients, Old Age Living Allowance recipients aged 75 or above, and holders of Residential Care Service Voucher Scheme Level 0 vouchers who can continue to use their medical fee waivers, there are over 11 200 patients benefitted from the enhanced medical fee waivers mechanism, including:

- About 500 poor patients at A&Es, who were triaged as urgent, semi-urgent and non-urgent, received medical fee waivers, triple of last year's figure;
- About 2 100 poor patients received medical fee waivers for inpatient services, 3.5 times of last year's figure; and
- About 8 600 poor patients received medical fee waivers for specialist outpatient services, six times of last year's figure.

The HA spokesperson stated, "The data concerned shows obviously that the enhanced medical fee waivers mechanism, which is newly introduced in line with the public healthcare fees and charges reform, can allocate resources more precisely to strengthen protection for poor, acute, serious and critical patients, ensuring that no patient is denied from medical care due to lack of means."

The current situation regarding patients' applications and usage of medical fee waivers aligns with the HA's projection. The HA will continue to strengthen its manpower to provide assistance to patients in need. To ensure the integrity of the medical fee assistance system and prevent abuse, the HA will conduct regular reviews of approved cases.

Number of non-urgent A&E patients reduced significantly while treatment efficiency for emergency patients improved

Regarding A&E services, from January 1 to 7, 32 147 patients attended the 18 A&Es under the HA, significantly decreased by about 11.9% of the same period last year. Among the cases, 1 807 patients were classified as critical and emergency cases, and 14 077 patients were classified as urgent cases, showing a slight increase compared to the same period last year. The remaining 16 263 patients were classified as semi-urgent and non-urgent cases, showing a significant decrease of 17.8% compared to the same period last year. Since the implementation of the public healthcare fees and charges reform, the operations of public hospital A&E services has initially met expected results, including:

- Significant decrease in average daily A&E attendances by about 11.9%;
- In the past seven days, about 1 800 critical and emergency patients exempted from A&E fees under the new fees and charges reform. These patients were required to pay the fees before the reform;
- For patients classified as urgent cases, the percentage of those being treated within 30 minutes - meeting the service pledge target - increased from 82.7% last year to 88.8%, with average waiting time reduced from 22 to 19 minutes; and
- Among the five triage categories, semi-urgent and non-urgent cases decreased by about 17.8% compared to last year.

The HA spokesperson said, "The service data of the past week shows that the fees and charges reform allowed A&Es to perform their emergency care function more effectively. A&Es can better concentrate resources, treat patients with urgent medical needs more effectively, and improve treatment efficiency for urgent cases."

The HA will continue to closely monitor the fees and charges reform as well as the overall operations of services of public hospitals, in order to ensure achieving the aim of protecting poor, acute, serious or critical patients.

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