CDCC Participant Enrolment in Family Doctor's Clinic Step-by-step Guide

Overview of Scheme Participant Enrolment Workflow

醫健通 eHealth 香港特別行政區政府 HKSAR GOVT

Login eHRSS to access eHealth+ and [Participant Enrolment]

1 **Check Participant Eligibility***
via CDCC IT system

2 Participant **read T&C** for eHRSS, DHC & CDCC
(Hardcopies as sent to clinic)

*Clinic staff shall make sure:
- Obtain <u>explicit consent</u> from Applicant to collect their personal information and to pass that information to eHRSS for checking against eHealth database, to see if they have registered eHRSS and/or given indefinite sharing consent.
- Ask Applicant for any known DM/HT history

3 **Obtain Consent**

<u>Insert HKID</u> or input other document information

- <u>eHRSS Express Registration & sharing consent</u> with login HCP (clinic) ———— SMS To participant

- <u>DHC Express Registration & sharing consent</u> with DHC ———— SMS To participant

- <u>CDCC enrolment</u> and <u>pair Family Doctor</u> ———— SMS To participant

Detail Steps

1

Login Electronic Health Record Sharing System (eHRSS) to access eHealth+

2

Click [Participant Enrolment]

For Applicant who is a holder of Certificate of Exemption (e.g. the aged, the blind or the infirm) instead of Identity Card:
➢ Family Doctor & clinic staff may refer to DHC/ DHCE for follow-up on participant enrolment

3

eHealth Services > Enrolment

Please select

◉ Chronic Disease Co-Care Pilot Scheme
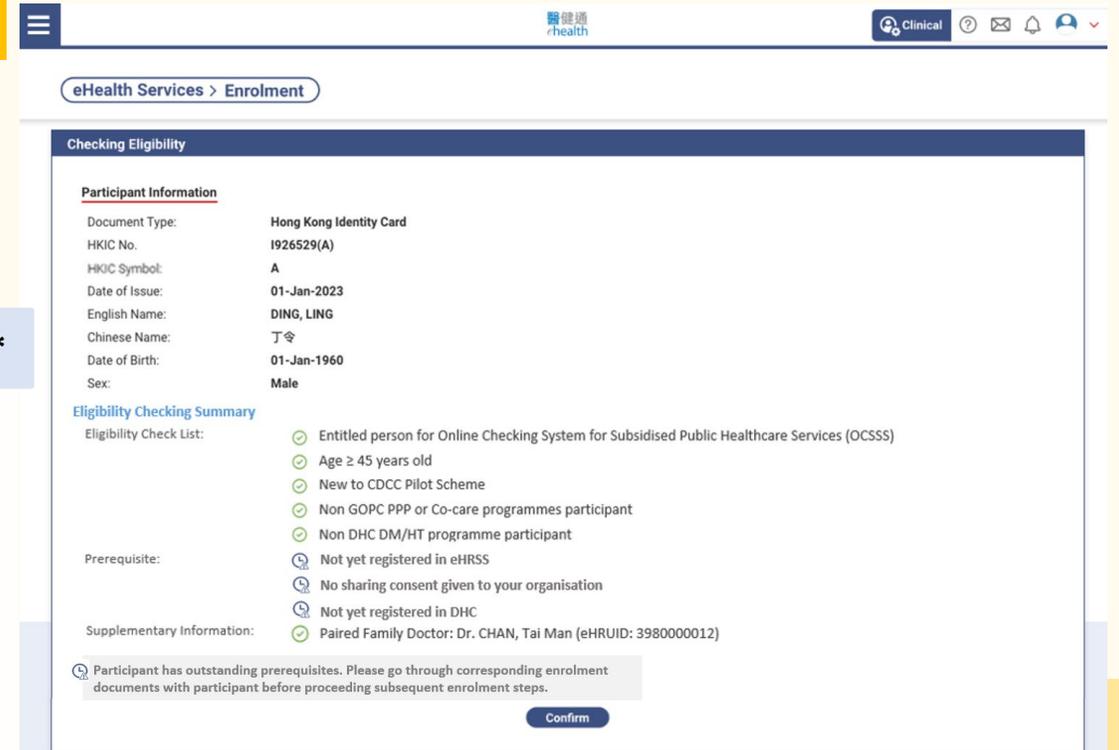
◉ DM & HT Screening Checking Eligibility

