

Chronic Disease Co-Care Pilot Scheme Enrolment Guide

1. Enrolment Criteria

A registered medical practitioner may enrol in the Chronic Disease Co-Care Pilot Scheme (“**CDCC Pilot Scheme**”) if he/she:

- (a) is practising in:
 - (1) a “**private healthcare facility**” (being a private healthcare facility as contemplated in the Private Healthcare Facilities Ordinance (Cap. 633 of the laws of Hong Kong) (“**PHFO**”)) in respect of which (i) the business has been registered under the Business Registration Ordinance (Cap. 310 of the laws of Hong Kong) and (ii) a licence to operate a private healthcare facility has been issued under the PHFO; or
 - (2) an “**exempted clinic**” (“exempted clinic” having the meaning given to the term in the PHFO); or
 - (3) a “**clinic**” (“clinic” having the meaning given to the term in the Medical Clinics Ordinance (Cap. 343 of the laws of Hong Kong) (“**MCO**”) registered under the MCO.
- (b) is registered under Section 14 or Section 14A of the Medical Registration Ordinance (Cap. 161 of the laws of Hong Kong) and holds a valid practising certificate;
- (c) has enrolled in the Electronic Health System (“**eHealth**”); and
- (d) is listed in the Primary Care Directory or registered under the Primary Care Register as maintained by the Government.

2. Enrolment in the CDCC Pilot Scheme

A registered medical practitioner should follow the following procedures to submit an application for enrolment in the CDCC Pilot Scheme:

- (a) electronically complete the online application for enrolment in the CDCC Pilot

Scheme completed on the eHealth platform online (“**Application Form**”) (please click “Administration” and then select “CDCC Pilot Scheme - Doctor Enrolment”); and

- (b) provide copies of duly signed and completed forms and supporting documents as specified in Clause 3 below to the Government for processing the application within thirty (30) days from the date of submission of Application Form set out in (a) above by email to cdccdoctor@healthbureau.gov.hk or by fax to 3427 9359.

Before filling in the electronic Application Form, a registered medical practitioner is recommended to:

- (a) study and understand the following documents accessible at the CDCC Pilot Scheme website www.primaryhealthcare.gov.hk/cdcc:

- (1) Covering Notes for Private Doctor’s Application to Enrol in the Chronic Disease Co-Care Pilot Scheme;
- (2) this Chronic Disease Co-Care Pilot Scheme Enrolment Guide;
- (3) Chronic Disease Co-Care Pilot Scheme Terms and Conditions of Agreement for Private Doctors (“**T&C**”);
- (4) Undertaking and Declaration; and
- (5) Personal Information Collection Statement.

- (b) have the following information at hand:

- (1) his/her personal particulars;
- (2) his/her professional registration number assigned by the Medical Council of Hong Kong (“**MCHK**”);
- (3) information such as the business registration of the clinic(s) at which he/she is working;

- (4) information such as the bilingual address, telephone number of the clinic(s) to be named in the Application Form at which the registered medical practitioner proposes to provide the services of the CDCC Pilot Scheme; and
- (5) information such as bank account number regarding the nominated bank account(s) for receipt of Government subsidy for services provided under the CDCC Pilot Scheme (**“Government Subsidy”**).

3. Checklist

Below is a checklist of the supporting forms and documents for submission via email:

- ☐ a certified true copy of a practising certificate issued by the Registrar of Medical Practitioners valid as the date of the registered medical practitioner’s lodging of his/her application for enrolment in the CDCC Pilot Scheme (**“Applicant Registered Medical Practitioner”**);
- ☐ a duly signed and completed Authority for Payment to a Bank;
- ☐ a certified true copy of bank correspondence showing the bank name, bank account number and name of the account, issued within six (6) months immediately before the date of the lodging of the Application Form by the Applicant Registered Medical Practitioner;
- ☐ a certified true copy of a Business Registration Certificate valid as the date of the Applicant Registered Medical Practitioner’s lodging of his/her application for enrolment in the CDCC Pilot Scheme in respect of each of the clinic(s) at which the Applicant Registered Medical Practitioner intends to provide services under the CDCC Pilot Scheme named in the Application Form;
- ☐ (at the option of the Applicant Registered Medical Practitioner) a Relieving Doctor Enrolment Form for designating a “Relieving Doctor” as contemplated in Clause 3.1(c) and (d) of the T&C;
- ☐ (at the option of the Applicant Registered Medical Practitioner) a Clinic Administrator Enrolment Form for notifying the Government of the person nominated to assist the Private Doctor with administration tasks; and

- ☐ (at the option of the Applicant Registered Medical Practitioner) a Request Form for the document “Reference Pricing Information of Specified Drugs” being a document setting out the price of specified drugs under the CDCC Pilot Scheme (see Clause 7 of the T&C).

Please note that:

- (a) separate “Authority for Payment to a Bank” should be used for **each** bank account; and
- (b) the application may not be processed by the Government if the registered medical practitioner fails to provide all information and documents as required by the Government.

For enquiries, please contact the CDCC Pilot Scheme Hotline at 2157 0500.