

HOSPITAL AUTHORITY ORDINANCE (Chapter 113)

REVISIONS TO LIST OF CHARGES

In accordance with section 18(4) of the Hospital Authority Ordinance, it is hereby notified that in respect of the public hospitals set out in Schedule 1 and 2 of the Hospital Authority Ordinance, the Hospital Governing Committees and the Hospital Authority have, in exercise of their respective powers under section 18(1) and (2) of the Hospital Authority Ordinance, determined that the fees payable for hospital services as set out in S.S. No. 4 to Gazette No. 13/2003 (G.N.(S.) 44 of 2003) as amended by G.N. 4094 to Gazette No. 34/2005 and G.N. 626 to Gazette No. 4/2007 and G.N. 6864 to Gazette No. 43/2007 and G.N. 4419 to Gazette No. 28/2010 and G.N. 7020 to Gazette No. 45/2010 will be revised with effect from 12 May 2012 as follows:—

Appendix I to the amended S.S. No. 4 to Gazette No. 13/2003 (G.N.(S.) 44 of 2003)—under the provision for Public Charges—Non-Eligible Persons will be revised by replacing those fees set out in section 2.7 as follows:—

2.7 Charges for obstetrics services

- (i) (a) For patients who make a booking arrangement with the Hospital Authority for antenatal checkup and delivery for the concerned pregnancy before having a delivery in Hospital Authority hospitals, clinics or Accident and Emergency Departments, a minimum rate of \$39,000 will be charged on booking. It covers the charges for one antenatal attendance at a Hospital Authority specialist outpatient clinic, the delivery (vaginal or operative) and the first three days of hospitalization in general wards (i.e. a two-night stay) for the concerned delivery. This minimum rate is non-refundable except in those circumstances set out below where a full refund may be considered upon application subject to deduction of those charges for the hospital services which the patient has received for the concerned pregnancy:—
 - (1) in cases involving miscarriage, termination of pregnancy, stillbirth or (2) in cases involving a change in the patient's status from a Non-Eligible Person to Eligible Person after payment of this minimum rate but before the delivery.
- (b) For patients who have a delivery or have received delivery care service in Hospital Authority hospitals, clinics or Accident and Emergency Departments without prior booking arrangement as referred to in section 2.7(i)(a) for the concerned pregnancy and/or without having attended any antenatal attendance at a Hospital Authority specialist outpatient clinic during the concerned pregnancy, a minimum rate of \$90,000 will be charged. This minimum rate covers the charges for the delivery (vaginal or operative) and the first three days of hospitalization in general wards (i.e. a two-night stay) for the concerned delivery.
- (ii) Where a patient is admitted to general wards for a period exceeding the coverage, the rate of maintenance fee for general wards set out in section 2.1(b)(i) will be charged for the extra day(s).
- (iii) Other inpatient charges for public wards set out in section 2.1(b) to (d) and outpatient charges set out in section 2.2 apply separately.

11 May 2012

Anthony T. Y. WU *Chairman, Hospital Authority*