< Back   Start enrollment

Select [CDCC Pilot Scheme (DM & HT Screening)]

IT System will check for participant eligibility*

*Clinic staff shall make sure:
- Obtain explicit consent from Applicant to collect their personal information and to pass that information to eHRSS for checking against eHealth database, to see if they have registered eHRSS and/or given indefinite sharing consent.
- Ask Applicant for any known DM/HT history

eHealth Services > Enrolment

Checking Eligibility

Participant Information

Document Type:	Hong Kong Identity Card
HKIC No.	I926529(A)
HKIC Symbol:	A
Date of Issue:	01-Jan-2023
English Name:	DING, LING
Chinese Name:	丁令
Date of Birth:	01-Jan-1960
Sex:	Male

Eligibility Checking Summary

Eligibility Check List:
- ✓ Entitled person for Online Checking System for Subsidised Public Healthcare Services (OCSSS)
- ✓ Age ≥ 45 years old
- ✓ New to CDCC Pilot Scheme
- ✓ Non GOPC PPP or Co-care programmes participant
- ✓ Non DHC DM/HT programme participant

Prerequisite:
- ⊘ Not yet registered in eHRSS
- ⊘ No sharing consent given to your organisation
- ⊘ Not yet registered in DHC

Supplementary Information:
- ✓ Paired Family Doctor: Dr. CHAN, Tai Man (eHRUID: 3980000012)

⊘ Participant has outstanding prerequisites. Please go through corresponding enrolment documents with participant before proceeding subsequent enrolment steps.

Confirm

Detail Steps

4 Participant **read T&C** for eHRSS, DHC & CDCC (Hardcopies as sent to clinic)

*Family Doctor could opt for checking eHRSS record in eHR viewer for the DM/HT history before the CDCC enrolment

5 eHealth Services > Enrolment

Please select

⦿ Chronic Disease Co-Care Pilot Scheme

⦿ DM & HT Screening Checking Eligibility

< Back   Start enrollment

6 eHealth Services > Enrolment

① Participant Information — ② eHRSS Registration — ③ DHC Membership — ④ Programme — ⑤ Confirmation

Please select enrolment method

Method 1 — Smart ID

Step 1 - Select the Sex

HKID Card Symbol: [- ∨] What is HKIC Symbol?

Sex: ○ Male ○ Female

Step 2 - Click the following button to scan smart ID

Chip facing up

Scan Now

OR

Method 2 — Input Other Document Information

Document Type : [HKIC ∨]

HKIC No. : [   ] ([ ])

HKID Card Symbol: [A ∨] What is HKIC Symbol?

Date of Issue: [DD] - [MMM] - [YYYY]

Full name: [Surname] [Given Name]
☐ Single Name

Date of Birth: [DD] - [MMM] - [YYYY]

Sex: ○ Male ○ Female ○ Unknown

< Back   Next

Detail Steps

7   Input Language, Participant Mobile Contact No., and tick the Disclaimer

(eHealth Services > Enrolment)

✔ Participant Information —— ② eHRSS Registration —— ③ DHC Membership —— ④ Programme —— ⑤ Confirmation

eHRSS Registration

ⓘ Participant has not registered in eHRSS yet. Please register eHRSS now to proceed next step.

