

General Outpatient Clinic Public-Private Partnership Programme – Notice on Terms & Conditions Amendment

普通科門診公私營協作計劃 – 條款及細則修改通知

GOPC PPP Terms & Conditions will be amended as follows. Revised contents are underlined and removed contents are marked with strikethrough lines.

普通科門診公私營協作計劃條款及細則將作出下列修訂，經修訂內容將以底線識別，而已刪除的內容則以刪除線表示。

Clause 第 4 條	(b) To facilitate shared care between the private and the public sectors, the Project Patients agree to participate in the eHealth and give the relevant sharing consents to healthcare providers involved in the Project, and also consent to <u>and/or acknowledge that</u> their data under the Project and the Private Arrangements (as defined in paragraph 6.3(a) below) being sent to the HA under the Module and to eHealth in accordance with paragraph 8 (a).	(b) 為促進公私營醫療界別之間的共同護理，計劃病人同意參與電子健康紀錄互通系統電子健康系統及向參與本計劃的醫護提供者給予有關的互通同意，並且同意及／或確認其在本計劃及私下安排（定義見以下第 6.3(a)段）下的資料根據模組傳送給醫管局和按第 8(a)段傳送至電子健康紀錄互通系統電子健康系統。
Clause 第 5 條	(b) Except as waived or exempted under paragraph 5 <u>or as provided in paragraph 6.1(d) insofar as medications are concerned</u> , the Project Patient has to pay the same amount as if they were paying the FMC fee as currently set out in the Gazette ("Co-Payment"). The balance will be paid by the HA by way of subsidy towards the Service Fee ("Subsidy").	(b) 除第五段所列明豁免或免除者，或第 6.1(d)段所列關於藥物之收費安排外，計劃病人須支付等同醫管局按憲報現時所列支付家庭醫學診所的費用（「自付額」）。服務費的結餘將會由醫管局資助（「服務費資助金額」）。
Clause 第 6.1 條	(d) The provision of Specified Drugs, Add-on Medications (if any and subject to the maximum quantity specified by the HA) and other medications (up to 3 days) for episodic illnesses by the Private Doctors are covered under the scope of the Project. <u>A Project Patient only needs to pay for the Specified Drugs and Add-on Medications as Co-Payment. Other than the Co-Payment, no extra cost shall be incurred by a Project Patient in respect of other medications which are covered under the scope of the Project. and shall incur no extra cost to any Project Patient apart from their Co-Payment, if any.</u>	(d) 由私家醫生提供的特定藥物，附加藥物（如有而數量不多於醫管局指定的上限）及其他治理偶發性疾病（不多於三天）的藥物，均屬本計劃所涵蓋範圍。 <u>計劃病人只須就特定藥物及附加藥物支付自付額。除自付額外，計劃病人就本計劃涵蓋的其他藥物毋須支付任何額外費用。因此計劃病人除了自付額（如有）外，無需為此支付額外費用。</u>