

Friday, 24 April 2026

Hospital Authority clarifies untruthful remarks regarding patients collecting medications

The Hospital Authority (HA) clarifies the untruthful remarks regarding patients collecting medications today (April 24) as follows:

Through reforming the subsidisation structure of the public healthcare service, the fees and charges reform aims to guide the public to make optimal use of healthcare resources, reduce wastage and abuse, and enhance healthcare protection for the four categories of "poor, acute, serious, critical" patients, based on the principle of 'co-payment by those who can afford and co-payment by those with mild conditions'. The reform will thereby enhance the sustainability of the healthcare system in response to challenges such as an ageing population and the increasing prevalence of chronic diseases, and serve as a safety net for all. After the implementation of the reform, the Government maintains a high level of subsidisation of up to 95 per cent for public healthcare services, with citizens co-paying a very low proportion of the cost.

The spokesperson for the HA said that, having analysed data from the pharmacies of public hospitals and clinics, the HA considers that recent allegation that patients have not collected medications following the implementation of the fees and charges reform does not accord with the facts.

The HA emphasised that, in the course of consultation and drug prescription, doctors will ascertain patients' medication profiles, including their medication habits and the quantity of medicines kept at home. In general, if patients already have a sufficient supply of medications at home, for example, long-term medications for chronic diseases or analgesics prescribed for "as needed" use, doctors will discuss with patients and advise that they do not need to collect the same medications from the pharmacy again, so as to reduce wastage caused by overstocking of medicines. For the sake of complete records, doctors will still make a prescription entry in the medical record to document that the patient has followed their medical advice, continued treatment, and has appropriate follow-up arrangements in place. Under the prevailing recording system, such prescription records are also counted under the category of unfilled prescriptions.

In the first quarter of 2026, the rate of unfilled prescriptions was 2.4 per cent, similar to the 2.2 per cent for the whole of 2025. Taking the unfilled prescription records for the first two months of 2026 as an example, about 72 per cent arose from prescriptions made by doctors for the sake of complete medical records, where patients did not actually need to collect the medications. This involved patients who, after discussion with their doctors, confirmed they had a sufficient supply of medications at home and did not need to collect them again. Of these, about 12 per cent involved "as needed" medications (such as analgesics or artificial tears).

In fact, after the implementation of the public healthcare fees and charges reform, the number of unfilled prescriptions has shown only a very slight change, and accounts for only a small proportion of the total number of medication slips processed by public hospitals. The relevant data are set out below for reference.

| | 2025 | 2026 (January to March) |
|--------------------------------------|-------------------|-------------------------|
| Number of medication slips process | About 5.4 million | About 1.457 million |
| Number of unfilled prescriptions | About 120,000 | About 35,000 |
| Percentage of unfilled prescriptions | 2.2% | 2.4% |

From observations by frontline healthcare staff and feedback from patients, the HA understands that, after the implementation of the reform, many patients now recognise that overstocking of medications at home should be avoided, particularly "as needed" medications. Some patients have also proactively requested doctors to reduce prescriptions of such medications to avoid wastage. In the first quarter of 2026, demand for "as needed" medications was about 7 per cent lower than the same period in 2025.

The spokesperson added that if patients consider they already have a sufficient quantity of medications stored at home, they may discuss with their doctors during consultation to reduce the prescription of the medications concerned. Doctors will adjust the prescription quantity according to the patient's clinical condition. The spokesperson reminded patients not to decide on their own not to collect the prescribed medications, but to collect them in accordance with the doctor's prescription to ensure the treatment achieves the expected results.

The HA emphasised that it will ensure no patient is denied from medical care due to lack of means. This fundamental principle will not change. After the implementation of the public healthcare fees and charges reform, the HA has introduced various measures to strengthen protection for "poor, urgent, serious and critical" patients. As at March 31 this year, over 220,000 applications for medical fee waivers have been approved, which is 16 times the approximately 14,000 patients granted waivers in the whole of the previous year. In addition, as at March 31 this year, 2,953 applications for the annual spending cap of \$10,000 have been approved. These figures demonstrate that the enhanced patient protection measures are yielding results and effectively safeguarding low-income persons and vulnerable groups. In response to public comments that individual patients have abstained from taking medications due to fee concerns, the HA calls on members of the public to proactively assist those genuinely facing financial difficulties to apply for fee waivers, and to work together to support the public healthcare reform.

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