Registration Date: **14-Nov-2023**

Communication Language: ○ Chinese ● English

Mobile Contact No.: `90611234`

(Please provide a 8 digits mobile number which can receive HK SMS for registration)

eHRSS Sharing Consent:

HCP ID	Service Provider	Terms of Sharing
3980000000	CHAN TAI MAN CLINIC	Indefinite Sharing Consent

☑ I confirm the healthcare recipient has expressly declared and confirmed that:
a. he/she has read and understood the Participant Information Notice and the Personal Information Collection Statement of eHealth
b. he/she consents to register with eHealth, which enables authorized healthcare providers to access and share the healthcare recipient's eHealth records for healthcare purposes.
c. he/she consents to give sharing consent (indefinite period) to the above healthcare provider.

‹ Back   Next ›

Input 3 items

1. Language
2. Mobile no.
3. Disclaimer

Confirmation of Giving Indefinite Sharing Consent

Please click "Yes" to confirm giving indefinite sharing consent to the healthcare provider for participant.
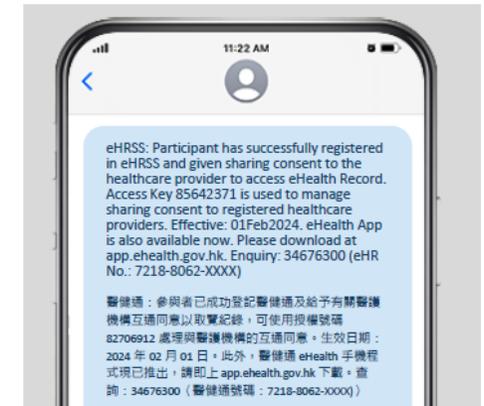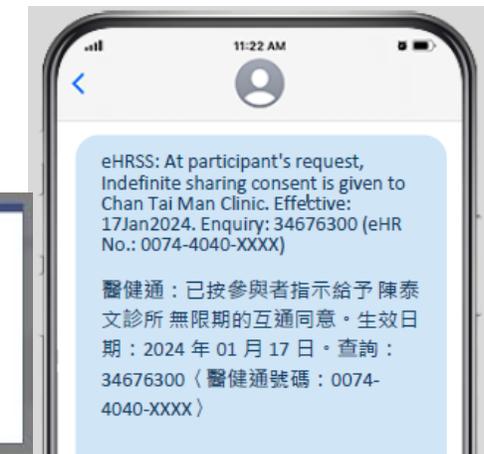
Yes   No

Scheme Participant receive SMS:
- For successful eHRSS registration

eHRSS: Participant has successfully registered in eHRSS and given sharing consent to the healthcare provider to access eHealth Record. Access Key 85642371 is used to manage sharing consent to registered healthcare providers. Effective: 01Feb2024. eHealth App is also available now. Please download at app.ehealth.gov.hk. Enquiry: 34676300 (eHR No.: 7218-8062-XXXX)

醫健通：參與者已成功登記醫健通及給予有關醫護機構的互通同意以取覽紀錄。可使用授權號碼 82706912 處理與醫護機構的互通同意。生效日期：2024 年 02 月 01 日。此外，醫健通 eHealth 手機程式現已推出，請即上 app.ehealth.gov.hk 下載。查詢：34676300〈醫健通號碼：7218-8062-XXXX〉

- For eHRSS sharing consent to HCP (clinic)

eHRSS: At participant's request, Indefinite sharing consent is given to Chan Tai Man Clinic. Effective: 17Jan2024. Enquiry: 34676300 (eHR No.: 0074-4040-XXXX)

