

傳真：2541 3352 (共 3 頁)

食物及衛生局  
香港花園道美利大廈 19 樓

敬啟者：

關於：醫療改革諮詢文件

就上述文件，現附上東涌北 Patrick Tam 的書面意見，請細閱並考慮其中建議。

而就貴局的醫療改革建議，本人並不贊同強制醫療供款，因為現時的在職人士，已經需要從薪金中支付百分之五作為強積金，如果再加上百分之五或甚至百分之十的強醫金，實在加重在職人士的負擔。

以現時的中年(45 歲以上)的中產人士而言，在過去工作的二、三十年間，繳納了入息稅及其他稅款，以為在退休後可以享用政府的醫療服務，忽然間，卻又需要以供款保障日後的醫療支出，對這些人士而言，實在不公平。

就此，本人建議，如果他日政府落實需要供強醫金的政策，請考慮從納稅人過去所繳納的稅款中，留取百分之五至十，作為這些人士個人供款戶口的基數。例如某人在過去曾經繳納入息稅共 100 萬，則政府在該人的戶口注入 5 萬至 10 萬作為基數，讓中年的中產人士毋須為自己日後的醫療支出再從重供款。

如就本人的建議，有任何問題，請隨時與本人聯絡。

此致！



林有嫻 敬上  
2008 年 6 月 6 日

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### Opinion on Gov't Healthcare Reform Consultation 收件匣

☆ TAM Yu Ken Patrick 顯示詳細資料 5月4日 ◀ ▶ 回覆

Dear District Councilor,

I learn from my management office's notice that we can submit opinion to this email address for your consolidation & feedback to relevant Gov't departments. I hope my simple-minded opinion would be heard & serious considered when the Gov't plans their Healthcare reform.

Being seen as a middle-class, I have already got a comprehensive portfolio of personal medical insurance policies in force, let alone additional medical insurance coverage by the employer. Therefore, it's obvious that the Mandatory Healthcare Plan (MHP) must offer IMPROVED MEDICAL COVERAGE at REDUCED PREMIUM FEES as a whole to me.

Specifically, the MHP must offer policy transfer/ transition arrangement for Severe Sickness/ Crisis plans, Hospitalization plans, Out-patient plans, etc. with ALL insurance underwriters in Hong Kong.

Regarding the various approaches to the MHP, medical insurance is something we have to exploit, it not only takes care of saving money for handling future medical needs of an individual, it also efficiently pools the money of the whole population & takes advantage of probability to effectively drive down the monthly contribution of an individual. Therefore, saving-only plans are not good ones.

Completely relying on personal medical insurance is also not a good option. That doesn't help the poors, although I'm not seen as one of those. That may also keep the insurance premium fee high.

I see one important reason to adopt INSURANCE + SAVINGS approach. Most personal medical insurance plans generally cease by the age of 65. The savings portion not only can help pay the premium after one retires, it also

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✉ Yau Han Lam

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enables other innovative ways of extending the insurance coverage to beyond age 65.

Lastly, more details, esp. MHP and its relation to personal medical insurance plans, must be well set out before the public should be asked to decide/ opt for one. The general approaches are too vague right now. Details implementing different approaches can make a whole lot of differences.

Thank you for your work on funneling our opinion to the Gov't!

Regards,

Patrick Tam.

↩ 回覆 → 轉寄 邀請 TAM 使用 Gmail

★✉ Yau Han Lam 寄給 py 顯示詳細資料 5月5日 ↩ 回覆

Dear Mr. Tam,

Thank you very much for your e-mail and constructive opinions. Your opinions and other residents' opinions will be sent to the Government for their consideration.

Thanks again.

Ophelia

2008/5/4, TAM Yu Ken Patrick

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