# Chronic Disease Co-Care Pilot Scheme – Doctor-Patient Partnership Incentive Mechanism

# Target Parameters for Scheme Participants with Hypertension and Pre-Diabetes

#### **Important Information:**

- The Incentive calculation will start from the participant's second Participant Programme Year onwards.
- Participants must achieve 2 of the 3 parameters listed below to meet the target.

## 1. Regular Self-Monitoring of Blood Pressure

Please develop the habit of regularly measuring your blood pressure at home and <u>upload</u> the results to the eHealth App at least once per month\* to enable healthcare professionals to continuously monitor your condition.

## 2. Regular Consultation

To enable regular monitoring of your condition by your Family Doctor, please <u>visit your</u> Family Doctor at least once per quarter within the Participant Programme Year\*.

#### 3. Participation in Patient Empowerment Programme

Please timely <u>attend the Patient Empowerment Programme arranged by the District Health</u>
<u>Centre and complete the post-programme assessment within the Participant Programme</u>
Year\* to enhance your ability to manage your own health.

**Upon achievement of target parameters**, participants will enjoy a deduction of medical consultation co-payment fee up to the Government recommended Medical Consultation Co-Payment amount (currently \$150) for the first subsidised visit in the following Participant Programme Year. If the co-payment fee is equal to or less than the Government recommended co-payment amount, no co-payment is required for that subsidised consultation. If the co-payment fee exceeds the Government recommended Co-Payment amount, only the balance after deducting this amount from the total co-payment fee is required for that subsidised consultation.

\*For frequently asked questions regarding the target parameters and incentive calculations, please refer to the following webpage:

https://www.primaryhealthcare.gov.hk/cdcc/en/gp/fag.html

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