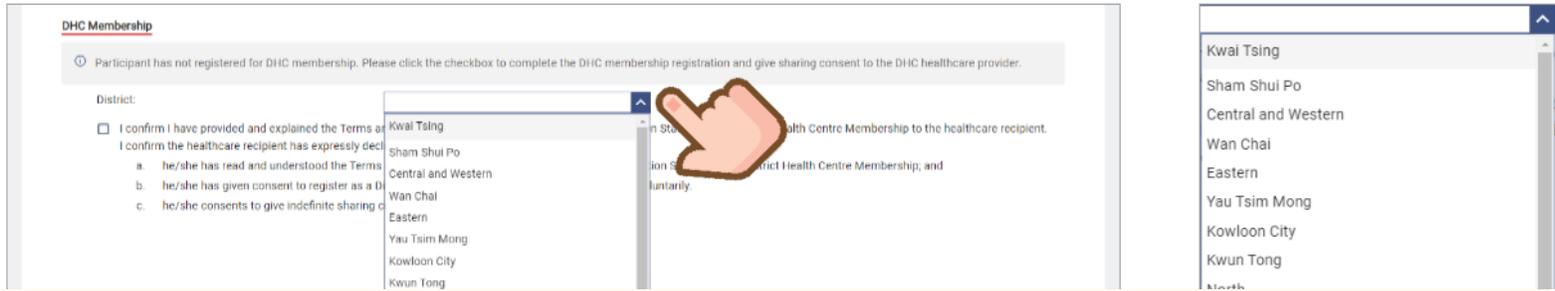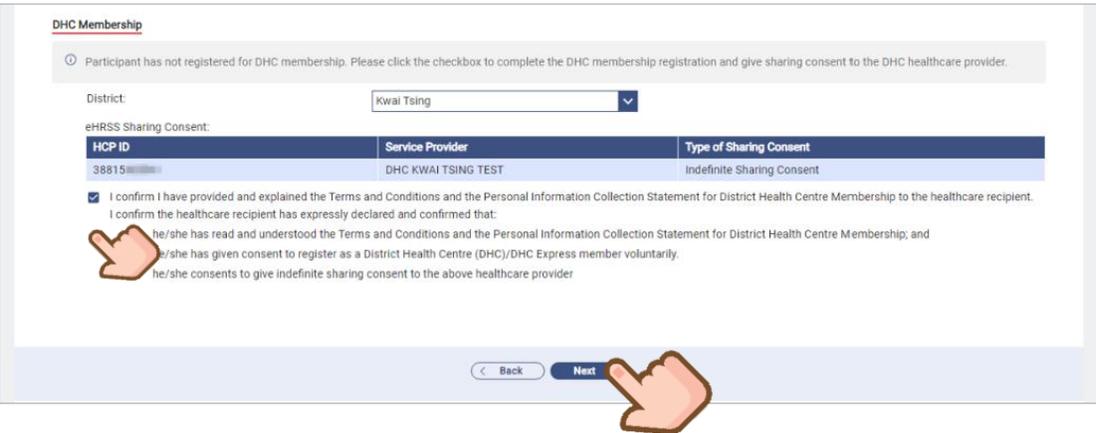醫健通：已按參與者指示給予 陳泰文診所 無限期的互通同意。生效日期：2024 年 01 月 17 日。查詢：34676300〈醫健通號碼：0074-4040-XXXX〉

Detail Steps

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a DHC districts can be selected from drop-down menu.

