

The First Meeting of the Fourth-term Community Care Fund Task Force

3 November 2020

Summary of Discussion

The fourth-term Community Care Fund (CCF) Task Force under the Commission on Poverty (CoP) held its first meeting on 3 November 2020. A summary of the discussion is as follows:

1. Members noted the progress of existing assistance programmes and the latest financial position of the CCF.
2. Moreover, members noted the interim evaluation report on the Subsidy for Owners' Corporations of Old Buildings (Phase III) submitted by the Home Affairs Department. The report will be submitted to the CoP for information.
3. After discussion, the CCF Task Force supported the following proposals:
 - (a) to introduce 3 specific self-financed cancer drugs, namely, Inotuzumab ozogamicin, Abemaciclib and Atezolizumab under the First Phase Programme of Medical Assistance Programmes (First Phase Programme) with effect from the fourth quarter of 2020. It was expected to benefit 520 patients in the first 12 months. The CCF Task Force also supported the addition of clinical indications of Nivolumab, a drug already covered under the First Phase Programme, and the relaxation of the clinical criteria of Ixazomib and Lenalidomide. Given the increase in the estimated financial requirement of existing drugs and this year's additional provision for subsidies to cater for the proposed introduction of drugs/clinical indications with effect from the fourth quarter of 2020 and the relaxation of clinical criteria of existing drugs, the indicative budget for subsidies under the First Phase Programme for 2020-21 was increased from \$725 million to \$893 million while the administrative costs under the original budget remained unchanged;
 - (b) the indicative budget for subsidy disbursement and administrative costs in relation to 3 medical assistance programmes (i.e. the First Phase Programme, the Subsidy for Eligible Patients to Purchase Ultra-expensive Drugs (Including Those for Treating Uncommon Disorders) and the Subsidy for Eligible Patients of Hospital Authority to Purchase Specified Implantable Medical Devices for Interventional Procedures) for 2021-22. The total budget for the 3 medical assistance programmes were \$1,447.95 million, \$318.15 million and \$52.5 million respectively;

- (c) to extend the Subsidy for Comprehensive Social Security Assistance Recipients Living in Rented Private Housing programme for 6 months until end April 2021. An amount of around \$197.1 million was originally allocated for the programme, which was then revised to the current \$230.87 million in the programme budget, requiring an additional provision of \$33.77 million. The extension was expected to benefit 13 000 households; and
 - (d) to continue implementing the Pilot Scheme on Support for Elderly Persons Discharged from Public Hospitals After Treatment (the Pilot Scheme) under the current mode of operation from February to end September 2021, and to extend the Pilot Scheme under a new operation mode from 1 October 2021 to end September 2023. An amount of \$225.9 million was originally allocated for the Pilot Scheme, which was then revised to the current \$234.18 million in the budget, involving an additional provision of \$8.28 million.
4. The above proposals will be submitted to the CoP for consideration.