b Check the checkboxes ☑ to register the DHC membership to the selected district and build indefinite Sharing Consent to selected DHC. Click [Next].
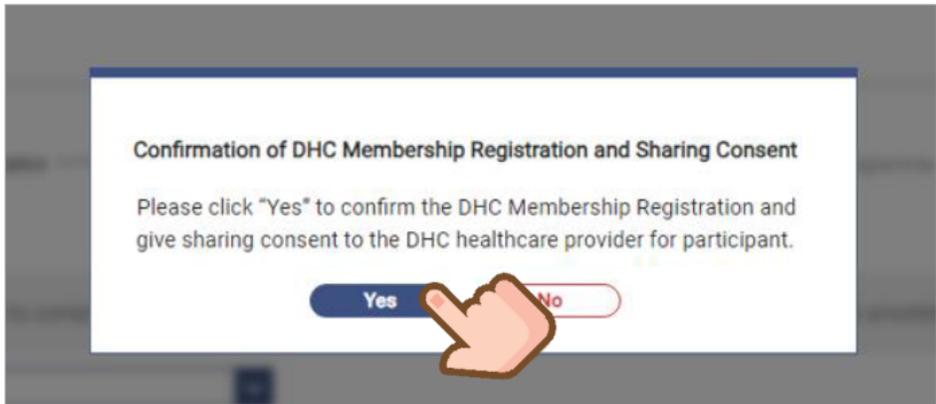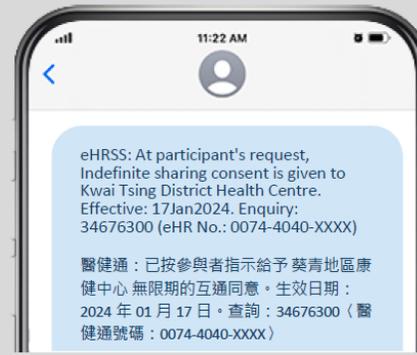
Detail Steps

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c Click [Yes] for confirmation of the DHC membership registration and building Sharing Consent.

Confirmation of DHC Membership Registration and Sharing Consent

Please click "Yes" to confirm the DHC Membership Registration and give sharing consent to the DHC healthcare provider for participant.

Yes   No

d DHC registration is done successfully. Click [Next] to proceed.

DHC Membership

Participant's DHC membership registration and sharing con...

DHC Membership No.:   24100...
Registration Date: 08-Feb-2024
District: Kwai Tsing
Paired Family Doctor: No paired Family Doctor
eHRSS Sharing Consent:

HCP ID	Service Provider	Type of Sharing Consent
3861542584	DHC KWAI TSING TEST	Indefinite Sharing Consent

I confirm I have provided and explained the Terms and Conditions and the Personal Information Collection Statement for District Health Centre Membership to the healthcare recipient;
I confirm the healthcare recipient has expressly declared and confirmed that:
  a. he/she has read and understood the Terms and Conditions and the Personal Information Collection Statement for District Health Centre Membership; and
  b. he/she has given consent to register as a District Health Centre (DHC)/DHC Express member voluntarily.
  c. he/she consents to give indefinite sharing consent to the above healthcare provider.

Back   Next

✓ Participant's DHC membership registration and sharing consent is given successfully.

District Health Centre: Welcome to the Kwai Tsing District Health Centre. Your application for membership is accepted. Enquiry: 1878222 (eHR No.: 7095-8506-XXXX)

地區康健中心：歡迎您登記成為葵青地區康健中心會員，閣下的申請已被接納。查詢：1878222〈醫健通號碼：7095-8506-XXXX〉

eHRSS: At participant's request, Indefinite sharing consent is given to Kwai Tsing District Health Centre. Effective: 17Jan2024. Enquiry: 34676300 (eHR No.: 0074-4040-XXXX)

醫健通：已按參與者指示給予 葵青地區康健中心 無限期的互通同意。生效日期：2024 年 01 月 17 日。查詢：34676300〈醫健通號碼：0074-4040-XXXX〉

Sample 1 DHC Membership registration

Sample 2 eHRSS sharing consent to DHC

Detail Steps

10 Pair Family Doctor & Confirm Enrolment

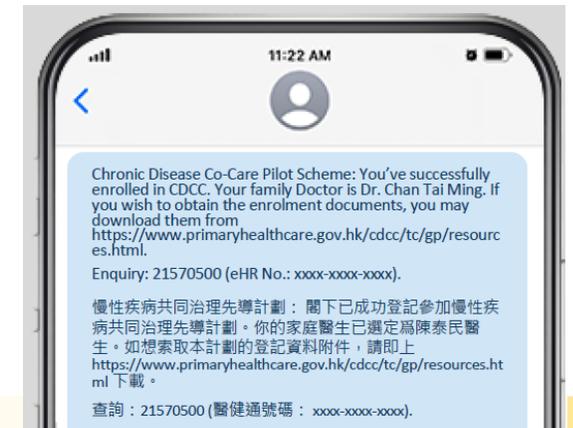**If enrollment done by Family Doctor**
• **Default as the Family Doctor**

If enrollment done by Clinic assistant
• **Select from a list of Family Doctor under the same healthcare provider (HCP)**

eHealth Services > Enrolment

✓ Participant Information —— ✓ eHRSS Registration —— ✓ DHC Membership —— ④ **Programme** —— ⑤ Confirmation

Programme

Chronic Disease Co-Care Pilot Scheme	
Enrolment Date:	2213453453
Programme:	**DM & HT Screening**
Family Doctor:	CHAN TAI MING(eHRUID:3980000012)

Healthcare Service Location Providing CDCC Service:
CHAN TAI MAN CLINIC (HCP ID: 3980000000)
- VHC4 HOSPITAL 1 (HCI ID: 8267124897)

Tick the checkbox to confirm enrolment

I have checked the eligibility of the healthcare recipient, including:

☑ I confirm the healthcare recipient has met all of the eligibility criteria of the CDCC Pilot Scheme.
I confirm I have provided and explained the Participant Information Notice, Information Pamphlet and the Personal Information Collection Statement under the CDCC Pilot Scheme to the healthcare recipient.
I confirm the healthcare recipient has expressly declared and confirmed that:
a. he/she has given consent to enrol in the CDCC Pilot Scheme voluntarily;
b. he/she has read and understood the Participant Information Notice and Information Pamphlet for the CDCC Pilot Scheme, each of which may be updated from time to time;
c. he/she has read and understood the Personal Information Collection Statement and given his/her consent to the Government for its, and its agents' and employees' use of his/her personal data and any information relating to the CDCC Pilot Scheme by the Government for purposes as set out therein; and
d. all information provided by the healthcare recipient in support of his/her application for enrolment in the CDCC Pilot Scheme is true and correct.

‹ Back   Next

Scheme Participant receive SMS after successful CDCC Enrollment

11:22 AM

Chronic Disease Co-Care Pilot Scheme: You've successfully enrolled in CDCC. Your family Doctor is Dr. Chan Tai Ming. If you wish to obtain the enrolment documents, you may download them from https://www.primaryhealthcare.gov.hk/cdcc/tc/gp/resources.html.
Enquiry: 21570500 (eHR No.: xxxx-xxxx-xxxx).

慢性疾病共同治理先導計劃： 閣下已成功登記參加慢性疾病共同治理先導計劃。你的家庭醫生已選定爲陳泰民醫生。如想索取本計劃的登記資料附件，請即上https://www.primaryhealthcare.gov.hk/cdcc/tc/gp/resources.html 下載。

查詢： 21570500 (醫健通號碼： xxxx-xxxx-xxxx).

SMS Sample of enrolment to CDCC Pilot Scheme

11 Confirmation

Once [Confirm] is clicked, CDCC DM & HT Screening enrolment is completed.

If you want to print the Appointment Slip:

Detail Steps

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Login by Family Doctor, three navigation of action buttons will be displayed.

Confirmation

⊙ Enrolment completed successfully.

Participant Information

Personal Information

Document Type:	Hong Kong Identity Card
HKIC No.:	T242
HKIC Symbol:	A
Date of Issue:	01-Feb-2012
English Name:	TANG, TWO
Chinese Name:	鄧二
Date of Birth:	01-Jan-1960
Sex:	Male

[Close] [New Enrolment] [Go to Consultation]

eHealth Service landing

Participant Enrolment

Please select a scheme

⊙ Chronic Disease Co-Care Pilot Scheme

⊙ DM & HT Screening   **Check eligibility**

○ Management   **Check eligibility**

[Back] [Start enrolment]

Health Profile

Detail Steps

Login by Clinic Admin, two navigation of action buttons will be displayed.